



What we do in Brazil

- We're improving the quality of education for 18,166 children
- We're helping 14,455 young people access improved sexual health services
- We're starting a major programme to help children survive and grow up healthy
- We're promoting children's rights and participation



Brazil has the largest economy in South America and the ninth largest in the world. But it's also one of the most unequal countries in the world, in part the legacy of its colonial history. The richest 10% of Brazilians enjoy 50% of the country's income, while the poorest 10% receive less than 1%. **Half of the country's 60 million children live in poverty** – mostly those from indigenous communities or of African descent living in rural areas or in city *favelas* (slum areas).

Recent political stability and economic growth has allowed Brazil to make good progress in key areas, such as reducing the number of babies who die before their first birthday (the infant mortality rate) from 48 per 1,000 live births in 1990 to 19 per 1,000 just 16 years later. But not everyone has benefited equally. The infant mortality rate for children born to black mothers is around 40% higher than for children born to white mothers. And children from the poorest 20% of the population are three times more likely to die before their fifth birthday than children from the richest 20%.

Poverty, inequality and social injustice have given rise to serious social tensions. The level of violence in some of Brazil's cities is among the highest of any region not at war. And more and more children have to work for their own and their family's survival. It's estimated that 6 million children aged 5–15 are involved in child labour such as domestic work, many of them subject to exploitation and abuse. The global economic downturn has pushed many people even further into poverty, as job losses take hold. Unemployment is one of the biggest problems facing the country. The government is planning to expand established safety nets

such as the *Bolsa familia* (family grant), but many families will continue to struggle as the full impact of the downturn is felt.

Save the Children in Brazil

We've worked in Brazil since 1991. We've focused on improving the quality of education children receive. We've worked to protect children through tackling child labour and sexual exploitation. And we've tried to help young people deal with HIV and AIDS through innovative education and information work, as well as training health staff and making health services more accessible for young people.

In 2008–09, our activities benefited 32,800 children. There have also been some significant changes in the direction of our work. We carried out a children's rights situation analysis (CRSA) that has informed our country strategy plan for the next four years (2009–2013), establishing quality inclusive education and health as the priority areas for expansion. We also decided to focus our programmes in the semi-arid areas of the north east and northern states, where poverty and inequality are greatest.

We'll continue to work with children of African descent in Salvador, Senhor do Bonfim, Recife, Olinda and Natal, as well as with indigenous communities in rural parts of Bahia and Pernambuco states. But we also work with children in the slums of the southern cities of São Paulo, and Niteroi, where migrants from northern states come looking for work. As we expand, we'll be working with communities in north-eastern Sertão, where 70% of the 13 million children live in poverty as their families try to scratch out a living from the semi-arid land.

Also in 2009, the International Save the Children Alliance selected a Brazilian national partner – Fundação Abrinq – to become a “strong member”. This means that the two Alliance members working in Brazil (Save the Children UK and Save the Children Sweden) will be integrating our activities with Fundação Abrinq to establish a ‘unified presence’, enabling us to pool our resources to bring about even greater changes in children's lives.

We're improving the quality of education

In poor, rural areas, up to 20% of children who enrol in school drop out in the first year, and a further 40% drop out by the end of the last year of primary education. Many children have to leave school in order to support their family, because what their parents earn isn't enough for the family to get by. But children also drop out because the curriculum is irrelevant to their lives and the quality of state education is low: 70% of children who've completed six years of schooling can't read or understand forms, for example, to apply for a job or open a bank account.

We're working with children, teachers and local authorities to improve access to and quality of education. Last year, our education activities reached 18,166 children. We've achieved this through training teachers in non-discrimination, child-centred learning methods and

positive, non-violent forms of classroom discipline. We've helped 5,000 children and young people develop their skills in indigenous artwork. A further 3,000 children from *Quilombola* communities (people of direct African descent who maintain a strong cultural identity) benefited from Education Plans that were implemented in their schools.

We're expanding our work on early childhood education, improving preschool provision for children aged 0–6. We're working closely with the Brazilian Campaign for the Right to Education and the Network for Early Childhood Education (MIEIB) to get this provision included (and funded) as part of the federal education system. This will eventually benefit more than 5.5 million children. Last year, 810 children benefited from the strengthening of the Escola Cid Passos (Salvador, Bahia), which has become a model for early childhood education provision rooted in African-indigenous art and culture.

One of our biggest achievements in the last two years was developing the Cost per Pupil for Quality Education Instrument (CAQI). This is a way of measuring the cost of providing a quality education to different groups of children in different areas. We again worked closely with the Brazilian Campaign for the Right to Education to persuade the government to use this tool as a basis for its federal education budgets. In November 2008, the Campaign signed the first technical cooperation agreement with the National Council of Education, through which the Council undertakes to make CAQI the standard for education in Brazil. This is a major step forward in guaranteeing the right to education for millions of students. We're also pushing for an increase in the national education budget to at least 7% of GDP.

We're promoting services to reduce the number of children and young people contracting HIV

Brazil has the highest number of people living with HIV and AIDS in South America (estimated at 660,000). Prevalence is rising among young women, and many people in need of treatment or care are excluded from services because of poverty, gender or race. Young people lack access to information on sexual health and family planning, and the rate of teenage pregnancies is high.

Our aim is to reduce the numbers of children aged 10–14 contracting HIV, as well as the number of teenage pregnancies. We're working closely with a wide range of partner organisations to improve sexual and reproductive health (SRH) services to make them more 'user-friendly' for young people across six cities (Recife, Natal, São Paulo, Rio de Janeiro, Niteroi and Salvador). With funding from Irish Aid, we're training 300 health workers in HIV prevention, children's rights and non-discriminatory practices. We're making adolescent services as accessible as possible – for instance, holding separate clinics for 10–14-year-olds and 15–19-year-olds.

Last year, our activities reached 14,455 children and young people, including 8,765 girls. Services geared towards young people's needs are now being offered in nine health centres

in three cities (Recife, Natal and São Paulo) and 2 hospitals in Rio de Janeiro and Niteroi. And children in 40 schools (30 in Natal, 4 in São Paulo and 6 in Recife) are learning how to protect themselves from HIV and other sexually transmitted illnesses (STIs).

More than 12,000 young men and women accessed youth-friendly services for the prevention of HIV and improved sexual health. And more than 1,000 children and young people living with HIV in Rio de Janeiro are benefiting from improved services, with their families able to get counselling and legal support. We've trained 320 young people, some of them living with HIV, as peer educators. They talk directly to other young people about how they can protect themselves and campaign for better services that meet their needs. Teenagers can discuss difficulties they experience in their relationships – for instance, being unable to insist on using condoms if their partner is violent, thus putting them at greater risk of being infected with HIV

We're using exciting and innovative ways of working with young people to encourage them to take up improved sexual and reproductive health services. In Recife and São Paulo, our partners are using graffiti workshops to get across messages about HIV prevention and get more young people using sexual health services. A graffiti mural became a sign that the health unit was open and ready to listen to young people and serve their needs.

We're supporting local government to collect baseline information on the number of children and young people affected by HIV and AIDS in the three cities so that future plans and priorities are based on the fullest possible information. In the process, we've discovered gaps in services for other adolescents' health needs, including vaccinations, nutrition and the prevention and treatment of STIs. So we're expanding our work to support health services to tackle teenage health in a more comprehensive way.

Over the next few years, we'll integrate our HIV and AIDS and sexual health work into our child survival and health thematic programme.

We're helping children to survive and grow up healthy

There are huge inequalities between people in Brazil linked to race, ethnicity, gender, social class and geography. In the north east there are areas of extreme poverty, where many children still die from easily preventable and treatable illnesses like diarrhoea and pneumonia.

Our Brazil programme is one of the 'champion' countries in Save the Children's biggest ever global campaign – to save children's lives. We've received approval from the European Commission (EC) for a five-year, £5 million proposal to improve early childhood development for children under five. Together with our partners, we'll improve access to integrated basic services (health, education, nutrition, protection and parenting) for 192,300 children under five from poor and excluded communities in Pernambuco and Bahia states, in the north east.

The project aims to support non-state actors and local authorities to provide services that improve the health and wellbeing of children under five, and to make duty-bearers (including community members and parents) more responsible and accountable for protecting children's rights. Partners will set up daycare centres, where children under five receive basic education and get a wholesome meal every day, where hygiene and sanitation measures are respected, and where parents, caregivers and teachers know to refer a sick child, or a child in need of protection.

We've recently started to provide emergency nutrition on a small scale in Pernambuco, targeting native Brazilian children, children of African descent and children living in remote areas. This initiative will serve as the basis for future work on safety nets and cash transfers as an effective way of reducing poverty and increasing children's chances of survival.

We've also started a child survival, maternal health and food security project that will benefit 12,000 children and women in remote areas of the state of Pará, in the Amazon region.

We're promoting children's rights and participation

Brazil has comprehensive laws and policies which, if implemented fully, would ensure the protection of children's rights. The problems related to implementation arise from a general lack of awareness of children's rights, lack of monitoring, and lack of consequences when laws and policies are not respected. The situation is compounded by a general culture that doesn't regard children as rights-holders and continues to perpetuate prejudices linked to race, ethnicity, gender, social class, and geography.

Together with our partners, we're planning to intensify our efforts to raise awareness of children's rights, and strengthen the ability of duty-bearers such as local authorities to fulfil their obligations to children.

We're supporting communities to protect children's rights

We've helped one of our partners, Ação Educativa, launched the "Speak, Educator!" campaign, which aims to mobilise civil society groups to take action against the justice system and repeal laws that reduce teachers' freedom of speech. The "Gag Law", for example, prevents teachers and other public officials from criticising the public education system. To some extent, it explains why teachers are largely silent on important issues affecting education, such as corruption, violence, and funding.

We're promoting children's participation

For some years we've been championing children's participation and working with local partners to promote children's meaningful participation in decision-making processes.

Through our HIV and sexual health programme, we're promoting young people's participation in the management councils of health units, so that they have a greater say in decisions about provision of services that affect them.

Two young people from Brazil linked to our partner, CRIA, in Salvador, have been taking part in our Global Children's Panel, which makes recommendations about priorities for Save the Children's work globally.

We're also supporting ANCED (National Association of Protection Centres) to get children's views to feed into the civil society report on the government's progress in relation to its commitments under the United Nations Convention on the Rights of the Child (UNCRC). They held participatory workshops in several cities with vulnerable children, including children from native Brazilian communities, children of African Descent, members of the *Sem Terra* (landless) organisation, working children and street children.

We're helping communities affected by natural disasters

Brazil, particularly the north-east region, is prone to droughts and heavy rains that lead to mudslides and floods, events which are becoming more common due to the effects of climate change. In early 2009, this region experienced heavy rains, affecting more than 1.2 million people in 13 out of the 27 states.

We provided emergency relief to 30,000 people in the state of Ceará, one of the worst affected areas. We set up safe areas for children to play and education facilities so that they could continue with classes. We're also helping reinforce river banks that were damaged.

Our disaster preparedness activities involve working with children, parents, teachers, communities, local authorities and public administrators to find practical ways to protect their homes and livelihoods in the event of an emergency. Together with the Centro Nordestino de Medicina Popular, we carried out a pilot project to integrate disaster risk reduction (DRR) activities with basic healthcare and nutrition, benefiting 60 families (300 people) in three rural areas of Pernambuco that have high levels of anaemia and child malnutrition. Our aim was to improve children's access to food by promoting the proper use and preservation of water, including capture and use of rainwater. We also worked with the communities to plant shrubs, fruit trees and vegetables to improve the variety of children's diet and make them less vulnerable to anaemia.



Save the Children UK
1 St John's Lane
London EC1M 4AR
Telephone +44 (0)20 7012 6400
Fax +44 (0)20 7012 6963
savethechildren.org.uk