

National Network for Early Childhood



*National
Plan for
Early
Childhood*

National Plan for Early Childhood

2010 - 2022 | 2020 - 2030

*Prepared by the National Network for Early Childhood
Approved by CONANDA – December 2010
Revised and updated in 2020*




Brasilia (DF), 20 June 2020

*“No, I’m not on a new path.
The way I walk is what’s new.”*

(Thiago de Mello)






***“Children are the seed of
peace or violence in the
future, depending on how they
are cared for and stimulated”***

(Zilda Arns Neumann: final conference, Haiti, 2010)

“The Inter-American Court of Human Rights (IACHR) recommends that States adopt and apply a national children’s policy geared to the effective implementation of the international obligations taken on by the State in respect of children’s rights, and see to it that it has foreseeable and sufficient resources, and is based on a solid and reliable assessment of the situation. The national children’s policy should be set forth in the framework document that establishes the strategic direction of the State in the medium and long term when it comes to assuring effective observance of the human rights of children; it should become a matter of State policy towards children.”

(2017 OAS Report: Fulfillment of Children’s Rights)





This National Plan is tied together by a full-throated defense of early childhood, by solid technical arguments and by multifaceted analyses of numerous organizations with extensive experience in early childhood. But, above all, by a profound love for the sources and origins of the human being and by the conviction that to care for early childhood is to care for all of society. To safeguard early childhood's present moment is to provide the past and the future with a present tense that redefines the representation of times gone by and expands the horizon of times still to come.

All young children must be nurtured in safe and caring environments that allow them to become healthy, alert, and secure and be able to learn. The past decade has provided more evidence that good quality early childhood care and education, both in families and in more structured programmes, have a positive impact on the survival, growth, development, and learning potential of children.

Such programmes should be comprehensive, focusing on all of the child's needs and encompassing health, nutrition, and hygiene as well as cognitive and psycho-social development. They should be provided in the child's mother tongue and help to identify and enrich the care and education of children with special needs. Partnerships between governments, NGOs, communities, and families can help ensure the provision of good care and education for children, especially for those most disadvantaged, through activities centred on the child, focused on the family, based within the community, and supported by national, multi-sectoral policies and adequate resources.

Governments [...] have the primary responsibility of formulating early childhood care and education policies within the context of national Education For All plans, mobilizing political and popular support, and promoting flexible, adaptable programmes for young children that are appropriate to their age and not mere downward extensions of formal school systems.

(UNESCO: Framework for Action – Dakar, 2000)




A Brazil Fit for Children

In May 2002, the 27th Special Session of the United Nations General Assembly approved a resolution entitled A World Fit for Children, in which the Heads of State and Government and representatives of the participating countries pledged to work toward building a more just world for children. Brazil was among the resolution's signatories. That commitment begins here: a more just Brazil for children.

“We, the heads of State and Government and representatives of States participating in the special session of the General Assembly on children, reaffirming our commitment to the purposes and principles enshrined in the Charter of the United Nations, are determined to seize this historic opportunity to change the world for and with children.

Accordingly, we reaffirm our commitment to complete the unfinished agenda of the World Summit for Children and to address other emerging issues vital to the achievement of the longer-term goals and objectives endorsed at recent major United Nations summits and conferences:

- 1. Put children first.*
 - 2. Eradicate poverty – invest in children.*
 - 3. Leave no child behind.*
 - 4. Care for every child.*
 - 5. Educate every child.*
 - 6. Protect children from harm and exploitation.*
 - 7. Protect children from war.*
 - 8. Combat HIV/AIDS (protect children).*
 - 9. Listen to children and ensure their participation.*
 - 10. Protect the Earth for children.”*
- 

The National Network for Early Childhood would like to thank artist Anna Cunha for the sensitive and conscientious illustrations that accompany this document. The images, graciously provided by the Minas Gerais-based artist, interlace the beauty of care with policy actions and cast a tender light on rights and, in this way, weaving, as in life, prose and poetry.

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Foreword

The National Plan for Early Childhood (PNPI) is a technical and policy document designed to inform the decisions, investments, and actions adopted to protect and promote the rights of young children. The focus given to the first six years of life is consistent with the significance of this period to the entire life of the human being and serves to ensure the rights of the child are realized in accordance with the specificity and priority mandated by the 1988 Brazilian Federal Constitution (article 227).

The National Network for Early Childhood (RNPI)¹ formulated this Plan in 2009-2010 to run through 2022. The time horizon was selected to coincide with Brazil's bicentennial, while also including an additional associated objective: that when Brazil celebrated its 200th year as an independent, self-governing nation, with the sovereign power and responsibility to determine its own destiny and care for its people, it would have ensured all children the means to live a full childhood and develop their immeasurable human potential.

In 2010, we believed it imperative – and, sadly, still do today – that changes be enacted to the structures and tangible life and development conditions of millions of Brazilian children; that diligent and responsible focus be given to forgotten or ignored childhoods; that equity be promoted to reduce the disparities in access to health, nutrition, education and culture; that the lives of children be protected and valued regardless of economic status, ethnicity, race or geographic territory; that all children be ensured basic sanitation and a healthy environment...For neglecting, whether by omission, ignorance or dereliction, the time of childhood is a crime against children and society. Against children, because it denies them their fundamental rights; against society, because it perpetuates the wounds of a society disfigured by infant mortality, hunger, violence, abandonment, exclusion, racism, contempt, and disregard for the lives of disabled, Black, Indigenous and *Quilombola*² children and those from rural and traditional communities and populations.

The National Plan for Early Childhood was developed with the broad participation of society, as expressly mandated by article 227, paragraph 7, of the 1988 Brazilian Federal Constitution, which provides for *popular participation, through representative organizations, in policy formulation and oversight activities at all levels*. Among the organizations participating in the development of the National Plan for Early Childhood were the component entities of the National Network for Early Childhood, institutions, foundations and research centers, scholars, experts, *frontline* technicians, and professionals in the field of children's rights. In 2010, the National Network for Early Childhood was composed of 70 members, representing civil society, government, the private sector, as well as other established networks in Brazil and United Nations organizations (UNICEF, UNESCO and PAHO) dedicated to early childhood. Today, the National Network for Early Childhood has 250 affiliated organizations.

When the National Plan for Early Childhood was opened to public comment, a sizable number of suggestions were submitted. Following its approval by the National Council for the Rights of the Child and Adolescent (CONANDA)³ in December 2010, the document was introduced under

¹ *Rede Nacional Primeira Infância*.

² *Quilombolas* refer to the surviving descendants of communities established by fugitive slaves (the Quilombos) between the 16th century and 1888 (the year slavery was abolished in Brazil).

³ *Conselho Nacional dos Direitos da Criança e do Adolescente*.

the *umbrella* of the Ten-Year Human Rights Plan for Children and Adolescents⁴ to serve as a framework for addressing the specificities of early childhood.

Between the second half of 2019 and first half of 2020, the National Plan for Early Childhood was reviewed and updated by means of the participatory process described above. It was also broadened to reflect the expanding scope of the National Network for Early Childhood and the inclusion of the Brazilian Judiciary in the studies, discussions and proposals pertaining to early childhood. This culminated in the National Pact on Early Childhood,⁵ an effort led and coordinated by the National Justice Council (CNJ).⁶ The chapter titled *The Justice System and the child* examines the participatory process through which additional in-depth analysis and proposals on children and culture were offered. Also stimulating broader and more diversified social engagement was the decision to expressly include children in the Sustainable Development Goals (SDG) and the growing interest of the business community for the benefits accruing to employees from the delivery of comprehensive care to children, beginning in pregnancy and extending to childbirth and the first years of life.

The Early Childhood Legal Framework (MLPI),⁷ Law 13257, dated 8 March 2016, serves as the point of reference and framework document for the updated National Plan for Early Childhood. The National Plan for Early Childhood preceded the Legal Framework by six years, and the experience of both its development and implementation served as inspiration for a number of the MLPI's provisions. However, because the Early Childhood Legal Framework represents a more advanced stage in our conception of integrated, multi-sectoral public policies on integral and integrated protection for children, this updated edition more closely aligns the PNPI with the proposals set forth in the Early Childhood Legal Framework and serves as an operating design of the statute's provisions. In fact, the recurring intersection of these two markers has ensured that they continue walking hand in hand through time.

The Plan attaches prime importance to conceiving the child and childhood in their singular and collective dimensions alike an eye to the diversity of children and the diversity of childhoods. Understanding the child as a person in the context of their full dignity, as a subject of rights, is the foundational element for defining the guidelines, goals and targets of each right prescribed in the 1988 Brazilian Federal Constitution, the Convention on the Rights of the Child, the Statute on the Child, and Adolescent (ECA),⁸ the Early Childhood Legal Framework and the sector-specific laws on education, health, assistance, culture, and other pertinent issue areas.

The National Plan for Early Childhood converges with – and, in many cases, complements in terms of duration and specific actions for early childhood – other plans and programs. These include: the National Education Plan (PNE) (2014-2024), the National Health Plan, the National Social Assistance Plan, the National Culture Plan, the National Plan to Combat Sexual Violence against Children and Adolescents, the National Plan to Promote, Protect and Defend the Right of Children and Adolescents to Family and Community Coexistence and the Action Plan for the Implementation of the 2030 Agenda – SDG).⁹

⁴ *Plano Decenal de Direitos Humanos de Crianças e Adolescentes.*

⁵ *Pacto Nacional pela Primeira Infância.*

⁶ *Conselho Nacional de Justiça.*

⁷ *Marco Legal da Primeira Infância.*

⁸ *Estatuto da Criança e do Adolescente.*

⁹ *Plano Nacional de Educação, Plano Nacional de Saúde, Plano Nacional de Assistência Social, Plano Nacional de Cultura, Plano Nacional de Enfrentamento da Violência Sexual contra Crianças e Adolescentes, Plano Nacional de Promoção, Proteção e Defesa do Direito de Crianças e Adolescentes à Convivência Familiar e Comunitária, Plano de Ação para Implementação da Agenda 2030 (ODS).*

Introduction

It is commonplace to assert that children are the future of the nation and that the best way to promote the development of a country is to invest in early childhood by protecting and developing the potential of children in the first years of life. The same argument applies in reverse: building a future that is better than the present is not possible if a country fails to care for its children. These assertions are part of current discourse because political leaders, public officials, professionals in the field of early childhood and a substantial share of the general public have absorbed the lessons imparted by academic research. There is no longer any debate that investing in childhood to ensure all children are afforded dignified conditions of life and social equity generates greater social and economic gains than investing in other areas, and, moreover, that it firms the bases for a democratic society.

For children, however, life in the present day is more important than laying the groundwork for a future time. They need to live today and in as fulfilling and happy a manner as possible. If childhood is “*the time of silent preparation*”, in the words of Péguy,¹⁰ to the extent the “*child is*

the father of man”,¹¹ children are, at the same time, the here and now, as poetically depicted by Gabriela Mistral: “*To them we cannot say ‘tomorrow’: their name is ‘today.’*”¹²

The ambiguity of childhood – both present and future – requires that we care for children now because present-day life has value and, concomitantly, that we remain alert to the possibilities of their development toward a fulfilling life project.

Although the child is a project in the making, that is, an individual preparing for adult life, the future announced – and while the sensation of growth spurs fascination, supports hopes and mobilizes investments in early childhood – we must also see the value in children themselves. Because childhood represents a singular stage in life, with its own meaning and content. We do not contemplate children from the perspective of the adult we would like them to become; we look upon them as children, individuals, citizens, with the right to live their childhood to the fullest. We know childhood does not close in within itself, but that it is open to growth and development. Yet if we insist on defining the future as the ultimate reward, the present time is drained of meaning, lost to a reductionism that deprives children of the possibility to be and to develop.

¹¹ William Wordsworth, English poet (1770-1850). The verse was cited by Sigmund Freud (1856-1939) to explain the significance of childhood experiences that mark adult life.

¹² Gabriela Mistral, pseudonym taken by Lucila de María del Perpetuo Socorro Godoy Alcayaga, Chilean poet, professor, and diplomat (1889-1957), 1945 Nobel Prize in Literature.

¹⁰ Charles Péguy, French poet and writer (1873-1914).

This twin dimension – the in-oneself and the forward-march – tells us that in early life the child lives an existential dynamic unique to that age, which can only be experienced in childhood and, moreover, that the child is in a growth spiral that continues into adolescence, young adulthood, adulthood, and, finally, old age. Intelligent, creative, enterprising adults with abundant mental flexibility continuously constitute themselves throughout life. Yet, the foundation is formed in early childhood.

Beyond designing a future scenario – Early Childhood in Brazil 2030 – this Plan sets out goals and targets for the present and the future, while establishing immediate and sequential political commitments. If, on the one hand, it is comforting to imagine Brazilian children living full and happy lives in a future captured within our life spans, it is imperative, on the other, that action be taken to build that future day by day, with persistence. The former condition without the latter is pure fiction, abdication, and reckless projection. It is action today, taken in today's context of the struggle to overcome shameful inequality and ensure equality of opportunities, that imbues our present-day lives with dignity.

This Plan is directed at us. At every government leader, politician, technician, professional and citizen living here and now. No one is exempt from responsibility or released from this higher commitment. Wise was the 1988 Brazilian Federal Constitution's paradigmatic provision, article 227, which assigns responsibility for the rights of the child to the family (including parents, siblings, and relatives), society (encompassing all citizens and their representative organizations) and the State (led by the government through the three branches of administrative power: executive, legislative, and judicial):

It is the duty of the family, society, and the State to assure children, adolescents, and youth, with absolute priority, the right to life, health, nourishment, education, leisure, professional training, culture, dignity, respect, liberty and family and community harmony, in addition to safeguarding them against all forms of neglect, discrimination, exploitation, violence, cruelty and oppression.

As much as the *family* has undergone changes with respect to its organization, the manner in which it performs its functions, and the distribution of intrafamily roles in relation to the material and cultural conditions of survival and generational functions, it remains the central unit of care and education for children, especially those in their first years of life. The family cannot simply abdicate its responsibility to provide for the care and education of its children (article 229 of the 1988 Brazilian Federal Constitution and article 22 of the Statute on the Child and Adolescent, as given by the text of article 26 of the Early Childhood Legal Framework).

Families have the right to bear children. Poverty does not deprive them of this right, nor is the State authorized to deny them this right by reason of economic condition. Rather, the State is charged with ensuring families are able to exercise their fundamental right to bear and raise children (Statute on the Child and Adolescent, article 23; Early Childhood Legal Framework, articles 13 and 14). Children, for their part, have the right to family coexistence and to forge the emotional ties essential for constituting their individual personalities. Any substitution of life within the family unit in the first years of childhood may only be, at most, partial and temporary.

With respect to *society*, although its obligations in relation to children's rights may seem, at first glance, undefined and diffuse, there are areas in which its responsibilities are clear:

a) to participate through representative organizations in policy formulation and oversight activities (health – article 198, subsection III; social assistance – article 204, subsection II; education – article 213; general rights – article 227, paragraph 7, of the 1988 Brazilian Federal Constitution);

b) to participate on joint councils with government representatives, including education, health, social assistance councils, the relevant civil society participation and monitoring bodies of the Fund for the Maintenance and Development of Basic Education and Professional Enhancement

(FUNDEB),¹³ child and adolescent rights councils, etc. tasked with planning, monitoring, accountability and assessment duties;

c) to directly execute actions, in lieu of Government action or in partnership with the Government, for which purpose Government authorities may transfer financial resources or authorize, pursuant to law and where absolutely necessary, fiscal incentives and tax, fee, and service exemptions;

d) to develop programs, projects and actions that fall within the category of social responsibility and private social investment;

e) to organize and sponsor campaigns and actions that promote respect for the child, protection of the child and fulfillment of the child's rights.¹⁴

The *State* serves as the legal guarantor and operational agent of rights. It is charged with ensuring all children enjoy full fruition of the rights recognized and established in the 1988 Brazilian Federal Constitution, international agreements, and laws. The State cannot eva-

de this duty or set deficient goals by reason of insufficient financial resources. Political will and Government decisions must create, identify, and mobilize all necessary resources. It is through these measures that the determination of Brazilian society and the Brazilian nation, as enshrined in the 1988 Brazilian Federal Constitution, to ensure rights of the child (including adolescents and young adults) as an absolute priority is fulfilled (article 227). As per the Statute on the Child and Adolescent, this priority encompasses:

a) the primacy of protection and aid in all circumstances;

b) priority assistance by public services or services of public relevance;

c) preference in the formulation and execution of social policies; and

d) preferential allocation of public resources to areas engaged in protecting children and youth (article 4, sole paragraph).

The Early Childhood Legal Framework includes an additional component to the absolute priority provision for children 0 to 6 years of age: the development of policies, plans, programs, and services for early childhood that meet the specificities of children in the youngest age group, with a view to ensuring their full development (article 3).

¹³ *Fundo de Manutenção e Desenvolvimento da Educação Básica e Valorização do Magistério*.

¹⁴ The types of social participation laid out in the 2010 edition of this Plan were literally incorporated in article 12 of Law 13257/2016 (Early Childhood Legal Framework).

The challenge of change

1. The reality of early childhood in Brazil

Brazil has approximately 19 million children between 0 and 6 years of age, corresponding to 8.91% of the country's total estimated population of 211 million in 2020.¹⁵ Brazil's child population is larger than that of 133 of the world's 197 countries. Yet, each of these 19 million children is a unique, irreplaceable person, with a name and dignity that cannot be diminished or denied under any circumstances. Each of these children is called to life in unique and personal conditions and occupies a place in the history of humanity. Achieving their life project is a right and a condition for ensuring the singular contribution only they can make to civilization.

The duty of the family, society, and the State to each of those 19 000 000 children is an absolute priority. It is an awesome challenge and one which cannot be refused. The central objective is that children live a full life. The fulfillment of

each child, as the fulfillment of childhood itself, is an idea that is shaped and molded to the personal dimension of each child, one we cannot *a priori* set within boundaries but must allow to surprise us based on *each child's infiniteness*.

There is an ideal to be achieved, a utopian idea to inform society and government. There is a reality to transform, suffering to cure, losses to reclaim, risks to prevent, exclusions to transform into inclusion and participation, potential to develop, beauty to sculpt. Bridging the distance between the ideal and present-day reality is located in the realm of public policy and personal and professional action.

There are a number of diagnostics and studies on the situation of childhood in Brazil.¹⁶ Improvements in statistics and qualitative studies in recent years have shed greater light on the true conditions and development of children. It is not the intention of this Plan to repeat the conclusions outlined in the prevailing literature. Rather, this section of the National Plan for Early Childhood considers some features of present-day reality, while deeper analysis of the current state of affairs is left to the thematic chapters below, which, while succinct, are sufficient to establish the starting point for defining the objectives and goals to be achieved in the Plan's specified time horizon.

¹⁵ IBGE. População. *Projeção para 2020*. Available at: <<https://www.ibge.gov.br/apps/populacao/projecao/>>. Accessed: 11 May 2020.

¹⁶ Some of these are cited in the chapters on health, early childhood education, and social assistance.

In 2017, approximately 50 million people around the world lived below the poverty line, a total corresponding to 25% of the Brazilian population, with 26.9 million ensnared in extreme poverty.¹⁷ In the prior year, the average per capita income of the 20% highest income households was 18.3 times greater than the average income of the 20% lowest income households.¹⁸

Further exacerbating the quantitative poverty indicator worldwide is the gap between rich and poor. Brazil is one of the world's most unequal countries. That inequality is reflected in all areas of children's lives: housing, sanitation, access to clean water, nutrition, health, education, access to artistic expression, public spaces and parks and social facilities.¹⁹ From the outset, the lives of children are marked by disparities in the opportunity to live and develop their human potential.

Another aspect of inequality is skin color/race. According to the Brazilian Institute of Geography and Statistics (IBGE),²⁰ among individuals in the bottom 10% of the income bracket in 2016, 78.5% were people of color. At the other extreme, i.e., the top 10% of the income segment, only 24.8% were people of color. The probability of living in poverty is far greater for Black, Indigenous, *Quilombola* and rural children, as well as individuals in traditional communities and slums.

Large-scale and targeted public policies, i.e., those with a direct impact on the most socioeconomically vulnerable families, have demonstrated the possibility of changing the poverty landscape in Brazil. The Institute of Applied Economic Research (IPEA)²¹ found that the Fa-

mily Grant Program (PBF)²² reduced poverty by 15% and extreme poverty by 25%. *In 2017, more than 3.4 million people were lifted out of extreme poverty by the PBF and another 3.2 million raised above the poverty line.*²³

Reductions in income inequality and poverty have directly benefited children by enhancing their quality of life and development conditions. Problems and solutions within the family sphere are problems and solutions directly tied to the respect for the rights of the child. Yet, such reductions have not advanced enough to ensure broad-based justice and equal rights. Given the extent to which the novel coronavirus (COVID-19) pandemic has tended to exacerbate the gap between rich and poor, more vigorous public policies are needed to diminish the inequality curve and promote equity.

If inequality within Brazil's general population is among the world's most severe, among children it is even more acute. Indeed, early childhood development in Brazil bears the unmistakable imprint of inequality.

In recent years, the infant mortality rate has been reduced significantly: in 2010, infant mortality stood at 17.2 per 1000 live births, falling to 12.4 in 2018. Among children below 5 years of age, the mortality rate has dropped as well: from 19.8, in 2010, to 14.4, in 2018. Yet, it is important to underscore inequality in prospects for survival in Brazil: while in the state of Espírito Santo 8.1 children out of every 1000 live births die before reaching the age of 1 and, in the state of Paraná, 8.6 children per 1000 live births die in their first year of life, in the state of Maranhão 19.4 children per 1000 live births do not reach their first birthday, while in the state of Amapá the rate is 22.8 per 1000 live births.²⁴ Brazil's target for SDG 3.2 (Good Health and

¹⁷ IBGE. *Síntese dos Indicadores Sociais – Uma análise das condições de vida da população brasileira – 2017*. Available at: <<https://biblioteca.ibge.gov.br/visualizacao/livros/liv101459.pdf>>. Accessed: 11 May 2020.

¹⁸ *Op. cit.* Table 2.10.

¹⁹ To illustrate these extremes, 95.2% of children born in the Greater São Paulo Metropolitan Area have access to the three basic sanitation services – clean water distributed by the public network, waste collection and sewage treatment – while in Greater Teresina only 7.4% have access to the equivalent services.

²⁰ Instituto Brasileiro de Geografia e Estatísticas.

²¹ Instituto de Pesquisa Econômica Aplicada.

²² Programa Bolsa Família.

²³ IPEA. *Os Efeitos do Programa Bolsa Família sobre a Pobreza e a Desigualdade: Um balanço dos primeiros quinze anos – Textos para discussão 2499*. Rio de Janeiro: IPEA, 2019. Available at: <http://www.ipea.gov.br/portal/images/stories/PDFs/TDs/td_2499.pdf>. Accessed: 21 May 2020.

²⁴ IBGE. *Tábua Completa de Mortalidade para o Brasil – 2018: Breve análise da evolução da mortalidade no Brasil*. Rio de Janeiro, 2019. Available at: <https://biblioteca.ibge.gov.br/visualizacao/periodicos/3097/tcmb_2018.pdf>. Accessed: 11 May 2020.

Well-Being) is to reduce neonatal mortality to a maximum of 5 per 1000 live births and mortality among children under 5 years of age to a maximum of 8 per 1000 live births.

Among preventable deaths of children under 1 year of age, 56.3% could have been avoided had proper care been delivered to the mother during pregnancy or in childbirth or to the newborn, and an additional 11% prevented with adequate diagnosis and treatment or through health promotion actions.

Here, too, the mark of inequality is apparent: the probability of dying in the early stages of life for the female infants of Black women is approximately 37% greater than among the female infants of White mothers; within Indigenous populations, the probability is 138% greater than among White infants. Of the total population of Indigenous children and adolescents, 63% are children up to 6 years old living in poverty.

Maternal mortality poses another serious challenge. It took Brazil 25 years (1990 to 2015) to reduce maternal deaths from 143 to 62 per 100 000 live births.²⁵ Brazil's target for SDG 3.1 (Good Health and Well-Being) is 30 deaths per 100 000 live births. The risk of maternal mortality is higher for adolescents under 15 years of age. Complications during pregnancy and childbirth are one of the leading causes of death among this segment in developing countries.²⁶

Adolescent pregnancy is a critical issue for the delivery of care to children and their families. Of every 5 babies born in Brazil, one is the child of an adolescent mother. Seven of every 10 adolescent mothers are Black. In 2018, 21 154 babies were born to mothers under the age of 15. The number of adolescents 15-19 years of age who become pregnant in Brazil is 8 times higher than in Germany and 10.5 times greater

than in France.²⁷ The children of adolescent pregnancies and their mothers are at greater risk of death and developmental challenges than the norm: high-risk pregnancy, premature birth, maternal mortality, school dropout (adolescent mothers), as well as other complications.

Malnutrition is another significant factor for childhood in Brazil. Weight-age ratio data from 2017 indicates that 4.5% of Brazilian children between 0 and 5 years of age suffer from malnutrition. The figures confirm significant variation between the Northern (6.4%) and Southern (3.1%) Regions. By the same token, the figures for height-age ratio reveal that 12.9% of Brazilian children present malnutrition, with a similar regional disparity to that above, specifically 18.7% versus 9.1%, respectively.²⁸

In addition to malnutrition, more recently obesity has become a cause for concern: in 2017, a total of 7.1% of children between the ages of 0 and 5 were overweight for their age, a figure corresponding to more than 330 000 children. The regional distribution for this indicator was largely homogeneous.²⁹

Although the National Food and Nutritional Security Policy³⁰ has succeeded in reducing hunger in Brazil, food and nutritional insecurity continues to lurk within specific population segments. The Food and Nutritional Insecurity Map based on the Federal Government Consolidated Registry of Social Programs (*CadÚnico*) and SISVAN³¹ has identified food and nutritional insecurity in territories occupied by traditional and specific populations: among the 35 million children 4-5 years of age assessed,

²⁵ IBGE. *Taxa de Mortalidade Materna*. Available at: <<https://sidra.ibge.gov.br/tabela/6694#resultado>>. Accessed: 11 May 2020.

²⁶ OPAS Brasil. *Mortalidade Materna (2018)*. Available at: <https://www.paho.org/bra/index.php?option=com_content&view=Article&id=5741:folha-informativa-mortalidade-materna&Itemid=820>. Accessed: 12 May 2020.

²⁷ According to the United Nations Population Fund (UNFPA), Brazil has 65 pregnancies in every 1000 girls aged 15-19, while Germany registers 8 and France, 6. Available at: <<https://nacoe-sunidas.org/brasil-tem-setima-maior-taxa-de-gravidez-Adolescent-agere-da-america-do-sul/>>. Accessed: 13 May 2020.

²⁸ Fundação ABRINQ. *Cenário da Infância e Adolescência no Brasil 2019*. Available at: <<https://www.fadc.org.br/sites/default/files/2019-05/cenario-brasil-2019.pdf>>. Accessed: 11 May 2020.

²⁹ *Op. cit.*

³⁰ *Política Nacional de Segurança Alimentar e Nutricional*.

³¹ *Mapeamento da Insegurança Alimentar e Nutricional a partir da análise do CadÚnico e do SISVAN*.

33.2% were below average height, while another 10.5% were below average weight for their age. The figures are, respectively, 4.9 and 6 times greater than the national average. Of these children, 39.5% were located in the Northern Region, 31.7%, in the Northeast Region, 10.2%, in the Southern Region, 7.2%, in the Southeast Region and 4.8%, in the Midwest Region.³²

The policy on guidance, support and encouragement of maternal breastfeeding has boosted exclusive maternal breastfeeding levels in the first months of life. The government's support for extending maternity leave to six months to ensure exclusive maternal breastfeeding during this period is clear evidence of the importance attached to the practice under current health policy. However, maternal breastfeeding remains far below recommended levels: only 38.6% of babies are fed mother's milk exclusively in the first six months of life.³³

Early childhood education³⁴ is a right of every child from birth and a duty of the State. It is mandated for children ages 4 and 5, with a view to ensuring that every Brazilian child experiences the learning environment in at least the final two years of pre-primary school education. Yet, daycare, an essential resource for working families, is still an underserved need for a large number of children. In 2018, there were 10 223 000 children ages 0 to 3 years and 11 months.³⁵ Of these, only 3 755 092 were enrolled in public or private daycare centers.³⁶ While the

total number is high, the relative figure (37%) falls far short of the target prescribed in the National Education Plan for 2024 (50%). If the current pace of enrollments registered in the past four years is maintained, the National Education Plan's target will not be reached.

Lack of places in public daycare facilities affects low-income families, especially working mothers. The Brazil Cares Program,³⁷ created for the purposes of addressing this challenge, made daycare services accessible to thousands of children from families enrolled in the Family Grant Program. Over the past three years, however, continuous implementation of the initiative has not been maintained.

In 2019, there were 5 217 686 children enrolled in Early Childhood Education,³⁸ a total approximating universal coverage (5263000), as mandated by the 1988 Brazilian Federal Constitution and Law 12796/2013.³⁹

Violence against children is yet another cruel reality that affects the lives of thousands of children and adolescents in Brazil. In the period 2011-2017, the Ministry of Health registered 219 717 acts of violence against children, according to the Brazilian Notifiable Health Conditions Information System (SINAN),⁴⁰ in addition to 58 037 acts of sexual violence (abuse). A comparison of the 2011 and 2017 data reveals a 64.6% increase in (reported) cases of violence against children.⁴¹ Given that the figures correspond to complaints entered with the Dial 100 Hotline,⁴² two observations are warranted: (a) the complaints are but a portion

³² *Plano Nacional de Segurança Alimentar e Nutricional 2016-2019*. Brasília, 2016. Available at: <https://issuu.com/informecaisan/docs/plansan_2016-19__10_05_2016_vers__o>. Accessed: 13 May 2020.

³³ UNICEF. *Capture the Moment: Early initiation of breastfeeding – the best start for every newborn*. July 2018. Available at: <https://www.unicef.org/publications/index_102949.html>. Accessed: 13 May 2020.

³⁴ In Brazil, Early Childhood Education – *Educação Infantil* – corresponds to the initial stage of Basic Education and is comprised by the following sub-stages: Daycare – *creche* – for children 0 to 3 years of age; and preschool – *pré-escola* – for children 4 and 5 years of age. For its part, Basic Education – *Educação Básica* – consists of three stages: Early Childhood Education, Elementary Education – *Ensino Fundamental* – and High School Education – *Ensino Médio*. The definitions above will apply throughout this report.

³⁵ IBGE/PNADC. *Pesquisa Nacional por Amostra de Domicílios Continuada 2018*.

³⁶ INEP. *Sinopse Estatística da Educação Básica 2019*. Available at: <<http://portal.inep.gov.br/sinopses-estatisticas>>. Accessed: 13 May 2020.

³⁷ Programa Brasil Carinhoso.

³⁸ INEP. *Sinopse Estatística da Educação Básica 2019*. Available at <<http://portal.inep.gov.br/sinopses-estatisticas>>. Accessed: 13 May 2020.

³⁹ Constitutional Amendment 59 of 2009, regulated by Law 12796, of 2013.

⁴⁰ Sistema Nacional de Informação de Agravos de Notificação.

⁴¹ Boletim Epidemiológico n° 27. *Análise Epidemiológica da Violência Sexual contra Crianças e Adolescentes no Brasil, 2011 a 2017*. Ministério da Saúde, volume 49, 2018. Available at: <<https://portalquivos2.saude.gov.br/images/pdf/2018/junho/25/2018-024.pdf>>. Accessed: 15 May 2020.

⁴² The *Disque Direitos Humanos – Disque 100* is a service that provides information on the rights of vulnerable groups and a channel for reporting violations of human rights.

of the actual reported cases; it is believed that the real number is ten times higher; and (b) the increase in complaints may be the product of individuals being encouraged to come forward. More than 70% of children subjected to sexual abuse are females and more than half are children ages 1 to 5 years, while 45% are individuals of color. Two other noteworthy considerations: 70% of the sexual abuse cases against children occur in the home, and sexual violence is not a one-time act committed against the child, but a repeated act – the child suffers more than once.

The numbers by themselves are dry. But behind each numeral is a human face, a child deceived and hurt, whose life will perhaps be affected permanently. Fortunately, resilience has the capacity to restore happiness, trust in others and inner peace – in time, at least – although none of this in any way justifies or lessens the perversion of abuse.

We conclude this brief and incomplete overview of the challenges that continue to stunt life or hinder the development of young children by drawing attention to the existence of various childhoods in Brazil and the exclusion to which some of these are condemned. Unknown or unfamiliar, ignored or simply not included in public policy initiatives, these children have less of a chance in life and are prevented from living their childhood fully. They have fewer opportunities to learn, to develop and to integrate as citizens in society. This Plan pulls back the curtain to the stage on which early childhood plays out a little further, in an effort to ensure every child is seen, known, protected, and cared for as a subject of rights, as a Brazilian citizen.

2. *What Brazil is doing for its children*

The last decades of the 20th century and the first decade of the 21st century saw broad and profound changes to the legal framework, social policy, government actions and the engagement of Brazilian society with respect to the protection, promotion, and participation of children. The progress made by Brazil in these

areas in recent years has been recognized nationally and internationally.

The 1988 Brazilian Federal Constitution served as the framework for a new political, social, and pedagogic conception of children: as citizens and subjects of rights that the family, society, and the State are duty bound to ensure, as an absolute priority. The term *minor* was replaced with the expression *child and adolescent*, with a view to equating the dignity and existential meaning of all children and adolescents, without distinction by reason of wealth, social status, ethnicity, origin, or any other factor.

The Statute on the Child and Adolescent (Law 8069/1990) took a bold step by creating the Rights Guarantee System,⁴³ establishing joint councils (government and society) to formulate, monitor and oversee the Child and Adolescent Care Policy⁴⁴ and replacing the doctrine of irregular situation with the doctrine of full protection. The Statute on the Child and Adolescent coined an expression that would impact interpersonal relations, public policy, and professional activities alike, by defining children and adolescents as *individuals in a peculiar condition of development*.

This effort was followed by the development of sector-specific laws in the fields of health, education, social assistance, and other areas, founded on a participatory process that addressed the specificities of children. Subsequently, social policies were formulated and sector-specific programs created for early childhood.

The long and well-trodden path to building a legal framework on the rights of the child culminated with the enactment of the Early Childhood Legal Framework. The law focuses on the specificities of children 0 to 6 years of age, devotes attention to the singularity and diversity of children and childhoods, establishes principles and guidelines for the development and implementation of policies for early childhood, proposes a coordinated national policy between the union, the states, the Federal District and

⁴³ *Sistema de Garantia dos Direitos*.

⁴⁴ *Política de Atenção à Criança e ao Adolescente*.

municipalities, encompassing the diversity of rights, engages children as active participants entitled to be heard, including in the child policy formulation process. In sum, the law proposes a care-oriented culture – consisting of comprehensive care for children as well as for those who care for them.

This unified and consistent body of legal instruments reflects the conceptual, political, and technical-professional progress made around the world and, in particular, in Brazil in the past four decades with respect to identifying who the individual-child is and the child's potential to learn, develop and participate. In addition, it proposes that government and civil society institutions establish an agenda of commitments to ensure children are able to fulfill their rights.

Recent advances include:

1. *Brazilian children and adolescents are citizens subject to social policies* that guarantee their rights. Public policies entail health, education, social assistance, cultural, human rights protection and promotion, safety and security, environmental and other actions.
2. The *Child and Adolescent Rights Guarantee System (SGDCA)*,⁴⁵ which coordinates government and civil society entities to ensure the application of normative instruments and operation of promotion, defense, and oversight mechanisms, with a view to effectuating the rights of children and adolescents at the federal, state, federal district, and municipal levels. Participants in the SGDCA include the National, State, Federal District and Municipal Councils on the Rights of the Child and Adolescent, Child and Youth Courts, Offices of the Public Defender, public safety and justice departments and bodies, Offices of the Public Prosecutor, child and adolescent defense centers and Child and Adolescent Protection Councils. The Child and Adolescent Protection Councils, which currently exercise primary responsibility

for activating the child and adolescent protection network and coordinating the actions of the various institutions, could further enhance their effectiveness if council members were properly qualified and received the necessary technical, financial and infrastructure support needed to perform their duties.

3. The *National Council for the Rights of the Child and Adolescent* is charged with establishing the guidelines of the Comprehensive Care Policy⁴⁶ and with monitoring and overseeing the policy's implementing actions. The states, Federal District and municipalities operate their own Child and Adolescent Rights Councils, constituting, in conjunction with the national council, a dense, overlapping network.
4. The *specific sector policies, plans and programs for early childhood* or which otherwise contemplate early childhood within their scope include: the National Health Plan, National Education Plan (2014-2024), Ten-Year Social Assistance Plan (2016-2026), Ten-Year Human Rights Plan for Children and Adolescents (2010-2020), National Plan for the Promotion, Protection and Defense of the Rights of the Child and Adolescent to Family and Community Coexistence (a new version of which is currently under development), National Plan to Combat Sexual Violence against Children and Adolescents (2013-2020) and National Culture Plan (2010-2020).
5. *Increasing financial investments in early childhood and adolescence.* Children are served through global programs, yet they also require age-specific programs based on their growth and development needs. The chapter titled *Funding early childhood actions* in this National Plan for Early Childhood sets forth important considerations on the right of the child to priority investments, the difficulties in accessing the amounts effectively applied toward early childhood, the need to develop a budget

⁴⁵ Sistema de Garantia dos Direitos da Criança e do Adolescente.

⁴⁶ Política de Atenção Integral.

dedicated to early childhood and ongoing initiatives. The active engagement of the Joint Parliamentary Front for Early Childhood represents a positive step toward achieving this objective.

6. The *Child and Adolescent Funds*⁴⁷ were created as a complementary measure to enhance the program, project and action budgets earmarked to the Child and Adolescent Rights Protection Policy.⁴⁸ By amending the text given by article 260 of the Statute on the Child and Adolescent, the Early Childhood Legal Framework mandates: (a) fulfillment of the demands of the National Plan for Early Childhood, in relation to the priorities met with resource allocations from the National, State, Federal District and Municipal Councils for the Rights of the Child and Adolescent; and (b) determination by the National, State, Federal District and Municipal Councils for the Child and Adolescent of the criteria governing use of a percentage of the funds above toward Comprehensive Early Childhood Care Programs in areas of socioeconomic deprivation or public calamity. The potential of these funds is yet to be realized or promoted. Further, the pertinent management processes should be broadly streamlined and expedited. The more efficient these facilities are, the more individuals and legal entities will be incentivized to dedicate the full contribution amounts permitted by law to the Early Childhood and Adolescent Funds.
7. For its part, the Federal Government Policy Monitoring and Evaluation Council,⁴⁹ established in 2019 could contribute significantly to enhancing the respective policies and offer recommendations for boosting investments in this area through the Multi-Annual Plan (PPA),⁵⁰ if it included early childhood policies as part of its assessment process. Considering early childhood policies at this level would serve to give the related initiatives more visibility within the relevant government decision-making spheres.
8. The National Food and Nutritional Security System (SISVAN),⁵¹ established in 1990⁵² to formulate and implement policies, plans, programs, and actions to ensure the human right to adequate nourishment, is an effective mechanism for addressing nutritional and food challenges capable of directly benefiting the quality of life of children. In view of this Plan's objective to meet the full range of children's rights, it is worth emphasizing here that small farms account for 30% of the purchases made by the National Food and Nutritional Security Policy for school meal programs operated through the National School Meal Program (PNAE).⁵³
9. *Inclusion of children, from birth to 6 years of age in the Sustainable Development Goals* (SDG) (2020-2030) reflects growing political awareness at the global and national level that fulfillment of the rights of young children is of strategic importance to achieve the SDG.
10. Announcement of the Early Childhood Legal Framework Monitoring Platform,⁵⁴ an initiative of the National Network for Early Childhood (see the chapter titled *Monitoring the National Plan for Early Childhood*). The objective is to offer contributions to early childhood policy making, implementation and monitoring. The Legal Framework will be monitored using national, state, and municipal indicators on Early Childhood Care Policies, with an initial focus on health, education, and social assistance.

⁴⁷ *Fundos da Criança e do Adolescente*.

⁴⁸ *Política de Atendimento dos Direitos da Criança e do Adolescente*.

⁴⁹ *Conselho de Monitoramento e Avaliação de Políticas Públicas do Governo Federal*.

⁵⁰ *Plano Plurianual*.

⁵¹ *Sistema Nacional de Segurança Alimentar e Nutricional*.

⁵² Law 11346, of 15 September 2006. Available at: <http://www.planalto.gov.br/ccivil_03/_Ato2004-2006/2006/Lei/L11346.htm>. Accessed: 24 May 2020.

⁵³ *Programa Nacional de Alimentação Escolar*.

⁵⁴ *Plataforma de Monitoramento do Marco Legal da Primeira Infância*.

11. The *National Pact for Early Childhood*, signed 25 June 2019, by the National Justice Council and hundreds of stakeholders of the Early Childhood Protection Network in Brazil, created new opportunities to strengthen policies aimed at ensuring the myriad collective rights prescribed by Brazilian law and enhancing the infrastructure implemented to protect the superior interest of the child.
12. *State, federal district and municipal initiatives* in connection with laws, policies, programs and projects aimed specifically at young children are an auspicious development, as they attest to the commitment of all entities of the Brazilian Federation to the welfare of young children and lay the groundwork for the Inter-Federation Pact on the Integral Protection of the Rights of the Child⁵⁵ provided for in Article 7, paragraph 2, of the Early Childhood Legal Framework and reveal the consensus that has formed around the position that children are citizens subject to rights in their territorial spaces. Some of the initiatives are sector-specific, while others adopt a multi-sectoral approach.
13. *State Plans, the Federal District Plan and hundreds of Municipal Plans for Early Childhood* inspired and guided by the National Network for Early Childhood, in consonance with the National Plan for Early Childhood 2014-2022 and based on broad participation and intersectoral methodological approaches, represent objective, concrete and effective proposals to ensure a more dignified present for children and the promise of policies for a better future. The chapter titled *State, federal district, and municipal plans for early childhood* identifies these initiatives as part of a dynamic web emerging from the policy decisions and actions taken on behalf of children in the first six years of life.

⁵⁵ *Pacto Interfederativo para o Atendimento Integral dos Direitos da Criança.*

3. What Brazil wants to do for its children

The State – through the Federal Government, state governments, Federal District Government, and municipal governments – shall give absolute priority to fulfilling the constitutional commitment to the following rights for children:

- life;
- health;
- nourishment;
- early childhood education;
- recreation and play;
- information;
- culture and cultural diversity;
- dignity;
- respect;
- freedom; and
- family and community coexistence;

and take action, by all means available, to ensure children:

- are not victimized by neglect;
- are not subject to discrimination based on gender, ethnicity, skin color, age, family status, economic status, religious faith, geographic location of place of residence;
- are not exploited as child laborers, sexual objects or actors or models in commercial advertisements;
- are not victimized by physical, moral, psychological, cultural, economic violence or captivity in the family, school or social setting;
- are not subject to cruel treatment;
- do not feel psychological, physical, or moral oppression; and
- are not besieged by publicity that is contrary to their rights.

To this end, the federal, state, municipal and Federal District levels shall proceed as follows:

- The *Executive Branch* shall formulate and implement an Integrated National Policy for the Full Protection of Children aimed at the full diversity of Brazilian childhoods,

pursuant to the guidelines of the Statute on the Child and Adolescent and the Early Childhood Legal Framework and in compliance with the absolute priority provision of article 227 of the 1988 Brazilian Federal Constitution. In addition, it shall provide technical and financial support to the states, Federal District, and municipalities for purposes of developing and implementing their respective Early Childhood Plans.

- The *Legislative Branch* shall approve all legislation as necessary to discipline fulfillment of the respective constitutional mandates, the ECA, the Early Childhood Legal Framework and any other laws relating to the rights of the child, ensuring, to this end, that budgetary resources are included in the respective legislative instruments. In addition, the Legislative Branch shall track and oversee government actions in connection with the rights prescribed in this Plan and contribute toward developing an early childhood budget.
- The *National Justice Council* shall advance the National Plan for Early Childhood with the full engagement of the Three Branches of Government at each of the three administrative levels – union, states, Federal District, and municipalities – and with the participation of civil society.
- The *Federal Public Prosecution Office and the Public Defender's Office of the Union* shall ensure that all children's rights are fulfilled and the provisions of this Plan executed by the bodies to which the pertinent responsibilities are attributed.
- *Civil society* shall participate in planning, developing, and implementing the national policy and sector-specific policies for young children through its representative organizations.
- *Children* shall be heard and their contributions considered.

Characteristics of the National Plan for Early Childhood

There are six extrinsic characteristics that give social and political shape and substance to the Plan and four internal characteristics that lend it consistency and content.

1. Extrinsic characteristics

1.1 Scope

The National Plan for Early Childhood covers the full range of rights of children 0 to 6 years of age, not merely those that have been the focus of attention for years. These include the right to life, nourishment, early childhood education, family, social assistance, and others. Of those that have garnered government scrutiny more recently, the following rights stand out: the right to I) family and community coexistence; II) protection of physical, mental and moral integrity; III) mental health; IV) play, which implies the right to play, toys, space and time; V) civil registration and a birth certificate; VI) individuality, which implies the right to be different and the duty to respect the individual's diversity; VII) participate and be heard; VIII)

culture in early childhood; IX) the father's and mother's name; X) protection from appeals to consumption; XI) nature; XII) space; XIII) the urban space; XIV) a clean environment; XV) peace, among others. The revised Plan includes new themes: the child and culture, adolescent pregnancy care, the role of men in family care, pregnant women, the mother and the child, controls on the use of digital screens, care for children from traditional communities and populations, the justice system and children, children and the Sustainable Development Goals, companies, and the rights of children.

We have dared venture into another theme: the right to beauty, a common thread that runs through all of the rights set out in these pages.

1.2 Participation in developing the National Plan for Early Childhood

The National Plan for Early Childhood was developed with the participation of government institutions exercising direct and indirect responsibilities in the field of children's rights – the technical divisions of individual ministries, institutes, foundations and self-governing bodies –, the three United Nations Organizations for which children constitute a principal concern (WHO/PAHO, UNESCO and UNICEF), civil society entities affiliated to the National Network for Early Childhood, research, education,

nal and health institutions unaffiliated to the National Network for Early Childhood, families, children's rights activists, researchers, experts in a diversity of fields, basic and higher education instructors and professors and professionals in different sectors. Also contributing to the revisions and updates to this Plan were entities in the Legal and Justice fields, the Office of the Public Prosecutor, and the Office of the Public Defender. This broad-based participatory process nurtured a feeling of *belonging*, of commitment, as well as an interest in participating in and monitoring the Plan's execution.

1.3 State Plan

The National Plan for Early Childhood transcends the scope and characteristics of a Government Plan. Society's participation in its development, formal passage by the Legislative Branch, which serves to solidify its democratic credentials and endow it with multi-party support (see, on this point, item 1.5), its duration that extends beyond a given administration's term of office, are factors that disconnect the Plan from any one political party or administration and bind it, instead, to the State's continuous role in providing an essential service to a specific population segment: young children. Each administration, therefore, inherits the Plan as a political duty and a technical instrument instituted by means of a social pact.

1.4 Extended duration

The Plan's duration proposed in 2010 was 12 years – when Brazil is set to celebrate the bicentennial of its Independence. The choice of 2022 was symbolic. Upon arriving at this historic juncture for the Brazilian people and nation, we wanted children's lives and their development to be in line with the fundamental objectives of the Federative Republic of Brazil: a free and just society founded on solidarity, in which poverty would be eradicated, marginalization replaced with inclusion and social and regional

inequality reduced. In short, an anniversary that would celebrate achievement of a standard of life for all children free of prejudice based on origin, race, sex, skin color, age, or any other form of discrimination.

The revised and updated National Plan for Early Childhood extends the Plan's duration through 2030 for two reasons: (I) the update introduces time horizons well beyond the two years remaining on the current Plan: a majority of the proposals set out in the chapters on purposive actions do not involve short-term goals but, rather, longer term goals that will take time to achieve; (II) in this way, the National Plan for Early Childhood is closely bound to the Sustainable Development Goals (SDGs), which represent the most important and far-reaching international agreement between countries and within countries in connection with preserving the sustainability of life on the planet.

To this end, the new state, and municipal plans for early childhood, developed in accordance with this national plan, will also extend through 2030.

1.5 Passage into law

Originally, the National Plan for Early Childhood was to be submitted to the Legislative Branch, with a view to expanding democratic participation in its development through public hearings, debates, analyses, and, ultimately, a vote on passage by the National Congress. However, the Brazilian Government's immediate acceptance of the Plan⁵⁶ following its approval by the National Council for the Rights of the Child and Adolescent, eliminated the need for formal passage. Therefore, while it could be argued that submitting the Plan to the full legislative process was important, it is also true that in skipping this step at least an additional year was gained for purposes of implementation. As

⁵⁶ CONANDA formally approved the Plan in December 2010, while the Special Secretariat for Human Rights of the Office of President of the Republic adopted it in early February 2011, at which time discussions were opened with cabinet ministries on implementation of the measure.

a result, there is no official statute mandating the National Plan for Early Childhood. Nonetheless, approval by the National Council for the Rights of the Child and Adolescent formalized the plan as an official public policy. Nonetheless, it is highly recommended that the state, federal district, and municipal plans for early childhood be approved through the respective formal legislative channels.

1.6 Decentralization

In line with Brazil's federative system, the National Plan for Early Childhood establishes general national guidelines, goals, and targets. Yet, it also provides for the development of specific plans at the state, federal district, and municipal levels. It is, after all, the subnational spheres of government that best understand their regional and local specificities, the needs of children in their particular territorial spaces and social contexts, the technical, administrative, and financial conditions required to design and execute far-reaching, long-term plans, as well as the resources they can actually secure and access.

Coordination between the National Plan for Early Childhood, the state plans (26, potentially), the Federal District plan and the municipal plans (5 570, potentially) will be accomplished in accordance with the constitutional principles of state and municipal autonomy and mutual collaboration.

2. Internal characteristics

There are four dimensions to the contents of the National Plan for Early Childhood, as laid out below.

2.1 Ethical and aesthetic dimension, refers to the personal and professional commitment of all stakeholders to give their best and the administrative competence of governments to ensure Brazilian children are happy and achieve the highest level of learning and development and are able to bring out the best in themselves.

2.2 Political dimension, involves the responsibility of the Brazilian nation and, specifically, each federative unit – states, Federal District, and municipalities – to all children through 6 years of age.

2.3 Scientific dimension, founded on the contributions of the various scientific fields over the past 50 years up through the present day by providing invaluable research on the vital processes, determinant factors, and human development conditions in early childhood.

2.4 Technical dimension, based on experiences of recognized quality in the various fields of professional activity devoted to fulfilling the rights of children in their diverse life circumstances.

Principles and Guidelines

This Plan is *for* children. They are the reason and the motivation for the actions outlined in these pages. In developing and implementing public policies for early childhood, attention must be centered on children and the tangible realities of their lives. They are the subjects of rights to which the pertinent actions are directed. The conceptual and normative text set forth in Early Childhood Legal Framework – Law 13257, dated 8 March 2016 – consolidated what the 2010 version of this Plan had provided for: children themselves as the starting point for public policies on early childhood. This particular focus is reflected in three of the nine guidelines of the respective policies: to fulfill the superior interest of children or, in other words, that which best fulfills their interests; to ensure children participate in defining the actions that affect them, based on their age and development; to foster a culture of protection and promotion, that is, comprehensive care (article 4, subsections I, II and IX).

This Plan was drawn up with a focus on children and their families, communities, and social contexts, with a view to capturing, through the different languages they employ to communicate, their satisfactions and negations, suffering

and joy, desires, and potentials. In this Plan, children have faces, names, a history connected to those around them, a destiny to forge in freedom and confidence. Statistics, generalized descriptions of problems, comparisons, rates, and ratios are technical, yet wholly abstract, constructs that serve merely to help identify the most urgent and appropriate interventions and establish medium- and long-term plans to achieve justice and social equity. They are, however, dry, and distant from the real lives of children, their families and their communities and social contexts. They conceal the subjective dimension of negations and frustrations, as well as aspirations and joys, of the day-to-day lives of children.

It is essential to *cut through* the quantitative data to measure their reach in relation to each child to which they are applied. When the infant mortality rate is reduced, more than a mere number changes, but rather the lives of children are in fact saved; when quality daycare and pre-childhood services are expanded, more is achieved than simply meeting a target established in an education plan, but rather children are effectively included on an educational path that broadens their universe of knowledge and relationships, providing them with a solid learning foundation for the rest of their lives; when the emotional ties between a child and their parents are strengthened or re-established, the child is given a new chance to become a secure and confident individual. This truth, which lies in the realm of logic and emo-

tion, applies to each and every right assured to the child.

Considering the objectives and outcomes of a given policy, program or action from this perspective characterizes an attitude of humanity, solidarity, and co-responsibility on the part of adults for children and fosters a new vision of government action in relation to early childhood in Brazil: the work is done for people, not for the numbers.

Principles

The principles below inform the focus and actions adopted to protect and promote the rights of children through 6 years of age.

1. The child is at once subject, individual, unique, with inherent value:

Subject, not the object of attention, care, or education.

Individual, not merely an entry in the demographic, education, health, violence, and poverty statistics.

Unique, irreplaceable, with a vocation for life and a personal presence in culture and society.

With *inherent value*, that is, a child has dignity, an existential task, a meaning within the whole of human life as a child and not simply by reason of his or her future insertion in social and economic life.

There is a *face* to be seen, encompassing all that is meant by the right to the fullest life possible.

2. Ethnic, cultural, gender and geographic diversity as a fundamental feature of society and, by extension, childhood in Brazil

This principle ensures respect for the child's personal and collective identity and relationship to his or her group. It includes, in addition, attention to the singularity and particularity of that which is unique and personal to the child, that which distinguishes the child from others and makes him or her part of a group that is itself different from other groups.

The range of distinct individual and social realities shines a light on Brazil's many childhoods. The idea is to draw attention to overlooked childhoods, forgotten children, namely those from traditional communities and populations. Applying this *expansive frame* to a national plan for early childhood can contribute to enhanced public policies on the multiplicity of Brazilian childhoods.

3. Integrity of the child

Based on our current state of knowledge about children and the early childhood development process, we must first adjust the fragmented approach by which government actions are organized in individual sectors and public policy is formulated and implemented, and which is all too common in the everyday practice of the professionals who deliver care to children. Undertaking an effort to progressively bring together the various departments, sections and programs within an individual sector and different sectoral bodies toward a comprehensive view of the child, is the most direct route to gaining a full understanding of the child, who, by definition, is one and indivisible and whose learning and development are universal, interconnected, and complementary.

A holistic, integrated vision that is, even if not *comprehensive*, at least progressively more expansive could help us identify interrelationships and points of intersection that have been artificially detached as specialized fields within distinct professional activities. Examples of linkages and combinations present in current policies include: child, family, and community; child and environment; early childhood education and culture; yet there is a far larger number of issues currently addressed as stand-alone items that could be handled more effectively and efficaciously if they reached children by way of integrated actions. In recent years, the federal and federal district governments, various state governments and an encouraging number of municipal governments have created intersectoral policies and programs for early childhood. Some of these combine three sectors (education, health, and social assistance, for example); others boldly strive to bundle as many as ten or fifteen sectors. The result is a synergy of actions, greater effectiveness in public efforts and comprehensive care for children.

4. Inclusion of all children in all circumstances

To ensure Brazilian society is an inclusive society, all children should participate as full-fledged individuals, exercise all the rights afforded to them and have those rights fulfilled. An inclusive society is one that embraces each and every individual and the unique expressions by which he or she is a unique being, distinct from all others; encompasses each and every ethno-racial, social, and cultural group; demonstrates care for fundamental equality and social equity; understands and promotes the specificity of the rights of the child; respects and values diversity as an asset and heritage resource of the Brazilian nation.

The principle of inclusion operates within the National Plan for Early Childhood as a powerful light that brings into view all those children relegated to the margins of socioeconomic and cultural values, family ties, dignified housing,

healthy nourishment, health and well-being, family care and education, early childhood education, safety and protection, adequate accessibility, specialized assistance and play as an occupation unto itself – an intense, free and exuberant aspect of childhood – in short, the heuristic environment that promotes development of the child to the fullest extent of his or her potential.

5. Integrating the scientific, ethical, political, aesthetic and humanist vision of the child

Scientific parameters and a humanist vision should combine in articulated fashion in the actions adopted for children. Namely, pediatrics, pedagogy, psychology, anthropology and child sociology, the law, neurosciences, and other scientific fields, on the one hand, and the values, ethical and aesthetic, political and economic principles, each human being's life project, the meaning of life, respect for the Earth and the complex network of interconnections that constitute life, on the other, should and must be understood as complementary facets of a holistic vision of early childhood and real-life children.

The contributions of science are essential and priceless, yet without the warmth of humanism, it withers lifeless and dry. The effort of a humanist approach without the aid of science becomes an exercise in mere good will, restricted to the important, but always precarious, realm of factual experience. Thus, the vital importance of training in the field of science, in the realm of personal and social values and in the political commitment of professionals for whom children are end purpose or who undertake actions that affect their lives.

6. Linking actions

This principle encompasses three areas: (a) the actions of the federative entities (union,

states, Federal District, and municipalities); (b) sectors of the public administration (education, health, social assistance, culture, justice, environment, protection from violence, etc.); and (c) the relationship between government and society.

In line with this principle, the Plan lays out the existing general or sector-specific policies, plans and programs on early childhood in coordinated fashion and complements these either in relation to the actions or time horizons of each.

The principle contains a proposal on the development of state and municipal plans for early childhood, in accordance with the National Plan, with a view to linking the policies, plans and programs enacted by the different sectors. There are three key benefits to the principle:

- (a) it prevents duplication;
- (b) it rationalizes the use of public resources and waste prevention; and
- (c) it enhances the effectiveness and efficacy of government efforts on behalf of the rights of the child.

7. Synergy of actions

Interlinked actions complement and, in this way, are more effective and efficacious if undertaken in an integrated fashion within the same space and timeframe. This saves time, money and ensures more consistent outcomes. The aim is not to transform a daycare facility into a health clinic or impose on the primary health care center the responsibilities of an early childhood education establishment, but of identifying complementarities in service deliveries and possibilities for expanding actions in the places children receive care – the home, daycare center, preschool, health clinic, social assistance facility, hospital, doctor’s office, institutional play spaces.

8. The rights of the child as an absolute priority

The principle enshrined in article 227 of the 1988 Brazilian Federal Constitution, as regulated by article 4 of the Statute on the Child and Adolescent and article 3 of Law 13257/2016 (Early Childhood Legal Framework) must be effectuated and taken to its last consequences, as revolutionary and unprecedented as these may appear. The actions and financial resources adopted at the three levels of the public administration must be determined based on the absolute primacy of the rights of the child and adolescent.

The courage to ensure this absolute priority will create a new landscape for early childhood and adolescence in Brazil, marked by greater justice and equity, less inequality and violence, more respect and care for all children and higher levels of learning and development.

9. Priority, and preferential allocation of resources to programs and actions for socially vulnerable children

The State is duty bound to protect and provide the means for promoting all children. It accomplishes this through universal policies. However, given the history of Brazil’s structural inequality, the systematic exclusion of traditional communities and populations, of entire childhoods and individual children, the State must design policies and programs targeted specifically at protecting the lives of affected children and promoting their development.

All children enjoy the full range of rights prescribed in the Convention on the Rights of the Child, the 1988 Brazilian Federal Constitution, the Statute on the Child and Adolescent, the Early Childhood Legal Framework, and the pertinent sector-specific laws. However, because the resources needed to meet the needs of all children are insufficient for this purpose, the State has the political obligation and moral

duty to focus, first and foremost, on those who in the absence of public assistance are or would be deprived of their fundamental rights.

The order of assistance to children is directly inverse to the order of the economic conditions of their families. The principle of equity in a Democratic State requires that the State ensure the neediest the conditions to achieve equality, in relation to the more fortunate, through access to and enjoyment of social, economic, technological, and cultural goods. Equity is a requisite condition for transforming equality, as a universal principle, into reality.

10. Duties of the family, society, and the State

The *family* is the first pillar of the child's care and education. It has a fundamental role in early childhood. Brazil's education statute, the National Education Law (LDB),⁵⁷ recognizes this role when by characterizing early childhood education as complementary to the actions of the family and community.

However, *society* is also responsible for its children. The first layer of this responsibility resides in respect for the rights of the child. No person, organization or business organization may violate any rights or abstain from any situation in which the rights of the child are infringed. In addition, through its social, cultural, religious and community organizations, society exercises: (a) the right to participate in formulating policies for children; (b) the right to participate in joint councils with the government on matters concerning the rights of the child; (c) the duty to care for its children through projects and actions that support public policies and provide direct assistance to children and their families; (d) the prerogative to create, support and participate in child protection and care networks at the community level; and (e) the prerogative to promote and participate in campaigns and actions undertaken to raise social

awareness on the meaning of early childhood.

The *State* has a dual role with respect to children and their families. First, it is tasked with executing economic and social policies that ensure families have the means to meet their role in providing care and education to children; second, it must formulate and operate policies, programs, and actions for children, as part of a specific age group, with a view to ensuring their fundamental rights.

Policy guidelines

1. *Attention to the absolute priority prescribed in the Budget Guidelines Law (LDO),⁵⁸ Multi-Annual Plan and the Budget for the purpose of meeting all requirements as arise to fulfill the rights of the child (and adolescent).* The constitutional determination and political decision to place children (and adolescents) at the top of State's priorities creates the obligation to include and keep in place the requirement in the Budget Guidelines Law and Multi-Annual Plan that annual budgets contain sufficient financial resources to ensure the priority is met. Children are in our hearts, laws, speeches, and even social policies; if they are not reflected in budgets, their voice will echo in the void, rendering the efforts of administrators, professionals, and anyone else dedicated to assisting children for naught.
2. *Linking and supplementing the National, State, Federal District and Municipal Plans for Early Childhood.* Each level develops a Plan appropriate to its local reality, with the national Plan serving as a source and point of reference. This will ensure Plans are linked and complement each other throughout Brazil.
3. *Maintaining a long-term perspective.* It is important to pursue goals and targets persistently over many years, in order to

⁵⁷ *Lei de Diretrizes e Bases da Educação.*

⁵⁸ *Lei de Diretrizes Orçamentárias.*

guarantee dignified life conditions and promote the full development of all Brazilian children. There are many children and many problems, and only continuous action over several years to meet objectives will effectively address the hardships in which a large proportion of children are mired. The combination of the National Plan for Early Childhood, launched in 2010, with the state plans, federal district plan and municipal plans, effective through 2030, will provide young children in Brazil with a standard of living and development consistent with that due to all children through promotion of their rights.

4. *Developing joint plans: government and society* promoting co-responsibility of the State, society, and families. Just as the National Plan for Early Childhood grew out of a cooperative process between society and government, from original design to final draft, initially within the scope of the National Network for Early Childhood and, thereafter, as part of an open discussion with society, the State, Federal District and Municipal Plans were or are in the process of being developed by means of a participatory process as well. This effort fulfills Article 227, paragraph 7, in conjunction with Article 204, subsection II, of the 1988 Brazilian Federal Constitution and Articles 4, 7 and 12 of Law 13257/2016 (Early Childhood Legal Framework). Hence their technical quality and social legitimacy.
5. *Participation of the Legislative Branch* in developing the Plan. The National Plan for Early Childhood in 2009 and 2010 was developed with the participation of the National Congress Joint Parliamentary Front for the Promotion of the Rights of the Child and Adolescent,⁵⁹ in its capacity as a member of the National Network for

Early Childhood. The revised and updated Plan prepared in 2019 and 2020 also included the participation of the National Congress Joint Parliamentary Front on Early Childhood.⁶⁰ The equivalent Parliamentary Fronts within State Legislative Assemblies and Municipal Councils could serve as an initial bridge to the respective legislative bodies by engaging these in crafting equivalent early childhood plans at the state and municipal levels.

6. *Assigning priority to the neediest regions, geographic areas, or localities.*
7. *Participation of the Child and Adolescent Rights Guarantee System.* The component bodies of the system have played an important, indeed essential, role in defending and guaranteeing the rights of every child and early childhood. As coordination between the Executive and Judicial Branches and the Executive Branch and the Councils for the Rights of the Child and Adolescent increases, the effectiveness and efficacy of the related actions will grow in kind.

Technical Guidelines

1. *Comprehensiveness of Early Childhood Plans*, encompassing all the rights of the child in the family, community, and institutional setting.
2. *Multisectoral actions* that are applied in an integrated fashion for children.
3. *Valuing the processes* that foster the defense, protection, and promotion of children.
4. *Valuing and qualifying professionals* enga-

⁵⁹ Frente Parlamentar Mista de Promoção dos Direitos da Criança e do Adolescente.

⁶⁰ Frente Parlamentar Mista da Primeira Infância.

ged directly with children, whose activities bear relation to the quality of life of children through 6 years of age. The guiding motto is *caring for those who care*.

5. *Recognizing how the child is seen, heard, and assisted* reveals the value we confer, the respect we have, the solidarity and commitment we take on toward them; recognizing, in addition, that the child assimilates the messages attached to these feelings and values based on how he or she is treated by adults.
6. *Qualified listening to the child*, as a capable and participative subject, with consideration for their messages and responses to their participation.

7. *Focusing on outcomes*. Insistence and persistence are necessary to achieve the goals and targets of the National Plan for Early Childhood.

8. *Transparency, availability, and dissemination of the data collected from monitoring and evaluation of the National Plan for Early Childhood*. The data will serve as indicators to ensure social participation and monitoring of the Plan's execution. Disseminating the progress made will help ensure the Plan serves as an instrument for transforming the life and development conditions of children and the country and for ensuring society remains interested in the Plan through tracking its execution and contributions made to its implementation.

III.



Healthy
children

The National Plan for Early Childhood is based on the concept of health as a socially and historically constructed phenomenon arising from social determinants that produce either access or barriers to a dignified and decent life.⁶¹ More than a medical assistance paradigm, health involves understanding life as a social value that is nurtured in the everyday lives of individuals and their relationships.⁶²

The 1988 Brazilian Federal Constitution enshrines health, in conjunction with the protection of motherhood and early childhood, as a social right. In addition, health is defined as a right of everyone and a duty of the State, which, for its part, must take steps to reduce the risk of disease and other illnesses through appropriate social and economic policies.⁶³ This definition illustrates the complexity of the subject, while deeper analysis of its meaning reveals the need for intersectoral and interdisciplinary actions that create the conditions for a healthy life.

The Constitutional text is even more assertive in addressing the earliest stages of life: *It is the duty of the family, society and the Government to assure children, adolescents, and youths, with absolute priority, the rights to life, health, nourishment, education, leisure, professional training, culture, dignity, respect, liberty and family and community harmony, in addition to safeguarding them against all forms of negligence, discrimination, exploitation, violence, cruelty, and oppression.*⁶⁴

The 2010 National Plan for Early Childhood offered contributions to expand and deepen the policy agenda vis-à-vis the commitment to children's comprehensive health. Reexamination of the text ten years later serves to update the context of children's health in Brazil and more thoroughly assess the advances and challenges of fully guaranteeing right of children to health and, by extension, a dignified life.

⁶¹ Final Report of the 8th National Conference on Health.

⁶² Remarks of Emerson Elias Merhy at the 16th National Conference on Health, August 2019.

⁶³ BRASIL. Constituição (1988). *Constituição da República Federativa do Brasil*. Brasília: Senado, 1988.

⁶⁴ Text given by Constitutional Amendment 66, of 2010.

Following approval of the National Policy on Comprehensive Child Health Care (PNAISC),⁶⁵ in August 2015, Brazil ratified its commitment to comprehensive and integrated attention and care, so as to promote and protect the health of children: in addition to proposing a reduction in child morbimortality, it advocates for an environment in which dignified life conditions can be facilitated and full development promoted. In 2018, additional progress was achieved with the publication of a guidance document on implementation of the seven strategic axes of the National Policy on Comprehensive Child Health Care, highlighting the need for intersectoral coordination, investments in key health priorities and the comprehensive nature of children's needs, in consonance with the vision set forth in the Early Childhood Legal Framework. For its part, the National Plan for Early Childhood focuses on specific aspects of children's health in the first years of life, in particular mental health, with a view to ensuring health protection, promotion, recovery and rehabilitation.

1. Strategic priorities

Recognizing that the health status of a child is related to their basic rights, such as the right to health, nutrition and nourishment, development, and special protection, where necessary, as well as responsive care, the National Plan for Early Childhood argues for incentivizing and supporting a range of health policy guidelines to which priority investments must be channeled. The guidelines encompass integrated health actions aimed at pregnant women and children through 6 years of age based on strategies considered essential to this purpose. Specifically, actions consist in humanizing health care for women and children and providing access to and enhancing the related services. They also center on more effectively integrating the various services and enhancing participation by families and the community as health

⁶⁵ *Política Nacional de Atenção Integral à Saúde da Criança*.

promotion agents, with a view to increasing the effectiveness of social participation and monitoring of public actions adopted at the different levels of government.

The Early Childhood Legal Framework (Law 13257/2016) highlights health measures involving home visits, guidance and training (article 14), access to women's health programs and policies (article 19, which amends article 8 of the Statute on the Child and Adolescent), policies on oral health and dental care (article 24, which amends article 14 of the Statute on the Child and Adolescent) and supply of medications, orthoses, prostheses and other assistance technologies free of charge (article 21, which amends article 11 of the Statute on the Child and Adolescent). Also of note are the amendments to Consolidated Labor Laws (CLT)⁶⁶ to ensure fathers the right to accompany their pregnant wives or partners and children through 6 years of age at health care appointments.

In addition, professional training, including for health agents (article 9), is prescribed. As such, the National Plan for Early Childhood deems differentiated capacity building for health professionals to be of fundamental importance, specifically through continuing training and educational initiatives intended to provide them with the tools to address the complexity of issues involved in the delivery of care to children and their families. Further, for many health service professionals parenting is a novel experience that requires ongoing instructional guidance to ensure it is incorporated in day-to-day practices. Above all, the Plan insists that early childhood professionals be valued, given the complex aspects involved in professional practices for children.

Health Science and Psychology studies on growth and development confirm the importance of breastfeeding and nutrition, parental care and the relationships forged in the home environment, the family and cultural setting, in order to ensure the social protection of children as a fundamental right to life, regardless

of the child's life circumstances or place of residence. These are critical components for the physical and mental health of the child: they carry implications for consolidating the individual's subjectivity on a stable foundation, as well as for the child's overall development. Yet, despite the progress made in these areas of knowledge, there remains a shortfall with respect to their practical application in the lives of children and families.

Even prior to birth, maternal and external factors can influence a baby's health. At the time of birth, the child is wholly dependent on the human and physical environment to provide support and care appropriate to their physical and emotional needs. When these basic conditions are absent or insufficient, there are consequences for the child's physical and mental health. Therefore, a young child's physical and mental health cannot be separated. Body and mind are intimately related, mutually influencing each other. The common tendency to separate the two, whether due to the traditions of professional practice in different sectors or whether the product of didactic factors relating to their study, does not correspond to the lived experience of children, particularly in early childhood. When the initial environment is unfavorable, risks to harmonious development surface. Such an environment can render the child vulnerable to physical, social, emotional, and cognitive challenges that persist throughout life.

Therefore, the objectives of the various sectors engaged in providing assistance cannot remain detached from each other. With this in mind, the National Plan for Early Childhood proposes that mental health actions be addressed as a cross-cutting issue and operationalized at every level of care, beginning with primary health care, moving through prenatal care, childbirth and postpartum and, finally, longer-term tracking of the child's development by primary and specialized care services.

Substandard public policies and increased poverty, without the support of an adequate and effective social protection network, heighten environmental obstacles and complicate the interaction of families with their sons and daughters.

⁶⁶ *Consolidação das Leis do Trabalho*. Corresponds to Brazil's applicable labor legislation.



ters, potentially exposing children to what is referred to as toxic stress, caused by situations of severe, frequent or prolonged suffering in which children do not receive adequate support from their mothers, fathers, or primary caregivers.⁶⁷ Studies show that toxic stress can impact brain structure and increase the risk of chronic stress-related diseases. There are, in fact, clear indications that poverty and the conditions that frequently accompany poverty, such as inadequate housing, pollution and the absence of sanitation and clean water, poor nutrition, unemployment and violence, produce toxic stress by affecting the brain's interactions, connections and formation.⁶⁸ This is precisely why public policies to support and strengthen families are so important.

In 2015, the United Nations (UN) unveiled the Sustainable Development Goals (SDG), which set out a new agenda of commitments centered on sustainable development and improving conditions of life for all people through 2030.⁶⁹ The Chapter titled *The Sustainable Development Goals for and with children* lists the targets Brazil is required to meet by 2030 in connection with the SDG's *Health and Well-being* goal.

2. Current setting

2.1. The status of early childhood health

Infant mortality is an important indicator of a population's health and overall life conditions.⁷⁰ According to data of the Ministry of Health, the infant mortality rate in Brazil fell 16.7% in

the period 2010-2015 (from 16.0 to 13.3 deaths per child under age 1 year for every 1000 live births). However, after 26 years of steady decline, 2015 and 2016 saw an increase of 4.8% in the infant mortality rate (to 14.0 deaths for every 1000 live births).⁷¹ In 2016, the under-five child mortality rate climbed as well: 16.4 deaths per 1000 live births, corresponding to an increase of 3.2% over the previous year.⁷²

The economic crisis, in conjunction with financial austerity policies, have had a negative impact on infant mortality rates. Studies show that current austerity policies, which place limits on social investments under the New Fiscal Regime introduced by Constitutional Amendment 95 in 2016, will likely increase the infant mortality rate by 8.6% through 2030, insofar as without imposition of a spending ceiling, which places spending limits on social programs, a full 124 000 hospitalizations and 20 000 deaths of children up to 5 years of age could be prevented over the next 12 years.⁷³ The right to health requires taking into account the need for adequate funding of public policies in the health sector.

Another serious issue is infant mortality in the first week of life (early neonatal death, closely linked to prematurity) and mortality of infants born to adolescent mothers.

In 2016, the primary causes of death were related to: (a) neonatal complications in pre-term delivery (25%); (b) congenital anomalies (24%); (c) neonatal encephalopathy due to asphyxia or trauma at birth (15%); (d) other neonatal period disorders (15%); and (e) neonatal sepsis and other neonatal infections (12%). The first five

67 *Childhood Neglect Erodes the Brain*. Available at: <<https://www.sciencemag.org/news/2015/01/childhood-neglect-erodes-brain>>. Accessed: 5 March 2020.

68 SHONKOFF, Jack P. *How Poverty Affects the Brain*. 2016. Available at: <<https://developingchild.harvard.edu/media-coverage/how-poverty-affects-the-brain/>>. Accessed: 5 March 2020.

69 Available at: <<https://nacoesunidas.org/pos2015/agenda2030/>>. Accessed: 28 April 2020.

70 DUARTE, C. M. R. *Reflexos das Políticas de Saúde sobre as Tendências da Mortalidade Infantil no Brasil: Revisão da literatura sobre a última década*. Cad. Saúde Pública 2007; 23:1511-28.

71 Available at: <https://www1.folha.uol.com.br/cotidiano/2018/07/com-zika-e-crise-no-pais-mortalidade-infantil-sobe-pela-1a-vez-em-26-anos.shtml?utm_campaign=anexo&utm_source=anexo>. Accessed: 10 July 2018.

72 Saúde Brasil. Available at: <<http://svs.aids.gov.br/dantps/centrais-de-conteudos/publicacoes/saude-brasil/saude-brasil-2018-analise-situacao-saude-doencas-agrivos-cronicos-desafios-pespectivas.pdf>> e em <<https://portalarquivos2.saude.gov.br/images/pdf/2018/setembro/13/Oficina-mortalidade-materna-e-infantil-CIT-ME-SA-Ana-Nogales.pdf>>.

73 *Child Morbidity and Mortality Associated with Alternative Policy Responses to the Economic Crisis in Brazil: A nationwide microsimulation study*. Available at: <<https://journals.plos.org/plosmedicine/Article?id=10.1371/journal.pmed.1002570>>. Accessed: 28 April 2020.

causes were responsible for 91% of deaths of children under the age of 1 year in 2016.⁷⁴

Another type of assault on the health of children is violence: in the period 2011-2017, a total of 219 717 cases of violence against children 0 to 9 years of age were reported in Brazil. The figure translates into 86 cases every day. Of the total, 26.4% involved sexual violence, the majority against children under age 5 (n = 29 686). Girls were the primary victims of reported sexual violence in the 0 to 5 years age group (n = 24 592).⁷⁵

Since 2015, vaccine coverage in Brazil has fallen. Measles, a disease up to that point controlled by widespread immunization, has surged to worrying levels.

Despite the advances in Brazil as a whole, regional disparities within the country are a cause for concern, as they highlight cruel inequities, in particular among populations rendered vulnerable by poverty and social exclusion, including the homeless, Black populations, the Indigenous, *ri-beirinhos*,⁷⁶ *Quilombos*, and families and children of traditional populations and communities.

The North and Northeast Regions registered a significant increase in infant deaths in 2015 and 2016: 5.0% and 1.6%, respectively. In those two Regions as well as the Southeast Region, child mortality rose in the same period: by 3.8%, 5.6% and 1.8%, respectively.⁷⁷ Many of these situations require more than simply universal policies. Rather, practices that meet the specific needs of different social groups are needed.

Maternal mortality is another challenge requiring special attention. Indeed, this was the only Millennium Development Goal (MDG) that Brazil failed to achieve.⁷⁸ The target man-

dated reducing maternal deaths to 33 per 100 000 by 2015; however, in 2016 maternal deaths actually increased from 62 to 64 per 100 000. The North and Northeast Regions have the highest rates (84.5 and 78, respectively), with the state of Amapá registering 141.7. The South and Southeast Regions have the lowest rates: 44.2 and 55.8, respectively. Approximately 92% of maternal deaths derive from preventable causes: they occur primarily due to hypertension, internal bleeding or infections and induced abortions. Here, again, discrimination based on skin color and ethnicity is a factor, as the majority of maternal deaths in Brazil occur among Black women between the ages of 15 and 29 years.

In accordance with the Sustainable Development Goals (SDG), Brazil committed to reducing maternal mortality to 20 per 100 000 live births by 2030; however, due to current conditions in the country, the target has been reduced to 30 per 100 000.

The Stork Network⁷⁹ strategy was created by the Brazilian Federal Government in 2011 to track women from conception and pregnancy (primary care) through delivery and postpartum, as well as to monitor the development and growth of their children up to the age of 6 years. The strategy offers rapid testing for pregnancy, syphilis and HIV and resources to expand prenatal exams, increase and adapt adult Intensive Care Unit (ICU) beds, ICUs and neonatal ICUs, provide high-risk pregnancy beds, as well as to adapt maternity ward environments and build and fund Normal Childbirth Centers and Maternity, Newborn and Postpartum Homes.

On the nutritional front, early introduction of highly processed foods has had harmful consequences on the health of children. According to data from the 2013 National Health Survey, a total of 60.8% of Brazilian children under the age of 2 had already eaten cookies, biscuits, or cake and 37.4% had already consumed soft drinks or artificially flavored juices.⁸⁰

⁷⁴ *Pesquisa Nacional de Saúde – PNS 2013*. IBGE. Available at: <<https://biblioteca.ibge.gov.br/visualizacao/livros/liv94074.pdf>>. Accessed: 5 May 2020.

⁷⁵ Available at: <<http://portalarquivos2.saude.gov.br/images/pdf/2018/junho/25/2018-024.pdf>>. Accessed: 5 May 2020.

⁷⁶ Traditional communities of riverbank dwellers.

⁷⁷ Available at: <<http://tabnet.datasus.gov.br/cgi/defthtm.exe?sim/cnv/inf10uf.def>>. Accessed: 5 May 2020.

⁷⁸ The goal was to reduce maternal mortality by 75% through 2015.

⁷⁹ *Rede Cegonha*.

⁸⁰ Available at: <<https://biblioteca.ibge.gov.br/visualizacao/livros/liv94074.pdf>>. Accessed: 5 May 2020.



Child dental care and dental education are issues that have garnered more recent attention in the Brazilian child health field. The first infant dental programs were introduced in Japan⁸¹ and Great Britain⁸² in the mid-1970s. Brazil's first program was established by the State University of Londrina (Paraná) in 1980.⁸³

According to the Ministry of Health, *oral health has an impact on the overall health and quality of life of the whole of society.*⁸⁴ The axiom that the comprehensive health of children begins with the mouth pertains. Moreover, education plays a singular and important role in oral health, which goes well beyond good hygiene to prevent dental caries or reduce the rates thereof.

Dental caries has affected the human race since pre-history and, although preventable, continues to represent a significant challenge to public health. Recent data demonstrate that dental caries affects approximately 2.4 billion people around the world. Approximately 621 million children live with untreated carious lesions, resulting in cavitation.⁸⁵

The most recent oral health survey conducted in Brazil revealed a 48.2% prevalence rate of untreated carious lesions in 5-year-old children, meaning that practically half of all young children in Brazil have at least one tooth with caries and, worst of all, that have not been treated.⁸⁶

Considering the statement in the initial part of this Plan, “[...] *how the child is seen, heard*

and assisted reveals the value we confer, the respect we have, the solidarity and commitment we take on toward them; recognizing, in addition, that the child assimilates the message attached to those feelings and values based on how he or she is treated by adults”, we can affirm that the relationship of children with their pediatric dental care and parents, in addition to the conversations had in the social sphere, are critical to shaping the self-image, ideas and behaviors of children in regard to their mouths and teeth.

Use of distorted language can induce apprehension, generate fear of procedures performed in the mouth and on teeth. Prevailing notions about the mouth and dental caries in many families and in schools and about pediatric dental practitioners and their assistants no longer align with the present view of children as integral beings.⁸⁷

Dental education seeks to provide guidance on the use of appropriate language from the earliest age to describe dental caries and how they form. Pediatric dentistry strives to forge a bond between the dental professional and the child who entrusts his or her oral health to the practitioner. Respectful dialogue between the pediatric dental practitioner and the child, informed by entirely different sets of knowledge, experiences and worlds, fosters the necessary confidence and learning on the part of the child about their comprehensive health. After all, when reclining into the dentist's chair, the child brings a unique story, replete with positive and negative experiences.

2.2. Health policies for early childhood

Among current policies for early childhood in Brazil, a number of actions now underway are deemed of particular importance in this PNPI, due to their complementarity and integration in day-to-day services:

⁸¹ Information on dental care for mothers of infants four aged months or older treated at public health services.

⁸² The parents of children attending London daycare services received dental education, and their children were provided with preventive care by practicing professionals.

⁸³ WALTER, L. R. F.; FERELLE, A.; ISSAO, M. *Odontologia para o Bebê: Odontopediatria do nascimento aos 3 anos*. São Paulo: Artes Médicas, 1997. Cap.1, p.1-5.

⁸⁴ Available at: <<https://biblioteca.ibge.gov.br/visualizacao/livros/liv94074.pdf>>. Accessed: 5 May 2020.

⁸⁵ KASSEBAUM, N. J.; BARNABÉ, E.; DAHIYA, M.; BHANDARI, B.; MURRAY, C. L. J.; MARCENES, W. *Global Burden of Untreated Caries: A systematic review and metaregression*. J. Dent. Res. 2015; 94:650-8.

⁸⁶ SB Brasil 2010. *Pesquisa Nacional de Saúde Bucal*. Ministério da Saúde, Brasília (DF), 2012. Available at: <https://bvsm.s.saude.gov.br/bvs/publicacoes/pesquisa_nacional_saude_bucal.pdf>. Accessed: 6 April 2020.

⁸⁷ BARBOSA, Clarice G. *Odontoeducação: uma abordagem multidisciplinar*. Florianópolis. Dissertação de Mestrado em Mídia e Conhecimento. Faculdade de Engenharia de Produção da UFSC, 2000.

- A. National Policy on Comprehensive Child Health Care and promotion of maternal breastfeeding and healthy complementary feeding⁸⁸ as a strategic axis;
- B. Family Health Strategy (ESF);⁸⁹
- C. Community Health Agent Program (PACS);⁹⁰
- D. National Policy to Reduce Morbidity and Mortality due to Accidents and Violence;⁹¹
- E. Healthy Brazilian Girls and Boys Strategy (EBBS);⁹²
- F. School Health Program (PSE);⁹³
- G. National Strategy for the Promotion of Maternal Breastfeeding and Healthy Complementary Feeding⁹⁴ under the Unified Health System – SUS;⁹⁵
- H. Breastfeed and Nourish Brazil Strategy (EAAB);⁹⁶
- I. Child Booklet;
- J. SUS Neonatal Unit;
- K. Friend of the Child Hospital Initiative (IHAC);⁹⁷
- L. Stork Network;
- M. Prenatal Strategy for Partners;⁹⁸ and
- N. Adolescent Health actions for health and sexual and reproductive rights.

The Healthy Brazilian Girls and Boys Strategy was developed by the Ministry of Health, in 2007, as part of the More Health Plan⁹⁹ to contribute to the formulation and implementation of the National Policy on Comprehensive Child

Health Care. The Healthy Brazilian Girls and Boys Strategy was launched to accomplish this objective through an initiative between the Ministry of Health (Children's Health and Maternal Breastfeeding Division)¹⁰⁰ and the Oswaldo Cruz Foundation (*Fiocruz*) (Fernandes Figueira National Institute for the Health of Women, Children and Adolescents – *Fiocruz/IFF*).¹⁰¹

Subsequently, the Healthy Brazilian Girls and Boys Strategy was deployed to develop and execute the Comprehensive Care Strategy for Children with Congenital Zika Virus Syndrome (CZVS)¹⁰² and STORCH (syphilis, toxoplasmosis, rubella, cytomegalovirus, herpes simplex), an initiative encompassing, additionally, the families of children, through the delivery of capacity building to professionals and public officials in the broader children's care field, including Education and Social Assistance.

Following the conclusion of the pilot project in Rio de Janeiro, the initiative was extended to six states in the Northeast Region. The primary instruments employed to this end were the Child Health Booklet and the International Classification of Functioning, Disability and Health (ICF). Other strategies included professional and family awareness-raising and technical and home visits involving the production of genograms and ecomaps to enhance Care Lines and Assistance Networks. The process also involved developing action plans on Comprehensive Health Care to Children with CZVS and STORCH and their families.¹⁰³

The concept of a conducive environment to life was adopted as the guiding principle of the Healthy Brazilian Girls and Boys Strategy and,

⁸⁸ Ordinance 1130, dated 5 August 2015. Institutes the National Policy on Comprehensive Child Health Care within the framework of the Brazilian Unified Health System (SUS).

⁸⁹ *Estratégia Saúde da Família*.

⁹⁰ *Programa de Agentes Comunitários de Saúde*.

⁹¹ *Política Nacional de Redução da Morbimortalidade por Acidentes e Violências*.

⁹² *Estratégia Brasileirinhas e Brasileirinhos Saudáveis*.

⁹³ *Programa Saúde na Escola*.

⁹⁴ *Estratégia Nacional para Promoção do Aleitamento Materno e Alimentação Complementar Saudável no SUS*.

⁹⁵ *Sistema Único de Saúde*.

⁹⁶ *Estratégia Amamenta e Alimenta Brasil*.

⁹⁷ *Iniciativa Hospital Amigo da Criança*.

⁹⁸ *Estratégia Pré-Natal do Parceiro*.

⁹⁹ *Plano Mais Saúde*. Formalized by Ordinance MS/GM 2395, dated 7 October 2009.

¹⁰⁰ *Coordenação de Saúde da Criança e Aleitamento Materno*.

¹⁰¹ Fundação Oswaldo Cruz (Instituto Nacional de Saúde da Mulher, da Criança e do Adolescente Fernandes Figueira – Fiocruz/IFF).

¹⁰² *Estratégia de Atenção Integral às Crianças com Síndrome Congênita do Zika Vírus*.

¹⁰³ The EBBS's ten years of engagement in this joint initiative with the Ministry of Health and a summary of the publications on the actions undertaken in the territories during this period, in addition to the methodology used in each stage, may be viewed at: <<https://mail.google.com/mail/u/0?ui=2&ik=032363abb1&attid=0.1&permmsgid=msg-a:r3853594732585087215&th=1700cd9f32731877&view=at&disp=safe&realattid=1700cd8aced506baff71>>. Acesso em: 5 de maio de 2020.



subsequently, the National Policy on Comprehensive Child Health Care, combining both affective and emotional factors that, for the purpose of fostering positive health outcomes, create an inseparable connection between mental health and its social determinants on children and their caregivers. It underscores the need for awareness-raising among different stakeholders on the importance of biopsychosocial interventions and citizenship-building, as an alternative to the mere deployment of complex technological devices aimed at guaranteeing good health care.¹⁰⁴

The National Policy on Comprehensive Child Health Care is organized around six strategic axes:

- I – Humanized and Qualified Care for Pregnancy, Labor, Delivery, Birth, and the Newborn.
- II – Maternal Breastfeeding and Healthy Complementary Nourishment.
- III – Promotion and Monitoring of Growth and Integral Development.
- IV – Integrated Care for Prevalent Childhood Diseases and Chronic Diseases in children.
- V – Comprehensive Care for Children in Situations of Violence, Prevention of Accidents and Promotion of a Culture of Peace.
- VI – Health Care for Children with Disabilities or in Specific Situations of Vulnerability.
- VII – Surveillance and Prevention of Infant, Fetal and Maternal Mortality.

These pillars are aimed at guiding and enhancing child health actions and services in Brazil, based on the social determinants and conditioning factors that ensure the right to life and he-

*alth, with a view to effectuating measures that allow for the birth and full development of children in a healthy and harmonious manner, as well as to reduce their vulnerability to and risk of illness and other health conditions and prevent chronic disease in adult life and the premature death of children.*¹⁰⁵

The strategic pillars have been planned to cover the principal issues affecting Child Health, including health promotion actions and strategies, disease prevention, comprehensive care, and rehabilitation actions, from pregnancy through birth, based on infant and child mortality and morbidity indicators, and are aimed at addressing the specificities of the health-disease process at the various stages of a child's life.

The National Policy on Comprehensive Child Health Care and the National Plan for Early Childhood affirm that *children need an environment that fosters their growth and maturation, and permits, based on individual genetic potential, full development of their motor, cognitive, and socio-affective capacities, and skills.*¹⁰⁶ In addition, the National Policy on Comprehensive Child Health Care adheres to the following principles, which accord with those of the National Plan for Early Childhood:

1. Right to life and health.
2. Absolute priority of the child.
3. Universal access to health.
4. Comprehensive care.
5. Equity in health.
6. Facilitating environment for life.
7. Humanized care.
8. Participatory management and social participation and monitoring.

Also of note is the similarity between the PNPI's *Purposive Actions – Healthy Children*, put forth in 2010, and the guidelines of the National Policy on Comprehensive Child Health Care, which must be observed when developing children's

¹⁰⁴ PENELLO, Liliãne Mendes (org). *Estratégia Brasileirinhas e Brasileirinhos Saudáveis: A contribuição da Estratégia Brasileirinhas e Brasileirinhos Saudáveis para a construção de uma Política de Atenção Integral à Saúde da Criança*. FIOCRUZ. Rio de Janeiro: Instituto Fernandes Figueira, 2013.

¹⁰⁵ Ordinance 1130, dated 5 August 2015, which institutes the National Policy on Comprehensive Child Health Care within the scope of the Unified Health System. Available at: <http://bvsmms.saude.gov.br/bvs/saudelegis/gm/2015/prt1130_05_08_2015.html>. Accessed: 5 May 2020.

¹⁰⁶ *Op. cit.*

health plans, programs, projects, and actions:

1. Inter-federative management of Child Health actions.
2. Organizing actions and services in the health care network.
3. Promoting health.
4. Fostering autonomy of care and co-responsibility of the family.
5. Qualifying the SUS workforce.
6. Planning and developing actions.
7. Incentivizing research and knowledge production.
8. Monitoring and evaluation.
9. Intersectoral approach.

The National Policy on Comprehensive Child Health Care promotes the importance of connecting health care and the quality and creative fruition of life, a process that occurs in line with the country's sustainable growth and development. It represents an innovative public policy vision of the interaction between the initial moments of life – with emphasis on the care and bond of mothers and/or fathers or caregivers for and with the child – and the patterns of growth and development that begin to take shape through the inter-relationship that fosters individual, genetic resources and the conditions offered by the physical, emotional, and social environment.

This Plan highlights a number of actions, on the basis of which the suggestions and recommendations below are put forth:

- (A) Humanizing maternity wards and enhancing the quality of prenatal care, especially for women in situations of vulnerability, such as those deprived of liberty.
- (B) Qualifying professionals for urgent and emergency obstetric procedures.
- (C) Expanding reproductive planning actions.
- (D) Promoting, protecting, and supporting maternal breastfeeding.
- (E) Qualifying care for newborns.

(F) Implementing and monitoring the National Policy on Comprehensive Child Health Care¹⁰⁷ through widescale distribution of the Child Booklet and tracking of the child's growth and development.

(G) Investigating cases of child mortality in order to address the related determinants and conditioning factors in a rational manner.

(H) Monitoring the actions of the National Immunization Program.¹⁰⁸

(I) Implementing and monitoring the National Policy on Food and Nutrition,¹⁰⁹ by controlling nutritional deficiency and micronutrient addition in children's diets and promoting healthy nutrition in childhood.

(J) Preventing accidents, mistreatment, and all forms of violence in childhood.

The guidelines on intersectoral actions contained in Federal Government policies and actions were reflected in the Caring Brazil Program.¹¹⁰ Developed in 2012, the initiative centered on a coordinated effort by the Ministries of Health, Education and Social Assistance to plan and execute actions for children 0 to 6 years of age from families most affected by poverty – namely, those served by the Family Grant Program. The initiative consists of a suite of early childhood education and supplemental food and nutrition services and actions provided through the School Health Program for children enrolled at public daycare or preschool establishments or establishments otherwise providing services to the municipality by means of a formal agreement. The supplemental payment of 50% of the FUNDEB student/school year grant per new matriculation served as a financial incentive to municipalities (in order to actively identify the target children). In

¹⁰⁷ *Política de Atenção Integral à Saúde da Criança.*

¹⁰⁸ *Programa Nacional de Imunização.*

¹⁰⁹ *Política Nacional de Alimentação e Nutrição.*

¹¹⁰ *Programa Brasil Carinhoso.* Law 12722/2012. Available at: <http://www.planalto.gov.br/ccivil_03/_Ato2011-2014/2012/Lei/L12722.htm>. Accessed: 28 April 2020.



addition, municipalities also received a 60% increase over their allotted funds for school meal and supplemental vitamin services. While the program remains in place, in recent years it has not received additional financial resources and its activities have been interrupted.

3. Recommendations

3.1. Prenatal care

1. Strengthen the technical capacity, treatment and quality of care provided by health and educational services to pregnant women, their partners, and their families.
2. Guarantee seven or more medical appointments for pregnant women, including an HIV test and other laboratory tests.
3. Incorporate the Partner Prenatal Care Strategy¹¹¹ in Primary Health Care, as a way to bring men into the care and bonding process. During the prenatal period, the father's support to the future mother and their child is of fundamental importance, as is that of other family members. Paternity involves profound changes in a man's role within the family and society, often with significant consequences for his psychological state and relationship with his partner. Frequently, and mistakenly, regarded as of secondary importance by prenatal care services, care for future fathers should be included as part of public health programs.
4. Guarantee protection against neonatal tetanus by immunizing expectant mothers.
5. Provide information on the importance of exclusive maternal breastfeeding up until the 6th month of life.
6. Prepare the expectant mother and her

partner for child delivery, maternity, and paternity, placing greater emphasis on psychological support.

7. Create interdisciplinary strategies and actions in the prenatal period, with a view to more effectively configuring the mother's psychosocial environment and her support network, with particular attention to pregnant women with symptoms of depression, adolescent mothers, pregnant women victims of violence and pregnant women who declare their intention to surrender their newborns for adoption.
8. Ensure access by all men and women, including adolescents, to contraceptive methods, family planning and educational actions intended to promote health and sexual and reproductive rights.
9. Provide special attention to adolescents, pregnant women, and mothers in situations of vulnerability, in particular those deprived of liberty, victimized by violence and living in itinerant situations.
10. Encourage pregnant women to prepare a child delivery plan. Qualify health services and health professionals to assist pregnant women in preparing their child delivery plan and follow each pregnant woman's plan during child delivery.
11. Carry out our educational activities using participatory methodologies that address pregnancy, childbirth, postpartum, child-care, maternal breastfeeding, immunization, and other relevant topics.

3.2. Humanized obstetric and neonatal care

1. Organize access, adjust service availability to make it adequate and strengthen the Hospital System, including by expanding and qualifying reference hospitals for at-risk pregnant women and newborns.

¹¹¹ *Estratégia Pré-Natal do Parceiro.*

2. Guarantee adequate care in maternity units at the time of childbirth, in order to avoid mishaps that force pregnant women into having to jump through hoops to secure a hospital bed.
3. Guarantee, when necessary, rapid HIV testing on the day of delivery.
4. Support coordination between the reference team and health service at which delivery is performed by involving both teams in the prenatal and postpartum care process and joint determination of hospital discharge
5. Guarantee, prior to discharge from hospital, scheduling of a childcare and postpartum appointment or home visit especially by Primary Care staff to the residence of the mother and newborn, with a view to reducing the risk of neonatal death.
6. Ensure the right to a companion during labor, delivery and postpartum, pursuant to Law 1108/2005, and Law 13257/2016, and the right to joint accommodation (mother and baby “room-in” together), including in private facilities.
7. Prepare health services to receive men in the prenatal, delivery and postpartum periods by adapting restrooms, installing curtains, and adopting other strategies to safeguard the privacy of women.
8. Support safe normal or natural child delivery. This Plan recommends that decreasing the rate of unnecessary Cesarean sections be included as a strategic action of the National Pact for the Reduction of Maternal and Neonatal Mortality.¹¹²
9. Guarantee skin-to-skin contact between mother and baby and maternal breastfeeding in the first hour following delivery, as well as joint accommodation (mother and baby “room-in” together).
10. Ensure the presence of a pediatrician trained in neonatal resuscitation at all institutional child deliveries.
11. Ensure qualified assistance at all home births and coordinate care with Primary Health Care staff. Train traditional midwives and doulas in regions where their services are necessary and develop simple risk identification criteria to allow for timely transfer to high-complexity perinatal care facilities.
12. Plan and execute paternal preparation programs to promote active and caring paternal parenting.
13. Increase the number of Friend of the Child Hospital units so as to provide due attention to the mother/father-child connection and encourage the father’s engagement in neonatal care.
14. Adopt strategies to prevent obstetric violence,¹¹³ including obstetric violence by reason of ethnicity.¹¹⁴
15. Ensure linkage of pregnant women to the facility where delivery is to be performed right from the last trimester of pregnancy, while guaranteeing pregnant women’s right to opt for another facility, in accordance with Article 8, paragraph 2, of the Statute on the Child and Adolescent, as per the text given by Article 19 of Law 13257/2016.
16. Undertake actions in partnership with ma-

¹¹³ Obstetric violence means appropriation of women’s bodies and reproductive processes by health professionals through dehumanized treatment and abusive medicalization and pathologization of natural processes, causing loss of autonomy and of the capacity of women to take decisions regarding their own bodies and sexuality, thereby negatively impacting their quality of life, as per the definition set forth in Argentinean Law 26485/2009, which was pioneer in typifying this type of violence.

¹¹⁴ The Women’s Global Network for Reproductive Rights notes that institutional violence and violence against women during pregnancy, childbirth and postpartum or obstetric violence may apply in the following cases: (a) denial of treatment during pregnancy; (b) verbal humiliation; (c) disregard for the needs and pain of the mother; (d) invasive practices; (e) physical violence; (f) unnecessary use of medications; (g) forced or coerced medical procedures; (h) detention in facilities due to nonpayment; and (i) dehumanizing or abusive treatment. It may apply, as well, in cases of discrimination based on race, ethnic or economic origin, age, HIV status, gender non-conformity, and others.

¹¹² *Pacto Nacional pela Redução da Mortalidade Maternal e Neonatal.*



ternity ward staff to promote a protection network for pregnant women, encouraging family and community support, especially for vulnerable families, with a view to preventing newborns from being separated from their families of origin, by means of “protected hospital discharge”.¹¹⁵

3.3. Maternal breastfeeding and child nutrition

Breastfeeding is of special importance, as it reduces infant mortality, prevents the incidence of diarrhea, respiratory infections, allergies, hypertension, high cholesterol and diabetes, in addition to diminishing the risk of obesity, enhancing cognitive development and facilitating the formation of emotional bonds.¹¹⁶ Precisely because it is essential for child development and favors maternal health, the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) recommend exclusive breastfeeding in the first 6 months of life, followed by introduction of healthy complementary feeding and continued breastfeeding through the age of 2 years, at least, as set forth in the Ministry of Health’s *Nutritional Guide for Brazilian Children Under Age 2*.¹¹⁷

In this light, the National Plan for Early Childhood recommends:

1. Expanding the National Network of Human Milk Banks in hospitals/maternity wards with intensive care or intermediate

care units for newborns and implementing collection services in health centers.

2. Supporting maternity leave through the infant’s 6th month of life.
3. Providing complementary feeding to maternal milk after the 6th month of life and applying the 12 steps for healthy nutrition.¹¹⁸
4. Ensuring implementation of breastfeeding rooms for working women.
5. Strengthening oversight of the Brazilian Norm on the Commercialization of Food for Breastfeeding Infants and Young Children, Bottle Nipples, Pacifiers and Baby Bottles (NBCAL).¹¹⁹
6. Promoting partnerships between sheltering services and milk banks, in order to ensure maternal milk to children separated from their mothers at the beginning of life.

3.4. Healthy nutrition, combating malnutrition and deficiency anemia and preventing excess weight and obesity in childhood

Malnutrition is among the most unacceptable of rights violations, one that continues to put the lives of thousands of boys and girls at risk. To ensure the human right to nourishment and food and nutritional security, the Brazilian Government approved implementation of the National Policy for Food and Nutritional Security (PNSAN)¹²⁰ and adopted the Global Strategy

¹¹⁵ For further information on the concept of protected discharge (*alta protegida*), see *Linha de Cuidado para a Atenção Integral de Crianças, Adolescentes e suas Famílias em Situação de Violências*. Available at: https://bvsmms.saude.gov.br/bvs/publicacoes/linha_cuidado_crianças_famílias_violencias.pdf.

¹¹⁶ BRASIL. Ministério da Saúde. *Saúde da Criança: Nutrição Infantil, Aleitamento Materno e Alimentação Complementar*. Brasília: Editora do Ministério da Saúde, 2009, p. 13-18. Available at: http://bvsmms.saude.gov.br/bvs/publicacoes/saude_crianca_nutricao_aleitamento_alimentacao.pdf. Accessed: 5 March 2020. See also: SBP. *A Adolescência e o Aleitamento Materno*. Available at: https://www.sbp.com.br/fileadmin/user_upload/_22265e-DocCient_-_A_Adolesc_e_o_Aleitamento_Materno.pdf. Accessed: 6 March 2020.

¹¹⁷ *Guia Alimentar para Crianças Brasileiras Menores de 2 Anos*. Available at: http://189.28.128.100/dab/docs/portaldab/publicacoes/guia_da_crianca_2019.pdf. Accessed: 28 May 2020.

¹¹⁸ BRASIL. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Atenção Básica. *Dez passos para uma alimentação saudável: guia alimentar para crianças menores de dois anos : um guia para o profissional da saúde na atenção básica*. Brasília: MS, 2015, 2^a ed.; 72 p. Available at: https://bvsmms.saude.gov.br/bvs/publicacoes/guia_dez_passos_alimentacao_saudavel_2ed.pdf. Accessed: 20 May 2021.

¹¹⁹ *Norma Brasileira de Comercialização de Alimentos para Lactentes e Crianças de Primeira Infância, Bicos, Chupetas e Mamadeiras*.

¹²⁰ Decree 7272 of 25 August 2010. Available at: http://www.planalto.gov.br/ccivil_03/_Ato2007-2010/2010/Decreto/D7272.htm. Accessed: 29 April 2020.

for Infant and Young Child Feeding (WHO/UNICEF). The policy reflects the importance of nutrition in the first months and years of life, as well as the critical role that adequate nutritional practices play in ensuring positive health outcomes for individuals.

In recent years, child malnutrition rates in Brazil have fallen significantly. Yet, the phenomenon, in particular chronic malnutrition, remains a serious problem in low-income metropolitan areas, Brazil's Semi-Arid Region, the Amazon Region and within Indigenous and *Quilombola* communities in virtually every state.

It is equally important to track the quality of food consumed by children. Children without balanced diets are at higher risk of suffering from what is known as hidden hunger, involving insufficient intake of basic nutrients that can lead to any number of health issues.

In recent decades, significant behavioral changes relating to diet and physical activity have exacerbated the incidence of child obesity. Low-income families are particularly susceptible to this hazard, which itself is connected to child malnutrition, to the extent that children with a history of malnutrition are, according to the literature, at higher risk of obesity in the future.

Other studies¹²¹ identify a relationship between fragile mother/child bonds and the child's nutritional status: even in situations of social vulnerability, child malnutrition was lower in mothers who cared for their children. The evidence reinforces the need for ensuring that all actions on this front include efforts to enhance the affective bonds between mothers and their infants.

According to data from the United Nations Food and Agriculture Organization (FAO), in the period 2002-2013 the number of undernourished

Brazilians fell 82%, leading to Brazil's removal from the United Nations' Hunger Map. However, given the increase in extreme poverty in Brazil in recent years, there is a risk that hunger could climb to worrying levels again.

In addition, Brazil is in the midst of a nutritional transition, in which the problem of energy-protein malnutrition has given way to the risk of obesity arising from poor nutrition. Results of the Household Budget Survey (*POF*)¹²² for the period 2008-2009, consolidated by the Brazilian Institute of Geography and Statistics and published in 2010, revealed an increase in the number of overweight children 5 to 9 years of age: in 1989, the total stood at 15% of all children, rising to 34.8% by 2008-2009.

In this light, the National Plan for Early Childhood proposes the following:

1. Develop actions to reduce chronic malnutrition and severe malnutrition in areas of greatest vulnerability.
2. Organize information, education, and communications campaigns to promote adequate nutrition of sufficient quantity and quality based on healthy eating and lifestyles.
3. Stimulate intersectoral actions aimed at securing universal access to food.
4. Strengthen the Food and Nutritional Surveillance System.
5. Ensure compliance with the prohibition on child advertising, in particular publicity promoting foods high in sugar, fat and sodium.
6. Ensure that school environments are free from the obesogen effect.

¹²¹ 1) NÓBREGA, F. J. *Vínculo Mãe/Filho*. Rio de Janeiro: Revinter; 2005. 2) VIEIRA, V. L.; SOUZA, M. P.; CERVATO-MANCUSO, A. M. *Insegurança Alimentar, Vínculo Mãe-Filho e Desnutrição Infantil em Área de Alta Vulnerabilidade Social*. Rev. Bras. Saúde Mater. Infant., 2010; 10: 199-207. 3) CARVALHAES, Maria Antonieta de Barros Leite; BENÍCIO, Maria Helena D'Aquino. *Malnutrition in the Second Year of Life and Psychosocial Care: A case-control study in an area of Southeast Brazil*. Cad. Saúde Pública, 2006; 22: 2311-8.

¹²² *Pesquisa de Orçamentos Familiares*.



3.5. Health surveillance by Primary Health Care personnel

On this front, the Plan proposes the following:

1. Qualify and raise awareness among Primary Health Care teams to focus on the mother-infant pair, as well as the father-infant (caregiver-infant) pair and promote a holistic view of the child.
2. Intensify care for newborns and postnatal women in the first week following childbirth, when the risk of death is most prevalent, by undertaking the following actions to enhance coverage and reinforce the linkage between the woman/mother and newborn with their primary health care center:
 - (A) Assess the woman/mother and newborn, with special attention to the postnatal woman's psychological state and development of the mother/child bond.
 - (B) Ensure the woman/mother and newborn are vaccinated.
 - (C) Conduct neonatal screening (encompassing the *Guthrie Test*, *newborn eye screening*, *newborn hearing screening* and *newborn heart screening*).
3. Qualify Primary Health Care teams to conduct home visits as of the newborn's first week of life, with a view to stimulating optimal development of the child, and provide care and support to children with specific needs.
4. Build the capacity of teams to attend to the needs of the families of children with nutritional deficiencies and excess weight, in order to identify signs of mistreatment and neglect, as well as to recognize children in situations of violence and to provide information intended to prevent accidents involving children.
5. Ensure early provision of services for monitoring and stimulating children with disabilities and/or developmental delay.

3.6. Care for hospitalized children

Hospitalized children require the presence of their mother. Hospitalization disrupts their lives and can lead to one or more consequences, including anxiety, distress, insecurity, aggressiveness, emotional disorders, sleep disorders, language disorders, weight loss, depression, regression, and developmental delay.¹²³

Children have the right to know why they are in a health care environment and why they cannot go home. It is important to talk to children about impending procedures and what is expected of them. Omitting this information runs counter to the protection of children: it denies them the right to know what is happening to them and what course of action is being proposed. Their status as subjects of rights pertains equally in situations and contexts of ill health. Recognizing this ensures greater cooperation and facilitates the rehabilitation process.

Article 24 of the Convention on the Rights of the Child prescribes: *Not only does realization of the rights in Article 31 contribute to the health, well-being, and development of children, but adequate resources for children to enjoy the rights therein when they are ill or hospitalized play an important role in facilitating their rehabilitation.*

The hospital environment, the hospital ward and the hospital room should be welcoming. Drawings, family objects and toys can bridge the distance between the hospital and home, giving life to the place. Play spaces and the opportunity to meet other children helps reduce stress and maintain activities creative and instructive. Law 11104/2005 mandates the implementation of playrooms in health units that offer in-patient pediatric care. Hospital playrooms¹²⁴ should be coordinated by

¹²³ HENRIQUES, Daniela Cruz; CAÍRES, Fabiana Martins de. *A Criança Hospitalizada: Manual de orientação aos pais*. Sociedade Brasileira de Pediatria. Available at: <<https://www.sbp.com.br/imprensa/detalhe/nid/a-crianca-hospitalizada-manual-de-orientacao-aos-pais/>>. Accessed: 5 March 2020.

¹²⁴ See more on this action in the chapter titled *The right of all children to play at playing*.

professionals with experience as educators, artists, toy librarians and give special attention to ensure personnel are trained to work in health settings.

3.7. Monitoring growth and development

The Child Booklet¹²⁵ is an important instrument to enhance the quality of life of children by enabling health professionals and families to track the growth and development of children. It also has a role in promoting communication between professionals and families, as it includes information on children's rights, expected development, nutrition, among others, and provides for early detection of disorders that could affect their health, nutritional status, and mental and social capacities. In addition, it offers alerts on vaccinations and indicates compliance or noncompliance with the individual child's immunization program.

The Child Booklet is also essential for registering progress in the child's development and growth process (weight, height, and head circumference), in addition to serving as a record of the child's immunization history. It can further be used by early childhood education and social development professionals to contribute to the development of integrated care practices centered on children and their families.

Home visits and monitoring by community health agents are critical for tracking and early intervention of risks identified in the Child Booklet and during community visits.

Preventive actions can reduce the costs associated with more complex care. Childcare visits and/or other opportunities for interaction with health professionals represent an invaluable tool for following the overall development of children and detecting potential risks to their comprehensive health, i.e. biopsychosocial. To

this end, professionals must have the appropriate training to perform the related functions, including record entry proficiency.

Essential actions in this area include:

1. Monitoring the integral growth and development of the child's health through the Child Booklet, which must be available at all primary health care facilities, health centers, maternity wards, hospitals, and doctor's offices.
2. Assistance to families based on their needs and capacities and qualification of child caregivers within the extra-family social network, in accordance with and pursuant to the building of affective bonds with the mother, substitute figure, father, family and social network.
3. Identifying *developmentally at-risk* children, according to the parameters set out in the Child Booklet, to ensure more frequent monitoring, including through home visits and the application of strategies to promote and strengthen bonds and an affirming home environment, as provided for in item 2.
4. Adopting the same approach when identifying *developmental changes*, referring the child for assessment of the potential need for early intervention and stimulus within an appropriate setting of the Care Network.
5. Incorporating attention and care regarding psychological development in public maternal-child health care programs, with a view to ensuring comprehensive health care for the child.
6. Establishment of interdisciplinary childcare teams in maternal and child health units and exclusive childcare facilities, with particular emphasis to the allocation of mental health professionals to Family Health Support Centers (NASF).
7. Capacity building of health unit professionals and other social policies to foster positive parental practices, as well as to detect

¹²⁵ The Child Health Booklet has been in use so far. However, approval and distribution of the Child Booklet is at an advanced stage.



and address mental disorders in children.

8. Stimulating the incorporation of ludic resources in actions across the entire Care Line.

3.8. Oversight and assistance

Proposed actions of the PNPI:

1. Expand the Strategy on Integrated Care for Prevalent Childhood Diseases (*AIDPI*).¹²⁶
2. Build the capacity of health professionals and mobilize administrators to reduce the vertical transmission of HIV/AIDS, with particular focus on the North and Northeast Regions.
3. Provide psychosocial support to seropositive children and their caregivers, ensuring the right to family and community coexistence and universal access to treatment.
4. Reduce the prevalence of congenital syphilis by supporting and providing information to couples on detection and treatment for expectant mothers and their partners.
5. Promote ear and eye health, with special attention to screening tests.
6. Promote oral health.
7. Foster measures as necessary for early detection of serious chronic diseases, such as type 1 diabetes, in Brazil's child population.
8. Promote public medical treatment programs, specifically for expectant mothers, infants, and children with diabetes.
9. Foster contact by children and their families with natural environments, as a physical and mental health promotion measure.

¹²⁶ *Estratégia de Atenção Integrada às Doenças Prevalentes na Infância.*

3.9. Care for children with disabilities

Actions proposed by the PNPI:

1. Promote and conduct studies and research on prevention, detection, and intervention to treat, at the earliest possible moment, developmental challenges.
2. Design, implement and strengthen intersectoral comprehensive health programs for children with disabilities, autism spectrum disorder and rare diseases, in order that they be included in health care networks, through the identification of barriers and situations of vulnerability, with the participation of the family and community.
3. Inform, assist and guide parents or guardians on the medical, psychological, and legal implications and adequate treatment that children with developmental delays need, as soon as they are detected.
4. Develop comprehensive health care programs for children that are adapted to the realities of traditional populations, including Indigenous and *Quilombola* communities.
5. Undertake efforts to promote the integral development of children in high-risk areas.
6. Ensure full compliance with Article 13, paragraph 3, of the Early Childhood Legal Framework, with respect to ensuring families are equipped to provide comprehensive care to children.¹²⁷
7. Intensify actions against institutional and structural racism, so as to ensure assistance to all children, regardless of race, skin color or ethnicity.

¹²⁷ *Article 13, paragraph 3, of Law 13257/2016: Pregnant women and families with young children shall receive guidance and training on responsible maternity and paternity, maternal breastfeeding, healthy complementary feeding, integral child growth and development, accident prevention and education on the use of physical punishment, pursuant to Law 13010, dated 26 June 2014, with a view to fostering the formation and consolidation of affective bonds and stimulating integral development in early childhood.*

3.10. Oral health actions

1. Promote a paradigm shift in communications with children so as to foster nonviolent forms of communication, as recommended by dental education.
2. Raise awareness in Brazil and among educators and health professionals on the importance of demystifying and resignifying the methods and processes involved in achieving satisfactory oral health in childhood by appropriate means.
3. Provide the child population with access to information on personal care and oral hygiene habits conveyed through dental education programs encompassed within the pertinent health promotion actions.
4. Improve Brazil's DMFT¹²⁸ index, with a view to bringing it closer to the recommendations of the World Health Organization (WHO).
5. In coordination with the educational field and the School Health Program, expand and qualify information on oral health provided in schools and daycare centers.

3.11. Joint and intersectoral actions

1. Develop and implement projects on the integral development of children, including their cognitive and emotional development, to which end entries in the Child Booklet may be recorded for purposes of intersectoral outreach and dialogue.
2. Implement work processes, together with health teams and social participation and monitoring bodies, to enable follow-up of the child by a professional health team from the time of birth through 6 years of age, with a view to establishing a solid therapeutic bond and sense of belonging.

therapeutic bond and sense of belonging.

3. Undertake health promotion actions in daycare centers and preschools, in coordination with the education field, including, to this end, promotion of parenting and follow-up of child development through School Health Program actions.
4. Strengthen and coordinate the various development promotion programs operated by different sectors of the State and civil society and between government organizations and nongovernmental organizations.
5. Reinforce the need for intersectoral coordination, particularly in regard to strategies relating to maternal breastfeeding and access to healthy food and assistance for children with disabilities.
6. Back the development of social support actions in coordination with other ministries, such as the Ministry of Education, the Ministry of Citizenship and the Ministry of Women, Family and Human Rights, by integrating actions and sharing information pertinent to the construction of comprehensive care centered on children and the family, in accordance with the essential needs of children and the needs of families and their social support networks.
7. Foster strategies on comprehensive care for children of traditional and vulnerable populations, such as Indigenous, *Quilombola*, riverine, *Caiçara*¹²⁹ and other communities, with a view to guaranteeing their right to life, reducing morbidity and mortality rates (which are well above those of other Brazilian children) and enhancing their lives.
8. Establish partnerships with civil society services, such as NGOs and Civil Society

¹²⁸ DMFT – decayed, missing and filled teeth.

¹²⁹ *Caiçaras* are communities formed by the combined ethno-cultural contributions of Indigenous populations, Portuguese colonizers, and, to a lesser extent, African slaves. Their way of life is based on itinerant farming, artisanal fishing, forest extractivism, and crafts. Source: INSTITUTO ECOBRASIL. Available at: <<http://www.ecobrasil.provisorio.ws/30-restrito/categoria-conceitos/1102-comunidades-tradicionais-caicaras>>.



Organizations of Public Interest (*OSCIPs*), for the purpose of implementing specific actions in situations not yet adequately covered by public services.

9. Widely disseminate: (a) Ministry of Health Ordinance 940, dated 28 April 2011, mandating assistance to Gypsy/Romany communities, itinerant groups, circus workers, transients and the homeless, without proof of registration and/or address; (b) Pan-American Health Organization (PAHO/WHO) Document CE 160/15, dated 4 May 2017, regarding its Policy on Ethnicity and Health,¹³⁰ and (c) Ministry of Health Ordinance 4384, dated 28 December 2018, instituting the National Policy on Comprehensive Health Care for the Gypsy/Romany People.¹³¹

4. Mental health care

At birth, children are completely dependent on a human environment to shelter and care for them in a manner appropriate to their physical and emotional needs.

An adequate environment and adequate care at the beginning of life, whether family, social or professional, are the most important factors for promoting mental health, understood as the product of all life situations in which children participate and by which they are influenced.

Affective bonds, therefore, serve as the foundational block for human development and as a communication channel. This requires us to recognize the environment as a catalyst and facilitator of the individual's life, development, and

formation. A child is born with vital power, which in combination with the maturation process, such as their *neurophysiological equipment*, can seek out a propitious environment – the mother and her surroundings – in which to forge a singular life path.

Understanding and sensitivity to the importance of this bond to the individual's formation within the multiple contexts of engagement with the child, whether involving the Health and Early childhood education fields or protection from vulnerabilities and sheltering situations, allows professionals to construct a secure foundation for the physical and mental health of children.

Early childhood experiences are today of even greater relevance given the discoveries made in relation to the maturation, development, mental processes and their neurochemical correlates, that occur in the first years of life. The concept of subjectivity has a consensual and interdependent relationship with the concepts of maturation, growth, and development. The bases for mental health are established in the first years of life and are dependent on the physical, affective, and symbolic relationships forged between the mother, the father (or substitute) and the child.

Biopsychosocial risk factors and vulnerabilities may adversely affect the overall development of children and result in mental disorders.

It is important to note, however, that psychopathological formations are highly mobile in the first years of life and, more importantly, can go into remission if treated immediately. As such, some developmental alterations and symptoms can be considered warning signs that require early intervention and treatment, which in many cases can provide children with the opportunity to resume their normal rhythm of development.

The keen and sensitive eye of health professionals who track child development, based on the uniqueness of each child and their family, can serve as a critical tool for detecting and diagnosing mental suffering and disabilities and building qualified care and assistance strategies.

¹³⁰ 160th Session of the Executive Committee of PAHO/WHO. *Policy on Ethnicity and Health*. Available at: <<https://iris.paho.org/bitstream/handle/10665.2/34195/CE160-15-p.pdf?sequence=3&is-Allowed=y>>. Accessed: 29 April 2020.

¹³¹ *Política Nacional de Atenção Integral à Saúde do Povo Cigano/Romani*.

In sum, the child's well-being and health are reflections of their vital experiences, as lived in their psychosocial environment, and encompass, in addition to family spaces, the actions of health professionals as well as educational, community and social spaces.

In this light, the present Plan lays out the following actions to promote mental health in early childhood:

4.1. Care for pregnant and postnatal women

Pregnancy is a time of intense physical and mental changes and, consequently, significant emotional vulnerability, a risk often overlooked or disregarded in present-day social discourse and practice. Identifying adversities and risk factors enables assessment of their influence on the lives of pregnant women and actions to promote an emotional environment that is conducive to vulnerable mothers, infants, and families.

Primary care professionals should be trained to notice and address signs of insecurity and anxiety in pregnant women. It is widely recognized today that postpartum depression, a serious public health challenge due to its high prevalence and the risk it poses to infants, generally manifests itself during pregnancy. Many of the emotional strains produced by pregnancy can be alleviated by more attentive listening on the part of professionals.

This task can be performed by health agents duly sensitized to the emotional dimensions of the maternal experience.

4.1.1 Adolescent pregnancy care

In Brazil, approximately 930 adolescents and young adults give birth every day, correspond-

ing to a total of more than 434 500 new adolescent mothers every year. That number was higher in the past and is now falling. Even so, Brazil registers one of the highest rates of adolescent pregnancy when compared to other countries in Latin America and the Caribbean, with 68.4 live births per 1000 adolescents and young adults.¹³² This means that 18% of all newborns are the sons/daughters of adolescent mothers.

Adolescence is a period in human development marked by physical, biological, social, and psychological changes and, as such, must be viewed through a number of lenses in order to better understand the dynamics of this stage of life and to promote comprehensive care. In this light, adolescent pregnancy requires specific precautions from care services and public policies: these need to ensure safe and accommodating spaces and environments are built.

For many adolescent women, pregnancy has little to do with voluntary and informed choices. It may be the consequence of gender inequalities, discrimination, rights violations (including child marriage), inadequate education, lack of prospects or even sexual coercion.

In general, the younger these adolescent women, the later they realize that they are pregnant and the later they seek health service care. Incomplete or inadequate prenatal care contributes to higher risk of maternal and neonatal mortality, as well as mortality among the children of adolescent mothers in their first two years of life.

For this reason, qualifying and raising awareness among professionals is essential in order to ensure they have a differentiated approach to pregnant adolescents and adolescent mothers, their partners and their families. Adolescent fathers should also receive special attention.

This Plan also recommends expanding the awareness campaign on adolescent pregnancy

¹³² Information from the Ministry of Health Portal. Available at: <<https://www.saude.gov.br/noticias/agencia-saude/46276-prevencao-de-gravidez-na-adolescencia-e-tema-de-campanha-nacional>>. Accessed: 29 April 2020.



to include youth from traditional populations and communities, in accordance with their ethnic and cultural identities.

4.2. *Childbirth preparations and care*

If preparation for childbirth has not already taken place, it should be done by a multi-professional team. The Stork Network implemented a variety of actions to help future mothers address what they often see as a traumatic experience. These actions include: (a) training for professionals (obstetric nurses, nurse midwives, doulas); (b) increasing the number of safe childbirth facilities (normal delivery centers attached to hospitals); (c) reducing the excessive number of Cesarean sections performed without clinical indication or basis in scientific data; and (d) undertaking actions to foster bonding with the newborn following birth.

4.3. *Support to the father and the family*

The active engagement of men/fathers in caring for children contributes to promoting their health and cognitive and affective development. Health services play a strategic role in strengthening the bonds between fathers (and other men responsible for providing care) and children.

A booklet prepared by the Rio de Janeiro Municipal Health Department lays out ten recommendations by which health centers can partner with fathers.¹³³ Given their potential utility for health departments in other municipalities, the recommendations are transcribed below.

In order to ensure that health centers effectively partner with fathers:

1. Promote reflection by staff on issues relating to masculinity, paternal care and methodologies for working with men.
2. Include fathers in routine services and invite them to health care visits, examinations and group care activities for children and partners, including contraception consultations, pregnancy tests and pediatric follow-up.
3. Encourage the participation of fathers in the prenatal, delivery and postpartum process, assigning important tasks to them, such as cutting of the umbilical cord or the baby's first bath. Publicize their right to be present at the time of birth.
4. Facilitate the presence of fathers in infirmaries to ensure they can monitor the condition of their hospitalized children.
5. Promote educational activities with men that address issues relating to care from a gender-specific perspective.
6. Include men by valuing their capacities, listening to their demands and suggestions, offering support in difficult circumstances, and encouraging them to care for their own health.
7. Propose adaptations to the environment that facilitate the presence of men, including the addition of chairs, beds, men's restrooms, dividers, pamphlets, and magazines in facilities.
8. Give visibility to the issue of paternal care by including them in the educational activities organized by health units, such as: contraception, prenatal care, breastfeeding and adolescent, parental and senior groups.
9. Offer alternative hours, including Saturdays and nightshifts, for consultations, group activities and hospital ward visits, in order to facilitate the presence of working fathers.
10. Establish partnerships with the community to strengthen the social network.

¹³³ Prefeitura do Rio de Janeiro. *Unidade de Saúde Parceira do Pai*. Agosto, 2009. Available at: <<https://elosdasaude.wordpress.com/2011/01/18/unidade-de-saude-parceira-do-pai/>>. Accessed: 28 April 2020.

*In sum, fathers enrich the lives of their children through expressions of affection and care that may differ from those of the mother. The health of mothers, in turn, is bolstered by reducing their workload inside and outside the house. Loving dedication to children also benefits men, broadening the masculine experience beyond that of a mere provider. In addition, men committed to caring relationships are at less risk of turning to alcoholism and violence and more likely to contribute to the well-being of the family and society.*¹³⁴

The Early Childhood Legal Framework provides important benefits for fathers who contribute to their engagement in childcare, among them:

(A) Increased paternity leave, from 5 to 20 days, for the employees of companies registered in the Company-Citizen Program.¹³⁵ The added time is offered to employees who provide proof of participation in paternity training programs or activities. Employees who adopt children or obtain legal custody of a child for purposes of adoption are eligible to invoke this right as well.

(B) The right to two (2) days to accompany a wife or partner at medical visits and complementary examinations during pregnancy and to one (1) day per year to accompany a child up to 6 years of age at medical appointments.

Additionally, paternity leave for employees of the direct or indirect public administrations, foundations and self-governing bodies of the Federal Government has been increased to 15 days, from the 5 days originally granted under the 1988 Brazilian Federal Constitution.¹³⁶ Some states and municipalities have opted to increase their benefit by a full month.

4.4. *Postpartum follow-up*

¹³⁴ *Op. cit.*, page 5.

¹³⁵ *Programa Empresa-Cidadã*.

¹³⁶ Decree 8737, dated 3 May 2016. Available at: <http://www.planalto.gov.br/ccivil_03/_Ato2015-2018/2016/Decreto/D8737.htm>. Accessed: 28 April 2020.

The return home with a newborn begins a period of adaptation for the family that should be included as a routine component of the follow-up performed by the health services.

Follow-up starts by linking the maternity service to the health center or primary health care facility responsible for following up on the infant's progress. The initial health service appointments in the infant's first weeks of life provide health professionals with the opportunity to not only evaluate the child's physical status, but to help establish the initial bonds between the mother, the father, and the child. In addition, postpartum home visits by nurses and routine Family Health Strategy home visits by health agents trained to support families in practical aspects of care in the first stages of life and the initial parent-child relationship, can result in important health promotion at a critical juncture of the child's life, using instruments and technologies appropriate for this purpose.

These approaches require health worker capacity building to raise awareness on the psychological dimension of the initial child-parent relationship and to prepare them to identify potential risk factors to the child's overall development, facilitating, in this way, timely referral to specialized child mental health care services. Early intervention is recognized to be most successful the earlier it takes place.

In the case of more vulnerable families, initial follow-up can facilitate in detecting risks that may require mobilization of a support network composed of the extended family, neighbors, friends and professional support staff in order to prevent the possibility of family separation.

4.5. *Complementary services: social assistance and education*

Staff at daycare centers, preschools and similar establishments play a prominent role in promoting mental health in early childhood and preventing future risks. With respect to daycare centers, which are educational spaces by definition, yet may also serve potentially as he-



alth and social assistance spaces, efforts must be concentrated on two fronts, as noted in the chapter on early childhood education: a) increasing the number of institutions able to serve child populations without access to services; and b) enhancing the service delivered by the existing infrastructure.

By offering complementary education and care to that provided by the child's family, daycare centers can serve as a conducive environment to the child's mental development, provided professionals are carefully selected, trained and supervised, and the corresponding physical structures are given priority. It is essential to meet the child's need for sunlight, access to fresh air, physical development, and growth through movement, in addition to other aspects of their emotional and social development. To this end, outdoor spaces in daycare centers involve more than architectural and landscaping features. They serve as environments for interaction, movement, and diversification of the child's bodily experiences with nature.

The National Plan for Early Childhood highlights the importance of recognizing the child as an integral being requiring integrated care and education. This perspective must be at the forefront of each working group and service and during the development of each intersectoral action and network action, given the sheer diversity of professionals dedicated to young children: daycare center and preschool teachers and technicians or auxiliaries, community health agents, nurses and pediatricians, social workers engaged with vulnerable families, etc.

The shared understanding that each child is unique, growing and developing within a distinct family and cultural environment with its own story, situated within a particular community and geographic territory, is essential. Singularization and territorialization are important markers for developing lines of mental health, comprehensive and integrated care, as social and educational services, in addition to primary health care services, are generally

the first to detect risk factors and warning signs in children.

Qualifying and raising awareness to notice that *something is not right with the child* allows for referral to the appropriate specialized services.

Qualified assistance is essential to ensure the mental health of children at daycare centers and preschools. This does not mean professionals who work there need to be imbued with knowledge of diagnosis or symptoms of developmental problems in children. For this, they have the Unified Health System and its various Mental Health Care Policies and Lines, with facilities and services involving specialized teams: Psychosocial Assistance Network (RAP-S),¹³⁷ Family Health Assistance Centers (NAS-F)¹³⁸ and Child-Youth Psychosocial Assistance Centers (CAPSi).¹³⁹ In addition, they have at their disposal a valuable source of guidance and information on health monitoring and surveillance on the integral development of young children: the Child Booklet.

Among the many lessons of the novel coronavirus (COVID-19) pandemic is the need to reinforce daily cleaning and hygiene of classrooms, toys, tables and chairs, closets, floors, patios, restrooms, cafeterias, and utensils, in addition to the importance of standardizing and monitoring staff through periodic health exams and reinforcing handwashing, teeth cleaning and bathing as part of health education practices.

4.6. *Specialized early childhood mental health teams*

The National Plan for Early Childhood emphasizes the importance of investing in initial training and continuing education of

¹³⁷ Rede de Atenção Psicossocial.

¹³⁸ Núcleos de Atenção à Saúde da Família.

¹³⁹ Centros de Atenção Psicossocial Infanto-Juvenil.

professionals dedicated to assisting children with early disorders and developing and strengthening multi-professional teams to ensure interdisciplinary actions.

As mentioned earlier, changes in development and symptoms presented by young children present a high degree of mobility when treated early. Therefore, it is necessary to maintain an ethical reserve, consideration of the role of the diagnostic process at this stage of childhood. Scientific studies on neuroplasticity and resilience and the clinical history of early intervention reveal different forms of clinical progression in psychopathological contexts, suggesting that changes occur in what originally seems to correspond to a specific diagnostic classification.

As such, this Plan proposes that consideration of diagnostic classifications in early childhood (and, by extension, the practice of specialists) represent a hypothesis, not a label, such that it remain open to fine tuning based on the child's singularity, not on the disorder. In this light, training should extend beyond the study of childhood development and include discussion of risk of iatrogenesis involved in early diagnosis in childhood.

The National Plan for Early Childhood underscores the importance of qualifying teams to adopt interdisciplinary approaches to the treatment of early developmental and mental disorders in children: teams prepared to deliver care to newborns or young children and their families. These teams can be incorporated in existing services, especially the Psychosocial Assistance Network, composed by Child-Youth Psychosocial Assistance Centers (CAPSi) and other services under the Unified Health System.

Family Health Assistance Centers (NASF) and CAPSi services and teams are points of reference in mental health in municipalities and geographic territories, which have been integrated with other education, social assistance and protection resources and networks. They are not, as such, specialized centers devoted to treating children under specific diagnostic classes.

The respective actions require consistent and

continuous public policies to enable expanded access and qualification of care provided by the public service system to young children with signs of mental suffering.

4.8. Building professional networks for early childhood attention and care

Building networks to support parents is imperative, given the economic and social changes that have isolated parents in the form of a family nucleus, dislocating them in what are often hostile and violent urban environments, distant from their family groups of origin. These networks are the product of collective action and a diversity of initiatives. Professionals with different characteristics, responsibilities and functions join in a combined effort that focuses on the child and the family. Support networks require complementary actions and presuppose a diversity of roles and responsibilities for participating agents, demonstrating just how complex and sensitive their construction is.

In this light, the CAPSi network, which plays a strategic role in coordinating with other health services and social assistance, education, and justice components, among others, exercises a central function in building and developing the Early Childhood Care Networks. For this reason, the National Plan for Early Childhood underscores the need to expand, strengthen and qualify professionals in these areas.

Assistance to young children and their families requires specific training and preparation that demand public interest and investments.

Article 13 of the Early Childhood Legal Framework points to the importance of protection and care networks in communities, providing that: *The Union, States, Federal District and Municipalities shall provide support to the participation of families in child protection care networks within their social, family and community contexts, with a view*



to, among other objectives, forming and strengthening family and community bonds, placing on those with priority contexts that present a risk to the child's development.

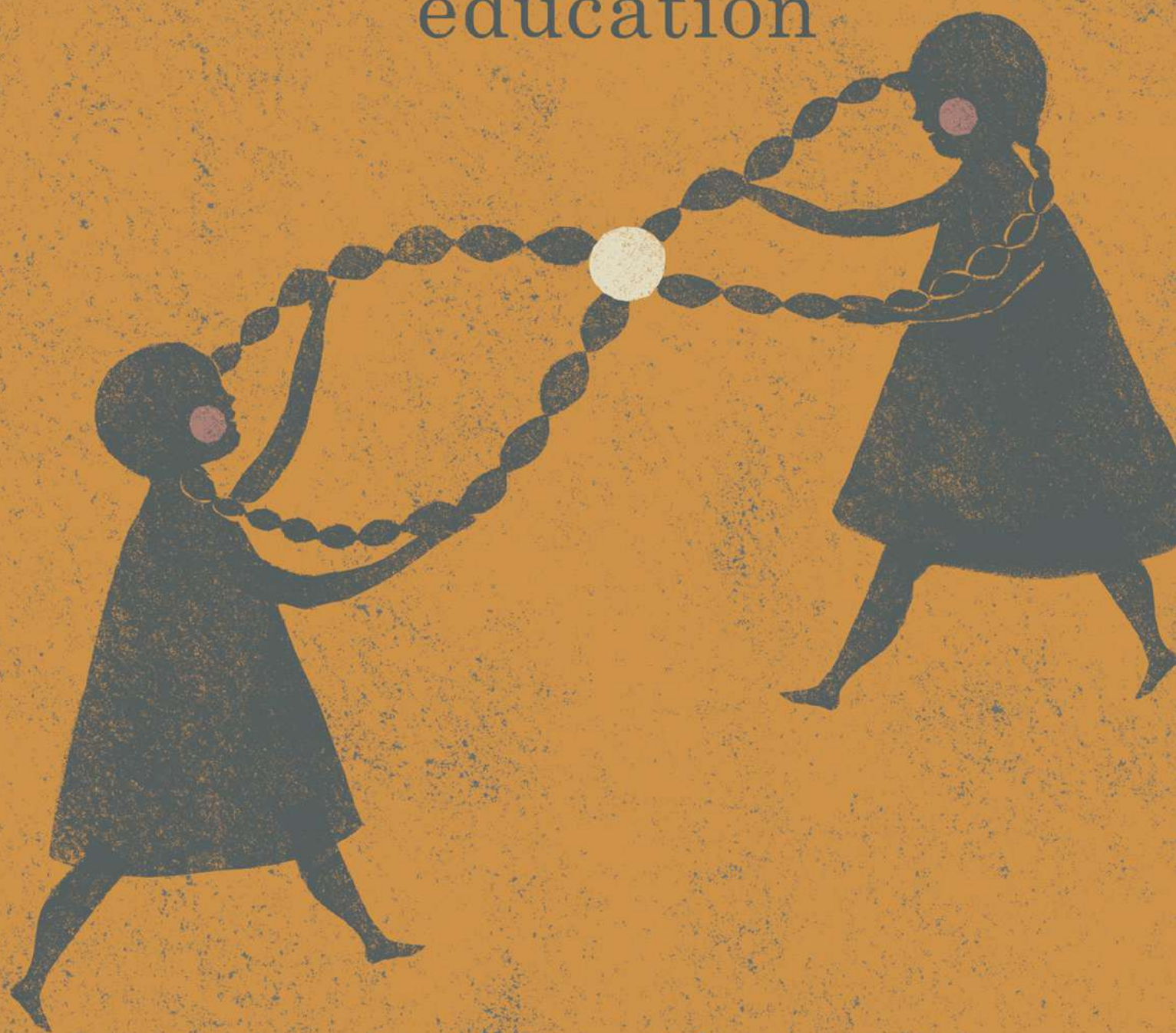
5. Education and information campaigns

Aware of the essential role that communications play in defending, fulfilling, and promoting the rights of the child, the Brazilian Congress mandated, through the Early Childhood Legal Framework, as one of the guidelines for public policies on early childhood, the need to promote a *culture of child protection and promotion*, with the support of the media.

The National Plan for Early Childhood recommends that information, education and communication campaigns be undertaken through broad dissemination in the media, specifically with respect to the following: (a) dental care for the mother-child pair, as well as the father-child pair, beginning in the prenatal period; (b) maternal breastfeeding and healthy feeding; (c) stimulating development; (d) preventing developmental delays, disorders and violence in the family environment; and (e) preventing domestic accidents, as well as other key issues for ensuring the health and well-being of young children.

Given that the best health strategy for reducing child morbidity and mortality (and, by extension, promoting health) is higher maternal educational levels, measures that provide learning opportunities for mothers should be prioritized.

Early childhood education



1. Introduction

Education is the process by which human beings are socialized. It is the most important instrument of social and economic development. Education is the conditioning factor for scientific progress, technological innovation, future invention, at the level of society, and for expanding the possibilities of human realization, at the individual level.

Under the Brazilian education system, Basic Education is defined as the essential level of academic attainment required for individuals to realize the potential inscribed in their DNA, be a part of the social dynamic and participate as conscious, critical and transformative members of society. Basic Education begins with early childhood education. This formative stage of the Basic Education cycle encompasses the period running from birth through 5 years of age (5 years, 11 months, and 30 days)¹⁴⁰, elucidating why it is defined as the first stage of the Basic Education System.

Early childhood education has secured and solidified its place in the realm of social representation, political discourse, legislation, and educational planning: its status as an irrevocable and inalienable right (articles 205 and 225 of the 1988 Brazilian Federal Constitution) and duty of the State, which, along with the full set of common basic rights conferred on the individual, must be guaranteed as an absolute priority (article 227). The State is charged with organizing the education system to ensure all children receive educational instruction from birth (articles 208 and 211 of the 1988 Brazilian Federal Constitution). The sustainability of early childhood education, made possible by the constitutionally mandated nondiscretionary financial resources earmarked through the Basic Education Maintenance and Professional Enhancement Fund (FUNDEB), has signifi-

cance above and beyond the mere guarantee of resource allocations: it reinforces and consolidates early childhood education as an intrinsic component of the Basic Education system.

The purpose of early childhood education, as prescribed by the National Education Statute, is to ensure the integral development of the child in their physical, psychological, intellectual, and social aspects, as a complement to the actions undertaken by the family (article 29). Early childhood education possesses specific characteristics by reason of the peculiar learning and development process associated with this age group. Indeed, its end purpose extends beyond serving as a propaedeutic to literacy learning or Elementary Education, a role often attributed to it in the past. Indeed, instrumentalizing early childhood education as a mere preparatory stage is a reductionist view that disregards the child's immeasurable learning and development potential right from the time of birth.

Multiple scientific fields have confirmed the importance of early childhood education for shaping personality, constituting the individual, building self-knowledge, and acquiring the values on which choices and decisions are based throughout life, with respect to the capacity for learning and taking action. The Pedagogical, Psychological, Biological, Medical, Psychoanalytical and, more recently, Child Sociological and Anthropological fields, as well as a number of others dedicated to the study of children and childhood, have steadily coalesced around the understanding that early childhood is critical to forming the individual's personality and shaping the full spectrum of human development – individual, social, political, and cultural. Studies in the Neurosciences, performed through the use of neuroimaging techniques, have demonstrated the importance of physical, socio-affective, and cognitive interaction in the first 6 years of life. The relationship between genetic capacities and experiences in the physical and social realms are well documented in studies and research. A heuristic environment in which children are the center of attention and within which they act and react, pose questions, and find responses, discover, and create, is of fundamental importance. Through their interaction with adults, children lift the veil

¹⁴⁰This assertion is based on National Education Council/Basic Education Board Resolutions 1, of 2010, and 6, of 2010, with regard to the cut-off age or date of enrollment in the first year of Elementary Education and preschool. The Resolutions were affirmed by the Brazilian Supreme Court in two rulings: Petition 2576-4/SC (2004) and Request for Clarification in Direct Action of Unconstitutionality 3756-1/DF (2007).

on reality, perceiving the true sense of things and building meaning for their own lives. Early childhood education is the organized learning experience conducted within the educational setting, for the very purpose of broadening and deepening that experience.

However, it is clear that early childhood education cannot protect, promote, and develop children independently or separately from other areas of life. It must be integrated in the actions of other sectors, including health, nutrition, family and community coexistence, rights protection, the environment, safety and security, culture...

The holistic view of the child outlined in this Plan underscores the need for integrated actions accomplished through intersectoral policies aimed at interconnecting the multiplicity of fields. Brazil has made progress in designing policies for childhood through an intersectoral approach aimed at ensuring comprehensive and integrated service provision. The policy has drawn on the contributions of lawmakers, the Executive Branch at the three levels of the Federation, civil society organizations and, more recently, the Judicial Branch.¹⁴¹ Its central challenge entails merging the actions of different sectors toward a unified conception of the child-person, social subject of rights, citizen, producer of culture, unique and distinct in the diversity of his and her childhoods. The policy focuses on the rights of the child and applies the guidelines provided for in the Early Childhood Legal Framework as its conditioning parameter, pursuant to article 4 of the statute, which creates a new paradigmatic Integrated Policy on Early Childhood.¹⁴²

¹⁴¹ National Pact for Early Childhood, coordinated by the National Justice Council. Available at: <<https://www.cnj.jus.br/programas-e-acoas/pacto-nacional-pela-primeira-infancia/>>. Accessed: 28 February 2020.

¹⁴² Law 13257, dated 8 March 2016.

An analysis of the setting

Recent decades have produced fruitful results toward responding to the long-standing demands of society. One of these involves enshrining early childhood education as a right of the child and duty of the State for all children, from birth through 6 years of age.¹⁴³

As of the 1988 Brazilian Federal Constitution, respectable progress has been achieved in connection with the legislation governing children's rights, studies and research on child learning and development and public policies focused on the first years of life. Approval of the National Education Plan 2014-2024 (*PNE*)¹⁴⁴ marked a milestone by establishing as its first target universalized early childhood education for children 4 and 5 years of age by 2016 and expanded daycare center service provision, with a view to ensuring this service for at least 50% of all children through the age of 3 years by expiry of the Plan (2024).

Despite the progress secured, daunting challenges remain, namely ensuring access to early childhood education, with different obstacles confronting the daycare and preschool segments on this front. In addition, pedagogical discourses and practices endure that reflect the vestiges of an early childhood education system either focused on merely *preparing* children for Primary School or confining its role to the custody and safekeeping of children, as a necessary evil, often resulting in an

¹⁴³ Law 11274, sanctioned in 2006, provided that Elementary Education run 9 years, beginning at age 6. Early childhood education was reduced by one year (from age 0 to 5 years, 11 months, and 30 days). In accordance with the guidance of the National Education Council, enrollment in Elementary Education occurs when the child has completed age 6 or will complete age 6 by 31 March of the year of admission.

¹⁴⁴ Law 13005, sanctioned in 2014.

illusory and mistaken substitution of the family unit. Consequently, progress is still needed on issues relating to access as well as the quality of the pedagogical project.

Preschool for children ages 4 and 5 has been compulsory since 2009.¹⁴⁵ Constitutional Amendment 59, sanctioned in 2009, added mandatory early childhood education as a component of the right to education by requiring the enrollment of all 4- and 5-year-old children in preschool. The constitutional text prescribes the duty of education systems to universalize early childhood education. Yet, full universal coverage, originally set to be reached in 2016,¹⁴⁶ has not been achieved. Of a total of 5 263 000 children 4 and 5 years of age,¹⁴⁷ 5 217 686¹⁴⁸ were enrolled in 2019, corresponding to 99% of the total and a resulting shortfall of 46 000 enrollments.

Daycare involves a twofold challenge: meeting the pressing demand for services through increased availability and ensuring quality, a necessary condition to ensure that the relevant educational objectives are met. Although a right of every child from the time of birth, not all families want or need daycare. The National Education Policy's target refers to coverage for at least 50% of all children. In other words, of the 10 223 000 children 0 to 3 years of age in Brazil,¹⁴⁹ at least 5.1 million will need to be enrolled in an educational establishment by 2024. As total enrollment in 2019 was 3 755 092¹⁵⁰ and given that expanded availability in the period 2015-2018 reached approximately 180 000 new enrollments per year, we can estimate that Brazil will continue to face a shortfall of 625 000

daycare places by the deadline set in the National Education Policy, unless expansion of the physical network accelerates.

It is worth asking: which children are not attending early childhood education? To which population segments do they belong? Where do they live? What are their income levels? What facilities does the education system offer them to access preschool? A review of the indicators on income, skin color/ethnicity, urban/rural residence reveals that children of Black, *Quilombola* and Indigenous descent and from traditional, rural, and low-income urban families have less access to water, sanitation, health, and education services. Inadequate basic services in the early years of life trigger a series of exclusions that are exacerbated throughout life, aggravating social inequality and perpetuating poverty cycles.

Black or brown children and those residing in rural households are less likely to access one of the vital components of early childhood education, namely daycare. In addition, enrollment rates lag among children in households occupied by adults with low educational attainment levels (no schooling or incomplete elementary education), while in households in which at least one member has completed higher education, attendance increases: in the former segment, average enrollment is 46.9%; in the latter group, 62.2%. The difference is due to location and access to available services, not specifically to interest or need.

A similar trend is verified when income is applied to examine differences in access to daycare: enrollment among children in the bottom 1/5 of the per capita household income bracket is 46%, well below that in the top 1/5, which register an enrollment rate of 66.9%. This trend reinforces inequalities from the beginning of life and the negative effects on learning throughout the child's schooling, as demonstrated by research (IBGE, 2018).

Denial of the right to early childhood education has ongoing consequences for the child, insofar as it is the one and only educational stage linked to a specific age, meaning it cannot be made up at a later time. Those who do not attend early childhood education will be at

¹⁴⁵ 1988 Brazilian Federal Constitution (Constitutional Amendment – EC 59 of 2009), article 208, subsection I.

¹⁴⁶ Law 12796, sanctioned in 2013, and Target I of the National Education Plan 2014-2024.

¹⁴⁷ IBGE, PNADC 2018 (Continuous National Household Sample Survey 2018). The 2010 Demographic Census estimated a far higher total: 5.8 million, indicating a reduction in the number of births. Available at: <<https://sidra.ibge.gov.br/Tabela/1378#resultado>>. Accessed: 27 February 2020. The data estimated by the Todos pela Educação program for 2018 reveal a 93.8% enrollment rate.

¹⁴⁸ INEP. Censo Escolar 2019. Available at: <<http://inep.gov.br/guest/inicio>>. Accessed: 24 February 2020.

¹⁴⁹ IBGE, PNADC 2018. The 2010 Demographic Census registered 10 925 892, indicating a significant reduction in births over the previous 8-year period.

¹⁵⁰ INEP. Censo Escolar de 2019.

a disadvantage for the rest of their lives. This applies equally to both children from poor families and also from well-to-do families.

The absence of daycare or places in institutions to which families might otherwise have access can serve to dissuade or impede many mothers, especially poor mothers, from taking paid work outside the home and giving them enhanced material conditions to meet the needs of their young children.

The inability of daycare centers to serve children produces a second anomaly, especially for the poorest and least educated population segments: the expansion of alternative services. These are generally provided by women from the community who open up their homes, in exchange for payment, to care for a group of children. These arrangements represent an inadequate and partial solution which does not fulfill the child's right to quality early childhood education at a level even minimally effective to ensure proper learning and development, nor do they meet the State's duty to guarantee children this fundamental right.

Access and quality are two sides of the same coin of any early childhood education program. Access without quality serves no one; to the contrary, it can be harmful. Quality for only a few constitutes a privilege and source of injustice, exacerbating social inequality.

The National Curricular Guidelines on Early Childhood Education (*DCNEI*)¹⁵¹ define the concepts of child and curriculum, the socio-political and pedagogical role of early childhood education, learning experiences and assessment. In identifying the two axes around which learning experiences and coexistence in early childhood education are organized – interaction and play – the Guidelines serve as a fundamental component of the National Early Education Policy.

The National Common Core Curriculum (*BNC-*

C),¹⁵² which devotes an entire section to early childhood education, caps the historic effort to recognize early childhood education as an essential initial age-specific stage of the individual's educational process. It introduces new contributions to the conceptual sphere (the right to learning and development) and pedagogical practice (fields of experience).¹⁵³ The learning and development objectives in each field of experience are brought closer to the day-to-day pedagogy of early childhood education.

This set of rights, fields and objectives represents the conditions that should be guaranteed in daycare and preschool environments and, additionally, applied to guide the development of curricula, understood in the National Curricular Guidelines for Early Childhood Education of 2009 as the set of practices that *embraces the tangible situations and experiences of children and their knowledge, interlacing them with the knowledge deriving from society's cultural heritage*.¹⁵⁴

Similarly to other documents on early childhood education, the Guidelines reiterate the educational intentionality of the teacher's role in planning, enriching, mediating, in short, shaping, together with the child, multiple and significant learning environments. This serves to foster an integrated curricular perspective that is flexible and contains possibilities for a significant range of learning experiences. Teachers recognize the pedagogical practices that align with this perspective, expand their possibilities and work to ensure that practices based on rote learning, standardization and restricted child participation are avoided. They are tasked with promoting participation that respects the characteristics of each childhood, according to the specific way children express themselves, participate and learn.

This curricular approach is supported by cur-

¹⁵¹ *Diretrizes Curriculares Nacionais da Educação Infantil*, approved in 2009. Available at: <http://portal.mec.gov.br/index.php?option=com_docman&view=download&alias=3748-parecer-dcnei-nov-2009&category_slug=fevereiro-2010-pdf&Itemid=30192>. Accessed: 15 April 2020.

¹⁵² *Base Nacional Comum Curricular*.

¹⁵³ Right to learning and development: 1. Coexistence; 2. Play; 3. Participation; 4. Exploration; 5. Expression; 5. Knowing oneself. Experience fields: 1. The I, the other and we; 2. Body, gestures, movement; 3. Features, sounds, colors, shapes; 4. Hearing, speech, thought, imagination; 5. Space, time, quantities, relationships, change.

¹⁵⁴ BRASIL. *Base Nacional Comum Curricular*, page 40. Available at: <<http://basenacionalcomum.mec.gov.br/>>. Accessed: 2 May 2020.

rent scientific studies that demonstrate the importance of interaction, in the first years of life, between children and adults and other children in a heuristic environment that nourishes exploration, investigation, creation and appropriation of new knowledge.

A growing number of studies in different geographic locations have confirmed that the quality of learning environments is important to ensure the best development outcomes for children in their various dimensions, as well as the full benefits of quality early childhood education for children from disadvantaged families. In addition, there are positive effects of quality on later educational stages.¹⁵⁵

Yet, despite these conceptual, legislative, policy and pedagogical advances, it is important to underscore the deficiencies in systematic information on the quality of early childhood education services. While access has been expanded, there is no systematic database on the reality of Brazilian daycare centers and preschools. Rather, there is a significant body of studies¹⁵⁶ produced throughout Brazil by a variety of researchers with disparate focus, sources and methodologies. However, most of this work is qualitative in nature and does not provide substantive numerical samples. As such, it does not offer an overview of the full range of learning opportunities, which could serve as an important contribution to the education policy making process.

Following wide-scale dissemination of the document *Quality Indicators on Early Childhood Education*,¹⁵⁷ a number of education systems established participatory institutional self-assessment procedures. In response, some

school communities mobilized to review management plans and educational practices and produce data on the strengths and weaknesses of their education services.

The discussions on quality assessment expanded in scope, culminating in 2011 in the formation of a working group that prepared a document titled *Early Childhood Education: Contributions to the construction of a systematic assessment model*,¹⁵⁸ published in 2012 by the Ministry of Education and the National Institute for Educational Studies and Research (MEC/INEP).¹⁵⁹ The document charts a course for assessment *in* and *of* early childhood education by noting that learning assessments should be performed within schools and that education systems should assess those elements of early childhood education that concern quality of access, inputs, and processes, to the extent these represent the conditions for and context of learning.

That study document and the proposals stemming from the effort were also mobilized by the National Education Plan (Law 13005, sanctioned in 2014), which includes among the strategies set out in Target 1: *implementing, by the second year of the National Education Plan, early childhood education assessments that are to be performed every two years according to national quality parameters, for the purpose of evaluating physical infrastructure, professional staff, administrative conditions, pedagogical resources, status of accessibility and other relevant indicators.*

There are indications within the Federal Government that the National Assessment of Early Childhood Education (ANEI), which was designed to evaluate inputs through questionnaires and interviews, will be performed by means of a sampling method. Within local education systems, early assessment experiences have been implemented that could evolve into systematized external assessment tools.

The trend in coming years is likely to move toward the three dimensions of assessment, with a view to consolidating a systematic approach.

¹⁵⁵ MELHUIISH, Edward. *Efeitos de longo prazo da Educação Infantil: evidências e política*. Cadernos de Pesquisa. V. 43, n° 148, p. 124-149, jan./abr. 2013.

¹⁵⁶ CAMPOS, Maria Malta; FULLGRAF, Jodete; WIGGERS, Verena. *A qualidade da educação infantil brasileira: alguns resultados de pesquisa*. Cadernos de Pesquisa, São Paulo, v. 36, n° 127, p. 87-128, abr. 2006. Available at: <http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0100-15742006000100005&lng=en&nrm=iso>.

¹⁵⁷ *Indicadores de Qualidade da Educação Infantil*, document prepared by the Ministry of Education, UNICEF, National Union of Municipal Education Leaders (UNDIME), Orsa Foundation and Ação Educativa. MEC, Brasília, 2009. Available at: <http://portal.mec.gov.br/dmdocuments/indic_qualit_educ_infantil.pdf>. Accessed: 2 May 2020.

¹⁵⁸ *Educação Infantil: Subsídios para a construção de uma sistemática de avaliação*.

¹⁵⁹ Instituto Nacional de Educação Profissionalizante (MEC/INEP).

ach that enables evaluation and monitoring of early childhood education services (public and private), thereby strengthening, to a degree, at least, the guaranteed right of children to learning and development as prescribed in the National Curricular Guidelines for Early Childhood Education and the National Common Core Curriculum/Early Childhood Education.

At the time of implementation of the National Common Core Curriculum/Early Childhood Education, when states and municipalities are focused on developing and reviewing curricula and pedagogical proposals, it is important that broad and diversified tracking and assessment strategies be designed for the range of early childhood education contexts that encompass their varied dimensions, with the participation of different actors in the education system.

It is also important to underscore professional training and working conditions. According to the 2018 statistical synopsis of basic education, there were 589 893 educators in the early childhood education system that year. Of these, 300 136 served as educators in daycare centers and 329 040, in preschools. Among daycare center professionals, 292 801 were female, while only 7335 were male. In preschool establishments, there were 312 149 female educators and 16 891 male educators. The low participation of men in early childhood education aligns with the global trend.¹⁶⁰ This is due to the widely adopted view that only women are equipped to care for and educate infants and children, a notion that has negatively impacted efforts to professionalize early childhood education.

The de-professionalization of early childhood education has been perpetuated and exacerbated by the contracting of auxiliary staff lacking the requisite qualifications to deliver educational services to children, as required by law. Among daycare educators, 204 291 have completed undergraduate degrees, yet not all have undergone teacher training; 94 021 hold a High School Education diploma, while 1824 have only completed Elementary Education. A total of 83 464 have postgraduate training, 82 318 of

which include a specialization. Among preschool educators, 234 550 have undergraduate degrees, while 3378 have earned their certificates. A total of 93 239 hold a High School Education diploma, while only 1251 have not advanced beyond Primary Education. Another 111 470 have postgraduate training, of which 109 482 refer to completed specialization courses.

Similarly, the reality of the specialization programs offered and their adherence to early childhood education warrant closer examination. The most popular seem to be postgraduate *sensu lato* programs. However, these are not subject to quality assessments. In addition, some postgraduate programs bear no direct relation to early childhood education.

Another aggravating factor is the growing number of early education auxiliaries and technicians, or childhood development technicians hired without proper training. Even so, they are increasingly entrusted with responsibility for the pedagogical project of young children, a task normally charged to teachers. To make matters even worse, many of these professionals are not provided with the same working conditions as teachers, receive lower pay and do not take part in continuing training programs. Forming teacher-auxiliary pairings to meet the required adult-child ratios may save money; but it also erodes quality when initial and continuing training are not required and working conditions are not properly aligned.

2. Guidelines

The National Plan for Early Childhood establishes the following guidelines to steer the actions set forth therein, as per the applicable legislation, education policy and pedagogic experience:

1. Early childhood education is a right of children and a duty of the State, with families having the option to enroll children in daycare and the obligation to enroll them in preschool. This right must be ensured

¹⁶⁰ ABUCHAIM, Beatriz de Oliveira. *Panorama das Políticas de Educação Infantil no Brasil*. Brasília: UNESCO, 2018.

to all children in Brazil, whether citizens, immigrants, or refugees, and intrinsically related to their families or legal guardians.

2. The designation *first stage of basic education* does not refer, in the first instance, to its chronological position, as if education comprised but a series of levels superimposed on each other without any intrinsic link between them. Rather, it indicates that this stage occupies a unique and irreplaceable role, exercises a specific function – construction of the child’s cultural context –, which is then followed, first, by Elementary Education and, subsequently, High School Education.
3. The pedagogic commitment of preschool is to the right of the child to learn and to develop, each realized through interaction and play.
4. Play is the child’s principal activity, a dimension that shapes how children relate with each other, with others and with the surrounding world. Playfulness must be valued as a thought dimension of children. When engaged in play, children mobilize and build knowledge about themselves, others, and the world. Play encroaches upon the various interactions of children with adults and with other children, which is why these two elements – play and interaction – constitute the two primary axes of pedagogic action.
5. Education and care are inseparable, aspects of a single, unique reality. All professionals engaged with children must give care and educate. Practices that divide the child’s development into dichotomies – mind-body, cognition-affect, care-education, learning-play, etc. – should be set aside.
6. Educational intentionality is reflected in the act of planning, reflecting, problematizing, and proposing the organization of experiences that enable children to know themselves, know others, learn, and interact with nature, the arts, culture, and scientific production.
7. Curricula express the fields of experience that give context to a *universe* of different ways of learning and, thus, promote integral development. They are based on social and cultural practices reflected in personal care (feeding oneself, clothing oneself, maintaining hygiene), play, experimentation with various materials, observing and experiencing nature, forging a closer relationship with the arts and sciences, and engaging with people, among the many other ways in which individuals live, relate to themselves, feel, think, and do.
8. Pedagogic strategies should adhere to the following principles: I – ethical: autonomy, responsibility, solidarity, and respect for the common good, the environment, different cultures, identities, and singularities; II – political: the right to citizenship, exercise of critical thought and respect for democratic order; III – aesthetic: sensitivity, creativity, play and freedom of expression in different artistic and cultural manifestations.¹⁶¹
9. Pedagogic proposals should be formulated with the participation of the entire educational community – teachers, technical staff, school lunch servers, families, and children, in accordance with their different forms of expression – according to and based on the curricular and operational guidelines governing early childhood education enacted by the National Education Council¹⁶² and the National Common Core Curriculum, as supplemented by each individual education system.
10. State and municipal educational proposals should be founded on the principle of contextualizing curricula to the specificities of local knowledge and the diversity of Brazilian childhoods. With respect to Indigenous peoples and traditional communities,

¹⁶¹ Article 6 of the National Curricular Guidelines for Early Childhood Education – revised in 2009.

¹⁶² National Education Council Opinion 20, issued in 2009 – Revision of the National Curricular Guidelines for Early Childhood Education. Available at: <http://portal.mec.gov.br/dmdocuments/pceb020_09.pdf>. Accessed: 30 April 2020.

such as extractivist, river, *caboclo*,¹⁶³ artisanal fishing, Pomeranian and other groups, pedagogic proposals should be developed in consonance with their specific cultures, including language and particular forms of socialization and social organization, with a view to preserving their cultural traditions.

11. Families and early childhood education institutions are not substitutes for each other; instead, they are partners in the educational project, to the extent the family and institutional education complement and enrich each other, fostering knowledge exchanges through more coherent, broad, and consistent learning.
12. Families have the right to participate in the educational process implemented by their children's early childhood education institutions. School councils and other bodies are participatory – not exclusive – institutional spaces.
13. The constitutional principles and legal determinations governing the integration of children with disabilities in the regular education system, as well as inclusive educational policies, shall be implemented in early childhood education through specific guidance to families, qualification of teachers on early learning and continuing education and introduction of universal design parameters, norms and criteria that promote, as mandated by Law 10098, sanctioned in 2000,¹⁶⁴ full accessibility in the architectural designs of educational establishments with respect to physical structures, furniture, equipment and educational materials.
14. Teachers are, quintessentially, the drivers of the child's right to learning and development in early childhood education spaces. Therefore, it is essential to ensure they have the conditions to perform their pe-

dagogic work: initial training, continuing training, professional training, work infrastructure and, through the concerted efforts of educational administrators, remuneration in line with the responsibilities of their profession.

15. Career and Salary Plans play a critical role in bolstering the quality of early childhood education, to the extent they emphasize continuing training, provide for certification of training, include activity planning and preparation as part of the educator's work hours and establish additional mechanisms designed to retain qualified professionals.
16. Professional training includes, among other things, knowledge of the scientific underpinnings of child development, the ways in which children learn, the sociological and anthropological bases of socialization, education practices and care for children and representation and social production, in different contexts, conditions for planning learning environments, in addition to resources for assessing specific contexts and learning approaches. Continuing training programs should nourish knowledge and competencies in the day-to-day practice of education, culture, ethics, and aesthetics. Universities have a role and responsibility in this process.
17. Assessments are ongoing and employ different means, including observation, recording, reflection on the development of activities and projects and the hypotheses and discoveries of children. The objective is to enhance the educator's mediating role in a manner that ensures learning and development steadily improve. Educators should not administer tests, give grades, pass, or fail a child or, in addition, express, by virtue of an assessment, attitudes that signal punishment of any kind. External and artificial processes block the child's free and spontaneous expression. Assessments should be performed in relation to the individual child, not on a comparative basis with their classmates. Competition should not be present in early childhood

¹⁶³ Traditional populations and communities with distinct characteristics, including ethnicity, religion, culture, living and work arrangements, etc. that have secured the right to be recognized and covered by public policies based on their distinct characteristics.

¹⁶⁴ Available at: <http://www.planalto.gov.br/ccivil_03/leis/110098.htm>. Accessed: 2 May 2020.

education spaces.

18. Assessment of the quality of early childhood education services may be accomplished as follows:

- A. Application of Early Childhood Education Quality Indicators, which are deemed a valuable participatory self-assessment tool at the institutional level.

- B. Development and or adaptation of assessment tools in pre-childhood education environments (considered *supply elements*) to foster external assessments as well as enrich the institutional assessment process.

- C. Development of indicators to track and record child learning in order to support the pedagogical work of educators.

19. Transitions should be planned and lived in a way that lend support to children as they experience the change processes unique to human life (adaptation to daycare, reassignment of classrooms/teachers, passage from daycare to preschool and elementary school and other changes with the potential to produce insecurity).

20. Traditional early childhood education – Elementary Education segmentation that often leads to fragmented experiences for children during their educational journey should be surmounted, especially in light of the contribution of each educational level to the child’s learning. Early childhood education institutions and professionals have a responsibility to maintain an open communication channel with Elementary Education establishments to ensure continuity with as minimal a disruption as possible in content and methodology from one institution to another.

21. More concerted efforts should be undertaken to ensure that expansion of the daycare system focuses equal attention on quality. To assure Target 1 of the National Education Policy is accomplished, policy measures should be adopted, such as decisions and commitments by political leaders

in connection with the fundamental right of children to early childhood education as well as economic measures to secure the necessary financial resources.

22. While daycare is a right of every child, the expansion of public services should prioritize children and families in situations of social and economic vulnerability. New preschool educational institutions should first be built in areas of greatest socioeconomic need (based on demand, insufficient coverage, proportion of women working outside the home, low Basic Education Development Index – *IDEB*,¹⁶⁵ among others) to ensure these areas receive the best technical and pedagogic resources the municipality has to offer.

23. Full-day services should consider, first, the children of working families and children in situations of vulnerability, in their various contexts.

24. The physical spaces of early childhood education establishments, both internal and external, are alive: they can be a language that either attracts, stimulates, challenges, calms or, conversely, inhibits, restricts, and limits the child. Physical spaces have a place in Pedagogy as a *third educator*. They should be pleasant, clean, well-lighted, joyful, attractive, nature friendly, with plants and flowers, stimulating, capable of inciting the child to movement, spurring activities in twosomes, threesomes, groups to invent, combine, discover. Spaces need to adhere to the infrastructure standards specified in the applicable norms, in accordance with the diversity of children and their characteristics and needs, while enabling pedagogical activities.

25. Early childhood education establishments should have a diversity of age-appropriate pedagogical materials, toys and books of

¹⁶⁵ *The Índice de Desenvolvimento da Educação Básica – IDEB* is obtained from the pass rate reported in the School Census and an analysis conducted by the Instituto Nacional de Estudos e Pesquisas Educacionais Anísio Teixeira - INEP, Ministry of Education. For further information, see <http://portal.mec.gov.br/conheca-o-ideb#:~:text=Ideb%20C3%A9%20o%20C3%8Dndice%20de,para%20a%20melhoria%20do%20ensino>.

different kinds that adhere to safety standards and are available in sufficient quantity, so as to ensure the breadth of learning experiences prescribed by the BNCC. Construction and operation of new early childhood education units should only be authorized if the respective plans comply with the quality standards set forth in the applicable universal design criteria and accessibility parameters.

26. Early childhood education, as historically developed and treated under the applicable laws and operating norms, cannot be substituted by, or equated to a self-styled home education. The activities that schools recommend to parents will always serve to complement and enrich the home environment, but never to substitute the broad and diversified learning experience provided in the collective spaces of daycare and preschool.

3. Goals and targets

1. Ensure investment in the physical expansion of the early childhood education system, in the light of nonfulfillment of Target 1 of the National Education Plan, mandating universal preschool by 2016. Further, given that the target of providing coverage for 50% of all children in daycare centers by 2024 will not be met at the rate of growth in service availability registered over the past four years, the National Facilities Revitalization and Procurement Program for the Public Early Childhood Education System (*Proinfância*)¹⁶⁶ should be resumed through adoption of flexible modalities designed in coordination between the National Education Development Fund (*FNDE/MEC*)¹⁶⁷ and municipal education systems.
2. Evaluate early childhood education servi-

ces for the purpose of collecting broad and in-depth information on their quality. This component includes public and private systems alike and their distinctive early childhood education services (direct system, outsourced establishments, private non-profit system, private non-outsourced system).

3. Ensure all early childhood education units comply with the minimum infrastructure standards for public and private institutions (daycare centers and preschools) established by the Ministry of Education, with respect to the following items:
 - a) well-lighted internal spaces, sunrooms, views of outdoor spaces, electrical and security systems, potable water, wastewater sanitation systems;
 - b) sanitary and personal hygiene facilities for children;
 - c) food preparation and/or service facilities;
 - d) internal and external environments for activities, pursuant to the applicable curricular guidelines (DCNEI) and early education methodologies, including rest, free expression, movement and play;
 - e) pedagogical furniture, equipment and materials scaled to children that are safe and subject to continuing maintenance and replacement and designed according to the specific pedagogical project;
 - f) adaptation to the characteristics of children with disabilities, through incorporation of universal design parameters and fulfillment of federal norms on accessibility in architectural designs, furniture, and pedagogical materials, in addition to implementation of spaces with multi-functional resources, including assistive technology tools for children with disabilities, global development disorders and high abilities or giftedness.
4. Strengthen and expand initial and continuing training, including postgraduate programs (*sensu lato* and *sensu stricto*) offered by universities, higher education institu-

¹⁶⁶ Programa Nacional de Reestruturação e Aquisição de Equipamentos para a Rede Escolar Pública de Educação Infantil.

¹⁶⁷ Fundo Nacional de Desenvolvimento da Educação.

tions and nongovernmental organizations for the purpose of:

- a) ensuring that all early childhood education teachers complete the degree requirement prescribed by law;
 - b) encouraging the quest for postgraduate programs tailored to early childhood education;
 - c) increasing, over the next two years, training actions in educational networks that promote implementation of the BNCC and its curricular proposals;
 - d) guaranteeing the participation of auxiliary staff in initial and continuing training initiatives.
5. Require bilingualism (specific Indigenous languages and Portuguese) in all civil service examinations for early childhood education positions in Indigenous communities, which should be directed, preferentially, to applicants of Indigenous heritage. Require sign language training in general selection processes as a condition for admission to the early childhood education teaching profession.
 6. Create a continuing in-service training program within each municipality or group of municipalities coordinated by technicians of the municipal education body specifically trained for this purpose and, where necessary, with the support of higher education institutions and the technical and financial cooperation of the union and states. The purpose of the program is to ensure ongoing professional development and construction of knowledge for professionals in early childhood education, including training for auxiliary staff.
 7. Ensure the curricula of all states are aligned to the BNCC and developed in coordination with their individual municipali-

ties to assess the quality of the education stemming from *curricular consolidation*, in addition to the quality of educational services in municipalities that develop their own curricula.

8. Ensure that within three years all early childhood educational institutions have reformulated and implemented, with the participation of children, educational professionals, families and community organizations, their pedagogical projects, in accordance with the DCNEI and the curricular guidelines on promotion of racial equality and the BNCC.
9. Establish an early childhood education monitoring and assessment system in public and private establishments in all municipalities, through the respective Municipal Education System/Municipal Education Council, for the purpose of providing technical pedagogical support to improve and guarantee fulfillment of the minimum standards established in national and state guidelines.
10. Create technical and financial collaboration strategies between the Education, Culture, Health and Social Assistance sectors to maintain, expand and administer oversight and assessment of early childhood education institutions – daycare centers and preschools.
11. Guarantee, through joint action of the union, states, and municipalities, under the supervision of the Food Security Councils (CSA), improved school meals for children served in public and outsourced early childhood education establishments, prioritizing, to this end, food supplies from small family farms.
12. Ensure supply to municipalities of pedagogical materials that are appropriate to specific age groups and educational needs (toys, literary texts, costumes, puppets, musical instruments, paper, paint, pencils, play dough

and clay, etc.) and, further, representative of the ethnic cultural diversity of children.

13. Progressively implement full-day schedules for children 0 to 5 years and 11 months of age or, in accordance with the norms of the municipal education system, adopt a range of schedules to meet the needs of working families.
14. Conduct studies on the costs of early childhood education and the short-, medium-, and long-term effects of attendance at this stage of the educational process. Ensure public funding for the competent bodies for the purpose of undertaking the related studies. Widely disseminate the results of such studies.
15. Follow up public sector agreements with non-profit social education and assistance entities. Follow-up should include, among other items, monitoring compliance with the applicable directives, quality criteria and operating guidelines and strive to ensure that technical assistance is compliant and the quality standard established for this public service is achieved.
16. Participate, through expertise in early childhood education, in programs developed by the Social Assistance, Health and Justice sectors for the families or guardians and custodians of children 0 to 6 years of age which offer guidance and support to the education of children and financial, legal, and supplemental feeding assistance in cases of poverty, situations of violence and other forms of rights violations.
17. Emphasize to administrative teams, staff, and teachers the guidelines on appropriate procedures for proper and timely referral of cases of violence against children.



Children's families
and communities

1. An analysis of the setting

People have different conceptions and definitions of what family is. These are shaped by the diversity of personal experiences and cultural practices. For the purposes of the National Plan for Early Childhood, family is understood in its broadest sense in order to avoid exclusions. The term *family* refers to the established perceptions, feelings and bonds between individuals that emerge from the particular ways in which they relate to each other. The notion of family is therefore connected to something that belongs to the social world, human relations, in the various methods of organization, parental relations and community contexts. It involves relations built on emotion, familiarity, legality, solidarity, and commitment among family members.

In this sense, it is incumbent on the State to recognize and protect the full range of family arrangements. Furthermore, because the phenomenon belongs to the realm of human relations, it is both historical and cultural. In recent decades, the concept of family has evolved and become increasingly associated with the juridical notions of affection and care. Similarly, the conception, organization and functions of the family have changed due to historical and social factors. Industrialization in the 18th century was one of the most influential inflection points, redefining traditional patterns of care and family education for young children. The urbanization process and other phenomena have had a similarly important influence on the structure and roles of families, with implications for essential care and educational functions. In the 20th century, yet other factors emerged to affect family life and relations. These altered the relationship between parents and young children: reducing the family's time together, separating parents and children by specific role (some work, while others play) and modifying care and educational roles that ultimately spurred the creation and expansion of social institutions to support families in meeting their children's care and educational needs.

The Early Childhood Legal Framework underscores the importance of the community and the related care and protection networks, mandating that the union, states, Federal District, and municipalities support the participation of families in their respective networks, for the purpose, among other goals, of building and strengthening family and community bonds, with particular emphasis on contexts that pose an immediate risk to the child's development.

Modern-day society has given rise to institutions of various types and functions that have been forced to take on partial or total responsibility for childcare duties once the exclusive domain of the family. These institutions provide support to and complement, yet do not substitute, family care actions. Nonetheless, a growing number of families have, in fact, tacitly surrendered exercise of the right and duty to look after their children and provide for their care and education from the earliest stages of life. However, the essential responsibility of providing care and education to young children cannot be transferred or delegated to social institutions; at best, they can be shared with these. Therefore, for the good of the child, reinforcing family roles and the conditions necessary to accomplish them is essential.

In the Preamble to the Convention of the Rights of the Child, the Heads of State declare themselves *convinced that the family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community.*

As such, this Plan defines the family as the *primary group that shelters, supports, and accompanies the child in the home and satisfies his or her health, nutritional, affective, play, communications and learning needs and progressive acquisition of individual autonomy in the first years of life, while, additionally, ensuring the child is legally inscribed in a system of social identity and is able to fully assume his or her responsibilities within the community.*



This Plan includes actions by which the State can render assistance to families, who enjoy special protection under article 226 of the 1988 Brazilian Federal Constitution for purposes of fulfilling their fundamental responsibility for the care, socialization, and education of their children, pursuant to the constitutional norm prescribed in article 227.

The decision to adopt these actions is grounded in the premises below.

2. Premises

2.1. In modern society, the family plays a central and irreplaceable role in meeting the child's development needs

The child receives from the family responsive care permeated by affection, including nourishment, health and hygiene, play, coexistence with the adults with whom they interact, in environments conducive for exploring and learning with education, that is aimed at ensuring the child's growth, survival and development. It is also within the family that the child establishes an intimate and ongoing relationship with their mother, father and other persons in their group who set in motion their socialization, develop their self-esteem and, in general, shape their personality.

The family, marked by a unique dynamic, diverse ethnic and cultural formation, and multiple forms of organization, is understood [...] as a *privileged space for practicing community values and deepening relationships built on solidarity*.¹⁶⁸

In addition, Family Health constitutes the priority strategy of the National Primary Health Care Policy (PNAB)¹⁶⁹ for expanding,

consolidating, and qualifying Primary Health Care. The Policy advocates that *care is built with individuals, according to their needs and potential, as part of their quest for an independent and full life. The family, community and other collective groups are important elements and often conditioning or determinant factors for the lives of individuals and, consequently, for their care.*

The 1988 Brazilian Federal Constitution provides that the *family is the foundation of society* (article 226) and that, as such, it has sole responsibility, in conjunction with the State and society (and specifically, in this context, communities), to guarantee the child and adolescent exercise of their fundamental rights (article 227). The respective constitutional provision specifies these fundamental rights, among them the right to different forms of family and collective coexistence.

Brazil has a large number of families with young children struggling just to survive. Although census and sample data collected by the IBGE indicate improvements in various aspects of life relating to the development of children, such as reduced illiteracy and a substantial number of households with basic sanitation, unequal income distribution has remained little changed in recent years. In addition to unjust and unacceptable, the alarming levels of socioeconomic inequality among Brazilian families compromise development opportunities for children and perpetuate the mechanisms of intergenerational transmission of poverty and exclusion. Children are most affected by this phenomenon, due simply to the fact that the majority of children through the age of 6 years come from the poorest families.

A consequence of this is the separation of a large number of infants and young children from their families of origin, a process that generates additional suffering and can result in adverse effects to the integral development of young children. It is essential to develop anticipatory family support measures to ensure, to the extent possible, children are not separated from their families of origin.

¹⁶⁸ MAURAS, M.; KAYAYAN, A. *Apresentação*, em: KALOUSTIAN, s.m. (org). *Famílias Brasileiras: A base de tudo*. São Paulo: Cortez. Brasília: UNICEF, 1998.

¹⁶⁹ *Política Nacional de Atenção Básica*, Directive 2436, of 21 September 2017. Approves the National Policy on Basic Health Assistance within the framework of the Brazilian Unified Health System.

2.2. The family must be valued with regard to its potential to discuss, reflect and define a life project, including how children are to be raised and educated

In the past, families provided care to children based on the traditions and guidance handed down by their eldest members. And they felt secure in this approach. In recent decades, traditional practices have been called into question by scientific advances and massive information flows from the media, as well as fundamental changes to the family structure, leaving many feeling unsure and confused as to how to care for their children. What is the right food for my child? What should I do in case of illness? What should I allow and what should I not allow? How do I deal with television, video games, the computer, the smartphone? Many questions with an equal number of conflicting answers. Finding the right path, the right approach, in the midst of so much information is a challenge for any family today, irrespective of socioeconomic condition.

What was previously driven by intuitive action, supported by family traditions, religious beliefs, the knowledge that flowered in communities, today must be acquired consciously, taking into account the observations of children themselves and scientific discovery. This is the only way for families to develop and construct life projects to ensure the social function of raising and educating their children is successfully accomplished. It is through caring and education that families enhance their ability to fulfill this function. To this end, the provision of article 14 of the Early Childhood Legal Framework carries added relevance by mandating that expectant mothers and families with young children receive guidance and training on responsive maternity and paternity, maternal breastfeeding, healthy complementary feeding, integral child growth and development, prevention of accidents and education without resorting to physical punishment (positive discipline), with a view to fostering the formation and consolidation of affective bonds and stimulating integral development in early childhood. Understanding the importance of loving and responsive care in early life will help families recover their

status and lead role in caring for children from the earliest days of life.

It is important to note that each family has its own strategies, its own approaches to providing care and education to its children and that these, in turn, should be duly considered in any dialogue concerning potential substitute methods or enhancements.

2.3. New social practices based on collective action, participation and solidarity should be developed with families and the engagement of community institutions, associations, and movements

The family-and-community unit is the starting point for protecting, educating, and caring for children. Both must be strengthened by supporting increased and more effective use of goods and services capable of generating real progress toward improving the quality of life of children and reversing the exclusion to which they are too often subjected. As an example, health and education are strategic and essential services that provide universal coverage through the SUS and LDB; however, conducting medical visits and enrolling children at school are not enough. Good outcomes for those services depend on combining the actions and support delivered through other policies and, above all, on a network that can support and engage families and communities in effective use of assistance services.¹⁷⁰ The five paragraphs of article 14 of the Early Childhood Legal Framework provide for the need to offer elements capable of supporting families, based on their different levels of vulnerability, and ensuring the intersectoral coordination required to integrate family-centered programs.

Families can rely on existing bases of support in their communities. These are a critical foundation for the integral development of the child: they offer secure, affective relationships, opportunities for developing skills, friendships,

¹⁷⁰ CARVALHO, M.C. Brandt. A Priorização da Família na Agenda da Política Social. In: KALOUSTIAN, S.M. (org). *Famílias Brasileiras: A base de tudo*. São Paulo: Cortez, 1994.

and self-confidence, as well as activities and services that contribute to their full realization as individuals. In this way, strengthening the family and community support base means strengthening the family itself and, consequently, the child who grows and develops within that family unit.

This is a focal point of the Early Childhood Legal Framework. Article 12 of the statute highlights the participation of society and the State, in solidarity with families, to protect and promote the child in early childhood, by *creating, supporting, and participating in child protection and care networks in communities*. In fact, communities themselves need to build the capacity to understand the meaning of early childhood and, in this way, strengthen their role in promoting early childhood.

2.4. Families should be supported and strengthened through dialogue

Dialogue is perceiving and accepting others in their totality, unity, singularity, and cultural plurality. Knowing how to address diversity means, among other things, recognizing, accepting, and valuing the different conceptions of family. Dialogue with families requires recognizing them as subjects, not merely a means or strategy for achieving the particular outcomes expected by society, including those of ensuring the child a favorable environment in which to develop. Efforts should be geared toward supporting families through dialogue and reflection, a process that can help strengthen their role in educating and caring for children. Dialogue does not involve simply listening, nor simply speaking; by the same token, dialogue is not simply listening and speaking either. True dialogue requires an open mind: perceiving what families say and responding to them, showing commitment to them, and creating a sense of co-responsibility. To this end, it is important to create opportunities for dialogue in which parents and relatives serve as protagonists and professionals and other stakeholders take on a supporting role. All stakeholders should fully assimilate and practice the principle that parents and relatives are capable of reflecting on their problems and seeking out and identifying

the means to resolve those problems with the support of interlocutors equipped to offer assistance, guidance, and information, as necessary.

2.5. The family support base is built on a social policy that eradicates extreme poverty and poverty, surmounts welfarism, individualism and the segmentation of individual needs

Access to essential goods (such as housing, food, basic education and health, safety, justice, urban transportation, and basic sanitation) and cultural goods (including school, work, libraries, movie houses, theaters, leisure, play and other enriching spaces for human experience) is a basic condition incumbent on the State to provide so as to enable families to fulfill their social function of protecting, educating, and caring for children.

Targets related to this goal are set out in the corresponding chapters of this Plan. In addition to these, priority themes encompassed within the macro-policy frame include mass-scale job creation, settlement of rural families, basic sanitation, food security programs, supplemental household income assistance, among others. With respect to the municipal sphere, social policies to support families should contemplate instituting or implementing effective and high-quality health, education, and social assistance service networks, in addition to job and income creation networks and community service networks. More than this, the issue of family needs to be included on the social policy agenda.

3. Goals and targets

1. Undertake outreach to families in order to build social practices with them that increase and enhance the possibilities for participating in transformative changes capable of improving their quality of life and, by extension, that of their children.

2. Promote support policies that value the family unit as the locus for construction of the child's primary social identity.
3. Adopt methodologies and techniques in dedicated family assistance spaces within each municipality that help strengthen the sense of family and childhood, with a view to bringing people together to *live in common*, and in this way giving expression to the meaning of community. This effort can be supported through the services offered by the Unified Social Assistance System (SUAS),¹⁷¹ specifically the Social Assistance Reference Centers (CRAS):¹⁷² Integral Family Protection Service (PAIF)¹⁷³ and Community Coexistence and Family Bonding Service (SCFV),¹⁷⁴ through which the role of the Basic Social Assistance Policy¹⁷⁵ centers on maintaining active outreach to families in their geographic territories.
4. Reserve appropriate spaces for meetings with family groups, among them:
 - (a) locations frequented by families, taking advantage, for this purpose, of establishments such as health centers, early childhood education and social service institutions, churches, resident associations and others;
 - (b) the home itself, during family visits, as currently conducted by professionals of the Family Health Strategy, community leaders of the Children's Pastoral,¹⁷⁶ family visitors, such as those involved in the Program for a Better Early Childhood (PIM/RS)¹⁷⁷ and Happy Child Program (PCF),¹⁷⁸ as well as a diversity of other state and municipal programs
 5. dedicated to family outreach, with a view to empowering them to take on a lead role in providing appropriate care for enhanced child development.
 6. Forge relationships with family groups based on value, respect, recognition of otherness, avoiding, to this end, presumptions as to the family's role and promoting the convergence of systematized knowledge among professionals with the real-life knowledge of families, with a view to fostering reciprocal learning experiences.
 7. Build community structures that respect cultural diversity, with the objective of addressing problems experienced by low-income families to enable, through a coordinated and mutual discussion, aid and commitment process, the new and expanded possibilities for social participation, focused principally on providing care and education to children.
 8. Prepare future parents through the inclusion of appropriate dynamic content in high school education curricula, for the purpose of fostering the construction of feelings, thoughts, and self-confidence grounded in human rights, in addition to a conception of full citizenship and the human life span, based on the holistic perspective of a conscious family project. This action will contribute to helping young people prepare for paternity and maternity in a planned and proactive manner right from the moment of conception.
 9. Strengthen institutional and family care, in accordance with article 101 of the Statute on the Child and Adolescent, governing temporary protective and exceptional measures applied as a transitional stage in the family reunification process, or, where reunification is not feasible, placement with a substitute family. It is worth noting that pursuant to article 34, paragraph 1, of the Statute on the Child and Adolescent, family care takes preference over institutional care; as such, it is critical to strengthen its implementation. This highlights the importance of article 34, paragraph

¹⁷¹ *Sistema Único de Assistência Social.*

¹⁷² *Centros de Referência de Assistência Social.*

¹⁷³ *Serviço de Proteção Integral à Família.*

¹⁷⁴ *Serviço de Convivência e Fortalecimento de Vínculos.*

¹⁷⁵ *Política de Assistência Social Básica.*

¹⁷⁶ *Pastoral da Criança.*

¹⁷⁷ *Programa Primeira Infância Melhor.*

¹⁷⁸ *Programa Criança Feliz.*



3, of the Statute on the Child and Adolescent, as per the text given by article 28 of the Early Childhood Legal Framework, which prescribes as follows: *the Union will support implementation of care services in host families as a public policy. Such families shall have at their disposal a team to organize temporary in-residence care for children and adolescents of selected, qualified, and supervised families not enrolled in the adoption registry.* This item pertains, additionally, to the chapter on family and community coexistence.

9. Strengthen support to mothers, fathers, and relatives in situations of vulnerability. Although article 23 of the Statute on the Child and Adolescent precludes the possibility of revoking family custody due to precarious socioeconomic conditions, full efficacy of this provision remains a challenge, therefore rendering socioeconomic support essential. To this end, measures should be adopted to implement article 13 of the Early Childhood Legal Framework, which sets out the role of federative entities in supporting the efforts of families to perform their core functions of providing protection and care, strengthening affective bonds and prioritizing at-risk individuals and those in situations of vulnerability, as well as article 14, governing assistance to pregnant women and mothers and fathers, with a view to fostering responsible parenting and giving priority to children and families in at-risk and vulnerable situations.
10. Develop actions aimed at assisting the rehabilitation of chemically dependent persons, pursuant to article 19 of the Statute on the Child and Adolescent, as per the text given by the Early Childhood Legal Framework, which provides for the right to family and community coexistence, through replacement of the expression *in an environment free of persons dependent on narcotics* with *in an environment that*

ensures their integral development, a change that more effectively reflects the commitment to value families and the effort to support them in performing their essential parental duties.

11. Ensure and increase implementation of extended maternity and paternity leave, pursuant to article 38 of Law 11770, sanctioned in 2008, which establishes the Citizen Company Program.
12. Provide notification and establish protocols, in appropriate spaces for this purpose, on the voluntary surrender of children for adoption by pregnant women or mothers, pursuant to article 13 of the Statute on the Child and Adolescent. This item is closely tied to the chapter on family and community coexistence contained in this Plan.
13. Strengthen application of the right to home detention, pursuant to article 318 of the Brazilian Code of Criminal Procedure, as amended by Law 13257 (Early Childhood Legal Framework), wherein home detention is ensured to pregnant women and mothers with, at least, one child up to 12 years of age and men with, at least, one child up to 12 years of age, where the individual woman or man subject to detention is confirmed to be the sole responsible guardian of the child or children in question.
14. Strengthen application of the right to temporary detention under the open regime, as established in Habeas Corpus 143641/2018 of the Brazilian Federal Supreme Court, which explicitly recognizes this right for pregnant adolescents subject to detention who are breastfeeding or have children up to 12 years of age.
15. Organize community campaigns and actions that expand social consciousness on the significance of early childhood for human development.

Social assistance
to families
with young children



1. National Social Assistance Policy

Social assistance is a noncontributory Social Security policy enshrined in the 1988 Brazilian Federal Constitution and prescribed in the Organic Law of Social Assistance (LOAS),¹⁷⁹ Law 8742, enacted in 1993. Its purpose is to provide assistance to families and individuals in situations of social vulnerability, personal and social risk, and rights violations through application of an integrated set of State and non-State actions. The promulgation of the 1988 Brazilian Federal Constitution – which defined social assistance as a social rights policy, similarly to the right to health and social security – and the enactment of the Organic Law of Social Assistance transformed social assistance from a welfarist action into a recognized right of the citizen.

With approval of the National Social Assistance Policy (PNAS),¹⁸⁰ in 2004, and the Basic Operating Norm (NOB),¹⁸¹ in 2005, the Unified Social Assistance System was instituted to organize social assistance services, programs, projects, and benefits, ensuring social protections, and affirming the principle of the family as the fundamental unit of society as a central pillar of the Unified Social Assistance System. A new version of the NOB/SUAS was published in 2013 that further consolidated the SUAS.

The centrality of the family under the Social Assistance Policy recommends that attention focus on the family unit as a whole, with an eye to the distinct stages of life of its members. This view derives from the recognition that achieving progress in protecting children, adolescents, young adults, and the elderly requires that the family as a whole be protected. It

applies especially to young children, for whom the family represents the principal nucleus of protection and care at their specific stage of development.

2. Unified Social Assistance System

The Unified Social Assistance System, which forms the organization basis of Brazil's Social Assistance Policy, is a decentralized and participatory system that regulates social assistance services, programs and projects and benefits throughout the national territory.

Social assistance services should guarantee the following protections:

- Secure income and autonomy to ensure subsistence for users, including job placement and skills training to foster an independent life.
- Secure assistance to assist those in confronting situations of abandonment, homelessness, or necessary removal from the family nucleus due to rights violations, among other factors.
- Secure coexistence to strengthen family and community ties and support families in their role of providing care and protection to dependent members, including young children.

Of special note is the SUAS's strategic role in promoting the development of early childhood, especially through social outreach actions with families, which transforms the system into a strategic instrument for assisting individuals in the youngest age group, based on the full spectrum of their demands. Services offered by the SUAS strive to promote the rights of young children, strengthen family ties, and defend the right to family and community coexistence. The security the SUAS endeavors to ensure – income, autonomy, family and community coexistence and care – is intended to provide families with the material and subjective conditions needed to protect their members, in particular

¹⁷⁹ *Lei Orgânica de Assistência Social.*

¹⁸⁰ *Política Nacional de Assistência, 2004.* Available at: <http://www.mds.gov.br/webarquivos/publicacao/assistencia_social/Normativas/PNAS2004.pdf>. Accessed: 13 April 2020.

¹⁸¹ *Norma Operacional Básica.*

the most vulnerable among these, including young children.

SUAS social assistance services are organized by levels of complexity: Basic Social Protection (PSB) and Special Social Protection (PSE).

Basic Social Protection is composed of a set of social assistance services, programs, projects, and benefits aimed at preventing situations of vulnerability, personal and social risk, and rights violations. For its part, Special Social Protection, which is subdivided into medium and high complexity actions, consists of a set of services, programs and projects directed at addressing situations of social risk, violence, and other rights violations, such as intrafamily violence (physical, psychological, neglect, abandonment, etc.), sexual violence (abuse and/or exploitation), homelessness, child labor, removal from/rupture of the family unit, among others.

The purpose of this subdivision is to safeguard the limits, competencies, and attributions of the responsible professionals. Yet, the focus on families and individuals in situations of vulnerability, social risk and rights violations should be based on a broad approach that considers their objective and subjective demands through coordinated social work actions that recognize the incompleteness of public policies, which are only effective when operated in an integrated fashion throughout the territorial sphere of implementation.

In order to ensure effective execution of the Social Assistance Policy, PSB is organized into territorial units served by Social Assistance Reference Centers, which serve as the general public's principal access point to social assistance services. As the central unit of social assistance around which all PSB services are organized, the objectives of the CRAS are contained in the PSB's general objectives. These include preventing the occurrence of situations of vulnerability and social risk in geographic territories by means of two strategic functions that complement each other in the performance of day-to-day duties: territorial management of the Basic Social Protection Social Assistance Network, a mandatory function of the Integral

Family and Assistance Service (PAIF), and other social assistance services, programs and projects dedicated to ensuring families and their members basic social protection, based on the realities and demands of each geographic territory.

In addition to the PAIF, the Community Coexistence and Family Bonding Service (SCFV) is contemplated as a component of PSB. The service supplements PAIF social work actions undertaken with families and contributes to strengthening family and community bonds among its users. It is organized in groups according to the age range of participants: children up to 6 years of age, children and adolescents 6-15 years of age, adolescents 15-17 years of age, young adults 18-29 years of age, adults 30-59 years of age and seniors 60 years of age and over. Also part of the PAIF is the Basic In-Home Social Protection Service for Elderly and Disabled Persons (SD),¹⁸² provided to disabled persons of any age and the elderly.

The two services can be offered directly through the CRAS or referred to these, where primary responsibility for their execution is tasked to the social assistance network, composed of civil society entities and organizations. In general, families and individuals access, according to their specific needs, the remaining services and actions of the social assistance network at the different levels of complexity, as well as other public policies, through assistance actions delivered by or referred to the CRAS, based on the recommendations or referrals of CRAS teams.

The need to strengthen family and community ties and parenting in order to promote care, social protection and integral development in this stage of life is of special importance in early childhood.¹⁸³ To this end, the Social Assistance Policy (and the PSB, in particular) plays an important role in early childhood by demarcating the scope of action taken with families identi-

¹⁸² *Serviço de Proteção Social Básica no Domicílio para Pessoas Idosas e com Deficiência.*

¹⁸³ *Caderno de Orientações Técnicas do Serviço de Convivência para Crianças de 0 a 6 anos.* Brasília: MC, 2019. Available at: <https://static.fecam.net.br/uploads/1521/arquivos/1486641_Caderno_SCFV_0_a_6_anos.pdf>. Accessed: 14 April 2020.



fied as being at particular social risk, based on the imperative of fulfilling their basic demands and strengthening family ties and parenting through integrated social work actions undertaken among different areas and services.

Social Assistance Surveillance, a pillar of the Social Assistance Policy, in conjunction with social protection and the defense of rights, is a critical element for ensuring that territorial management focuses on preventing the occurrence or exacerbation of vulnerabilities for families in a particular territory. However, its role extends beyond simply ensuring the quantitative and qualitative results of social assistance services. By applying various instruments and analysis systems, surveillance efforts contribute to producing the inputs employed in planning actions and building in-depth knowledge of a given territory. Diagnosing local characteristics is essential for delivering quality services. This can range from the observation and systematization of local characteristics in which the CRAS operate and demographic characteristics to the specificities that reinforce or trigger situations of vulnerability for the inhabitants of a given territory.

The Specialized Social Assistance Reference Center (*CREAS*), a component of the Special Social Protection System, is a public and State entity with primary responsibility for delivering specialized social work actions through the SUAS to families and individuals in situations of risk, violence, and other rights violations. As part of the *CREAS*, which falls under the medium complexity Special Social Protection category, the Specialized Assistant Service for Families and Individuals (*PAEFI*)¹⁸⁴ is a compulsory service for families and individuals aimed at supporting, providing guidance and ensuring follow-up for families and individuals in situations of threat or rights violations by helping to: (a) break the patterns of rights violations, situations of violence and exploitation; (b) strengthen family and community ties and the family's protective role; (c) overcome risk situations; (d) provide access to the social protection network; and (e) prevent the exacerbation

tion of rights violations.

Children and adolescents are the primary segment served by the *CREAS* through the *PAEFI*. Data from the Monthly Case Registry (*RMA*) indicate that in 2019 the *PAEFI* provided assistance to 82 698 cases involving victims of violence or rights violations between the ages of 0 and 12 years. In relation to young children, 16 344 victims of intrafamily violence, 8450 victims of sexual abuse, 387 victims of sexual exploitation and 20 827 victims of negligence or abandonment were served.

In addition to the *PAEFI*, the following components fall within medium complexity Special Social Protection Services: (a) the Specialized Social Service,¹⁸⁵ provided by *CREAS* teams at the Specialized Reference Centers for Homeless Populations (*Centro Pop*) or through corresponding *CREAS* reference units that actively engage in identifying public spaces with high concentrations of individuals exposed to social and personal risk, so as to facilitate access by this segment to social assistance services and other social policies; (b) the Specialized Service for Homeless Persons,¹⁸⁶ provided at the *Centro Pop* units, which aims to develop social skills through individual and group guidance and referrals to other social assistance services and areas, contributing, in this way, to the construction of individual autonomy, social integration and protection against situations of violence; (c) the Social Protection Service for Adolescents in Socio-Educational and Assisted Liberty Programs (*LA*)¹⁸⁷ and Community Service Program (*PSC*),¹⁸⁸ which provide specialized and ongoing follow-up of adolescents in *LA* and *PSC* programs, with a view to promoting the social integration of adolescents in social promotion and protection services and programs and creating adequate conditions for them to (re)build life projects capable of breaking the cycle of illicit practices, in addition to strengthening family and community coexis-

¹⁸⁴ *Atendimento Especializado a Famílias e Indivíduos.*

¹⁸⁵ *Serviço Especializado em Abordagem Social.*

¹⁸⁶ *Serviço Especializado para Pessoas em Situação de Rua.*

¹⁸⁷ *Serviço de Proteção Social a Adolescentes em Cumprimento de Medida Socioeducativa de Liberdade Assistida.*

¹⁸⁸ *Serviço de Prestação de Serviços à Comunidade.*

tence; and (d) the Special Social Protection Services for Persons with Disabilities, the Elderly and Their Families,¹⁸⁹ which offers specialized assistance to families with disabled and elderly persons, subject to some degree of dependence, whose limitations have been exacerbated by rights violations. Services are offered by the CREAS, either in Day-Centers or CREAS reference units.

Of special note is the assistance rendered to children 0 to 6 years of age and their families through the Special Social Protection Service for Persons with Disabilities and Their Families,¹⁹⁰ offered at Early Childhood Day Centers. The Day-Center units for children with disabilities give priority to children with microcephaly or conditions associated with Zika virus. The aim is to expand the capacity of families to provide care by sharing daily care practices with them and supporting, guiding and coordinating service networks in a particular territory, so as to ensure proper assistance to the child's development and access to income and other rights and prevent the social exclusion of families, co-existence with extreme poverty, neglect, abandonment and institutionalization, all of which only aggravate situations of dependence and hinder the autonomy of the recipients of care and caregivers alike.

Medium-complexity Special Social Protection also encompasses the Child Labor Eradication Program (*PETI*),¹⁹¹ an intersectoral initiative consisting of the following actions: (I) income transfers; (II) social work actions with families; and (III) delivery of socio-educational services to children and adolescents in situations of child labor.

For its part, the high-complexity Special Social Protection category is composed of a set of sheltering services to ensure integral protection (housing, food, hygiene, and work) to individuals or families temporarily removed from the family and/or community nu-

clus. Sheltering is organized on the basis of target audiences and modalities: I) children and adolescents, provided through guest homes, institutional shelters or host families; II) adults and families, provided through institutional shelters and halfway houses; III) women in situations of violence, provided through institutional shelters; IV) young adults and adults with disabilities, provided through inclusionary residences; V) young adults between the ages of 18 and 21 years, provided through boardinghouses; VI) elderly persons, provided through guest homes, institutional shelters or boardinghouses; and VII) adults transitioning from homelessness, provided through boardinghouses.

In terms of quantity of units, the primary target audience for sheltering services is the child and adolescent segment: 2844 municipal sheltering units (49.8% of the total), corresponding to 49 820 beds (2018 SUAS Census). In 2018, a total of 30 933 children and adolescents were sheltered, of whom 4273 were between the ages of 0 and 5 years. With respect to host families, in 2018 the Host Family Sheltering Service operated 322 municipal units serving 1625 host families and 1377 sheltered children and adolescents, of whom 527 were 0 to 5 years of age.

High complexity poses for the SUAS the challenge of increasing the availability of services that result in reduced institutional sheltering of young children through investments in initiatives such as host families and other noninstitutional modalities, including support to and follow-up with the families of origin, their family nucleus, or extended families, where the possibility for safe family reunification exists. A significant point to emphasize here is that the relationship between caregivers/educators and the sheltered child and adolescent in Sheltering Services should be based on care and affection, with a view to fostering a healthy and welcoming environment conducive to the individual's development. This requires investments in capacity building of SUAS staff, including caregivers/educators in sheltering services and host families.

¹⁸⁹ *Serviço de Proteção Social Especial para Pessoas com Deficiência, Idosas e suas Famílias.*

¹⁹⁰ *Serviço de Proteção Social Especial para Pessoas com Deficiências e suas Famílias.*

¹⁹¹ *Programa de Erradicação do Trabalho Infantil.*

3. Social assistance benefits

Benefits are provided on a case-by-case or continuing basis, as prescribed by the applicable legislation, and characterized as a service provided under the Social Assistance Policy.

Case-by-Case Benefits (*BE*), provided for by Law 8742, sanctioned in 1993, and regulated by Decree 6307 in 2007, consist of provisional benefits to prevent and address temporary situations of vulnerability arising from or exacerbated by childbirth, deaths, transitory vulnerabilities, and disasters. Benefits are conferred in the form of cash payments, goods, or services, with a view to ensuring individuals and families temporarily unable to confront situations arising from or exacerbated by contingencies, including damages, losses and risks that endanger and weaken the ability of individuals to maintain their ties and preserve the family unit, are given the opportunity to live, coexist and survive.¹⁹²

Assistance may be provided in the form of goods, services, or cash. The municipal entity is responsible for offering and managing services at the local level. For its part, the State is charged with providing all necessary support, including in the form of joint funding initiatives, to guarantee protection to individuals and families facing a specific contingency. With respect to promoting the rights of the child and adolescent, Brazil has in place an institutional and normative framework to ensure the youngest population segment the full range of fundamental human rights, guaranteeing, in this way, the integral protection of children, including in regard to their condition as individuals in development. Fulfilling the demands of this particular

target audience within the framework of the social work actions undertaken with families as part of the social assistance process should take into consideration the respective specificities of individuals, in accordance with their particular development stage.

Continuing Assistance Benefits (*BPC*)¹⁹³ are a component of the social assistance policy that ensures a monthly minimum salary to senior citizens, above 65 years of age, and persons with disabilities, for whose sustenance neither they nor their families can provide. The benefit is provided for in article 203 of the 1988 Brazilian Federal Constitution and in articles 20, 21 and 21-A of the LOAS, regulated by Decree 6214, of 2007.

The BPC constitute a right assured under the Constitution and the LOAS. They extend to pregnant women and children with disabilities, prioritizing these segments for purposes of follow-up by the CRAS/PAIF. Individuals in this segment are defined as a specific target audience requiring planned actions to promote early childhood development and quality of life for children with disabilities.

The BPC cover more than 4.6 million Brazilians, of whom 2.6 million are persons with disabilities while over 2 million are elderly persons. In relation to the early childhood segment, 82 000 BPC beneficiaries are children between 0 and 6 years of age.

The SUAS has also made progress in the effort to coordinate relevant programs, contributing to the expansion of assistance to families in geographic territories, particularly young children. Below, we describe two strategic programs that have played a lead role in this effort.

¹⁹² *Orientações Técnicas sobre Benefícios Eventuais no SUAS*, Brasília: MDS, 2018. Available at: <http://www.mds.gov.br/webarquivos/publicacao/assistencia_social/Cadernos/Orienta%C3%A7%C3%B5es%20T%C3%A9cnicas%20sobre%20Benef%C3%ADcios%20Eventuais%20no%20SUAS.pdf>. Accessed: 14 April 2020.

¹⁹³ Benefícios de Prestação Continuada.

Family Grant Program

Established in October 2003, the Family Grant Program (*PBF*) is a direct conditional income transfer program provided to families in poverty and extreme poverty throughout Brazil. It is considered one of Brazil's most important social protection initiatives and is responsible for having lifted millions of Brazilians out of absolute poverty. Families enrolled in the PBF receive a monthly financial benefit, while these take on corresponding health and education commitments. Benefit amounts to each family are calculated based on the number of children and adolescents in the household.

The conditionalities of the Family Grant Program correspond to the exercise of social rights,¹⁹⁴ as they are inextricably tied to ensuring the health and educational rights of the child and adolescent: prenatal care for expectant mothers; vaccination and monitoring the growth and development of children under 7 years of age; and school attendance (minimum of 85% for children 6-15 years of age; and 75% for adolescents 16-17 years of age). Failure to meet these conditionalities is considered an indicator of increased vulnerability, resulting in prioritized CRAS assistance to vulnerable families.

A key objective of the Family Grant Program is to deliver direct income transfers to families and expand access to public services that fulfill basic rights in health, education, and social assistance. The actions adopted under the Family Grant Program provide immediate relief in situations of poverty and extreme poverty and contribute, through the related conditionalities, to helping families break the intergenerational cycle of poverty.

¹⁹⁴ *O Programa Bolsa Família e o Programa Criança Feliz: Perguntas e respostas para os visitantes do PCF*, Brasília: MDS Available at: <www.mds.gov.br/webarquivos/publicacao/crianca_feliz/CriancaFeliz_BolsaFamilia.pdf>. Accessed: 8 June 2020.

Happy Child Program

The Happy Child Program (PCF)¹⁹⁵ is aligned with the provisions on family support policies and programs prescribed in the Early Childhood Legal Framework,¹⁹⁶ which expressly contemplate home visits:

Making available programs and actions involving home visits and other modalities that stimulate integral development in early childhood will serve as a working strategy, when supported by social policies and evaluated by the professional team responsible for them (Article 14, paragraph 4).

Its primary purpose is to promote the integral development of young children within the family context through interaction with caregivers and children.

The Program is an intersectoral initiative – the greater the number of participating sectors, the greater the Program's effectiveness. These include (or should include) the social assistance, health, education, cultural, human rights sectors, in addition to housing and basic sanitation programs, etc.

The Program's key action consists of home visits aimed at supporting families to promote development and bring them closer to the service network within the geographic territory. These efforts allow for more precise analysis of potentials and needs in each specific context, resulting in singular intervention proposals tailored to individual realities.¹⁹⁷

¹⁹⁵ *Programa Criança Feliz*, Decree 8869, 5 October 2016, as amended by Decree 9579 of 22 November 2018.

¹⁹⁶ Early Childhood Legal Framework. Law 13257/2016, article 14, heading and paragraphs.

¹⁹⁷ Institutional information available at: <<http://www.desenvolvimentosocial.gov.br/servicos/crianca-feliz/>>. Accessed: 14 April 2020.



Studies show that home visits are effective in strengthening family ties and the family's potential to provide care to children and promote their development. Together with the SUAS, home visits feed a continuing cycle of social assistance and protection for children and their families.

The Happy Child Program also contributes to the SUAS by serving families in a particular geographic territory through planned and coordinated efforts that enhance the active tracing provision mandated under the CRAS/PAIF. Similarly, in performing its family assistance and follow-up role with a focus on social actions aimed at strengthening family ties and parenting, the SUAS effectively complements the overall policy.

The integrated actions of the SUAS and Happy Child Program contribute to:

- Incentivizing and qualifying services and social assistance benefits at the different levels of complexity, so as to leverage assistance and support capacities for families with young children.
- Qualifying sheltering services by prioritizing sheltering in host families, based on the specificities of early childhood and the applicable international recommendations on assistance to children up to 3 years of age who have been removed from their family unit.
- Strengthening the intersectoral approach in geographic territories through coordinated sector-specific policies, based on the applicable CRAS reference in the geographic territory, so as to enable planned access by families to the various services available in their territories.
- Ongoing and joint mobilization and capacity building for professionals who work with the pertinent target audience, including through coordinated action with federative entities, dissemination of information and guidance and the organization of and participation in joint events aimed at ensuring integration.¹⁹⁸

¹⁹⁸ *Orientações Técnicas: SUAS e Programa Criança Feliz: Atuação integrada*. Brasília, 2018. Available at: <http://www.mds.gov.br/webarquivos/publicacao/assistencia_social/Cadernos/Interacao_Suas_CF.pdf>. Accessed: 8 June 2020.

The Family Grant Program and the Happy Child Program are reference points for the SUAS in the field of early childhood. They strengthen opportunities for coordinating with other public and private initiatives in geographic territories, reinforcing intersectoral approaches and the convergence of goals to identify social impacts capable of breaking the vicious cycle of poverty.

4. Priority situations of early childhood for the SUAS

In early childhood, situations emerge that require priority attention to ensure social protection. In this light, the *Technical Guidelines Workbook of the Family Coexistence Service for Children 0 to 6 years of age*¹⁹⁹ underscores the following:

- Children with disabilities, with priority to BPC beneficiaries.
- Children from families that are beneficiaries of income transfer programs.
- Children residing in territories wholly lacking in or with insufficient family and community coexistence services and opportunities.
- Children experiencing deterioration in family ties.
- Children in situations of child labor.
- Children in isolated situations.
- Children suffering from violence and/or neglect.
- Children who work.
- Children subject to sexual abuse and/or exploitation.

¹⁹⁹ BRASIL. Ministério do Desenvolvimento Social. Secretaria Nacional de Assistência Social. Departamento de Proteção Social Básica. *Caderno de atividades do serviço de convivência e fortalecimento de vínculos para crianças de 0 a 6 anos*. Brasília: MDS, 2017. 163 p. Available at: <https://www.mds.gov.br/webarquivos/publicacao/crianca_feliz/CADERNO-ATIVIDADES-DIGITAL-28122018.pdf>. Accessed: 20 May 2021.

- Children in sheltering situations.
- Children subject to special protective measures under the Statute on the Child and Adolescent.
- Homeless children.
- Child migrants or refugees.

5. Institutional challenges for Social Assistance

- 5.1. *Funding.* Social Assistance in Brazil does not receive dedicated mandatory funding to operationalize the SUAS. The absence of funding to deliver services and strengthen joint funding between entities complicates its effectiveness as a public investment policy. Yet, the related investments in the first years of life are of critical and strategic importance.
- 5.2. *The visibility* of Social Assistance as a public policy that positively impacts other policies to reach the most vulnerable target audience and enable construction of intersectoral strategies to overcome poverty, including through actions focused on early childhood.
- 5.3. *Effectuating the SUAS's National Continuing Education Policy,*²⁰⁰ operated in coordination with other entities of the Federation, to ensure early childhood is contemplated in the respective pedagogical guidelines and actions.

²⁰⁰ Política Nacional de Educação Permanente.

6. Goals and targets

In line with SDG Target 4.2, which provides: *By 2030, ensure that all girls and boys have access to quality early childhood development, care, and pre-primary education so that they are ready for primary education,* this Plan recommends as follows:

1. Expand the social assistance network to guarantee all pregnant women and families in situations of social vulnerability access to social protection services, including enhanced bonding and support for quality parenting.
2. Expand Family Coexistence and Bonding Services for children 0 to 6 years of age.
3. Ensure joint funding of the Basic In-Home Social Protection Service for Children with Disabilities.
4. Track families with children under the Happy Child Program, the Family Grant Program, and the Federal Government Consolidated Registry of Social Programs (*CadÚnico*).
5. Strengthen the integration, intersectoral approach and complementarity of Social Assistance services, programs, and benefits.
6. Enhance SUAS integration with the National Socio-Educational Assistance System (*SINASE*)²⁰¹ and other stakeholders in the Rights Guarantee System.

²⁰¹ Sistema Nacional de Atendimento Socioeducativo.



7. Expand the coverage of special social protection services, principally those aimed at addressing situations of neglect and violence against children and adolescents, with a view to reaching all children in need of assistance.
8. Universalize and monitor follow-up and support actions for families in sheltering services to address the factors that resulted in sheltering in the first place, strengthen ties between children/adolescents and their families and foster, where possible, safe family reunification.
9. Universalize follow-up by the social assistance services of families of children up to 6 years of age covered under the BPC.
10. Universalize and monitor the follow-up of families under the Family Grant Program that are not in compliance with program conditionalities, prioritizing families with children up to 6 years of age.
11. Expand coverage of social assistance actions for children subject to child labor and their families, eliminating all child labor among children under 6 years of age by 2025, in accordance with the Sustainable Development Goals.
12. Maintain updated mapping information on all children up to 6 years of age with disabilities throughout the national territory who are beneficiaries of the BPC.
13. Contribute to placing children 5-6 years of age subject to child labor in public early childhood education (preschool) or the first year of Elementary Education.
14. Establish national guidelines and provide technical and financial support to municipal capacity building programs for professionals engaged in institutional and family sheltering services, including content on early childhood development, restorative care, and others.
15. Discontinue the removal of children and adolescents from their families due to factors relating to poverty, ensuring in these situations priority inclusion of families in income transfer programs, benefits, and other forms of material support, in addition to systematic follow-up by the CRAS and CREAS and, where necessary, provide joint sheltering services, whereby the mother and/or father can be sheltered with the child in order to prevent family separations.
16. Ensure systematic follow-up by the CRAS and CREAS of families with children and adolescents in sheltering services, including after family reunification.
17. Regulate mandatory resource allocation to the Unified Social Assistance System at the federal, state, and municipal levels so as to strengthen the programs/services delivered to families with pregnant women and young children.
18. Expand host family sheltering services to prevent the institutionalization of young children.
19. Strengthen access to the *CadÚnico* for purposes of use in other policies.
20. Implement the SUAS's Continuing Education Policy in state agencies and ensure specific content on early childhood.

Family and community coexistence for child victims of rights violations:

*institutional sheltering,
affective fostering,
host families,
adoption*



Overview

With enactment of the 1988 Brazilian Federal Constitution and the Statute on the Child and Adolescent (ECA), Brazilian law recognized children and adolescents as subjects of rights and individuals in development, thereby taking on the commitment to their protection. Family and community coexistence was thus recognized as a right under Brazilian law. This paradigm shift transformed the State's view not only of children and adolescents but of the family, as well – principally those in situations of poverty.

Family and community coexistence is assured under article 227 of the 1988 Brazilian Federal Constitution and the Statute on the Child and Adolescent. Article 19 of the Statute provides as follows: *The child and adolescent have the right to be raised and educated within the family and, exceptionally, a substitute family, ensuring family and community coexistence in an environment that guarantees their integral development.*²⁰² The provision reflects recognition of the family as a privileged social space in the subject's formation. The article was updated by the Early Childhood Legal Framework, which also amended paragraph 3 of the ECA by incorporating revised terminology based on the National Plan for the Promotion, Protection and Defense of the Right of the Child and Adolescent to Family and Community Coexistence (PNCFC),²⁰³ stating that *preference will be given, in relation to all other measures, to ensuring the child or adolescent is maintained in or reunified with their family, to which end the child or adolescent shall be included in protection, support and promotion programs (...).*²⁰⁴

Recognizing the family's importance cannot be confused with ignorance of the fact that the ma-

jority of violations involving the fundamental rights of the child and adolescent occur within the family context. Depending on the gravity of the violation, removal from the nuclear family may be necessary, in which case sheltering may be required as a protective measure of last resort: exceptional, temporary, and provisional.

Sheltering itself contains a contradiction: if on the one hand, it serves to protect, on the other it represents a threat and violation if it fails to ensure family and community coexistence. Therefore, at the time of separation, all stakeholders of the Rights Guarantee System are immediately tasked with the challenge of returning the individual to their home and devising family and community coexistence strategies.

The National Survey of Child and Adolescent Shelters, 2004 (SILVA),²⁰⁵ conducted by the Brazilian Institute for Applied Economic Research, revealed truths about sheltering services in Brazil that raised alarm bells. Many sheltering services operated as large orphanages. The survey showed that at the time more than half of sheltered children and adolescents (52.6%) remained institutionalized for more than two years. However, it also found that 87% of institutionalized children came from known families, but that only 58% maintained ties with those families. The findings also indicated that many institutions continued working with large groups, in contrast to the recommendation of the ECA that preference be given to small groups. Moreover, in 47% of all cases, extreme poverty remained the primary reason for denying children and adolescents the right to live with their parents.

Following public disclosure of the realities above, a coordinated effort between the federal government, civil society, the CONANDA and the National Social Assistance Council (CNAS)²⁰⁶ culminated in release of the National Plan for the Promotion, Protection, and Defense of the Right to Family and Community Coexistence.²⁰⁷

²⁰² Text given by Article 19 of the ECA, Article 25 of Law 13257, of 2016. Available at: <https://www2.senado.leg.br/bdsf/bitstream/handle/id/534718/eca_1ed.pdf>. Accessed: 9 June 2020.

²⁰³ *Plano Nacional de Promoção, Proteção e Defesa do Direito de Crianças e Adolescentes à Convivência Familiar e Comunitária*. Available at: <http://www.dhnet.org.br/dados/pp/a_pdfdht/plano_nac_convivencia_familiar.pdf>. Accessed: 4 June 2020.

²⁰⁴ Available at: <<http://www.primeirainfancia.org.br/wp-content/uploads/2016/03/marco-legal-da-primeira-infancia-texto-sancionado.pdf>>. Accessed: 9 June 2020.

²⁰⁵ *Levantamento Nacional de Abrigos para Crianças e Adolescentes*.

²⁰⁶ *Conselho Nacional de Assistência Social*.

²⁰⁷ *Plano Nacional de Promoção, Proteção e Defesa do Direito à Convivência Familiar e Comunitária*.

The PNCFC reinforces and provides theoretical justification for the importance of family life. Supported by national and international legislation, research and experts in the field of children and adolescents, the Plan defines the family as the child's primary and most important nucleus of socialization. The underlying principle is that families may be configured in innumerable ways, such that there is no single framework to inform its organization and operation. Further, the Plan notes that *the capacity of families to fully perform their responsibilities and functions is closely tied to access to the universal rights of health, education, and other social rights.*

Within the family environment, children establish their first affective bonds, experience emotions, form their identity, develop autonomy, learn to make decisions, control their impulses, tolerate frustrations, exercise mutual care and face conflict. The PNCFC emphasizes the capacity of families, in the diversity of organizational arrangements, to perform their duty to protect and socialize children and adolescents. Generally, children are incorporated in the cultural and social universe within the nuclear family, through appropriation of the world of language, as well as values, beliefs, customs, and traditions. The importance of a safe, affective, and stable environment, especially in the first years of life, is a point of consensus among researchers. In the majority of cases, support to basic and community policies is necessary to ensure these conditions.

The advances spurred by the PNCFC, furthermore, bear close relation to implementation of the Unified Social Assistance System, given the interface between the Social Assistance Policy and the issue of family and community coexistence. The SUAS includes a set of services, benefits, programs and projects and adopts an integrated approach on access to services and benefits, with a view to promoting, beyond mere access to income, improved conditions of life for families in situations of severe social vulnerability and risk, strengthening bonds and providing sheltering services, in accordance with the directives issued by the competent judicial authorities or, in emergencies, child and adolescent protection councils. In this light,

social assistance services provide support for care and protective functions and to families in the accomplishment of their unique role, helping to prevent, in this way, the child's removal from family life or ensure that removal, when necessary, is not based solely on factors connected to poverty. Where removal from family life is the best option available to protect the child or adolescent, the SUAS, in addition to providing sheltering services, will participate in efforts with the family of origin to reintegrate the child or adolescent into family life.

In many cases, it is not possible for the child to remain in the very nucleus of his or her original family, composed of parents and children, or the father or mother on their own and child or children. However, in many cases it is possible to place the child with extended family, namely close relatives with which the child maintains a bond and for whom the child feels affinity and affection. This option should be pursued before referring children to sheltering services, pursuant to the applicable regulations of the Child and Youth Courts governing changes to a child's family status.

Sheltering services are part of the high-complexity special social assistance protections provided under the SUAS. They are regulated by the National Classification of Social Assistance Services²⁰⁸ and the Technical Guidelines: Sheltering Services for Children and Adolescents²⁰⁹ and may be offered in the modalities set forth below.

- Institutional shelters: shelter up to 20 children and adolescents in units similar to a residential home, with direct care provided by caregivers/educators and caregiver assistants.
- Guest homes: shelter up to 10 children and adolescents in residential homes within the community, with direct care provided by a resident caregiver/educator and a ca-

²⁰⁸ *Tipificação Nacional de Serviços Socioassistenciais*. CNAS Resolution 109, of 2009.

²⁰⁹ *Orientações Técnicas: Serviços de Acolhimento para Crianças e Adolescentes*. Joint CONANDA/CNAS Resolution 1, of 2009. Available at: <<http://www.crianca.mppr.mp.br/pagina-1350.html>>. Accessed: 9 June 2020.



regiver/educator's assistant.

- **Host families:** composed of families that have been registered, selected, capacitated, and supervised to shelter a child, adolescent, or group of siblings in their home residence.
- **Youth boardinghouses:** shelter groups up to 6 young adults between the ages of 18 and 21 years in residential units operated through a co-management arrangement with residents.

All of these modalities require a coordinator and a technical team composed of, at a minimum, a psychologist, and a social worker, who, in addition to performing the necessary activities to ensure high quality sheltering services, work in close collaboration with the Child and Youth Courts and other stakeholders within the protection network. Their guiding objective is to ensure family and community coexistence. Sheltering under any of these modalities is a complex measure that demands coordination between different subjects, services, and sectors, as well as a wide range of intervention strategies.

In 2011, the National Survey of Children and Adolescents in Sheltering Services²¹⁰ was conducted through a cooperative initiative of the former Ministry of Social Development and Hunger Eradication (MDS), the Oswaldo Cruz Foundation (FIOCRUZ) and the Jorge Careli Latin American Center for Studies on Violence and Health (*CLAVES*).²¹¹ The results of the survey provided updated information on the situation examined by IPEA. With specific respect to PNCFC actions, the survey demonstrated the need for measures to qualify sheltering services in Brazil and foster actions, such as increased federal joint funding and a reorganization process aimed at aligning SUAS's parameters

²¹⁰ ASSIS, Simone Gonçalves de; FARIAS, Luís Otávio Pires (org.). *Levantamento Nacional das Crianças e Adolescentes em Serviço de Acolhimento*. Hucitec Editora: São Paulo, 2013. Available at: <http://aplicacoes.mds.gov.br/sagi/dicivip_datain/ckfinder/userfiles/files/LIVRO_Levantamento%20Nacional_Final.pdf>. Accessed: 9 June 2020.

²¹¹ Centro Latino-Americano de Estudos de Violência e Saúde Jorge Careli.

with the applicable legislation. The survey also made strides by generating data on sheltering services and producing record templates. Of note on this front were the introduction of specific forms in the SUAS Census on sheltering services and host family services, the creation of the SUAS Census (a physical and electronic model for the respective services) and preparation of a document titled Technical Guidelines for Development of the Individual Assistance Plan (IAP) for Children and Adolescents in Sheltering Services.²¹²

Guidelines

Effectively guaranteeing the right to family and community coexistence involves a set of stakeholders in the Rights Guarantee System, each with different responsibilities and attributions.

With respect to preventing the rupture of family ties or ensuring these are restored, the Social Assistance Policy plays an important role by focusing on the family nucleus as the fundamental social unit within the geographic territory. The policy prioritizes meeting the demand for access to essential services and policies, social work actions with families aimed at strengthening family and community ties and guaranteeing social protection from the full range of risk situations and rights violations. The framework encompasses support to the protective role of families, especially those with young children.

The first years of life are decisive for the individual's formation and to ensure each subject can achieve his or her full developmental potential. It is a stage in life in which human beings are wholly dependent on the care provided by others, an adult who provides care, shelter, understanding and love to the individual. In general, it is the mother who plays this role and attends to the infant's initial needs. But the Early Childhood Legal Framework undersco-

²¹² *Orientações Técnicas para Elaboração do Plano Individual de Atendimento (PIA) de Crianças e Adolescentes em Serviços de Acolhimento*. MDS, 2018. Available at: <http://www.mds.gov.br/webarquivos/arquivo/assistencia_social/OrientacoestecnicasparaelaboracaodoPIA.pdf>. Accessed: 9 June 2020.

res that *the mother and the father, or responsible guardians, have equal rights and shared duties and responsibilities in providing care and education to the child, and that the right of the family to transmit its beliefs and cultural values must be safeguarded, in accordance with the rights of the child [...]* (article 26 of MLPI, sole paragraph, which amends article 22 of the ECA).²¹³ Even if inevitable, rupture with the child's initial figure of reference, security and affection leads to suffering and feelings of loss to which attention must be devoted. Guided by the best interest of the child, we lay out the working guidelines for early childhood with respect to family and community coexistence.

Preventing separation

A preliminary analysis of this Plan and the PN-CFC's conceptual framework reveals the need for more intensive efforts to maintain children with their families of origin and prevent suffering and rupture. This is the starting point for ensuring the right to family and community coexistence.

All efforts as necessary should be exerted to prevent separation from the family of origin, with a view to supporting the family's role in providing care and protection to the child.

Support from extended families and the community and basic public policies are often required to ensure the mother, father and or central affective figures in the child's life are able to fully perform their care and protective roles. The search for strategies to ensure newborns and children can remain safely with their families of origin (family nucleus or extended family) is the first and most important principle of this Plan.

When sheltering assistance is inevitable to ensure the safety, care, and protection of the

child – and when a rupture has occurred – the possibilities for safely reunifying the family should be determined on a case-by-case basis. Similarly, psychosocial services and assistance – including material support – should be provided, with a view to addressing the conditions that led to the need for sheltering in the first place and enabling the family to perform its childcare and protective role. Children should be provided assistance in a coordinated fashion by staff at sheltering services and the Specialized Protection and Assistance Services for Families and Individuals (PAEFI), a component of the Specialized Social Assistance Reference Centers, in addition to, where applicable, CRAS teams, as well as services under other public policies and stakeholders of the Rights Guarantee System.

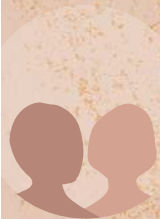
Preventing the institutionalization of children 0-6 years of age

Family sheltering is identified in article 34 of the ECA as a priority service when removal from the family unit is identified as a necessary protective measure. Studies show that with respect to infants and young children family sheltering has been the best response in most cases, providing a stable and affective environment capable of providing the opportunity for integral development in this stage of life, so precious to each and every subject.

As prescribed in the Social Assistance Policy, operational implementation of the Host Family Sheltering Service²¹⁴ is tasked to the Executive Branch, in interface with the Judicial Branch. Services may be provided directly by the administering social assistance body in a given municipality or the Federal District or through a partnership agreement with a civil society

²¹³ Op. cit.

²¹⁴ *Serviço de Acolhimento em Família Acolhedora.*



organization. Implementation of services requires coordination and political effort on the part of the local administrator: the municipality needs to allocate resources and incorporate services in the local policy agenda as a priority social protection measure.

The function of host families is to receive the child/adolescent in the family space for such time as necessary, while respecting their identity and history and ensuring they receive the basic care, affection, love, and guidance so essential to their integral development and to family and community coexistence during the sheltering period.

In the course of family sheltering, technical teams should commit to working with the family of origin in an effort to bring about family reunification, as occurs in other sheltering services.

A case-by-case analysis can provide more in-depth insight as to the benefits of each modality of sheltering and, at the same time, allow for certain exceptions. For example, in some situations, the guest home can serve as a valuable strategy for sheltering large groups of siblings over a prolonged time period by affording them the opportunity to forge deeper fraternal bonds and strengthen themselves as a family unit.

It is important to underscore that sheltering with host families has nothing to do with adoption. Rather, it is a protective sheltering measure identical to that applied in the institutional sheltering setting, but one based on a different modality. The objective is to work toward family reunification or, where this is not feasible, referral of the child to adoption by an eligible family.

Building the capacity of sheltering services

A critical factor in the evolution of sheltering services concerns the investments made in the professional capacity building of technical teams, as well as the caregivers/educators and families

engaged in sheltering activities. Equipping them to foster the development of children on the basis of affective care should be an ongoing priority action of these initiatives. Irrespective of the modality of sheltering adopted, the focus should center on the opportunity to build spaces that are capable of meeting the specific needs of children at this peculiar stage of development. As such, whether provided through a host family, a guest house or an institutional shelter, the possibility of ensuring the quality of such a deeply sensitive service will be directly proportional to the opportunity to qualify the relevant individuals and professionals.

As noted earlier, the Technical Guidelines: Sheltering Services for Children and Adolescents outline the parameters for the operation of sheltering services and are supplemented by other significant advances, such as the development of the:

- *SUAS File – Sheltering for Children and Adolescents*, a technical instrument that records and organizes information for diagnosing, planning, and following up the social work actions undertaken on behalf of sheltered children, based on their family and affective relations; and the
- *Individual Assistance Plan (PIA) for Children and Adolescents in Sheltering Services*,²¹⁵ which consists of a case-by-case planning strategy for the actions and activities developed with children and their families during the sheltering period, with a focus on respecting their uniqueness.

Additionally, close, and discerning attention to each case and the construction of an individualized assistance plan are contingent on the technical capacity of service professionals, who require the sensitivity and space to reflect on their practices and address the suffering and pain that sheltering imposes, despite the intention to protect and heal. To this end, providing

²¹⁵ *Orientações Técnicas para Elaboração do Plano Individual de Atendimento (PIA) de Crianças e Adolescentes em Serviços de Acolhimento*. Secretaria Nacional de Assistência Social. Ministério do Desenvolvimento Social, 2018. Available at: <http://www.mds.gov.br/webarquivos/arquivo/assistencia_social/Orientacoestecnicas-paraelaboracaodoPIA.pdf>. Accessed: 4 June de 2020.

ongoing education and supervision to professionals is critical.

The number of host family sheltering services in Brazil remains insufficient to meet current demand in relation to young children, who require special protective measures. Therefore, it is of fundamental importance during the transition process, so as to ensure children are housed in the family modality, to provide quality services in institutional shelters and guest homes.

The importance of affective bonding when sheltering infants and children in the first years of life is a consensus position among researchers. In this light, if a child must be placed in an institutional shelter, the respective facility should perform its functions with a view to offering opportunities for quality affective bonding, serving as a space in which children can heal from trauma and violations and have access to an environment that is adequate, healthy, and safe for their development. With this in mind, article 31 of the Early Childhood Legal Framework, as amended by article 92 of the ECA, provides that *for purposes of children ages zero (0) to three (3) years of age in institutional sheltering facilities, special attention shall be given to the activities of stable and qualitatively significant educators, to specific routines and to meeting basic needs, including the need for affection, as priority measures.*

These factors should be present in the day-to-day relationships between educators/caregivers and the child, in lieu of mechanical and repetitive approaches, as a means to foster the development of authentic human relationships. However, under this arrangement care should be taken to avoid feelings of possessiveness in relation to the child. Doubts in relation to the affective bond may raise questions such as: *and what if I become too attached and he or she leaves?* Preparing professionals in the field is essential for purposes of overcoming these limitations and ensuring they promote development during the transition period leading to the child's return to his or her family of origin or placement in an adoptive home.

Proposals

1. Ensure, where protective sheltering measures are required, that child services be offered on a priority basis by host families, pursuant to article 34, paragraph 1, of the ECA. To accomplish this proposal, the National Plan for Early Childhood recommends the following actions.
 - Coordinate actions to clarify and raise awareness on Host Family Sheltering with social assistance bodies, the Social Assistance Network, and other stakeholders in the Rights Guarantee System, in particular officials and technical teams of the Judiciary, Public Prosecution Office and Office of the Public Defender, as well as the Child and Adolescent Protection Council, with a view to facilitating implementation of new family sheltering services.
 - Organize educational campaigns on Host Family Sheltering Services, with a view to increasing the number of families qualified to offer sheltering services.
 - Build the capacity of professionals of Host Family Sheltering Services to train and support families.
 - Offer contributions on qualifying, capacity building, preparing, and following up with host families.
 - Ensure sufficient budget resources to expand host family sheltering services, including through subsidy payments to host families.
 - Offer incentives, support and capacity building to municipalities and the Federal District for implementation of new host family sheltering services.
2. Ensure resources of the Municipal Fund for the Rights of the Child and Adolescent²¹⁶ are allocated to the actions prescribed un-

²¹⁶ *Fundo Municipal dos Direitos da Criança e do Adolescente.*

der article 260, paragraph 2, of the ECA, with the oversight and enforcement of the Public Prosecution Office, as necessary.²¹⁷

3. In cases of institutional sheltering of groups of siblings that include children 0 to 6 years of age, guarantee the quality of the differentiated assistance delivered to that age group, pursuant to article 92, paragraph 7, of the ECA, through planned spaces, educators, and qualified sheltering staff.
4. Foster use of the SUAS File – Sheltering for Children and Adolescents and the Individual Assistance Plan (PIA) for Children and Adolescents in Sheltering Services, with a view to recording the case histories of children during sheltering, as well as promoting personalized attention and the necessary support to the applicable measures adopted by bodies of the Rights Guarantee System.
5. Execute strategies to guarantee the right to family and community coexistence in sheltering services, such as preserving the child's bond with the family of origin (where no prohibitive circumstances to this end exist), preparing the child for placement in adoption, participating in community life within the sheltering service's geographic territory, among others.
6. Establish and implement child services that meet the needs of expectant mothers or women with children and families in situations of social vulnerability, so as to prevent separation and contribute to the protection of the family, construction/reconstruction of affective and family ties, social reintegration, and autonomy.
7. Develop actions in partnership with maternity ward teams to promote the protection of expectant mothers by a qualified network, stimulating family and community support systems, especially the participation of fathers, with a view to preventing separation and encouraging protected hospital discharge.
8. Promote partnerships with milk banks, in order to ensure maternal milk to infants arriving at institutional and family sheltering services, where breastfeeding is not possible.
9. Promote training for professionals of the Rights Guarantee System, so as to ensure the rights of children with mothers deprived of liberty.
10. Equip SUAS and service network professionals with methodologies to undertake social work actions with families and promote parenting.
11. Establish a program/service to follow up and support sheltering with the extended family or within the child's and/or adolescent's network of significant relationships when a family rupture has been prevented and/or family integration and reintegration enabled.
12. Offer all professionals engaged in medium-complexity basic protection services and sheltering services a training program that includes scientific information on the importance of the first years of life to integral development, the significance of bonding and affection, the centrality of play, free movement, reading, storytelling and conversation with infants and young children, as well as respect for each child's individual pace of development and the value of routines.
13. Guarantee, by 2022, the reestablishment of all family and community bonds for 100% of children placed in shelters by reason of poverty.

²¹⁷ Article 260, paragraph 2, of the ECA: The national, state, and municipal councils for the rights of the child and adolescent will establish, through investment plans, the criteria for budget resources and other revenues, including mandatory appropriation of a set percentage to incentivize custodial sheltering of children and adolescents and comprehensive care programs aimed at early childhood (...) [underline added]. Op. cit.

Progress and challenges in the adoption of young children

Despite advances in the laws governing adoption, such as the amendments incorporated in the ECA through Law 12010 in 2009, and Law 13509 in 2017, in practice existing adoption models center more on the interests of the adopting adults than the child or adolescent deprived of the right to family and community coexistence.

The assertion that red tape is to blame for children and adolescents who remain institutionalized after becoming legally eligible for adoption is still commonplace.

However, the National Justice Council recently released its Diagnosis of Adoption in Brazil²¹⁸, based on the new National Adoption and Sheltering System, which replaced the National Adoption Registry.²¹⁹ According to the study, the majority of children eligible for adoption are above the age of 12 years, yet only 0.3% of prospective adopters are willing to adopt children over that age. The primary obstacle to adoption, therefore, is not red tape but a lack of interest in adopting older children, as well as those with adverse health conditions and sibling groups that cannot be separated.

Young children are the most desired age group for prospective adopters. Of the 1548 children and adolescents available for adoption in the diagnostic study sample, published 25 May 2020, only 112 were under 6 years of age. Of these, the majority belonged to sibling groups and, as such, were not eligible for individual adoption.

Another obstacle in connection with adoption

wait times and the effort to ensure adoptions are carried out in the highest interest of the child centers on the prevalence of illegal adoptions in Brazil. Children are adopted without due legal security or verification as to the actual need for separation from the original family nucleus. The practice is carried out through direct birth registrations in public registry offices without appropriate legal procedures to safeguard the child's origin. The activity is known as *adoption Brazilian style*. It is a criminal violation and poses significant mental health risks for human development in early childhood.

Another practice, still very much in use, associated with the tendency to place the interests of adults over those of children, refers to earmarked adoptions or *intuitu personae*. This consists of securing adoption by leapfrogging the waiting list. According to the National Adoption and Sheltering System, as of 12 October 2019, a total of 303 children in Brazil had been adopted in this manner.

In addition, procedures for voluntary surrender of children to adoption should be disseminated in order to reduce the prejudice to which mothers who opt for this avenue are subjected and to ensure they receive information on how to safely surrender their children to adoption through the Justice System. According to the National Adoption and Sheltering System, as of 12 October 2019, a total of 847 cases of voluntary surrender were registered, while 439 children were delivered through adoption to the custody of previously authorized and duly qualified adopters in a safe and secure manner.

Goals and targets for adoption

1. Organize campaigns on legal adoption, raising awareness as to the risks of *Brazilian-style adoptions* and earmarked adoptions (*intuitu personae*) that do not involve the child's relatives.
2. Expand campaigns and opportunities for the adoption of children with disabilities

²¹⁸ Conselho Nacional de Justiça. *Diagnóstico sobre o Sistema Nacional de Adoção e Acolhimento 2020*. Available at: <https://www.cnj.jus.br/wp-content/uploads/2020/05/relat_diagnosticoSNA.pdf>. Accessed: 9 June 2020.

²¹⁹ *Cadastro Nacional de Adoção*.



- in sheltering services, as well as the acceptance of sibling groups and the adoption of older children.
3. Coordinate the health and social services of the Child and Youth Courts to ensure psychological and legal follow-up and support to expectant mothers who opt to surrender their infants, with a view to strengthening the procedures on protected voluntary surrender.
 4. Eliminate mandatory revocation of parenting capacities in cases involving young and adolescent children of homeless persons.
 5. Strengthen the actions of networks and the construction of pipelines to expedite procedures on family reunification, revocation of parenting capacities or legal adoption.
 6. Prepare prospective adopters, especially in cases of late adoption (children above the age of 2 years).
 7. Carefully prepare children and adolescents for adoption by providing capacity building to professional staff in sheltering services and the Child and Youth Courts for this purpose.
 8. Incorporate multidisciplinary teams in the jurisdictional Child and Youth Courts to advise on the related matters, as per article 150 of the ECA and National Justice Council Resolution 36.²²⁰
 9. Set up courts with exclusive jurisdiction over child and youth issues in all judicial districts and regional forums with more than 100 000 inhabitants, pursuant to National Justice Council Resolution 36.
 10. Offer ongoing training to all Justice System professionals – judges, prosecutors, public defenders and technical staff – for the purpose of capacitating them to: (I) support their decisions on family ties and coexistence, especially in the first years of life, on the basis of science-based information; (II) use the National Adoption and Sheltering System; (III) apply adequate procedures for revoking parenting capacity and for adoptions; (IV) work in an integrated fashion with sheltering service teams; (V) prepare adopters and conduct post-adoption follow-up; (VI) prepare children and adolescents for adoption; (VII) understand and value: (a) the importance of the bonds established with caregivers and host families; (b) the need for a gradual transition to the adoptive family; and (c) the importance of departure rituals. Other items may be included in courses as new circumstances arise.
 11. Conduct follow-up of the custody and adoption process, especially in the first six months of the child's life, so as to support the adoptive family's role in providing care and protection and with a view to overcoming difficulties and ensuring the child is receiving appropriate care.

²²⁰ Available at: <<http://cgj.tjrj.jus.br/documents/1017893/1038413/prov-36-cnj-estrutura-varas-inf-juv.pdf>>. Accessed: 4 June 2020.

The right
of all children

to play
at playing



Introduction

A foundational aspect of the formation of subjects of rights involves determining, from the outset, what is relevant and necessary for their integral development. From this standpoint, it is essential to underscore play as a right and its significance to the child's physical, cognitive, emotional, and cultural development, as well as to socialization and family life.

The accepted pedagogical, social, and psychological findings on the relationship between the child and play confirm for families and professionals that play is a valuable dimension of our culture, one inherent to every social, cultural, and historical context. Play and its components – playful activities, toys, music, games – are considered a material and immaterial heritage of humanity, comprising what has come to be designated as child culture. It can be said, particularly in relation to early childhood, that where there is a child there is play and where there is play there is learning.

Article 31 of the Convention on the Rights of the Child affirms the right of all children *to rest, to leisure, to play, to recreational activities and to participate freely in cultural life and the arts*. However, the Committee on the Rights of the Child has expressed concern with the limited recognition given by governments to these rights.

The Early Childhood Legal Framework highlights the right of every child to play by: 2) designating play and leisure, among other activities, as priorities of early childhood policies (article 5); and 2) mandating that the union, states, Federal District and municipalities organize and encourage *the creation of play spaces that foster well-being, play and creativity in public and private places where children circulate, in addition to the fruition of free and safe environments in their communities*.²²¹

The National Curricular Guidelines on Early Childhood Education (*DCNEI*)²²² identify two central pillars of pedagogical practice around which child learning and development activities take place: interaction and play. Interaction and play do not simply constitute early childhood education activities performed in formal establishments: they are part of children's everyday lives from birth, carried out within the family environment and in their surroundings. It is their way of coexisting with the physical and social realm and of being children.

The National Common Core Curriculum for Basic Education/Early Childhood Education (*BNCC/EI*)²²³ ranks play second among the five learning goals deemed most essential in this stage of life. It states that *interaction during play characterizes the day-to-day of childhood existence, offering numerous lessons and potentials for the integral development of children. In observing the interaction and play between children and adults, we can identify, for example, the expression of affection, mediation of frustrations, resolution of conflicts and regulation of emotions*.²²⁴

The BNCC for Early Childhood Education defines play as an objective of learning: *to play day to day in different ways, different spaces, and times, with different partners (children and adults), increasing and diversifying the child's access to cultural production, knowledge, imagination, creativity, emotional, body, sensory, expressive, social, and relational experiences*.

In addition to the educational sphere, other areas also view play as a fundamental right. The National Policy on Comprehensive Child

²²¹ Law 13257, of 8 March 2016, article 17. Available at: <http://www.planalto.gov.br/ccivil_03/_ato2015-2018/2016/lei/113257.htm>.

²²² *Diretrizes Curriculares Nacionais da Educação Infantil*. Available at: <http://portal.mec.gov.br/index.php?option=com_docman&view=download&alias=15548-d-c-n-educacao-basica-nova-pdf&Itemid=30192>.

²²³ *Base Nacional Comum Curricular da Educação Básica/Educação Infantil*.

²²⁴ *Base Nacional Comum Curricular da Educação Básica*, page 37. Available at: <http://basenacionalcomum.mec.gov.br/images/BNCC_EI_EF_110518-versaofinal_site.pdf>.

Health Care (PNAISC)²²⁵ emphasizes as part of its basic health actions the importance of play, through an intersectoral partnership with education and social assistance policies and, where possible, cultural and sports policies, primarily for children with complex conditions, such as obesity, hyperactivity, psychosocial disorders, and chronic diseases, among others. It is through play that children undergoing hospital and home health treatment regimes connect to the outside world and are able to experience moments of pleasure and well-being capable of improving their health and contributing to their recovery.

The social assistance field sees play as occupying an important place in the socialization process. The National Social Assistance Policy (PNAS)²²⁶ considers basic social assistance services for children 0 to 6 years of age to include those that assure the right to play, in particular for children placed in institutional sheltering as a protective measure.

The importance of the issue in public policies has reinforced the need for intersectoral efforts on three levels.

First, as a right. As a right, play cannot be denied to the child, under penalty of depriving the child of his or her essential and intrinsic condition as a child and inherent subject of this right.

Second, as a public policy. To guarantee this right to all children, all childhoods, regardless of place of residence, the State must put forth purposeful action plans that ensure time, space, and persons – public officials, caregivers, professionals – that protect and promote play for children.

Third, in terms of the meaning of play. The place it occupies in the formation of the subject, the

role it plays in learning and building the values and competencies essential for life.

The right to play cannot be limited or simply glorified on Children's Day, when television feeds their dreams of a new toy and children's stores are filled with parents scrambling to find presents for their kids. Play is intrinsic to being a child. It is their way of existing in the world, feeling it, experiencing it, and coming to know themselves within it. As such, play must be permanent and omnipresent.

This chapter is aimed at ensuring that the following obligations are duly executed: (a) the provisions of the Early Childhood Legal Framework; (b) the National Education Council guidelines on early childhood education, in regard to play and fulfillment of the BNCC/EI goal, enshrined as a right to learning; and (c) the recommendations of the Brazilian Society of Pediatrics²²⁷ concerning the benefits of play and outdoor leisure and learning activities. In this way, the Plan reaffirms the concept of play as a spontaneous and pleasurable activity, a stance which should not be construed to render it devoid of rigor and seriousness, challenge and rapture, creation and discovery, mystery, and surprise.

What play is and what happens during play

Under this Plan, play is a free-choice activity guided by the child. In contrast to directed activities with a pedagogical purpose, play is an experience that flows from the subject engaged in play. Therefore, while play fosters development of a range of skills, it is not an instrument but an end in itself. The child plays because the child enjoys the activity, because play is the state of being a child, experiencing childhood, interacting with

²²⁵ BRASIL. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Ações Programáticas Estratégicas. *Política Nacional de Atenção Integral à Saúde da Criança: orientações para implementação*. Brasília: Ministério da Saúde, 2018. Available at: <http://www.saude.pr.gov.br/arquivos/File/Politica_Nacional_de_Atencao_Integral_a_Saude_da_Crianca_PNAISC.pdf>.

²²⁶ BRASIL. Ministério do Desenvolvimento Social e Combate à Fome. Secretaria Nacional de Assistência Social. *Política Nacional de Assistência Social*. Brasília: 2004. Available at: <http://www.mds.gov.br/webarquivos/publicacao/assistencia_social/Normativas/PNAS2004.pdf>.

²²⁷ Sociedade Brasileira de Pediatria (SBP). *Benefícios da Natureza no Desenvolvimento de Crianças e Adolescentes (2019)*. Available at: <<https://www.sbp.com.br/imprensa/detalhe/nid/beneficios-da-natureza-no-desenvolvimento-de-criancas-e-Adolescentes/>>.



the environment, and exploring surroundings and challenges. For the child, true play has no external purpose; the end is intrinsic to the act of playing: the child does not play in order to develop but develops through play.

Play is any behavior, activity or process initiated, controlled, and organized by children themselves. It occurs when and where the opportunity presents itself. Play is not a suggested act, proposed or imposed from without, but one powered by intrinsic motivation and undertaken by the child. The principal characteristics of play (playful activities, games, etc.) are: enjoyment, uncertainty, challenge, flexibility, and unproductivity. Combined, these factors contribute to the pleasure and consequent incentive to continue playing. Play involves the exercise of autonomy, physical, mental, and emotional activity, which can assume myriad forms, whether performed in a group setting or individually. These forms change throughout childhood.²²⁸

Play is a language that enables the child's integral development, representing a foundational and constitutive action of the human being. It fosters the physical, cognitive, emotional, ethical, aesthetic, and social development of infants and children. When children play, they construct knowledge of the world, of others and of themselves. From the first months of life, play is an engine of learning, a basis for the infant to explore and perceive their body, materials, and the people with which they coexist. Through the senses, infants touch and are touched by the material world and activate their imagination, the creative potential of reproducing, transcending, and relating to the world.

When children play, they come into contact with their fantasies, desires, and feelings, learn and recognize the power and limits of their bodies and establish relationships of trust with others. Through the act of play, children have the opportunity to experience situations from different perspectives, and distinctly from the way they are lived in their *real* form. For children receiving health treatment or placed in institutional sheltering settings as a protective

measure, play is decisive for reducing stress, depression, anxiety, and behavioral disorders. By playing, children refine their skills and competencies, learn the rules of coexistence, develop various languages or forms of expression, and expand their vision of the world around them. Play has a central role in the relationship between children and adults, other children, and the environment.

Play in outdoor environments and in contact with nature reduces the risk of child obesity, stress, hyperactivity, overexposure to screens and to technologies. Reliving problems with which children are confronted through play strengthens their ability to face adverse and complex situations. In offering play activities, a certain degree of risk is frequently beneficial, if not essential. Children like challenges, opportunities for adventure that test and bolster their skills. Giving them the chance to take on risks and challenges produces other benefits as well, such as the capacity to learn how to assess and manage risk, build self-confidence, develop physical abilities, among others.

It is essential that children have spare time to play freely. The pressure they face to fill their days with all sorts of activities goes against the grain of current knowledge in the child sciences about the development process in the earliest stages of life. Saving children means ensuring them the right to play freely, which can only occur if children have free time. It means having the freedom to be spontaneous through play, a sentiment captured by Lydia Hortélio's wise observation that *play is the last bastion of human spontaneity*.

Play is a powerful tool in the effort to humanize hospital care. For Elizete Matos,²²⁹ health professionals need to understand that their work extends beyond treating illness: they must provide comprehensive care to children through actions developed in coordination with other fields. The act of playing is a means of expression that enables children to disconnect from the hard realities of illness and to enter a world of fantasy and imagination, enabling them to

²²⁸ UN Committee on the Rights of the Child. *General Comment on Article 31, 2013*: 6.

²²⁹ MATOS, Elizete L. *Escolarização Hospitalar: educação e saúde de mãos dadas para humanizar*. Petrópolis: Vozes, 2009.

explore, relive and create settings, which are often difficult to comprehend, and to reconnect with the world. Play bolsters the resistance of children to stress and reduces their propensity to violent and antisocial behavior.

In the educational environments in which children spend much of their day, free play should be given priority. This means ensuring that children be allowed to engage in play at least 60% of their time, without guidance or directed exercises.

Play activities have a decisive role in the relationship between children and adults, between children themselves and between children and the environment. When playing, children develop empathy, that is, the capacity to put themselves in another person's shoes. Whether through play activities with individuals of different ages, taking on different roles in games (such as *pretend* activities), the child learns to see things from other perspectives, both real and imaginary. In this way, children perceive the world from a more pluralistic perspective, as a diverse and inclusive place. In addition to constituting an essential activity for children, play enables adults to better understand the universe of children and their aspirations.

The adult's role is to observe and mediate or act as an attentive participant, available and sensitive to the child's expressions. The purpose of mediation is to extend the path forged by the child, while ensuring, at all times, respect for their willingness to accept or reject proposed activities. For early childhood educators, it is essential they provide the conditions for free play. This includes play time, space, and materials, with priority to unstructured and natural materials, instead of finished and manufactured toys, and to a safe, pleasant, rich environment of possibilities, including outdoor spaces and contact with nature.

Proper performance of the adult's mediating function requires understanding the importance of play to child development and, for many of them, recovering the lost or forgotten dimension of childhood play. In this light, parent meetings and training programs for early childhood education professionals should include the means for adults to dialogue about play and relive

the experience of play within themselves.

Play spaces and time should be created everywhere children reside or spend any period of time: in homes, in communities, in early childhood education institutions, in sheltering institutions, as well as hospitals, airports, shopping centers, in cities, in social and cultural organizations. Because play is not a sporadic and occasional activity reserved for specific moments in places separate from daily life but constitutes the manner and condition of being a child, of living in the world, of relating, of discovering, creating and self-affirming themselves as a subject.

Daycare centers and preschools should prioritize free play for children, an approach which would not preclude educators from seeking, through suggestion and challenges, opportunities to build on the learning constructed by the child during play. Yet, care must be taken in any intervention to preserve the fullness of play, its spontaneous, challenging character, its exhilaration, mystery, and surprise, lest we erode its enchantment, eliminating precisely that which attracts, engages, and stimulates growth.

We know we are in a geographic territory – community, urban enclave, neighborhood, city – that valorizes play for all children when we see play thrive in every public square, park, on sidewalks, in children's care and educational institutions, in addition to the family environment. Municipal governments, civil society organizations and businesses have mounted initiatives to reverse the process of expelling children from collective spaces in the city environment by creating public squares, parks, playrooms, leisure promenades (pedestrian streets and avenues closed to vehicular traffic on specific days), so that children and their families are able to enjoy safe and fulfilling spaces in which to stroll, walk, ride a bicycle and skate, draw, read, play, reflect. This movement, which carries profound political meaning by conferring on citizen-children the right to the city as an interactive and playful environment, should be supported, incentivized, and disseminated. To this end, municipal governments have begun to put into effective practice article 17 of Law 13257/2016 (Early Childhood Legal Framework).



In sum, play is a condition for children's lives to unfold and the means for them to express themselves. It is undeniable that when children are engaged in play, they create a pleasurable relationship with knowledge. In other words, they explore, test, discover, learn, in short, integrate feelings and thoughts, actions and emotions, reflection and expression, self-restraint and interaction with others. It is indeed exhilarating to rephrase the old adage that *children should play in childhood* to *children have their childhood to play*.

The right to play requires accessibility

Play is the domain of diversity. It is inclusive, as it presupposes respect for the singularity and spontaneity of the individual engaged in the activity. As such, coexistence with diversity – children *with* and *without* disabilities, of different races, genders, beliefs, socioeconomic means, and cultural conditions – is leveraged by play.

It is important to focus on the potentialities and not the limitations of children. The presence and participation of children with disabilities – in a playground, playroom, daycare center or preschool – contributes to making the environment inclusive and to teaching the group how to handle differences: children help themselves by not leaving their peers alone, isolated and in difficulty. Children with disabilities find in inclusive play the opportunity to exercise their right to social life, at the same time that other children learn to share and act in solidarity and assimilate the idea that everyone is different in some way.

Children with disabilities and children in situations of vulnerability face a multiplicity of barriers to play: inadequate spaces, lack of adapted toys, absence of qualified professionals, little or no knowledge on the meaning of play to their joy, happiness, well-being, and development. Public officials, educators, health, and social

assistance professionals, as well as parents, need to dedicate themselves to the production of toys and equipment that allow children with disabilities to engage in play across a diversity of spaces – home, school, street, parks, playrooms – and ensure that in those spaces they are able to interact with other children.

Play in the technology era

Serious reflection should be given to play in the technology era.

Studies on the effects of technology on human behavior reveal the risks associated with massive exposure to new media – and, in the case of children and adolescents, to their health and lives –, among them gaming disorders. Beyond this challenge, technology plays an unquestionable role in shaping the contemporary subject and, as a consequence, how children play today.

Because many digital games and electronic play resources designed for children offer an effective response to loneliness and, in some cases, at least, to sedentary child lifestyles, and because a majority of these are aligned with some of the central values of our time – success and speed, for example –, it is understandable that they would tend to impose themselves on play culture. However, their prevalence can compromise the preservation of traditional play culture, given their massive predominance. This may stem not from these new forms of play themselves, but from the impossibility or drastic limitation children have to play and interact with each other and those of other generations.

The digital era has created new types of play, and it is safe to say that today's children are part of the digital generation. But it is also true that play cannot be reduced, much less identified with, children occupying their time, distracting themselves or fixating on the digital screens of electronic devices conveyed by information and communication technologies, including smartphones, tablets, videogames, and

television. The general recommendations of the Brazilian Society of Pediatrics, all grounded in thorough research, are clear and decisive:

- - *Discourage, prevent, and even prohibit passive exposure to digital screens, including exposure to inappropriate film and video content during meals or 1-2 hours prior to sleep;*
- - *Limit exposure time to media to a maximum of 1 hour per day, for children between the ages of 2 and 5 years;*
- - *Children under the age of 6 years should be protected from virtual violence. Disconnect. Talk. Take advantage of weekends and holidays to be with the family, friends and share pleasurable moments that do not entail use of technology but rather center on affection and joy.*²³⁰

Deference by parents and other adults with responsibility for children's rights to so-called *educational* toys, games and video games based on their supposed *challenging* nature, can pose significant risks, and even lead to death. Pushing boundaries can cause affective-cognitive dissociation from reality and disruptive fantasies and behaviors. The World Health Organization classifies gaming addiction as a modern disease.²³¹

Social policy makers and public officials have the difficult task of ensuring time, space and appealing toys for children that encourage them to engage as subjects in free, spontaneous, interactive play. Even if we acknowledge that today's children are part of the digital generation, parents and educators must set appropriate limits dictated by health, development, and learning considerations.²³²

²³⁰ Sociedade Brasileira de Pediatria (SBP): *Saúde de Crianças e Adolescentes na Era Digital*. Available at: <https://www.sbp.com.br/fileadmin/user_upload/2016/11/19166d-MOrient-Saude-Crian-e-Adolesc.pdf>.

²³¹ Available at: <<https://time.com/5597258/gaming-disorder-icd-11-who/>> and at: <<https://www.who.int/features/qa/gaming-disorder/en/>>. Accessed: 5 February 2020.

²³² Article 29 of Law 12965, of 2014, which establishes the Internet Bill of Rights, specifies the need for parental oversight and vigilance and recommends digital education.

Goals and targets

Goals

1. Prioritize the right to play by considering children as inherent subjects of this right, with their own needs and characteristics, as a means to foster integral development.
2. Recognize play as a need and a privileged form of development, learning and expression of the child.
3. Incentivize play activities as a source of inexhaustible and fluid content for children to learn about themselves, culture, and the different ways of relating to and with others, while ensuring that the complementary function of didactic resources or procedures for organizing the educational process does not divest play of its true meaning for children.
4. Provide play spaces that meet the demands of early childhood, while considering the singularity of each individual, to ensure these encompass the cultural diversity produced by children and frame a set of behavioral patterns, beliefs, and moral and material values.
5. Design play spaces that are interactive, creative, and foster the expression of desires and opinions and the construction of alternative collective values to the prevailing logic and, further, democratize the access to these.
6. Devote particular attention to the creation of inclusive play spaces and to access and use of spaces by children with disabilities.
7. Value the production of knowledge by professionals engaged in early childhood culture, *with* and *for* children, as well as the production of cultural goods for children, recognizing their theoretical and practical knowledge and disseminating information on their work.



8. Train professionals who work directly with children to better understand the stages and characteristics of early child development and the importance of play activities to the formation of individual identity.
 9. Widen the discussion on the importance of play and cultural production for early childhood to ensure influencers and decision makers treat children as members of society.
 10. Explicitly promote play as central component of early childhood policies, above and beyond early childhood education.
 11. In the case of post conflict situations, calamities, and criminal acts, adopt measures to restore and protect the rights of the child, such as the use of play through creative expression to foster the recovery of emotional and social equilibrium.
 12. Review policies on the commercialization of toys and games for children, including in early childhood television programming and advertisements, in particular those that promote violence, early sexualization and stereotypes based on gender or disability.
 13. Include in rights violation notification instruments a reporting option relating to the right to play, by which children themselves are able to enter complaints when they feel their right to play has been infringed.
- Targets*
1. Conduct a survey of available public government and community spaces and prepare these in accordance with the applicable accessibility parameters, in order to ensure they are transformed into play spaces for children through the age of 6 years. Respective spaces may include public squares, parks, movie houses, museums, among others.
 2. Increase the number of public leisure, recreation and play spaces for children in urban centers, in particular in poor low-income areas (slums, urban enclaves, inner city neighborhoods, unhealthy environments), so as ensure children are able to frequent these spaces on an alternating basis. Implement vehicle velocity reducers (speed bumps or other speed-reducing infrastructure) on streets where children ride tricycles or bicycles or in proximity to areas where children play soccer and other games.
 3. Plan and build, in conjunction with the community, play spaces through a process that ensures families are heard and in which they effectively participate. In addition, engage children in planning play spaces, selecting toys and games and decorating walls, floors, and sidewalks. Provide capacity building to youth in communities to monitor, operate and supervise in play spaces.
 4. Develop guidelines on the construction of formal early childhood education spaces, according to, among other factors, the applicable accessibility parameters. For this purpose, it is essential to ensure external areas include age-appropriate equipment, in addition to green and natural spaces, for the purpose of enhancing the play activities of children up to the age of 6 years.
 5. Develop, in the last two years of this Plan, specific public calls to incentivize culture by fostering cultural projects for early childhood, artistic works (theater, dance, music, visual arts) and play activities for children in low-income areas, which are created for and by children.

6. Develop public calls and programs to guarantee access to culture and leisure by expanding the artistic repertory of children over their territories, places, and parental customs, with an eye, in this respect, to ensuring the applicable accessibility parameters.
7. Include research, methodologies and experiences in continuing education programs administered to teachers and professionals at the three levels of go-

vernment who work with infants and children through the age of 6 years that prepare them to perceive and valorize, in the course of their professional activities, play as a component of the child's development and learning.

8. Develop play workshops, with a view to valorizing early childhood culture in communities and families and enhancing the experience of intergenerational play and the adults who work with children through the age of 6 years.
9. Enhance the play repertory of teachers and the tradition of the games built up over the course of human history, in particular the diverse array of Brazilian games, play activities and toys.
10. Organize annual public information and awareness-raising campaigns on the right and importance of play on milestone dates in the history of children's rights, targeted especially to families and communities. Disseminate and celebrate World Play Day, May 28, as a day dedicated to raising social awareness on the right to play, while mobilizing municipal officials to officially recognize this commemorative date in their cities.
11. Incentivize municipalities to prepare and approve legislation instituting a *Municipal Play Week* and mandate that an ambitious program of play activities be scheduled in urban centers and outlying areas during World Play Week, with a view to integrating the two celebrations. The purpose of play week is to promote discussion and actions on the importance of play in different spaces (school, hospitals, protective institutions, cities, health clinics, family workplaces...).
12. Promote playrooms in low-income communities that respect the applicable accessibility parameters, not for the purpose of substituting early childhood education in specific institutions, but to expand and diversify the opportunities of children through age 6 to interact with older children, grandparents, and other members of the community. Playrooms should serve as cultural centers that reclaim and preserve regional and universal play culture and strengthen peer and intergenerational bonds. It is critical that these spaces prioritize the use of natural and unstructured materials, in place of mass-produced or plastic toys. Whenever possible, playrooms should include a creative space and a selection of toys. Playrooms should be run by qualified play librarians.
13. Create and maintain playrooms in hospitals and health facilities that meet the applicable accessibility parameters, in accordance with Law 11104/2005. These should be operated by qualified professionals, such as hospital educators, artists, and toy play librarians specifically trained to work in health environments.
14. Create and maintain itinerant playrooms that comply with the applicable accessibility parameters for the purpose of touring urban enclaves, neighborhoods, public squares. These should be staffed by educators, cultural entertainers, musicians, artists, professional play workers, with a view to promoting access to quality play similar to that offered at fixed playrooms, and may be established as extension projects of fixed playrooms.
15. Create or rehabilitate play and recreation spaces for children who have been exposed to conflict situations.
16. Elicit feedback from the subjects of play-on-play activities: conduct child listening and observation studies and transmit to public officials the ideas, desires and expressions put forward by children with respect to play, toys and play spaces.
17. Promote roundtable discussions on the role of adults vis-à-vis children and play culture in the digital era, recognizing that beyond merely permitting or denying them the



use of cell phones, tablets, computers for gaming activities or, further, limiting the time allotted for video games, for example, adults should partner with children in the childhood discovery process within virtual play environments to help them build on their knowledge and experiences. Adults should *join with* children in play and share with them moments of joy, pleasure, well-being, and bonding. Instead of simply dropping them off at the *kids' zone* at the shopping mall or country club (spaces invariably brimming with video game equipment), preference should be given to parks

and public squares, and public leisure areas that are clean, well conserved, safe, and appropriate for children.

18. Offering older children more opportunities to interact with other children, within the appropriate time limits and quality control parameters, in virtual environments or engage in collective play activities is equally important: in this way they share and build culture, as well as mutually regulating each other in relation to digital technologies.

Children and space,

the city and the environment



The spaces occupied by people today are not part of the natural world; rather, they are socially molded and politically distributed. Families and individuals have little opportunity to make their own choices and shape the spaces they inhabit based on their preferences and needs.

Beyond other factors that impact the organization and distribution of life, work and leisure spaces for individuals, families and the adult population, the singular universe of early childhood, with its specific age and development characteristics, is not taken into consideration when defining those spaces.

Children have the right to a healthy life in harmony with nature,²³³ as well as the right to integrate and live as citizens in context of their social relations, which entails the right to space in city environments in a manner appropriate to their biophysical and developmental characteristics, as well as to participate in defining their spaces and, ultimately, building a sustainable society. Being a citizen means occupying the social sphere as a participant, as a subject.

These rights, however, collide with obstacles of different shades and intensity. Public policies endeavor to address these impediments by guaranteeing environmental conditions that allow children to live a full life as children, within the frame of their unique developmental condition.

Cities bear a strong correlation between the vulnerability of the most disadvantaged children and the built environment. Spaces produced in an unsustainable and precarious manner generate lower returns in terms of service deliveries to children or, worse yet, render these impossible, infeasible.

One of the critical factors in vulnerable territories is insufficient exercise of the reproductive rights of women, affected by the manner in which health systems operate, by jobs that do not offer opportunities for ensuring care to ex-

pectant mothers and children, by poverty and by inadequate education.²³⁴

In 2016, 35.5 million children worldwide under the age of 5 years stayed home alone without adult supervision. This figure is higher than the total population of children under the age of 5 years in all of Europe.²³⁵

Children and families, especially the most disadvantaged, face various forms of spatial inequality: the high cost of living and access to urban services; unequal geospatial distribution of urban services; substandard characteristics of the built environment; and unequal spatial distribution of land and the urban space.

The built environment becomes a threat when children and their caregivers cannot assess risks, prepare or be safe. It also has an impact on the opportunity of children to participate in terms of producing and using the public spaces in which they gather. These restrictions apply, in addition, to other forms of infrastructure that are intended to foster physical, social, and digital connectivity.

Designing and building collective spaces offers a multiplicity of opportunities for cities to embrace the commitment to respect the rights of the child and develop plans that ensure equity.

This chapter addresses the right of children to their environment from the perspective of three interlinked subtopics: (a) the physical and cultural environment in which children live; (b) the city as a place for life and citizenship; and (c) sustainable society, encompassing the sustainability of our planet and environmental education.

²³⁴ UNFPA. *The Power of Choice: Reproductive rights and the demographic transition*. New York: United Nations Population Fund, 2018.

²³⁵ SAMMAN, Emma; PRESLER-MARSHALL, Elizabeth; JONES, Nicola; BHATKAL, Tanvi; MELAMED, Claire; STAVROPOULOU, Maria; WALLACE, John. *Women's work: mothers, children, and the global childcare crisis*. London: Overseas Development Institute (ODI), 2016. Available at: <<https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/10333.pdf>>. Accessed: 18 March 2019.

²³³ According to Principle 1 of the Rio Declaration on Environment and Development (Rio-92).

1. The environment

We live in extreme times that pose a direct challenge to the sustainability of human life on the planet. The evidence of global warming and its impact is overwhelming and, yet, still denied and neglected by strategic global leaders, incapable of coming together to take action and reverse the trend toward an unsustainable future.

According to a report of the United Nations Refugee Agency (UNHCR), in 2017 a record 68.5 million people were displaced from their homes, of which 52% were underage, while approximately 25.4 million were dislocated by conflict and persecution. A full 85% of these refugees were located in developing countries, with almost two-thirds still living in their countries of origin.²³⁶

The environment is not simply a data point: it is a complex web of meanings that influence the formation of individuals who live in it and interact with it. The space is not neutral: it speaks in the way it is arrayed and organized, through colors and smells, through sounds, noise, and silence. It defines the relationships between people, challenges or inhibits initiative, spurs, or restricts movement. The environment is the child's *third teacher*, to borrow the words of Loris Malaguzzi, founder of the Reggio Emilia Early Childhood Education approach (or pedagogy).

The quality of the environment and the quality of life are profoundly related. Disorganization of the surrounding space negatively impacts the lives of children, while influencing their view of the world and the organization of their minds.

Some of the factors found in virtually every city that work against the right of children to a healthy life in harmony with nature and vibrant, spontaneous, and playful interaction with their peers and adults include:

- a) environmental deterioration and reduced or difficult access to green spaces;
- b) disorganized occupation of spaces in outlying urban areas;
- c) chaotic urban centers;
- d) proliferation of slums and squatter settlements;
- e) public services of poor quality (including transportation and sanitation) in areas inhabited by the poorest population segments;
- f) housing shortages;
- g) absence of land tenure;
- h) consolidated communities lacking property titles;
- i) open-air waste and sewage;
- j) violence to which children are susceptible in the absence of specific protective policies;
- k) normalized day-to-day violence;
- l) poor road safety and a precarious and dangerous urban mobility system; and
- m) absence or deficiency of leisure areas and play spaces.

Environmental inequality also expresses itself as social inequality: the poorest population segments are most exposed to risks stemming from the location and vulnerability of their homes (such as flooding, landslides, open air sewage, as well as unhealthy conditions in general). There is also a strong correlation between these factors and poverty indicators and the occurrence of disease connected to the absence of potable water and sewage systems. In addition to the situations described above, climate change threatens everyone, principally children and the elderly in vulnerable areas.

The progress made by Brazil in recent years to bridge the inequality between regions, between poor and wealthy population segments and in the access to public goods (such as education and health) has resulted in improved environmental conditions, in the quality of the relationship between children and the environment and in the quality of the lives and development of children. However, the measures adopted in this area should be combined with others set forth in this Plan that focus specifically on children. These include actions in connection with public health, early childhood education, family support programs and others. A reductionist approach to this complex set of social chal-

²³⁶ UNHCR – United Nations Refugee Agency. *Global trends: forced displacement in 2017*. Geneva: UNHCR, 2018.



lenges would be ineffective and pointless.²³⁷ A number of the Sustainable Development Goals – SDG²³⁸ set out social environmental targets aimed at reducing inequality in societies and ensuring greater access to well-being and quality of life.

2. The city

According to data from the United Nations and the World Bank, in 2016 the global urban population represented 54% of the planet's total population, while in Brazil, in that same year, a full 84.72% of the population resided in cities (IBGE, 2016).

One of the key global environmental challenges of our time is the growth of urban centers. Cities are the largest energy consumers on the planet, concentrating ever larger populations. While they occupy less than 2% to 3% of the Earth's landmass, they are home to more than 50% of the world's population and consume 60% to 80% of global energy and natural resources, while accounting for approximately 70% of CO₂ emissions.²³⁹

Without investments in urban resilience, the effects of climate change will increasingly condemn families to poverty and even death.²⁴⁰ The dearth of responses capable of sustaining this urban concentration is reflected in the rising demand for energy to feed the organism's systems and high pollution and emission levels, the product of urban mobility systems that

have chronically debilitated the health of the urban organism, which now finds itself threatened by insufficient water supply, a basic condition of survival.

Any consistent and serious effort to change urban behavioral trends will include themes relating to childhood and gender at the center of the climate debate.²⁴¹

How are children living, growing, and developing in an urban context driven by such daunting complexity and daily challenges? The new urban organism, which has been addressed in an unsustainable manner, normalizing poverty, and violence, is ill and in need of innovative treatments rooted in distinct paradigms to those currently applied.

As long as urban soil and land are primarily treated as a market for investing surplus financial resources, multiplying gains, cities will be increasingly less welcoming and less inclined to recreate an environment conducive to coexistence and fruitful and healthy human relationships.

There are two general spaces reserved for children: the home, as a private space, and sheltering and assistance institutions, as public spaces. In cities, the primary spaces provided to children are playgrounds, public squares, and early childhood education establishments (daycare centers and preschools), utilized for play and educational activities, respectively. In other words, children occupy the spaces that adults prescribe, that society reserves for them and that the symbolic administration provides.

Early childhood is precisely the stage of life in which children constitute themselves as individuals in their multiple dimensions and potentialities, developing the self-esteem, cognitive and socioemotional abilities that foster equality of opportunity in the future. The issue of the urban context is of great relevance, as it can interfere significantly in this process.

The majority of children spend more time in their private spaces and enclosed environ-

²³⁷ These findings are based on the following documents: *Vigilância da Saúde Ambiental: Dados e Indicadores Selecionados (2006)*, Ministry of Health, and *IBD 2007 Brasil – Indicadores e Dados Básicos para a Saúde*, published by the Interagency Information Network for Health (RIPSA), the Ministry of Health, and the Pan-American Health Organization (PAHO).

²³⁸ See chapter: *The Sustainable Development Goals for and with children*.

²³⁹ KAMAL-CHAOU, Lamia; ROBERT, Alexis (eds.) Competitive cities and climate change. *OECD Regional Development Working Papers*, Paris, no. 2, 2009. Available at: <<https://www.oecd.org/cfe/regional-policy/44232251.pdf>>. Accessed: 19 March 2019.

²⁴⁰ WORLD BANK. *Effects of the business cycle on social indicators in Latin America and the Caribbean: when dreams meet reality*. Semiannual Report. Washington, DC: International Bank for Reconstruction and Development, The World Bank, 2019.

²⁴¹ UNICEF. *Shaping urbanization for children: A handbook on child-responsive urban planning*. New York: UNICEF, 2018.

ments than in open, public spaces. This emphasis on private spaces and confinement of children conceals and restricts their social condition and deprives them of the very contact with nature that is so essential to their childhood and development.

With the establishment of schools, socialization, and learning, which had historically occurred in public spaces through intergenerational exchanges, began to take place predominantly in specific and segregated spaces between individuals in the same generational segment: children.

Public spaces, previously considered venues for generational gatherings and exchanges, have been transformed into fragmented and segregated spaces, the product of an individualistic society that gives little value to interpersonal socialization. Delimitation of specific spaces for children in cities has resulted in the exclusion of children from the urban environment, insofar as they have not been viewed as constituent social actors with an inherent right to city spaces. Reversing this trend requires seeing and treating children as subjects capable of expressing opinions, suggestions, creativity and giving cities a more human face: breathing life into them through their presence, movement, voices, smiles and play.

The social reality is thus framed: the time children 0 to 6 years of age spend in educational institutions has increased, driven by the proliferation of women entering the workforce. As such, children now participate and are incorporated in public spaces through the education system.

Common expressions such as *the child's place is in school* and *the streets are no place for a child* announce where children may and may not congregate and their particular relationship to the city.

It is important to imagine an integrated network between the school and the city through a pedagogical approach that sees beyond school walls and envisions using urban and social settings as educational agents. After all, schools are not the only channel for learning,

but merely one among many possibilities of knowledge acquisition. Schools integrated with public spaces – streets, parks, public squares, museums – promote the urban participation and literacy of children. The city becomes, in this way, a teaching city.

Parks and public squares are not the only venues dedicated to children: the entire city can become a place for safe, inclusive, green play conducive to gatherings, beginning with the path traveled by children between home and school, frequently the primary cityscapes utilized by them.

This integrated network is sustained on four pillars promoted by the school: knowledge, occupation, participation, and intervention by children in urban spaces and facilities. The first step is to enable children to explore the urban environment in order to familiarize themselves with the spaces and facilities of their city. As they take part in these explorations, they begin to occupy urban spaces, giving visibility to their presence in the city. From the moment children become familiar with a city, they begin to participate and intervene in urban spaces and facilities and to engage in the city's (re)creation.

The relational dimension of the school cannot be separated from that of the community. Between the school, neighborhood, home, club, cultural and recreational association, places of leisure and work, it is necessary to establish an integrated belt capable of giving meaning to the daily lives of children in the urban environment.

Outdoor play has been replaced with play in covered, enclosed, and cramped indoor spaces, from which nature is absent, sparking a conflict between parents' primary concern – ensuring their children are in a safe location – and the desires and aspirations of their children – to play freely in natural open spaces.

Streets and public squares as venues for generational socializing have disappeared and begun to serve merely as connecting bridges between one private space and another, transforming the public sphere into a mere passageway, a *nonplace*. In addition to the issue of



sociability, the absence of a relationship between children and their spaces deprives them of fully enjoying the benefits derived from direct contact with nature and the outdoors, such as providing an impetus for expansive movement, specific to the youngest age segments, greater access to sunlight, essential for vitamin D intake, and instead condemning them to a sedentary lifestyle and confinement.

Playgrounds (as play spaces) and schools (as educational spaces) construct an urban map of childhood informed by the social, economic, cultural, and political changes that impact the organization and occupation of public spaces.

Children extrapolate the limits of the spaces provided to them by playing with urban facilities through their instinctual playfulness and transforming the city into their very own play space. Bushes, rocks, trees, rivers, birds, and other elements that escape adults are to children essential elements of their journey.

The relationship between play and imagination that children forge with the city and natural urban areas, assigning other meanings and uses to the spaces, facilities and nature that still exist in the city, should be seen by adults as creative actions of the child and not as transgressions, as prohibited acts.

The presence of children in the city offers innumerable possibilities for augmenting green spaces and urban facilities. They teach us that these elements can be used in a variety of ways and serve multiple functions.

The relationship of children to the city enables them to acquire urban and social knowledge that uncovers the complexity of city life. Being and living in the city and experiencing its daily events involve learning and apprehending its many codes and signs, forging discoveries, exploring social relations and how they are established, learning to move within the urban space, in short, experiencing the city in which they live.

In the crowds of strangers moving daily through the urban space, eyes avoid contact, legs never stop moving, mouths do not converse

and the silence of words hangs over a city of uninterrupted sounds. By contrast, cities in which children circulate and occupy public spaces are treated to the unprecedented and revelatory experience of reclaimed personal relations. Children are decisive actors in the urban space: they can play a humanizing role in the city. Children's spontaneous ability to strike up a conversation with anyone they encounter on the street, even those they do not know, spurs hurried legs to stop, mouths to converse, eyes to make contact, brings smiles to serious and dour faces.

To understand the significance of the presence of children, we must see the city as a space that educates, that is rich in nature and that provides opportunities for formal and informal learning. Each and every urban place, space or element is potentially cultural, historical, and educational. A tree, a corner, a street, and a public square can enable learning that is as enriching as any museum or book. It is essential that in their day-to-day lives in the city children have the opportunity to experience nature throughout childhood. Free play in nature promotes physical development – the unevenness of the terrain is a challenge to movement –, develops children's capacity for imagination and creative play, contributes to their self-esteem by posing new challenges to the body, which, when surmounted, strengthens autonomous learning, and provides well-being through the restorative properties, aesthetic contemplation, and beauty that only nature offers.

Children need to create an effective relationship with their environment in order to stimulate them to care and engage in sustainable actions in the present and future. The fact that children speak differently in relation to adults, use their own means of expression and language does not mean that they should be considered unsuited to participate in and contribute to the city. To the contrary: because of the differences and distinct perspectives they offer, children are capable of contributing a unique perspective, of revealing a city so often concealed from the eyes of adults.

3. Sustainable society

This section addresses the right of the child to live in a sustainable society and participate in its construction.

3.1. Social sustainability and the sustainability of planet Earth

Development has provided and continues to produce improved living conditions for humanity. It remains the primary objective of governments, scientists, technicians, workers, in short, everybody. But at its core, behaviors that have demonstrated themselves adverse to life threaten development itself. The list of those behaviors is enormous and continues to grow in variety and severity: consumerism and waste, destruction of forests and headwaters, use of toxic substances in food production processes and pest control, pollution and accumulation of trash, emission of polluting gases and destruction of the ozone layer, the greenhouse effect, temperature increases and accelerated melting of polar caps and ice sheets, extinction of wildlife and plant life, imbalances in the chain of life... This is the reality facing children.

It is not simply to ensure the future of children that measures must be taken today to apply the concept of sustainability. In fact, the present has already been compromised. If the concern for humanity's survival is justified, so too is devoting our full attention to children through the commitment to provide a quality environment to those just arriving in this world.

The majority of governments and organizations have recognized that reversing the march toward self-destruction is necessary, urgent, and possible but that the necessary course correction can only happen if humanity identifies itself as part of a larger system, namely planet Earth – recognizing, further, the sustainability of society is inextricably linked to the sustainability of the planet.

Children are here not simply as helpless victims; they are here as subjects, capable of contributing, in their way and in their own timeframe, to the construction of a sustainable society, a sustainable planet and – with adults – leading a life of justice, peace and happiness.

The last line of the Earth Charter reaffirms the belief that individuals and society will ultimately opt for a more secure and full life: *Let ours be a time remembered for the awakening of a new reverence for life, the firm resolve to achieve sustainability, the quickening of the struggle for justice and peace, and the joyful celebration of life.*²⁴²

3.2. Affective connection with nature

Up until about 12 years of age, children do not perceive themselves to be separate from nature; in this stage of life, children should experience the natural world through joy and their connection to nature. These experiences allow children to relate to nature in the realm of sensitivity and enchantment.

Nature has the power to confer health, happiness, and energy on children. Those who feel love, respect, and a sense of belonging for the natural world have a greater chance to build a better environment for all living beings.

3.3. Characteristics of the city space for play experiences

For young children, the sensory qualities of the environment can make for a special play space. The environment should offer: trees and plants that attract the sound of singing birds, tree bark of different textures, smooth and indented leaves, colors that change with the seasons, a view of the sky through tree branches, sensory barriers (such as wind, sound or other confusing signs), water play, artistic creation,

²⁴² *Earth Charter*. Available at: <https://www.mma.gov.br/estruturas/agenda21/_arquivos/carta_terra.pdf>.



opportunities to plant...A variety of materials and objects, fixed and loose elements, gathering places for small groups, shelter, adapted structures, etc. should be available.

3.4. Environmental education

The environment is one of the most pressing issues of our time, as the frequency of aggressive acts against nature steadily increases. Item 14 of the Earth Charter's principles, which urges that the knowledge, values, and skills needed for a sustainable way of life be integrated into formal education and the life-long learning process, recommends as follows: *Provide all, especially children and youth, with educational opportunities that empower them to contribute actively to sustainable development.*

Where integral education and, by extension, environmental education have been implemented, communities have reduced their vulnerability and risk.

Environmental education covered by the 1988 Brazilian Federal Constitution, specifically article 225, subsection VI, which provides for *promoting environmental education at all educational levels and public awareness-raising on preservation of the environment.*

Law 9795/1999, which institutes the National Environmental Education Plan (Panea),²⁴³ mandates environmental education for all segments of society and in formal and informal education settings alike. It should be promoted from early childhood through a cross-cutting and multidisciplinary approach and should not be approached as an isolated discipline, disconnected from daily values and attitudes.

The early childhood education curriculum generally includes two areas of study in connection with the environment: (a) knowledge acquisition about nature and problems affecting it through tangible experiences; and (b) resig-

nification, transformation, and reutilization of materials.

The first item is relatively recent and consists of exploring and discovering natural spaces and reinforcing the importance of the child's experience with nature in daily school activities. To this end, the greening of school courtyards can serve as a way to promote contact with nature. In addition, schools should offer activities such as field trips, exploration of different environments, care for small animals, planting of vegetable gardens, orchards, and flower patches (as a way of bringing children closer to nature), as well as pedagogical projects and themes relating to the environment, including decontamination of rivers and lakes, appropriate waste disposal methods, selective waste collection and recycling in schools, preservation of headwaters, etc.

The second item refers to recycling of natural or industrial materials after use or accomplishment of their end purpose. Paper, plastic, wood scraps, peels...in the hands of children take on new forms and meanings and acquire a new life and presence. Rather than stimulating the practice of consumption and disposal, children are encouraged to adopt attitudes rooted in the respect for and preservation of nature and wildlife, as well as conservation, transformation, and reutilization of anything to which the processes described above can be applied. The 5 R²⁴⁴ methodology charts a new path on this front: *rethink* consumer and disposal habits; *reduce* consumption, giving preference to more durable items; *reject* products that are harmful to health and the environment as well as products that we do not need or already have in large quantities; *reutilize*, by using products through the end of their life cycle or repairing objects or items for reutilization; and *recycle*, when the practices above have already been applied and there is no other viable alternative.

As environmental education takes its place in the formation of cultural identity, it can serve to offer new potential solutions to our environmental challenges, contributing to ef-

²⁴³ Política Nacional de Educação Ambiental.

²⁴⁴ BRASIL. Ministério do Meio Ambiente. *A política dos 5 Rs*. Brasília, DF, 2007.

fective implementation of an environmental defense project.

Environmental education that starts in early childhood is the best way to shape attitudes and habits on the use of natural resources and foster reflection on our collective ethical responsibility to the planet.

4. Actions

Existing urban planning and public policies should be crafted and reinforced to promote responsible cities for children. By prioritizing children, urban planning contributes to more expansive urban programming in three ways:

1. Planning urban spaces at various scales. Area-based urban programs enable better service delivery for children, as well as a clean and safe built environment.
2. Engaging children and other local stakeholders. Process oriented urban development involves children's participation in coalition-building and the co-production of child-responsive urban settings.
3. Using geo-spatial and other urban data platforms. Evidence-driven and child-centered decision-making considers the spatial component of urban inequity to which the most disadvantaged children are exposed.²⁴⁵

Law 10257/2001, the City Statute,²⁴⁶ established a number of instruments to enable cities to promote urban development. Key among these has been the Strategic Master Plan (*PDE*).²⁴⁷ The document coordinates implementation of participatory planning actions and sets out a series of other urban instruments. Its principal objectives include addressing real-estate speculation

²⁴⁵ UNICEF. *Shaping urbanization for children: A handbook on child-responsive urban planning*. New York: UNICEF, 2018.

²⁴⁶ *Estatuto da Cidade*. Lei n.º 10.257, de 2001. Available at: <http://www.planalto.gov.br/ccivil_03/leis/leis_2001/110257.htm>.

²⁴⁷ *Plano Diretor Estratégico*.

and implementing land titling processes.

A central guideline of the City Statute is to guarantee the right to sustainable cities, understood as the right to urban land, housing, environmental sanitation, urban infrastructure, public transportation and services, employment and leisure for present and future generations (as provided for in article 2, subsection I) and participation by the population and various community segments – including citizen children – in the formulation, execution and follow-up of Urban Development plans, programs and projects. Children are capable of offering functional and attractive suggestions for the urban landscape, transportation systems, housing, sidewalks, parks, wall murals, etc.

The Participatory Neighborhood Plan²⁴⁸ is a microplanning instrument produced by the federal government that municipalities can incorporate in their Strategic Master Plans.

According to the pamphlet *Neighborhood Development Plan: A Participatory Methodology*, published by the Commercial Federation of São Paulo,²⁴⁹ the Participatory Neighborhood Plan is prepared in conjunction with municipal officials, participating council members and the community for the purpose of improving urban settings, environments, landscapes, and housing. Through the Plan, residents indicate the improvements their communities require with respect to urban infrastructure (daycare centers, for example) and public goods and facilities.²⁵⁰

The instrument has significant potential to have a positive impact on urban environmental quality centered on children, provided specific strategies and guidelines on the demands of

²⁴⁸ *Plano de Bairro Participativo*.

²⁴⁹ *Plano de Desenvolvimento do Bairro: Uma metodologia participativa*. Available at: <<https://www.fecomercio.com.br/upload/pdf/2015/13/carilha-plano-bairro-plano-de-desenvolvimento.pdf>>. Accessed: 6 March 2020.

²⁵⁰ The Participatory Neighborhood Plan should include the following elements, among others: offer, operate and ensure access to urban and social health education, culture, sport, leisure and social assistance facilities and urban facilities and provide the conditions for circulation by pedestrians, cyclists and persons with disabilities or restricted mobility, green, leisure and social gathering spaces, waste collection, including selective collection, public safety, in particular around schools, community vegetable gardens, etc.

early life are included.

Another important component of urban planning is the Early Childhood Legal Framework, which mandates that the union, states, Federal District, and municipalities organize and stimulate *the creation of play spaces that foster well-being, play and creativity in the public and private spaces in which children circulate, as well as the fruition of free and safe environments in their communities* (article. 17).

The absolute priority to the rights of the child – among these, the right to play (article 227 of the 1988 Brazilian Federal Constitution) – should also be included in urban policies. Urban planning should provide for leisure, housing, movement, transportation, fresh air, recreational spaces, as well as intergenerational gathering and free and safe play spaces for children.

Goal 11 of the SDG applies directly to this chapter: *Make cities inclusive, safe, resilient, and sustainable*. Brazil is committed to achieving the following targets for children by 2030:

- Guarantee access by all to dignified, adequate and affordable housing, basic services, and urbanize precarious areas according to the targets set forth in the National Housing Plan,²⁵¹ with special attention to groups in situations of vulnerability;
- Improve road safety and access to cities through better urban mobility systems that are more sustainable, inclusive, efficient, and fair, prioritizing public mass transportation and active transportation, with special attention to the needs of persons in situations of vulnerability, such as those with disabilities and restricted mobility, women, children and the elderly;
- Offer universal access to safe inclusive, accessible, and green public spaces, in particular for women, children and adolescents, the elderly and persons with disabilities and other groups in situations of vulnerability.²⁵²

²⁵¹ *Plano Nacional de Habitação*.

²⁵² Available at: <<http://www.ipea.gov.br/ods/ods11.html>>.

The law recognizes that consideration and prioritization of the needs of children in urban planning are a right and, at the same time, a strategic tool for including actions that ensure public spaces in cities are safer, have more trees and offer greater environmental quality to foster the full development of children.

Our rights with respect to a healthy city are innumerable, as are the State's duties to implement public policies that effectively meet our needs in the urban setting. State actions to guarantee an environment with quality of life for children include:

1. Formulating and applying urban space occupation and use policies that fulfill the rights to housing, health, safety, movement, play;
2. Actions focused directly on improving the housing conditions of families without income or insufficient income by ensuring they acquire the necessary resources to secure dignified housing;
3. Basic sanitation;
4. Environmental education for sustainable development;
5. Awareness-raising campaigns and behavioral formation in relation to land protection and restoration, the environment, consumption;
6. Guaranteeing accessible green spaces in every neighborhood, equipped with play apparatus to enable children the enjoyment of contact with nature.

The planning strategies for interventions in vulnerable territories require the engagement and integration of multiple representatives and agents in the territorial configuration and organization process. Planning, diagnostic and design instruments can offer a key strategic contribution to integration.

To enable urban redesign planning strategies, integrated and transversal actions by the five change agent classification bodies are neces-

sary to foster efforts capable of effecting a positive, direct and immediate, growing and permanent impact, namely: 1) civil society (individuals and not for profit civil society organizations); 2) private sector (companies, industries, not for profit civil society organizations); 3) community (individuals, associations, collegiate bodies, collectives within geographic territories); 4) universities (research, education, extension and action); and, finally, 5) government (Executive, Legislative and Judicial Branches)

An integrated action matrix of the five change agent bodies should be established to execute interventions that requalify vulnerable territories, with a view to reducing inequality and fostering sustainability.

5. Goals and targets

1. Require that policies for urban spaces focus on the physical, social, and learning characteristics of children through the age of 6 years;
2. Order, through the appropriate legal instrument, that the Strategic Master Plans for cities ensure public spaces for children that meet the needs and characteristics of different age groups (public squares, playrooms, health and assistance stations, early childhood education institutions, collective leisure areas, etc.) and include a section with parameters and guidelines for participatory neighborhood plans, including specific provisions that address issues relating to early childhood, gender, race, longevity, energy, environment and food security;
3. Require, by law, that subdivision projects reserve spaces for social facilities that fulfill the right of children to health, social assistance, education, and leisure and that they adhere to the normative parameters on active and safe mobility for all ages;
4. Stimulate open-air outdoor activities in cities, especially in inner city neighborhoods, urban enclaves, slums or in areas with a scarcity of opportunities and spaces for leisure, where children through the age of 6 years can interact with each other and with older children, as well as adults. Incentivize more municipalities to implement regulations on leisure promenades to provide children access to space and time for outdoor activities
5. Include in teacher training programs content on questions relating to the sustainability of society and the development of educational practices on this issue for children through 6 years of age;
6. Include, in training programs for architects, urban planners and designers, content that builds on the qualifications and knowledge of professionals with respect to issues relating to early childhood, gender, race, longevity, energy, environment and food security;
7. Organize professional workshops to define, create, organize, and manage spaces (architects, urban planners, interior designers, environmental experts, etc.), with a view to creating and developing projects that respect the presence and participation of citizens through the age of 6 years;
8. Develop guidelines on the construction of play spaces for children between the ages of 0 and 6 years;
9. Expand/create disciplines on childhood in architectural, engineering, urban planning, and landscaping training programs;
10. Promote integrated networks between schools and cities that enable children to participate in the urban setting;
11. Incorporate the desires, ideas and needs of children in urban planning through qualified listening and participatory processes;
12. Incentivize municipalities to organize intersectoral working groups to plan coordinated policies on childhood, pursuant to the



Early Childhood Legal Framework;

13. Recommend that municipalities establish children's committees through which the youngest segments can participate in urban planning processes and actions relating to their interests, with a view to effectuating the provision of article 4, subsection II and sole paragraph, of the Early Childhood Legal Framework;

14. Create safe routes between public facilities (schools, public squares, libraries, etc.), implementing vehicle speed reduction equipment, utilizing universal design features for streets and sidewalks, and incorporating play infrastructure between facilities, with a view to ensuring children are provided the opportunity to engage in active mobility, are attracted to the urban setting and are stimulated to circulate in public spaces.

Children and diverse childhoods:

*policies and actions
for different childhoods*



The political identity of traditional populations and communities has contributed – through practices, knowledge and cultural expressions that inform their territorialities, knowledge, and environments – to the multicultural and multiethnic consciousness of Brazilian nationality. Indeed, Brazil was built on these identities. This array of realities reveals the existence in Brazil of, not one, but many childhoods. Understanding the cultural processes in which the child is immersed is to recognize that each individual and group possesses an ethnic, racial, and cultural identity of its own.

Cultural specificities have become an increasingly important focus of the debate on affirmative and nondiscriminatory policies, reflected in practical applications in legislation and actions. However, there remains a long way to go. Traditional populations and communities as a whole, in particular their children, remain invisible in sector-specific policies, exposing them to a high degree of social vulnerability. The national development process, which addresses the specificity of identity from the perspective of inequality and social exclusion, needs to be adjusted and enhanced to fulfill the constitutional principle that enshrines the diversity and multiculturalism of the Brazilian nation.

Brazil's multiplicity of childhoods is the greatest endowment of the country's cultural history. These childhoods should be reflected in public policy. All of them, without exception, should be addressed in the applicable policies and by the pertinent sectors (education, health, food, socio-educational and social assistance services, family and community coexistence, sports and leisure, environment, culture), with an eye to valorizing this peculiar stage of life according to its unique characteristics. This is a basic condition for preserving the diversity of childhoods. It is precisely the recommendation put forward in Convention 169 of the International Labour Organization, promulgated in Brazil by Decree 5051/2004, and the National Policy for the Sustainable Development of Traditional Populations and Communities,²⁵³ enacted by Decree 6040/2007, in addition to other legal instruments.

²⁵³ *Política Nacional de Desenvolvimento Sustentável dos Povos e Comunidades Tradicionais.*

Shining a light on the children of traditional populations and communities means understanding the differences in how the concept of childhood is applied within their respective groups. According to Decree 8750/2018, which established the National Council for Traditional Populations and Communities,²⁵⁴ the Brazilian State formally recognizes the right of 28 ethnic categories to participate in the collegiate body's activities.

Specifically, the following groups are represented: Indigenous, *Quilombola* communities, *terreiro* communities/populations and communities of African origin, Romany, artisanal fishing communities, extractivists and coastal and marine extractivists, *caiçaras*, *faxinalenses*, *benzedeiros*, island communities, *raizeiros*, *gerazeiros*, *caatingueiros*, *vazanteiros*, *verdeiros*, *pantaneiros*, *morroquianos*, peoples of Pomeranian descent, mangaba pickers, Babaçu coconut breakers, Araguaia River Basin herdsman, *fundos e fechos de pasto*, riverine communities, *cipozeiros*, *andirobeiros* and *caboclos*.²⁵⁵

Several other ethnic categories continue to lay claim to formal recognition as distinct cultural populations or communities within the Brazilian Nation and, by extension, to the attendant fundamental rights.

Pursuant to Decree 7352/2010, which establishes the Rural Education Policy²⁵⁶ and the National Agrarian Reform Education Program (PRONERA),²⁵⁷ rural populations consist of small farmers, extractivists, artisanal fishermen, riverine communities, agrarian reform settlements and encampments, rural wage workers, *Quilombolas*, *caiçaras*, forest dwellers, *caboclos* and others who derive their material subsistence from activities in the countryside.

²⁵⁴ *Conselho Nacional dos Povos e Comunidades Tradicionais.*

²⁵⁵ Pursuant to Decree 8750, of 9 May 2016, the National Council of Traditional Peoples and Communities shall be composed of representatives from government and civil society, with each of the 28 recognized ethnic categories guaranteed a seat. The respective members shall be chosen in a public selection process. https://www.planalto.gov.br/ccivil_03/_ato2015-2018/2016/decreto/d8750.htm

²⁵⁶ *Política de Educação do Campo.*

²⁵⁷ *Programa Nacional de Educação na Reforma Agrária.*

These identities apply to populations whose families and children – connected by an ethnic racial/identity and/or a social identity and the longstanding struggle for recognition of their work and land – are tied to the land as subsistence producers or as small landowners, families in temporary encampments (*acampados*), settlers or, additionally, salaried farmworkers, sharecroppers, tenant farmers, permanent or temporary settlers under agrarian reform programs, rural wage workers and small farmers, among others.

Planning the delivery of – and guaranteeing – education to the children of peasant populations in rural areas and the countryside, in addition to those from traditional populations and communities, requires appreciating their ties to the land as central aspect to the construction of their existence and, subsequently, the transmission of specific forms of knowledge and formal schooling. For these children, the family, land, work and, more recently, social movements are central pillars of their identities. The National Curricular Guidelines for Early Childhood Education²⁵⁸ recognize the linkages between children in the countryside and from traditional populations and communities and the need for pedagogical practices that consider their unique ways of life, cultures, identities, relationship to nature, while also striving to offer *toys and equipment that respect the community's environmental and socio-cultural characteristics*.

A significant number of traditional populations and communities possess a distinct cultural understanding of childhood as a specific period, marked by particular features and different approaches to issues such as education, health, care, and stage of life. The relationships of children with the other members of their communities are based on the collectivity's day-to-day social life: autonomy, teaching-learning, work, rituals, and, where applicable, fluency in the native language.

The concept of *age group*, for example, does not fully elucidate the cultural criteria used to de-

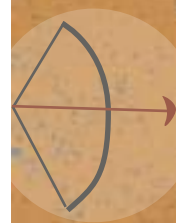
termine specific cycles of life and generational classifications. Cycles of life are not necessarily determined by age, but rather by skill and or biopsychosocial development, in accordance with local parameters, as well as the acquisition of bodies of knowledge and elements that enable individuals to demonstrate to other members that they are formally ready to transition to the next stage of life and take on a new social status.

Changes in stages of life or status need to occur based on public accomplishment and demonstration of certain indicators of sociability. In the case of young children, an important moment involves the ability to walk independently, essential for demonstrating to their mothers the capacity for autonomy. Another transitional milestone in children's status involves the acquisition of speech. For populations and communities that transmit knowledge orally, the ability to speak well is an important component of one's humanity.

As an example, in many Indigenous communities the child does not receive a name prior to acquiring these abilities and is, instead, referred to by his or her teknonym (*so and so is the daughter of...*). Therefore, from child to child the naming ritual occurs at different stages. Receiving a name signifies a transformation, whereby the individual takes on responsibilities vis-à-vis the collective. For their part, Romany peoples within particular ethnicities adhere to the practice of giving the child a Romany (language) name, in order to identify him or her within the extended family, followed by a second name, which is then entered on the child's official birth registry to serve as his or her social name. In the case of *Quilombolas, faxinais, fundos de pasto, gerazeiros, vazanteiros* and others, a historical link is maintained between the child's birth and territory, by which he or she is identified in two ways: a social identity and another, normally used by the child's family, to identify their place, family profession or territorial location, to which end teknonyms may also be adopted as reference.

Therefore, the concept of *early childhood* is more flexible for traditional populations and communities and is not restricted to age or the view of childhood as a stage of life limited purely to

²⁵⁸ Available at: <http://portal.mec.gov.br/dmdocuments/pceb020_09.pdf>.



play, innocence or lack of knowledge. *Early childhoods* in the plural are, therefore, constituted by the relationship between culture, territory, and the body-person, where the latter factor is managed on the basis of assumptions concerning autonomy, care, and responsibility, yet always viewed through a collective lens.

Each new status a person acquires transforms his or her relationship to the community. At birth, the child also creates a new mother and a new father, creates grandparents – an essential requirement for becoming an *elder* –, which leads to a series of new social statuses. For Indigenous peoples, a continuum marks the journey from birth through death – and thereafter –, consisting of a cycle of changes in the human and non-human body. In contrast to the traditional biopolitical view that associates birth with the acquisition of humanity, among Amerindians the phenomenon of birth is not simultaneous with inclusion in the social world. Effective transition to the family's world is not simply conferred; it is continuously developed throughout the person's life.

In other cultures, at the time of birth children are the focus of attention designed to transform them into human beings. Specific plants are applied to their bodies. Some body parts, such as the head or nose, are carefully sculpted: hair is cropped, certain types of food are recommended or prohibited, baths and body paint are administered. Maternal milk is one of the principal channels for humanizing the infant. Receiving maternal milk from the mother marks the point at which the child gradually becomes the mother's kin and, ultimately, blood relation.

In respect of the learning process, the child is spurred to seek out the knowledge and understanding he or she desires autonomously. Punitive pedagogy, one which punishes and coerces, is not applied. Children learn quickly what is dangerous and what is not, what they can and cannot do, reproducing by their own means what others do or by simply through observation, principally of older children. This is stimulated by an intense network of exclusive relationships that engages them in a process of teaching-learning, play and responsibility. In general, older children are responsible for the care

of younger children, all the way down to infants. It is common to see groups composed only of children, caring for each other, educating each other and enjoying themselves together.

These responsibilities are not set in juxtaposition to *being a child*; play is not opposed to the acquisition of responsibilities and the importance of performing small tasks. As agents of their own relations, who participate fully in community life, children offer a contribution as well. Collaborating with the parenting process is central to learning how to *be an Indian, be a Quilombola, be a Romany, be an extractivist* or *be a* member of any other of Brazil's myriad traditional populations and communities, in terms of becoming social beings in the eyes of the collective.

In the 0 to 6-year age range, the child's education occurs primarily within the family and community. At around 5 years of age, some children begin receiving formal education through State services. However, these age ranges are not a good parameter for characterizing the distinct realities of traditional populations and communities.

As children in the public education system receive school meals, it is important to ensure that the food provided adheres to the variety, quantities and realities of traditional populations and communities. The issue is of particular significance in light of malnutrition levels within Indigenous groups and among traditional populations and communities, in addition to the high incidence of infant mortality associated with malnutrition.

The National School Nutrition Program (PNAE) was recently updated to include the requirement that school meals adhere to the nutritional patterns of Indigenous peoples and *Quilombola* communities. In addition, Law 11947/2009, mandated that at least 30% of resource transfers be directed to food purchases from small farming establishments, with a view to stimulating sustainable development and food security among traditional populations and communities. This provision should be extended to early childhood education, as well.

Beyond nutritional considerations, the food culture of traditional populations and communities and rural and forest populations should be taken into account. Because of their particular ties to the land and to nature, the general preference for foods derived from fruit trees, roots, water sources and pastures should be considered. Schools, for their part, need to be familiar with the tastes of children when preparing meals. At the same time, they should also offer alternatives and combinations that expand children's nutritional repertory and enrich the pallet and horizons of children – including family foods and alternative varieties that could be introduced in school meals –, with due consideration for the nutritional value of these latter options.

Food security is connected to the issue of territory, the secondary effects of which are reflected in changes to community life as a whole. Guaranteeing territory and formal land titling is central to ensuring access to other rights, including those tied to *early childhoods*. Yet today a large portion of traditional populations and communities now inhabit urban spaces. The varying migratory flow patterns of these groups to and from rural areas has spurred construction of a strong sense of ethnic community and territory within urban spaces, a trend, which for its part, poses a challenge to the development of public policies in urban settings capable of respecting the right of children from traditional populations and communities to their specific ethnic and cultural heritage.

For example, in the case of Indigenous and *Quilombola* lands, conservation units and Romany settlements, children remain hostage to food options that *do not nourish them like the food of old* and territories degraded by economic and social actors more concerned with exploiting local natural resources and/or adopting socially discriminatory actions against the inhabitants of those territories than with building sustainable relationships.

Because of the exposure of certain communities to undignified conditions, some sectors of society have attempted to discredit the efforts of these to provide care and education to their own children. Placement of children from tra-

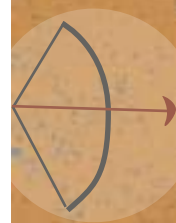
ditional populations and communities in substitute families, in particular through adoption, is a controversial subject that Law 12010/2009, has sought to address, at least in relation to Indigenous and *Quilombola* communities. Resolution 181, of 10 November 2016, issued by the National Council for the Rights of the Child,²⁵⁹ is aimed at guaranteeing equitable treatment of children from traditional populations and communities by recognizing their cultural specificities in relation to the production, care, and socialization of childhoods. It also requires that the State adapt the services offered through the Child and Adolescent Rights Guarantee System to ensure these are culturally appropriate to the target children and their ethnic groups.

The right and standing of traditional populations and communities to express their particular needs and desires in relation to their children is incontrovertible. Each individual people and community possess unique historical and cultural characteristics. In Brazil, there are approximately: a) 305 Indigenous peoples and 275 languages; b) more than 2000 *Quilombola* communities; c) thousands of members of the Romany people distributed throughout the country in three primary groups, as well as others; d) in addition to peoples of African descent and *terreiros*; e) and hundreds of riverine, extractivist, *fundos de pasto*, Babaçu coconut breaker communities; f) *gerazeiros* and other traditional populations and communities.

International Labour Organization (ILO) Convention 169, promulgated in Brazil by Decree 5051, dated 19 April 2004,²⁶⁰ regarding Indigenous and tribal peoples in independent countries, provides, in article 6, that governments consult the peoples concerned, through appropriate procedures and in particular through their representative institutions, whenever legislative or administrative measures which may affect them directly are under consideration. In Brazil, the expression *tribal peoples* is

²⁵⁹ Available at: <<https://www.direitosdacrianca.gov.br/conanda/resolucoes/resolucao-no-181-de-10-de-novembro-de-2016>>. Accessed: 13 February 2020.

²⁶⁰ Available at: <http://www.planalto.gov.br/ccivil_03/_ato2004-2006/2004/decreto/d5051.htm>. Accessed: 14 February 2020.



interpreted broadly to include traditional populations and communities, pursuant to article 3, paragraph 1, of Decree 6040, dated 7 February 2007: *Traditional populations and communities: culturally differentiated groups that recognize themselves as such, possess their own forms of social organization, occupy and use territories and natural resources as a condition of their cultural, social, religious, ancestral and economic reproduction, applying bodies of knowledge, innovations and practices generated thereby and handed down by tradition.*²⁶¹ The same principle is set forth in article 231 of the 1988 Brazilian Federal Constitution, which recognizes *the social organization, customs, languages, beliefs and traditions of Indians* [...].

With respect to children from traditional populations and communities, the National Plan for Early Childhood proposes, among other measures, listening to female community members. More than the community chieftain or other traditional and/or principal political leaders, generally males, women are the ones who directly exercise responsibility and coordinate care for children, especially in the initial stages of life. In addition to women, it is also important to work in cooperation with the Indigenous Health Agents (AIS), Indigenous Sanitation Agents (AISAN), Community Health Agents (ACS) and internal structures headed by women.

One Principle and Ten Guidelines

Principle: *Respecting and valuing ethnic, cultural, gender and territorial diversity.*

The principle ensures the child's right to her and his personal and collective identity and relationship to the group or groups to which she or he belongs. In other words, attention must

be given to the individuality and specificity of each child and each childhood with respect to that which is exclusive to them, that which makes them unique, sets them apart from others and preserves their sense of belonging to the group.

Incorporating the principle in the National Plan for Early Childhood contributes to enhanced policies for children, thereby fostering equality based on diversity and socio-State practices, with social justice.

Guidelines

1. Ensure traditional populations and communities have access to information on childhood policies, services, and rights, and promote intercultural debate on the different ways of conceptualizing, providing care to and socializing children, including, potentially, by relativizing age markers to encompass diverse cultural understandings of early childhood, pursuant to Resolution 181/2016, of the National Council for the Rights of the Child and Adolescent.
2. Ensuring the specificities of Indigenous peoples, *Quilombola* communities, traditional populations and communities and rural populations, as well as their educational demands, in a systematic manner requires that services be realized in accordance with the regulations set forth in the National Indigenous Curriculum Guidelines for Indigenous Education,²⁶² *Quilombola* Education²⁶³ and Rural Education,²⁶⁴ respectively, as prescribed in Resolution 5/2012, Resolution 8/2012, Resolution 2/2008, issued by the National Education Council's Board of Basic Education,²⁶⁵ as well as the consultations and participation of traditional populations and communities and the contributions of

²⁶² *Diretrizes Curriculares Nacionais da Educação Escolar Indígena.*

²⁶³ *Diretrizes Curriculares Nacionais da Educação Escolar Quilombola.*

²⁶⁴ *Diretrizes Curriculares Nacionais da Educação Escolar do Campo.*

²⁶⁵ *Câmara de Educação Básica do Conselho Nacional de Educação.*

²⁶¹ Institutes the *National Plan for the Sustainable Development of Traditional Communities and Peoples*. Available at: <http://www.planalto.gov.br/ccivil_03/_Ato2007-2010/2007/Decreto/D6040.htm>. Accessed: 14 February 2020.

Resolution 214/2018, of the National Council for the Rights of the Child and Adolescent and ILO Convention 169.

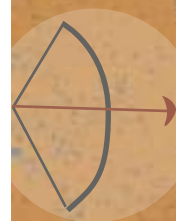
3. Prior to delivering early childhood education to children from traditional populations and communities, conduct impact studies on the forms of socialization of children ages 0 to 6 years, in accordance with the distinct conceptions of childhood of the respective groups.
4. As part of early childhood education school meal programs, give preference to food products sourced from small farms linked to traditional populations and communities at the local regional level, with a view to guaranteeing adequate nutrition and food security.
5. Strengthen and expand training courses for Indigenous teachers and traditional populations and communities, giving priority to the selection of professionals from the respective ethnic groups, with a view, in addition, to ensuring such professionals are capacitated to develop guidelines in coordination with training institutions that fulfill the normative, conceptual, and pedagogical references established in consensus with traditional populations and communities.
6. Ensure the access of children from traditional populations and communities to education, health, social assistance, civil registry and justice system policies and services, providing them differentiated assistance, in accordance with Resolution 181/2016, of the National Council for the Rights of the Child and Adolescent.
7. Promote respect for the ethno-cultural specificities of children from traditional populations and communities located in urban spaces and within migratory groups, as a means to develop measures to combat structural racism against them and the groups to which they belong.
8. Respect the religious beliefs of children and their implications for educational practices, including the right not to take part in activities and to making up classes.

9. Recognize the access to territory and the right to land as structural conditions for the adequate development of young children from traditional populations and communities.
10. Underscore the need to apply the directives issued by the National Education Council through Resolution 3/2012, which *prescribed guidelines for providing school education to itinerant populations*.²⁶⁶

Goals and targets

1. Create and strengthen training programs for early childhood education professionals that address the ethno-cultural specificities of children from traditional populations and communities and prioritize the selection of professionals from those ethnic groups.
2. Ensure implementation of the training strategies for early childhood education professionals currently working with classes comprised by children from traditional populations and communities, as per the framework regulations governing the basic education guaranteed to those groups.
3. Continue and expand the reach of higher education training in intercultural teaching, ethno-development education programs, as well as state and municipal secondary education experiences for Indigenous, *Quilombola* and rural teachers.
4. Purchase 30% of all school food products for Early childhood education establishments from small farms operated by local ethnic groups, establishing measures to ensure a progressive increase in the proportion of food purchases, until these exceed the legally mandated minimum level.

²⁶⁶ MEC/CNE/CEB Resolution 3, of 16 May 2012. Article 1, sole paragraph: *Children, adolescents and young adults in itinerant contexts are considered those belonging to social groups that exist in this condition due to cultural, political, economic or health factors, including Romany communities, Indigenous peoples, nomads, itinerant workers, groups in temporary encampments, circus workers, artists and/or amusement park or traveling theater workers, among others.*



5. Establish assistance programs – in the health, social assistance, civil registry, justice, and educational sectors – for children from traditional populations and communities that align with a pluralistic and culturally suitable vision of childhoods, ensuring consultations with and the participation of concerned peoples and communities, including children, pursuant to Resolution 181/2016, and Resolution 214/2018, of the National Council for the Rights of the Child and Adolescent.
6. Support the work of the AIS, AISAN and ACS in detecting and conveying the specific demands of children from traditional populations and communities, focusing on their distinct realities with respect to exposure to disease, while ensuring access to appropriate food and sanitary conditions and respect for traditional health practices. In addition, apply Ministry of Health Ordinance 4384, dated 28 December 2018, instituting the National Policy on Comprehensive Attention to the Health of the Gypsy/Romany People, as part of the Unified Health System, which sets forth specific provisions on care for young children.
7. Expand culturally appropriate educational, health, social assistance, civil registry, and justice services for the children of traditional populations and communities in urban spaces or in migratory contexts.
8. Promote continuing training actions for municipal child and adolescent rights council members and child and adolescent protection council members that focus on the different ways of life of in early childhood, contemplating the social diversity and cultural specificities of families and children from traditional populations and communities.
9. Assure the registration and legal certainty of Indigenous lands, *Quilombola* lands and conservation and agrarian reform units, with a view to guaranteeing the right to land as a first and fundamental right of young children from traditional populations and communities.
10. Complement the state and municipal plans prescribed in Law 13257/2016, through the development of specific *Community Plans for Early Childhood*, with the participation of representatives of traditional populations and communities that reflect their particular conceptions of *family, early childhood, caregiving and education for children*, so that these are transmitted to those with primary responsibility for formulating and executing family support programs and, in this way, contribute to the relevant actions in a manner that ensures respect for the diversity of Brazilian childhoods.

Afro-Brazilian childhoods and children⁽²⁶⁷⁾ (268)

Researchers²⁶⁹ have pointed to the difficulty of building a positive Afro-Brazilian identity and the extent to which educational institutions have not contributed to overcoming this reality by disregarding the importance of effectively linking pedagogical proposals to the promotion of racial equality.

With the inclusion of article 26-A and article 79-B of the National Education Law (LDB) and

²⁶⁷ The text was authored primarily by Lucimar Rosa Dias with the collaboration of Megg Rayara Gomes de Oliveira.

²⁶⁸ We have selected this terminology because the Brazilian Institute of Geography and Statistics (IBGE) provides for combining *black* and *brown* skin-color designations under the *Afro-Brazilian* category.

²⁶⁹ DAMIÃO, Flávia de Jesus. *Crianças Negras Pequenas e suas Infâncias: Produção de Conhecimentos a partir do Congresso Brasileiro de Pesquisadores/as Negros/as (COPENE)*, 2018. Dissertation (Doctoral Dissertation) – Universidade Federal da Bahia, Salvador (BA), 2014. DIAS, Lucimar Rosa. *Formação de Professores, Educação Infantil e Diversidade Étnico-Racial: Saberes e fazeres nesse processo*. Revista Brasileira de Educação. Rio de Janeiro, v. 17, p. 51, 2012. Available at: <https://www.scielo.br/scielo.php?pid=S1413-24782012000300010&script=sci_abstract&tlng=pt>. Accessed: 22 June 2020. SANTIAGO, Flávio. *O Meu Cabelo é Assim... Igualzinho o da Bruxa, Todo Armado: Hierarquização e racialização das crianças pequenininhas negras na educação infantil*. Thesis (Master of Education) – Faculdade de Educação, Unicamp. Campinas (SP), 2014. SOUZA, Ellen G. L. *Crianças Negras e Culturas Infantis: Aportes para a descolonização das infâncias*. Olhares: Revista do Departamento da UNIFESP, v. 4, n.º 2, 2016. Available at: <<https://periodicos.unifesp.br/index.php/olhares/article/view/556/226>>. Accessed: 2 July 2020.

institution of the National Curricular Guidelines on Education in Ethno-Racial Relations and Afro-Brazilian and African History and Culture (*DC-ERER*),²⁷⁰ there is no shortage of educational materials or didactic-pedagogical resources on the issue of early childhood. The Ministry of Education has produced specific materials on the subject since 2006.

The absence of a consistent effort in early childhood education on Afro-Brazilian and African history and cultures has deprived Afro-Brazilian children of the opportunity to see themselves represented in a positive light in the various experiences developed within institutions. Children have thus been denied a positive socialization process, while the role of education professionals on this question has been neglected. In 2018, Ana Paul Xongani went on social media to declare that the *loneliness of Afro-Brazilian women begins in childhood*, an allusion to the studies on loneliness among Afro-Brazilian women. She went on to denounce the loneliness of her 4-year-old daughter, who had been spurned from play activities by White children. Sadly, this is not an uncommon finding for those who study childhood and racial relations, nor for the mothers and fathers of Afro-Brazilian children.

The overall lack of concern with the conditions that affect Afro-Brazilian children is not restricted to the educational field, but, in fact, infects policy in other sectors, giving shape to a phenomenon referred to as *structural racism*. Failure to recognize that the nation's domestic structures are founded on racism severely affects the entire population, in particular Afro-Brazilian childhoods/children. Consequently, the absence of a racial/skin perspective approach in social policy reinforces not only social inequality but, above all, racial inequality. This perspective cannot be ignored in any public action, as children are the most fragile tip of the inequality phenomenon, with Afro-Brazilian children, along with other discriminated childhoods, representing the tip of the tip. Although there is no shortage of examples on this point, we cite just two: 1) deaths among children in the state

of Rio de Janeiro by stray bullets in 2019 and 2020; and 2) religious racism, by which religions of African origin are excluded as legitimate forms of spirituality, thereby preventing Afro-Brazilian children from practicing their traditions. According to the Brazilian Institute of Geography and Statistics (IBGE), the majority of people affected by hunger are Afro-Brazilian. Alessandro Pinzani, a professor of philosophy at the Federal University of Santa Catarina (UFSC), categorically concludes that *hunger in Brazil has a skin color*, and we know it is black.

Unfortunately, examples abound in all social arenas that demonstrate unequivocally the extent to which racism emerges as a cruel obstacle to the full development of Black children and the urgency of including a racial/skin color perspective in social policy making if, in fact, the desire to alter this reality exists.

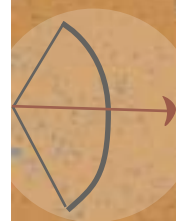
In this light, below a number of proposals are set out that could serve to help officials establish parameters to promote racial equality:

- Implement standing technical teams in the Education Departments to oversee diversity issues, including Education on Ethno-Racial Relations. Teams should be equipped with the institutional means and budgetary resources to fulfill the recommendations in this Plan.²⁷¹
- Provide guidance to educational institutions on reorganizing their curricular and pedagogical proposals, basing these on the National Curricular Education Guidelines for Ethno-Racial Relations and Afro-Brazilian and African Culture, pursuant to CNE/CBE Opinion 03/2004.²⁷²
- Promote on a systematic and continuing basis studies, discussions, and research in early childhood education institutions, with community participation, on ethno-racial diversity, institutional racism, and the

²⁷⁰ *Diretrizes Curriculares Nacionais para a Educação das Relações Étnico-Raciais e para o Ensino de História e Cultura Afro-Brasileira e Africana.*

²⁷¹ Proposal drawn from the National Curricular Education Guidelines for Ethno-Racial Relations and Afro-Brazilian and African Culture, 2013. Available at: <http://www.crianca.mppr.mp.br/arquivos/File/publi/mec/diretrizes_curriculares_eticorraciais_mec_2013.pdf> Accessed: 7 April 2020.

²⁷² *Op. cit.*



role of early childhood education in promoting equality.

- Review early childhood education curricula, pedagogical proposals, and didactic materials, with a view to preventing ethno-racial discrimination and ensuring these promote understanding of equality and are representative of the ethno-racial and cultural diversity of Brazilian society.
- Incorporate issues relating to Afro-Brazilian children in initial and continuing training programs for early childhood education professionals, including African and Afro-Brazilian history and cultures, as a way of promoting reeducation on ethno-racial relations.
- Earmark education resources for the acquisition of children's literature materials that portray Brazil's ethno-racial diversity in a positive light.
- Purchase early childhood education toys, games and pedagogical other materials for educational establishments that take ethno-racial diversity into account.
- Issue operational recommendations for early childhood education on decorations, exhibits, illustrations, posters and paintings in educational establishments, daycare centers and preschools alike, that are representative of Brazil's ethno-racial diversity.
- Offer incentives to the development and dissemination of research on human diversity, with an emphasis on the Afro-Brazilian population.
- Endeavor to ensure public children's health equipment and décor contemplate the ethno-racial diversity of the Brazilian nation.
- Strive, to the extent possible, to ensure Afro-Brazilians are represented in the teaching staff of educational establishment, in order to promote ethno-racial representation for children and adolescents.
- Disseminate research that sets out the dis-

criminatory nature of specific health practices (e.g.: the lower amount of time allotted to pediatric consultations for Afro-Brazilian mothers/fathers and children).

- Transmit to health professionals in general, irrespective of their training, specific features of the health of Afro-Brazilian population (e.g.: sickle cell anemia and hypertension).
- Provide guidance to social programs on the need to review their procedures, with a view to eliminating institutional racism, present from the time candidates for a given policy are received through policy execution.

In addition to these proposals, others can and should be developed as government bodies begin to take on their legal responsibilities in regard to the racial dimension of early childhood policies.

Yet another childhood denied

To conclude this chapter on diversity in early childhood, the issue of childhood sexuality warrants consideration, specifically with respect to children identified, by many, as *trans* children, a designation deemed by others to be inappropriate for purposes of early childhood. We are aware the issue is sensitive, yet – given its importance and the serious discussion it merits – we could not abstain from offering some comments on this matter.

These children need to be heard as individuals, children, subjects of rights, just as any other child, not as bearers of a pathology. Their suffering and discomfort are not related to their gender identity but to the difficulties they encounter in finding acceptance in their various social settings. The emphasis given to their sexuality can undermine their social relations and acceptance to the extent other elements of their childhood are relegated to the backgrou-

nd. The adjectives applied to describe them cannot be used to confine them in a specific sphere, in a manner that prevents them from other experiences or erases important characteristics of their personality. Such an act would represent a reductionist denial of their individuality, insofar as identities are forged across the full spectrum of interactions and experiences, not merely within the realm of sexuality.

Although not recent, the phenomenon has been observed with greater frequency in contemporary societies and thus should be considered in public policy making decision. Howe-

ver, as we still lack a critical mass of theory to address the issue with the fullness it requires, we introduce it here as a topic for further study and discussion, recommending that an intersectoral approach be adopted to this end. As a tangible measure for implementation in the short-term, this Plan proposes the creation of a Study Group within the National Network for Early Childhood tasked with presenting, upon conclusion of its work, a set of actions to ensure these particular children are respected, heard and accepted in all the spaces encompassed by their childhoods.





Confronting
violence
against children

1. Violence in context

Violence is a complex phenomenon, difficult to define, primarily because it represents a distinct form of personal, political, social, and cultural relations. According to Koller & Loll, violence has many definitions, yet there is a common thread to every act of violence, namely that, *it represents an action and/or omission that can stop, prevent, deter, or retard the full development of human beings* and cause physical, psychological, and social harm to the individual. The authors note that violence *occurs in asymmetrical and hierarchical interpersonal relationships, marked by inequality and/or subordination. The person who commits violence against another takes decisions about that person's life, without evaluating that person's basic needs and desires, but, rather, taking into account only his or her needs and desires.*²⁷³

The World Health Organization (WHO) defines violence as *the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.*²⁷⁴ From a social standpoint, the opposite of violence is not non-violence, but value for the overall human life of each individual in her or his family or social group.

Violence cannot be understood outside of the society in which it is perpetrated, as it is society that nurtures the political, economic, social, and cultural elements that inform day-to-day life. Therefore, if violence is constructed by a particular society and under specific circumstances, it can also be deconstructed and overcome by that same society.

Children are among the most vulnerable seg-

ments to violence. The asymmetry of power in the adult-child relationship allows the former, in many cases, to abuse his or her power by disregarding and/or disrespecting the dignity of children as individuals and subjects of rights.

In the context of human rights, a direct relationship exists between the subject of rights and those responsible for ensuring those rights – the family, the State, and society. While Brazilian law governing the protection of children (1988 Brazilian Federal Constitution, Statute on the Child and Adolescent, Little Bernardo Statute,²⁷⁵ Early Childhood Legal Framework and other legal instruments and international treaties to which Brazil is party) is among the most progressive in the world, the specific legal provisions that give full expression to the principle of protection are not reflected in the day-to-day protection instruments applied to significant portions of the child-adolescent population.

Domestic violence constitutes the majority of cases of violence against children. In 2017, intrafamily violence, consisting of accidents and acts of aggression, were the second leading cause of death among children in Brazil under the age of 1 year and between the ages of 1 and 5 years.^{276 277}

Violence in its different forms causes pain, suffering and harm to physical and psychological integrity. Physical harm may be *temporary* (bruising, cuts) or permanent (irreversible physical scars, such as brain damage and other disabilities and even death). Psychological harm interferes in the child's growth and development and may result in learning disabilities, insecurity in decision-making, low self-esteem, difficulties with socialization and other more serious and prejudicial forms of emotional harm.

²⁷⁵ *Lei Menino Bernardo.*

²⁷⁶ MS/SVS/DANTPS: *Sistema de Informações sobre Mortalidade (SIM).*

²⁷⁷ In 2007, the Oswaldo Cruz Foundation published a wide-ranging study on the causes and forms of violence and possible measures for its prevention: *Impactos da Violência na Saúde*, organized by: NJAINE, Kathie; ASSIS, Simone Gonçalves; and CONSTANTINO, Patricia. Rio de Janeiro: Editora Fiocruz, 2007, 418 p. Available at: <<http://books.scielo.org/id/7yzrw/epub/njaine9788575415887>>. Accessed: 24 February 2020.

²⁷³ KOLLER, S. H. (org.). *Ecologia do Desenvolvimento Humano: Pesquisa e Intervenção no Brasil.* São Paulo: Casa do Psicólogo, 2004.

²⁷⁴ World Health Organization. *World Report on Violence and Health.* Geneva. 2002.



One of the principal underlying factors of this harm is toxic stress, the product of situations involving severe, frequent, and prolonged suffering, in which children are not provided the necessary support by the mother, father or caregiver. Serious neglect, such as abandonment, is an outgrowth of toxic stress. Studies indicate that toxic stress can impact how the brain organizes itself to direct the individual's behavior and can increase the risk of physical and mental diseases related to stress.²⁷⁸ In this light,

*“research on the biology of stress now shows that healthy development can be derailed by excessive or prolonged activation of stress response systems in the body and brain. Such toxic stress can have damaging effects on learning, behavior, and health across the lifespan.”*²⁷⁹

Newborns who are shaken with force can suffer injuries capable of causing cerebral palsy, mental retardation, learning disabilities, blindness, deafness, among other effects, or become susceptible to convulsive episodes. Infants whose hygienic and health needs are neglected, including through omission or absence of mandatory vaccines, may present severe and irreversible illnesses and scars as well. Although particularly serious in newborns, violence is damaging to children at any age, especially in the first years of life.

Participation of the child from early childhood in actions to address intrafamily violence and its consequences is a fundamental strategy for building effective policies. This participation begins by listening and considering the opinions and desires of children. It should be included in the framework of family and community coexistence, public policies, and government programs.

In 2018, the United Nations (UN) proposed a *Global Partnership to End Violence Against*

Children, an initiative Brazil joined in June 2018. The partnership brings together governments, UN organizations, international organizations, civil society, religious groups, the private sector, charitable foundations, researchers, scholars, in addition to children themselves. The initiative is aligned with a number of the Sustainable Development Goals (SDG):

- 16.2: *end abuse, exploitation, trafficking, and all forms of violence against and torture of children;*

- 5.2: *eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation; and*

- 16.1: *significantly reduce all forms of violence and related death rates everywhere.*

By signing on to this effort, Brazil took on the commitment to develop an *Integrated Roadmap of Actions to Support Assessments of the Ten-Year Child and Adolescent Human Rights Plan (2011-2020)*. In addition, the agreement tasks the country with developing a system of indicators on children and adolescents to identify violations of their rights.²⁸⁰

2. The various forms of violence

In this chapter, the different forms of violence that occur in the spaces reserved for child socialization are considered, namely intrafamily, institutional and community. Structural violence, which is the absence of access by children to their fundamental rights, such as quality education, health, family and community coexistence and dignified conditions of life, is the focus of other chapters in this Plan.

The different forms of violence, in terms of

²⁷⁸ Center on the Developing Child, Harvard University. *Excessive Stress Disrupts the Architecture of the Developing Brain*. Available at: <<https://developingchild.harvard.edu/resources/wp3/>>. Accessed: 28 March 2020.

²⁷⁹ Available at: <<https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>>. Accessed: 28 March 2020.

²⁸⁰ Available at: <<http://primeirainfancia.org.br/entidades-comemoracao-adesao-do-governo-federal-a-parceria-global-pelo-fim-da-violencia-contra-criancas-e-Adolescentagere-da-onu/>>.

their nature, are defined as follows:

Physical violence: any single or repeated act or omission which is deliberate and causes physical, psychological, emotional, or intellectual harm to the child. This may range from a minor injury to death.

Some forms of this type of violent include physical punishments, which consist of an act of violence of any intensity directed against the child's body with the aim of causing suffering for the purported purpose of educating or protecting the child. It is deemed a manifestation of physical violence because force is employed to obtain a particular behavior or punish an infraction. In certain cases, punishments can be defined as torture.

Physical violence includes: hitting the child with one's hand or an object (cane, belt, whip, shoe, wire, etc.), kicking, causing burns, shaking or pushing the child, clutching or pulling the child by the hair, forcing the child to remain in an uncomfortable or inappropriate position or to engage in excessive physical exercise, lashing the child's hand, pinching, hitting, shaking and pushing, striking with the foot or leg, beating (with or without the use of objects). Repeated less severe methods of physical punishment, such as slapping, are also forms of violence. They may have physical or psychological effects that may or may not leave visible marks.

The Little Bernardo Statute (Law 13010/2014) incorporated the following protection in the ECA: *the right of the child and adolescent to receive education and care free of physical punishment or cruel or degrading treatment employed as a corrective, disciplinary, educational or other measure against a child or adolescent by parents, members of the extended family, guardians and caregivers, public agents with primary responsibility for socio-educational measures or any other person charged with providing children and adolescents with care, treatment, education or protection.* To avoid any misunderstandings with regard to this provision, the law defines physical punishment and cruel and degrading treatment. In addition, it establishes measures to confront the problem:

- promote continuing educational campaigns;
- integrate relevant bodies of the Judicial Branch, Public Prosecution Office and Office of the Public Defender with the Child and Adolescent Protection Councils, the Councils for the Rights of the Child and Adolescent and non-governmental entities actively engaged with child and adolescent rights;
- provide continuing training and capacity building to health, education, and social assistance professionals and other agents;
- support and incentivize peaceful conflict resolution practices in cases of violence against a child or adolescent;
- include actions in public policies to guarantee the rights of the child and adolescent, from prenatal care, as well as activities undertaken with parents and guardians and caregivers to promote information, reflection, debate, and guidance on alternatives to physical punishment or cruel and degrading treatment in the educational process;
- promote local intersectoral spaces to coordinate actions and develop joint action plans focused on families in situations of violence, with the participation of health, social assistance and education professionals and child and adolescent rights promotion, protection, and defense bodies.

Continuing training and capacity building for professionals who serve children and adolescents are an essential condition to ensure they are able to act to prevent, identify evidence, assess, and confront all forms of violence. Professionals in this domain include child and adolescent protection council members, who are of strategic importance for myriad reasons, including the following: they are located in closest proximity to the community and families; they receive reports, complaints, requests, and alerts; they possess the skills conferred by the ECA; and are present throughout Brazil.



Psychological violence: any and all actions which cause or may cause harm to the self-esteem, identity, or development of the individual. These include threats, humiliation, verbal aggression, behavioral expectations, discrimination, isolation, and destruction of the child's emotional or sentimental belongings or objects.

Humiliation is defined as a form of psychological violence. It includes threats, insults, cursing, shaming, blackmail, and public humiliation, as well as teasing, isolating, or ignoring the child. Psychological violence is more difficult to identify, despite its frequency. Psychological violence is generally associated with physical violence.

Federal Board of Psychology (*CFP*) Resolution 018/2002 provides that racial prejudice and social humiliation produce suffering, recognizing, as such, that all racism constitutes a form of violence.

Neglect: omission of responsibility for one or more members of the family in relation to the child, by failing to provide for the basic needs of the child's physical, emotional, social, or cognitive development.

This form of violence can be characterized as abandonment, absence of care, assistance, and protection and, further as failure to stimulate and facilitate school attendance. Neglect can result in delayed or compromised development of the child or health problems. It is important to draw a distinction between neglect and situations of insufficient means in the household, whether material or emotional, to provide for the child's healthy development.

Sexual violence: classified in two modalities: intrafamily and extra-family abuse and sexual exploitation.

Sexual abuse is described as any situation in which the child is used for the sexual gratification of another person, generally an older person. It is committed by means of force, deceit, bribery, psychological or moral violence. The defining feature of this form of violence is the exercise of asymmetrical power by the abuser against the abused. The abuser takes advantage

of the fact that the child's sexuality is aroused for purposes of gaining their consent and taking advantage of their sense of guilt about feeling pleasure as a way of covering up the act.

Intrafamily sexual abuse, also called incest, is any relation of a sexual nature – (a) between an adult and an adolescent; (b) between an adult and a child; (c) between an adolescent and another adolescent; (d) between an adolescent and a child; and (e) between a child and another child – among whom there is a family connection or a relationship of responsibility. Extra-family sexual abuse occurs outside the child's family environment and is perpetrated by someone the child trusts.

Sexual exploitation is characterized by sexual relations between a child and adults through payment of cash amounts or any other benefit in exchange for sexual gratification. Sexual exploiters are defined as the client (the individual who pays for the service) and the intermediary (the individual who recruits, facilitates, and forces a child to submit to such practices). Sexual exploitation of young children may occur in the domestic environment, inflicted by individuals closest to the child. The most frequent forms of sexual exploitation are pornography, trafficking of children and adolescents, sexual tourism, and commercial sexual exploitation, involving a transaction in exchange for sex.

3. Principles and guidelines

Child violence protection policies should be effectuated through a set of coordinated government and non-governmental actions involving systemic efforts by the family, community, society, and the State, founded on respect for the child's and family's ethno-cultural diversity, sexual identity and orientation, gender equity and regional, socioeconomic, physical, and mental specificities.

To this end, policy actions should be guided by

the following principles:

1. Recognize the child as a subject of rights;
2. Valorize and promote the participation of children;
3. Valorize the capacities and competencies of families to resolve their own conflicts and problems;
4. Give primacy to the State's responsibility to foster integrated policies on confronting violence;
5. Promote a culture of peace.

4. Goal

Protect children through 6 years of age against all forms of violence that pose a risk to their physical and psychological integrity in the family, institutional and community setting, through recommendations that strengthen and effectively operationalize the Rights Guarantee System.

5. General recommendations

The recommendations of the National Plan for Early Childhood to confront violence in early childhood are based on valorizing dialogic relations based on cooperation and negotiation between the child, his or her peers and adults. The intention is for this model to guide and contribute to coordinated policies on early childhood, with a view to strengthening the identity of boys and girls as socio-political actors.

- 5.1 Strengthen and create local institutional (public services) and informal (civil society) assistance networks for children and

families, for the purpose of guaranteeing:

- 5.1.1. Protection to children by safeguarding them from all forms of violence;
 - 5.1.2. Quality assistance to child victims;
 - 5.1.3. Assistance/follow-up and adequate treatment for the perpetrators of domestic violence;
 - 5.1.4. Reporting and monitoring cases of violence;
 - 5.1.5. Qualification of the child's assistance/referral status under the Rights Guarantee System;
 - 5.1.6. Effective coordination between the Protection Network, Assistance Network, schools and other services delivered to children and their families;
 - 5.1.7. Continuous recycling of education, health and assistance professionals, child and adolescent protection council members and other SDG stakeholders to prevent, treat and refer cases of violence against children.
- 5.2. Promote safe environments and quality of life, which include:
 - 5.2.1. Strengthening and integrating assistance policies for families: family planning, prenatal care, postnatal care, public daycare centers, mental health, and other early childhood services; stimulating home visits associated with early childhood education programs and violence prevention, with a focus on promoting safe environments for children;
 - 5.2.2. Training in early childhood violence for Family Health Program professionals and Early Childhood Education professionals;
 - 5.2.3. Internally coordinating the health sector to monitor situations of risk by training professionals to identify, assess and support the development of studies;
 - 5.2.4. Ensuring coordination between the he-



alth sector and other government sectors and society in general, including through fulfillment of the mandatory reporting provisions of the Statute on the Child and Adolescent;

- 5.2.5. Integrating the health sector care network with the juridical system (public prosecution office, specialized precincts, courts, child and adolescent protection councils and institutions affiliated to universities engaged in providing advocacy services);
- 5.2.6. Including the subject of violence against children in higher education and technical programs administered in the Health, Social Assistance, Legal, Safety, Education, Communication and Tourism fields;
- 5.2.7. Strengthening social income generation programs for families victimized by social violence;
- 5.2.8. Incorporating the topic in training curricula of Council Schools (Social Agenda of the Special Secretariat for Human Rights – SEDH).
- 5.3. Strengthen the Child and Adolescent Information Database (SIPIA).²⁸¹ Established in 1997 on the ECA model, SIPIA collects information generated by the child and adolescent protection councils to contribute to government decisions on policies for children and adolescents aimed at guaranteeing their citizenship rights.
- 5.4. Recognize physical and humiliating punishments as forms of violence against children and a violation of their fundamental rights, with an adverse impact on their healthy development.
- 5.5. Coordinate municipal, state and macroregional assistance networks and the Rights Guarantee System networks to effectuate and qualify reporting of acts of violence.
- 5.6. Guarantee support to integrated activities

between children and their families and schools, providing spaces for community discussion, with the objective of stimulating families to adopt a critical view of violence.

- 5.7. Organize municipal, regional, and national conferences on the culture of peace as spaces for exchanging experiences and disseminating studies and research on the origins of violence and the most effective way to realize the values of peace.
- 5.8. Organize campaigns to confront violence in early childhood.
- 5.9. Execute actions to educate and guide children on learning to perceive and defend themselves from suggested, solicited, attempted, and materialized acts of sexual exploitation.

6. Recommendations to confront violence in daycare centers, preschools, schools and sheltering institutions

- 6.1. Open public state and municipal schools and federal public schools to communities for artistic, sport and leisure activities;
- 6.2. Stimulate the participation of children in the decisions of their educational establishments and institutions;
- 6.3. Use educational establishments as prevention centers: reference and integration points between health units, communities, and the student environment;
- 6.4. Develop projects to bring schools and communities together for common interest actions;

²⁸¹ Sistema de Informação para Infância e Adolescência.

- 6.5. Foster collaboration between schools and bodies of the Rights Guarantee System to register and report cases and indications of domestic violence against the child;
- 6.6. Implement school coexistence projects in early childhood education establishments through conflict mediation techniques;
- 6.7. Build capacity of all education professionals, including teachers, technicians, administrative staff, on preventing and confronting violence in the school setting, including bullying;
- 6.8. Organize debates and capacity building workshops with parents, with a view to reducing, or even eliminating, domestic violence against children.

7. Recommendations to confront institutional violence

- 7.1. Create a project bank submitted to previous evaluation and validated as a reference point for the promotion of children's rights;
- 7.2. Offer courses through workshops and conversation circles to Civil Police and State Police agencies on the types and severity of violence against children and strategies for confronting violence;
- 7.3. Create a referral and response flow for complaints received by the Dial 100 hotline;
- 7.4. Implement Law 13431/2017 (Protected Listening Law),²⁸² offering the necessary training to this end to Legal Practitioners;
- 7.5. Promote consciousness- and awareness-raising campaigns by the Ministry of Justi-

ce and municipal and state public safety departments that underscore the importance of building *safe zones*, with a view to preserving the physical integrity of children and preventing them from falling victim to *stray bullets* within school environments and surrounding areas. Campaigns should raise awareness to the fact that child victims of *stray bullets* in large metropolitan areas are mostly poor, Afro-Brazilian, and marginalized, revealing the increased social and economic vulnerability to which these groups are exposed by reason of their race/skin color/ethnicity.

8. Recommendations to confront community violence

- 8.1. Implement projects to confront violence at the local level from an inter-institutional and integrated perspective;
- 8.2. Foment community protection networks for children ages 0 to 6 years, with a view to engaging existing protection services in the territory and individuals in the community;
- 8.3. Stimulate the participation of children in community decisions and spaces through consultations with children up to 6 years of age.

9. Recommendations to confront sexual violence

- 9.1. Raise awareness of the Judicial Branch on the importance of the forensic reports issued by medical professionals in criminal cases of sexual violence;

²⁸² Lei da Escuta Protegida.



- 9.2. Reduce underreporting to the minimum possible levels, integrating the various reporting channels and intensifying information campaigns on sexual violence and verifiable and effective systematized practices;
- 9.3. Adopt protection strategies for listening to the experiences of child victims in various investigatory and adjudicatory settings;
- 9.4. Develop material – education on preventing the sexual abuse of children – that parents can read *to* and *with* children 0 to 8 years of ages and to caregivers, for the purpose of stimulating them to learn about their bodies, self-care, the family's role, who they can turn to for help and how to protect themselves.
- 9.5. Adopt strategies for homeless children to protect themselves from sexual violence to which they are subjected.

III) 215/2018, governing the protection of children and adolescents in the context of large-scale projects, with regard to the rights of traditional, Afro-Brazilian and *Quilombola* populations and communities and to the respect for their own charters by the Legislative, Executive, Judicial Branches and other bodies and entities of the Rights Guarantee System.

10.2. Stimulate more intensive action on the part of the Rights Guarantee System and the Federal State Offices of the Public Prosecutor and the State and Federal Offices of the Public Defender in cases relating to the exploitation of ethnic and racial minority children subject to any type of discrimination, child trafficking, forced adoption due to extreme poverty and sexual exploitation;

10.3. Expand social participation and monitoring of educational services for Afro-Brazilian, Indigenous, *Quilombola* children and those from traditional communities, in order to strengthen ethnic identity and combat all forms of violence;

10.4. Include the following topics in the public debates on the issue of violence against children sponsored by government bodies: *violence in the name of religion as ethno-religious violence with a focus on the question of power, ethno-racial violence as a form of exclusion and exploitation and ethno-cultural violence as a form of forced acculturation and inclusion*;

10.5. Adopt government measures to combat forced sterilization and obstetric violence, given the strong ties between mothers from traditional, Indigenous and *Quilombola* communities and the rearing, education, and support of their children;

10.6. Adopt adequate measures to create and guarantee an educational environment free of racism and ethno-racial violence.

10. Recommendations to confront ethno-racial violence

10.1. Apply the recommendations of the ECA and, in particular, the recommendations affirmed in the following Resolutions of the National Council for the Rights of the Child and Adolescent:

- I) 180/2016, concerning equality between boys and girls;
- II) 181/2016, which provides for the parameters for interpreting rights and adapting services relating to the assistance rendered to children and adolescents from traditional populations and communities in Brazil; and

Ensuring
all children
the citizen document



Birth registration is a right of the child and duty of the State. The respective parents, guardians or caregivers are tasked with ensuring registration by the 15th day of life, and preferably while still in the maternity ward, immediately following birth.²⁸³

Civil registration ensures that the individual's identity is guaranteed, securing the child's ties to the family, as well as the State, and, in this way, enabling full exercise of his or her citizenship.

Civil registration is essential to the existence of the individual citizen, as children without a civil registration or birth certificate do not legally exist in the eyes of the State. In addition, citizens can only enroll in education programs, obtain an identity card, voter registration card, Individual Taxpayer Registry Card, employment booklet, marry, secure other documentation (such professional registrations), enroll in the Federal Government Consolidated Registry of Social Programs and qualify for government program and Social Security benefits if they possess a birth certificate. Civil registration is even required at the end of life for the issuance of death certificates, needed to ensure the deceased is not interred as an indigent.

Approximately 3 million people in Brazil do not have a birth registration. The good news is that under-registration and late registration – executed after the third month of life – have been falling throughout the country since 2008.

According to data provided in *Birth Registration Statistics*,²⁸⁴ a report published by the Brazilian Institute of Geography and Statistics, the number of children who were not registered within the first year of life dropped to 1% in 2014, confirming the progress made toward eliminating the under-registration of civil births

in Brazil. Under-registration percentages vary between regions, with highest levels found in the North (9.4%) and the lowest rates identified in the South (0.4%) and Southeast (1%).

When broken down by race/color/ethnicity, under-registration manifests most prevalently among historically and traditionally vulnerable populations: Indigenous populations, *Quilombola* communities, Romany peoples, traditional populations, and communities of African descent, *terreiros*, riverine communities and other traditional populations and communities, homeless persons, individuals deprived of their freedom, rural workers, and LGBT groups.

Births not registered at registry offices within the timetable set forth in the study are subsequently entered in the civil registry's statistics as *late registrations*.

If for any reason the certificate is not issued within a period of 15 days following birth or three months, in the case of a home of residence located more than 30 kilometers from the registry office, Law 6015/1973, provides for *late registration*. In these cases, a hearing may be held for purposes of explaining the circumstances and petitioning the court to instruct the registry office to issue the certificate. The documents required to file a judicial petition for late registration must contain the following information: location of birth, name of hospital and statements from witnesses with knowledge of the individual's birth.

Under-registration of civil births results in the exclusion of unregistered children from health and education planning actions, as the State is simply unable to determine the existence, quantity or location of unregistered children, thereby distorting assistance efforts such as the distribution of vaccinations and meeting daycare and preschool service demand, while also making it difficult for the State to exert more effective control of irregular/illegal adoptions and child trafficking activities (unregistered children are unlikely to be traced by the justice system, rendering them, as such, easy targets for traffickers).

The phenomenon of under-registration stems

²⁸³ For declarant mothers, the deadline may be extended for an additional 45 days to allow for post-childbirth recovery. The law provides for extensions in one other case, as well: when the distance between the child delivery facility or home residence to the nearest registry office is greater than 30km. In these cases, the deadline may be extended by as much as three months (article 50 of Law 6016, of 1973). Following expiry of the registration period, only the registry office in the home residence's district has jurisdiction to execute a registration, pursuant to article 46 of Law 6015, of 1973.

²⁸⁴ *Estatísticas do Registro Civil*.

from socioeconomic, geographic, institutional, technical, legal, legislative, and political factors. From a socioeconomic standpoint, it is associated with poverty and is the product of social exclusion to which a significant portion of the population has traditionally been subject: it is most severe where educational, employment, household income and housing indicators are poor and where access to information is inadequate. In addition, birth registrations are delayed for some children in cases in which the mother awaits recognition of paternity by the father.

The geographic factor involves the distance between the site of birth and the registry office, as well as other geographic barriers that impede access to the related services. Political, legal, and institutional factors that exacerbate the problem of birth under-registrations encompass: (a) the absence of adequate oversight to enforce the laws governing registration; (b) the lack of child protection networks in a majority of municipalities that are vigilant to the under-registration of births and the safety of children; and (c) the lack of civil registry offices in approximately 400 Brazilian municipalities. An additional factor is the absence of a matching funds policy for civil registry offices to offset the free registrations requirement under Law 9534, dated 10 December 1997, in particular in disadvantaged localities. The mandate has driven a number of registry offices out of business or to forego implementation of updated technology systems that could otherwise expedite information collection and dissemination processes.²⁸⁵

Equally important are the technical and technological factors that indirectly impact the registration process. The technological modernization of birth registration services (computers and internet access) has made it easier to identify those municipalities with poor registration systems.

A number of initiatives have been undertaken, some of which are ongoing, to eliminate the under-registration of civil births. These include:

1. Passage of Law 9534/1997, mandating issuance of civil registrations and initial birth certificates free of charge. For individuals meeting the poverty eligibility threshold, the duplicate copy of the birth certificate is free as well.
2. Implementation, in 2010, of birth registration services in maternity wards through a computer system connected via internet to the civil registry offices of Brazil's Federative Units.²⁸⁶
3. Introduction of the of Civil Registration Database of Natural Persons (*CRC*),²⁸⁷ operated through an interconnected system, with a view to: (a) interconnecting civil registry clerks to enable sharing of electronic documents and information and data flows; (b) enhancing the technologies to allow for the registration of natural persons by electronic means; (c) implementing a nationwide system to locate registrations and request certificates; (d) enabling government bodies to access civil registration information for natural persons through issuance of an official letter or electronic request to the relevant registry clerk; and (e) interconnecting the civil registration system with the Ministry of External Relations for the purpose of obtaining data and documents on the civil life of Brazilians abroad.²⁸⁸
4. The National Civil Birth Registration Mobilization Campaign and Week, which has contributed to a significant increase in registrations among all age groups. To enhance their effect, these initiatives should be directed to localities and populations with the highest rates of under-registration, including Indigenous, riverine,

²⁸⁵ CRESPO, C.D.; BASTOS, A.A.; e CAVALCANTI, W.A. *A Pesquisa do Registro Civil: Condicionantes do sub-registro de nascimento e perspectivas de melhoria da cobertura*. Available at: <https://www.researchgate.net/publication/242356384_A_Pesquisa_do_Registro_Civil_condicionantes_do_subregistro_de_nascimentos_e_perspectivas_de_melhorias_da_cobertura>. Accessed: 2 March 2020.

²⁸⁶ CNJ Resolution 13, of 2010. Available at: <<https://www legisweb.com.br/legislacao/?id=95209>>. Accessed: 13 March 2020.

²⁸⁷ *Central de Informações de Registro Civil das Pessoas Naturais*.

²⁸⁸ CNJ Resolution 46. Available at: <<https://atos.cnj.jus.br/atos/detalhar/2509>>. Accessed: 13 March 2020.

Quilombola communities, persons in temporary rural encampments or permanent rural settlements, traditional communities, and homeless populations. The Interagency Health Information Network (RIPSA), coordinated by PAHO, provides a valuable tool for identifying municipalities with high rates of under-registration.

5. Mobilization campaigns serve to ensure all children are registered immediately following birth. To this end, the ongoing contribution of municipalities is essential to organize: (a) strategies to make sure registry services reach the population and facilitate access to civil registration services; (b) mobile civil registration services in order to reach remote communities (deployment of registry services, judges and district attorneys); and (c) special strategies for reaching Romany and riverine populations, persons in temporary rural encampments, persons in permanent rural settlements, Indigenous populations and *Quilombola* communities, in addition to traditional populations and communities.
6. Decree 10063/2019,²⁸⁹ aimed at marshalling the efforts of the union, states, Federal District, and municipalities to eradicate under-registration of civil births in Brazil and increase access to basic civil documents by all Brazilians. Executive Branch bodies will work in cooperation and coordination with the Judicial Branch and the Legislative Branch, in addition to extrajudicial civil registry offices, international organizations, the private sector, communities and families.
7. The Early Childhood Legal Framework (Law 13257/2016) reinforces the actions adopted to ensure all children are registered at birth through inclusion of the following paragraphs in article 102 of the ECA:

paragraph 5 Birth registrations and certificates that enable inclusion of the father's

name, at any time, are exempt from penalties, costs and fees and shall have absolute priority.

paragraph 6 Requests for entry of recognition of paternity on the birth record and corresponding certificate shall be executed free of charge in all cases.

1. Strategies

A variety of strategies can be adopted to eradicate under-registration and ensure all children are registered and issued a birth certificate, including:

1. Consolidating birth and civil registration information and statistics to identify areas and populations in which under-registration is prevalent.
2. Promoting continuous information and social awareness-raising campaigns to attract coverage by the largest number of local media channels possible: radio, public megaphones, institutional newspapers, banners, pamphlets, and other media.

3. Education:

(A) Organize actions in schools to encourage birth registration and provide guidance to families (presentations to parents, pep rallies, activities with students that include the participation of parents).

(B) Promote campaigns in schools and literacy learning classes in areas with high rates of under-registration and include the deployment of registry services.

4. Health:

(A) Include guidance to parents on birth registration in the information materials distributed by health departments and as part of vaccination campaigns and home visits, for example, through the Family Health Program (PSF).

²⁸⁹ Available at: <http://www.planalto.gov.br/ccivil_03/_ato2019-2022/2019/decreto/D10063.htm>. Accessed: 2 March 2020.

(B) Implement civil birth registration services in maternity wards.

(C) Educate mothers on the difference between the Live Birth Declaration (DNV) issued by the maternity ward and the Birth Registration and Certificate issued by the registry office.

5. *Social assistance:*

(A) Include guidance on the right to civil birth registration and options for securing registration in information materials, discussion circles held in community centers and at festival stands, civic events and benefit centers, and provide permanent guidance in assistance centers serving families, the elderly, youth, and groups in situations of poverty.

(B) Organize birth registration collectives in areas with high rates of under-registration or which are difficult to access, in coordination with neighborhood and professional associations, unions, churches and service clubs, and include the deployment of registry services.

6. *Culture:*

(A) Include guidance to parents in the information materials distributed by cultural bodies, at cultural events and at traveling shows.

(B) Leverage traveling shows and cultural activities to organize birth registration collectives in areas with high rates of under-registration and include the deployment of registry services.

7. *Sport:*

(A) Incorporate guidance to families in the information materials on social awareness-raising distributed at tournaments, to recreational clubs located in poor areas and to sport programs offered to populations in situations of poverty.

(B) Leverage local competition finals to or-

ganize civil registry collectives on athletic fields and courts, including the deployment of registry services, for the purpose of making birth registrations.

8. *Work and workplace:*

(A) Incorporate guidance on civil registry in information materials, discussion circles, vocational training programs.

(B) Set up stands at strategic sites, such as employment referral centers.

(C) Organize civil registry collectives at large job sites, factories, farms, etc., in coordination with unions and workers' movements, and include the deployment of registry services.

9. *Environment:* Include guidance on civil registry in the activities undertaken with traditional populations in environmental and preservation areas and include the deployment of registry services.

10. *Agriculture and agrarian development:*

(A) Include guidance on civil registration in materials distributed at events such as field days and agricultural fairs.

(B) Organize civil registry collectives in coordination with agricultural cooperatives, unions, and farmworkers' movements, and include the deployment of registry services.

11. (C) Undertake the initiatives above in settlements and encampments of the National Institute of Land Settlement and Agrarian Reform (*INCRA*) and land rights movements.

12. *Agriculture and fishing:*

(A) Set up information and guidance stands for families on birth registration at festivals and tournaments.

(B) Organize birth registration collectives in coordination with fishing cooperatives, associations, workers' movements, and or-

ganizations, and include the deployment of registry services.

13. *Transportation:*

(A) Distribute or post information materials on mass transportation vehicles and at bus stops.

(B) Set up information and guidance stand on birth registration along highways.

(C) Organize birth registration collectives in coordination with bus and public transportation cooperatives and driver and transportation workers' movements, providing free transportation to registry offices for unregistered individuals or the deployment of free registry services.

14. *Public safety:* Print and distribute informational pamphlets on birth registry and set up stands at police checkpoints and stations and family assistance services for inmates in municipal correctional facilities.

15. *Law:*

(A) Enhance legislation by simplifying the procedures for recognition of paternity.

(B) Establish permanent structures within the Judicial Branch to promote parentage, similar to the Parentage Promotion Center, established in 2008 by the Alagoas State Court of Justice, which served as the point of reference for creation of the Present Dad Project²⁹⁰ by the National Justice Council and garnered an honorable mention at the 2010 Innovare Award Ceremony.

(C) Ensure mandatory birth registration in maternity wards and related establishments for the newborns of traditional itinerant families, populations, and communities.

2. Goals and targets

1. Guarantee access to basic health, education, information and justice rights in order to reduce social inequalities in Brazil.
2. Continuously disseminate the right of birth registration free of charge through birth registration incentive campaigns and ensure that birth registration is understood as a right of the child and duty of the parents and the State. Organize an annual National Birth Registration Mobilization Campaign until such time as the practice, pursuant to law, is universalized and no Brazilian child is deprived of a birth certificate.
3. Adopt all measures as necessary to ensure every municipality has at least one registry office (civil registry of natural persons).
4. Recommend registry offices implement structures to ensure proper operation and interconnection with hospital registration and live birth networks.
5. Expand the birth registration services network in hospitals/maternity wards to ensure that upon discharge from the maternity ward the mother has in her possession a document certifying the birth of her son or daughter. Implement interconnected units for issuance of birth registrations in health establishments connected to the Unified Health System's Hospital Information System²⁹¹ and train staff to operate registration units. Special attention should be given to poor and remote localities.
6. Ensure families who reside at significant

²⁹⁰ *Projeto Pai Presente.*

²⁹¹ *Sistema de Informações Hospitalares.*

distance from registry services obtain a birth certificate during such time as the mother and child are in the maternity ward.

7. Strengthen the Rights Guarantee System to ensure its full operation and coverage in all municipalities through effective actions that fulfill the rights of the child, including the right to a birth registration and certificate, free from any form of discrimination, whether by reason of race, social status, or ethnic origin.
8. Coordinate federal, state and municipal policies involving the education, health, social assistance, justice and citizenship and public safety departments and bodies, Courts of Justice, Office of the Federal Public Defender and Offices of the State Public Defender, Justice Inspectorates,²⁹² Public Prosecution Office, Child and Adolescent Protection Council, rights councils, civil society organizations, representa-

²⁹² *Corregedoria-Geral de Justiça.*

tive bodies of federal bodies, such as the National Indian Foundation (FUNAI),²⁹³ Palmares Foundation²⁹⁴ and the National Health Foundation (FUNASA),²⁹⁵ with a view to taking concerted action to ensure the goal of registering and issuing a Birth Certificate to every Brazilian child.

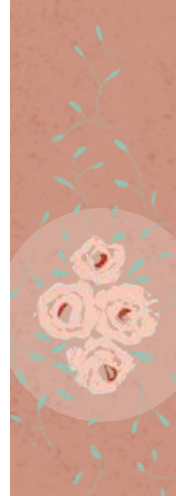
9. Create permanent structures in the Judicial Branch to promote parentage.
10. Align systems and vital statistics: Database of Live Births (SINASC),²⁹⁶ operated by the Ministry of Health, and the Civil Registry Database, maintained by the Brazilian Institute of Geography and Statistics, in accordance with the applicable race/skin color/ethnic criteria.

²⁹³ *Fundação Nacional do Índio.*

²⁹⁴ *Fundação Palmares.*

²⁹⁵ *Fundação Nacional de Saúde.*

²⁹⁶ *Sistema de Informações sobre Nascidos Vivos.*



Protecting
children from
consumerist
pressures



An analysis of the setting

Consumerism is one of the most notable traits of modern-day society. Even following enactment of the Early Childhood Legal Framework, article 5 which of which provides that protecting children against all forms of consumer pressure and adopting measures to prevent early exposure to marketing communications²⁹⁷ be included as an absolute priority in early childhood policies, consumerism remains very much a reality for Brazilian children.

Influenced by mass media, people today are stimulated to consume beyond their needs. For their part, children, who are more vulnerable to consumerist appeals given their peculiar stage of development, are exposed from an early age to the impact of marketing communications which have become more prevalent due to the inclusion of advertisements in spaces occupied by children and on digital media. As a consequence, innovative solutions are needed to combat the phenomenon and prioritize it on the public agenda. Child obesity, early adultification and eroticization, family stress, peer competition, imposition of materialist values, early consumption of tobacco and alcohol, normalization of aggression, increase in non-communicable chronic diseases in childhood, reduced opportunities for free and creative play, environmental unsustainability and violence are just some of the negative social impacts associated with advertising for children.

The interest of business enterprises in children as a target audience of their advertising strategies is related to the strong influence children exercise over adults when making decisions on the purchase of home products and services. In fact, children are addressed by the market from three perspectives: as today's consumers,

as tomorrow's consumers – fidelity and attachment from *the cradle to the grave*²⁹⁸ – and as sales representatives within family and peer circles. It is therefore not a coincidence that we see adult goods and services advertised to child audiences, from cleaning, automobile and waterproofing products to hotel and cell phone services.

Yet, given their peculiar stage of development, children are more vulnerable and susceptible to manipulation from marketing communications. Numerous studies and research designs have determined that between 6 and 8 years of age children are not able to distinguish advertising content from regular programming and through age 12, do not understand the persuasive character of commercial messaging and require adult mediation.

Moreover, in comparison to the youngest population segments in other parts of the world, Brazilian children are among the heaviest consumers of television. According to figures of Ibope's National Television Panel, published in 2015, the average time Brazilian children spent in front of the television rose from 4 hours and 43 minutes, in 2004, to 5 hours and 35 minutes, in 2014.

The *Child Advertising in Times of Convergence* survey,²⁹⁹ the outgrowth of a cooperation agreement between the Federal University of Ceará, through its Research Group on Child, Youth, and Media Relations (*GRIM*),³⁰⁰ and the Ministry of Justice, is the most recent and comprehensive nationwide study yet conducted in Brazil on the massive advertising directed at children in a range of venues and media environments, involving ever-more complex internet advertising strategies and purposeful blurring of the lines between the publicity and the programming content directed at children.

The study, involving 81 children, was conducted, in December 2014, in the cities of São Pau-

²⁹⁷ The expression *marketing communications* means any and all commercial communications activity aimed at advertising products and services, irrespective of the platform or medium employed. In addition to print advertisements, television commercials, radio spots, and internet banners, examples include: packaging, promotions, merchandising, arrangement of products at points of sale, etc.

²⁹⁸ LINN, Susan. *Crianças do consumo: a infância roubada*. Tradução: Cristina Tognelli. São Paulo: Instituto Alana, 2006.

²⁹⁹ *Publicidade Infantil em Tempos de Convergência*. Available at: <https://www.defesadoconsumidor.gov.br/images/manuais/publicidade_infantil.pdf>. Accessed: 23 May 2019.

³⁰⁰ *Grupo de Pesquisa da Relação Infância, Juventude e Mídia*.



lo, Fortaleza, Brasília, Rio Branco and Porto Alegre, with a view to identifying their understanding of advertising, their perceptions of the strategies employed and the impacts on their well-being.

The data obtained revealed the high degree of advertising to which children are exposed on a daily basis on different media platforms and in different venues. This exposure, according to the study, elicited a negative response from children with regard to the excessive advertising aimed at them, principally when it interrupted their leisure time. However, children often were not able to identify particular messaging as advertising content because of the creative techniques used by advertisers to blur the editorial lines between a given program and commercial content. The study also identified physical apathy, feelings of frustration deriving from the desire to purchase and/or the unavailability of a given product, family conflicts associated with consumer desires, financial hardship and situations of prejudice connected to aesthetic standards, as well as other adverse effects stemming from the influence of child advertising.

The new marketing communications methods crafted for children pose a challenge to Brazil's regulatory frameworks and the recommendations of national and international organizations. While child advertising is commonplace, in fact, it is illegal under Brazilian law. The problem is that many business organizations, sadly, are not committed to the mental health of children, the impact of advertising practices on society as a whole or the applicable legislation.

Child advertising is illegal, pursuant to the systematic interpretation of the 1988 Brazilian Federal Constitution (article 227), the Statute on the Child and Adolescent (articles 3, 4, 5, 6, 7, 15, 17, 18, 53, 70 and 71), the United Nations Convention on the Rights of the Child, the Consumer Protection Code³⁰¹ (articles 36, 37, heading and paragraph 2, and 39, subsection IV), Resolution 163/2014, of the National Council for the Rights of the Child and Adolescent and the Early Childhood Legal Framework (article 5).

The challenge of child advertising, however, is not limited to the family sphere; public policies are urgently required to address the problem. To this end, government bodies (dedicated to children's and consumer rights) and the Brazilian justice system have undertaken actions to reinforce the prohibition on child commercial practices as new cases surface.³⁰²

In addition to delivering legal protection and ensuring the rights of children in relation to the marketing communications aimed at them, young populations must also be educated on becoming conscientious and responsible consumers. This is a task for the educational field. However, it requires a prior step: raising awareness among educators and society as whole to the issue of child consumerism. After all, article 227 of the 1988 Brazilian Federal Constitution provides that responsibility for guaranteeing the rights of the child as an absolute priority be shared by the State, families, and society.

This poses a daunting challenge, even more so in a context in which children are continuously targeted in physical and virtual environments alike by an array of commercial stimuli that speaks directly to them. The clearest evidence of this is reflected in the marked increase in internet advertising, especially on social media and video platforms, and by the pervasive presence of advertising in public squares, parks, and public and private schools.

Ultimately, the pursuit of a sustainable society, from a social and environmental standpoint, is urgent, yet incompatible with the financial and environmental costs produced by a consumer culture nurtured from early childhood. Education, as a political act capable of contributing to more critical understanding of the world, has the potential to motivate children and give expression to the desire for a better world for all. In this light, raising awareness among society as whole to the issue of consumerism is of fundamental importance to ensure current law effectively protects children from advertising aimed at them, to forge citizens who engage in consci-

³⁰¹ Código de Defesa do Consumidor.

³⁰² Historic decision: Brazilian Superior Court of Justice bans advertising aimed at children. Available at: <<https://www.migalhas.com.br/quentes/235576/julgamento-historico-stj-proibe-publicidade-digital-as-criancas>>. Accessed: 14 February 2020.

entious consumption, reflect on the actual need, or not, to consume and to demand that business organizations change their practices as well as their means of production and distribution.

Goals and targets

1. Include the subject of responsible and conscientious consumption as a cross-cutting component of curricular content and pedagogical proposals in schools through implementation of legislation or normative instruments by the National Education Council.
2. Raise awareness among educators and early childhood education establishments on the issue of child consumerism and sustainability of the planet in connection with child advertising.
3. Promote reflection with educators on the values and habits of the consumer society and their individual consumption habits.
4. Create opportunities in early childhood education establishments for educators to engage in critical reflection of media with families, bringing to light their influence on children, as a means to foster critical attitudes toward consumer product advertising.
5. Educate children in the latter stages of early childhood education to apply a critical eye to the media.
6. Prohibit or limit the sale of unhealthy food products and beverages high in sugar content in school cafeterias.
7. Guarantee enforcement of the prohibition on child advertising prescribed in current legislation.
8. Include protection against child consumerism as a component of existing parenting promotion programs across sectors.



Preventing early exposure of children to media and digital screens



The protection of children is a challenging task when the risks associated with imprudent use of technologies is considered

As the world is today increasingly organized around the demands of the market, men, and women are subject to longer and longer workdays. The wheels of labor force many parents and caregivers, including the most devoted, to spend less time with their children, thereby *outsourcing* the responsibility for entertaining and educating them to digital screens.

The recent and progressive legislation on the rights of the child in the first 6 years of life, as consolidated in the Early Childhood Legal Framework, provides that a priority area of early childhood policies, include among others: «*protection from all forms of violence and adoption of measures to prevent early exposure to marketing communications*» (Article 5). Early exposure is a form of violence because it invades the sensibilities and minds of children at an age in which they thirst to see, hear, experiment and experience everything around them without yet having the critical capacity to discern what is appropriate and what is harmful to them.

Daycare centers, which should be an option to provide care and educate young children during the time parents are outside the home remains a chimera for a large number of families. Add to this *fear of the streets* (because of urban violence) and the absence or inadequacy of social life and leisure options, such as playgrounds, playrooms, public squares, streets, and sidewalks – where children could spend part of their day engaging in play, movement, interaction, discovery.

The problems associated with this *outsourcing* are exacerbated by the fact that while adults may be very familiar with television, the same is not true of the internet: a large proportion of parents do not have a strong command of social media, apps, or electronic games, for example. By contrast, children, including the youngest among them, exhibit, even before learning to read, little difficulty in navigating digital environments – unaware, however, of their risks.

For their part, while many parents do not know how to negotiate their children's access to technology or complain about a lack of authority to reduce or control their use, there are those who boast of the skill with which their infants and young children handle a smartphone. Yet, in both cases the fact is that the vast majority of families are unaware of what their children access on the internet,³⁰³ suggesting that our children are surfing the Worldwide Web without any safeguards.

In 2013, average internet consumption among girls and boys 2 to 11 years of age in Brazil was 17 hours per week,³⁰⁴ according to Ibope Nielsen Online. Among the 100 highest-audience channels on YouTube Brasil in 2016, a full 48 focused on content aimed at children or consumed by children, as per a study by ESPM Media Lab. In addition, the analysis reveals that the entertainment channels for children 0 to 12 years of age hosted on Google's video platform drew approximately 52.5 billion single views.³⁰⁵ Another survey conducted by Viacom media, in 2017, and focused directly on young children yielded alarming findings: weekly internet time among Brazilian children between the ages of 2 and 5 years was 50% higher than the global average.³⁰⁶

Of particular note are the growing calls among digital technology experts and professionals in the field that families need to establish parameters to mediate the access of their children to new tools. In the documentary *The Social Dilemma*,³⁰⁷ developers who work in creating

³⁰³ 80% of parents have no idea of the content their children access on the internet. Available at <<https://paisefilhos.uol.com.br/crianca/80-dos-pais-nao-tem-ideia-do-conteudo-que-os-filhos-acessam-na-internet/>>. Accessed: 2 September 2020.

³⁰⁴ *Crianças brasileiras são as que mais ficam na internet*. Available at <<https://exame.com/tecnologia/criancas-brasileiras-sao-as-que-mais-ficam-na-internet/>>. Accessed: 2 September 2020.

³⁰⁵ *Geração YouTube: Um mapeamento sobre o consumo e a produção de vídeos por crianças*. Available at: <https://criancaconsumo.org.br/wp-content/uploads/2018/09/Media-Lab_Luciana_Corea_2016.pdf>. Accessed: 2 September 2020.

³⁰⁶ *Crianças do Brasil passam 50% mais tempo na internet do que a média global*. Available at: <<https://www.ecommercebrasil.com.br/noticias/criancas-do-brasil-passam-50-de-tempo-mais-na-internet-do-que-media-global/>>. Accessed: 2 September 2020.

³⁰⁷ ORLOWSKI, Jeff. *The Social Dilemma*. Netflix, 2020. Available at: <<https://www.netflix.com/br/title/81254224>>. Accessed: 8 September 2020.



programming for the leading communications platforms used in the Western world – Google, Instagram, Twitter, Facebook, etc. – recommend that parents apply strict controls on the use of social media and search engines by children and adolescents. Similarly, they point to the devastating impact digital platforms can have on democracy and the future of human civilization, emphasizing the need for nation-states to adopt robust laws and regulations for the sector.

The Brazilian Society of Pediatrics³⁰⁸ and the World Health Organization (WHO) point to the relationship between excessive screen time, in conjunction with inappropriate content, and adverse health effects and the child's development. This occurs when digital devices replace time spent on essential activities, such as sleep, movement, play, exposure to the outdoors, nourishment, and interpersonal interaction. According to the Guidelines of the World Health Organization on *physical activity, sedentary behavior, and sleep*,³⁰⁹ infants and children through 2 years of age should not be exposed to sedentary activities in front of a screen (watching TV or videos or playing computer games). For 2-year-olds, sedentary time in front of screens should not exceed one hour. The less, the better. If the choice is made to allow a 2-year-old child to have contact with digital content, it is recommended that parents carefully select what the child watches and prioritize shared use (that is, that they watch the selected content with the child).

Pediatricians, psychologists, and educators are nearly unanimous in raising warning flags as to the physical consequences of excessive handling of digital devices, including increases in the rates of myopia, diabetes, obesity, arterial hypertension, and spinal injuries due to bad posture. Problems related to eye health due to prolonged and daily use – that is, early and ex-

cessive – by children have increased in recent decades in line with technological advances.³¹⁰ The scientific literature also confirms the risk of delays in speech development in children under the age of 2 years due to excessive exposure to screens. Research further suggests that excessive exposure is a differential diagnosis for suspected autism spectrum disorder (ASD) in that age group.³¹¹ With respect to mental health, anxiety crises, aggressiveness, increased ADHD diagnoses and abstinence syndrome associated with technology are just some of the manifestations of children engaged in prolonged use of television and other electronic devices.

In the realm of social relations, problems range from isolation, lack of coexistence with other children and absence of interaction with parents and the family. Excessive technology use leaves children disconnected from the real world. The viewer is physically inactive and has virtually no time to think and make associations. Studies on the neurophysiological effects of television watching reveal low brain activity in electroencephalograms. The lack of eye movement in television watching produces a state of semi-hypnosis.

When children have access to electronic devices, they often watch inappropriate content for their age, arousing desires, attitudes, behaviors suitable only for older ages. This contributes to the phenomenon of *adultification*, in addition to early eroticization, stress and consumerism. Despite the existence of early childhood content, in many cases the respective channels and applications do not give emphasis to the stages and characteristics of early childhood development and are not free of commercial appeals. Rather, they invite children to join the consumer market at ever earlier ages, whether through the dissemination of advertising messages or merchandising.

³⁰⁸ Sociedade Brasileira de Pediatria. *A saúde de crianças e Adolescentes na era digital*. Available at: <https://www.sbp.com.br/fileadmin/user_upload/2016/11/19166d-MOrient-Saude-Crian-e-Adolesc.pdf>. Accessed: 31 January 2020.

³⁰⁹ WHO: *Guidelines on Physical Activity, Sedentary Behaviour and Sleep for Children Under 5 Years of Age*. Available at: <<https://apps.who.int/iris/handle/10665/311664>>. Accessed: 31 January 2020. PAHO: <<http://iris.paho.org/xmlui/handle/123456789/51805>> (in Spanish).

³¹⁰ EISENSTEIN, Evelyn; ESTEFENON, Susana (orgs.). *Geração Digital: Riscos e benefícios das novas tecnologias para as crianças e adolescentes*. Ed. Vieira & Lent, 2009. Chapter on ophthalmological risks written by Dr. Airton Leite Kronbauer.

³¹¹ ANDERSON, Daniel R.; SUBRAHMANYAM, Kaveri. *Digital screen media and cognitive development*. In: *Pediatrics*, 2017, 140; S57. Available at: <<https://doi.org/10.1542/peds.2016-1758C>>. Accessed: 18 September 2020.

Contrary to the assurances made to adults, it is possible to identify a number of consequences from early screen exposure among children 0 to 3 years of age:

1. *Body illiteracy: risk to the child of becoming body illiterate.* Children need to engage in motricity and movement to learn and develop. These consist of displacement, movement, sensory coordination, manipulation and even the relationship with gravitational space that are critical to the child. Watching an image is very different from interacting with people and objects.
2. *Body desensitization.* For the body to feel and the psyche to represent the world taken in through the senses, all sensory channels (vision, hearing, smell, taste, vestibular system, proprioception, feel) must be used, organized, and interpreted. If vision and – to an extent – hearing impose themselves quantitatively on the other senses, discrepant and even deficient processing may occur, hindering integration of other senses or, further, impeding development of the ability to integrate the senses.
3. *Flat space.* Failure of the body to experiment (from the time of rolling over at 4 months of age) and lack of three-dimensional experiences will affect development of the body image, with implications for the construction of time, space, and depth representations. Consequences can range from difficulties with spatial orientation to challenges in math learning.
4. *Lack of human interaction.* Adults are called on by young children in progressively different ways to promote experimentation with various senses. The process consists of a dialogue that is invariably unique and innovative. Whatever one actor does will influence the response of the other: it is much like a dance. The repetition of images on a screen, which do not depend on the actions of the infant or young child, compromises the complex and rich child-adult dialogue, in addition to the process of identifying central figures. Nothing the child does will change the reactions of the

characters on a screen.

5. *Substituting limits.* The use of screens by adults for purposes of not having to *set limits*, say *no*, has had a negative effect on the construction of body boundaries and, moreover, on the relationship with authority figures. The child that is *still* because she or he is immersed in an image is not an educated child. Rather, that child is simply one who does not bother adults. The boundary, therefore, is set artificially by an entity external to the child's principal caregivers.
6. *The glazed child.* It is also incorrect to invoke brain potential to justify the use of computers or electronic devices in the development of the young child. In the first two years of life, a single and very powerful stimulus can compromise what is called the habituation phenomenon, that is, the infant's ability to separate himself or herself from a disproportionate stimulus. The light emanating from a screen, its exaggerated colors and the movement of objects and characters make it all the more difficult for the child to disconnect from excessive stimuli. This process produces the *glazed, absorbed* child, one very different from the *alert* child.
7. Ultimate consequence: the child's sense that the *digital other* does not love me, but *I love it*.

Early exposure to screens has reinforced the dissemination of channels, applications and platforms exclusively dedicated to children that sell themselves as a better alternative by providing content that is specially tailored to this age segment.

Television channels and programs for children 0 to 3 years of age have spread throughout many countries. Their defenders argue that since children will watch TV anyway it is best that they consume programming specifically developed for their age range. According to studies, watching TV is not healthy for infants, even when the programming offers content aimed exclusively at them. Some



programs claim to offer a good educational option for infants because the respective shows are produced to encourage learning (through repetition, presentation of colors, shapes, etc.). Yet, there is the counterargument in various studies that infants learn more from real experiences than from what they see on television.³¹² The ability of 12-, 15- or 18-month-old children to imitate sequences on television at different stages, such as shaking a rattle, is slower than learning the same sequences from real-life observation. Interaction with another person is a more effective means of learning than passively consuming scenes, images and objects and hearing commands on a television screen.

Young children are sensory learners: they need to interact with the real world. They need to touch, feel, see, hear, explore objects and have contact with people and animals. And because learning in the first years of life is global, coordinated, and contextualized, the handling of objects (pulling, pushing, squeezing, smelling, and feeling the texture of objects, etc.) promotes, at the same time, affective, cognitive, and motor development. Screens and the virtual world are not capable of offering these experiences. Interaction with other people is a more effective means of learning compared to passively watching scenes, images and objects and hearing commands on a screen.

Appropriate content for children is content that does not pose a risk to children, such as child advertising, violence, sensual and frightening images, risky or unhealthy behaviors. For children through the age of 6 years, the suggestions below can assist in selecting good content:

- Prioritize films and series over apps and games;³¹³
- Prioritize award-winning quality productions with slow-paced and calm content recommended for all ages;
- Select animated films with stories that entertain the family in a shared experience, in order to foster dialogue between generations and provide a moment of relaxing enjoyment between family members;
- Strive for engaging and inclusive digital content geared toward specific learning objectives that are appropriately challenging to the child's age and offer lessons grounded in experiences;
- Consume content created by educators, artists and organizations dedicated to early childhood;
- Disable the auto-play function for on-demand video platforms.

The role of the State and other sectors of society

The need for parents and caregivers to undertake a commitment to moderating the relationship of children with the various media platforms seems evident. However, this does not mean that the promotion and protection of the rights of girls and boys in the communications field can move forward without the active

³¹² LINN, Susan. *Crianças do Consumo: a infância roubada (Consuming Kids: The hostile takeover of childhood)*. Translation: Cristina Tognelli. São Paulo: Instituto Alana, 2006. A recent study of the Georgetown Early Learning Project suggests that infants from the age of one year and three months can imitate basic acts they see on television and are more likely to imitate with increased exposure to TV. One-year-olds demonstrated some ability to imitate very simple acts seen on television. However, the study confirms that they seemed to learn faster with real experiences. In fact, even two-year-old children, in contrast to their three-year-old peers, still exhibited difficulty in applying information learned through television to real life (page 77).

³¹³ Electronic games, on their various supporting platforms, have risen to become a multibillion-dollar industry that seek to capture the attention of ever-younger children, promoting their dependence on technology and, frequently, contributing to violent behaviors. Parents and educators are encouraged to access guidance on this topic, such as the following: 1) SOCIEDADE BRASILEIRA DE PEDIATRIA. *Dependência Virtual: Um problema crescente*. #MENOS VÍDEOS #MAIS SAÚDE, 2020. Available at: <https://www.sbp.com.br/fileadmin/user_upload/22496c-MO_-_DepVirtual_MenosVideos_MaisSaude.pdf>. Accessed: 18 September 2020. 2) FORTIM, Ivelise (org.). *O que as famílias precisam saber sobre games? Um guia para cuidadores de crianças e adolescentes*. Editora Homo Ludens, 2020. Available at: <<https://cartilhagames.com.br/>>. Accessed: 18 September 2020.

participation of multiple sectors of society, as academic centers, civil society organizations, media conglomerates, digital platforms, advertising agencies, marketing firms, multilateral organizations and the Brazilian State have an indisputable role in this sphere.

In an ideal world, Brazil would develop a rights guarantee system to interface with *young children and the media*, based on a system of co-regulation and shared duties and obligations. This context would include issues such as continuing enhancement of existing legal frameworks, implementation of public policies, formulation of corporate social responsibility initiatives, objective action by the Justice System in response to rights violations and construction of sustained processes to monitor and analyze the full scope of measures.

In sum, it is not acceptable that confronting the growing challenge of living with digital devices fall solely to parents and children themselves. As noted by philosopher Renato Janine Ribeiro in a 1990 text on television, but which remains just as salient today, thereby permitting its application to the internet: *It is a narrative that warrants criticism, not only because of its paltry generosity, but above all its explanatory deficiency; it exempts of any blame a well-oiled industrial system and imposes responsibility, for its excesses, on a mass of fragmented viewers lacking in economic or cultural power.*³¹⁴

Below we lay out a brief inventory of questions – both from the perspective of protection and rights promotion – that should be addressed by a regulatory system based on the logic of co-responsibility. They are issues that require tangible action by the State – which, depending on each specific circumstance, will take on the role of formulating, implementing and/or inducing the responses society must provide to children and their families with respect to the omnipresence of new information and communications technologies.

Yet, while the risks associated to the interaction of young children with communications media

cannot be minimized, similarly it makes no sense to adopt an alarmist approach to the issue. A truly protective attitude should be geared to guiding and empowering girls and boys toward safe media use – a process that will ideally promote exercise of their freedom of expression and creative potential.

Education for media – Parents and caregivers should be instructed and trained in the important mission of mediating the media content young children access. Their lack of knowledge as to the significance of the issue and their inadequate command of new technologies are barriers to realizing this objective. Mobilization campaigns and capacity building initiatives directed at adults should therefore integrate *media and information literacy* programs and policies.³¹⁵ It should be noted that the UNESCO coined term also encompasses methodologies that, when adopted in schools, nurture a critical view by children of their relationship to communications media.

Filtering tools and content blocking – Parents and caregivers should have readily accessible resources to assist in mediating children's access to multiple screens. To this end, it is essential that content producers and distributors develop and/or adopt tools capable not only of providing guidance but promoting effective control by families of their children's digital lives. Easily accessible reporting channels to flag inappropriate content should also be provided to the public. In almost all cases, it is only due to public demands and clearly enunciated position statements by State bodies that media companies incorporate these protective tools in their platforms. It is also worth noting that the leading internet corporations, which operate globally, have frequently been compelled by the jurisdictional authorities of other nations to implement safe navigation solutions. However, it is rare for these enterprises to implement the respective instruments of

³¹⁴ RIBEIRO, Renato Janine. *O Afeto Autoritário: Televisão, Ética e Democracia*. Ed. Ateliê, 2004.

³¹⁵ UNESCO. *Media and Information Literacy Curriculum for Teachers*, 2013. Available at: <<https://unesdoc.unesco.org/ark:/48223/pf0000220418>>. Accessed: 2 September 2020.



their own volition, despite having been tested and approved internationally, in their business operations in Brazil

Content rating tools – With regard to age-based content ratings for entertainment, as of the 2000s the federal government began developing an effective ratings system for films, open television programming, cable services and electronic games. The tool, which offers guidance to families, serves as a reference point for cultural producers, indicating the presence of harmful material to the development of children and adolescents in specific age groups.³¹⁶ Adapting the Ratings System to the internet poses a number of challenges, yet significant advances could be secured based on the experience drawn from other media. Similarly, this reference tool could be leveraged to identify solutions that more directly meet the needs of young children – the *general audience* rating, despite representing an extremely relevant safeguard, applies parameters tailored to a target audience through 9 years of age.

Production of quality content – In a media ecosystem driven by commercial interests and intense globalization, it is essential that the State establish instruments to stimulate the production and dissemination of content aimed principally at contributing to the psychosocial development of children. Programs designed to incentivize quality cultural productions for early childhood must include guidelines on the diversity of a country with the continental characteristics of Brazil: it is important that children of different regions and socioeconomic classes, races/ethnicities, genders, religions, and different types of disabilities, for example, are able to recognize themselves in the multiple screens to which they have access.

Children's advertising and stimulating consumerism – This issue is discussed in detail

in the previous section. It is worth emphasizing, nonetheless, the need for the Brazilian State to enforce the applicable legal provisions that proscribe all forms of commercial advertising aimed at children, a phenomenon that substantially intensified with the diffusion of new technologies.

Artistic child labor in the media – In sectors such as film, television and advertising, Brazil has applied robust mechanisms since the 1990s to combat abuses in connection with the artistic activities of children. However, this decades-old good practice has not succeeded in leading the effort to address the problem on the internet. Consequently, so-called *child digital influencers* perform their activities without formal judicial authorizations, which are issued by the Child and Youth Courts and establish the safeguards to ensure artistic work does not impact children's health, education, and leisure. Where at first it may simply consist of a spontaneous creative expression with the support of the family, the activities of child artists on digital platforms can quickly evolve into an intense routine of commitments, tied to commercial interests, involving parents, celebrity promoters, marketing firms, advertisers and even internet companies.

Invasion of privacy – The digitalization of media and the trend toward continued expansion of internet access ultimately expose children to situations of serious vulnerability. *Although any user, irrespective of age, may be the victim of internet threats, the youngest are especially susceptible to risks involving efforts to take advantage of their innocence.*³¹⁷ Different circumstances can trigger threats of this nature. For example, when surfing the Worldwide Web, a child may encounter alluring messages that in fact lead him or her to establish contact with mal-intentioned adults. The increasingly common practice of parents and relatives to post photo-

³¹⁶ MINISTÉRIO DA JUSTIÇA E SEGURANÇA PÚBLICA. *Classificação Indicativa – Guia prático*, 2018. Available at: <<https://www.justica.gov.br/seus-direitos/classificacao/guia-pratico/classind-guia-pratico-de-audiovisual-3o-ed.pdf>>. Accessed 18 September 2020.

³¹⁷ Camillo Di Jorge, ESET country manager in Brazil. Available at: <<https://www.eset.com/br/sobre/imprensa/comunicados-de-imprensa/comunicados-de-imprensa/eset-orienta-pais-sobre-uso-da-internet-por-criancas-e-adolescentes/>>. Accessed: 8 February 2020.

graphs of children on social media (known as *sharenting*) opens the door to situations of risk, as it attracts the attention of these criminals. At the same time, security flaws in what are known as *smart toys*, which are connected to the internet and possess the capacity to maintain conversations with the child, have led a number of countries to impose strict limits on their sale or to ban them altogether.³¹⁸

Continuous vigilance and commercialization of data – Beyond harassment and other situations of risk to which children may be subject due to their online activity, today their habits and preferences are subject to ongoing tracking as well. Specifically, we are referring here to what is known as the *data economy* (or *surveillance capitalism*), which profits from the sale of information to a diversity of businesses – that then use the information to offer personalized products and services directly to children or their families. The gravity of the problem and the need to hold digital platforms accountable for developing solutions has drawn the attention of the UN’s Committee on the Rights of the Child: *Such forms of exploitation can have a significant negative impact on various child rights, including their rights to development, privacy, freedom of thought and protection against economic exploitation. In order to adapt to the new reality – children as early adopters of new technologies accessing commercialised digital environments for play, communication, and information from a very young age – specific measures against these forms of economic exploitation of children in the digital world are urgently needed.*³¹⁹

Violence and discrimination on the Web – When surfing the internet without guidance or protection, young children are sub-

ject to innumerable situations of violence and discrimination. These may seek to target children directly or may be conveyed to their peers, relatives, or social groups – whatever the case, the experience adversely impacts the development process. As an example, the phenomenon may include hate speech, understood as any act of communication that seeks to discriminate, belittle, or incite hate against a particular individual or social group based on race/ethnicity, gender, sexual orientation, disability, socioeconomic status, nationality, or religion. Of note, on this front, is the consensus within the international community that hate speech should be proscribed by law, a measure that is not considered to violate the principle of freedom of speech. Confronting violent behavior on the Web – particularly relevant in the case of children – also requires addressing the practice of cyberbullying, a form of violence perpetrated on new technologies for the purposes of ridiculing, harassing, attacking, or persecuting a specific individual.

Communication and digital accessibility – Fully guaranteeing the rights of children with disabilities means working to eliminate the barriers to interacting with different media. Books, magazines, newspapers, films, and television programming, for example, should offer resources to ensure the inclusion of individuals requiring specific services to access content. In response, Brazilian legislation provides for the adoption of solutions in an array of contexts, including audio description, dubbing, subtitles, Brazilian Sign Language windows or Braille system impressions. The advent and widespread dissemination of new information and communication technologies has given rise to the concept of digital accessibility, defined as *the possibility and means for any individual, irrespective of his or her motor, visual, hearing, intellectual, cultural or social capacity to access, perception, understanding and interaction through safe and autonomous use, participation and contribution, with equality of opportunity, on Web sites and services, anywhere and in any physical or digital environment and from*

³¹⁸ German parents told to destroy Cayla dolls over hacking fears. Available at: <<https://www.bbc.com/news/world-europe-39002142>>. Accessed: 2 September 2020.

³¹⁹ UN. *The child right to protection against economic exploitation in the digital world*, 2019. Available at: <<https://www.ohchr.org/Documents/HRBodies/CRC/GCChildrensDigitalEnvironment/OtherStakeholders/EvaLievensSimonevanderHofetal.pdf>>. Accessed: 2 September 2020.



*any accessible device.*³²⁰ Despite having been incorporated in the country's legal system, the directives above are almost never applied in practice – harming the day-to-day lives of persons with disabilities, including young girls and boys.

References in legal instruments

Given the complexity of ensuring the rights of young children on traditional media and new technologies, Brazil clearly does not currently have a regulatory framework capable of responding to the related challenges. It is vital, therefore, that the Legislative Branch give urgent priority to the issue.

However, this does not mean that the agencies with primary responsibility for rights protection and promotion measures be left to fend for themselves with respect to today's legal system. Without intending to cover all the legal documents that operate as an interface between the media and the 0- to 6-year age segment, the list below highlights a selection of especially important aspects.

In approving the Early Childhood Legal Framework (Law 13257/2016), the Brazilian Congress included a provision on providing healthy alternative forms of leisure to stimulate child development – offering families more opportunities for limiting screen use by young children:

Article 17. The Union, States, Federal District and Municipalities shall organize and stimulate the creation of ludic spaces that promote well-being, play and creativity in public and private venues through which children circulate, as well as the fruition of free and safe environments in their communities.

Article 5 of the Early Childhood Legal Fra-

mework directly addresses media-related questions, with an emphasis on child advertising:

Priority areas for early childhood policies include [...] consumerist pressures, prevention of accidents and adoption of measures to prevent early exposure to marketing communications.

As we know, the marketing communications segment in Brazil is also regulated by instruments such as the Statute on the Child and Adolescent (ECA), Consumer Protection Code (CDC), and CONANDA Resolution 163.

Of particular note with respect to communications and digital accessibility is the Brazilian Law of Inclusion (Law 13146),³²¹ enacted in 2015. In regard specifically to the internet, article 63 provides that all sites operated by companies based or represented in the country or by government bodies must be accessible for use by persons with disabilities, ensuring them access to the available information, pursuant to the best practices and guidelines on accessibility adopted internationally.

As for data protection, the principal point of reference is the General Law on the Protection of Personal Data (LGPD) (Law 13709/2018),³²² which provides that no legal basis exists for considering the personal data of children and adolescents due to the legitimate interests of the entities that control such data or third parties. In this light, parental consent emerges as a decisive element of the process:

Article 14. Treatment of the personal data of children and adolescents shall be carried out in their best interest, pursuant to this article and the applicable legislation.

paragraph 1. Treatment of the personal data of children shall be performed with the specific and clear consent of at least one parent or legal guardian.

Publications are now available to facilitate un-

³²⁰ W3C Brasil. *Cartilha de Acessibilidade na Web* – Fascículo I, 2013. Available at: <<https://www.w3c.br/pub/Materiais/PublicacoesW3C/cartilha-w3cbr-acessibilidade-web-fasciculo-I.html>>. Accessed: 2 September 2020.

³²¹ *Lei Brasileira de Inclusão*.

³²² *Lei Geral de Proteção de Dados Pessoais*.

derstanding and adoption of the precepts prescribed in the LGPD with respect to children and adolescents by parents and educators as well as business organizations – such as the guide Right now! (É pra já!), recommended by the Brazilian Society of Pediatrics (SBP).³²³

In the context of the Internet Bill of Rights (Law 12965/2014), meanwhile, there are guidelines on the use of online programming filters and content blocking by parents, in addition to express recognition of the State's responsibility for implementing media education measures:

Article 29. The user shall have the freedom to choose a computer program for purposes of exercising parental controls over content understood thereby to be inappropriate for his or her young children, in accordance with the principles of this Law and Law 8069, dated 13 July 1990 – Statute on the Child and Adolescent.

Sole Paragraph. It falls to the government, in conjunction with internet connection and application providers and civil society, to provide education and information on use of the computer programs set forth in the above heading, as well as to establish good practices on the digital inclusion of children and adolescents.

It is worth pointing out that the guidance materials for families on safe navigation are being developed by leading institutions on individual rights in the digital world.³²⁴ A point of reference in this sphere since 2005, Safer-Net Brasil works to strengthen protection mechanisms for the online lives of children and adolescents – in addition to producing innumerable publications, it offers guidance and assistance to the public³²⁵ and a channel for reporting abuse and criminal acts in the digi-

tal realm.³²⁶ Additionally, the Parental Ratings policy is not only anchored in provisions of the 1988 Brazilian Federal Constitutions and the ECA but also includes operating principles prescribed in Ministry of Justice and Public Safety Ordinance 1189/2018.

Internet access: fundamental right of parents

As detailed above, interaction with the media brings numerous and serious risks for children – a situation that requires, depending on a particular child's age, procedures to prevent his or her contact with multiple screens or to impose clear limits on screen time. By contrast, the ability to navigate freely on the internet is essential for parents, insofar as in contemporary society connection to the internet is imperative for the full exercise of citizenship – access to the Worldwide Web, according to the United Nations, is a fundamental human right.³²⁷

In other words, residing in a home with no or poor internet connection does not provide protection of any kind to a child. To the contrary, in today's Brazil it means the family lives in a context of socioeconomic vulnerability, with attendant consequences for the child development process.

In fact, one of the most dramatic consequences of *digital exclusion*, as it is known, is precisely that it exacerbates preexisting disparities. In addition to the impact on the individual's, family's or social group's trajectory, the phenomenon manifests in severe harm to the country's development as a whole. Therefore, democratizing access to new technologies should be regarded

³²³ BORELLI, Alessandra. *É pra Já! A proteção de dados de crianças e adolescentes não pode esperar*. Author's edition, 2020. Available at: <https://www.sbp.com.br/fileadmin/user_upload/e-pra-ja.pdf>. Accessed: 18 September 2020.

³²⁴ CERT.BR; NIC.BR; CGL.BR. *Internet Segura para seus Filhos: Sua participação é muito importante!*, 2017. Available at: <<https://internetsegura.br/pdf/guia-internet-segura-pais.pdf>>. Access: 18 September 2020.

³²⁵ SAFERNET BRASIL. Helpline. Available at: <<https://www.canaldeajuda.org.br/helpline#>>. Access: 18 September 2020.

³²⁶ SAFERNET BRASIL. Hotline. Available at: <<https://new.safer-net.org.br/denuncie#>>. Access: 18 September 2020.

³²⁷ UN. *Report of the Special Rapporteur on the promotion and protection of the right to freedom of opinion and expression*. Frank La Rue – A/HRC/17/27, 2011. Available at: <https://www2.ohchr.org/english/bodies/hrcouncil/docs/17session/A.HRC.17.27_en.pdf>. Accessed: 14 February 2020.



as the key vector for breaking the cycle of intergenerational poverty and inequality, aspects that profoundly affect Brazilian society.

In an ever-more connected world, therefore, guaranteeing the fundamental rights of young Brazilian children is contingent, increasingly, on ensuring their families and legal guardians have full access to the internet and are able to make productive use of the array of resources provided by the Web.

Data of the Regional Center for Studies on the Development of the Information Society (Cetic.br)³²⁸ reveal that, in 2019, 74% of the Brazilian population accessed the World Wide Web – a significant increase in relation to the 39% registered in 2009. In absolute terms, a total of 134 million people over 10 years of age were connected.³²⁹

However, despite the rapid increase in the number of Web users, the inequality in the level of access and type of use remains colossal. These asymmetries are particularly evident when comparative data between urban and rural populations and different socioeconomic classes are considered.

Only 57% of citizens in socioeconomic classes D and E, for example, use the Web; By contrast, the percentage among citizens in socioeconomic classes A and B is 95%. Similarly, access to broadband is available to 92% of households in socioeconomic class A and to 82% of those in socioeconomic class B. However, these percentages fall to only 48% of rural households, and 40% of households inhabited by members of the most socioeconomically vulnerable classes.³³⁰

Disparities with respect to digital type of use and skills are equally current and salient. Socioeconomically disadvantaged populations are also those that navigate the internet in a more limited and less diversified manner when they

do gain access. Poor access connection (usually accomplished by cellular telephones) provides far fewer tangible benefits for the lives of users, when compared to navigation via broadband connections. The direct consequence is non-universalized access to the Worldwide Web – a factor resulting from an omission of the Brazilian State, which has promoted a *market-based digital inclusion* model in the country.³³¹

For marginalized populations, therefore, access to the internet does not translate into effective appropriation of the opportunities offered by information and communication technologies. Just as with complete exclusion, insufficient access to use underscores the yawning disparities that characterize Brazilian society.

Although deemed of fundamental importance to improve conditions of life, fully guarantee rights and ensure economic growth for countries, digital inclusion has not been properly promoted in Brazil, which has failed to implement an integrated and unified policy to this end.³³² Universalizing internet access is, in fact, a duty of the Brazilian State and cannot be simply relegated to the whims of financial interests.³³³ Hence the urgent need for public policies to promote expanded broadband access in Brazil.³³⁴

If there remained any doubts as to the importance of democratizing access to the Worldwide Web, the novel coronavirus pandemic has put these to rest. The imposition of social isolation measures led various public bodies to suspend or restrict in-person services, redirecting the response to citizen needs to their digital platforms. While certainly logical in view of the health crisis, these measures created new barriers to

³²⁸ Centro Regional de Estudos para o Desenvolvimento da Sociedade da Informação.

³²⁹ *Três em cada quatro brasileiros já utilizam a internet, aponta pesquisa TIC Domicílios 2019*. Available at: <<https://cetic.br/pt/noticia/tres-em-cada-quatro-brasileiros-ja-utilizam-a-internet-apon-ta-pesquisa-tic-domicilios-2019/>>. Accessed: 18 September 2020.

³³⁰ CETIC.BR. TIC Domicílios 2019. Available at: <<https://cetic.br/pt/tics/domicilios/2019/domicilios/A5/>>. Accessed: 18 September 2020.

³³¹ *A inclusão digital no Brasil serve ao consumo e não à cidadania*. Available at: <<https://www.cartacapital.com.br/blogs/intervozes/a-inclusao-digital-no-brasil-serve-ao-consumo-e-nao-a-cidadania/>>. Accessed: 14 February 2020.

³³² *TCU realiza levantamento sobre políticas públicas de inclusão digital*. Available at: <<https://portal.tcu.gov.br/imprensa/noticias/tcu-realiza-levantamento-sobre-politicas-publicas-de-inclusao-digital.htm>>. Accessed: 14 February 2020.

³³³ *5 anos depois: um balanço das políticas públicas de internet no Brasil*. Available at: <<https://www.internetlab.org.br/pt/especial/5-anos-depois-um-balanco-das-politicas-publicas-de-internet-no-brasil/>>. Accessed: 14 February 2020.

³³⁴ INTERVOZES. *Marco Civil da Internet – Violações ao direito de acesso universal previsto em lei, 2018*. Available at: <<http://intervozes.org.br/arquivos/interliv012mci2018.pdf>>. Accessed: 14 February 2020.

the neediest segments of society, further complicating their access to State services, including, by way of example, emergency assistance, social security and medical treatment and examination services.

Consequently, throughout this period young girls and boys at the early childhood stage have once again been most impacted by the digital exclusion to which their families have always been subject.

Goals and targets

1. Promote educational campaigns on the early exposure of children to media among all sectors of society and develop initiatives to build the capacity of parents and caregivers in mediating children's contact with different screens, ensuring professional medical, psychology, teacher and social assistance associations are engaged.
2. Develop capacity building policies for educators on the risks associated to the relationship between young children with the media and the advantages of ludic activities as an alternative to screens, including those performed outdoors.
3. Prohibit early, continuous, and excessive use of television and other screens in daycare centers and regulate their use in preschools based on a pedagogical perspective.
4. Coordinate child screen time control actions with the efforts to create public leisure spaces in urban centers that offer safety and invite children to experience contact with nature. It is of fundamental importance that this topic be approached in an intersectoral and inter-institutional manner.
5. Promote systematic knowledge production in academia on the early childhood and media interface, with a view to providing guidance to the different sectors of society on the issue and contributing to decision-making by lawmakers and public officials.
6. Foster the formulation and implementation of child rights protection and promotion measures, including for early childhood, based on good practices of self-regulation and corporate social responsibility identified by the international community. Similarly, develop instruments to monitor and evaluate private-sector mechanisms.
7. Create and/or strengthen funding lines to support the production of quality Brazilian content for children, prioritizing the pluralism and diversity of the representations of childhood on media channels and platforms.
8. Ensure children with disabilities are assured equitable opportunities to interact with diverse media content and platforms by effectively adopting the communications and digital resources available today.
9. Foster the adoption of a public internet connection service regime that ensures access to fixed broadband in all public schools and offers a basic model plan – with adequate prices, speeds, franchises and quality – so that the construction of networks with public funds translates into effective expansion of access for all persons.
10. Push the jurisdictional bodies of the federal government, judicial branch, and public prosecution office to enforce the applicable legislation governing the various aspects of children and communications with respect to the promotion and protection of rights.
11. Coordinate in conjunction with the Brazilian Congress improvements to the applicable legislation governing children and communications, with a focus on traditional media and new technologies alike and in accordance with a rights promotion and protection perspective.
12. Based on the democratic principles established by the relevant specialized agencies of the United Nations and the Organization of American States in freedom of expression, foster the establishment of an independent regulatory body for the Brazilian communications sector with attributions across the various facets of the *media – child* interface.





Preventing
accidents in
early childhood

1. An analysis of the setting

In recent decades, Brazil has invested significantly in treating diseases and reducing infant mortality through fundamental actions to improve the quality of life of families, specifically children. The results can be felt. However, there is one area that is just beginning to receive incipient, although still insufficient, attention – the prevention of accidents from the outset of life that can be fatal or cause irreversible damage. In short, if the prevention of accidents is not prioritized, much of the investment in children's health and well-being will be in vain. Studies in the United States demonstrate that 90% of accidents are preventable.

Unintentional injuries, commonly referred to as accidents and as traumas by the medical community, represent one of the principal villains in the lives of Brazilian children. Accidents are the number one cause of death in children 0 to 14 years of age in Brazil. The scale of the problem is captured by the following figure: in 2015, unintentional injuries (traffic accidents, drownings, burns, falls, asphyxiation and intoxication) in Brazil led to more deaths among children over the age of 1 year than all the principal diseases combined: communicable diseases, respiratory diseases and neoplasms. In 2015, 75% of the 830 deaths of children under the age of 1 year were due to asphyxiation, 13% to transportation accidents and 4% to falls.³³⁵ Between 2007 and 2017, more than 25 500 boys and girls died before the age of 6 due to accidents. The main causes were traffic accidents – pedestrian, vehicular and cycling –, in addition to drownings, suffocation, burns, falls and intoxication.³³⁶ According to the Ministry of Health, the second leading external cause of death among children under age 1, in 2017, was violence and the third, transportation accidents (land and water). Among children ages 1 to 4 years, the second leading cause was transportation accidents and the third, acts of violence.

ce.³³⁷ Domestic violence is one of the most frequent and serious causes. In 2017, according to Datasus,³³⁸ 6143 children under age 1 were victims of violence, while a further 4092 were victimized by neglect and abandonment; and 1758, by physical violence. Among children ages 1 to 4 years, the number of cases reached 12 728, of which 7581 were caused by neglect and abandonment; 2950, by physical violence; 3042, by sexual violence; and 1784, by psychological/moral violence. Neglect/abandonment as a primary cause decline with age, although sexual violence increases.

The National Policy for the Reduction of Morbidity and Mortality due to Accidents and Violence³³⁹ emphasizes that external causes – accidents and violence – are responsible for the largest number years of potential life lost (YPLL). In Brazil, YPLL rose 30% in relation to external causes in the period 1981-1991, at the same time that deaths by natural causes fell.

More than fatalities or fateful tragedies, accidents stem from multiple causes. Questions related to housing, lack of leisure space, the precariousness of Brazilian health and education systems are just some of the factors underlying high accident rates. The *World Report on Child Injury Prevention*,³⁴⁰ launched in 2008 by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF), found that deaths from accidents occur even more frequently among low-income populations,

According to the publication, 95% of the approximately 850 000 child fatalities worldwide from accidents occur in developing countries. The report further found that children in poor communities are at higher risk. They live predominantly in hazardous conditions – residing

³³⁷ Source: MS/SVS/DANTPS: Mortality Information Database (SIM).

³³⁸ Available at: <<http://tabnet.datasus.gov.br/cgi/deftohtm.exe?sinannet/cnv/violebr.def>>.

³³⁹ Política Nacional de Redução da Morbimortalidade por Acidentes e Violências (BRASIL, 2001, p. 4).

³⁴⁰ *World Report on Child Injury Prevention*, prepared by the World Health Organization and UNICEF. Available at: <http://www.who.int/violence_injury_prevention/child/injury/world_report/en/index.html>.

³³⁵ Available at: <<http://tabnet.datasus.gov.br/cgi/tabcgi.exe?sim/cnv/cbt10uf.def>>.

³³⁶ Ministry of Health, Datasus.

in homes with a higher risk of fire, unprotected windows, unsafe windowsills, and stairs, located in areas of heavy traffic flow. In general, children in these communities do not enjoy safe play spaces and resources. These elements very much reflect Brazilian reality, as well.

Another source of concern is the high number of hospitalizations in public institutions. In 2017, there were 33 244 hospitalizations of children 0 to 4 years of age throughout Brazil due to accidents.³⁴¹ Moreover, it is estimated that this figure represents only about 70% of all hospitalizations, as it only accounts for hospitalizations in public and SUS outsourced institutions and does not include hospitalizations in private services and establishments covered by health insurance. The primary causes of hospitalizations derive from common traumas occurring in the domestic environment, such as falls and burns, which represent, respectively, the first and second causes of hospitalizations in the youngest age segment. Every day, 375 children in Brazil are hospitalized with traumatic injuries.

Trauma deprives children of play, school, coexistence with family and friends at a tender age, with the potential to leave lasting scars and impose a devastating burden on children, families, and society. It can lead couples to separate or lose their jobs. Siblings of traumatized children develop cognitive and learning disorders, in addition to suffering serious emotional effects. In contrast to the worldwide trend over the past 40 years with respect to organizing assistance for the polytraumatized, and its resounding impact in reducing morbidity and mortality, the same attention has not been given to child trauma victims in Brazil or the rest of the world.

External factors are the leading cause of death among children and adolescents in Brazil between the ages of 1 and 14 years. Approximately 5000 children in this age range die every year in Brazil and 125 000 are hospitalized. This corresponds to a hospitalization rate of 261 per 100 000 inhabitants and a total of 375 hospital admittances every day in Brazil.

While the increase in violence is evident, official figures demonstrate that between 0 and 14 years of age accidents are the primary causes of death (79%), not violence. The same finding applies to hospitalizations: 89% are due to accidents and only 4%, to violence.

For all these reasons, instead of training large numbers of people (not that this is not also necessary), addressing insecurity, organizing trauma treatment centers with the capability and capacity to provide dignified care to children with trauma, building expensive facilities to meet the related demands, creating a common language among professionals and within structures with respect to the child, as has been done for adult victims of trauma, the best solution would be to invest in prevention to serve much as a common vaccine. Investing in prevention is far cheaper, easier, effective and spares society and individuals from having to endure tragic, daunting, and devastating consequences. Through its concerted efforts, the Criança Segura – Safe Kids Brasil NGO has reduced mortality among Brazilian children by 40% since 2001. That percentage corresponds to 6000 young lives saved each year.

Although the official Ministry of Health figures on mortality and hospitalizations are accurate, there is no specific information on the events and products that directly result in accidents, nor any socioeconomic analyses on the respective data or the severity of injuries sustained by pediatric patients.³⁴²

A partnership initiative between the Criança Segura – Safe Kids NGO and the Federal University of São Paulo, Proteste, and the Brazilian Society of Pediatrics developed a questionnaire to serve as a national database. For the pilot test, conducted in five hospitals in the city of São Paulo over the course of 4 months, based on 8 hours of observation per day, 916 child victims of unintentional accidents under the age of 14 years were treated at the five hospitals, of

³⁴¹ Datasus, 2017.

³⁴² ABIB, Simone de Campos Vieira, et al. *Unintentional pediatric injuries in São Paulo. How often is it severe?* Acta Cir. Bras., São Paulo, v. 32, n. 7, p. 587-598, July 2017. Available at: <http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0102-86502017000700587&lng=en&nrm=iso> e <<http://dx.doi.org/10.1590/s0102-865020170070000010>>. Accessed: 28 January 2020.

which 77 (8.5% of the sample) met the severe injury criteria.

The pilot test produced the following findings:

1. The majority of children/adolescent accident victims resided in outlying areas of São Paulo's state capital. They were mostly male, averaging 6.4 years of age. A large portion of traumas occurred in the home, although accidents in schools/daycare centers and on the street were frequent, as well. Accident victims were accompanied principally by another child and/or classmate or the mother, and 18% were alone at the time of the accident. Approximately three in ten child or adolescent victims had suffered previous accidents.
2. Most of the responsible adults were females ranging from 26 to 44 years of age, with average educational levels and household incomes of up to three minimum monthly salaries.
3. A total of 8.5% of the sample met the severe injury criteria.
4. Severity was associated with the following factors: child's age ($p < 0.001$); age of responsible party, between 18 and 25 years ($p < 0.001$); falls ($p < 0.001$); accidents from sporting activities ($p < 0.001$); foreign objects ($p = 0.043$); pedestrian accidents ($p = 0.006$); penetrating wounds/deep cuts ($p = 0.018$); poisoning ($p = 0.005$); responsible adult of the male sex ($p < 0.001$); child's schooling ($p < 0.001$); and residence in urban area ($p = 0.003$), based on univariate analysis. Multivariate analysis produced the following findings: falls ($p = 0.001$); accidents from sporting activities ($p = 0.045$); pedestrian accidents ($p = 0.006$); first to ninth year of schooling ($p = 0.015$); and responsible adult of the male sex ($p = 0.007$).
5. 59.8% of those interviewed believed the accidents they suffered could have been prevented. Basic prevention measures could have avoided the accidents reported in the sample. Additionally, compliance rates on the part of the responsible adults with respect to the use of safety devices was low. The fin-

dings reinforce the need for education campaigns on the prevention of accidents.

Limiting the analysis to the relevant socioeconomic factors would represent a reductionist approach. Familiarity with the particular aspects of child development is also a valuable tool better understand the reasons that children under the age of 6 years are at particular risk of accidents. Throughout the first years of life, the child moves through a number of stages in which he or she possesses different characteristics, references, and needs to those of adults. Over time, the young child begins to develop motor, cognitive and sensory skills. Yet, until the process is complete, the child is susceptible to a series of hazards, thus requiring special care and attention.

The WHO Report cited above underscores that the following factors exacerbate the risks to children:

- (a) they live in a world built by adults and are treated as miniature adults;
- (b) there is a close link between specific injuries and the child's age;
- (c) the way children interact with the world;
- (d) activities performed in conflict with development;
- (e) the reproduction of prevention strategies developed for adults;
- (f) in addition, the poor quality, insufficient quantity, and inadequate access to medical services.

Moreover, according to experts, it is not until age 7 that children begin to actually understand danger.

Other causes warrant mention, as well, including: (a) curiosity, a natural and essential component of discovery; (b) use of the mouth for purposes of touch in the oral stage of life; (c) limited ability to react to hazardous situations; (d) inability to distinguish reality from fantasy in certain play situations; and (e) the natural tendency to mirror adults, who perform more complex acts for which they have developed the requisite experience and ability.

Moreover, children also have finer skin, bo-

dies located in closer proximity to each other and less surface body area and adipose tissue. When subjected to external forces, they suffer greater impact by unit of body area, increasing the potential for multiple injuries. *The head of the fetus, at 2 months of intrauterine life, represents, proportionally, 50% of the body; in newborns, 25% and, in adults, 10%.*³⁴³ As such, children have a greater likelihood of falling or drowning, for example.

According to the WHO document, prevention of accidents is related to other child health issues as well. That is why working to address this challenge should be an essential part of the effort to reduce morbidity and mortality among children and improve their well-being.

In less than 30 years, the world bore witness to a *revolution in child survival*, reflect by the drop in infant mortality from 75% to 20%, a direct product of child health enhancement programs. The new challenge is to address the harm caused by traumatic injury in children and society. Substantial research is still needed, but there is a large enough body of data to inform the actions required to reduce morbidity and mortality in child trauma victims. Each child lost or scarred by trauma exacts a high cost on the Brazilian economy. In extremely poor communities, the number of unproductive individuals disabled by trauma is staggering. These individuals depend on another adult for their survival and impose a high cost for families and the government, not to mention the inestimable emotional toll of their experience for their lives.

Implementing prevention measures can reduce the costs to the health system, enhance the effectiveness of future actions and, most important, protect children.

A dilemma that needs to be addressed when considering the alarming data on accidents involving children regards reinforcement of a culture that deprives children of the freedom to

play outdoors and explore their environment. Policies and programs should focus on investing in improving architectural designs, with a view to reducing the risks and consequences of accidents.

2. Guidelines

Decisions and actions to prevent accidents in early childhood should be based on the principles and guidelines of this Plan, specifically in accordance with the approach espoused in these pages. As such, it is important to keep children prominent and tangibly in mind when considering them in the context of their real lives. The specificities of each stage in the development of children and the social and economic conditions of their families and guardians should be taken into account. The most socially vulnerable children must be prioritized for the delivery of assistance and resources.

The various measures to prevent accidents in early childhood should be aligned with the pertinent health promotion principles and actions,³⁴⁴ such as the concept of schools as health promotion agents, as well as the UN Convention on the Rights of the Child, which provides as follows:

Article 6

1. States Parties recognize that every child has the inherent right to life.
2. States Parties shall ensure to the maximum extent possible the survival and development of the child.

Article 24

...

2. States Parties shall pursue full implementation of this right and, in particular,

³⁴³ LOWREY, G. H. *Growth and Development of Children*. 7th edition, Chicago, London: Year Book Medical Publishers, 1978. Cited by the Ministry of Health in *Saúde da Criança: Acompanhamento do crescimento e desenvolvimento infantil*. Série: Cadernos de Atividades Básicas, nº 11, Brasília (DF), 2002. Available at: <https://bvsms.saude.gov.br/bvs/publicacoes/crescimento_desenvolvimento.pdf>. Accessed: 5 May 2020.

³⁴⁴ Ottawa Charter (1986), approved at the First International Conference on Health Promotion, held in Ottawa, Canada, 21 November 1986.

shall take appropriate measures:

...

e) To ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents.

The Statute on the Child and Adolescent reaffirms the importance of initiatives to this end: *the child and adolescent have the right to protection, life and health through effective public social policies that enable birth and development in a healthy and harmonious manner and in dignified living conditions* (article 7).

Article 14 of the Early Childhood Legal Framework (Law 13257/2016), which provides for government policies and programs to support families, mandates that expectant mothers and families with young children receive guidance and training on preventing accidents and educating children without the use of physical punishment, pursuant to Law 3010/2014 (Little Bernardo Statute). Educational processes and information contribute to reducing accidents inside and outside the home, violent acts that harm, injure and cause fractures in infants and young children. Home visit programs also play an important role in detecting risks to the safety of children and providing guidance to parents and caregivers on organizing physical spaces in a manner that safeguards children from the risk of accidents.

Measures to prevent pedestrian accidents, drownings and other harm to young children are not aimed at hindering their freedom. Rather, they are important conditions for ensuring children can develop to their fullest extent, discover the world, and write their own stories with safety and protection, in a playful environment appropriate to their need for exploration.

3. Goals and targets

Actions implemented to prevent accidents in early childhood should be developed within the different care settings referred to in this Plan, in alignment with their respective goals and targets.

3.1. Health care

Preventing accidents in early childhood should be incorporated as a component of public health. To this end, the following actions are required:

1. Provide guidance and awareness-raising to parents and guardians on accident prevention from the initial stages of pregnancy, employing, for, this purpose, a variety of strategies, such as television campaigns, pamphlets, safety checklists, posters and meetings at health centers, early childhood education establishments and schools.
2. Incentivize the association of accident prevention to the child's growth and development through the Child Booklet. Prevention serves as the *vaccine* against the principal causes of death among children. The National Policy on Comprehensive Child Health Care also proposes the development of child safety prevention and care actions, including the guidance contained in the Child Booklet, an important tool for ensuring the child's health, growth, and integral development.
3. Reinforce the issue of accident prevention when delivering training and awareness-raising programs to primary health care



teams and family health care teams when making home visits as of the first week of the child's life, through home safety checklists and guidance pamphlets. The issue should be included as a standard component of home visit programs.

4. Organize educational, information and communication campaigns for the general population on the importance of preventing accidents in order to safeguard the health of children, focusing on the particularities of children's physical and psychological development that render them most susceptible to unintentional injury.
5. Promote the development of and compliance with legislation to prevent poisoning caused by the accidental ingestion of medications and cleaning products, such as the implementation of safety lids and caps and prohibition of packaging containing images with the potential to attract the attention of children.
6. Ensure proper and mandatory reporting of hospitalizations due to external causes among children 0 to 6 years of age, so as to identify leading causes of morbidity and responsible agents and provide inputs for policymaking decisions.
7. Promote basic life support programs for professionals (daycare centers, schools, CRAS, etc.) and family members, in order to ensure they are prepared to render adequate care in the case of an accident, until such time as the child is transferred for treatment at a qualified health facility, pursuant to Law 13722/2018.³⁴⁵

3.2. Early childhood education

Expanding early childhood educational services is an important strategy for reducing the

probability of unintentional injury in children through the age of 6 years, by ensuring, for example, that their care is not left to other children, such as older siblings, in vulnerable environments. In this light and in line with the principle of schools as health promotion environments, it is essential to:

1. Highlight the need of construction, infrastructure, and operational standards to ensure that public and private spaces created to serve children are adequate for their specific psychomotor development stage and process and their vulnerability to unintentional injury, with a view to ensuring such spaces do not cause accidents.
2. Promote inclusion of accident prevention in early childhood as an interdisciplinary component of the national curricular guidelines and the education plans for early childhood education establishments, with a view to fostering a culture of accident prevention focused on the physical, emotional, affective, cognitive, and social aspects of children, as well as the family's role.
3. Incorporate accident prevention and first aid in the curricula of education and training programs for early childhood education establishment staff, ensuring the two components are approached from an interdisciplinary perspective in the educational process. Content should cover the specificities of the various stages of development and the economic and social factors that increase the risk of accidents in early childhood.
4. Deliver traffic education, in accordance with the Brazilian Traffic Code³⁴⁶ on a continuous and regular basis in early childhood education and initial and continuing teacher training programs. It is essential that multidisciplinary incorporation of the topic in school curricula be developed by students and educators and that it be closely tied to the child's human values, citizenship, and pedagogical development and to his or her socio-environmental reality.

³⁴⁵ Law 13722/2018, which mandates capacity building in basic first aid skills for teachers and staff at public and private educational establishments, basic education institutions, and children's recreational facilities.

³⁴⁶ Código de Trânsito Brasileiro.

3.3. Family and community

The support actions provided for in the Plan aimed at helping families to perform their essential caregiving, socialization and educational role will contribute to preventing accidents in early childhood.

To prevent drownings:

1. Artesian wells, cisterns and water tanks and other water storage infrastructure should be sealed at all times.
2. Buckets and basins with water should be kept out of reach of children.
3. Swimming pools should be enclosed with fencing of at least 1.2 meters in height.
4. Swimming pools should be equipped with anti-vortex drain covers.
5. Children should not be allowed in swimming pools, the sea, rivers, lakes, and other water bodies without adult supervision.

To prevent burns:

1. Wiring and cables should be placed in higher locations; they should never be exposed or bare.
2. Hot food and liquids should be kept out of reach for children.
3. Prior to bathing, water temperature should be tested with the hands around the entire tub. Introduce cold water first, followed by the addition of warm water to adjust the temperature.
4. Matches, lighters, containers with alcohol and other flammable products should be stored in locked cabinets, beyond the reach of children.
5. Children should be kept away from candles, barbecue grills, bonfires and stove

tops and ovens.

6. All electrical outlets should be protected.
7. A fire emergency plan should be developed.
8. Children should never be left alone in the kitchen. When adults are cooking, pot and pan handles should never be turned outward over the edge of the stove.
9. Long tablecloths should not be used. This will prevent children from pulling the tablecloth and suffering burns from hot liquids and food.
10. When flying kites, choose a safe location far from light posts and wires.
11. Firecrackers and sky lanterns should be avoided at June Festivals. They can cause burns, blindness, loss of limbs and other severe injuries.

To prevent falls:

1. Secure gates should be placed on stairs (top and bottom);
2. Protective netting should be used on windows, balconies and mezzanines;
3. Beds, dressers and other furniture should be kept away from windows;
4. Basins should be secured in a fixed position;
5. Walkers should not be used;
6. Only playground equipment in compliance with the applicable safety norms for specific age groups should be purchased.

To prevent suffocation:

1. Cribs should be certified, in accordance with the applicable National Institute of Metrology, Quality and Technology (Inmetro)



safety standards;

2. Pillows, stuffed toy animals, and other objects capable of blocking the child's airways should be removed.
3. Toys should be selected according to the child's age, as indicated by the manufacturer.
4. Broken or damaged toys with loose parts should be discarded.
5. During meals, children should always be supervised by a responsible adult.

3.4. Assistance to children in special situations: institutional shelters, host families and adoptions

1. Ensure, with respect to the quality and monitoring parameters for institutional sheltering services, that physical spaces be adapted and practices and precautions be adopted in accordance with the psychomotor development of children. This measure aims to reduce the risk of accidents in line with the child's exploratory needs, with a view to fostering integral growth.
2. Incorporate the prevention of accidents and first aid in training and continuing education programs for public officials, coordinators, technical teams, educators, and assistants engaged in sheltering institutions and host family programs.

3.5. Play

1. Establish safety standards for physical play spaces and equipment developed for children through 6 years of age, in accordance with the specificities of their physical and psychomotor development, ensuring these are appropriate to the respective play activities and account for the specific vulnerabilities to accidents, primarily falls, of each age group.

2. Support the acquisition and maintenance of safe age-consistent toys for early childhood education centers, playrooms, and related spaces.
3. Stimulate the construction and maintenance of leisure spaces according to the applicable safety standards and the creation or expansion of leisure opportunities, pursuant to article 71 of the ECA.

3.6. The environment and children's spaces

1. Promote safety norms in all public or private spaces in which children live or regularly spend time.
2. Continuously update the applicable legislation and implement practical measures to ensure compliance with the laws governing the safety of children when transported in private or public automotive vehicles, with particular emphasis on school transportation services, including, to this end, harnesses, car seats and boosters.
3. Establish accident prevention safety norms for children in the construction of single-family homes, residential complexes, early childhood education centers and other public spaces frequented by children. In addition to existing norms, new rules should be issued to reduce, to the extent possible, the risk of accidents in early childhood.
4. Provide tax incentives for the manufacture and sale of equipment aimed at preventing accidents, such as: protective netting for windows and balconies, residual devices for electrical installations (e.g.: DR circuit breakers), child vehicle safety restraints, in addition to other safety equipment.
5. Institute safety norms for swimming pools in private residences, clubs, schools, and other public and private locations. Safety measures should include fencing of at least 1.5 meters in height and gates with padlocks.

cks or safety locks to block access by unsupervised children. Require the presence of lifeguards at swimming pools based on the number of users.

6. Include the prevention of accidents in early childhood as a required subject of undergraduate programs devoted to preparing professionals to develop, organize and manage spaces frequented by children (i.e., architectural, urban planning, traffic engineering, interior design, environmental engineering, etc.).

3.7. *Traffic*

1. Offer tax incentives for the manufacture and sale of child transportation safety equipment, such as car seats and boosters.
2. Step up enforcement efforts by transit authorities of the laws mandating the use of child transportation safety devices.
3. Train transit authorities to build communication skills with children, for the purposes of providing them with proper instruction on traffic safety.



The child and culture



1. Culture as a component of social evolution

Culture is contingent on the progress a society secures in achieving a higher level of civilization by harvesting the fruits of expression that have driven humanity throughout History. It is the most powerful element of social cohesion, creation of identity and ties, enhanced quality of life, connection between ancestralism and contemporaneity and the transmission of society's evolutive elements.

Culture is essential for the development of critical abilities, discernment, deep listening, expressiveness and artistic creativity, sensitivity, health, and the capacity for individual and collective resilience, in addition to a potent resource for affective and emotional expression in the first years of life.

It has a unique and indispensable role in connecting and cohering intersectoral policies to coordinate the rights of the child from a holistic perspective, without stratifications.

Whether in post-trauma situations, whether the product of armed conflict, accidents, or extreme poverty, in everyday dramas or in natural disasters, culture – in its various manifestations – has been effective in expressing that which cannot be communicated by normal channels. Artistic expression has served as an instrument of resilience.

2. Early childhood as a vector of the cultural vanguard

Children are not only developing beings: they are the vanguard of humanity's evolution. Studies in different fields – including, most

recently, in the epigenetics field – have demonstrated the importance in early childhood of living in a physical, cultural, scientific, affective, and artistic environment that awakens and activates an enriching interaction between the child and new possibilities for contemplation, expression, creativity and invention, capable of stimulating development of the child's genetic potentialities. Situated between the deepest roots of ancient cultures and the contemporary age, early childhood serves as the principal connection between the past and what is yet to come, transmitting new cultural roots.

Preserving the anthropological treasure of culture, similarly to languages threatened with extinction, requires that it be transmitted in early childhood. While a number of animal species are born with highly developed nervous systems, allowing them, among other things, to begin walking just hours after birth, human beings are born with an immaturity that renders them far more interdependent on their cultural and relational surroundings. Cultural and environmental interaction provide the child with access to and the opportunity for complex interaction with their genetic memories in the first years of life. This interaction arouses specific memories, which, for their part, are modified by the interactive process itself.

The potentialities in connection with creativity, inventiveness and intelligence and integral development as related to the physical, affective, cognitive, language and psychosocial dimensions of human beings depend on the cultural environment in which children interact in their initial years of life.

It is in early childhood that the emancipating powers of what we call intelligence are constituted: to challenge nature and coexist with her, to invent and develop infinite forms of language, communication, and expression, to relate with others in society, to adapt to one's surroundings and have the capacity to modify them, to solve problems, imagine, forge, and pursue one's destiny. It is in early childhood – at this time of vital dependence, care, and protection – that the initial ties to society are formed. Preserving the spirit of investigation, creativity and inventiveness of early childhood is a responsibility of



adults which must be prioritized by the family (as the child's primordial caregiving environment), the community, society, and the State across all institutional spheres.

3. Reading and writing: the future starts at the beginning

From a semiotic perspective, culture is the complex space in which signs are created and codes invented to serve as interactive modes and means of communication. We can trace the origin of cuneiform writing to an ancient civilization, but what is truly surprising is how the origin of this linguistic form traces back to early childhood in that civilization.

As with current linguistics, it would not be a stretch to imagine the origin of multiple languages (and that of many others) in the interaction of newborns in an ancient civilization, breastfeeding from the mother's breast: both mother and infant interacting in an environment of feeling, of shared love: the infant turns its head to stare up at the Milky Way and gurgles sounds, while its little finger draws the first synaptic and pictographic constellations between the stars, emitting its first sounds and its intention to communicate, to which the mother corresponds and responds, while, at the same, trying to decipher its meaning. And thus, the rough outline of a new form of writing begins to take shape.

Speech and registry, literature and poetry, painting and sculpture, song and music, sign and body languages, such as gestures and dance, the language of masks and games, which combine other languages, too, including theater, the arts, would not, in the final analysis, exist without the primordial interaction of signs in the first years of life. Even before birth, we are bathed in language, spoken to, referenced. It is within this ocean of flowing symbolism that children enter and meet the world. Written culture is a specific manner of cultural expression

that we refer to as written language. Children are interested, curious and have a need to access this cultural asset. And so, it is defined as a right of the child.

Preserving spaces for shared access to broad literacy, reading through oral narrations (stories and chants), lullabies, hand clap and spatial games, in addition to access to different artistic expressions is imperative if we want a society in which individuals express themselves with a richer vocabulary, capable of revealing the connections between internal and external geometric shapes, with a broader range for connecting thoughts and understanding otherness and an intrinsic capacity to renew the arts, in sum, to incorporate aesthetics as a supportive medium for promoting humanity.

Analysis of the *child – language – means of cultural appropriation* relationship brings us into direct contact with the social nature of human development, mediation of the other and signs, the status of language and historical and cultural production of knowledge.

4. A question of intergenerational responsibility

The social challenges of our time are a consequence, in large measure, of the rupture or disconnection of culture and nature from early childhood. They are, as such, ethical questions. Caring for culture means endeavoring to cultivate humanity right from conception. Such care could give rise to a more mutually supportive, just, creative society, in tune with its surroundings and nature, more aesthetically refined, harmonious in its coexistence and respectful of otherness and differences. Preventing or hindering the access of young children and their surroundings to culture and silencing the cultural expressivity of children in the first years of life is to violate humanity at the very point of inception, to suffocate the most vulnerable and prevent the potential

of individuals and society from blooming.

From a budgetary standpoint, in turn, early childhood is an absolute priority; the resources channeled to culture are an intrinsic part of the broader concept and its practical political manifestation.

5. Culture as a right at every stage of life

The right of the child to culture is unanimously expressed in the 1988 Brazilian Federal Constitution, the Statute on the Child and Adolescent, the Early Childhood Legal Framework, the Universal Declaration of Human Rights, the UNESCO Declaration on Cultural Diversity, the Convention on the Rights of the Child, the Convention on the Protection and Promotion of the Diversity of Cultural Expressions and the International Pact on Economic, Social and Cultural Rights, to which Brazil is a party. As such, it is an unalienable universal right.

Article 227 of the 1988 Brazilian Federal Constitution provides that the right to culture, similarly to the other rights enumerated therein, is to be assured by the family, society, and the State as an absolute priority. Article 15 of Law 13257/2016 (Early Childhood Legal Framework), mandates that public policies create the *conditions and means to ensure that children, from early childhood, have access to the production of culture and that they be recognized as producers of culture*. Early childhood is the critical moment for renewing society's vital covenant. However, historically, and systematically children have been stripped and deprived of the right to access, produce, and integrate with culture. Guaranteeing the right of the child to culture serves as a way to rebuild the civilizational foundations of modern society by correcting historical deviations and ensuring that future societies are founded on firmer bases.

6. Access to culture in early childhood

The actions of this Plan in the coming three years should be guided by the determination to strengthen cultural initiatives, festivals and programming that support the dissemination of programs and new initiatives. The cultural sector can serve as a vehicle for linking intersectoral policies, most notably among sectors dedicated to health care, education, social assistance, justice, care to children in situations of vulnerability, attention to the cultural diversity of children from traditional communities, in addition to Black, *Quilombola* and Indigenous children, the prevention of violence, neglect, abandonment or segregation of children, as well as the protection of children from consumerist pressures.

This requires executing intersectoral activities with qualified cultural professionals who can shape a caregiving environment with a greater capacity for listening to children and providing them with a broader expressive channel through artistic and cultural play. In all of these fields, the cultural play activities of children strengthen the instruments employed for listening to children, enhance the methods for diagnosing children's difficulties and situations of stress and improve accuracy in interpreting that diagnosis.

These improvements expand the intersectoral scope of possible approaches in each field, particularly in respect of health, education, and quality play. Additionally, they contribute to balancing and harmonizing the connecting threads of children's various rights, improving their quality of life and surroundings. A child who develops in a cultural and artistic environment will see her or his ties to the caregiving and community surroundings reinforced, as any number of fundamental aspects are leveraged, including those relating to the development of the artistic and cultural activities prescribed in

the curricular guidelines for early childhood education, which foster prevention, protection, and resilience actions to address the multiplicity of challenges experienced in early childhood.

7. General goals:

- A) Guarantee absolute priority to early childhood when earmarking public financial resources to culture;
- B) Guarantee the child's right to culture from conception.

8. Specific goals and targets:

Access to culture

- A) Guarantee all children access to culture, right from conception through 6 years of age, as well as to their caregiving setting.
- B) Foster an appreciation for art by ensuring periodic live artistic activities – the so-called *living arts* – by professionals in schools, health centers, sheltering homes for mothers and children, women's correctional facilities and all other spaces in which children gather and socialize;
- C) Guarantee the access of young children to Brazil's material and immaterial cultural heritage, as expressed in its diverse cultures and childhoods, ensuring their exposure to the various cultures and childhoods that coexist in Brazil. Prioritize cultural activities rooted in the expressions of Afro-Brazilian, Indigenous, *Qilombola* and other traditional populations and communities;
- D) Raise awareness and stimulate the artistic community to create and produce cultural works for early childhood, executed and/or interpreted by artists representing Afro-Brazilian, Indigenous, *Qilombola* and

other traditional populations and communities. This criterion should be stipulated in public calls for proposals to foment the arts and the production and fruition of culture by these populations and communities.

Intersection of culture and early childhood

- A) Strengthen spaces and activities that foster cultural play in early childhood in different sectors, including health, education, and community coexistence;
- B) Incentivize the creation of new audiences by ensuring the production of cultural works for early childhood and access to children and their caregiving setting through public financial resource disbursements;
- C) Stimulate shared cultural activities between adults and children, such as artistic performances, workshops and gatherings that touch on the topics of intrafamily and social ties, violence, neglect, suffering and family stress.

Intersectoral coordination

- A) Establish co-participation actions between the health, education, social assistance, justice and at-risk childcare sectors;
- B) Develop projects that engage the three branches of government – Legislative, Executive and Judicial – and the three administrative spheres – union, states, Federal District, and municipalities –, with a view to valuing the cultural diversity of traditional populations and communities;
- C) Foment intersectoral work between artists and professionals in the health, early childhood education, and social assistance fields.

Infrastructure and the dissemination of the arts for early childhood

- A) Fund, create, build, and implement a network of public spaces (cultural centers, theaters, galleries, museums, libraries, au-

ditoriums, parks, playrooms, etc.) with specific resources to this end, for the purpose of developing permanent cultural activities for early childhood that are adapted to children's active hours and are in line with the technical needs of their respective age groups and caregivers;

- B) Create and maintain good hygiene, cleanliness and safety in cultural and artistic play spaces implemented in urban areas, neighborhoods, urban enclaves, and family environments, as well as sheltering institutions for children 0 to 6 years of age;
- C) Create partnerships with public cultural spaces, with a view to strengthening ongoing cultural programming for early childhood, through continuous expansion across the national territory, and establish public-private partnerships to create a network of reference centers and spaces to oversee culture in early childhood;
- D) Create effective collaborative partnerships between different government departments to develop public calls for proposals for live cultural activities – living arts – in social gathering spaces for and with young children, including daycare centers, health centers, shelters, hospitals, women's correctional facilities, sheltering homes, etc.;
- E) Organize live artistic activities in social gathering spaces for and with children under the age of 6 years, such as theater, circus, musical and art productions, storytelling, and others, recognizing, to this end, children as subjects of full cultural rights;
- F) Guarantee resources to develop and sponsor cultural festivals, cycles, events, and expressions aimed at early childhood, strengthening collaborative networks and structures at the international, national, state, and municipal levels;
- G) Provide spaces and time for cultural and artistic play in locations that host children under the age of 6 years, in particular cultural spaces;

- H) Promote and contribute to expanding the body of early childhood cultural expressions through publication and dissemination of popular songs, lullabies, hand clap games, theater productions, art, and choreographies for children.

Intersectoral scientific research in the cultural field

Guarantee public budgetary resources for studies and research aimed at fostering deeper knowledge of children as viewers, creators, and co-creators of art.

Professional training

- A) Include studies on the relationship between the arts and early childhood in training and continuing education programs for artists and early childhood education professionals;
- B) Provide resources and financial and technical support to the organization of intersectoral seminars, conferences and meetings on culture and early childhood, with a view to raising awareness among adults on the value of the arts in promoting the overall and harmonious development of human beings;
- C) Provide technical and financial support to the states and municipalities for purposes of organizing cultural capacity building programs for professionals who work in sheltering institutions and with early childhood socialization (shelters, early childhood education establishments, daycare centers, health centers, hospitals, correctional facilities, etc.);
- D) Support training workshop initiatives on the arts and early childhood offered to professionals directly engaged with children.

Interaction between culture and early childhood education

Provide guidance to and evaluate the imple-

mentation, in early childhood education, of the artistic components set forth in the National Curricular Guidelines for Early Childhood and the National Common Core Curriculum/Early Childhood Education. A memorable space is one in which communication and expression, either cross-cutting or universal, pervades all actions and interactions involving children, with emphasis given to the multiplicity of languages, in which, moreover, books, storytelling and reading are a constant feature.

Cultural promotion

Guarantee the development of public calls for proposals in order to incentivize culture, setting out specific budgetary resource amounts to this end, for the purpose of creating, programming and circulating specific cultural works and events for early childhood, with special preference set aside in the respective selection criteria for works created and/or interpreted by Afro-Brazilian, Indigenous, Quilombola and other traditional populations and communities, as well as works aimed at children with disabilities, in situations of vulnerability and subject to different types of violence.

Budget resources

Undertake, as official State policy, to guarantee that the purposive actions of budgetary instruments within the three spheres of the union include funding in an amount proportional to the total population of children under the age of 6 years and that the resources from such budgetary instruments be applied proportionally in all areas, with a view to ensuring fulfillment of the rights of the child, without discrimination or stratification in respect of any given right, through integrated policy actions.

Introduction

The Convention on the Rights of the Child, of which Brazil and another 195 countries are signatories, requires that States assure children the protection and care necessary for their well-being, considering, to this end, the rights

of children, the rights and duties of their parents, guardians, and other responsible adults, as required by law.³⁴⁷

Beyond this commitment, the 1988 Brazilian Federal Constitution, *a law on which all laws are founded [...]*,³⁴⁸ entered into an additional commitment with Brazilian society: Brazil is a *fraternal, pluralistic, and non-prejudicial society founded on social harmony* (preamble). The representative members of the National Constituent Assembly instituted a democratic State to ensure the exercise of social and individual rights, including the right to health, housing, safety and security, motherhood, childhood, and education.³⁴⁹

Article 227 sets out Brazil's commitment to ensuring the integral protection of children and adolescents:

Article 227. It is the duty of the family, the society, and the State to ensure children and adolescents, with absolute priority, the right to life, health, nourishment, education, leisure, professional training, culture, dignity, respect, freedom and family and community coexistence, as well as to guard them from all forms of negligence, discrimination, exploitation, violence, cruelty, and oppression.

On 13 July 1990, Law 8069, which provides for the Statute on the Child and Adolescent (ECA),³⁵⁰ replaced the Juvenile Code and, in this way, regulates the general guidelines prescribed in the 1988 Brazilian Federal Constitution.

³⁴⁷ The National Congress passed the Convention on the Rights of the Child through Legislative Decree 28, of 14 September 1990. The President of the Republic promulgated the Convention through Decree 99710, dated 21 November 1990. Available at: <http://www.planalto.gov.br/ccivil_03/decreto/1990-1994/D99710.htm>. Accessed: 22 April 2020.

³⁴⁸ LUHMANN, Niklas. *A Constituição como Aquisição Evolutiva*. Translated from the original: *Verfassung als evolutionäre Errungenschaft*. In: *Rechtshistorisches Journal*. Vol. IX, 1990, pp. 176 a 220. Collated with the Italian-language translation by F. Fiore (*La Costituzione come Acquisizione Evolutiva*). In: ZAGREBELSKY, Gustavo; PORTINARO, Pier Paolo; LÜTHER, Jörg. *Il Futuro della Costituzione*. Torino: Einaudi, 1996), by Menelick de Carvalho Netto, Giancarlo Corsi e Raffaele De Giorgi, p. 10.

³⁴⁹ Article 6, 1988 Brazilian Federal Constitution. Available at: <http://www.planalto.gov.br/ccivil_03/constituicao/constituicaoocompilado.htm>.

³⁵⁰ Law 8069, of 1990. Provides for the Statute on the Child and Adolescent and other measures. Available at: <http://www.planalto.gov.br/ccivil_03/leis/18069.htm>.

After 25 years amassing experience through implementation of the ECA, children and adolescents today are recognized as full citizens, subjects of rights, and as living in a peculiar development stage that extends from birth to 18 years of age. Yet historically the critical issues of adolescence had garnered greater attention. As such, the Legislative and Executive Branches and civil society felt the need to deepen and focus attention on children in the first six years of life. This stage of the lifecycle is defined by specific characteristics demanding equally specific attention, as provided for by Law 13257, approved 8 March 2016, and more commonly referred to as the Early Childhood Legal Framework. In part, the legislation complements the ECA; at the same time, it sets out and adds guidelines on intersectoral policies and prescribes fundamental actions to protect and promote young children.

A number of other laws have been enacted to address specific aspects of the lives and development of children, most notably among these:

- Law 12010/2009, governing adoption.
- Law 12962/2014, which amends the Statute on the Child and Adolescent to assure family coexistence for children and adolescents of parents deprived of their freedom.
- Law 13010/2014, which amends the Statute on the Child and Adolescent to mandate the right of children and adolescents to education and care without physical punishments or cruel or degrading treatment.

- Law 13431/2017, establishing the rights guarantee system for child and adolescent victims and witnesses of violent acts.
- Law 13509/2017, which governs adoption and amends Law 8069, of 13 July 1990 (Statute on the Child and Adolescent), the Consolidated Labor Laws (CLT), approved by Decree-Law 5452, dated 1 May 1943, and Law 10406, dated 10 January 2002 (Civil Code).
- Law 13715/2018, governing cases in which parental capacity is revoked for the perpetrators of certain criminal acts committed against another person with the same parental capacity or against a son, daughter, or other descendant.
- Law 13812/2019, which institutes the National Policy on Missing Persons³⁵¹ and establishes the National Registry of Disappeared Persons.³⁵²
- Law 13845/2019, aimed at ensuring that siblings at the same basic education stage or cycle are able to attend the same educational establishment.

The set of laws above supports children and adolescents in the exercise their full rights as citizens.

³⁵¹ *Política Nacional de Busca de Pessoas Desaparecidas.*

³⁵² *Cadastro Nacional de Pessoas Desaparecidas.*





The Justice
System and
the child

1. Justice System

The Justice System consists of a range of entities: the Judicial Branch, the Public Prosecution Office, the Public Defender's Office and Public and Private Attorneys' Offices, as well as law enforcement officers.

The 1988 Brazilian Federal Constitution and the Statute task the Public Prosecution Office with guaranteeing the rights of the child, when the pertinent rights intersect with the essential functions of the Justice System, which is entrusted with safeguarding unalienable social and individual interests, while requiring that the body pronounce itself on all matters regarding the rights of children and adolescents.

The functions of the Public Prosecution Office are described in article 200 of the ECA and include, among other attributions, participating in all procedures – whether judicial or administrative – subject to the nullification of these. On the extrajudicial front, the Public Prosecution Office is tasked with protecting the collective and diffuse interests of children and adolescents, participating in administrative procedures, inquiries, civil or law enforcement investigations, as well as ensuring the good standing of entities and programs through the oversight of rights council member and child and adolescent protection council member selection processes.

The heading of article 206 of the ECA ensures the participation of the child or adolescent, her or his parents or guardian or any other person with a legitimate interest in resolving violations of any pertinent rights, through an attorney, who upon joining the respective case (whether judicial or administrative) shall be summoned for purposes of taking part in all other related procedures.

Article 206, sole paragraph, ensures integral and free legal assistance to qualifying persons. This role is filled by the Public Defender's Office, which is tasked with safeguarding the interests of disadvantaged individuals and vulnerable groups.

The Public Defender's Office is a permanent institution with an essential jurisdictional role within the State, dedicated to guaranteeing vulnerable individuals and groups integral and free access to the legal system.³⁵³ Its activities are not restricted to individuals in financial hardship but extend to individuals facing technical, legal, or organizational obstacles, as well.

In this light, the Public Defender's Office has standing to propose judicial and extrajudicial measures to safeguard the collective and/or individual interests³⁵⁴ of children, in addition to the authority to represent children before all international protection systems.

The Doctrine of Integral Protection, first enshrined in the 1988 Brazilian Federal Constitution, spurred the Judicial Branch to pursue the resolution of conflicts brought before the Courts involving children and, more importantly, to promote or pursue actions to de-escalate conflicts in judicial procedures.³⁵⁵ In fact, it was not only the members of the Judiciary who played an active role in public policy development, mediating social conflicts and joining with other stakeholders in the Rights Guarantee System to strengthen the system as a whole, a shift that derived from reinterpretation of the concepts of power and the Democratic State of Law.

There is an evident need to enhance the structure of the Child and Youth Court – specifically, for the purpose of updating Rule 36 of the National Justice Council Inspectorate³⁵⁶ and adapting it to actual needs –, with a view to ensuring the financial health of the courts and qualifying the work of child and youth judges. In addition, the updated provision would serve to ensure multidisciplinary teams effectively contributed to the work of judges, as the expectations placed on judges today are based almost ex-

³⁵³ NESRALA, Daniele Bellettato. *Sistema de Garantia de Direitos de Crianças e Adolescentes: técnicas de governança como instrumento de acesso à Justiça pela via dos Direitos* – Belo Horizonte: Editora D'Plácido, 2019, p. 63.

³⁵⁴ As provided for in article 5, subsection II, of Law 11448, of 2007 – Law of Public Civil Actions.

³⁵⁵ CNJ; Resolution 125, of 29 November of 2010, governing the National Judiciary Policy on effectively responding to conflicts of interest within the Judicial Branch and other measures.

³⁵⁶ *Corregedoria do Conselho Nacional de Justiça*.

clusively on total quantity of rulings and decisions, a standard that can have the effect of discouraging genuine engagement in a setting like the Child and Youth Courts, in which networking, something that cannot be quantified, plays an indispensable role. National Justice Council Resolution 299/2019, which regulates the testimony of children/adolescent victims of violence, provides – in article 3 – a roadmap of how this could be extended to jurisdictional activities in the field of children and youth.

Judges with exclusive jurisdiction over children and adolescents, as well as all magistrates, should be qualified to recognize threats to or violations of the rights of children and to make the necessary referrals to ensure their integral protection. This includes criminal law judges, who, pursuant to Law 13431/2017, regulated by Decree 9603, sanctioned in 2018, are not confined simply to the role of collecting testimony from child and adolescent victims and witnesses of criminal acts but represent, in fact, integral components of the rights guarantee system for that population segment.

2. Problems laid at the Justice System's doorstep

The violations of children's rights brought before the Justice System require qualified and immediate solutions. Similarly, these offer clear evidence of the need to work toward their prevention by ensuring they do not occur in the first place. In this light, the Judicial Branch, the Public Prosecution Office, and the Public Defender's Office should coordinate with the Executive and Legislative Branches to define and implement measures to protect and promote the full range of children's rights. This understanding is reflected in article 3 of Law 13257/2016:

The absolute priority given to ensuring the right of the child, adolescent, and young

adult, pursuant to article 227 of the 1988 Brazilian Federal Constitution and article 4 of Law 8069, dated 15 July 1980, entails the duty of the State to establish policies, plans and programs and services for early childhood that meet the specificities of this age range, with a view to guaranteeing the individual's integral development.

2.1 Violence against children

Article 5, subsection XXXV, of the 1988 Brazilian Federal Constitution guarantees that harm or threats to rights will never be excluded from examination by the Judiciary. The problem is that the very country that announces this determination from the summit of its legal system and takes on the commitment to ensure the integral protection of children today has the unenviable distinction of occupying 2nd place in the global rankings of children exposed to violence,³⁵⁷ with a full 57% of the respective cases occurring inside the home.³⁵⁸ Datasus reports that violence and accidents are the principal causes of death among children, adolescents and young adults between the ages of 1 and 19 years in Brazil. Of these so-called *external causes*, acts of aggression kill the largest number of children.³⁵⁹ The principal type of violence reported against children and adolescents between the ages of 0 and 13 years at health units is rape, which often occurs in the victim's own home and accounts for 58% of all cases.^{360 361}

³⁵⁷ The figure is drawn from *Violência contra Crianças e Adolescentes – Percepções Públicas no Brasil*. Available at: <<https://www.dropbox.com/s/osw1rotgbufkm9w/IPSOS.pdf?dl=0>>.

³⁵⁸ Available at: <<https://observatorio3setor.org.br/carrossel/57-dos-casos-de-violencia-contra-criancas-ocorrem-dentro-de-casa/>>.

³⁵⁹ Data from Tabnet (Datasus) with mortality figures by cause CID-BR-10, 16 March 2020. Available at: <<http://tabnet.datasus.gov.br/cgi/deftohtm.exe?sim/cnv/obt10uf.def>>.

³⁶⁰ Ministério da Saúde. *Impacto da Violência na Saúde das Crianças e Adolescentes – Prevenção da Violência e Promoção da Cultura de Paz*. Available at: <http://bvsm.s.saude.gov.br/bvs/publicacoes/impacto_violencia_saude_criancas_Adolescentes.pdf>. Accessed: 17 March 2020.

³⁶¹ *Sobre a violência contra crianças, Adolescentes e jovens brasileiros*. Available at: <<https://www.abrasco.org.br/site/outras-noticias/notas-oficiais-abrasco/sobre-a-violencia-contra-criancas-Adolescentes-e-jovens-brasileiros/40061/>>. Accessed: 17 March 2020.

2.2 Abuse and sexual exploitation

It is unacceptable that young children in Brazil continue to be victimized by brutal violence. It is unacceptable that child grooming remains a leading form of cybercrime. The family, society and the State have failed to develop strategies to prevent children from becoming the targets of real and virtual criminals. It is time that energetic measures be adopted to reverse this trend.

The mission of protecting children and adolescents does not fall to Legal Practitioners solely. Government, society, and families must resolutely join together to combat violations against the youngest age groups, who invariably bear the marks their experiences, discoveries, and affections for the rest of their lives.³⁶² Ultimately, all segments of society must safeguard the fundamental rights of children.

2.3 Injury to the right of early childhood education

Pursuant to article 208, subsection IV, of the 1988 Brazilian Federal Constitution, the State has the duty to guarantee early childhood education, both daycare and preschool, to children through 5 years of age. However, securing daycare services has proved challenging for Brazilians. Among the most vulnerable children, only 26% successfully gain access³⁶³ and, in most cases, only after execution of a judicial order to this end, which would suggest that this legally enshrined guarantee remains far from being effectively applied to the everyday lives of children.

³⁶² Fundação Maria Cecília Souto Vidigal. Available at: <<https://www.fmcsv.org.br/pt-BR/a-primeira-infancia/>>.

³⁶³ Among the poorest 25% of the population, only 26% of children have access to daycare. Data: PNAD Contínua 2017. In: *Desafios*. Available at: <<https://www.fmcsv.org.br/pt-BR/a-primeira-infancia/>>.

2.4 Parental alienation

Article 3 of Law 12318/2010, or the Parental Alienation Law, provides that the act of parental alienation violates the fundamental right of the child or adolescent to a healthy family life, harms the realization of affection in parental and family relations, constitutes moral abuse of the child or adolescent and nonfulfillment of the inherent duties of the parental authority or those relating to guardianship or custody. Yet, actual application of the principle has increasingly become the subject of closer scrutiny by the Judicial Branch. An increase has been detected in the number of mothers who have lost custody of their children or have had them removed from their custody for extended periods of time – or even permanently – due to unjust parental alienation orders in response to complaints entered by mothers against former partners for alleged acts of sexual abuse against their children. It seems easier to incriminate women in violent acts against children by framing them as aggrieved parties bent on exacting revenge against former partners than to admit that fathers may have in fact sexually assaulted their own children.

This pattern perfectly reinforces the structural sexism and gender inequality that permeate social relations in Brazil, including institutional relations, by persistently casting greater doubt on the assertions of women in relation to men.

In general, gender inequality is ignored by legal theory, to the extent the question is rendered irrelevant by the tendency to accept the interests, needs and experiences of men as the prevailing standard. With respect to parental alienation, although a substantial portion of doctrine advocates for application of the law in Brazil, the issue's invisibility is rendered plainly evident by the failure to recognize that the social construction of women's roles as mothers is significant for conjugal and parental relations and the law's appreciation of this reality.

Given the complexity of the issue and its

many potential nuances, it is essential to ensure that the Family Courts are adequately structured to render decisions founded on the technical reports produced by their multidisciplinary teams.

2.5 Institutional sheltering

Law 13509/2017, which amends article 19, paragraph 2, of the ECA, provides as follows:

Paragraph 2. Institutional sheltering of the child and adolescent will not run for more than eighteen (18) months, except in cases of a demonstrated need to ensure the individual's superior interest, as duly shown by the judicial authority.

The previous provisions had set a maximum term of two years. However, it is not uncommon for children to come of age in sheltering institutions and only depart at 18 years of age. In an effort to minimize the attendant harm of this reality, institutions dedicated to promoting family coexistence and strengthening family ties reinforce alternatives to institutional sheltering, including, host family arrangements and affective fostering programs.³⁶⁴ Moreover, following enactment of Law 13509/2017, preference was given to the adoption of children with disabilities and sibling groups.³⁶⁵

Unfortunately, data from the National Justice Council reveal that there are approximately 47 000 children in sheltering services across Brazil. Of this total, 9500 are in the National Adoption and Sheltering System (SNA)³⁶⁶ and only 5000 are effectively eligible for adoption. Meanwhile, an analysis of the profile of the children sought by prospective

adopters found that a total of 14.55% seek to adopt White children exclusively; 58% only accept children through age 4 years; 61.92% will not adopt siblings; and 61% will only accept children not affected by disease. Yet, of the 9500 children and adolescents registered in the SNA, fully 49.79% are of mixed race, while only 16.68% are White. Among children, 55.27% have siblings and 25.68% have a health challenge. In addition, 53.53% are between the ages of 10 and 17 years.³⁶⁷

In sum, prospective adopters generally prefer very young children, females, unaffected by illness or disease and without siblings, making it extremely difficult to complete the adoption process for available children and creating expectations that simply do not conform to the reality.

2.6 Home detention

Law 13257/2016 (Early Childhood Legal Framework), amended specific Articles of the Brazilian Code of Criminal Procedure, specifically mandating that, upon learning that a criminal violation has been committed, law enforcement authorities shall collect and record information on the existence of children associated with the suspect, their respective ages and whether they possess any particular disabilities, in addition to the name and contact information of the responsible caregiver, as indicated by the person taken into custody. The respective information should also be reflected in the pertinent arrest report.

An additional amendment incorporated in the law regards the judge's discretion to replace preventive custody with home detention for pregnant women, mothers with children up to 12 years of age or men who are the sole caregiver for children up to 12 years of age.³⁶⁸

In 2018, an additional child protection law was passed: Law 13769, which provides for substi-

³⁶⁴ *Cerca de 47 mil crianças e Adolescentes aguardam adoção.* Source: Agência Senado. Available at: <<https://www12.senado.leg.br/noticias/videos/2018/04/cerca-de-47-mil-criancas-e-Adolescentes-vivem-em-abrigos-e-aguardam-adoacao>>. Accessed: 17 March 2020.

³⁶⁵ Law 13509, of 22 November 2017. Governs adoption and amends Law 8069, of 13 July 1990 (Statute on the Child and Adolescent), Consolidated Labor Laws (CLT), approved by Decree-Law 5452, of 1 May 1943, and Law 10406, of 10 January 2002 (Civil Code).

³⁶⁶ Sistema Nacional de Adoção e Acolhimento.

³⁶⁷ *Adoção no Brasil: a busca por crianças que não existem.* Source: Observatório do Terceiro Setor (06/28/2019). Available at: <<https://observatorio3setor.org.br/carrossel/adoacao-no-brasil-a-busca-por-criancas-que-nao-existem/>>.

³⁶⁸ Article 318 of the Brazilian Code of Criminal Procedure, as given by the text of Article 41 of Law 13257, of 2018.

tuting preventive custody with home detention for pregnant women, mothers, or guardians with responsibility for children or persons with disabilities.³⁶⁹

In February of the same year, the Brazilian Federal Supreme Court (STF) rendered a historic decision in collective Habeas Corpus (HC) 143641, authorizing home detention for women in preventive custody throughout Brazil who fulfilled the criteria provided for by law. Introduction of progressive sentencing focuses specifically on the needs of individuals who depend on the care of a detainee.

The plaintiffs in the collective HC – members of the Attorneys' Collective for Human Rights, Federal Public Defender's Office and State Public Defender's Offices – argued that the confinement of pregnant women held under preventive custody in precarious detention facilities, which deprived them of access to prenatal care programs, regular pregnancy and postpartum assistance and, in addition, deprived children of adequate conditions for their development, constituted inhuman, cruel and degrading treatment that violated the constitutional precepts governing individualized sentencing, prohibition on cruel sentences and, moreover, respect for the physical and moral integrity of the detainee. The order was granted³⁷⁰ yet made conditional on the nature of the specific criminal act.

3. Listening to children

Children should be heard, whenever possible, in judicial proceedings in which their fundamental rights are at issue. Although the legislation requires that children be heard and that their opinions be duly considered by

the competent judicial authority, based on the principles governing the application of specific protective measures for children, pursuant to article 100, sole paragraph, subsection XII, of the ECA, in practice children traditionally have been treated more as objects than the subjects of rights.

4. Intersectoral approach

Dialogue between the Law and research in the fields of History, Philosophy, Sociology, Anthropology and Neuroscience on the influence of socio-environmental factors for the affective and cognitive development of children can serve a valuable purpose. This body of work provides insight into the meaning of the initial experiences of children, from infancy, that is, early childhood, in relation to their values, feelings and mental representations, desires and dreams, thoughts, attitudes and behaviors vis-à-vis themselves, the people around them and the wider world. It also spurs reflection on the inter-disciplinary nature of the actions adopted by professionals who provide assistance to children. The Justice System should act in coordination with those government sectors responsible for health, early childhood education, social assistance and safety and security, environment, and culture.

Studies conducted by Harvard University, in the United States, and the University of British Columbia, Canada, on the relationship between child abandonment and neurological development³⁷¹ demonstrate that children who suffer sexual, physical, or emotional abuse present genetic alterations throughout the course of their lives.

Early childhood is a critical period for the integral development of the child. Talking about

³⁶⁹ Article 1 of Law 13769, of 2018. Available at: <http://www.planalto.gov.br/ccivil_03/_ato2015-2018/2018/lei/L13769.htm>.

³⁷⁰ HC 143,641/SP. Rapporteur: Minister Ricardo Lewandowski. Available at: <<http://www.stf.jus.br/arquivo/cms/noticiaNoticiaStf/anexo/HC143641final3pdfVoto.pdf>>.

³⁷¹ *Exposure to childhood abuse is associated with human sperm DNA methylation.* Available at: <<https://www.nature.com/Articles/s41398-018-0252-1>>.

it means talking about the laws that support childhood, but also about love, attention, dialogue, affection. For purposes of the PNPI, the principle of absolute priority enshrined in article 227 of the 1988 Brazilian Federal Constitution, as regulated by article 4 of the ECA and the Early Childhood Legal Framework (article 3), should be extended to its full conclusion. That is, that absolute priority should be given to children and adolescents when developing public budgets, allocating resources, formulating public policies, executing programs. Furthermore, for children in the aggregate, as subjects of rights, the government should devote special priority to those in situations of greatest social vulnerability.

5. Goals and targets

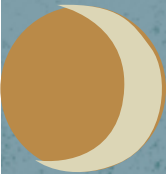
1. The Judicial Branch should establish special interview rooms across the country, pursuant to the requirements of Law 13431/2017. Special interviews should be held in an appropriate location, with infrastructure to ensure the child's privacy and accommodation, as well as adequate capacity building for the relevant technical staff.
2. The Public Prosecution Office, Public Defender's Office and Judicial Branch should expressly define protection of early childhood as an absolute priority in their action plans.
3. The different levels of the Judicial System should coordinate their actions through ongoing dialogue to ensure greater effectiveness and efficacy.
4. Qualify prosecutors, public defenders, court officers and child and youth judges to listen to children in a manner that respects their singularity, privacy, and status as subjects, as well as their capacity to express feelings and perceptions through different languages appropriate to their specific age.
5. Promote continuing education in the field of rights for stakeholders in the Rights Guarantee System – judges, prosecutors, public defenders, officers, civil and state police officials, rights council members and child and adolescent protection council members, the managing officers of government bodies and child assistance services in geographic territories – to address multiple topics relating to the rights of the child, as set forth in the Statute on the Child and Adolescent and selected on a priority basis according to urgency and severity.
6. Establish partnerships with the National Teacher Training Academy (*ENFAM*), the Judicial Branch Civil Servant Training Program (*CEAJUD*), a component of the CNJ, and local teacher training institutions to administer course programs on early childhood to legal practitioners.
7. Establish partnerships with higher education institutions, with a view to incorporating disciplines on childhood and adolescence, child development, listening to children and other topics in law program curricula.
8. Coordinate cooperative efforts with public childhood education administrators in municipalities, for the purpose of developing and implementing short- and medium-term plans to meet the demand for early childhood education, so as to fulfill Target 1 of the National Education Plan, namely, to enroll at least 50% of children 0 to 3 years of age in daycare by 2024.
9. Encourage the government to fund and support research on the use of electronic equipment by children, with a view to preventing cybercrimes against children and implementing policies to prevent such crimes.
10. Contribute to and support research and debate on application of Law 12318/2010 (Parental Alienation Law), for the purpose of identifying and confirming potential distortions and proposing, where applicable, legislative amendments.
11. Guarantee the formation of interdiscipli-

nary teams to perform exclusive activities within the Court System across Brazil in connection with Children and Youth, so as to ensure integral protection to children and adolescents, in particular young children, whose interests are subject to deliberation in legal proceedings. Equally important is the formation of interdisciplinary teams to engage in other areas as well, such as the Family Courts, in which the interests of children and youth inform the application of jurisdictional protection measures.

12. Provide the population with information on the reasons underlying the requirement in Law 13769/2018, and Decree-Law 3689, dated 3 October 1941 (Brazilian Code of Criminal Procedure), as per the text given by article 41 of Law 13257/2016, regarding the substitution of preventive custody with home detention for expectant mothers, women with children up to 12 years of age and men with children under 12 years of age or in relation to individuals who provide special care to children under 6 years of age or with disabilities.
13. Urge police officials and civil police agents to always inquire whether a suspect has young children, their ages and the iden-

tity of the responsible caregivers, if such children have disabilities and the contact information of any responsible caregivers, as set forth in article 6, subsection X; 185, paragraph 10; 304, paragraph 4; and 318, subsections IV, V and VI, of Decree-Law 3689, sanctioned in 1941 (Brazilian Code of Criminal Procedure).

14. Stimulate the implementation of family sheltering services for children and adolescents removed from family coexistence, pursuant to article 34 of the Statute on the Child and Adolescent.
15. Coordinate with the Unified Health System the creation of adequate services and equipment for pregnant women and new mothers who use psychoactive substances.
16. Advocate for creating and filling public defender positions in the states and Federal District, with a view to ensuring quality legal assistance to disadvantaged individuals.
17. Guarantee that the Family Courts are adequately structured to ensure decisions on parental alienation are based on the findings of qualified multidisciplinary teams.



The Sustainable Development Goals for and with children



The scope of the challenges posed by the Sustainable Development Goals (SDG) and the 2030 Agenda serves as an alert: there is much still to be done. Countries – including Brazil – have until 2030 to meet 17 goals to which they have committed. The SDG agenda is of critical importance to guarantee the rights of the child and adolescent.

The SDG are part of an international agreement to promote the sustainable development of our planet. The Resolution establishing the SDG was signed by 193 countries, on 25 September 2015. Brazil's diplomatic engagement and the dialogue maintained with government ministries played a leading role in shaping the agreement.

A brief overview of the sustainable development agenda's timeline helps elucidate where the SDG stand currently.

In 1992, the Rio 92 Conference was held in Rio de Janeiro. The Conference resulted in the first international agreement to tackle the twin challenges of development and environmental preservation. Subsequently, in 2001, the UN established the Millennium Development Goals (MDG), an international agreement aimed at promoting development in the world's poorest nations and in developing countries.

The MDG set five goals and eight targets for 2015:

Millennium Development Goals:

1. Eradicate extreme poverty and hunger.
2. Achieve universal primary education.
3. Promote gender equality and empower women.
4. Reduce child mortality of children under 5 years of age.
5. Improve maternal health.

6. Combat HIV/AIDS, malaria, and other diseases.
7. Ensure environmental sustainability.
8. Develop a global partnership for development.

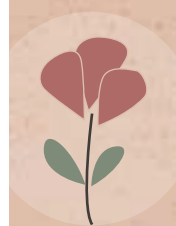
Millennium Development Goals in Brazil:

1. Reduce extreme poverty to half the 1990 level – 22.1% of persons in extreme poverty; in 2007, that percentage was 8.8%.
2. Create strategic income transfer programs for the most vulnerable population segments as a means to eradicate extreme poverty and reduce poverty throughout the country.
3. The child mortality death rate fell from 53.7 deaths per 1000 live births, in 1990, to 17.7 deaths per 1000 live births, in 2011.
4. Universalized access to elementary education and increased enrollment rates.
5. Removal from FAO's Hunger Map, in 2014.

Brazil was among the MDG's success stories at the global level, accomplishing 7 of the 8 targets. Reducing maternal mortality was the only target not achieved.

As part of the discussions on next steps to promote development across the world following lapse of the MDG, in 2015, Brazil again hosted a new UN conference in Rio de Janeiro – Rio+20 – in 2012.

Rio+20 played an important role in the development of the SDG through discussions that consolidated the understanding that *sustainable development is the positive interaction between the social, economic, and environmental realms*, a view that helped extend the debate on sustainability to the whole of global society. In addi-



tion, Rio+20 served as formal recognition of the need to give continuity to development commitments and begin negotiations on the post-2015 development agenda.

In August 2014, the SDG Zero Draft was submitted. It contained 17 goals and 169 targets. The document was the subject of an additional year of discussions within the United Nations General Assembly, until ultimately adopted at the Sustainable Development Summit, on 25 September 2015.

The SDG are a State-level agenda that seeks to transform the global development paradigm by promoting a greater balance between human prosperity and protection of the planet. The agenda offers guidance to the actions of civil society, the private sector, and governments to meet the ambitious and transformational goals and targets to which the international community has committed.

Each goal encompasses a set of targets that countries are expected to reach by 2030. For the 17 goals, a full 169 targets were established. A total of 10 of the 17 goals relate directly to children and adolescents, including the specificities of early childhood:



It is a people-centered agenda focused on promoting development and quality of life and well-being for all citizens, without compromising the planet's survival or future generations.

A fundamental principle of the SDG is to leave

no one behind. To this end, governments, business, and civil society must be alert to the positive and negative impacts of their decisions and actions on vulnerable groups in their countries. And on young children, in particular.

Implementation of this ambitious and complex agenda challenges us to consider the issues of intersectoral and cross-cutting actions, principally with respect to children and adolescents. By the same token, it is important that each stakeholder engaged in implementing actions, programs and projects focus on the totality of the agenda when planning actions, to the extent that what may be highly positive for a particular goal must be assessed in terms of its impact on other goals. The full agenda and the interdependence of the respective outcomes are also critical indicators to ensure sound implementation.

In Brazil, implementation of the 2030 Agenda faces a number of challenges by reason of the country's current political and economic setting and the Agenda's impact on the country's states and municipalities. An important step in implementing the SDG on a national scale was secured with the development of a document prepared by the Institute for Applied Economic Research aimed at adapting the global targets to Brazilian reality. The document will serve to support the union, states, and municipalities in planning public policies at the three levels of the Brazilian Federation.

The updated National Plan for Early Childhood takes into account the SDG guidelines and targets in relation to their potential for informing the public policy and investment actions required to fulfill the priority targets established for early childhood. Although the SDG targets are projected through 2030 while this Plan is set to expire in 2022, its proposed extension aligns with the SDG timeframe.

All the SDG bear direct or indirect relation to children. But some are more closely tied to children's rights than others. Specifically:

1. End poverty.
2. Zero hunger.
3. Health and well-being.

4. Quality education.
5. Gender equality.
6. Clean water and sanitation.
7. Affordable and clean energy.
8. Reduced inequalities.
9. Sustainable cities and human settlements.
10. Climate action.
11. Peace, justice, and effective institutions.

Given their obvious relevance, this Plan highlights those goals that aim to: I) eradicate poverty and hunger; II) ensure a healthy life and quality education; III) guarantee gender equality; IV) provide access to water and energy; and V) promote sustainable economic development.

Targets

The National Plan for Early Childhood takes on and coordinates fulfillment, through intersectoral and cross-cutting (transversal) strategies, of the following priority SDG goals that specifically relate to early childhood:

- 1.2 By 2030, reduce at least by half the proportion of men, women and children of all ages who live in poverty in all its dimensions according to national definitions.
- 1.3 Implement nationally appropriate social protection systems and measures for all, including tiers, and by 2030 achieve substantial coverage of the poor and the vulnerable (items 1.2 and 2.1 are related to the following chapters of this Plan: *Children's families and communities*, *Social assistance to families with young children*, and *Diverse childhoods*).
- 2.1 By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious, and sufficient food all year round (items 2.1 to 3.a relate to the chapter *Healthy children* in this Plan)
- 2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons.
- 3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100 000 live births.
- 3.2 By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1000 live births and under-5 mortality to at least as low as 25 per 1000 live births.
- 3.4 By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.
- 3.a Strengthen substantially the financing of health and recruitment, development, and training, as well as conservation, of health personnel in developing countries.
- 4.2 By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary, so that in this stage of life they value themselves and build affective, social, physical, and mental structures for the dynamic of their lives (items 4.2, 3.a and 4 relate directly to the chapter: *Early childhood education* of this Plan).
- 4.a Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive, and effective learning environments for all.
4. By 2030, increase the supply of qualified teachers in early childhood education, in particular daycare.
- 5.1 End all forms of discrimination against all women and girls everywhere.
- 5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.



- 6.1 A By 2030, achieve universal and equitable access to safe and affordable drinking water for all.
- 6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.
- 10.2 By 2030, empower and promote the social, economic, and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.
- 11.1 By 2030, ensure access for all to adequate, safe, and affordable housing and basic services and upgrade slums.
- 11.7 By 2030, provide universal access to safe, inclusive, and accessible, green, and public spaces, in particular for women and children, older persons and persons with disabilities.
- 16.1 Significantly reduce all forms of violence and related death rates everywhere (items 16.1 and 16.2 are also contemplated in the chapter *Preventing accidents in early childhood* in this Plan).
- 16.2 End abuse, exploitation, trafficking, and all forms of violence against and torture of children.
- 16.9 By 2030, provide legal identity for all, including birth registration (see the chapter *Ensuring all children the citizen document* in this Plan).

Business and early childhood



The main objective of this Plan is to chart a course for achieving the most important and urgent goal of all: enjoyment by children of their rights in early childhood. Rights, in this sense, represent the beginning and end of the journey. They substantiate the guidelines underlying the policies and actions proposed in these pages. This pathway, meanwhile, is supported by intersecting and auxiliary arteries. As such, this Plan takes into account the positions of other sectors, such as those that register the direct and indirect benefits flowing to children in the course of their lives, especially in adolescence and young adulthood, their families and society. In line with this goal, therefore, studies produced in the economic field are also welcome. These have helped calm and even inspire public policy makers, government budget officials and executives in small-, medium- and large-scale firms.

The updated PNPI adds the business community's perspective on children as citizens, the potential they bring to the world at birth, the impact of diligent care on their development and, as we would expect, the direct and indirect benefits business firms accrue when contributing to actions on behalf of their employees and in support of public policies for early childhood.

The Doctrine of Integral Protection, founded on article 227 of the 1988 Brazilian Federal Constitution and enunciated in the Statute on the Child and Adolescent (Law 8069/1990), defines co-responsibility between the family, society, and the State as a foundational principle of the priority fulfillment of child and adolescent rights. In recent years, a consensus has formed around the idea that business firms are recognized and should recognize themselves as part of the social network of actors with responsibility for meeting this legally stipulated mandate. This role directly impacts how businesses conduct their affairs and manage the relationships with communities in their geographic areas of operation, requiring continuous attention to matters that involve or affect young children. On this point, the Early Childhood Legal Framework contains a provision specifically dedicated to the participation of society in protecting and promoting young children (article 12).

The participation of business firms takes on added importance in light of article 170 of the 1988 Brazilian Federal Constitution, which addresses Brazil's economic order, the end purpose of which must be to guarantee a dignified life for all people based on the precepts of social justice, pursuant, among others, to the principles of social function of property and the reduction of social inequalities.

1. An analysis of the setting

Few investments are as profitable as those made in early childhood. According to American economist James Heckman, 2000 Nobel Prize in Economics, programs devoted to children up to 6 years of age generate a 13% return on investment each year, based on his most recent review of the relevant calculations, including health care costs. This is due to two factors. On the one hand, children who receive the appropriate stimulus in early childhood register healthier emotional and cognitive development, reflected in greater achievement in their adult years. On the other, children who are well cared for are less likely to require remedial education programs and even less likely to make choices that compromise their health or lead them into delinquency.

To Heckman's calculations we can add other studies, such as the research work conducted by the Rand Corporation, a policy analysis entity based in California. According to Rand, every dollar invested in early childhood generates a net saving of US\$ 2.62, representing money that does not have to be expended on remedial education, tutoring and assistance for students repeating grades, violence prevention or other social costs.

Investments in early childhood are particularly effective because relatively simple actions have extraordinary impact. For example: one hour of conversation per day with a child, throughout the year, results in an equivalent improvement in the child's development of one or more ye-

ars, according to a study by Brazilian economist Flávio Cunha of Rice University, in the United States. In other words, a 4-year-old child exposed to adequate communication performs at the same level as a 5-year-old child who is not provided with the appropriate communication stimulus.

However, although the financial logic so clearly argues in favor of focusing attention on children, the involvement of Brazilian business firms today in early childhood is modest, at best. A possible explanation for this is that the return on investment is a long-term proposition: 15 to 20 years before the first results become evident in professional life. While the large majority of businesses suffer from a shortage of qualified labor, the costs of acting on behalf of young children have an impact on cash flow now, whereas the benefits generated by positive action accrue only in the future, while, in addition, benefitting society as a whole, not necessarily the investing firm.

Yet, it is worth noting that there is an area that offers an immediate return for companies, at relatively low cost, namely investments in parenting, that is, in enabling men and women to exercise their paternal and maternal roles in a dignified and sustainable way. When they become fathers and mothers and actively parent their children, men and women develop skills that have a positive impact on the workplace, such as enhanced creativity, resilience, a broader and systemic perspective on the workplace, greater respect, and solidarity for colleagues. Valuing fatherhood and motherhood acts on the emotional horizon of individuals, nurturing sensitivity for social justice and inclusion: by reflecting their feelings for their own children onto the children of their co-workers and the *children of no one*.

However, even among companies with the most progressive human resources policies, Brazil suffers from widespread attention deficit among adults responsible for children 0 to 6 years of age. According to a 2019 ranking of the Great Place to Work (GPTW) institute, of the 150 best firms on the list less than half (49%) offer maternity leave of six months or longer and slightly more than

one-third (39%) provide paternity leave of 20 days or more.³⁷²

In addition:

- A. only 11% of the business firms on the list provide nursery or daycare services for the children of employees, either in the workplace or at a nearby facility. A full half of those companies, meanwhile, only grant the benefit to women (the other half allow both the father and the mother to request services);
- B. less than one-third (31%) of businesses set aside a reserved space where mothers can breastfeed their children or collect milk to take home with them;
- C. approximately one-fourth offer flexible hours for employees to attend to family matters, such as school meetings or pediatric visits

This is the situation in business firms with comparatively progressive personnel policies. Among the largest group of GPTW certified businesses, only 13% reported providing assistance to associates with young children. In Brazil as a whole, a number of basic rights are simply disregarded to this day. The 2019 report *Situation of Paternity in the World*³⁷³ revealed that in Brazil 27% of parents were not granted any parental leave, although the applicable legislation clearly prescribes the benefit as a right. At least in the most progressive companies, the numbers suggest headway on this front. The 2018 GPTW list – based on 2017 figures – indicates that 39% of companies provided 6 months of maternity leave to mothers, while 29% granted 20 days of paternity leave to fathers and 20% offered breastfeeding and milk collection spac-

³⁷² United Way Brasil and Fundação Maria Cecília Souto Vidigal, in partnership with Great Place to Work, prepared the *Guia Aposte na Primeira Infância* – Bet on Early Childhood Guide – Available at: <https://www.unitedwaybrasil.org.br/sites/unitedwaybrasil.org.br/files/Guia_Aposte_na_Primeira_Infancia.pdf>.

³⁷³ *Situação da Paternidade no Mundo*. A report prepared by the Instituto Promundo, an affiliated member of the National Network for Early Childhood. The third report, in 2019, was released at the Women Deliver Conference 2019, in Vancouver, Canada. Available at: <<https://stateoftheworldsfathers.org/>>.



es (representing in all three cases an improvement of almost 10 percent). Yet, the number of companies that made nursery or daycare services available to employees was virtually unchanged. Indeed, on this front the total remains exceedingly low.

Out of 10 million children between 0 and 3 years of age, for whom early childhood education is an inherent right, although not a requirement – but one the State is charged with ensuring nonetheless whenever a family requests enrollment of a child in daycare –, the National Education Plan 2014-2024 establishes a target coverage of at least 50% by the Plan’s final year. Because only 2 432 000 children were enrolled at the beginning of 2019 (48.6%), the goal of 5 000 000 enrolled children has only been met halfway. Over the next 5 years, the 2 568 000 shortfall will have to be covered. Therefore, the support of business firms to this effort is critical, with the potential to exercise decisive impact on the development of millions of children.

To boost the participation of business in early childhood investments, this Plan recommends action on three fronts: social sentiment, business logic and the conception of human rights and business within the early childhood field.

2. Emotion, reason, and rights

Up through the end of the last century, the prevailing view of the mission of business firms was rooted in the ideas of Milton Friedman of the Chicago School: *the social responsibility of business is to increase profits*. The argument was that companies focused solely on their business are more efficient and, therefore, deliver better products, are capable of growing and offering more job opportunities and, additionally, paying more taxes, which the State can then direct to those services the broader society identifies as most important.

However, partly due to a series of disappointments in connection with the behavior of bu-

sinesses and another set of disappointments with government actions, a growing consensus has emerged that firms cannot simply concern themselves with the financial interests of shareholders. This view is not only held by experts and non-governmental organizations engaged in the field. In August 2019, the CEOs of 181 of the world’s largest business organizations, affiliated to the influential Business Roundtable, declared that the role of a company is not merely to serve its shareholders, a position they had defended since 1997, but to *create value for all their stakeholders*, including employees, clients and customers, local communities, and the environment.

In other words, we are at a point when social pressure is not only pushing businesses to make a broader contribution to their communities; increasingly, there is a desire among business leaders and executives to further bolster that contribution. This is the emotional aspect. And if businesses are willing to focus more on the demands of stakeholders, then naturally the attention given to early childhood must be associated to that trend.

The other factor involves business logic. There are strong reasons for considering that actions on behalf of early childhood are a good investment – not just for society as a whole, not just for the future, but for firms themselves, in the immediate term.

One reason is productivity. According to Ready Nation, an American business organization with 1100 members, including the CEOs and former CEOs of large corporations united around the cause of investing in children and youth, programs on behalf of early childhood boost the productivity of employees: in knowing that their children are receiving good care, parents can concentrate on their work. In addition, attending to the health of children results in fewer absences.

A second reason is talent retention. Various international studies have shown the costs associated with employee turnover range from 50% to 200% of an employee’s annual salary. Intuitively, therefore, it is clear that a firm that offers more opportunities to balance family and

professional life will reduce turnover. The case of insurer Tokio Marine's Brazilian affiliate serves to confirm this point. In 2011, when the company began providing benefits to associates with young children, including flexible hours, reimbursements for daycare or babysitting expenses and private pension plans, the turnover rate was 21%. The percentage began to drop with each passing year, until reaching a record 9.8% in 2017, compared to the 14.9% average for the sector as a whole.

In the majority of cases, the advantages of these benefits offset the cost of implementing early childhood policies, such as investments in daycare, for example. Yet, this varies from business to business. Because both the respective costs and advantages are very much contingent on the nature of a given business, the workforce, the competitive environment, the economic cycle, the ease with which a replacement for someone on leave can be trained and the possibility of implementing flexible work hours.

With so many variables, only the business firm itself can assess whether the financial calculation will result in a profit or loss. To this end, the following must be considered:

- A. the voluntary turnover rate of new parents – or, more commonly, mothers;
- B. how much the firm would save by reducing turnover, by adding together the direct costs of recruiting, selecting, and training talent and the indirect costs of temporary productivity losses for the team and client service disruptions, etc.?
- C. how many births occur on average each year?;
- D. how easily a given employee's tasks can be distributed among co-workers?;
- E. the cost of hiring a temporary replacement?;
- F. the costs of implementing benefits such as the fractionalized proportion of the total rent cost for a breastfeeding room.

In addition to the raw numbers, however, there are also intangible benefits – which might actually outweigh the financial advantages.³⁷⁴ A business perceived as just and concerned with the common good elicits pride among its internal audience, generally reflected in greater engagement, which itself manifests in positive productivity gains. A survey by the Gallup Institute looked at almost 24 000 business units and concluded that those in the top quarter of engagement – the 25% with the highest engagement – registered productivity rates 18% above average productivity and profitability figures 12% higher than the average.

When a business is perceived as humane by external audiences, its reputation is enhanced, potentially stimulating sales or attracting more qualified professionals – not just women, a talent source persistently underutilized by firms, but young fathers as well: according to a recent report on paternity prepared by Instituto Promundo,³⁷⁵ 85% of fathers – in Argentina, Brazil, Canada, Japan, the Netherlands, the United Kingdom and the United States – said they would do anything to increase their involvement in the first weeks and months of their children's care. The response was expressed by the fathers of biological and adopted children alike.

The Helping Dads Care³⁷⁶ survey presented intriguing results: that fathers want to be involved in caring for their children; 73% of them agree that there is insufficient support in the workplace for fathers and one in five men (corresponding to 21% of the sample) expressed fear of losing their job if they used the full paternity leave to which they were entitled. The survey also found that 69% of fathers would switch jobs if it meant having more time with their children. And 87% said they would be more satisfied with their lives if they could be the care-

³⁷⁴ See publication: *Aposte na Primeira Infância (Bet on Early Childhood)*, prepared by United Way and Fundação Maria Cecília Souto Vidigal. Available for download at: <https://www.unitedwaybrasil.org.br/sites/unitedwaybrasil.org.br/files/Guia_Aposte_na_Primeira_Infancia.pdf>.

³⁷⁵ See note above.

³⁷⁶ Available at: <https://promundoglobal.org/wp-content/uploads/2018/06/Promundo-DMC-Helping-Men-Care-Report_FINAL.pdf>.



givers they would like to be.

There is a third factor that spurs investment by businesses in childcare, development, and welfare actions – rights. The conception of the firm’s role in social and business relations was redefined by the UN’s publication of the Guiding Principles on Business and Human Rights (GPBHR), in 2011, which offered normative guidance to businesses on abstaining from conduct that infringes on rights and engaging in the development of measures to prevent violations and generate positive impacts on their respective business activities and stakeholders, including young children. The initiative goes beyond the framework of corporate social responsibility, to the extent it does not simply involve generating shared value for business firms and society but building tools to manage the risks and potentialities that business practices can produce on the conditions of life of employees, the value chain and society.

Since publication of the GPBHR, the UN, UNICEF and the National Council for the Rights of the Child and Adolescent have endeavored to offer new contributions to the children’s rights field, principally through General Comment 16, of 2013, of the UN Committee on the Rights of the Child, the materials produced by UNICEF to incorporate children’s rights in business practices³⁷⁷ and National Council for the Rights of the Child and Adolescent Resolution 163/2014 (on child advertising), and Resolution 215/2018 (on protecting the rights of the child at economic enterprise and project sites). This legal repertory has served to reorient the function of firms both big and small toward the task of guaranteeing the rights of children and adolescents.

A channel with significant strategic communications and awareness-raising potential is the Brazilian Association of Human Resources (ABRH), composed of 22 chapters (active across Brazil’s federative units). The subject of Early Childhood was first tackled by the

ABRH in late 2019³⁷⁸ at an event organized by Crescer and O Globo, in partnership with ABRH-Brasil and the support of the Maria Cecília Souto Vidigal Foundation. The event drew executives, medical professionals and human rights experts to discuss the relationship between the corporate world and early childhood.

3. Positive examples

In practice, firms can adopt a number of concrete and immediate actions to spur investment in early childhood. These include guaranteeing daycare at their facilities or in partnership with daycare establishments, adopting flexible work hours, building trust and accommodations for their employees, and extending progressive policies, to the extent possible, across their value chains.

There are multiple ways to embrace the cause of young children: engage in volunteer actions and campaigns to inform the population on how to use its influence in various forums to secure progress in strengthening care for children. Every firm has the potential to ally itself with early childhood. And there are a number of positive examples and paths to this end, says Gabriella Bighetti, executive director of United Way Brasil, a non-governmental organization that acts on behalf of children and youth through educational initiatives.

In Brazil, good sustainable and productive business practices, which conform to the applicable national and international laws on the rights of the child, demonstrate that the benefits offered to associates can transform the workplace into a supportive and encouraging environment for mothers, fathers, and caregivers. Specifically, through initial attention to early childhood based on measures that respect the rights of chil-

³⁷⁷ Available at: <<https://www.unicef.org/csr/tools.html>>.

³⁷⁸ Available at: <<https://www.abrhbrasil.org.br/cms/materias/noticias/abrh-brasil-marca-presenca-em-evento-empresas-pela-primeira-infancia/>> and <<https://www.abrhbrasil.org.br/cms/materias/noticias/abrh-brasil-em-defesa-da-primeira-infancia/>>.

dren and promote their survival, development, and well-being.

As an example, the cosmetic company Natura has offered 40 days of paternity leave since 2016, more than double the amount prescribed by Law 11770, dated 9 September 2008,³⁷⁹ as amended by the Early Childhood Legal Framework,³⁸⁰ which applies to companies under the Citizen Company Program. The policy is based on recognition of the period of physical recovery mothers require in postpartum and the importance, therefore, of the father's proximity for the entire family, particularly with respect to bonding with the infant, one of the firm's objectives. The policy is extended to same-sex couples and adoptive parents, as well.

Johnson & Johnson's affiliate in Brazil follows a similar line: in 2018, the company increased its paternity leave benefit from 15 to 40 business days, providing a total of 56 days – the measure applies to biological and adoptive fathers, as well as same-sex couples. Paternity leave can be claimed at any time within the first year following birth or adoption of the child – offering fathers and mothers the opportunity to stagger their caregiving duties.

At Banco Losango, in São Paulo, parents are invited to take their children to work on all commemorative dates, including Father's Day, Mother's Day and Children's Day. In addition to baby showers for expectant mothers, the bank offers an overtime compensation policy (allowing work hours to be adjusted to personal commitments), daycare allowances and other benefits that, according to the institution's management, has succeeded in fostering a climate of solid trust.

Meanwhile, flexible hours, a critical option for those with children subject to emergencies or requiring supervision on special occasions, can

take a number of forms. Some businesses give employees the option of starting their workday later or ending their workday earlier. Others provide paid hours off. There are businesses that allow employees to leave during work hours to attend to personal matters. Yet others enable employees to work from home. All these arrangements tend to enhance the work environment, as revealed by a host of studies that in fact demonstrate that employees are productive for only a certain number of hours anyway, and far less than the regular eight-hour workday. In addition, the literature indicates that employees with flexible hours tend to be more engaged and satisfied with their work.

At Tokio Marine do Brasil, employees are allowed to begin their day anytime between 7:00 a.m. and 10:00 a.m. and end their day anytime between 4:00 p.m. and 7:30 p.m. They can also use comp time (overtime banks) to clock out earlier on any day of the week. This gives parents the opportunity to take their children to school functions and doctor's visits. Moreover, the insurer offers unlimited and confidential personal assistant services to employees, including the husband, wife, and children. The assistant helps schedule doctor's visits, obtain price quotes for children's parties or school events, etc.

Employees At Takeda pharmaceutical company's Brazilian affiliate in Santo Amaro (São Paulo) are let out at 1:00 p.m. on Fridays, while factory floor workers are dismissed at 3:00 p.m. The extended weekend is offset with a slightly longer workday Monday through Thursday. Administrative staff may also take three days off per year, which can be offset throughout the year, while production personnel with no absences are granted a day off per semester. With a view to imbuing pride in the work of parents, Takeda sets aside a day for children to visit the workplace.

Whirlpool, which owns the Brastemp and Consul brands, has embraced the telework trend – offering employees the option of working from home up to two days per week, since 2018.

Eligible staff replaced their desktops with VOIP enabled notebooks to allow employees to

³⁷⁹ The law institutes the Citizen Company Program, which extends maternity leave by two months. The business organization is reimbursed for the wages paid to the employee during the extended maternity leave through tax deductions.

³⁸⁰ Law 13257, dated 8 March 2016, more commonly known as the Early Childhood Legal Framework, added a provision to Law 11770 providing for an additional fifteen days of paternity leave, mirroring the increase in maternity leave.



use the company's telephone network.

IBM organizes a number of activities during Children's Week for the families of employees, including programs to develop their technological skills. It also grants unpaid leave for a period of 3 to 36 months and authorizes employees to work at least three days per week from home in the child's first four months of life.

Special Dog, a company based in Santa Cruz do Rio Pardo (São Paulo), provides a diversity of benefits to its associates to ensure comprehensive care for children, including: a) maternity leave of 6 months, which may be supplemented with vacation time; b) paternal leave of 5 days, which may be extended to 20 days for associates who participate in a company program administered by nursing staff to new fathers; c) layette for all new parents; d) one-year child cash allowance in an amount corresponding to one minimum monthly salary following maternity leave.

The company also created the Special Dog award, an ample leisure space for families. In 2014, the company opened a cultural center to offer children 3-5 years of age from the entire community music, storytelling and play activities. In the public policy sphere, since 2017 the organization has funded an early childhood education training implemented by the Municipal Education Department, as well as an initiative headed by the Social Assistance Department to address issues involving children in sheltering centers.

The Chopinzinho Commercial and Business Association (ACEC), inspired by the Child University Program,³⁸¹ launched the Enterprising for the Future project, which drew the participation of 32 businesses, in 2019. The project kicked off with a film showing for all employees: *Beginning Life*, by Estela Renner; subsequently, workers were asked to post a photograph or a video of themselves playing with their children, nephews and nieces or godchildren. As part of an event organized by the Chopinzinho Local Government (Paraná), in partnership with the

Children's University Management Group, employees brought their children to work on Play Day. The owner of a participating business noted, *Our work efficiency was at 88% for a variety of reasons, adding that a month after the activity it was at 97%.*

Grupo Doce D'ocê, also based in Chopinzinho, took the initiative of increasing maternity leave benefits from 4 to 6 months and paternity leave from 5 to 20 days for all 500 employees: the majority women. The decision led to reduced employee turnover.

Direct financial support is yet another potential action. The Grupo Sabin, a network of health testing laboratories, offers a monthly minimum salary to help with wedding costs. It also provides training for employees preparing to be parents and, finally, an additional minimum monthly salary for the purchase of a layette. The benefit is available for male employees as well, who correspond to one-third of the company's workforce.

FERSOL, a private enterprise, does not distinguish between the sexes when determining salaries and positions occupied by men or women. Given the large number of women in its employee pool, the company devotes particular attention to distributing information on health, maternity protections, and the rights of the child. All employees have access to programs on reproductive rights, family planning, natural birth, breastfeeding, reproductive tract diseases and sexually transmitted infections. The company increased paternity leave to 30 days. With respect to maternity leave, in addition to the 120 days prescribed by law, women receive an extra month of leave, which they can supplement with vacation time. The same benefit is provided to men who live with the child's mother. Benefits also extend to parents who adopt children and to heterosexual and same-sex couples alike.

Spearheaded by its Social Responsibility Committee, the São Paulo State Federation of Industry (FIESP) organized a Business Workshop Series on Early Childhood in the second half of 2019. The initiative focused on the following topics: Developing a Strategic Vision of Early

³⁸¹ Programa Universidade da Criança.

Childhood for National Development; Corporate Actions for Early Childhood in Companies and Communities at the National and International Level; Developing Projects and Initiatives with a Positive Impact on Education and Care in Early Childhood. The last workshop centered on an in-depth analysis of the concept of network action, elaboration of a list of coordinating organizations engaged in promoting and guaranteeing the rights of young children in Brazil and the world and support to the development of a network of business leaders to promote the cause of early childhood. The adoption of similar initiatives by additional business and commercial federations will serve to nurture a more open and attentive attitude on the part of society to young children and their right to life and full development.

4. Goals and targets

Government

1. Organize specific campaigns for businesses, demonstrating the importance of supporting the cause of early childhood;
2. Create mechanisms to incentivize businesses to join the Citizen Company Program, which provides for increasing maternity and paternity leave benefits, pursuant to Law 11770/2008, as amended by Law 13257/2016 (Early Childhood Legal Framework);
3. Strive to ensure efficiency and equity in the promotion of economic growth and development through fulfillment of the legislation governing the rights of the child;
4. Create a public information platform on good practices and experiences in the field of social responsibility by businesses participating in the Citizen Company Program that benefit young children;
5. Encourage firms to donate to the Child and Adolescent Rights Fund,³⁸² associated to the Child and Adolescent Rights Council, within this scope;
6. Produce and disseminate informational materials with methodological guidelines on engaging businesses in protecting and promoting the rights of young children, considering the scale and complexity of the business enterprise;
7. For purposes of the construction and enterprise project agreements executed between the public administration and companies, ensure clauses that prescribe the company's obligation to prevent, mitigate and resolve violations of the rights of children and adolescents, with particular attention to young children, including joint responsibility in controlling impacts across the value chain;
8. Promote fulfillment of National Council for the Rights of the Child and Adolescent Resolution 215/2018, with particular focus on guaranteeing the rights of young children in the context of construction and enterprise projects.

Business

This National Plan for Early Childhood recommends five areas of engagement for companies:

1. Internal policies: implement practices that benefit employees, creating more family-friendly environments and, in this way, fostering productivity and the firm's sustainability. Examples include extended maternity and paternity leave, daycare allowance for male employees as well, flexible work hours, among others;
2. Influence company value chains: export the culture to other companies through su-

³⁸² *Fundo dos Direitos da Criança e do Adolescente.*



apply contracts or promotion of the organization's example, creating relationships of trust capable of stimulating business and mitigating risk in relationships.

3. Social investments: support volunteer actions, non-governmental organizations, and community daycare establishments, in addition to initiatives focused on the issue, to ensure reputational gains and workforce engagement;
4. Communications and marketing: promote intensive communications, with a view to raising awareness to the cause of early childhood, thereby serving to reinforce the company's identity and enhance its strong reputation;
5. Advocacy: disseminate and promote among all stakeholders the importance of investing in early childhood;
6. Internal training: provide courses and other training activities to employees on the rights, services, and care for young children, including to suppliers, third parties and community leaders;
7. Diagnostic: with a view to identifying, preventing, and repairing negative impacts to the rights of young children from business activities, as well as facilitating the leveraging of positive impacts, perform human rights audits that take into account risks to the rights of children and adolescents, in particular young children;
8. Supply chain contracts: include clauses in supply chain contracts for construction or enterprise projects on the responsibility for the rights of children and adolescents, with a focus on young children, especially with respect to controlling the impacts of construction and enterprise projects, as well as penalties in cases of noncompliance.

There is no requirement to adopt the order above: in an area so lacking in initiatives, virtually any action will prove impactful. For children, for society as a whole – and for the business organization itself.

Other recommendations to companies are based on the publication *Child Rights and Business Principles*,³⁸³ an initiative of Save the Children, the UN Global Pact and UNICEF. The document sets out business actions to respect and support child rights. The rights of children are prescribed in the Convention on the Rights of the Child, Convention 138 of the International Labour Organization (ILO) (which established the minimum permitted work age) and Convention 182 of the ILO (which addresses the worst forms of child labor). Article 3 of the Convention on the Rights of the Child enshrines the following principle, *in all actions concerning children [...] the best interests of the child shall be a primary consideration*.

For purposes of these principles, businesses are encouraged to adopt the following actions:

- Take on the responsibility to respect child rights and undertake to support the human rights of children;
- Contribute to eliminating child labor, including in all business activities and commercial relations;
- Provide decent work to young workers, their parents and caregivers;
- Ensure the protection and safety of children in all company activities and facilities;
- Ensure company products and services are safe and that they are aimed at supporting the rights of children;
- Use marketing and advertising tools that support and respect the rights of children;
- Respect and support the rights of children in relation to the environment, acquisition and use of land;
- Respect and support the rights of children in all safety strategies;
- Contribute to protecting children affected by emergency situations;
- Support community and government actions to protect and enforce the rights of children;
- Conduct studies on family views regarding maternity and paternity benefits.

³⁸³ *Direitos das Crianças e Princípios Empresariais*. Available at: <http://www.unicef.org/csr/css/DRAFT_PRINCIPLES_portuguese.pdf>.

In sum, there are four ways in which businesses can support early childhood – or the quality of life and development of children – specifically:

- I. Provide extended maternity and paternity leave, in accordance with the guidelines of the Citizen Company Program;
- II. Offer a daycare support to staff, personnel and associates;
- III. Donate to the Child and Adolescent Fund, indicating specific organizations or programs dedicated to early childhood registered with the Child and

Adolescent Rights Council;³⁸⁴

- IV. Develop direct actions for internal audiences (associates and suppliers) and external audiences (customers and consumers), such as publicity campaigns, courses, and events on child rights.

³⁸⁴ According to Article 12, paragraph 1, of Resolution 137, dated 21 January 2010, of the National Council for the Rights of the Child and Adolescent, donors/contributors may indicate their program of preference, provided it falls within the Council's priorities and action plan. Paragraph 2 of the same article states that selections may be subject to a term sheet prepared by the Rights Council to formalize the agreement with the donor/contributor.



The right to beauty



“Beauty will save the world”

(Dostoevsky)

We developed this Plan to protect children, give them a promising start to life and ensure them the greatest possible realization of their potentials. We began with the attendant rights, outlining the chasm between these and the current reality and the progress made to date. Subsequently, we proposed actions to correct omissions, fill in gaps in public policies and bring children closer toward full exercise of their rights. This represents the critical political undertaking at hand, the primary technical task. We are called to tackle this challenge as an absolute priority. However, this, by itself, is not enough, nor is it enough for children. Because accomplishing this narrow objective would leave us confined to the sphere of mere legalistic relations, obedience to the order of duties to which we are bound, while leaving out an essential right, one that fully rounds out the meaning of care, that acts directly on the field of sensibilities, that animates, from within, every tender gesture, moment of respectful listening, effort to promote inclusion, foster the joy of being together and sharing – and which resides deep within children themselves and across the being-becoming continuum: beauty.

Why talk about beauty in this Plan and affirm that it is a right of children? If extreme poverty sours the lives of millions of children; if hunger cramps their stomachs; if health, early childhood education, social and psychological assistance are little more than chimeras for so many of them? If violence in its multiple forms takes their lives or injures their bodies and wounds their psyches? If there are innumerable children and many childhoods that governments simply make no effort to bring into the light, to learn about and to include in protection and promotion policies? If the neglect and omission of parents, caregivers, and the State drive so many children to death, repress the development of identities, relegate them to the margins of their very rights? Are we not perhaps simply reprising the role of the violinists who

steadfastly continued playing *Nearer My God to Thee* as the Titanic sank and the passengers desperately scrambled to save themselves?

Would it not be an act of surreptitiously concealing the injustice of reality to talk about the right to beauty of children who live in huts, squeezed into narrow alleyways, surrounded by open sewage, without clean water, forced to trudge through waste, breathe in polluted air, deafened by noise, deprived of toys and space to play, without day-care or preschool, or parents, torn away from their lives by work obligations? Or, similarly on the opposite extreme, children blessed with abundant material comfort, but whose care has been outsourced and whose contact with parental figures is limited to a scant few moments on weekends, who are burdened by the stress of excess activities and by the expectation to maximize their learning and achieve superior development? In this light, the following questions seem warranted: where is the beauty for them? Does it make sense to talk about the right to beauty when these children are deprived of its essential ingredients?

Far from representing a contradiction, naïveté or divestiture, to speak of beauty in a Plan for Early Childhood is to affirm that the children imprisoned by the circumstances described above have the same right to beauty, with equal sensibility and subtlety, as those who enjoy dignified housing and healthy nourishment, family life and a serene bonding experience, who are provided quality daycare or preschool, who are surrounded by care and responsive attention, who, in their adventures of discovery and relationship-building, receive support and guidance, instead of the successive «no's» that restrict freedom of action and creativity; who, instead of a «yes» of omission and disinterest, hear a caring «no» that serves as a protective shield around them.

Beauty is not something left until after all problems have been resolved, economic needs met, psychological suffering overcome and fundamental rights fulfilled. Beauty is not an after: it blooms in conjunction with the surmounting of obstacles, it takes shape through action and then lends power to realization. There is beauty, which is in permanent gestation throughout life, that sutures wounds, mends ties, that forgives and reembraces, that rejects despair and attaches to hope. There



is beauty in the tender and vigorous presence of those who extend a hand to the fallen, hold the rejected, caress someone in need of affection. Of those who break down obstacles that prevent the most vulnerable from living in dignity. There is beauty in the cries of the excluded, the invisible and the forgotten, if only they hold on to the hope that their cries will be heard. The ultimate end of freedom from all that oppresses is beauty. Freedom is, «per se», an act of beauty. In the neediest areas, the thirst for beauty is even greater. The power of poetry pulsates with uncommon vigor where poverty is cruelest. Sometimes, beauty is a lifeline. As Edgar Morin put it, in his infinite wisdom, *beauty should help us live*.³⁸⁵

There is beauty in public officials whose eyes penetrate deep into the afflictions that mar the lives of children and who, indignant at the denial of rights, propose social policies to change a harsh reality. There is beauty that emerges from transformation, passage from one circumstance to a new one, from one standard of life to another: manifested in the form of housing, sanitation, primary health care, early childhood education, social assistance, neighborhood culture, food security, environmental protection.

The conception of beauty the National Network for Early Childhood advocates is best represented as a road that extends beyond the limitations placed on life, that breaks through the constraints that suffocate desires and deny movement. When women in custody, pregnant women or mothers with young children are invited following a theater performance to whisper their most passionate desires into a bottle, as if the bottle were then going to be hurled into the sea, words of resounding power we might otherwise never suspect they could ever feel or express flow from them. To be sure, there is a beauty in what they say and a beauty in their voices that words themselves cannot aptly capture.

Beauty can be synonymous with opening if it leads to freedom, to the full expression of oneself with respect for others and in harmony with na-

ture. *The function of all art is to break through the narrow and distressing space of finitude in which people are trapped, living, as it does, down here to open a kind of window to their minds that tends toward infinity. In the context of a hopeless culture, consider art as a source of new hope.*³⁸⁶

Beauty captures, in the here and now, the power of moving beyond, the need for change, the hope for an escape. It glistens in the drops of sweat produced by the push to transcend; it is transcendence itself. Beauty is in the faith for one's own strength and the solidarity of humans to build a better world. Pablo Picasso's celebrated painting *Guernica* (1937)³⁸⁷ is a case in point: on the canvass, politics and art converge. Sliced, broken, divided, fractured by war, bodies, and souls in pieces, manifest an angry condemnation of the violation of life, a cry for help, drawing from the colors and disconnected shapes the urgency of unity, of an embrace, of a humanity without war, of a life with peace. The pain of a humanity that had so debased itself in war clamors for a humanity that reconciles itself to peace. From the bottom of the pond, a flower can – and, indeed, must – blossom.

We want smiles to replace the tears on the faces of children, we want shelter instead of abandonment, someone's lap and embrace rather than a hand that strikes, the strength of a healthy body, spontaneous and omnipresent play, we want the cold concrete of cities to be warmed by the green of nature, the singing of birds and the exuberant joy of children. Without that beauty opening doors outward, human life would swirl around itself, groping in the dark. Beauty becomes, in this sense, the bond that ties us to that which is done well, spurring us to search for it wherever it may be, regardless of distance, and driving us to generate it where it lacks.

Might this not be one of the meanings of Dostoevsky's observation: *beauty will save the world?*

Our conception of beauty as an inherent right of children extends far beyond the aesthetic

³⁸⁵ MORIN, Edgar. *La beauté doit aider à vivre. In: La Beauté à la Rencontre de L'Éducation*. France: L'Harmattan, 2014. Twitter: @edgarmorinparis.

³⁸⁶ TOULET, Elisabeth. *La Beauté à la Rencontre de L'Éducation*. Edit L'harmatan, 2014.

³⁸⁷ A satirical indictment against bombing of the Basque city of the same name during the Spanish Civil War (1936-1939).

expression of the arts. It is difficult to explain, because it occupies a domain outside the realm of logic: it resides in the field of sensibility, intuition. Difficult to explain, but easy to feel. If it is ontological, in the sense that it belongs to the essence of being, it is also psychological, insofar as its kingdom is sensibility, the capacity for emotion, awe, ecstasy. Aesthetics, which is the language of feelings, enables us to travel beyond the bounds of reason. It is the intention to seek to communicate and express that which we cannot explain immediately.

We could have chosen a more technical term to incorporate beauty in the National Plan for Early Childhood, such as the right to aesthetics, the right to perception, creation, and interaction with the world through the senses. Yet, the word *beauty* synthesizes the twin intention of inserting aesthetic emotions that can transform and leverage the abilities of young children into an essential place and, at the same time, advocate for the right of each of them to reach the pinnacle of their individual destinies. The right to beauty encompasses respect for the individual child's sensibilities and his or her place within the larger collectivity and space.

Beauty, in its unlimited forms of expression, can and should echo in the beauty of newborns, young children and those yet to be born. It is a right of all children and of all childhoods. All of them carry within themselves an aesthetic emotion; they want to overcome all that is bad, transform all that is ugly, build harmony. Children not only seek beauty continuously: children are in fact beings of beauty: they feel, produce, and communicate within beauty. In its interior, beauty contains the incalculable speed and scope of the child's potential.

Beauty resides in the arts and sciences. Yet, these do not comprehend the totality of beauty, which does not allow itself to be circumscribed merely by forms, by knowledge. The right to beauty runs through life in all of its dimensions. It is like a guiding thread that gives unity to the fragmented actions, feelings, thoughts, persistent search of the human being for what is good, for what is best.

We find beauty in the intensive care units for premature children when the vibrations of the mother's or father's voice passes through the

incubator and mutes the whirring of machines, when they caress the child's body and infuse health workers with the hope of life. We find beauty in the simplicity of a gaze cast in the delivery room at the moment the infant is bathed for the first time, in the loving gestures of a young woman deprived of her liberty nestled with her newborn. We find beauty when contemplating a cloud floating by, in a preschool garden, in a courtyard full of children playing... The everyday places are spaces in which beauty courts, embraces, invites, and enchants.

When an aesthetic emotion is produced in the eyes of a child gazing at a work of art, the moment represents an act of revelation. It is not about knowing, but about discovering. Wonder does not require previous knowledge, mediation, or a prior experience. Upon seeing a bonfire, an infant's startled and astonished eyes fixate on the ascending movement of the flames. A child crouches in a garden to breathe in the fragrance of a flower, ears perking up to hear the sound of a flute in the distance, stopping to listen to the ringing of a far-off bell. These are instantaneous, indescribable, surprising experiences of beauty.

Beauty flows from humanity's origins, from the earliest formation of the human being. And from before that, because women and men carry the millenarian history of an admirable evolutionary march in the depths of their souls and the marvelous and complex biology of their bodies that attain the capacity to love, to reflect, to dream of a more beautiful world. Men and women are born with a thirst for beauty, which induces an eruption within them of the purest essence of what is good and true. Perhaps it was with this in mind that François Cheng, of the French Academy, wrote: *Each experience of beauty, so brief in time, even as it transcends time, restores to us back the freshness of the dawn of the world.*

Beauty is an act of delicate transformation of representations. A poetic act in the etymological sense – *poiesis*: event, creative act.³⁸⁸ Making, creating, and transforming are acts of beauty. To this extent, beauty is dynamic, transforma-

³⁸⁸ CASTRO, Manuel Antônio de. A Globalização e os Desafios do Humano. In: Revista *Tempo Brasileiro*, 201/202. *Globalização, pensamento e arte*. Rio de Janeiro, abr.-set., 2015, p. 19: *We refer to poiesis as the permanence and transformation of reality; hence, it is original and radically poetic.*

tive motion. Like a waterfall, it is the child of this very instant, vertical time, the here and now, the time of *kairos*,³⁸⁹ early childhood. Manoel de Barros says that *Poetry is the childhood of language*. In line with this great *poet of childhoods*,³⁹⁰ for whom poetry is the *voice of birth making*, we can affirm that primordial poetry is the early childhood of language. Poets García Lorca and W. Wordsworth and researchers such as Colwyn Trevarthen³⁹¹ have already told us that children are born poets. Anyone who approaches a young child should come prepared with pen and pad to hear and transcribe their poetic beauty.

As a right, beauty is permanent; as an expression and sensation, it is ephemeral and lasting: it is as present in the transitoriness of the instant as in the wrinkles that time etches on the hands and faces of our grandparents.

Children are capable of perceiving the beauty of the world because they are capable of feeling aesthetic emotion. To deny them the ability to perceive the world around them would be akin to *anesthetizing them*, that is, administering an injection to block the sensation of pain. Anesthetic in the etymological meaning of the word is the opposite of aesthetics: the injection of a product that nullifies the effect of sensory perception. An anesthetic erases the aesthetic experience. This occurs in a way with audiovisual experiences on digital screens, which anesthetize the senses: touch, smell and taste are mutilated, sound and image compacted, reduced to two dimensions, without resonance. And live interaction disappears and, in its place, passive assimilation, the anesthetic. Recent discoveries locate the child in the field of hyperesthesia, the hypersensitivity of childhood feelings. Sensitivity exhibits an intense upward curve in the first years of life before falling after puberty, manifesting the full capacity of aesthetic emotions in early childhood. This would explain why we have such profound memories of the smells, sounds, images, and tastes that marked

our early childhood years.³⁹²

Another ability children possess is synesthesia, the ability to associate senses and integrate sensory perceptions. Flavors produce chromatic reactions; smells can be associated with sounds; touch produces a kinetic sensation; as well as other combinations with multiplier effects. Manoel de Barros has a verse that speaks to this inter-sensitivity: [...] *where the child says: I hear the color of the birds.*³⁹³

The Romans associated the senses to different intellectual abilities: touch to care; the ears to attention, understanding, discernment; smell to perception of the future; sight to the ability for perspective or prospective analysis; taste to proper judgment, knowing. The fact that infants put everything in their mouths suggests that this is a mechanism to access the biochemistry of elements or a way of knowing through taste.

In childhood, as at any age, beauty sparks curiosity and reveals itself in the act of searching. It arrives by the hand of enchantment and walks in joy. It unveils itself in wonder and reposes in excitement. It is pregnant with mystery and emotion. Its essential acts are found in sensitivity, subtlety, tender caring, delicacy, gestures of respect and love, the passage of chaos into order and order into chaos. Beauty is in that which provokes small and large aesthetic emotions. Emotions that emerge when giving value to the demeaned, visibility to the invisible, delicacy to crudeness, silence to noise, giving music to lack of sound, joyful noise to somber silence, making a firm gesture, but one without hatred that triggers aggression, giving beauty to that which is worst and most toxic. Beauty, after all, is not just found in the blooming rose; it also resides in the way we breathe life into the dead flower.

³⁸⁹ *Kairós differs from Cronus* (chronological time measured by a watch): its nature is qualitative, it is the opportune time, the moment at which something special happens.

³⁹⁰ See his trilogy: *Memórias inventadas* – 2002, 2006 e 2007.

³⁹¹ Available at: <https://en.wikipedia.org/wiki/Colwyn_Trevarthen>. Accessed: 29 June 2020.

³⁹² A lemon cake (called a *madeleine*) and a cup of tea are what inspired Frenchman Marcel Proust to write his classic: *In Search of Lost Time*. Proust attributes the recovery of lost memories from childhood to the delicacy. *No sooner had the warm liquid mixed with the crumbs touched my palate than a shiver ran through me and I stopped, intent upon the extraordinary thing that was happening to me*, reports the narrator and protagonist of *Swann's Way*, the novel's first volume. The reaction sparked by taste and, at times, smell – is called a memory trigger.

³⁹³ Poem: *No Começo era o Verbo*. In: *Poesia Completa*. São Paulo: Leya, 2011.

Children, including those with sensory difficulties, are capable of perceiving vibrational frequencies at an extraordinary level. Vygotsky found that children who are born with a sensory disability compensate through heightened use of other senses. A group of infants is a group of musicians: their hearing approximates absolute hearing. The skin of young children describes arcs of tactile sensations that adults cannot even begin to fathom. Flavors and smells have a glandular dimension that connect to our most profound memories. And what about the intensity of colors, the enormity of worlds or the clarity of contrasts? In the first years of life, millions of synapses are triggered, as the senses capture vibrational frequencies at levels approximating maximum sensory perception. *The emotional experience of admiration and wonder sublimates the ordinary into the extraordinary and renders life more flavorful, full of the micro moments of happiness. This emotional experience is based on the capacity to discover, recognize, and take pleasure in marveling at all forms of beauty and all that touches the senses.*³⁹⁴

The right to beauty means the right to not have any of the senses injured by unnecessary sonic aggression, morbid silence to needs, lighting that harms the eyes, the cold absence of touch to the skin, odors that assault the sense of smell, gestures that hurt, painful stimuli (in the etymological sense). Let us not take this right away from children by polluting their eyes, their ears, their taste. Let us not allow heavy hands and violent gestures to take the place of respectful contact; harsh and humiliating words to defile the tender memory of lullabies; the child's trust in the adult to be betrayed by exploitation of the body. Children have a right to beauty in all gestures, all words, all glances, in everything they see. This is not about wishing that children live in an idyllic world but that they be protected from that which robs them of their being and, instead, launched toward realization of their life project. The child is a person in a fundamentally primeval sense, who reverberates from behind a mask; the child is voice and cathedral all at once.

Subjecting the child to spaces where aesthetic is disregarded, places overwhelmed by ugliness

³⁹⁴ BAZINET, Julie. *Éduquer les Enfants avec la Psychologie Positive*. Éditions Jouvence.

and sensory aggression, is to deny the child the right to beauty. Take the extreme example of «incarcerating» children with mothers detained in correctional facilities or housed in shelters for female victims of domestic violence or the threat of domestic violence. Instead of spending their days and nights with people drenched in sadness and afraid for their own lives, children have the right to coexist and play freely with other children their age. Where is the beauty for these children? In creating an ambience of integral development for these children, as required by the Early Childhood Legal Framework³⁹⁵ and this Plan, we seek for them rays of beauty within the cracks of their precarious condition.

Every space can be transformed into a place of beauty: provided there is tenderness, sensitivity, gentleness, respect, and simplicity. But insincerity, excessive noise, rigidity, ostentatiousness, imposition, excess... sully the environment and the things contained in that environment. Chapter 7 (*The Child and space, the city, and the environment*) outlines the parameters for effecting the necessary transformation.

There is beauty in the environs, the home, the street, the neighborhood, the community, the city, nature. We are responsible for it and are duty bound to cleanse it of *impure tailings*.³⁹⁶ Our relationship to the environment should involve mediation – as it possesses, in this sense, a sacramental symbology – between the limits of the present and the open spaces that lie beyond.

Beauty in human relations as a key for access to the creation of secure bonds and expanding the scope of affectivity

There is another ontological source of beauty: it resides in the essence of each human being and is expressed in the desire for happiness, friendship, love, family, solidarity, compassion,

³⁹⁵ Article 19, which amends article 8 of the ECA by introducing, among others, the provision in paragraph 10.

³⁹⁶ Reference to the writings of Olavo Bilac on the Portuguese language: Last flower of Lácio, unlearned and beautiful, / It is, at once, splendor and sepulture: / Native gold, which in impure tailings / The brutal mine mourns among the rubble...

admiration, ecstasy, strength to do good, truth seeking, endeavoring for a more dignified, more just, more fraternal world. That beauty accompanies the person from conception to death and acts as an internal impulse to go beyond oneself, where men and women hope to find peace, happiness, immortality. The meaning of beauty is connected to the profound being of the child, to the motor that gives life itself meaning on the road to achieving fullness.

To deny this right in the first years of life is to surrender the best of humanity's essence: meeting of the other. We need aesthetic emotions to travel the finest paths of life's symbolic mirrors with our peers and non-peers. Beauty is how we find understanding with those who are different, dissimilar, with strangers, with those we do not understand, with those who provoke fear or speak another language. It echoes in the different contexts, in the absent halves that complement us and make us better people, helping us realize our broader meaning within another's heart.

Beauty is braided in early childhood with the invisible thread that interweaves human relations and gives us confidence, creates, and strengthens bonds between caregivers and children. This can happen in everyday life, but receives an extra boost when interaction occurs in cultural activities, play and other shared activities. In an urban society in which everyone endures the pressure to produce and consume, the times and spaces for interaction between caregivers and children are increasingly reduced. Expanding the possibilities for experiences of shared beauty, bonding, safe attachment between adults and children in urban centers, at all income levels, is a necessary and urgent task.

Living with young children teaches us – adults without time – the beauty of slowing down, shifting gears, walking at a more leisurely pace. We discover beauty in the infinite happenings and meetings that take place during a short stroll. It is as though each of us were *Walking with Tim*.³⁹⁷ The

child shows us how to look at the world in another way, one that unveils beauty: contemplation. In this way, the child teaches us the difference between seeing, observing, and contemplating. Contemplation, for example, gives us the opportunity to discover the infinite microscopic spaces in the child's meticulous observations. Coexisting with early childhood in a profound and ample manner allows us to discover that beauty is intimately connected to everyday life.

When the child is before us, we are before their five senses. And, in addition, a sixth sense, namely extrasensory perception, intuition.

The senses are beauty sensors. In children, they vibrate with far more intensity than they do in us adults, capture sensations on an enormously broader scale than do our ears, our eyes, our skin, our smell. For this reason, respect for the child's capacity for aesthetics must always be present when touching them, speaking to them, looking upon them, in our gestures toward them, when giving them something to taste, eat and drink. If a certain medicine is bitter for the child, there is no harm in letting them know this beforehand and encouraging them to try it anyway; let us abandon the deceit of telling a child that a shot will not cause pain, that little boys do not cry, that the other little boy did not grimace; instead, tell them that it will hurt a little bit, but that the pain will pass quickly; if the child does not want to put on a coat, in spite of the cold, instead of forcing their arms into the coat sleeves, and possibly hurting them – and triggering their anger at being forced to wear the jacket – all acts of ugliness –, we could talk to them about the sensation of cold and heat, invite them to feel the cold air outside and compare the sensation with and without the jacket – all acts of beauty! And, thus, beauty becomes essential nourishment, a dimension of everyday life.

When we are absent,³⁹⁸ an object may appear to represent (re-present) a part for the whole; the mother may be represented, in her absence, by a smell bathed in a fabric or a touch that con-

³⁹⁷ The video *Walking with Tim* provides an example of the child's extraordinary sensibility to what he encounters along the road, with his mother, on the way from home to school. Available at: <<https://www.youtube.com/watch?v=1dYukOrq5RI>>. Accessed: 19 June 2020.

³⁹⁸ WINNICOTT, D. W. *Jeu et Réalité. L'Espace Potentiel*. Editorial Folio Essais. Available at: <<http://www.folio-lesite.fr/Catalogue/Folio/Folio-essais/Jeu-et-realite>>. Accessed: 30 June 2020.

tures the shared sensation of the skin when the child breastfeeds. Human beings have the capacity to evoke an imagined presence in absence. In this way, they can bypass conflict. Acts of beauty are often born impregnated by absence, desire. Beauty appears, revealing itself. Sensibility is the everyday exercise of unveiling and veiling beauty.

Taking care of the sensitive capacities of children, of the vibrations produced by touch, colors, flavors, and smells, is an act of responsible care by adults with their children. It is the first step to guaranteeing the right to beauty.

Restoring the sense of intuition and understanding

Beauty and intuition

Beauty has an affinity to intuition. The etymology of the word *intuit* (*in tueri* – to perceive intimately, instantaneously, have immediate and global perception) confers the idea of capturing breadth, totality, and interiority. More than just caring, protecting, it is seeing, contemplating. The etymological root of *intuition* suggests situating this capacity in the field of sensibility, subtlety, emotion. Reason leads us to a binary logic, separating *yes* from *no*; intuition, for its part, encompasses the totality. The child's intuition surprises us when we perceive that they *understand* us far beyond that we seek to reveal or what we believe they grasp about us. The infant's fixed stare on her mother reveals the mystery of the encounter, communication. If we think of it only in terms of *imitation* or a *boomerang effect*, ping-pong, we remain fixed on the outer cover, the objective fact, that which is measurable in the external gesture. And though this may be beautiful, more beautiful yet is connecting to the subjective perception of the mother-child relationship. If we immerse ourselves in the meaning of this exchange, the power of the feeling of unity, we enter into the realm of subjectivity, the affective bond and love. It is the kingdom of beauty, from

which all external gestures and meanings should flow and to which these should return.

Beauty and understanding

The etymological root of *understanding* (*in tendere*) is to extend, stretch knowledge, tend toward, reach out, come close, to be together. It is the capacity to relate, share. It has the same sense as to understand, that is, to attach to another. Jean Piaget identified the importance of the initial gesture in the newborn's act of clasping the person's finger. From birth, children have the capacity to understand.

The right to beauty also refers to the capacity for collaborating, for tender understanding of human beings, a trait that reveals itself as early as the ninth month of life. Beauty inserts itself in the capacity for understanding the affective and intellectual ties the child needs to exist, as if it were an invisible thread that sustains the delicate and vital fabric of primary bonds. It is the art of understanding ourselves through the act of stretching our sensibility to *ex-tend* the bonds between people. The right to beauty of different childhoods refers to the primordial possibility to connect through the aesthetic emotions contained in the diversity of cultural roots with the dynamic motor of human evolution. It is not an expendable right or restricted to one culture or another, to one childhood or another.

The beauty of each child's singularity and of blending into the collectivity

We consider the collectivity of early childhood with the awareness that no two children are the same, including identical twins. They may be physically similar, but each child occupies a singular and unique space and time. This observation creates a different perspective in regard to



the child's environs and singularity. Each child possesses their own sensory-perceptive capacity, a particular and distinct sense of beauty.

The right to beauty assumes that there are different perspectives and ways for the child to resonate in their environs, through expressiveness and personal affective bonds. This does not mean that beauty cannot be shared, exchanged, understood, and interwoven in the collective.

We are pushed, instead, to see the right to beauty as an unalienable right of the human person. Beauty is found in the ontogeny of each human being and leads the individual to see the world in a unique manner. Each child has the right to their own sensibility, to a particular language of aesthetic emotion and a distinctive regard of others. These differences are highlighted by the diverse forms of each childhood, the legacy of each child's cultural tradition and family and community environ.

Everyday situations for creating beauty in the lives of children

Our capacity to perceive beauty – to astound and enchant ourselves – is directly related to the capacity to sublimate the ordinary in the extraordinary of everyday situations. Our sensitive gaze, slow and drifting with the child's, can serve as an irresistible invitation to the child's own enchantment, wonder, connection to beauty, feeling of the aesthetic emotions that lead to beauty. Appreciating the small moments of everyday life is to live beauty: they open possibilities for the child to connect with anything larger than themselves.

If we were to simply to give primacy to the objective dimension of an act aimed at instructing the young mother to breastfeed her infant, we would render the two individuals of secondary import to the relationship: the act may be technically perfect, but it is formal, without beauty. If the focus of our attention on this act of caregiving rests, instead, on the infant receiving nourishment from the mother who, in turn, nourishes her child, when considering a given technique that might best work to resolve a difficulty they may be facing, both individuals,

mother and infant, will feel the deeper dimension of the act, and the attendant sentiment will infuse them with a sensation of wonder, ecstasy. This manner of acting of acting and seeing transforms everyday life: penetrating the exterior layer of a technique to touch the systoles and diastoles of the heart or, put another way, the beauty that both individuals create.

Two more examples to connect this argument with the chapters in the PNPI. If we see play as an instrument to shape a specific skill for thinking – such as analysis of alternatives, logical organization – or competency for taking action – like stacking objects of different sizes –, our focus will be on the action and the product of that action, not the child as a person who plays and, in playing, does what they like to do: test, discover, create, feel the sensation of challenge, persist, exult in success. Mental and motor skills emerge from this process because they are an elemental part of the nature of that process, instead of something sought from outside, in which case play would represent a *method* or path. The words of Antonio Machado pertain here: *Wayfarer, there is no way; make your way by going farther*. If children are encouraged to jump rope as a way of developing their gross motor skills (as the turning of the rope with one's arms and the simultaneous or alternating jumping of the feet require synchronization), a curricular objective intercedes to stereotype the game, causing it to lose its delight and become, instead, a didactic exercise. Imposing meaning on children's play through an external objective renders them disinterested and joyless.

In adopting a different perspective, we restore to children their role as co-authors of their activities. We ourselves sit in wonder and excitement at their discoveries, creations, and joy. Together, they and we forge a path to beauty, to living it. If we were to simply adopt four Sustainable Development Goals (SDG) that formally encompass young children as part of the effort to advance action on health, education, gender equity, poverty reduction and promotion of a culture of peace, we would simply remain tied to the sphere of objective action aimed at enhancing their quality of life. But if we were to extend our hand to children who lack access to health assistance, respect, the promotion of gender equality and better living conditions, lif-

ting them up to the same level as the more fortunate, we would be left astounded by the human face of the SDG, as children transitioned from the ordinary to the extraordinary, from the commonplace to the unexpected, from the shadows to amazement.

The child's right to beauty is not an adjacent right to others, nor is it a subsequent stage that crowns their realization. It stands alongside, is located within, emerges from the interior of each right pursued, fulfilled, guaranteed. In this sense, it spans all other rights, all of the time, in everything the child does and that is done for the child.

Support the aesthetic sensibility of the child

The task of pedagogy is to decipher the aesthetic sensibilities of the newborn and accompany the child to the most remote recesses of their being. Every human being has the possibility to summon beauty and transform each act into a gift that celebrates life. This does not mean that sensibility cannot be exercised. To the contrary: if we do not exercise the sense of beauty in each child, if we do not foment the very act of extending the limits of sensibility, it will fall into disuse and atrophy.

Parents and early childhood education professionals can, for example, invite, suggest, join with their children in things such as:

1. Activating the potential of the five senses: *smell* the flowers, distinguish the smell of plants in vases, in the garden at home or at school, perhaps bilberry, lemongrass, green sage, basil, rosemary, marjoram, pennyroyal, parsley, scallion stalks, citrus leaves, such as lemon, orange, tangerine, Surinam cherry; *touch* different materials, including wood, plastic, rock, water, sand, soil, comparing temperatures, resistance, weight; lightly run hands over green leaves
2. Observe the stars, the clouds, flocks of birds in the sky, the changing shapes of the moon, discussing with them why shapes transform before our very eyes.
3. Encourage children to feel the wind on their faces, skin of their arms, hair. The experience can take place in a supervised setting in front of a ventilator run at three different settings, in the home or at school.
4. Taste new foods, describing the flavors of each with as much detail as possible.
5. Celebrate the Festival of Nations in preschool, enabling children to research different traditional attire, view photographs of people from various parts of the world, monuments and landscapes, marvel at the beauty of nature and culture.
6. As part of a pedagogical project, organize field trips in the surrounding areas of early childhood education establishments, observe differences in the terrain and landscape, photographing and filming (as they do at the Reggio Emilia preschool) and, on returning, display the photographs, create drawings, and build scale models.
7. Contemplate the dances of different cultures, ice skating, acrobatics, rhythmic gymnastics (illustrating the human ability to overcome and transcend).
8. Show photograph books and videos of the most beautiful landscapes in the world, observing the contrasts between frigid and hot areas, mountains and valleys, forests and deserts, life in the deep ocean, a journey through the galaxies.
9. Whenever possible, take children to muse-



ums (especially during a children's exhibit), theater and dance performances, the circus, musical concerts, object theaters, string-puppet theaters, etc. These occasions should provide a rich experience having no other purpose than the joyful sharing of aesthetic emotion.

10. Read and narrate inspiring stories and texts that contemplate the cultural diversity of Brazil and the world, our ancestries, our various religious traditions, valorizing the full range of values.
11. Marvel at each of the small beauties experienced in life, savor the most common of everyday life.³⁹⁹

We can help children observe, contemplate, discover, and admire what surrounds them or lies in the far-off distance (such as stars), offering the opportunity to experience grandeur, wonder, ecstasy.

Our long period of social isolation imposed on us by the novel coronavirus pandemic has produced chaos, suffering, disruption at home, frustration and anxiety in children and challenges to the relationship of parents to their children. This ugliness stems from a circumstance forced on us, but ultimately made necessary by circumstance. How to break out of the ugliness in which we find ourselves trapped and, instead, build outlets, extend limits, if not physical, then at least social, and psychological, if not real, then at least imaginary? Can beauty be built in situations of tension and suffering like the one facing humanity today (in March 2020 and over the following months)? And through this process can we apprehend beauty in gestures and beauty itself emerging in the relationships between parents and children at home, as David Moisés and *Ângela Minatti* suggest?⁴⁰⁰:

Mothers and fathers have lost their incomes, customers, businesses, stricken friends and relatives, and the majority seems to predict greater difficulties ahead. The little ones have lost, at least for now, school, the daily routine with classmates, free play time outside the home, field trips, and many have had direct contact with death in their own families or their closest circle of friends. There is real pain in the losses and the fear of losing still more — which may in fact occur.

The necessary space and time must be provided to embrace everything that flows from children. If they are able to express what they feel in gestures and words, they will have a better chance of coping with hardship. Adults can help by not fleeing from the issue and, more important yet, by reading them fairy tales or children's stories with narratives about loss. Or they can tell their own stories, imparting how they feel and how life continues its forward march.

The virus should also be talked about extensively. Children need to create their own image of this small invisible thing that makes people sick, in order to process the thoughts and feelings they have about it. For many of them, coronavirus will be a cartoon character and depicted, at times, humorously. The important point is that the virus be transformed into an object that young children can twist and shake with their imagination, until it becomes a symbol and makes sense in their internal constructs. Through this process of appropriation, children will have lived an experience in which anguish plays its role.

Beauty in the chapters on purposeful actions in the PNPI

For illustrative purposes, we set out situations, some imagined, others drawn from lived experiences, that allow us to experience beauty in

³⁹⁹ These suggested ideas are based on a list assembled by Julie Bazinet in: *Eduquer Les Enfants avec La Psychologie Positive*. Éditions Jouvence. Available at: <<https://editions-jouvence.com/livre/eduquer-les-enfants-avec-la-psychologie-positive/>>. Accessed: 4 June 2020.

⁴⁰⁰ David Moisés and Ângela Minatti, published Article. Available at: <<https://cuidadocriancas.wordpress.com/2020/06/01/a-grandeza-de-ser-mae-e-pai-nesses-dias/>>. Accessed: 2 June 2020.

the everyday lives of children and the adults with whom they interact *in* and *based on* the actions recommended in the Purposive Actions chapters set out in this Plan. The professionals who undertake these actions with sensibility – and with the subtle, caring gestures – and the children who live the aesthetic experience they produce are capable of feeling a profound sense of well-being, truth, and beauty.

Would these not be ways to insert beauty where it is in short supply, or better yet, to reveal it where it already exists, but has simply been obscured, as the Boy with Green Thumbs did when coaxing flowers into bloom everywhere he went,⁴⁰¹ to lift children out of chaos, to *gaze beyond*, where beauty has a kingdom that awaits us? And from where we could set out, hand-in-hand with children, singing Chico Buarque's *João e Maria!*⁴⁰²

1. Chapter: Healthy children

Situations, actions, gestures, and expressions of beauty:

A mother breastfeeding after a difficult delivery; a mother, father or other caregiver in the neonatal ICU expectantly gazing at their newborn; the successful separation of Siamese

⁴⁰¹ DRUON, Maurice. *O Menino do Dedo Verde*. Editora José Olympio.

⁴⁰² *Now I was the hero / And my horse only spoke English / The cowboy's fiancée / It was you and another three / I face battalions / The Germans and their canons / I had my slingshot / And played rock for the matinees.*

Now I was king / I was the bedel and also the judge / And by my law / People had to be happy / And you were the princess who I had crowned / And you were so lovely to behold / Walking naked through my country

No, no, don't run away / Now pretend I was your toy / I was your top / Your favorite animal / Come here, take my hand / we weren't afraid anymore / in the bad times I don't think we had even been born yet.

Now it was fateful / That our pretend play end like this / Beyond this backyard / It was a night that never ends / Because you disappeared from the world without telling me / And now I was a crazy person asking / What is life going to do with me?

twins; a ceremony to deliver a baby kit to a family departing the maternity ward; the emotion of a father as he watches his daughter come into the world; a pregnant adolescent receiving understanding and safe harbor from professionals at a health center; youth playing with young cancer patients in a hospital; patient, loving adults listening to a child talk about their pain; the care taken in preparing a child for a surgical procedure; a trembling and hopeful hand resting on the body of a child as they are taken into the operating room; the smile of a sick child when *doctor joy* enters the room; the lullabies, the stories, the enchantment and the play shared by mothers, fathers and health professionals caring for children with disabilities; the skill of a pediatric orthodontist treating a mentally disabled child; the psychologist forging a trusting relationship with an autistic child; a letter written by a mother to a child who has departed following a long convalescence.

2. Chapter: Early childhood education

There is intrinsic beauty in:

A caring teacher transmitting confidence to a child adapting to daycare; the child's evolution from crawling to walking, a moment celebrated as a rite of passage toward autonomy; a child soothed and put at ease by the teacher's gentle rocking and kind words; the newborn sleeping peacefully in her or his crib; the child triumphantly bringing food up to his or her own mouth without the teacher's help; children exercising the freedom to serve themselves at meal time; young children sitting motionless and with fixed gazes at a theater performance; a teacher resurrecting a lullaby from her own childhood; a teacher singing a calming melody to a crying child; our appeals for forgiveness from a child; our inability to ease a child's sobs and offer our gratitude in watching the



tears wash away; a teacher sharing experiences from her childhood; early childhood education workers assimilating the personal and collective consciousness that they are all educators; children collaborating to build a mountain out of pillows or a tower from wood blocks; children gathering in a circle to plan the day's activities with their teacher; children of different backgrounds coexisting without rejection or withdrawal; the group welcoming a child with disabilities with open arms; children sharing paint and pencils in the art studio; a class creating costumes to act out a story just read to them; children engaging in all sort of free play; children discovering the other; the collective experience that fosters construction of *us*; expanding the universe of children's experiences, illuminated by the National Common Core Curriculum; a parent-teacher meeting to discuss a pedagogical plan in which children's learning is the central concern.

3. Chapter: Children's families and communities

There is intrinsic beauty in movement:

When the father rushes home to be with his children; when he feels pleasure and freedom in playing, listening, talking and singing with them; when the mother or the father stroll with their newborn, introducing them to and commenting on a thousand things; when a sibling hugs and cares for the newborn; when a community, such as a village cares for the newborn; when parents teach their kids a game or play activity from their childhood; when a neighbor finds a child lost in market and returns them to the parents; when parents understand that the time shared with their children is as important as the time spent working; when a community celebrates the birth of a child; when smiles and gazes create community through intergenerational gatherings; when a mother can leave her child at a neighbor's house in the afternoon, knowing the they will be well cared for; when the father reads a different story to his children

every night; when the mother transforms the breastfeeding experience into a ritual of rhythms, songs and stories, weaving deep bonds of affection; when household chores are shared by everyone, making them an act of mutual care, affection and respect.

4. Chapter: Social assistance to families with young children

We see beauty:

When government institutions endeavor to guide, shape and guarantee the constitutional precept that we are all responsible for each and every child; when community networks support protection for children in neighborhoods, urban enclaves and on the streets; when the collective commitments of families in socially vulnerable communities are created and strengthened through the shared use of kitchens, home construction and maintenance, sewing and knitting, sidewalk and sewage drain repairs, sports activities, mechanics, carpentry, and metal work, etc.; when the social worker succeeds in preventing the father who abuses alcohol or narcotics from committing an act of violence by helping him secure employment and reclaiming his own dignity; when sports and cultural activities are shared; when social assistance professionals care diligently for the bodies and mental health of children by restoring to them their self-confidence; when we play with children without fear of creating affective bonds and lasting ties; when a community relations network is promoted through circus, theater, dance, music, painting, sculpture and other activities and whatever else its inventive creativity conjures; when social workers forge a network to serve homeless persons; develop environmentally-conscious projects in the community with recycling pickers; promote literacy learning and vocational training spaces and intergenerational cultural activities, such as group dances, choirs, birth celebration events, birthdays, weddings, as well as bereavement events; help repair broken family bonds; transform abandonment into reunification and provide families with tools for resilient

ce; promote the rich cultural archive of early childhood (lullabies, fingerplay, stories, group and individual dances, poetry, play without toys, play with unstructured objects, etc.), for mothers, pregnant women and young children in vulnerable communities through free workshops; create shared play activities with young children, learning to actively listen for the dramas externalized by children in games and play situations, who, through play, create processes that transform suffering into sensations of relief, confidence and freedom.

5. Chapter: Family and community coexistence for child victims of rights violations: Institutional sheltering, affective fostering, host families, adoption

There is beauty:

In the community that serves as the central socio-familial entity in the absence of the family; in the policy priority given to families in vulnerable situations or at-risk, to families whose rights to perform the protective role of primary caregivers and educators has been violated and to families with disabled children; in the persistent effort to ensure, above all, that the child remain with their family of origin and, where separation is strictly necessary, to strive to reunite the family; in successful follow-up and support services to ensure children are placed with extended family or within their significant network, in order to prevent rupture of the family unit or enable unification or reunification of the family; in the initiatives undertaken to place the child with a host family; in the efforts of social assistance professionals to assure that infants who arrive at institutional shelters and host families are nourished with maternal milk if direct breastfeeding is not possible; in the joy of children in an institutional shelter running over to embrace those arriving to visit them; in seeing sheltering institutions empty because children have returned to their families, been fostered, gone to a host family or been adopted; in the mother's decision not to surrender her child for adoption after a talking to a psychology professional; in safely placing the child for adoption when the mother is certain of her

decision; in preparing children and families for adoption; in the effort to reduce illegal adoptions and child trafficking to zero; in campaigns that promote adoptions of children with disabilities housed in sheltering services; in the decision of lawmakers to vote down legislative proposals authorizing directed or *intuito personae* adoptions; in departure rituals; in the interest of professionals within the rights guarantee system to establish appropriate environments to ensure care and integral development for children whose mothers are deprived of liberty; in the playfulness of splashing the scent of perfume, soap and other aromatic items belonging to the mother and father on fabrics and clothes used by children, so as to allow them the opportunity to evoke the presence of their absent parents.

6. Chapter: The right of all children to play at playing

Beauty travels along the road of thoughts, gestures, decisions, and actions, including:

Approval of a municipal law requiring the creation of play spaces in cities; inauguration of new public squares with play equipment for children; the joy of children frolicking in a playroom; parents playing with their children; children of different ethnicities and cultures playing together without taking notice of their diversity; an embrace after a push; reconciliation after a misunderstanding over a toy; the understanding of parents and teachers that play is an activity which the child chooses freely and initiates, controls and organizes independently or with the group; adults exhibiting an attitude of respect for the fun, uncertain, challenging, mysterious, surprising, flexible and unproductive nature of play; the ability of play to reduce stress, depression, anxiety and behavioral disorders in children undergoing health treatment or housed in institutional shelters by reason of protective measures; outdoor play, in contact with nature; the decision of a school principal and teachers to prioritize unstructured and natural materials, instead of factory



manufactured toys; play among children with and without disabilities; the installation of adapted equipment in playgrounds to welcome children in wheelchairs; inclusion in the Municipal Plan for Early Childhood of financial resources to purchase apparatus and other equipment for playgrounds, daycare centers, preschool establishments and other collective spaces accessed by children that are appropriate to the needs of children with disabilities.

7. Chapter: The child and space, the city, and the environment

We see beauty:

In the city that is recast from the child's perspective, repairing the social fragmentation and objectification of human relations, as described so eloquently by Carlos Drummond de Andrade in his poem *O Elefante*;⁴⁰³ in the works of community artists who paint the city's walls and other barriers; in the different expressions of children and childhood situations in the neighborhood; in the anonymous messages of gratitude painted on walls, but so important to intra-family and extra-family life; in the poems and welcome signs announcing the arrival of a newborn or the return of a loved one or, conversely, bidding farewell to those leaving the community; in the interventions of artists, in collaboration with children and families; in the aesthetics of neighborhood spaces, public squares, streets, schools; in the street as a habitat of beautiful community relations; in the social solidarity manifested during the novel coronavirus pandemic, captured in the delivery of food, warm clothes, blankets, medicine, psychological assistance, smiles and affection to those in most need; in the reclaiming of individual relations through children circulating and occupying public spaces; in the spontaneity of children to engage those they meet

⁴⁰³ Passage from the poem *The Elephant: So here he is, my modest elephant / ready to go out / looking for friends / in a bored world / which no longer believes in animals / which lives in suspicion of things. / There he goes, all majestic / fragile weight, fanning himself / and slowly shifting / his sewn hide / on which there are cloth flowers / and clouds hinting at / a more poetic world / where love brings back together / the forms of nature.*

on the street, including strangers, in conversation: bringing hurried legs to a stop, convincing closed mouths to speak, eyes to meet, smiles to ring out on serious and dour faces; in the sensory qualities of the space that create a special play environment; in the development of a Participatory Neighborhood Plan that considers the rights of young children, with a focus on gender, race, longevity, energy, environment and food security; in the passage of municipal laws that reserve spaces for health, education, social assistance infrastructure to foster leisure and play for children; in the establishment of municipal children's councils and their participation in city planning and redevelopment efforts.

8. Chapter: Children and diverse childhoods: Policies and actions for different childhoods

There is beauty:

In the act of bringing visibility to traditional populations and communities; in forming consciousness around the multicultural and multiethnic character of Brazilian nationality; in the evolution of public policies and professional activities toward the understanding that Brazil is composed of various childhoods; in the multiple public policy initiatives (education, health, food, sport and leisure, environment, culture, family and community coexistence, socio-educational measures, social assistance services) that respect the notion of childhood and the stages of life of traditional populations based on criteria other than *age-range*; in early childhood education for rural and peasant children that considers their ties to the land as a central component of their existence and, further, in the transmission of know-how and knowledge; in renouncing unfettered consumerism in favor of sustainability with a sensitivity to the land; in the affective connection forged with nature through the aesthetic dimensions of sensitivity, enchantment and capacity for wonder at nature's rejuvenation; in learning to respect the sacredness of nature (the beauty of this tradition: the Guarani-Kaiowá children of the Amambai village who ask the river for permission before bathing); in the pedagogical toys purchased by the Ministry of Education for early childhood education that respect

the environmental and cultural characteristics of communities; in the forceful reaction to racial discrimination, which continues to gain strength and expression in society; in the tradition of the Guarani-Kaiowá to name their children based on their poetic essence, their essential mission in the world; in the infant's relationship to maize in Guarani communities; in the relational networks of traditional cultures; in intergenerational knowledge transfers and learning without punishment; in the role traditional populations and communities attribute to early childhood; in the march to demand an end to racial discrimination and the murder of children in all circumstances and for any reason, including crimes motivated by race or skin color.

9. Chapter: Confronting violence against children

We see beauty:

In the profound tranquility of the child who receives kindness, attention and respect, no longer with aggression, no longer afraid that he or she will be subject to physical violence; in the care adults take to prepare the home and reduce the risk of accidents; in the regret of responsible adults who as contrition for the neglect that led to a child's accident take the child in their arms and ask for forgiveness; in the ability of a social worker to replace the logic of violence of a father or mother with dialogue; in a discussion group in which professionals consider alternatives to aggression within families; in substituting authoritarian and overbearing approaches with the art of listening, dialogue and persuasion; in restraining the hand that strikes and resorting, instead, words of understanding aimed at obtaining obedience through persuasion; in education strategies that do not rely on physical or moral punishment; in the act of the girl who says *no* to sexual exploita-

tion; in the courage of a child revealing to her mother or another trusted person that someone touched her body; in the activity that helps children participate in their own protection; in the actions of an engaged community to protect its children; in the child's initiative to seek help and speak up when necessary.

10. Chapter: Ensuring all children the citizen document

Beautiful moments encompass:

Selection of the child's name; the ritual of entering the child's name in the Civil Registry and guaranteeing the child's right to include the father's name on their Birth Certificate; the care taken to safekeep the Birth Certificate as a citizen document; the care taken by the maternity ward to ensure the family returns home with the infant's Birth Registration; respect for the child's name and avoiding nicknames that single out a given physical or behavioral characteristic and diminish, humiliate or in any way place the individual in an undesirable light; the campaigns launched to ensure that all children are registered and that the number of children remain without Civil Registrations is brought down to zero; any and all family activities that valorize the child's name, including: pretending to register their name in a make-believe registry office, writing and painting their name in different places of the home; keeping bottled messages with good wishes for the child that are created with the child's input; singing a lullaby in which the child's name is invoked; inventing a story or poem with the child; baking a cake with the child's name on it; using fingers to trace the child's name on water, sand, the air; inserting the child's name for a character in a story or legend that narrates an ethnic group's tradition; stitching the child's name on the parents' clothes and the names of the parents onto the child's clothes, in order that they can symbolically embrace when apart.



11. Chapter: Protecting children against consumerist pressures

What specific beauty, in the form of admiration and wonder, embodied in this achievement has the National Plan for Early Childhood contributed toward?

The social consciousness that the mechanisms employed in advertising to seduce children and that appeals to consumerism pervert health, aesthetic and sustainability standards; responsible and conscientious consumption is today a cross-cutting theme in pedagogical planning; teachers and other staff at early childhood education establishments now examine their own consumption patterns; early childhood educators have included critical analysis and use of media in their discussions and activities with children; child advertising, proscribed under the applicable legislation, has been effectively removed from media outlets; early childhood education establishments have created opportunities for teachers to address media issues with families from a critical perspective, leading to greater awareness within households as to its influence over children; unhealthy foods and beverages high in sugar are no longer sold in school cafeterias; mothers and fathers now receive guidance from their children's pediatricians on healthy nutritional habits and how to prevent consumerism in childhood; meanwhile, children are learning to enjoy healthy foods by modeling the habits and tastes of their parents.

12. Chapter: Preventing early child exposure to media and digital screens

The beauty:

Of the adult who makes quality time, without a watch or clock, cell phone or digital device within reach, to be present and interact with a daughter or son; of shared time, with TVs and cell phones switched off, freed from consume-

rist pressure to use the time, instead, to tell a story, play, not with toys, but with whatever is at hand; of the parents who exchange their time in front of the TV or tablet for a walk or an adventure; replace their attraction for digital screens with the engrossing collective pleasure of crafting a painting, a sculpture, a woodwork piece, completing a jigsaw puzzle, playing with unstructured objects; of those who strike a balance between household work and participating with the child in creative endeavors, who invite the child to take part in make-believe cooking or cleaning while performing household chores; of engaging with the child in a manner that make screens unnecessary, unimportant and more tedious than the parent-child interaction, such as dancing, playing music, creating a make-believe play, producing a film, preparing a birthday party; of acting out television content live, muting the sound on a film and dubbing it instead; of parents who provide a positive example by not persistently using the cell phone when their children are close by; who refrain from placing a smartphone or tablet in an infant's hand as a way to distract them or pique their curiosity; who ensure children under the age of 2 years do not handle a cell phone; who set firm limits on daily screen time for children from the age of 3 years and up, as recommended by the Brazilian Society of Pediatrics; of the working parents who are able to have a dialogue with their children on the appropriate use of digital devices.

13. Chapter: Preventing accidents in early childhood

We admire the beauty:

In the balance between trust and fear, challenge and technique, experience and knowledge, dialogue and listening, more leeway and more careful attention, thought and prevention, hand-in-hand, child and adult, as essential elements in molding the art of safety to prevent accidents; in the care taken to ensure safety that begins in the initial stages of movement and body control, acknowledged by parents and educators as

part of the child's proprioceptive experience and search for balance, as they explore their psychomotor intelligence in the face of the challenges of gravity;⁴⁰⁴ in the infant's free and spontaneous activity within an environment of physical and emotional security;⁴⁰⁵ in discovering, together with the child, the need for play and experiences with soil, water, air and fire, with a careful eye to potential hazards; in explaining the dangers of heights through playful balancing activities performed from low heights up to slightly higher elevations with the use of appropriate padding to cushion falls; in preventing accidents involving fire through educational play with small candles; in learning to accept small scrapes and cuts as a way to prevent more serious injuries; in inventing creative ways for communicating to children the need to respect the risks associated with hazardous and poisonous liquids and other products, as well as motor vehicles and their potential to cause pedestrian accidents, holes in sidewalks, wells and cisterns; in progressively achieving refined psychomotricity with safety when handling sharp and pointy household objects; of learning to actually feel that the things that hurt a friend also hurt the child's own body; in seeing the child act with responsibility and engage in active thought through dialogue with the adult about their own safety and the hazards around them.

14. Chapter: *The child and culture*

Beauty blossoms in the scenes...

Of families watching a theater performance for the first time, participating in a parent-child theater workshop for the first time and playing with a two-year-old daughter for the

first time; of fathers moved by the love these experiences stir in them and the child; of the parent and child gazing at each other and embracing; of a father holding a crying child at bedtime, who reads a story from a wonderful illustrated book and sings a tender lullaby until the child drifts asleep peacefully in his arms; of the mother whose relationship with her blind child of almost 2 years of age is transformed in the course of a music and theater workshop, the initial aggression and distance giving way to a child riding *piggyback* on her mother as she departs, the two intertwined in an embrace of pure happiness; of sight-impaired children under the age of 3 years attending a lyric theater production enveloped in a labyrinth of veils and colors that allow them to experience the colors through their taste pallets, vibrations pulsating their skin and the heightened capacity for hearing, impervious to distraction; of 180 people of different generations (infants, children, adolescents, young adults, adults, elderly) in the Guarani-Kaiowá village of Amambi, gathering in a space with a capacity for 80 occupants to watch a children's theater production, curious to witness firsthand a company that had traveled through countless countries and continents over the course of 20 years, everyone moving slowly, quietly, to take their seat, conscious of their belonging to a group, of being part of a single organism, breathing in unison with the performance; of a children's dance troupe, in which the performers imitate the movements of children under the age of 3 years in their essence and intention; of mothers, fathers and children 3 to 6 years of age participating in a workshop to learn and rediscover the wonder of lullabies they may have forgotten or never heard; of a group of mothers, fathers and children in a disadvantaged community, mired in extreme poverty, leaving a children's theater production thoroughly moved, with joy in their eyes, revealing that they had captured the meaning of the performance by their children's emotions, gasps and chills, vocalized in synchrony with the troupe; of a theater and music workshop with six children diagnosed as having autistic spectrum disorder, three artists, a physician specialized in autism and the children's parents that erupts

⁴⁰⁴ Instituto Pickler Lóczy. *Moverse en Libertad*. Available at: <<https://www.youtube.com/watch?v=dxWCR0ruwWk>>. Accessed: 23 June 2020.

⁴⁰⁵ The beauty in the close observation and research into infants by dancers and choreographers, inspired by the exploratory movements of each infant, with a view to discovering the origins of syntactic movement and, in this way, creating contemporary dance and choreographic techniques that do not overexert or injure the body.

in a moment of sudden chaos, noise and total disaster (with children hitting other children, pounding on the piano and striking out at the actors), whereupon one of the actors begins to run around as if on a sinking ship, calling for help, stumbling from side to side as though caught in a storm, with everyone around him drowning, only to have the children, the pianist and the actors join in on the game all at once and, in an instant, achieve the very pinnacle of beauty: the children joining together to save the actors in their cries for help, culminating with one of the children taking an actor in her arms to say: *don't worry; I'll take care of you, I'll save you, I'm your mother...*

15. Chapter: The Justice System and the child

There is beauty in these transformative changes:

The various bodies of the Rights Guarantee System resolve to discuss and draw up a coordinated action plan; the National Pact for Early Childhood is developed; a training program qualifies hundreds of legal practitioners on early childhood policies and plans; public attorneys, public defenders, and child and youth judges become knowledgeable about the meaning of children's first experiences and how the individual's personality, emotions, bonds are formed in the early years of life; the offices of public defender created new specialized children's rights divisions; incarcerated mothers with their children in their arms sing a tender and soft lullaby to ease them to sleep, muffling the sound of keys on the prison doors and the hard, cadenced steps of correctional offices; women deprived of freedom create a small garden in which their children can take in the beauty of flowers, soothing the grim image of the firearms carried by correctional officers and the bars separating them from the free and open spaces they might otherwise roam; the work of child and adolescent protection councils to protect children from domestic violence.

16. Chapter: The Sustainable Development Goals for and with children

It is a source of excitement (a manifestation of beauty) to know that:

The number of children in poverty continues to decline and there are no more hungry or malnourished children; maternal mortality and neonatal mortality rates are dropping, approaching the SDG target; the campaign of civil society organizations to revoke Constitutional Amendment 95 so as to ensure the health, education and social assistance sectors receive more financial resources is gaining traction; new early childhood education facilities are increasing the capacity of municipal education systems to meet National Education Plan targets; discrimination against women and girls has fallen sharply; child marriages no longer exist in Brazil; violence, trafficking and sexual exploitation of women and girls are vigorously combated; potable water reaches all schools and all homes in urban enclaves, communities and slums; investments in basic sanitation continue to climb, eliminating open-air sewage and human waste, and children no longer trudge through sewage or play on refuse; the low-income housing program will be resumed, ensuring all children a home and safety.

17. Chapter: Business and early childhood

Beauty also has its place when viewed from the vantage of parents, business, and society:

Every year, the percentage of citizen companies that grant an additional 2 months of maternity leave and 15 days of paternity leave increases; men return to work from paternity leave filled with emotion, which is conveyed in their conversations with co-workers; studies reveal that more and more companies offer flexible work hours – to men and women alike – to allow employees to attend

to family needs, such as visits to the pediatrician and meetings at daycare centers or preschool establishments; although not required by law, firms are setting up breastfeeding rooms at work venues to allow mothers to breastfeed their children or collect breast milk to take home; female and male workers tell their peers at other organizations that their employer is sensitive and attentive to family events, including pregnancy and gestation, delivery and postpartum, leaves of absence and birthdays for young children; the percentage of businesses offering daycare to the children of employees at the place of work or a nearby facility has increased from 11% to 20%; companies organize a day each year in which parents can bring their young children to visit the workplace and learn about their work; business are moving from a position of ambivalent non-opposition to the rights of the child to actively guaranteeing those rights; executives at large and small firms alike have gained a keen interest in early childhood, cultivated through meetings with experts organized for the purpose of better understanding the child development process.

Beauty is necessary

We conclude this chapter with a passage from A. Solzhenitsyn's lecture to the Swedish Academy on the occasion the Russian author's acceptance of the 1970 Nobel Prize for Literature.

“Dostoevsky threw out the enigmatic remark: ‘Beauty will save the world.’ So perhaps that ancient trinity of Truth, Goodness and Beauty is not simply an empty, faded formula as we thought in the days of our self-confident, materialistic youth? If the tops of these three trees converge, as the scholars maintained, but the too blatant, too direct stems of Truth and Goodness are crushed, cut down, not allowed through – then perhaps the fantastic, unpredictable, unexpected stems of Beauty will push through and soar TO THAT VERY SAME PLACE, and in so doing will fulfil the work of all three?”⁴⁰⁶

⁴⁰⁶ SOLZHENITSYN, A. Lecture delivered to the Swedish Academy on the occasion of the 1970 Nobel Prize for Literature award ceremony, which the author was unable to attend.



IMPLEMENTING ACTIONS: STRATEGIES FOR PURPOSEIVE ACTIONS

V.

Implementing actions:
strategies for purposive actions

Professional training for early childhood professionals

1. Legal bases

The Early Childhood Legal Framework, a fundamental benchmark for the updates to this Plan, requires that all professionals engaged with children in the early stages of life have a working familiarity with the most appropriate caregiving techniques, specifically those that incorporate the latest scientific knowledge on child growth and development and the rights of the child. It is essential that professionals anchor their practices in the current science.

Article 4 of the MLPI enumerates a number of items that should be included in policies governing the rights of young children and which, to this end, the professionals charged with developing and implementing the related policies should command:

III – respect the individuality of children and their rhythm of development and value the diversity of Brazilian childhood, as well as the differences between children in their respective social and cultural contexts;

V – link the ethical, humanist, and political dimensions of citizen children with scientific evidence and professional practice in the

care of young children;

VII – coordinate sector-specific actions with a view to comprehensive and integrated care.

Article 4 of the law innovates by introducing linkages between the ethical, humanist, and political dimensions of the citizen child and scientific evidence and professional practice in the care of young children as a directive. In so doing, it opens up new conceptual, theoretical, and practical horizons for those who make policy and for those who work to implement policy through actions aimed at ensuring the progress made in the sciences and professional practice permeates the guidelines and actions themselves.

In another important step, the law provides that *the policies for early childhood must be coordinated with professional training institutions so as to adapt courses to the characteristics and needs of children and, in addition, so that the planning of the provision of courses ensures the existence of qualified professionals capable of increasing the diversity of service deliveries with quality* (article 9).

Article 10 underscores the need for investments by all sectors in ongoing education and training: *Professionals engaged in the various spheres of policy and program execution for young children shall have guaranteed and priority access to training in the form of specialization and professional enhancement through programs that consider, among other topics, the specificities of early childhood, the strategy of intersectoral actions in the promotion of integral development, the prevention and protection of all forms of violence against children.*

2. Initial and continuing academic training

In this chapter, training is considered in relation to groups of professionals: those engaged directly with children 0 to 6 years of age in education, health, social assistance, culture, and leisure and those in fields that interface in one form or another with the five areas above and indirectly affect the everyday lives of children, including the fields of law, the environment, communications, safety, housing, food, etc.

One of the foundational premises for professionals who work directly or indirectly with young children is that the relationship with children occurs at both a personal and professional level. It is commonly noted that people who have contact with an infant or young child are in some way their educator, they transmit values and examples through language, eye contact, gestures, actions, as well as the attention, responses, care, or guidance they provide. Knowing oneself and the impact one's relationships, actions and interventions can have on the child's development and learning should also be the subject of professional training in the area of early childhood. If these two dimensions are important for the formation of the youngest generations, it is equally important that professionals feel good about themselves and their interactions with children and, simultaneously, that they be well informed on the scientific fields dedicated to researching child development and possess command of good professional practices.

Training for professionals engaged directly with children should be reexamined with a view to increasing and deepening the professional's knowledge base and enhancing practices. As an example, pediatric physical therapists would be better prepared for their work if more in-depth and expansive consideration of topics relating to child development were included as part of their training. This would apply equally to health professionals if, as part of their training, issues connected to emotional well-being and health promotion were emphasized as much as their knowledge of specific pathologies and treatments. Even pedagogical

programs need to be revised to make teachers more secure and confident in their ability to educate and care for very young children from the initial months of life.

In relation to other professionals, training programs should foster knowledge of children's rights, development, and culture from an intersectoral perspective, with a view to guaranteeing that the specificities of this youngest age group are incorporated in their work projects and daily professional activities. Take as an example the architecture and civil engineering field. With the relevant knowledge in hand, we could reasonably presume that when designing residential, school, and recreational and leisure facility projects professionals in the field would devote more attention to the demands, needs and characteristics of the child's motor, emotional, social, and relational development, components directly connected to their natural experiences with the surrounding space and others, particularly through play activities. However, at the moment program curricula do not, as a general matter, address these topics.

In addition, how the knowledge of childhood is conveyed in undergraduate programs should be reconsidered, particularly with respect to the view of childhood and children imparted in courses such as Child Development and the Rights of the Child. To understand and know children and their need for affection, limits, frustrations, safety, it is important that professionals have direct contact, through the pleasure they themselves derive from play, with the right of being, feeling, living, and discovering, with all of the attendant psycho-motor, affective, cognitive, and social nuances this entails.

The reason for insisting on this point is that children are often seen as incomplete beings and excluded from the adult world, when, in fact, they are social actors with specific characteristics and needs, with the capacity for critical thinking, the curiosity to learn, the initiative to discover, the creativity to forge new paths. In addition, they possess multiple languages and, therefore, should be heard and considered as participative subjects, when formulating and implementing children's policies, pursuant to the Early Childhood Legal Framework (article

4, subsection II, and sole paragraph). If professionals could see children for their specificities, children could be served according to their interests and specific age, social and mental characteristics.

University administrators should also focus on increasing investments in practices relating to early childhood through extension and internship activities for undergraduate and postgraduate programs alike. These activities offer opportunities for contact with the diversity of demands in different realities and the identification of relational strategies to reduce the gap between theoretical learning and practical experience. Of particular importance in this process is follow-up and systematic and continuous supervision of professionals in training, in order to equip them to more effectively intervene, follow, assess, and learn about their mission in promoting the development of young children. The value of the exercise resides in the opportunity to bring students in the community and from different social realities closer together. In this way, university professors have an opportunity to revise their content and the way in which knowledge is transmitted to future professionals.

In addition to current program curricula, the number of continuing education programs, involving professionals in different fields, multidisciplinary and transdisciplinary projects to assess and, principally, qualify the adult-adult and adult-child relationship should be increased. If these programs considered the affective and relational fluctuations that mobilize training and informative actions aimed at working with young children, for which effective measures do exist, they could effect a paradigm shift in the adult-child relationship and open the possibility to a comprehensive focus on childhood through transdisciplinary approaches.

In this light, it is essential to:

- a) enhance the training for professionals who work directly with children;
- b) qualify the adult-adult and the adult-child relationship by raising awareness to achieve self-knowledge and emotional regulation in

a manner capable of strengthening socio-emotional competencies and skills;

- c) support the production of theoretical and methodological knowledge of integral child development in various fields of professional training;
- d) leverage health and education professionals engaged in the subject matter;
- e) disseminate the knowledge produced for other professionals, including those who do not work directly with young children; and
- f) monitor and assess actions with the capacity to produce effective outcomes for professional training.

One strategy to disseminate information is for psychology, occupational therapy, physical therapy, pedagogy, medicine, nutrition, nursing, and instructors in other fields to offer courses that address child development to students in other subject fields. These courses would be strictly elective. Moreover, extension and specialization programs could be delivered to professionals in a range of fields. For example, an architect could specialize in early childhood education projects.

Another strategy for disseminating knowledge on early childhood – among academics in fields other than health, education, medicine, social services, and psychology – would be to promote studies on the subject through theoretical and practical activities. The respective courses would be optional and offered in an integrated fashion for all the fields above, thereby stimulating multidisciplinary discussion in the classroom.

Another effective tool involves projects like the grant initiative offered some years ago by ANDI – Communication and Rights, which spurred students in journalism and other programs to conduct research on the relationship between media/communications and public policies to guarantee the rights of the child and adolescent.

Another example is the partnership ANDI and the University of Brasilia (UnB) forged to offer Communication majors an elective course titled Communication and the Rights of the Child and Adolescent, although open to other students as well. The objective of the course is to *offer concepts and instruments for understanding the historical evolution of the rights of the child and adolescent by connecting these to other factors, such as the Sustainable Development Goals (SDG), gender and ethno-racial questions and children with disabilities, in addition to providing a critical analysis of the media for ensuring the rights of children.*

The course consists of six units: 1: introduction to the Child and Adolescent Legal Framework; 2: sustainable development goals for the child and adolescent; 3: gender and the child and adolescent; 4: the ethno-racial perspective in child and adolescent rights; 5: the rights of the child and adolescent with disabilities; and 6: the media and the child and adolescent.

3. Goals and targets

1. Promote debate in public and private higher education institutions on the topic of childhood in Brazil and the world, including the prevention of disabilities, the inclusion of children with disabilities and childhoods in traditional communities. Emphasis should be given to the need to address theoretical content on contemporary childhood and, above all, enable direct contact with situations pertaining to the realities of work, associated to practical activities that stir professionals to relive their own childhoods, stimulating them to experience the emotions and feelings connected to inclusion viscerally and, by extension, discover their skills and personal limits, with a view to fostering integrated and integral learning.
2. Expand through initiatives of the National Educational Council and collegial bodies of university chancellors, directors, professors and students the review of undergraduate higher education programs, with a view to including courses on child development, cultural diversity in childhood, the city and the child, the child and society, childhood and the media, the rights of the child, cultural production for children and others, so as to raise awareness, inform and prepare professionals to effectuate the rights of the child in their fields of work.
3. Stimulate through incentive projects the creation of postgraduate programs on child development, promotion of parenting, relational psychomotricity, among others, seeking international partnerships in the production of knowledge based on Brazilian realities. At the discretion of educational institutions, it is important that course programs in some fields, in particular those that train professionals to deliver services directly to children, include studies on child socialization, the relationship between childhood and culture, attention to families with young children and the organization and management of early childhood services. In addition, programs should contain a component on practices for educating and caring for children ages 0 to 6 years of age.
4. Increase the number of extension, learning and research programs that involve educators, researchers, and students from diverse subject areas, with a view to fostering joint and multidisciplinary actions, primarily in early childhood education and health facilities and in existing science dissemination facilities (museums, observatories, etc.) on college campuses.
5. Offer consulting to municipal childhood education networks in the multiple areas of knowledge and social practice on early childhood care.
6. Stimulate the establishment of partnerships/agreements with municipal governments to create internship, research, and extension fields in educational, health, social assistance, cultural and other establishments. Updated legislation could serve to streamline the creation of these partnerships and agreements.

7. Stimulate the production in higher education institutions of academic research on early childhood, in partnership with civil society institutions dedicated to promoting the rights of the child.
8. Prepare materials on different supporting and media platforms (pamphlets, videos, billboards, etc.) to publicize the knowledge produced from research, disseminating it to professors, while also facilitating access to technical personnel, educators, and support teams. Dissemination may be accomplished by means of a portal or platform on early childhood.
9. Offer study grants to students in architecture and civil engineering, urban planning, art, communications (film, theater, journalism, radio), law and other programs for the purpose of forming professionals who are sensitive to the physical, psychological, and social characteristics of young children and their participative presence in the urban space.
10. Ensure that teacher training programs for early childhood education include the concept of early childhood education institutions as collective spaces for educating and caring for children 0 to 5 years and 11 months of age and ensuring professional commitment to the well-being and integral development of children, fostering closer relationships with families and the intersectoral network in geographic territories, specialized application of strategies to access, utilize and appropriate cultural and scientific production in the contemporary world and appropriating the necessary instruments for proper performance of the educator's child care/educational functions. This goal highlights the importance of investing in teacher training that reaches beyond standard technical competencies and provides the capacity to partner with the child in the joyful discovery of the self and others and serve as a change agent in the environment, through the promotion of affective experiences that promote child development and well-being.
11. Conduct a feasibility study on requiring one-semester of social work for university students in programs relating to a guaranteed right of the child. The requirement would give students the opportunity to have direct contact with the real needs of young children, which extend beyond socioeconomic vulnerabilities to include **not infrequently overlooked** motor, cognitive, social and, principally, affective needs.
12. Map general information on how the topic of early childhood has been applied in the teaching, research, and extension activities of Brazilian Higher Education Institutions. Develop, on this basis, an inventory of good practices composed of syllabi, articles, and extension projects on the topic.
13. Create a network of higher education professors to work on this topic, for the purpose of exchanging references, research, and practices, as well as proposing joint projects.
15. Enact stimulus policies for Higher Education Institutions engaged in the early childhood field.
16. Obtain political support from entities that represent higher education in Brazil to strengthen the role of academia in early childhood agendas.
17. Promote continuing training and capacity building for early childhood education, health, education and social assistance professionals and other stakeholders dedicated to promoting, protecting, and defending the rights of the child, with a view to developing the necessary competencies to prevent, identify evidence, diagnose, and confront all forms of violence against children, pursuant to article 70A of the ECA.

The strategic role of communications for the rights of the child

1. *Conceiving communications as a strategic public policy tool*

Public policy actions – from the procurement of school desks in a municipality to enactment of a national plan to guarantee the rights of young children – tend, in general, to gain in legitimacy and effectiveness as the involvement of interested citizens and specialized organizations increases the choices spawned by those policy decisions. To this end, the various stages of a policy – planning, formulation, decision making, implementation and evaluation – need to be brought into the public sphere to promote knowledge, discussion, and the pertinent options for its realization.

In sum, we can say that a policy is truly *public* the more widely disseminated it is – a factor that is ultimately contingent on how well it is communicated. Specifically, it is worth noting that the National Plan for Early Childhood will only achieve adequate scope as a public policy if it articulates a broad communications strategy. Otherwise, it will be difficult for the Plan to penetrate the public agenda and, worse yet, it may not be clearly understood by sectors that should otherwise be committed to the topic. Indeed, it is not uncommon for a plan, irrespective of how well structured it is, to be reduced to a mere letter of intentions – that is, without the capacity to spur real change in society.

Therefore, it is important to recognize that a number of tools and platforms can contribute to illuminating and fostering debate on a given policy: advertising campaigns, direct communications focused on specific target audiences, community communications strategies, social media, and mobilization of the news media. These approaches are by no means exclusive,

on the contrary – however, they should be employed with discretion, based on the specificities of each situation and the outcomes sought.

2. *The relevance of the news media*

In the case of a public policy as broad in scope as the National Plan for Early Childhood, the news media should serve as a preferred interlocutor. After all, in contemporary democracies journalism plays three key roles:

- Providing reliable and duly contextualized information that enables the public to understand its rights and demand that they be respected;
- Fostering public debate by addressing priority issues relating to the development of society, based on a range of viewpoints; and
- Overseeing the public policy cycle by monitoring the performance of the responsible State agents, as well as private sector and civil society stakeholders engaged in the issue at hand.

With a view to supporting this type of journalism, the communications strategy for the National Plan has a series of resources at its disposal to facilitate the access of reporters to qualified technical content. Among the possibilities, the following warrant mention:

- creation of a directory of expert contacts qualified to discuss the issue's many aspects;
- identification of topics capable of generating more noteworthy news reporting;
- development of guides and manuals detailing the Plan's principal elements; and
- offer of capacity building initiatives (workshops, seminars, online courses).

3. Networking

Another valuable approach, given its scope and capillarity, involves the capacity of communications organizations dedicated to defending and promoting the rights of children. Whether NGOs, social movements, family collectives, foundations, institutes, academic centers, parliamentary fronts, government departments or ministries – each link in the protection network could actively develop a communications strategy on behalf of the National Plan for Early Childhood.

In other words, a network communications effort could be coordinated, with a view to disseminating priority issues on early childhood to the general public and mobilizing and engaging the movement's various stakeholders in situations requiring concerted political responses.

However, to ensure this decentralized operational model achieves results, each organization should incorporate regular follow-up of the National Plan for Early Childhood as part of its communications agenda. This would enable organizations to remain abreast of the most significant developments in their particular fields of action and to build capacity for producing and disseminating relevant information.

4. The role of new technologies

Since the emergence of the internet in 1990, the information and communications field have undergone rapid changes. Even countries with acute socioeconomic inequality, as in the case of Brazil, access to the Worldwide Web has steadily increased. For example, social media are now part of the daily lives of people of different ages, geographic regions, and social classes. For its part, Brazil outpaces all of Latin America in connectivity to social media. The influence of these platforms on our lives is evident: interactions with relatives and friends, professional activities, commercial messaging, and relevant information for various aspects of our day-to-day – including content linked specifically to

the political sphere – are transmitted every day on digital channels.

In this context, from a communications perspective it is essential to recognize these *new media* – from platforms such as Facebook, Twitter or Instagram to sites, blogs, and email – as critical tools for ensuring the sustained visibility of the National Plan for Early Childhood. The same logic applies to the efforts to formulate and implement state and municipal plans.

Two characteristics of the new information and communications technologies contribute directly to this end: on the one hand, they facilitate the process of segmentation and focus on target audiences; at the same time, each recipient is also a potential replicator of information on early childhood, a phenomenon that tends to significantly increase the reach of original messaging.

Additionally, in the digital era content on the various lines of action proposed in the National Plan does not need to be disseminated in text format exclusively: photographs, cards, videos, podcasts, chats, information clips, graphics, or animations, among others, may be as, or more, effective depending on the specific topic or objective of the mobilization effort. A last point to consider is that when using new media creativity and opportunity are important channels – as such, obtaining optimal results in this area requires the expertise of qualified professionals.

5. Communications plan

In one way or another, it is essential that the National Plan for Early Childhood include a communications plan that sets out key medium- and long-term objectives, as well as the most effective strategies and tools for each stage or specific moment in time. A first step should involve mapping the communications actions implemented through time to promote the rights agenda of children 0 to 6 years of age, preserving those activities that intersect with focal points of the PNPI.

Crafting key messages to preferential target audiences and identifying qualified professionals to interact on a continuing basis with the media are critical factors to ensure the success of any communications plan. Furthermore, communications initiatives should be aligned with the PNPI's structural guidelines and provide an effective contribution to advancing public policy efforts. In sum, communications should not under any circumstances be seen as an end in themselves.

6. *The right to communication*

It is clear, therefore, that the National Plan for Early Childhood should approach communications from a strategic perspective, as a tool to spur society to understand its characteristics, follow and engage in the execution of public policies and assess the respective outcomes.

However, communications must also be seen as a human right, valuing what the experts refer to as *two-way flow*. As such, the executors of public policies should disseminate information on policies but be prepared, at the same time, to listen and stimulate dialogue.

Guaranteeing the right of the child to speak and be heard is a right that, although complex, continues to pose a challenge to be surmounted. To this end, communications plans should provide for strategic actions to stimulate two-way flow: that is, simultaneously informing and listening. Dialogue – listening to others – contains the elements for stimulating innovations in the PNPI, by shining a light on the differences between what was planned, executed, and perceived, laying out new scenarios for consideration and guaranteeing that diverse voices (from a variety of intersectionalities) have the opportunity to enhance the outcomes of this vital public policy conceived specifically for the benefit of all children.

The strategic role of the legislative branch in guaranteeing the rights of the child

Defense of the rights of the child and adolescent began to gain momentum on the Brazilian public agenda in the mid-1980s through the participation of social movements, acting either on their own initiative and independently or in partnership with non-governmental organizations, in the Brazilian National Constituent Assembly. The restoration of democracy and drafting of a new Constitution following two decades of military rule gave rise to an arduously constructed opportunity, and one anticipated for many years. In the intervening period of intense political and democratic effervescence, organized civil society and sectors of the Executive Branch built a robust and productive partnership with the Legislative Branch, sponsoring debates and presenting studies and proposals that contributed to development of the Constitutional Charter, which ultimately was christened the *Citizen Constitution* of 1988. Important progress was secured in various fields.

With respect to the rights of the child and youth population, more specifically, the alliance resulted in the guarantees prescribed in articles 227 and 228 of the 1988 Brazilian Federal Constitution, governing the doctrine of integral protection. Article 227 of the Constitution is the only provision containing the expression *absolute priority*, a testament to the significance attached to the issue under Brazilian law. The following year the National Congress passed Legislative Decree 28, dated 14 September 1990, approving the International Convention on the Rights of the Child, which the Brazilian Government then ratified on 24 September and enacted on 21 November of that same year.

This partnership endured, and two years later, yielded another milestone: the Statute on the Child and Adolescent – Law 8069, dated 13 July

1990. A full twenty-six years on, yet another important collective achievement – the Early Childhood Legal Framework – Law 13257, dated 8 March 2016.

Aware that the responsibility of the Legislative Power does not end with the passage of laws and zealous in relation to the fulfillment of the new legal system with regard to the rights of the child and adolescent, in 1993 a non-partisan group of federal deputies and senators who had participated actively in the Constituent Assembly and development of the ECA established the Parliamentary Front for the Defense of the Rights of the Child and Adolescent,⁴⁰⁷ in partnership with social movements, government, non-governmental and international organizations. To this day, the Front remains a force in the Brazilian National Congress; in fact, it is the oldest and one of the most active Parliamentary Fronts in the chamber.

The alliance between civil society and Congress has progressively consolidated, securing new advances in the rights and fundamental guarantees assured to Brazil's child and youth population.

Three examples from recent years stand out: discussion and development of the 1996 National Education Act (LDB), and the 2001 National Education Plan (PNE); Law 12010/2009, Law of Family Coexistence, governing adoption, and Law 10097/2000, which prohibits child labor.

More recently, the close working relationship between social movements and lawmakers dedicated to defending the rights of the youngest generations and quality education was instrumental in passing and strengthening Basic Education Maintenance and Development and Educational Professional Enhancement Fund (FUNDEB), considered by Congress in the period 2005-2007. Close coordination between civil society and the Congress was responsible for securing important advances in the FUNDEB, among them inclusion of education for children 0 to 3 years of age and a national

⁴⁰⁷ *Frente Parlamentar em Defesa dos Direitos da Criança e do Adolescente.*

salary floor for basic education professionals. Early childhood education teachers are direct beneficiaries of the new measures, which have included wage hikes for most professionals engaged in the initial stages of the basic education system.

The Parliamentary Front for the Defense of the Rights of the Child and Adolescent played a leading role in these efforts, serving as a vehicle for coordinating issues pertaining to the youngest population segments and consolidating a culture of respect for human rights in the Brazilian National Congress.

A multiparty movement composed of more than one hundred lawmakers, the Front has worked since its creation in various fields, within and outside the Brazilian National Congress, using its political weight to influence discussions on the critical issues facing children and adolescents, including: violence, sexual exploitation and abuse, child labor, pedophilia, adoption, education, health, child development, unplanned pregnancies, sexually transmitted infections, as well as a number of other important questions.

The success of the Front in the National Congress spurred among state and municipal legislatures interest in adopting similar mechanisms. In 2005, the National Network for the Defense of the Rights of Children and Youth⁴⁰⁸ was created under the coordination of the Parliamentary Front for the purpose of bringing together legislators at the three levels of government – federal, state, and municipal. The Network, which continues to grow through a strategic communications strategy, has fostered exchanges between lawmakers in the three spheres of government on child-centered legislative experiences, including in regard to legislative proposals and policy enforcement actions and budget resources monitoring measures.

In 2011, the Joint Parliamentary Front for Early Childhood was established in the Chamber of Deputies and Federal Senate by more than 200 lawmakers from a wide spectrum of political

parties, for the purpose of addressing issues relating to the rights of children 0 to 6 years of age. The Front's activities are strictly coordinated with the Parliamentary Front for the Child and Adolescent.⁴⁰⁹ It was created in response to the need for more in-depth attention to the specificities of young children (0 to 6 years of age) and to promote issues of interest to the lives and full development of children within the Congress, capable of impacting both society and government. From the outset, the National Network for Early Childhood has coordinated and collaborated closely with the Front, while, simultaneously, pressuring it to respond to vital concerns, from calls to reject of bills that would have the effect of removing rights or distorting public policies for young children to mobilizing support for bills that would enhance and increase the reach of particular policies.

Three additional initiatives have contributed to bringing greater attention to early childhood in the Brazilian National Congress:

1. International Seminars on the Early Childhood Legal Framework. Held on an annual basis since 2013, the seminars consider the most relevant issues for discussion in the Chamber of Deputies. They are organized by initiative of the Joint Parliamentary Front for Early Childhood, with a view to engaging federal deputies, senators, advisers, and external participants. The Chamber's television and radio outlets (TV Câmara and Rádio Câmara) produce videos and interviews as a means for incorporating children's issues on the political agenda.
2. International Seminars on Valuing Early Childhood and the Culture of Peace, an event held annually between 2009 and 2018 by the Federal Senate's Committee for the Valuing of Early Childhood and the Culture of Peace.⁴¹⁰ The event provided a forum to raise questions and press for solutions to challenges facing children 0 to 6 years of age.

⁴⁰⁹ *Frente Parlamentar Mista da Primeira Infância.*

⁴¹⁰ *Comissão de Valorização da Primeira Infância e Cultura de Paz do Senado Federal.*

⁴⁰⁸ *Rede Nacional de Defesa dos Direitos Infância-Juvenis.*

3. Commemoration, in October 2018, of the 30th anniversary of article 227 of the Brazilian Federal Constitution – which enshrined the guaranteed rights of the child and adolescent as an absolute priority – in a Formal Session of the Chamber of Deputies.

Recent legislation on early childhood

On more than one occasion, children’s issues have dominated the National Congress’s agenda and garnered extraordinary consensus. The primary example was unanimous approval of the Early Childhood Legal Framework. Another example are debates that are part of the democratic process, such as those involving the Parliamentary Inquiry Commission on Mistreatment, from which, ultimately, 33 bills were spawned.

The set of legislative proposals approved or ongoing after 2010,⁴¹¹ enumerated below, is based on a survey conducted by the Chamber of Deputies’ Legislative Advising Department, in September 2018,⁴¹² that demonstrates the importance, for purposes of fulfilling the rights of the child – and, by extension, this Plan –, of close coordination and cooperation between the Executive Branch and civil society (particularly, the National Network for Early Childhood) and the Brazilian National Congress.

General legislation

- Law 13257, dated 8 March 2016 – Early Childhood Legal Framework. A wide-ranging statute encompassing the full range of

children’s rights – public policies for early childhood, health, education, social assistance, culture, play, protection from violence, etc. The bill amends and adds provisions not provided for in the ECA, Brazilian Code of Criminal Procedure, Consolidated Labor Laws, Citizen Company Act, Declaration of Live Births Act. The Early Childhood Legal Framework, an initiative of the Legislative Branch, developed with the active support of the Executive and Judicial Branches and civil society, represents the peak of Brazilian infra-constitutional legislation to date with respect to guaranteeing the rights of young children.

- Law 13971, dated 27 December 2019, which institutes the Multi-Annual Plan of the Union (PPA) for the period 2020-2023. Article 10, sole paragraph, of the PPA requires that government actions aimed at young children be given priority in the 2020 budget and preference in budget and financial programming and execution throughout running of the Multi-Annual Plan, pursuant to the cross-cutting and multi-sector agenda of the Executive Branch.

Specific rights

Early childhood education

- Law 12602, dated 3 April 2012, governing Early Childhood Education Week and the National Day for Early Childhood Education
- Law 12722, dated 3 October 2012 (Caring Brazil Law), which provides for financial support from the union to encourage enrollment of children 0 to 48 months of age in daycare for beneficiary households of the Family Grant Program and to maintain early childhood education classes through their inclusion under the FUNDEB.
- Law 12796, dated 4 April 2013, which revises the LDB in respect of the mandatory

⁴¹¹ 2010 is identified as the start point, given that the National Plan for Early Childhood was passed in December of the year and that, in the course of the Plan’s development, the most important laws enacted in the field to date were first considered.

⁴¹² The study was conducted by Congressional advisers Ana Valeska Amaral Gomes, Area XV – Education, Culture and Sport; Claudio Viveiros de Carvalho, Area XVI – Public Health; Gilvan Correia de Queiroz Filho, Area II – Civil, Civil Procedural and International Law; and Walter Simões Filho, Area XXI – Social Security and Pension Law.

stages and age cut-offs for educational services, based on the amendments introduced in the applicable legislation over the preceding decade. The bill includes, in particular, pertinent guidelines for organizing early childhood education with regard to assessments, hours, days and attendance.

- Law 13005, dated 25 June 2014 – National Education Plan, which approves the PNE 2014-2024, mandating universal early childhood preschool education for children 4 to 5 years of age by 2016 and expanded daycare services, with a view to serving at least 50% of all children through 3 years of age by the Plan's date of expiry.
- Law 13306, dated 4 July 2016, which amends Law 8069, sanctioned on 13 July 1990 (Statute of the Child and Adolescent), for the purpose of setting a maximum age of 5 years for attendance in early childhood education.

Social assistance

- Proposed Constitutional Amendment (PEC) 209/2016, which amends subsection V of article 203 of the 1988 Brazilian Federal Constitution, for the purpose of providing the guaranteed minimum monthly salary to persons between the ages of 18 and 21 years who were orphaned from their father and mother in early childhood and have been housed in institutional shelters in the last five years of the benefit concession.
- Bill 4025/2015, which amends Law 8069, dated 13 July 1990, mandating distribution of hearing devices as a right for children and adolescents with hearing disabilities.
- Bill 7715/2017, which incorporates paragraph 3 to article 23 of Law 8742, dated 7 December 1993, providing for the participation of youth in support programs for young children, the elderly, and persons with disabilities.

- - Bill 9939/2018, which amends the Consolidated Labor Laws, approved by Decree-Law 5452, dated 1 May 1943, requiring that in cases of premature birth the infant's hospitalization period not be counted against the mother's maternity leave.

Civil law

- Bill 2338/2011, which adds a subsection to article 10 and amends the text of article 229 of Law 8069, dated 13 July 1990, to mandate presentation of the infant's birth certificate as a condition for hospital discharge.
- Bill 789/2016, which amends Law 10405, dated 10 January 2002, providing for the revocation of custody from the father of a child conceived by rape.
- Bill 10569/2018, prescribing the placement of information signs in public and private health establishments on pre-birth adoption.
- Law 13811/2019, definitively prohibiting child marriages.

Health

- Law 13002/2014, governing the Lingual Frenulum Protocol for Infants.
- Law 13436/2017, which amends Law 8069, dated 13 July 1990 (Statute on the Child and Adolescent), to guarantee the right to follow and provide guidance to mothers on breastfeeding.
- Law 13438/2017, which amends Law 8069, dated 13 July 1990 (Statute on the Child and Adolescent), to mandate that the Unified Health System adopt a protocol establishing risk assessment standards in connection with mental development in children.

A number of other issues in the field are currently being addressed through two Proposed Constitutional Amendments and nearly one hundred legislative bills.

These include: (a) pregnancy protections, involving guaranteed prenatal care; (b) health assistance for pregnant women; (c) promoting health for pregnant women; (d) preventing risk to the health of pregnant women; (e) preventing vertical transmission of infections; (f) stimulating healthy eating by pregnant women; (g) diagnosing changes in fetus health; (h) humanizing the assistance rendered to pregnant women and newborns; (i) maternal breastfeeding and healthy feeding for children; (j) maternity leave; (k) neonatal screening; (l) disease screening for school-aged children; (m) childhood vaccinations; (n) health assistance to children, including children with disabilities; and (o) protecting the motor development of children.

The Legislative Branch and the National Network for Early Childhood

The importance of the role of the Legislative Branch of government in the National Plan for Early Childhood, an initiative of the National Network for Early Childhood, can be seen from the overview above, namely the efforts of a group of lawmakers intimately engaged in issues relating to children and adolescents, notably among them the question of child development, and driven by the conviction that the Congress is, by its very nature, a space for multi-party democratic action.

It is important to recognize that the Legislature's participation can play out on any number of fronts and at various moments during this process, namely:

1. Discussions with civil society stakeholders and experts to promote the enhancement of existing legal instruments through public meetings and hearings in the Chamber of Deputies and Senate.

2. Approval of proposals in both chambers of Congress.
3. Debates on budget resources to enable implementation of the Plan's targets, especially by including a focus on early childhood as a priority of the Budget Guidelines Law and the Multi-Annual Plan and the resources allocated in the federal budget.
4. Discussions around annual budget laws, including determination of the Network's strategy to support budget amendments that provide for actions and projects that benefit young children, principally in view of this particular legislative instrument's growing relevance to the budget allocation process.
5. Identifying provisions in the Early Childhood Legal Framework that have not been regulated and adopting pertinent actions in response.
6. Monitoring execution of the National Plan for Early Childhood, as an integral part of the follow-up and oversight of public policies and national plans in the different sectors with responsibility for the rights of the child.
7. Coordinating with states and municipalities, especially legislative assemblies, to stimulate the development of state and municipal plans for early childhood and offer political and technical cooperation to the discussions on the related work.

The advocacy work of the National Network for Early Childhood in the Brazilian National Congress has positively impacted the rights of the child through three key outcomes: 1) updated information and the time given to the Network on initiatives more directly related to the area that provides opportunities for responses, whether these involve supporting passage of legislative measures or recommending improvements thereto through pertinent amendments, or, conversely, advocating for their rejection; 2) development of technical notes to support lawmakers in evaluating and determining their positions on proposed legislation; and 3) submission of legislative amend-

ments to the proposed Budget Act, through which the Annual Budget is approved, in order to promote activities that serve the interests of early childhood.

Another area of cooperation and partnership between the National Network for Early Childhood and the Joint Parliamentary Front for Early Childhood, since 2013, and one that should be sustained, involves programming and organizing International Seminars on the Early Childhood Legal Framework.

A third action of considerable relevance for lawmakers and their advisory staff are the Expert Dialogues organized by the Front, which are scheduled and held in close cooperation with the National Network for Early Chil-

hood's advocacy team. These have provided real opportunities for learning, reflecting on, and defining important items for legislative action. The diversity of organizations and specializations represented in the National Network for Early Childhood is an invaluable source for the Joint Parliamentary Front for Early Childhood to collect inputs and identify experts for discussions on the various issues connected to the rights of the child.

And, finally, it is worth noting the cooperation between the National Network for Early Childhood's advocacy team and the office of president of the Joint Parliamentary Front for Early Childhood in developing the Front's work plan and the RNPI's participation in actions of mutual interest.

Research in early childhood

1. Strategic role of research in children's rights

Studies on the relationship between life experiences in early childhood and individual development have gained special relevance in recent decades across several countries. In Brazil, a growing number of research studies on the first years of life have been produced – including through public calls for proposals with funding from international agencies – drawn from an increasingly diverse range of focal points and disciplines. The Coordination for the Professional Enhancement of Higher Education Personnel (CAPES)⁴¹³ portal is another good indicator of the interest in disseminating the results of research work, as reflected in the increase in publications on early childhood in recent years. State research foundations throughout Brazil open public calls for proposals on topics relating to early childhood. Further, there is now a considerable body of evidence-based scientific studies and research to support policy decisions by public officials that have proved both innovative and, since 2016, contributed to operationalizing provisions of the Early Childhood Legal Framework. Document sources include, among others, the Early Childhood Science Center (NCPI) and the Evidence-Informed Policy Network (EVIPNet).⁴¹⁴

The results of this work are particularly significant for policy formulation, negotiating public budgets, prioritizing programs, and defining actions for early childhood. They are also important for developing diagnostic studies for purposes of constructing the Municipal Plans

for Early Childhood. When justifying plans and programs, distributing scarce resources, encouraging decision-making by government in response to multiple social demands, turning to the findings of studies and research emerges as a recurrent and strategic option.

The rights of the child are a sufficient argument and decisive factor for the State to define policies and choose priorities, given its duty to ensure fulfillment of those rights. Nonetheless, in addition to the argument, many public policy makers prefer having research data to reinforce convictions, identify urgent matters, guide new action lines, and justify increased resource allocations to fulfill the rights of the child or the repurposing of budget reserves to this area. However, there is a significant shortage of assessments of the impact on the results of various programmatic initiatives, with respect to the development of children and the environment and opportunities to this end. A similar deficiency affects the quality of programs in promoting childhood development and the associated childcare process, as well as program implementation processes. These gaps represent an emergent field for the consolidation of the integral childhood care policies pursued in Brazil.

In addition to studies on the economic, social, cultural and educational impact of protection, care and education services for young children, a number of other subject areas have not received sufficient attention from researchers (for example, child anthropology and sociology, the relationship between children and the physical and cultural environment, issues relating to diversity, the cultural heritage of children and traditional populations and communities, family and community ties, play, etc.).

For the purposes of the National Plan for Early Childhood, research has a strategic role in ensuring accomplishment of its objectives, the continuity and expansion of its targets after 2022, its spread into new sectors or fields that in the coming years will require attention and improved quality of all services. This strategic function will be achieved insofar as the research bolsters the knowledge of children and the factors underlying their development,

⁴¹³ Fundação Coordenação de Aperfeiçoamento de Pessoal de Nível Superior.

⁴¹⁴ Núcleo de Ciência pela Infância (NCPI), of the Fundação Maria Cecília Souto Vidigal (<https://ncpi.org.br/>), and Rede para Políticas Informadas por Evidências (Evidence-Informed Policy Network) – EVIPNet (<http://brasil.evipnet.org/>).

fills in the gaps in the qualitative and quantitative information on the youngest population segments, elucidates the social, economic, cultural, and ethnic factors that interact in the lives and development of children, in sum, that assesses the successes and mistakes of policy initiatives, plans and programs.

2. Priority research areas

1. The conceptions, representations and ideas on children and childhood in Brazil, with a view to overcoming prejudice, historical bias, discrimination, false representations, etc.
2. The production of indicators to monitor actions (projects or programs) based on universal policies that serve populations with different needs, in view of the economic, social, and cultural diversity of the contexts that impact the promotion of integral development. This requires combining two interrelated objectives – expanding the execution of universal actions as well as the implementation of complementary actions for social groups with distinct needs. The idea is to join the principles of universality and equity in public policy. To this end, a range of quantitative and qualitative indicators are needed to capture the efficacy of different actions.
3. The type of training for the stakeholders engaged with early childhood – technical staff of government bodies with primary responsibility for early childhood, activists, leaders and technicians of non-governmental organizations active in the children's rights field, fathers/mothers... – that in addition to knowledge provide them with greater capacity to advocate for expanding quality coverage and, in this way, more effectively instrumentalizes them for purpose of their activities with children.
4. Professional practice in the different areas of children's care (planning, social participation and monitoring, and assessment of

programs and projects). Essential issues include: life and health, nourishment and nutrition, education, learning and development, social assistance, play, culture and childhood, architecture and urban planning, communications, safety, environment, etc.

5. Construction of childhood development indicators that can be used by different sectors engaged with children up to the age of 6 years, with a view to recording and monitoring these.
6. Implementation of early childhood programs in different contexts of vulnerability and their impact on inclusion, learning and child development.
7. Conversion of scientific knowledge into tangible social practices for children: the extent to which new knowledge spurs changes in the way professionals organize social spaces, execute actions, and serve children.

3. Goals and targets

Goal 1:

Create mechanisms to incentivize research on early childhood – research committee on early childhood and federal and state funding lines (National Council for Scientific and Technological Development – *CNPq*,⁴¹⁵ INEP and state research support entities).

Targets:

- Institute a Research Committee on Early Childhood by expiry of the 2022 Plan, for the purpose of:
 - proposing research incentive mechanisms;

⁴¹⁵ Conselho Nacional de Desenvolvimento Científico e Tecnológico.

- recommending priority topics for studies; and
- introducing scientific information in the everyday activities of those who work with children or in associated fields.
- Establish partnerships with the National Council of State Research Support Foundations (*CONFAP*)⁴¹⁶ and foreign institutions, such as the British Council. In addition, mention should be made to the State Research Support Foundations of São Paulo (*FAPESP*),⁴¹⁷ Rio de Janeiro (*FAPERJ*),⁴¹⁸ Federal District (*FAPDF*),⁴¹⁹ Alagoas (*FAPEAL*),⁴²⁰ Amazonas (*FAPEAM*),⁴²¹ de Goiás (*FAPEG*),⁴²² de Minas Gerais (*FAPEMIG*),⁴²³ the Maranhão State Research and Scientific and Technological Development Support Foundation (*FAPEMA*),⁴²⁴ and the Espírito Santo State Research and Innovation Support Foundation (*FAPES*).⁴²⁵

Goal 2:

Disseminate studies and research in publications aimed at professionals engaged in different activities within the early childhood field.

Targets:

- Publish the results of studies and research conducted in Brazil on early childhood annually and disseminate these in the academic sphere and mainstream publications, so that scientific information is incorpora-

ted in the everyday activities of those who work with children or in associated fields;

- Create an early childhood research section on the official sites of government ministries with primary responsibility for planning, education, health, social development, culture, justice, human rights, among others, as well as the official sites of the related state departments and municipal departments in metropolitan areas with more than 200 000 inhabitants. Ensure these are interconnected and continuously updated.

Goal 3:

Organize debates on research findings in specialized discussion circles and among professionals in the field (doctors, pediatricians, nurses, psychologists, social workers, educators, sociologists, child and youth court public attorneys, judges and public defenders, nutritionists, and others).

Targets:

- Organize a national forum every two years on early childhood research studies for the purposes of presenting findings and debating their applicability in improving the quality of child services.
- Use the media, especially federal, state, and municipal government radio and television broadcasters to disseminate studies and research on early childhood, sponsoring debates with experts, families, and technical specialists in the different sectors of childcare services.
- Stimulate the production of documents to support state and municipal early childhood policy makers to adopt decisions based on scientific evidence, such as the working papers published by the Childhood Science Center (NCPI).⁴²⁶

⁴¹⁶ Conselho Nacional das Fundações Estaduais de Amparo à Pesquisa.

⁴¹⁷ Fundação de Amparo à Pesquisa do Estado de São Paulo.

⁴¹⁸ Fundação de Amparo à Pesquisa do Estado de Rio de Janeiro.

⁴¹⁹ Fundação de Amparo à Pesquisa do Distrito Federal.

⁴²⁰ Fundação de Amparo à Pesquisa do Estado de Alagoas.

⁴²¹ Fundação de Amparo à Pesquisa do Estado de Amazonas.

⁴²² Fundação de Amparo à Pesquisa do Estado de Goiás.

⁴²³ Fundação de Amparo à Pesquisa do Estado de Minas Gerais.

⁴²⁴ Fundação de Amparo à Pesquisa e ao Desenvolvimento Científico e Tecnológico do Maranhão.

⁴²⁵ Fundação de Amparo à Pesquisa e Inovação do Espírito Santo.

⁴²⁶ Available at: <<https://ncpi.org.br/>>.

4. *Emerging issues of interest for studies and research*

4.1. *The policy sphere*

The following questions indicate that new knowledge is today relevant for solving problems, surmounting barriers, clarifying doubts at the time decisions are taken, providing a more substantive foundation for selecting among options when planning and developing budgets, determining operational guidelines, or adopting decisions on practical measures:

- Which measures promote equitable access to childhood education, health, social assistance services, to culture, play, a healthy and sustainable environment...?
- Which experiences operationalize the intersectoral approach proposed in the Early Childhood Legal Framework for the purpose of program monitoring at the local level?
- Which measures can ensure children in more vulnerable environments, victimized by the violation of one or more of their rights or susceptible to rights violations, have access to protection and promotion of their rights?
- Which mechanisms have been most effective in improving the quality of services delivered to children?
- How effective are the guidelines on priority allocation of resources for purposes of fulfilling the rights of the child in the first years of life?
- What have Brazil's most effective and efficient experiences been – policies, plans, programs, actions... – in ensuring universal and integrated care to children through 6 years of age, at the federal, state, and municipal levels?
- Which experiences demonstrate success in overcoming resistance to intersectoral coordination and integrated action? What lessons do these provide for purposes of

extending these strategies to other areas?

- How can the participation of children in the design of policies and actions aimed at them be promoted?
- Which actions fulfill the specific needs for mitigating the effects of toxic stress in the most vulnerable groups?

4.2. *Demand*

- What are the characteristics of the demand for daycare? What is the relationship between demographic and manifest demand, as well as manifest demand and government service provision?
- What is the gap between the data collected by the IBGE and the INEP? What explains the gap? How can it be bridged?
- What are the factors associated to family options regarding full-day and half-day daycare services?
- How do the operating rules of daycare establishments and preschools impact their use by the public? What are the characteristics of families that do not seek daycare services? What are the key factors dissuading working families with young children from using daycare services and turning to other childcare options instead?
- What is the status of university databases on early childhood education? What descriptors do they use? Are those descriptors adequate from a legal standpoint? Do they give visibility to and enable construction of a state-of-the-art?
- What are the principal topics and focus of the studies and research on early childhood funded by CAPES and CNPq? What does the CAPES database reveal about the profile of dissertations and theses?
- How have the studies and research on early childhood funded by CAPES and

CNPq been published, disseminated? Who do they reach? Why do they not reach the *end of the line*? What can be done to ensure they do reach the *end of the line*? Have they been transformed into practical guidelines? What enables them to be transformed into practical guidelines and applied? What type of research data do not become practice?

of the child's right to early childhood education from the time of birth and serve to monitor its quality?

- How can the production of pedagogic material (books, toys, etc.) be brought closer in line with the culture of children, particular those from traditional populations and communities?
- How do the educational and psychological books used in training programs address ethno-racial questions, disabilities, the cultural diversity of Brazilian society, especially childhoods? What studies are conducted specifically on infants, pedagogy and day-to-day care and educational practices in daycare centers?
- What differences can be identified in the development of children enrolled and those not enrolled in early childhood education? What are the differences in the development of children in early childhood education institutions who are taught by male and female teachers and those taught by female teachers only? What conditions could be established to increase the presence/participation of male teachers in early childhood education? Are there differences in the intellectual development of children when daycare actions ensure and build closer ties with families?

4.3. *Early childhood education*

- How does the *new* FUNDEB consider the issue of resources for daycare? How much of the per child/year amount for daycare is effectively dedicated to public education institutions and how much to outsourcing agreements with community, confessional, and philanthropic daycare establishments?
- What are the difficulties in implementing national curricular guidelines for early childhood educations? And what about operating guidelines?
- What innovations has the National Common Core Curriculum/Early Childhood Education successfully incorporated in the curricula and pedagogic practices of daycare centers and preschools?
- What difficulties have early childhood education administrators encountered in consolidating democratic and quality early childhood education policies?
- What obstacles have early childhood education establishments faced in the effort to improve quality? What are the conceptions of daycare and young children that cut across institutions, educators, families, social actors (political parties, unions, professional organizations, etc.) and how do these conceptions influence the institutional model and the relationship between institutions and the community?
- What indicators best express fulfillment

4.4. *Participation of children*

- What place are children assigned in research studies? What listening methodologies and techniques are applied? What are some good listening experiences that support children to express their perception of the world and their needs?
- How can children's voices be made to reach society?
- What ethical precautions have been taken in the research for and regarding children?

4.5. *On the media and the child*

- How has the media reported on Brazilian children with respect to equality and diversity, poverty and social and economic inequality, children's culture and in relation to childhood, violence, exploitation, abandonment...? What space does the media set aside for children belonging to traditional peoples and communities?
- How are the challenges of early childhood addressed on television?
- What is the correlation between advertising for children and their behaviors (consumption, values, language, attitudes, violence, obesity, learning)?

4.6. *About the relationship between research and early childhood policies*

- How much have the data collected by multiple agencies/sectors been disseminated? Aggregated or disaggregated? With analyses by experts? How do they reach the general public and specific stakeholder?
- What has the return been for municipal policies and, in particular, daycare centers and preschools from the body of research in health conducted in these institutions?

4.7. *About professionals*

- What is the composition of an interdisciplinary daycare team? And a preschool team? What is the professional profile of its members?

- How have postgraduate programs – predominantly those in education – approached early childhood education?
- What have architectural, urban planning and environmental programs done to improve construction standards for daycare and preschool facilities and other establishments frequented by young children? And what about the production of adapted equipment and toys for children with disabilities? And their cultural pertinence to children from different Brazilian childhoods?
- In considering the space as a third educator,⁴²⁷ what is the impact of the National Equipment Adaptation and Procurement Program for the Public Early Childhood Education System (Proinfância) buildings⁴²⁸ on children's learning in comparison to learning in substandard early childhood education establishments?
- What training is provided to psychologists, social assistants, nurses, nutritionists, doctors, attorneys, media professionals (in journalism, radio, television, theater, film), etc. who engage in issues relating to children's rights? How could interest in the study of young children be stimulated in psychology, economics, anthropology, history, politics, communications, art, architecture and urban planning, law, environmental engineering, sociology, history, and other programs?

⁴²⁷ Reference to the Malaguzzi conception in Reggio Emilia pedagogy. See *The Hundred Languages of Children: The Reggio Emilia Approach to Early Childhood Education*, Carolyn Edwards, Leila Gandini, George Forman. Editora ArtMed: Porto Alegre, 1999. Chapter: *Educational and Caring Spaces by Leila Gandini*, pages 145-158.

⁴²⁸ *Programa Nacional de Reestruturação e Aquisição de Equipamentos para a Rede Escolar Pública de Educação Infantil*, instituted by Resolution 6, dated 24 April 2007. Available at: <<https://www.fn.de.gov.br/programas/proinfancia>>. Accessed: 30 March 2020.

State, federal district, and municipal plans for early childhood

The political-administrative organization of the Federative Republic of Brazil, comprised by the union, states, Federal District and municipalities, is governed by two fundamental principles: autonomy of the federative entities and technical cooperation.

The union is charged with developing and executing national social development plans (1988 Brazilian Federal Constitution, article 21, subsection IX). The social development field encompasses human development, which covers the development of children. More specifically, the State is responsible for guaranteeing the rights of the child and adolescent, as are the family and society. An important step toward meeting this obligation is the formulation of integrated or coordinated global and sector-specific policies, plans and programs.

The National Plan for Early Childhood was developed in line with this republican principle. It sets forth a plan developed by the Brazilian nation to ensure the rights of the child at the stage of life referred to as early childhood (through the age of 6 years). As such, it sets out the duties of the union, states, Federal District, and municipalities. Each of these entities is committed to fulfilling the rights of the child, through joint and coordinated action and the application of cooperative mechanisms.

The Republic's legal and institutional frameworks require that the National Plan for Early Childhood serve as a programmatic plan. That is, it must serve as the basis for state and municipal plans in which the questions of national interest raised in these pages, proposed action guidelines and established goals and targets are particularized and appropriated by each federative entity, according to its competencies and the specific regional and local context.

State, federal district, and municipal councils have a lead role in developing plans. These include rights, health, education, social assistance, culture, child and adolescent protection, social participation and monitoring councils and others, in addition to bodies of the Executive Branch and civil society organizations dedicated to early childhood, as well as researchers, experts and professionals engaged in the different dimensions of the being-child field.

The Early Childhood Legal Framework recommends the establishment of Intersectoral Committees for Early Childhood Policies in the states, Federal District, and municipalities, for the purpose, among others, of ensuring coordinated actions to protect and promote the rights of the child, in addition to guaranteeing social participation through the Rights Councils (article 7).

The plans, which are developed through a broad process of social participation and submitted for analysis and approval by the competent Executive Branch, are then forwarded as bills to the respective Legislative Branch, for purposes of review, amendment, and passage.

In the 10 years since approval of the PNPI, hundreds of Municipal Plans for Early Childhood have been drafted. The National Network for Early Childhood produced the *Guide on the Development of Early Childhood Municipal Plans*,⁴²⁹ a contributing source to this report. The document was also updated in light of the PNPI's revision. The experiences of municipalities with plans that were developed through a participatory process and implemented by political decision-makers resulted in profound changes in the care delivered to young children, a more attentive and expansive focus on the realities of children in their geographic territories, with particular concern for previously overlooked childhoods and children. However, other municipalities conducted their respective processes behind closed doors and failed to mobilize the participation of society. In some

⁴²⁹ *Guia para Elaboração de Planos Municipais pela Primeira Infância*. Available at: <<http://primeirainfancia.org.br/page/2/?s=guia+para+elabora%C3%A7%C3%A3o+do+PMPI>>. Accessed: 5 June 2020.

cases, the initiative stalled halfway through, while, in others, plans were shelved altogether.

A review of successes and mistakes suggests the need to meet the following requirements, as a means to ensure greater representation and social legitimacy, and to adapt the Plan to local realities, to the needs of children and their families and to the possibilities of execution, in addition to enhancing the quality of its content:

1. Just as important as developing a PMPI, securing a political decision from a mayor to prioritize investments for integral assistance to early childhood is equally vital to ensure the integral and integrated development of children.
2. Listening to children is essential for developing a plan. Their participation through appropriate active listening by adults fosters new perspectives on early childhood.
3. A finished and approved plan must be executed. If implementation is absent, the PMPI might as well not exist in the municipality.
4. Monitoring the respective actions, identifying problems, registering the initiatives

taken to resolve problems and disseminating outcomes are ways to draw the support of society to overcome challenges and celebrate progress.

Just as this National Plan was reviewed and revised and its effective term extended through 2030, states, Federal District, and municipalities that have approved plans for early childhood are invited to review and revise them based on the updates to the National Plan and, similarly, to extend their effective term to coincide with the targets of the Sustainable Development Goals. Plans developed as of this year can adopt this National Plan for Early Childhood as a national reference and inspiration for their local frameworks.

The Municipal Plans for Early Childhood should be forwarded to the RNPI. This can be accomplished by visiting the Early Childhood Legal Framework Observatory – *OBSERVA* and clicking on the Early Childhood Plans icon. On the lower portion of the page, plans may be uploaded and submitted.

OBSERVA will house the full set of PMPIs, which will remain available to those interested in reviewing, consulting, or using the plans as inspiration. An analysis of the content of the plans will be provided as well.

FUNDING EARLY CHILDHOOD ACTIONS

Investment, not spending

There is a growing consensus among experts and researchers that quality early childhood care and education programs generate significant social and economic returns, far higher than investments than those in other areas and for older ages. Their most important effect – and one that should be adopted as an objective – is on the quality of life of children and the development of their immeasurable human potential. However, measuring the economic return on investments applied to early childhood sparks spirited debate when the focus is on negotiating the demands of parents, society, and families. Government planning and public budgets should not merely include children but consider them a priority, if not for the cause of children's rights, then in the interest of Brazilian development.

A widely noted observation is that the resources invested by the country in protecting and promoting children should not be entered as expenditure but as investment. And the earlier investments are made, the greater the return. The first six years of life, the first three, the first one thousand days...This is the point of highest impact, longest-lasting effect, and greatest return.

Adequate investments made on a consistent and continuing basis in early childhood foster a culture of care that progressively infiltrates the entire social fabric, until finally arriving at a point where the allocation of generous resour-

ces to an early childhood program or policy ceases to be an innovation or an act of courage by government authorities, becoming, instead, an ingrained part of the *culture*. The vision of Nelson Mandela is worth reiterating here: *There can be no keener revelation of a society's soul than the way in which it treats its children.* There is no better strategy to achieve the stable development of society than to adopt actions to ensure a full life in terms of physical and mental health, development and learning and formation of democratic values. Wise is the nation that dedicates the best of its resources to children, not only because this fulfills its ethical and political duty but helps establish the bases for a developed society as well.

The National Plan for Early Childhood does not estimate the resource amounts, year on year, that would be necessary to execute the actions proposed in these pages. Instead, it lays out policy and legal guidelines for funding plans and actions that lend substance and strength to the effort to create a specific budget item for early childhood. We believe the next step required to effectuate the constitutional principle of absolute priority for the rights of the child and adolescent is to develop a Child and Adolescent Budget.

The resources for executing purposive actions, provided in items 1 to 18, should derive from the union, states, Federal District, and municipalities, according to the competencies of each federative entity, whether dedicated in lump sums or through intersectoral or sector-specific allocations.

Legal determinations and political commitment

1. The duty of the State to provide resources to guarantee the rights of the child is contained in article 4 of the United Nations Convention on the Rights of the Child:

Article 4. States Parties shall undertake all appropriate legislative, administrative, and other measures for the implementation of [...] economic, social, and cultural rights, [and] shall undertake such measures to the maximum extent of their available resources [...].

2. Article 227 of the 1988 Brazilian Federal Constitution enshrines the guarantee of child and adolescent rights as an absolute priority. The concept of *absolute priority* is an innovation in Brazil's constitutional text, exclusive to the early stages of life. It conveys Brazilian society's visceral desire to protect and care for the youngest generations, with a commitment to the integrality and fullness of their lives and the development of their human potential.
3. Article 4 of the Statute on the Child and Adolescent sets forth four scenarios in which absolute priority should guide decision making:
 - a) *priority in receiving protection and aid under all circumstances;*
 - b) *priority assistance from public services or services of public relevance;*
 - c) *priority in the formulation and execution of public social policies;*
 - d) *priority allocation of public resources to areas engaged in the protection of children and youth.*
4. Article 3 of the Early Childhood Legal Framework builds on the practical characterization of absolute priority contained in the four items of the ECA:

Article 3. The absolute priority to guarantee

the rights of the child, adolescent, and young adult, pursuant to article 227 of the 1988 Brazilian Federal Constitution and article 4 of Law 8069, dated 13 June 1990, entails the duty of the State to define policies, plans, programs, and services for early childhood that meet the specificities of that age group, with a view to ensuring its integral development.

Resources for early childhood: practical determinations

Brazil has significant experience in regard to the Child and Adolescent Budget. The next step is to establish a specific *Early Childhood* budget item in the Brazilian Federal Budget,⁴³⁰ with a view to ascertaining *if* and *to what extent* the country is fulfilling the constitutional principle of absolute priority. Some initiatives adopted by the National Network for Early Childhood and others in which the Network participates aim to accomplish this objective.

These include:

1. **Technical study: Early Childhood Budget (2014),**⁴³¹ in partnership with the Contas Abertas NGO. The effort found that *the consolidated data obtained from budget tracking uncovered various challenges in determining the spending amounts directed by the Brazilian Union to Early Childhood.* The detailed study arrived at the following conclusion, surprising because of the paltry budget amount earmarked to children: corresponding to 0.57% of the total Brazilian Federal Budget and 0.30% of GDP. Average spending per year per child in the 0 to 6 years of age segment was approximately R\$ 730.00. Comparisons with any other age group and demands reinforces the weakness of early childhood policy decisions.

The study outlines three recommendations:

⁴³⁰ *Orçamento-Geral da União.*

⁴³¹ NATIONAL NETWORK FOR EARLY CHILDHOOD: *Orçamento Primeira Infância* (2014). Available at: <www.primeirainfancia.org.br>.

VI.

2. The Brazilian Congress expresses interest in the issue
 - A. Because the Legislative Branch does not have primary responsibility for creating a specific budget item for early childhood in the Brazilian Federal Budget, Congress enacted Law 13257/2016, requiring that the union inform society of the annual resource amounts applied to the set of programs and services for early childhood and the percentage those amounts represent in relation to the overall executed budget, and that it collect information on the resource applications of the other federative entities.⁴³² The intent of the provision is to estimate the budgetary amounts dedicated to fulfilling the rights of children 0 to 6 years of age and to make it possible to assess the relevance of such amounts in relation to the absolute priority standard enshrined for the guaranteed rights prescribed in article 227 of the 1988 Brazilian Federal Constitution;
 - B. Article 260, paragraph 1, of the ECA433 mandates that:

For purposes of determining the priorities that are to be met with resources of the national, state, and municipal funds for the rights of the child and adolescent, the National Plan for the Promotion, Protection and Defense of the Rights of the Child and Adolescent to Family Coexistence and the National Plan for Early Childhood will be considered.
 - C. In October 2019, the budget committee of Brazil's lower house held a Public Hearing on Investment in Early Childhood to advocate for the creation of an Early Childhood Budget;
 - D. In 2019, the Brazilian Chamber of Deputies, by initiative of the Joint Parliamentary Front for Early Childhood, issued a letter to the Brazilian Federal Audit Court (TCU), requesting information on the amounts effectively dedicated to early childhood programs by the federal government and that the Court obtain, from the respective State Audit Courts, the corresponding amounts applied by individual states to this end. On the point above, it is worth noting that because the State Audit Courts are auxiliary institutions of the Legislative Branch they are required to fulfill the request. The data they provide are critical for meeting the objectives prescribed in Article 11, paragraph 2, of the Early Childhood Legal Framework. The TCU continues to await the requested information from the State Audit Courts.
 - E. A letter from the Joint Parliamentary Front for Early Childhood to the Executive Office of the President led to priority inclusion of the Early Childhood Budget Item in the PPA 2020-2023 and, further, its approval under the Budget

⁴³² Law 13257/2016, Article 11, paragraph 2.

⁴³³ Text given by the Early Childhood Legal Framework.

Law.434 In developing the PPA budget agenda, the Ministry of Planning acted on the request, in March 2020, circulating a note to the pertinent Government Ministries urging that this item be given priority.

3. Paving the way to creation of the Early Childhood Budget

At a meeting in Brazil's lower chamber, on 19 November 2019, of the Joint Parliamentary Front for Early Childhood, UNICEF, and the National Network for Early Childhood, which included the participation of an Argentine government delegation, a discussion was held on the Argentina's experience in developing an Early Childhood Budget.

Actions recommended by the National Plan for Early Childhood

1. Establish a working group (with the participation, among others, of the RNPI, the Joint Parliamentary Front for Early Childhood, UNICEF and the IPEA) for the purpose of recommending measures to create an Early Childhood Budget;

2. Track and assess fulfillment of the priority policy guideline on early childhood prescribed in the PPA, Budget Guidelines Law and Brazilian Federal Budget for the next two years;

3. In partnership with the Joint Parliamentary Front for Early Childhood, promote awareness-raising actions and bolster the knowledge of Congressional Joint Budget Commission members as to the meaning of comprehensive care of children in the first years of life and the reasons for investing in early childhood, with a view to securing passage of budget amendments that fulfill the rights of the child;

4. Introduce the following topic in Joint Parliamentary Front for Early Childhood Expert Dialogue sessions: *Consistency between Science and Public Policies for Early Childhood*;

5. Partner with the Chamber of Deputies' External Committee for purposes of tracking work, programs, and projects on early childhood,⁴³⁵ with a view to enforcing public policy mandates, particularly with respect to their financial aspects: consistency between the priority guidelines in the PPA, budget and budget execution process.

⁴³⁴ Law 13971, of 27 December 2019. *Program: 5024 – Integral Attention to Early Childhood*. Available at: <http://www.planalto.gov.br/ccivil_03/_ato2019-2022/2019/lei/L13971.htm>. Accessed: 19 March 2020.

⁴³⁵ Available at: <<https://www2.camara.leg.br/atividade-legislativa/comissoes/comissoes-temporarias/externas/56a-legislatura/politicas-para-a-primeira-infancia/conheca-a-comissao/criacao-e-constituicao/ato-de-criacao>>.

MONITORING THE PNPI

“The important thing is not to stop questioning”

(quote attributed to Albert Einstein)

Public policy evaluation fulfills the principle that continuous and systematic observation of a given reality to which intervention is targeted is a necessary condition to implement effective actions appropriate to that reality. Evaluation routines generate information that enables course corrections, decision making with less uncertainty and the production of knowledge on institutional practices, all, in the case of the PNPI, aimed at effectuating the rights and guarantees assured to children and their diverse childhoods.

It is the process through which the implementation guidelines and fulfillment of the PNPI’s objectives are monitored. Through this process, the status of early childhood policies (what they are, what areas and themes they cover, etc.). The design and quality of those policies (how they are implemented, how they operate, etc.) and their impact on the target audience (their efficacy, the benefits they generate, etc.) are assessed.

Monitoring of the National Plan for Early Childhood fulfills two essential functions:

1. *A practical function, namely tracking implementation and verifying outcomes.* This involves the collection of data on the backdrop to specific policies and the Plan’s implementation, according to its objectives and goals. This particular function should

be performed in coordination with PNPI monitoring and oversight actions. It can contribute, both during and after a given policy execution cycle, to inform course corrections, adjustments and decision making by officials throughout the process.

2. *A broader function, namely institutional strengthening of early childhood policies.* Evaluating the quality, outcomes and impact of implemented and executed policies, contributes to building knowledge regarding: (a) which strategies work; (b) which operational mechanisms are effective; (c) how policies are coordinated and the intersectoral approach is built; (d) how the actions of different sectors are integrated in practical services; (e) what are the ways and techniques used to situate children as the subjects of actions; (f) what is the degree of participation among different stakeholders; between stakeholders, families and children; and (g) how much progress has been made toward the inclusion of different childhoods and children with disabilities, etc. This function requires the participation of executors and should be implemented from an educational perspective to ensure that upon expiry of the Plan in 2022 Brazil will have expanded and consolidated the knowledge shared by all those involved in implementing the PNPI, knowledge that will then serve as a reference point to develop a new plan.

The first function is accomplished by monitoring the action plan (goals, targets, terms, etc.) specified for the various policies prescribed in the PNPI. Participants consist of multiple stakeholders with primary responsibility for implementing the plan at all levels and spher-

res: officials, heads of technical bodies, organizations and professionals directly engaged with the respective actions, children, families, etc. Basic and practical mechanisms and instruments should be employed so that the various stakeholders can offer their contributions on processes and outcomes achieved.

Despite its participatory nature, primary responsibility for execution of the evaluation model falls to public officials. The particular strategies and methodologies of sector-specific policies, in turn, are the responsibility of each sector charged with executing the respective actions. The executing bodies (ministries, departments, or other government agencies) are tasked with evaluating actions according to their goals and regulations and deploying their own instruments to this end.

The National Network for Early Childhood has primary responsibility for supporting the process by monitoring the production of data and indicators through its member entities. Equipped with a broad picture of what specifically is being evaluated and those aspects that continue to lack evaluation, the Network can offer appropriate contributions to the Plan's realization. To disseminate results on the targets in this Plan, the National Network for Early Childhood will systematize the data collected and made available by the executing bodies and prepare, at the end of the period 2020-2022, a summary report on the most important targets. If Bill 6524/2019, which *institutes the National Early Childhood Information Database*, is approved, evaluation will figure prominently in government actions.⁴³⁶

The second function is more complex, as it encompasses evaluation of the PNPI in its totali-

ty. To analyze the quality of executed policies, their outcomes and their impact, public officials with primary responsibility for sector-specific policies are urged to contract a research institution with experience in evaluating social programs and policies and, most critically, with experience in the field of early childhood.

A number of national and international institutions, entities and organizations perform this type of evaluation. The Anísio Teixeira National Institute for Educational Studies and Research (*INEP*); the United Nations Children's Fund (UNICEF); the Pan-American Health Organization (PAHO); the United Nations Education, Scientific and Cultural Organization (UNESCO); the *Institute for Applied Economic Research (IPEA)*; the Institute for Advanced Studies of the University of São Paulo (*IEA-USP*),⁴³⁷ through the Center for Public Policy Research (*NUPPs-USP*); and the Science Center Childhood (*NCPI*) of the Maria Cecília Souto Vidigal Foundation are just some examples of institutions with extensive evaluation experience in the topics covered under this Plan.

The federal government's Public Policy Monitoring and Evaluation Council, established in 2019, could also contribute to evaluating the policies implemented on the basis of PNPI actions. The Chamber of Deputies approved a proposal of the Joint Parliamentary Front for Early Childhood calling on the Council to prioritize evaluation of early childhood policies.⁴³⁸ The National Network for Early Childhood should coordinate with the Council, through advocacy outreach, strategies for effectively adapting the evaluation procedures and actions applied to the policies taken on behalf of children.

The Ministry of Science and Technology should also issue specific public calls for external evaluation and encourage scientists and universities, as well as other research institutions, to participate through the production of specialized knowledge on early childhood and policies for children in this age group.

⁴³⁶ Bill 6524/2019, sponsored by Deputies Leandre Dal Ponte, Carmen Zanotto, Daniela do Waguinho and Aline Gurgel, set out the following goals for the Sistema Nacional de Informação da Primeira Infância (National Early Childhood Information System): I – observe the specificity and relevance of the first years of life to the child's development; II – collect and systematize indicators and information and government policies and programs that contemplate children 0 to 6 years of age; III – contribute to formulating and implementing policies for early childhood; IV – provide studies and evaluations of policies and programs for early childhood; and V – report the total annual resources applied by the union, states, Federal District and municipalities to early childhood programs and services, the percentage in relation to other public expenditures of the federative entity and the per capita spending on children 0 to 6 years of age.

⁴³⁷ Instituto de Estudos Avançados da Universidade de São Paulo.

⁴³⁸ Statement 1782 of 2019. Proposal of the Joint Parliamentary Front for Early Childhood.

With respect to the PNPI's ambitious monitoring process, as spelled out in the two functions described above, developing a research study agenda coordinated by the National Network for Early Childhood would represent a useful step.⁴³⁹

First, the agenda would set forth what remains to be done without establishing fixed deadlines for research projects and, this way, operate as a guide for all those interested in producing studies and evaluations; second, it would offer a systematic approach to all completed and ongoing work in Brazil, serving as a catalog and, in addition, a bridge to relevant data, as well as contribute to reports on the state of art of research in this area.

There are at least five thematic areas in which further research is required:

1. *Situation of early childhood in Brazil.* Represents the foundational assessment of the situation of Brazilian children ages 0 to 6 years in all dimensions of their lives. This broad diagnostic study of the parameters of childhood development, including early childhood education, public spaces, the right to play and the citizenship document, for example, are essential to enable effective reflection on necessary actions and policies.⁴⁴⁰ Because it involves complex issues, such as support to diversity and protection against consumerist pressures, the diagnostic could be developed by subject area, in a continuous manner, to generate data and analysis for use, as they become available.
2. *Situation of early childhood policies in Brazil.* It is essential to assess what is effectively being done for children 0 to 6 years of age in Brazil. Public policy evaluations may be performed at three levels :

A) *Early Childhood Legal Framework and Plans for Early Childhood.* In-depth evaluations are necessary to ascertain if and to what degree the Early Childhood Legal Framework has been implemented and executed in new laws, principally with respect to the actions laid out in this PNPI. A notable outcome of the Early Childhood Legal Framework was the development and implementation of individual state and municipal Plans for Early Childhood. These initiatives should be evaluated both in regard to their quantitative and qualitative aspects. The National Network for Early Childhood offers training programs to public agents engaged in these efforts aimed at qualifying their work and the resulting Plans. Yet, the strategy should be combined with careful study on the effective application of the principles and guidelines set forth in the Early Childhood Legal Framework, both in terms of the pertinent policy concepts and guidelines and the processes employed to develop, implement, and execute the respective Plans.

B) *Intersectoral Policies.* Beyond the Early Childhood Legal Framework and Plans for Early Childhood, initiatives have been undertaken to implement federal, state, and municipal policies aimed at children 0 to 6 years of age and their families. Although in theory these are aligned with the general proposals on investments in early childhood, their adherence to the principles and guidelines of the Early Childhood Legal Framework cannot be ascertained without adequate analysis. Therefore, the initial focus of evaluations should be on the degree of integration between areas of the public administration dedicated to early childhood and the extent of intersectoral actions, with a view to identifying how many and which of the dimensions proposed in the National Plan for Early Childhood are in fact addressed in policy initiatives. At a subsequent level, evaluation should also determine the theoretical-conceptual, methodological, and technical quality with which those policies are developed and executed.

⁴³⁹ The agenda could be advanced quickly if the National Network for Early Childhood and organizations such as the Science for Early Childhood Center and NUPPs-USP forged a partnership with the Public Policy Observatory for Early Childhood.

⁴⁴⁰ IPEA. *Avaliação de políticas públicas: guia prático de análise ex post*. Brasília: IPEA, 2018. v. 2.

- C) *Area-specific policies.* Whether integrated or not, policies on the specific dimensions of children's lives should be evaluated individually. Child health, assistance in situations of vulnerability and protection and prevention of accidents, for example, are dependent on well-designed policies if they are to generate tangible results. It is also important to analyze whether each of those policies aligns with the perspective of the Early Childhood Legal Framework. If and the extent to which these are developed with the participation of civil society, families, and children, and whether the child is considered a subject of law and action must be verified. In regard to early childhood education, for example, it is necessary to determine if a given policy is democratic, extensive, and inclusive, strives for equity and if the respective services provide effective learning and development in safe environments and on the basis of effective curricula, qualified educators, etc.
3. *Evaluation of the impact of public policies on early childhood in Brazil.* In contrast to evaluations of the characteristics and quality of public policies, early childhood policy evaluations focus on the child, with a view to identifying the benefits to their well-being and development – and measuring these, where possible. The setting in this area is challenging.^{441 442} In the case of early childhood education, for example, policy impacts should be measured according to the data on learning and the development of competencies. Yet, there are few well-developed methodologies to this end. Impact evaluations tend to focus strictly on academic learning among older children, in particular through national and international proficiency examinations that only evaluate knowledge in specific subject

areas. Knowledge and competencies related to the multiple social, economic, cultural, ethical, environmental, spiritual, and political purposes of education are overlooked.⁴⁴³ In addition to pursuing broader evaluations of early childhood education, efforts should be made to foster a holistic view of children when evaluating policies on health, social assistance, family and community relations, public spaces, professional training for early childhood and others. This approach should be applied, above all, to the evaluations of intersectoral policies and analyses of the benefits generated from collaborative efforts between different areas.

4. *Status of scientific research on early childhood.* Scientific work aimed at investigating issues relating to early childhood in Brazil and across the world should also be subject to monitoring. The volume of studies in the field has increased and the tendency is for further growth, due to the evolution of research technologies and techniques on early childhood development. It is important to keep pace with this growth and organize the knowledge generated into repositories and periodic reports. Organizations such as the NCPI can play an important role in this effort.
5. *Status of the early childhood cause in Brazil.* Early childhood has become a cause. The topic has become part of the public agenda, gained in stature, and attracted stakeholders from a diversity of segments. There are a number of points of convergence around the idea of investing in broad policies to ensure the integral development of children. A critical mass has developed and a movement formed. These advances need to be followed up and analyzed. The effort to mainstream the concept and importance of early childhood has produced undeniable results, reflected in increased

⁴⁴¹ KAUTZ, Tim; HECKMAN, James; DIRIS, Ron; WEEL, Bas ter; BORGHANS, Lex. *Fostering and measuring skills: improving cognitive and non-cognitive skills to promote lifetime success.* OECD Education Working Papers, n. 110, nov. 2014. OECD Publishing, Paris, <<https://doi.org/10.1787/5jxsr7vr78f7-en>>.

⁴⁴² ZHOU, Kai. *Non-cognitive skills: definitions, measurement, and malleability.* Background paper for the 2016 Global Education Monitoring Report – Education for people and planet: creating sustainable futures for all. Paris: Unesco, 2016.

⁴⁴³ UNESCO. *Learning: the treasure within.* Report of the International Commission on Education for the 21st Century (Highlights). Chair: J. Delors. Paris: Unesco, 1996.
UNESCO. *The promise of large-scale learning assessments: acknowledging limits to unlock opportunities.* Paris: Unesco, 2019.

media attention to the issue. Systemic and more accurate evaluations can indicate, for example, which sectors of society have been reached and where outreach is still required, such as: how the idea of investing in the child's first years of life is received and assimilated in each sector and which messages work best, etc. These inputs help improve dialogue. Evaluations are also required to identify changes in this cause and movement over time. As a product of internal dynamics and the dialogue with society, the evolving discourse of stakeholders may either reflect or spur a significant repositioning, often resulting in a drift away from the values, original principles, and concepts on which the cause of early childhood and this National Plan for Early Childhood are founded.

Irrespective of the model adopted, monitoring and evaluation contribute to the transparency of public actions by offering a response to society and enabling access by the segments covered under the respective policies to the general outcomes of the initiatives in which they partake.

To this end, it is critical that the responsible entities coordinate the data required to produce quantitative and qualitative indicators, given that the challenge remains for expanding access to services and, in addition, adapting these to multiple realities. Official tools previously disseminated by various sectors⁴⁴⁴ may serve an information source and provide support to public officials for this purpose. Moreover, periodic research surveys conducted by different institutions can offer relevant data on monitoring and evaluation of

⁴⁴⁴ For example, the National Policy on Comprehensive Child Health Care (PNAISC, 2018) employs a number of useful information systems for monitoring and evaluating the Policy on Comprehensive Care to Children: Live Births Information System (Sinasc); Mortality Information System (SIM); Ambulatory Care Information System (SIA); Notifiable Health Conditions Information System (Sinan), a revised module of the Violence and Accident Surveillance System; Hospitalization Information System (SIH); Food and Nutritional Surveillance System (Sisvan-Web); and Basic Health Care Information System (Sisab), also known as e-SUS AB, among others. Many of these are available in Web format through the Tab-Net portal. Other examples can be found in the Social Assistance network, such as the SUAS Census, Monthly Activities Report (cited as a monitoring tool in the Ten-Year Social Assistance Plan 2016-2026) and the Unified Registry Database.

the National Plan for Early Childhood.⁴⁴⁵

Aware of the inherent challenges of accessing and systematizing qualified information on young children, the National Network for Early Childhood will launch an online platform to support evaluation and monitoring of the PNPI. Designated the Early Childhood Legal Framework Observatory,⁴⁴⁶ the platform will cover a significant portion of the research agenda and support public officials and other stakeholders involved in the policy formulation, implementation and evaluation cycle through consolidation and dissemination of data and information, with the view to ensuring priority is given to the early childhood agenda at the local and national level.

The Observatory will develop specific axes on indicators and the municipal plans for early childhood. The indicators will include a specific cross-cutting theme centered on children the 0 to 6 years of age and strive to reflect the public policy guidelines and priorities prescribed in the Early Childhood Legal Framework. In this way, the indicators will interact directly with the goals and targets set out in this Plan and serve as an important monitoring tool.

The functionalities offered by this platform include disaggregated results by sex, skin color/race, location of residence and other socioeconomic aspects capable of enabling public officials and other stakeholders to identify potential inequities in the assistance provided to children within the same locality and to extract individualized reports for each locality.

The Observatory will also offer a continuous and updated overview of those localities that have developed early childhood plans, in addition to a research study analyzing the principal aspects addressed in a selected sample of 100 municipal plans.

⁴⁴⁵ Some of these are the Demographic Census (ten-year), School Census (annual), *Pesquisas Nacionais por Amostra de Domicílio - Pnad* (National Household Sample Survey), and National Health Survey (five-year).

⁴⁴⁶ *Observatório do Marco Legal da Primeira Infância*.

THE PNPI AND THE NOVEL CORONAVIRUS PANDEMIC

As the updated National Plan for Early Childhood was finalized, the world was caught off guard by the novel coronavirus pandemic (SARS-CoV-2),⁴⁴⁷ which unleashed a health crisis across the globe, affecting traditional populations and communities, including isolated peoples in remote spaces. The impact of the disease has been devastating for many countries, and in particular for the economic fortunes of the most vulnerable.

In Brazil, Covid-19 has made the country's well-known social and economic disparities all the more glaring, exacerbating structural inequality and, ultimately, as in every economic and financial crisis the world has ever seen, most inexorably and most severely affecting children. The pandemic has been unforgiving on people subject to precarious housing conditions in low-income urban communities with little access to neighborhood health services or medical and hospital treatment, on those who have lost their formal jobs or have been forced to suspend their subsistence activities and on those for whom securing food is a particular challenge. The rising number of homeless families with children, young adults and elderly is another scourge that requires policy prescriptions to ensure the right to dignified housing in areas with basic sanitation services.

The present crisis has seen serious violations of the rights of children, despite the Statute on the Child and Adolescent, which has been in full force now for 30 years. Violations concern primarily the right to life, health, food, education and play, assistance, family and communi-

ty coexistence, culture, the environment (especially with respect to clean water, fresh air, and basic sanitation), protection from domestic violence, measures to prevent excessive screen time, digital inclusion for the poorest, in sum, to integral protection.

The suspension of educational services in day-care centers and preschools and the inability to play with other children in leisure spaces, on the street and in neighborhoods, unreliable or nonexistent access to the internet and digital communication devices by low-income families have only aggravated educational inequalities in early childhood.

The thousands of fatalities, the difficulty of following the progress of relatives in hospital and those suffering from COVID-19 without medical attention, the loss of family members, friends, acquaintances, the impossibility of properly grieving loss, severely curtailed coexistence or interaction with grandparents and other relatives, the impracticality of participating in social rituals have all produced pronounced physical, social, and mental suffering. Rising cases of domestic aggression and violence, broken family ties, emergent fears, insecurity, emotional instability, the difficulty of planning life, the sensation of doors closing on future prospects, interrupted projects, aesthetic and cultural deprivation, mental exhaustion and social indifference are some of the effects observed during the pandemic.

This pain also falls on young children, indeed to a disproportionate degree. Even when invisible to the eye, deep psycho-affective wounds are inflicted on children by war, destruction, disasters, and other mass loss phenomena. The novel coronavirus pandemic is just such an event. These wounds, neglected by the cold objectivity of statistics and official reports, can

⁴⁴⁷ According to reports, the virus originated in China, in late December 2019, at a wet market in which live animals were sold as protein-based food. Let the experience serve as a warning to Brazilian sanitation surveillance authorities, given the potential health crisis that could result from the practice of commercializing food products in Brazil without proper inspection or refrigeration, handling and/or processing (birds, rabbits, assorted seafood, and shellfish).

accompany people for the rest of their lives and in yet far more dramatic fashion in countries marked by acute inequality and compromised collective resilience.

This traumatic experience for humanity clamors for a new social pact grounded in solidarity and with children placed at the center of our priorities.

A guiding purpose of the National Plan for Early Childhood is to reduce inequality in quality of life, learning opportunities and human development potential of children. It advocates for full social inclusion without exception to any child or childhood in Brazil. And in this way, it seeks to contribute in a vigorous and comprehensive manner to correcting the unjust historical exclusion of multiple childhoods and millions of children by bringing them in from the margins and restoring them to the center of their fundamental rights. The Plan calls for children to be fully supported, respected, and protected.

The objective has taken on greater urgency in the face of the pandemic and its attendant consequences. The reasons for this are clear: childhood is the most vulnerable stage of life, and, at the same time, when the response to caregiving that protects and promotes full development is most profound and lasting. Thus, it is children, above all, whose rights we must protect, guaranteeing them the necessary conditions for life and development as an absolute priority, pursuant to the 1988 Brazilian Federal Constitution, principally in its most paradigmatic provision, article 227, as well as the UN Convention on the Rights of the Child, the Statute on the Child and Adolescent and the Early Childhood Legal Framework.

This Plan sets out a macro and long-term vision, but it adapts to each place and time according to circumstances. Examples of this include the contributions it offers on implementing the UN's Agenda 2030 through actions in the area of children's rights that align with Brazil's commitments under the Sustainable Development Goals. The pandemic requires a contextualized reading of the Plan's principles, operating guidelines, purposive actions, and strategic actions. The unforeseeable effects of the crisis

challenge us to interpret the National Plan for Early Childhood from an innovative perspective in respect of each action and integrated set of actions. We need to develop new capacity to listen, generate spaces and time for the expression and resilience of children, reaffirm confidence in the potential of the human being. We also need creativity capable of fostering a collective response to the toxicity provoked by the pandemic's effects and similar phenomena.

Now, even more than in less traumatic times, we are challenged to create new models of life, development, and social coexistence, to replace competition with cooperation, to pursue greater solidarity, nationally and globally, to adopt equity measures from early childhood, to build a more just society that protects and cares for minorities, to work for the planet's sustainability, in short, to create a culture of comprehensive care.

The crisis has also revealed the need to structure and prepare public services in a manner that ensures a more rapid and effective response to disasters. It is critical that services, especially those that provide special protection, be classified as essential and that they not be interrupted or further depleted. To this end, they need to be organized and prepared to confront emergencies, ensuring that children are protected even in the midst of a pandemic.

In addition to the importance of marshalling efforts in the political, economic, sanitary, educational, cultural and environmental realms, so critical in these times of SARS-CoV-2, attention must be given to problems that affect the health of the population on an ongoing basis, including cancer, cardiovascular and cerebrovascular disease, respiratory viruses, measles, dengue, chikungunya, Zika, hepatitis, HIV – maladies not diagnosed and followed in the gestational and post-natal periods –, the lack of investment in health infrastructure, the absence of basic hygiene measures, the insufficient attention given to basic health care for Indigenous, Quilombola and traditional populations and communities in rural areas, the outlying areas and fringes of large metropolitan areas and urban slums.

Yet, there are good reasons for hope. We see it in the dedication of professionals in health, education, social assistance, journalism and local governments, who are deeply concerned with those suffering the perverse effects of the novel coronavirus; in the creativity of early childhood education teachers who invent unique, but effective, strategies for relating with families and children; in artists who provide culture as a social vessel for reestablishing or strengthening family and community ties; in the initiatives of innumerable social groups and movements to collect and deliver food, clothes, medicine and psychological assistance to the neediest families; in the international and national exchange of researchers and scientists, leveraging their efforts and accelerating the development of solutions.

This Plan sets out a dynamic social policy designed for early childhood, understood in its present meaning as a stage of life having value and dignity in and of itself and as a seed, in the present-day, for redeeming the past and fertilizing a better future. By embracing a holistic approach, it conceives of the earliest years of life for the diversity of childhoods a central priority and believes and trusts in the capacity of Brazil to resolve

the problems discussed in these pages.

The PNPI's vision represents a creative rebirth, the possibility to overcome failures, propose new paradigms, create innovative solutions, and reclaim the best of humanity's memory as a way of confronting challenges. As in any crisis, we are before an historic opportunity to make a firm, yet refined, contribution to future foundations, in which enthusiasm, the capacity for wonder, the vitality and joy of early childhood inspire the possibilities for beauty, in the certainty that, to repeat Dostoevsky's observation in chapter 18: Beauty will save the world.

Through the National Plan, State Plans, Federal District Plans and Municipal Plans, federal, state, federal district and municipal governments have a unique opportunity to forge an ambitious national pact to ensure the dignity and fullness of the lives of young children (article 7, paragraph 2, Law 13257/2016 – Early Childhood Legal Framework) and to adopt these as experiential guides for ensuring the rights of children and fulfilling the absolute priority mandated by the Constitution with regard to the youngest population segments.

The professionals and organizations below participated in developing this National Plan for Early Childhood, through collective and individual efforts, public hearings and discussions, and face-to-face and remote working meetings:

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 Instituto Promundo
 Instituto Viva Infância
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Organização dos Estados Ibero-Americanos para a
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 Organização Mundial para a Educação Pré-Escolar
 (OMEP Brasil Novo Hamburgo)
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 Piraporiando – Educação para a Diversidade
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 UNICEF – Escritório no Brasil
 United Way Brasil
 Universidade Federal de Campina Grande
 Universidade Federal de Alagoas
 Usina da Imaginação

GLOSSARY

STUDIES AND PUBLICATIONS

Diagnóstico sobre o Sistema Nacional de Adoção e Acolhimento 2020: Diagnostic Study on the National Adoption and Sheltering System 2020.

Direitos das Crianças e Princípios Empresariais: Rights of the Child and Business Principles.

É pra Já!: Right now!

Estatísticas do Registro Civil: Civil Registry Statistics.

Guia para Elaboração de Planos Municipais pela Primeira Infância: Guide on the Development of Municipal Plans for Early Childhood.

Levantamento Nacional das Crianças e Adolescentes em Serviços de Acolhimento: National Survey of Children and Adolescents in Sheltering Services.

Levantamento Nacional de Abrigos para Crianças e Adolescentes: National Survey of Child and Adolescent Shelters.

Mapeamento da Insegurança Alimentar e Nutricional a partir da análise do CadÚnico e do SISVAN: Food and Nutritional Insecurity Map based on the CadÚnico and SISVAN.

Orçamento Primeira Infância: Early Childhood Budget.

Orientações Técnicas para Elaboração do Plano Individual de Atendimento (PIA) de Crianças e Adolescentes em Serviços de Acolhimento: Technical Guidelines for Development of the Individual Assistance Plan (IAP) for Children and Adolescents in Sheltering Services.

Orientações Técnicas: Serviços de Acolhimento para Crianças e Adolescentes: Technical

Guidelines: Sheltering Services for Children and Adolescents.

Plano de Desenvolvimento do Bairro: Uma metodologia participativa: Neighborhood Development Plan: A participatory methodology.

Publicidade Infantil em Tempos de Convergência: Child Advertising in Times of Convergence.

Tipificação Nacional de Serviços Socioassistenciais: National Classification of Social Assistance Services.

LEGISLATION

Código de Defesa do Consumidor: Consumer Protection Code.

Código de Trânsito Brasileiro: Brazilian Vehicle Traffic Code.

Consolidação das Leis do Trabalho (CLT): Consolidated Labor Laws.

Diretrizes Curriculares Nacionais da Educação Escolar do Campo: National Curricular Guidelines for Rural School Education.

Diretrizes Curriculares Nacionais da Educação Escolar Indígena: National Curricular Guidelines for Indigenous School Education.

Diretrizes Curriculares Nacionais da Educação Escolar Quilombola: National Curricular Guidelines for Quilombola School Education.

Diretrizes Curriculares Nacionais da Educação Infantil (DCNEI): National Common Curricular Guidelines for Early Childhood Education.

Diretrizes Curriculares Nacionais para a Educação das Relações Étnico-Raciais e para o Ensino de História e Cultura Afro-Brasileira e Africana (DCN-ERER): National Common Curricular Guidelines for Ethno-Racial Relations Education and Afro-Brazilian and African History and Culture.

Estatuto da Cidade: City Statute.

Estatuto da Criança e do Adolescente (ECA): Statute on the Child and Adolescent, Law 8069, dated 13 July 1990.

Lei Brasileira de Inclusão: Brazilian Law of Inclusion.

Lei da Escuta Protegida: Protected Listening Law.

Lei de Diretrizes e Bases da Educação (LDB): National Education Law.

Lei de Diretrizes Orçamentárias (LDO): Budget Guidelines Law.

Lei Geral de Proteção de Dados Pessoais, Lei nº 13.709, de 2018 (LGPD): General Law on the Protection of Personal Data, Law 13079/2018.

Lei Menino Bernardo, Lei nº 13.010: Little Bernardo Statute, Law 13010.

Lei Orgânica de Assistência Social (LOAS): Organic Law of Social Assistance.

Marco Civil de Internet (Lei nº 12.965, de 2014): Internet Bill of Rights (Law 12965/2014).

Marco Legal da Primeira Infância (MLPI): Early Childhood Legal Framework, Law 13257, dated 8 March 2016.

BODIES, ORGANIZATIONS, AND NETWORKS

Câmara de Educação Básica do Conselho Nacional de Educação: Basic Education Board of the National Education Council.

Centro de Referência Especializado de Assistência Social: Specialized Social Assistance Reference Center.

Centro Latino-Americano de Estudos de Violência e Saúde Jorge Careli (CLAVES): Jorge Careli Latin American Center for Studies on Violence and Health.

Centros de Atenção Psicossocial Infanto-Juvenil (CAPSi): Child-Youth Psychosocial Assistance Centers.

Centros de Referência de Assistência Social (CRAS): Social Assistance Reference Centers.

Conselho de Monitoramento e Avaliação de Políticas Públicas do Governo Federal: Federal Government Policy Monitoring and Evaluation Council.

Conselho Nacional das Fundações Estaduais de Amparo à Pesquisa (CONFAP): National Council of State Research Support Foundations.

Conselho Nacional de Assistência Social (CNAS): National Social Assistance Council.

Conselho Nacional de Desenvolvimento Científico e Tecnológico (CNPq): National Council for Scientific and Technological Development.

Conselho Nacional de Educação: National Education Council.

Conselho Nacional de Justiça (CNJ): National Justice Council.

Conselho Nacional dos Direitos da Criança e do Adolescente (CONANDA): National Council for the Rights of the Child and Adolescent.

Conselho Nacional dos Povos e Comunidades Tradicionais: - National Council for Traditional Populations and Communities.

Coordenação de Saúde da Criança e Aleitamento Materno do Ministério da Saúde: Ministry of Health Child Health and Maternal Breastfeeding Unit.

- Corregedoria do Conselho Nacional de Justiça (CNJ): National Justice Council Inspectorate.
- Corregedoria-Geral de Justiça: Office of the Inspector General of Justice.
- Centro Regional de Estudos para o Desenvolvimento da Sociedade da Informação (Cetic.br): Regional Center for Studies on the Development of the Information Society.
- Frente Parlamentar da Criança e do Adolescente: Parliamentary Front for the Child and Adolescent.
- Frente Parlamentar em Defesa dos Direitos da Criança e do Adolescente: Parliamentary Front for Defense of the Rights of the Child and Adolescent.
- Frente Parlamentar Mista da Primeira Infância: Joint Parliamentary Front for Early Childhood.
- Frente Parlamentar Mista de Promoção dos Direitos da Criança e do Adolescente: Joint Parliamentary Front for the Promotion of the Rights of the Child and Adolescent.
- Fundação Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (CAPES): Coordination for the Professional Enhancement of Higher Education Personnel
- Fundação de Amparo à Pesquisa e ao Desenvolvimento Científico e Tecnológico do Maranhão (FAPEMA): Maranhão State Research and Scientific and Technological Development Support Foundation.
- Fundação de Amparo à Pesquisa e Inovação do Espírito Santo (FAPES): Espírito Santo State Research and Innovation Support Foundation.
- Fundação de Amparo à Pesquisa do Distrito Federal (FAPDF): Federal District Research Support Foundation.
- Fundação de Amparo à Pesquisa do Estado de Alagoas: Alagoas State Research Support Foundation.
- Fundação de Amparo à Pesquisa do Estado de Goiás (FAPEG): Goiás State Research Support Foundation.
- Fundação de Amparo à Pesquisa do Estado de Minas Gerais (FAPEMIG): Minas Gerais State Research Support Foundation.
- Fundação de Amparo à Pesquisa do Estado de São Paulo (FAPESP): São Paulo State Research Support Foundation.
- Fundação de Amparo à Pesquisa do Estado do Amazonas (FAPEAM): Amazonas State Research Support Foundation.
- Fundação de Amparo à Pesquisa do Estado do Rio de Janeiro (FAPERJ): Rio de Janeiro State Research Support Foundation.
- Fundação Nacional de Saúde (FUNASA): National Health Foundation.
- Fundação Nacional do Índio (FUNAI): National Indian Foundation.
- Fundação Palmares: Palmares Foundation.
- Grupo de Pesquisa da Relação Infância, Juventude e Mídia (GRIM): Research Group on Child, Youth and Media Relations.
- Instituto Brasileiro de Geografia e Estatística (IBGE): Brazilian Institute of Geography and Statistics.
- Instituto de Estudos Avançados da Universidade de São Paulo (IEA-USP) – Institute of Advanced Studies of the University of São Paulo.
- Instituto Nacional de Estudos e Pesquisas Educacionais Anísio Teixeira (INEP): Anísio Teixeira National Institute for Educational Studies and Research.
- Instituto de Pesquisa Econômica Aplicada (IPEA): Institute of Applied Economic Research.
- Instituto Nacional de Saúde da Mulher, da Criança e do Adolescente Fernandes Figueira: Fiocruz/IFF da Fundação Oswaldo Cruz: Fernandes Figueira National Institute for the Health of Women, Children and Adolescents /

Oswaldo Cruz Foundation.

Núcleo de Ciência pela Infância (NCPI): Early Childhood Science Center.

Núcleos de Atenção à Saúde da Família (NASF): Family Health Support Centers.

Pastoral da Criança: Children's Pastoral.

Plataforma de Monitoramento do Marco Legal da Primeira Infância: Early Childhood Legal Framework Monitoring Platform.

Rede Cegonha: Stork Network.

Rede de Atenção Psicossocial (RAPS): Psychosocial Assistance Network.

Rede Nacional de Defesa dos Direitos Infanto-Juvenis: National Network for the Defense of the Rights of Children and Youth.

Rede Nacional Primeira Infância (RNPI): National Network for Early Childhood.

Rede para Políticas Informadas por Evidências (EVIPNet): Evidence-Informed Policy Network.

Sociedade Brasileira de Pediatria: Brazilian Society of Pediatrics.

POLICIES, PLANS, PROGRAMS, PACTS, FUNDS, SYSTEMS, AND STRATEGIES

Base Nacional Comum Curricular (BNCC): National Common Core Curriculum.

Base Nacional Comum Curricular/Educação Infantil (BNCC/EI): National Common Core Curriculum for Basic Education/Early Childhood Education.

Benefícios de Prestação Continuada (BPC): Continuing Assistance Benefits.

Cadastro Nacional de Adoção: National Adoption Registry.

Central de Informações de Registro Civil das Pessoas Naturais (CRC): Civil Registration Database of Natural Persons.

Comissão de Valorização da Primeira Infância e Cultura de Paz do Senado Federal: Senate Committee for the Valuing of Early Childhood and the Culture of Peace.

Disque Direitos Humanos - Disque 100: Human Rights Hotline – Dial 100.

Estratégia Amamenta e Alimenta Brasil: Breastfeed and Nourish Brazil Strategy.

Estratégia Brasileirinhas e Brasileirinhos Saudáveis (EBBS): Healthy Brazilian Girls and Boys Strategy.

Estratégia de Atenção Integral às Crianças com Síndrome Congênita do Zika Vírus (SCZV): Comprehensive Care Strategy for Children with Congenital Zika Virus Syndrome.

Estratégia de Atenção Integrada às Doenças Prevalentes na Infância (AIDPI): Strategy on Integrated Care for Prevalent Childhood Diseases.

Estratégia Nacional para Promoção do Aleitamento Materno e Alimentação Complementar Saudável no SUS: National Strategy for the Promotion of Maternal Breastfeeding and Healthy Complementary Feeding under the Unified Health System – SUS.

Estratégia Pré-Natal do Parceiro: Partner Prenatal Care Strategy.

Estratégia Saúde da Família (ESF): Family Health Strategy.

Fundo de Nacional Manutenção e Desenvolvimento da Educação Básica e de Valorização dos Profissionais da Educação (FUNDEB): Basic Education Maintenance and Development and Education Workers Enhancement Fund.

Fundo dos Direitos da Criança e do Adolescente

te: Fund for the Rights of the Child and Adolescent.

Fundos da Criança e do Adolescente: Child and Adolescent Funds.

Fundo Municipal dos Direitos da Criança e do Adolescente: Municipal Fund for the Rights of the Child and Adolescent.

Fundo Nacional de Desenvolvimento da Educação (FNDE/MEC): National Education Development Fund.

Iniciativa Hospital Amigo da Criança: Friend of the Child Hospital Initiative.

Norma Brasileira de Comercialização de Alimentos para Lactentes e Crianças de Primeira Infância, Bicos, Chupetas e Mamadeira (NB-CAL): Brazilian Norm on the Commercialization of Food for Breastfeeding Infants and Young Children, Bottle Nipples, Pacifiers and Baby Bottles.

Norma Operacional Básica (NOB): Basic Operating Norm.

Observatório do Marco Legal da Primeira Infância: Early Childhood Legal Framework Observatory.

Orçamento Criança e Adolescente (OCA): Child and Adolescent Budget.

Pacto Interfederativo para o Atendimento Integral dos Direitos da Criança: Inter-Federative Pact on Integral Fulfillment of the Rights of the Child.

Pacto Nacional pela Primeira Infância: National Pact for Early Childhood.

Pacto Nacional pela Redução da Mortalidade Materna e Neonatal: National Pact for the Reduction of Maternal and Neonatal Mortality.

Pesquisa de Orçamentos Familiares (POF): Household Budget Survey.

Plano de Ação para Implementação da Agenda 2030 (ODS): Action Plan for the Implementa-

tion of the 2030 Agenda (SDG).

Plano de Bairro Participativo: Participatory Neighborhood Plan.

Plano Diretor Estratégico (PDE): Strategic Master Plan.

Plano Decenal de Direitos Humanos de Crianças e Adolescentes: Ten-Year Child and Adolescent Human Rights Plan.

Plano Plurianual (PPA): Multi-Annual Plan.

Plano Mais Saúde: More Health Plan.

Plano Nacional de Alimentação Escolar (PNAE): National School Meal Program.

Plano Nacional de Assistência Social: National Social Assistance Plan.

Plano Nacional de Cultura: National Culture Plan.

Plano Nacional de Educação - PNE (2014-2024): National Education Plan (2014-2024), Law 13005/2014.

Plano Nacional de Enfrentamento da Violência Sexual contra Crianças e Adolescentes: National Plan to Combat Sexual Violence against Children and Adolescents.

Plano Nacional de Habitação: National Housing Plan.

Plano Nacional de Promoção, Proteção e Defesa do Direito de Crianças e Adolescentes à Convivência Familiar e Comunitária: National Plan for the Promotion, Protection and Defense of the Rights of the Child and Adolescent to Family and Community Coexistence.

Plano Nacional de Saúde: National Health Plan.

Política de Assistência Social Básica: Basic Social Assistance Policy.

Política de Atenção à Criança e ao Adolescente: Child and Adolescent Care Policy.

Política de Atenção Integral à Saúde da Criança: Policy on Comprehensive Child Health Care.	Programa Bolsa Família (PBF): Family Grant Program.
Política de Atenção Integral: Comprehensive Care Policy.	Programa Brasil Carinhoso: Caring Brazil Program.
Política de Atendimento dos Direitos da Criança e do Adolescente: Policy on Fulfillment of the Rights of the Child and Adolescent.	Programa Criança Feliz (PCF): Happy Child Program.
Política de Educação do Campo: Rural Education Policy.	Programa de Agentes Comunitários de Saúde: Community Health Agent Program.
Política Nacional de Assistência Social (PNAS): National Social Assistance Policy.	Programa de Erradicação do Trabalho Infantil (PETI): Child Labor Eradication Program.
Política Nacional de Alimentação e Nutrição: National Food and Nutrition Policy.	Programa Empresa-Cidadã: Citizen Company Program.
Política Nacional de Atenção Básica (PNAB): National Primary Health Care Policy.	Programa Nacional de Educação na Reforma Agrária (PRONERA): National Agrarian Reform Education Program.
Política Nacional de Atenção Integral à Saúde da Criança (PNAISC): National Policy on Comprehensive Child Health Care.	Programa Nacional de Imunização: National Immunization Program.
Política Nacional de Atenção Integral à Saúde do Povo Cigano/Romani: National Policy on Comprehensive Gypsy/Romany People Health Care.	Programa Nacional de Reestruturação e Aquisição de Equipamentos para a Rede Escolar Pública de Educação Infantil (Proinfância): National Facilities Revitalization and Procurement Program for the Public Early Childhood Education System.
Política Nacional de Busca de Pessoas Desaparecidas: National Policy on Missing Persons.	Programa Primeira Infância Melhor (PIM/RS): Program for a Better Early Childhood.
Política Nacional de Desenvolvimento Sustentável dos Povos e Comunidades Tradicionais: National Policy for the Sustainable Development of Traditional Populations and Communities.	Programa Saúde na Escola (PSE): School Health Program.
Política Nacional de Educação Ambiental (Panea): National Environmental Education Policy.	Programa Universidade da Criança: Child University Program.
Política Nacional de Educação Permanente: National Continuing Education Policy.	Projeto Pai Presente: Involved Dad Project.
Política Nacional de Redução da Morbimortalidade por Acidentes e Violências: National Policy for the Reduction of Morbidity and Mortality due to Accidents and Violence.	Serviço de Acolhimento em Família Acolhedora: Host Family Sheltering Service.
Política Nacional de Segurança Alimentar e Nutricional: National Food and Nutritional Security Policy.	Serviço de Proteção e Atendimento Especializado a Famílias e Indivíduos (PAEFI): Specialized Protection and Assistance Services for Families and Individuals.
	Serviço de Convivência e Fortalecimento de

Vínculos (SCFV): Community Coexistence and Family Bonding Service.

Serviço de Prestação de Serviços à Comunidade (PSC): Community Service Program.

Serviço de Proteção Integral à Família (PAIF): Integral Family Protection Service.

Serviço de Proteção Social a Adolescentes em Cumprimento de Medida Socioeducativa de Liberdade Assistida (LA): Social Protection Service for Adolescents in Socio-Educational and Assisted Liberty Programs.

Serviço de Proteção Social Básica no Domicílio para Pessoas Idosas e com Deficiência (SD): Basic in-Home Social Protection Service for Elderly and Disabled Persons.

Serviço de Proteção Social Especial para Pessoas com Deficiências e suas Famílias: Special Social Protection Service for Persons with Disabilities and Their Families.

Serviço de Proteção Social Especial para Pessoas com Deficiência, Idosas e suas Famílias: - Special Social Protection Services for Persons with Disabilities, the Elderly and Their Families.

Serviço Especializado em Abordagem Social: Specialized Social Service.

Serviço Especializado para Pessoas em Situação de Rua: Specialized Service for Homeless Persons.

Sistema de Garantia dos Direitos: Rights Guarantee System.

Sistema de Garantia dos Direitos da Criança e do Adolescente (SGDCA): Child and Adolescent Rights Guarantee System.

Sistema de Informação para Infância e Adolescência (SIPIA): Child and Adolescent Information System.

Sistema de Informação sobre Internações Hospitalares (SIH): Hospitalization Information System.

Sistema de Informações sobre Nascidos Vivos (SINASC): Live Birth Information System.

Sistema Nacional de Adoção e Acolhimento (SNA): National Adoption and Sheltering System.

Sistema Nacional de Informação de Agravos de Notificação (SINAN): National Notifiable Health Conditions Information System.

Sistema Nacional de Atendimento Socioeducativo (SINASE): National Socio-Educational Assistance System.

Sistema Nacional de Segurança Alimentar e Nutricional (SISVAN): National Food and Nutritional Security System.

Sistema Único de Assistência Social (SUAS): Unified Social Assistance System.

Sistema Único de Saúde (SUS): Unified Health System.

*Caring for Young
Children is to
care for life.*



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