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Third periodic report submitted by Brazil under articles 16 and 17 of the Covenant, due in 2014*

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List of Acronyms

ADPF	Claim of Breach of Fundamental Precept
AECID	Spanish Agency for International Development Cooperation
IBGE	Brazilian Institute of Geography and Statistics
CONADE	National Council for the Rights of the Person with Disability
CONANDA	National Council for the Rights of Children and Adolescents
EAD	Distance Learning
ECA	Statute of the Child and Adolescent
FUNAI	National Indian Foundation
IPEA	Institute of Applied Economic Research
LBI	Brazilian Inclusion Law
LGBT	Lesbians, Gays, Bisexuals, Transvestites, and Transsexuals
MDH	Ministry of Women, Family and Human Rights
MERCOSUR	Southern Common Market
OAS	Organization of American States
WHO	World Health Organization
UN	United Nations
PEC	Constitutional Amendment Proposal
ICCPR	International Covenant on Civil and Political Rights
ICESCR	International Covenant on Economic, Social, and Cultural Rights
UNDP	United Nations Development Programme
PPA	Multi-Year Plan
PROERD	Drug and Violence Resistance Educational Program
SINAPIR	National System for Promotion of Racial Equality
SINASE	National System of Social-Educational Assistance
SNJ	National Youth Office
SNPPIR	National Office for Racial Equality Promotion Policies
SPM	Office for Policies for Women
STF	Brazilian Supreme Court
SUAS	Unified Social Assistance System
SUS	Unified Health System
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
PLANAPIR	National Plan for Promotion of Racial Equality
PNAD	National Household Sample Survey
PNDH	National Human Rights Program

Introduction

1. The International Covenant on Economic, Social, and Cultural Rights (ICESCR) was adopted by the United Nations (UN) in 1966 and ratified by Brazil on January 24, 1992, complementing the commitments provided for in the Universal Declaration of Human Rights.
2. Brazil's III ICESCR Report refers to the period between 2007 and July 2018. It was prepared under the responsibility of the Ministry of Women, Family and Human Rights (MDH), based on several sources of information compiled from consultations with sectoral agencies responsible for implementing initiatives in the field of economic, social, and cultural rights, in addition to data included in national censuses, in the National Household Sample Survey (PNAD),¹ in public information systems, research, studies, and technical publications prepared by national and international institutes and research centers.
3. The information on each article respects the chronological order of actions undertaken by Government. Each section is generally structured in the following order: (1) brief diagnosis and presentation of statistics on the situation of the rights addressed; (2) rules and legal instruments created in the period analyzed; (3) evolution of the funds invested in actions aimed at guaranteeing the rights under discussion; (4) public policies adopted, their results, and any challenges identified. The information provided also contemplates the Final Remarks by the Committee on Economic, Social and Cultural Rights regarding the II Report.
4. Finally, more information and specific data for the period can be found in the Common Core Document (DBC) and in the following periodic reports submitted by Brazil: III Report on the International Covenant on Civil and Political Rights (III ICCPR Report); II-IV Report to the Convention on the Rights of the Child and updated additional information (II-IV CRC Report); I Report to the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution, and child pornography (I OPSC-CRC Report); and II Report to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (II CAT Report).

Article 1

5. The Brazilian Government has acted over the last few years to reinforce the right to self-determination. As part of its human rights agenda, Brazil has sought to create conditions for its citizens, including indigenous peoples, *Quilombola* communities, the Romani peoples, and other traditional communities,² to freely determine their political status and freely ensure their economic, social, and cultural development.
6. Upon the enactment of the Brazilian Federal Constitution of 1988, a new legal framework was instituted, culminating, in the 1990s, in the formal demarcation of a significant part of the indigenous lands in Brazil, especially in the region known as Legal Amazon.
7. The current Brazilian indigenous population, according to the Demographic Census carried out by IBGE in 2010, comprises 817,963 individuals, 502,783 of which live in the rural area and 315,180 of which live in cities. The National Policy for the Sustainable Development of Traditional Peoples and Communities (PNPCT) was established in 2007 to promote the rights of persons living in such communities.

¹ The PNAD is conducted on an annual basis (except in the years of demographic censuses, which, in the period of analysis of the Report, encompasses 2010) with a view to collecting information on demographic and socio-economic characteristics of the population from households. Additional surveys are also conducted on different topics, such as food and nutritional security, digital inclusion, access to health and education services, among others.

² Traditional peoples and communities are the culturally different groups that recognize themselves as such, with their own forms of social organization, and that occupy and use territories and natural resources as a condition for their cultural, social, religious, ancestral, and economic sustainability, using knowledge, innovation, and practices generated and transmitted through tradition. They include: indigenous peoples, *Quilombola* peoples, *terreiro* communities, extractivists, riparian population, *caboclos*, artisanal fishers, Pomeranians, among others.

8. Accordingly, in January 2013, the Federal Government, through the current National Office for Racial Equality Promotion Policies (SNPPPIR) and the federal agencies that compose the Interministerial Working Group, prepared the I National Plan for Sustainable Development of Traditional Peoples and Communities of African Origin, in order to fight against discrimination suffered by peoples of African descent, especially in traditional communities.

Article 2

A. Measures adopted for the progressive implementation of the right to Equality

9. In the Federal Public Administration, SNPPPIR is responsible for the execution of policies and guidelines to promote racial equality, coordination of affirmative public policies for the promotion of equality and the protection of the rights of individuals and racial and ethnic groups.

10. Among the measures adopted by the Brazilian State for the progressive implementation of the rights to equality, the National Plan for Promotion of Racial Equality (PLANAPIR) establishes the goal of overcoming racial inequalities in Brazil, through the adoption of affirmative actions to guarantee the ethnic and racial dimension in public policies implemented by the government.

11. In addition to the ongoing initiatives to promote the right to equality in Brazil, the Statute of Racial Equality, adopted on July 20, 2010, consolidated and expanded the legal framework in the fight against discrimination. It established the basis for the adoption of affirmative actions aimed at correcting existing distortions in Brazil. Notably, the Higher Education Quota Law (Law No. 12,711/2012), reserves 50% of the vacancies in all courses at federal higher education institutions considering social and racial criteria, thus contributing to increase the access to university by the Afro-Brazilian population.

12. The Quota Law for federal public sector recruitment (Law No. 12,990/2014) reserves to Afro-Brazilian persons 20% of the posts offered within the federal public sector. Within the scope of the Federal Supreme Court (STF), the decision regarding Claim of Breach of Fundamental Precept No. 186 (ADPF 186), in April 2012, clarified the legal framework for the implementation of racial quotas in Brazil, through unanimous approval among the Justices from STF.

13. The Guide to Fight against Institutional Racism, launched in May 2013, was designed for public institutions, organizations and companies to evaluate their actions and organize their diagnoses, indicators and strategies, in order to strengthen the commitment of Brazilian society and the State to fight racism within the public sector.

14. In the same year, IBGE, in technical cooperation with SNPPPIR, launched the Spatial Population Distribution Map, according to color or race – blacks and *pardos* (mixed race). The document enabled identification of the location of the Afro-Brazilian population throughout the country, which was essential to develop targeted policies.

15. In the field of international cooperation, the Brazilian Government implements important initiatives in the Americas aiming at the promotion of equality and inclusion of people of African descent. Presently, Brazil has two cooperation projects with Uruguay in the scope of AECID: Institutional Strengthening and Strengthening of Municipal Governments in Borders, with the allocation of 40,000 and 60,000 Euros respectively. Another important instrument, launched in 2013, was the National Plan for Prevention of Violence against Afro-Brazilian Youth – *Juventude Viva*, to promote the rights and the prevention of violence against the Afro-Brazilian youth. It focuses on Afro-Brazilians, between ages 15 to 29, in a situation of social vulnerability or exposed to situations of violence.

16. Brazil has signed the Bilateral South-South Cooperation Agreement with Uruguay, through the Uruguayan International Cooperation Agency (AUCI) and the Brazilian Cooperation Agency of the Ministry of Foreign Affairs (ABC/MRE), in order to develop a project for training teachers on ethnic and racial education.

B. Measures adopted for the progressive implementation of the rights of Children and Adolescents

17. In developing and implementing public policies with respect to the rights of children and adolescents, Government action is based on two basic constitutional precepts. Firstly, it recognizes the legal rights ensured to children and adolescents by the Constitution of 1988. Secondly, it recognizes the role of the family and society, as well as the Government itself, in ensuring that children and adolescents, with absolute priority, have the right to life, health, food, education, leisure, professional qualification, culture, dignity, respect, freedom, and family and community coexistence, in addition to the duty to keep them safe in a plural society.

18. One of the most significant legislation adopted by Brazil, pursuant to the international rules on the protection of children, is Law No. 11,829 of November 25, 2008, which establishes disciplines to fight against production, sale and distribution of child pornography, as well as criminalizes the acquisition and possession of such material and other pedophilia-related conducts on the internet. It further contributed to align national legislation to the principles established in the Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution, and Child Pornography.

C. Measures adopted for the progressive implementation of the rights of Youth

19. Considering the situation of vulnerability of children and teenagers, young men and women are also right holders under the Brazilian Constitution. On July 9, 2013, the Brazilian Government approved the Youth Statute, which is a set of laws and regulations addressing the rights of the population of young men and women between 15 and 29 years old, in addition to establishing the principles and guidelines to reinforce and organize policies on youth. In this regard, Constitutional Amendment No. 65 of 2010 modified article 227 of the Brazilian Federal Constitution in order to address the interests of young men and women, in addition to children and teenagers.

D. Measures adopted for the progressive implementation of LGBT rights

20. The *Brasil Sem Homofobia* Program, created in 2004, was responsible for expanding government action in LGBT field of rights, such as the National Plan for Promotion of Citizenship and Human Rights for Lesbians, Gays, Bisexuals, Transvestites, and Transsexuals, the National Policy for Comprehensive Health Care to Lesbians, Gays, Bisexuals, Transvestites, and Transsexuals, and the National Council to Combat Discrimination with emphasis in promoting LGBT rights.

21. Program contributed also to the creation of Reference Centers in Human Rights and Homosexual Citizenship (CRDHCH) in all Brazilian capital cities, aiming at providing legal, social, and psychological assistance to the LGBT population.

22. Congress Resolution No. 11 of December 18, 2014, established the parameters for the inclusion of the items “sexual orientation”, “gender identity”, and “chosen name” in police reports issued by public security agencies, considered to be an important mechanism to compile reliable statistics regarding crimes against the LGBT population. This decision considered Article 5 of the Brazilian Federal Constitution, which sets forth that all persons are equal before the law, with no distinction whatsoever.

23. Later, Decree No. 9,278 of February 5, 2018, regulated Law No. 7,116 of August 29, 1983, allowing the chosen name to be included upon written request in national identity cards, together with reference of the civil registry identification in the back of document. The Superior Electoral Court (TSE), in an administrative session held on March 1, 2018, also decided that transsexuals and transvestites may request the issuance of the voter registration card with their chosen name.

24. The Judiciary Branch was also a key actor on LGBT rights. In 2011, STF ruled favorably on the legality of the domestic partnership between two persons of the same sex, recognizing it as a family entity, with rights and duties equivalent to those of the

heterosexual domestic partnership. The Federal Constitution sets forth the possibility of converting domestic partnership into marriage, which also applies to gay marriage. In another historical and unprecedented decision, in 2015, STF granted same-sex couples the right to adoption, establishing a precedent which is taken into account in all legal proceedings about the same subject.

25. In order to fight against LGBTphobia, the Federal Government seeks stimulate the compilation of data on crimes against LGBT persons. To that effect, the Government has subscribed to a number of national and international commitments, such as ICCPR, OAS Resolution n° 2435: Human Rights, Sexual Orientation and Gender Identity, dated June 2008, the UN Declaration condemning human rights violations based on sexual orientation and gender identity (A/63/635), dated 22 de december 2008; and PNDH-3.

26. The latest measure taken by the Federal Government within the scope of this report in order to ensure the rights of the LGBT population is the National Covenant for Eradicating LGBTphobic Violence, created by Ordinance No. 212/2018, aimed at promoting actions to fight violence against LGBT persons.

E. Measures used to progressively implement the rights of the Person with Disabilities

27. The Convention on the Rights of Persons with Disabilities and the Optional Protocol thereto, signed by the Brazilian State on March 30, 2007, contributed to consolidate the legal framework and the national policy for the protection and promotion of the rights of persons with disabilities. Upon approval by the National Congress, the Convention acquired equivalency to a Constitutional Amendment under Brazilian law.

28. Based on the principles and rules of the Convention on the Rights of Persons with Disabilities, Brazil approved the Statute of the Persons with Disabilities or the Brazilian Inclusion Law (LBI) (Law No. 13,146 of 2015), aimed at ensuring and promoting, under equality conditions, the enforcement of the fundamental rights and liberties of the persons with disability, aiming at their social inclusion and citizenship.

29. The LBI also ensures the provision, through the SUS, of orthoses, prosthetics, assisting devices for locomotion and medicines to the person with any disability. It further ensures an inclusive educational system at all levels and education throughout the whole life cycle, in regular public or private education institutions.

30. In September 2007, through Decree No. 6,215, the Government promoted the Commitment for Inclusion of Persons with Disabilities, with the purpose of achieving a higher coverage of services for persons with any disability, improving the process of social inclusion.

31. In 2009, the Government launched the campaign Equals in Difference for Inclusion of Persons with Disabilities, as part of the social agenda. Based on the Convention on the Rights of Persons with Disabilities, the Brazilian Government established the National Plan on the Rights of Persons with Disabilities – Living Without Limits, through Decree No. 7,612/2011. The Plan was organized in four main topics: access to education, health care, social inclusion, and accessibility.

32. There were also achievements in accessibility, including: establishment of seven training centers for coaches and trainers of guide dogs; BRL148 million in microcredit granted to persons with disabilities for acquisition of assistive technology products; establishment of the National Reference Center on Assistive Technology, which supports 20 research centers in public universities (91 centers supported); BRL433.3 thousand invested, in 2013, to equip Libras interpreter centers in 25 states. In social inclusion, the Government prioritized Institutionalized Placement Services for Youngsters and Adults with Disabilities, in a Dependent Situation, in Inclusive Residences. By April 2016, 108 Inclusive Residences were established in several of the federative units.

F. Measures adopted for the progressive implementation of the rights of the Elderly Person 2010

33. Between 2012 and 2016, the elderly population (60 years old or more) grew by 16.0%, reaching 29.6 million persons, which represents 14.4% of the population, according to data provided by the PNAD carried out by IBGE. It is estimated that the elderly population will triple in Brazil in 40 years, reaching 66.5 million persons in 2050 (29.3%).

34. The System for Guarantee of the Rights of the Elderly Person is based on several documents, including, at the domestic level: the National Policy for the Elderly (PNI) (Law 8.8421/94), o the Statute of the Elderly (Law 10.741/03), in addition to a number of policies and sectoral plans, such as the National Policy for the Health of the Elderly.

35. There are about 86 Specialized Police Stations throughout Brazil that aid elderly persons victims of violence, 31 Sections of Community Police and Assistance to Elderly Persons and Persons with Special Needs installed in civil police stations and one Protection Center for the Elderly Persons and Persons with Disabilities.

36. Decree No. 8,114 of 2013 established the National Commitment to Active Aging with a view to combining efforts undertaken by the Federal Government, the states, the Federal District, as well as by the municipalities, in collaboration with civil society, in order to consider, promote, and advocate for legal and political action plans.

37. From September 30 to October 2, 2013, the III Ibero-American Meeting on Human Rights of the Elderly was held in the city of Brasília. The Meeting marked the commemoration of the tenth anniversary of the Statute of the Elderly. It promoted discussions on topics related to the guarantee of rights focused on social security, health, fight against and prevention of violence, social dialogue, and participation of the elderly.

38. In order to promote quality of life to the elderly and healthy and active aging of the population, the Government launched in April 2018 the Friend-of-the-Elderly Brazil Strategy, which focuses on elderly persons enrolled in the Sole Registration for Social Programs. When joining the Strategy, states and municipalities must adopt a commitment to guarantee the rights of the elderly and develop initiatives targeted to the elderly.

39. The Brazilian Government took part in the OAS Working Group that drafted the Inter-American Convention on the Human Rights of the Elderly, adopted in 2015, to which Brazil is a signatory. The instrument is currently in Congress for internal ratification procedures.

G. Measures adopted for the progressive implementation of the rights of Persons in Street Situation

40. There are major obstacles to obtaining data on people living in street situation. IPEA estimated, in 2016, that there were 101,854 persons in street situation in Brazil. Among them, 40.1% were in cities with more than 900 thousand inhabitants and 77.02% lived in cities with more than 100 thousand persons. In smaller cities with up to 10 thousand inhabitants, the percentage was much lower: only 6.63%.

41. Since 2009, the Government has developed specific programs and adopted regulations (Decree 7,053) with relation to populations in street situations. Such initiatives guarantee the enforcement of their fundamental rights through the comprehensive, simplified, and safe access to the services that form part of the public policies, respecting their social conditions and origin, race, age, nationality, gender, sexual orientation, and religious differences.

42. The Brazilian Government has opened, throughout the country, public centers called Centros POP, which provide specialized services to persons in street situation through individual and collective care, workshops, and interaction and socializing activities, as well as actions that encourage protagonism and social participation. The persons served at the Centros POP are young, adults, elderly persons, and families who use the streets as a living and/or survival space.

43. For children and teenagers surviving under these conditions, CONANDA established, in 2015, a working group to strengthen the social assistance network, as well as

the public policies for the promotion of the rights of children and teenagers in street situation. In 2017, the “National Guidelines for Assistance of Children and Teenagers in Street Situation” (Children and Teenagers in Street Situation (CASR) was published.

H. Measures adopted for the progressive implementation of the rights of the Immigrants

44. The Brazilian Migration Law, enacted on May 24, 2017 (Law 13,445/2017) introduced the human rights perspective into national migration policy, contributing to the adjustment of Brazilian legislation to international standards and parameters.

45. Pursuant to selfdeclared financial constraints, the Migration Law provides for the exemption of fees and charges to all migrants whether to obtain a visa or documents for migratory regularization. It also sets forth a specific temporary visa for humanitarian reasons, which will be granted to those who need to leave their countries of origin due to different challenging situations, such as natural disasters or economic crises, but may not fall under the remit of refugee law.

46. The Migration Law further consolidated the right to due process of law and free legal assistance, with the mandatory action of the Public Defender’s Office in cases of detention of migrants at the borders. In concrete terms, immediate deportation by the Federal Police has become unfeasible. Pursuant to international standards, collective expulsions, deportations, and repatriations are prohibited.

47. Interministerial Ordinance No. 9, of March 14, 2018, allows issuance of a residence permit to nationals from neighboring countries where the MERCOSUR Residence Agreement for Citizens of States Parties and associated countries is still not in force. Also, in 2018, temporary visas and residence permits for humanitarian purposes were provided to Haitian citizens and the stateless residents in the Republic of Haiti.

48. The Government has developed a policy to Transfer of Convicted Persons (TPC) to their countries of origin so that foreigners convicted of crimes in Brazil can serve their sentences near their families in their home countries. Brazil is currently a signatory of 16 bilateral agreements on the transfer of convicted persons, all of which are in effect, alongside three multilateral agreements. The Ministry of Justice is responsible for implementing the Brazilian TPC policy.

I. National Ombudsman for Human Rights – Human Rights Hotline (Call 100)

49. One of the measures that the Brazilian Government has been adopting to guarantee citizenship rights and the right to equality of the abovementioned vulnerable persons is the Human Rights Hotline – *Call 100*, MDH’s public service related to the National Ombudsman for Human Rights. The hotline will register violations of Human Rights complaints. The complaints go through initial assessment and are then forwarded to the bodies encompassed by “Proteja Brasil” (Protect Brazil). The three channels are integrated into the National System of Ombudsmanship for Human Rights and Assistance (SONDHA), which enables the swift review of reports by the appropriate agencies, contributing to bring to a halt the cycle of rights violations and to prevent repression.

50. In 2010, within the National Office of the Ombudsman for Human Rights, the LGBT department was created and started receiving reports of violations of human rights specifically related to such populations. In 2011, the Elderly person department was created within the Human Rights Hotline program, providing a voice for victims of rights violations.

51. Accordingly, since December 2015, Brazilians can count on a new way of reporting crimes of racism. Since then, *Call 100* has two new departments: one dedicated to reporting violations against Afro-Brazilian youth, women, or Afro-Brazilians in general; and another one for the protection, defense, and accountability of human rights. Reports must be answered within 24 hours.

52. In order to offer alternatives to a phone call, *Call 100* also provides assistance to reports received through an online form and a free app and includes another department that receives reports of violations against *Quilombola* communities, *Terreiro* peoples, Romani peoples, and religions of African origin.

Article 3

53. Brazil has reinforced measures to promote gender equality over the last few years. Public policies directed to women have been implemented in a consistent cross-sectional approach, in an array of actions aimed at promoting women's rights in all dimensions. In this perspective, the Brazilian Government has adopted global strategies to correct and eliminate derogatory behavior and cultural practices ingrained in the stereotypes of discrimination against women, also aiming at eliminating patterns with respect to the traditional roles of men and women within the family and society. In this regard, we note the "Policies for Women" program developed since 2016.

Articles 4 and 5

54. The ratification by Brazil of the ISESCR and other international commitments in the field of human rights confirms the Government's commitment to effect internal rules. In this context, given the noncompliance and inapplicability of rights provided by Law, the Judiciary Branch and the applicable Agency to restore the order, solving conflicts with actions aimed at social pacification and at the exercise of economic, social, and cultural rights.

55. Article 5 of the ISESCR has a close relationship with article 5 of the Brazilian Federal Constitution and the fundamental rights and guarantees ensured therein.

Article 6

56. Historically, Brazil has struggled with high rates of poverty and social inequality. For that reason, the Government launched a national development project over the last decade focused on overcoming these issues and based on an inclusive growth model.

57. The main strategy adopted over the last few years in this regard was the "Brazil Without Extreme Poverty Plan" ("Brasil Sem Miséria" or BSM), created in June 2011 by Decree No. 7,492. BSM is based on three axes: i. income guarantee to promote the immediate overcoming of extreme poverty; ii. access to public services, aiming at improving the conditions of education, health, and citizenship; and iii. productive inclusion, aimed at improving abilities and increasing job opportunities and income generation among the poorest.

58. Recent results show that Brazil is recovering economically and thus recovering jobs and labor demand. The regulation on informal employment is one of the challenges faced by policymakers. Therefore, since 2014 the fight against informal employment has been intensified through the National Plan for the Fight Against Informal Employment of Workers (PLANCITE), which aims at raising awareness among employers and workers about the benefits of formal employment and the risks of informality.

59. In that same context, 60% of the rural workers were still in a situation of informal employment in 2017. One of the measures to face this framework was the creation of the National Policy for Rural Workers in 2013, aiming at strengthening the rights and the social welfare of these workers.

60. On July 13, 2017, an important law framework on labor relations was approved through Law No. 13,497, which became effective on November 11, 2017, and brought significant changes in several provisions of the Consolidated Labor Laws (CLT), aiming at adjusting it to the social, economic, and technological progress that happened in the Brazilian society, without cancelling the possibility of new forms of retainment; the creation of rules for telecommuting; the end of commute hours; the outsourcing of ancillary and main activities; the use of arbitration; the representation of the workers at the workplace

in companies with more than 200 employees; the 2-year duration of the covenant or collective bargaining agreement with prohibition on enforcement after expiration, and the creation of the annual proof of payment of labor obligations.

61. Furthermore, in order to ensure the application of the right to work, Brazil has ratified several Covenants of the International Labor Organization – ILO, such as, for example, in 2009, Convention No. 102 on the Minimum Rules for Social Security, in 2010, Convention No. 151 on the Right to Unionization and Employment Relationships in Public Administration, and, in 2011, Convention No. 189, which brings a Recommendation on Decent Work for Female and Male Domestic Workers, which became effective in Brazil in January 2019.

A. Measures adopted for the progressive application of Technical Education and Professional Qualification

62. The performance of actions for technical education and professional qualification, specifically for disadvantaged sectors of the society, has played a central role in the Brazilian policy for promotion of the right to work and income generation.

63. The actions for Productive Inclusion comprise: technical and professional training, public intermediation of workforce, support to sole proprietors and to solidarity economy, access to social rights related to work (employment formalization), coordination with local merchants and businesspersons for mapping and providing opportunities, mobilization and referral of social assistance dependents in vulnerable situation or social risk to the National Program for Access to Technical Education and Employment (PRONATEC).

A.1. Teenagers and Young Adults

64. Regarding the effectiveness of the right to work, one of the main actions for productive inclusion of the BSM Plan is the National Program for Access to Technical Education and Employment (PRONATEC), created by Law 12,513 in 2011. It seeks to expand the offer of Vocational and Technological Education courses, taking them to the hinterland rural areas and democratizing their access by the Brazilian population.

65. As to guide the technical education of teenagers and young adults, the National Agenda for Ensuring Decent Jobs to Youth was released in 2010, focused on young persons between 15 and 29 years of age, structured around four main topics: i. increase in the level of education; ii. conciliation of studies, work, and family life; iii. active and dignified inclusion in the job market; and iv. expansion and strengthening of the dialogue on alternatives conditions to improve inclusion in the job market, with participation of youth in urban and agricultural areas.

66. In Brazil, apprenticeship is a special form of employment contract, provided for in the CLT and Law 10,097 of 2000, the so-called Apprentice Law, which states that all medium and large companies are required to occupy 5% to 15% of its staff with young apprentices. In these cases, the apprentices teenagers and young adults between 14 and 24 years of age, hired for no more than 2 years.

67. In 2013, the PRONATEC Apprentice modality was established, aiming at encouraging the hiring of apprentices by small and micro entrepreneurs and employers by financing the theoretical education of apprentices, which traditionally occur exclusively at the expense of contractors.

A.2. Persons with Disabilities

68. Since 2014, the Brazilian State has been promoting the Mobilization Week for the Inclusion of Persons with Disabilities in the job market. The objective of this campaign is to place in the same space workers with some form of disability in search of an opportunity and employers who want to hire people with any form of physical, intellectual or sensory difficulties.

69. The results of the actions for awareness may be verified by the increase in the participation of persons with disabilities in the job market. According to data on the Annual

Corporate Information Report (RAIS), by 2010, Brazil had 306,013 persons with disabilities in the job market.

70. In 2016, there were 418,521 persons with disabilities in formal employment in the Country. It is possible to note a progressive increase, over the last few years, in full-time and part-time jobs for persons with disabilities, and we highlight that most of them work full time.

71. Brazil ensures that persons with disabilities have the right to work, based on laws such as, for example, the Quota Law (Law No. 8,213/1991), which establishes that, if the company has from 100 to 200 employees, 2% of the positions must be ensured to rehabilitated beneficiaries and persons with disabilities.

B. Measures adopted for the progressive implementation of Productive Inclusion

72. Several credit supply actions have been implemented aiming at encouraging the productive inclusion for generation of work and income. Among the quantitative results, it can be verified that there has been a 20% growth in the volume of microcredit supply between the first semester of 2013 and the first semester of 2014. In this period, the funds offered amounted to R\$6.45 billion, reaching 4.7 million people. Until September 2017, more than R\$50 billion had already been invested in the Program. Female entrepreneurs are the main profile served, corresponding to more than 60% of the operations.

73. In August 2011, within the scope of the BSM Plan and the PNMPO, the Brazilian Government launched the *Crescer* Program, which also makes access to productive microcredit easier for formal or informal entrepreneurs, with revenue up to 120 thousand Reais per year. The program offers interest rate reductions.

74. In the activities to promote employment, income, and social inclusion developed by Brazil over the last few years, it is also important to note the Solidarity Economy initiatives, which, by 2015, had benefitted 275 thousand people in 10.8 thousand economic undertakings.

75. In June 2015, the 1st National Solidarity Economy Plan was approved, aiming at guiding public policies until 2019. The Plan was prepared with active participation from the solidarity economy public during the 3rd National Conference on Solidarity Economy.

C. Measures adopted for the progressive implementation of insertion and (re)placement in the market

76. In September 2017, the *Progridir* Plan was implemented, aiming at increasing income and reducing the degree of dependence of persons enrolled with the CadÚnico.

77. Between January 2015 and December 2016, the number of benefitted persons was 14.6 million: 9.1 men and 5.5 million women, at a cost of R\$70.4 billion. With the changes in the unemployment benefits rules in force since 2015, Brazil has saved R\$3.8 billion during this period. Only in 2016, the payments of unemployment benefits amounted to R\$36.7 billion.

78. The *Portal Emprega Brasil* is the current Platform of the Ministry of Labor, which gathers in a single database information on workers and job openings available in SINE's employment agencies nationwide.

Article 7

79. One of the most important measures adopted to ensure better income conditions for the population was the adoption of a strict policy of progressive and substantial appreciation of the actual minimum wage, which in March 2008 was R\$415 and, in January 2018 reached R\$954, an increase of approximately 130% in one decade.

80. The Continuous PNAD,³ regarding the surveys conducted over 2017 points out that half of Brazilian workers receive an average monthly income that is 19.5% below the minimum wage.

81. The monthly household nominal income per capita for the population in 2017 was R\$1,268. In 2016, the average was R\$1,226. From a perspective of complexion and race, the actual average monthly income of all Caucasian people jobs was R\$2,814 in 2017. *Pardos* earned 57% of that amount (R\$1,606) and Afro-Brazilians, 55.8% (R\$1,570).

82. Men earn an average of 29% more than women. Women's approximate income was R\$1,868 in 2017, while men's was R\$2,410. The main measures adopted to ensure equal opportunities in women's insertion and permanence in the labor market are presented in the III ICCPR Report.

A. Measures adopted for the progressive implementation of the proper conditions of employment

83. In 2010, the National Plan for Ensuring Employment and Decent Jobs (PNETD) was launched. Such Plan was prepared in line with international laws and regulations. The PNETD also provides for the promotion of international cooperation, with emphasis on South-South cooperation.

84. In response to the specificity of the matter of work for youth, the National Agenda for Ensuring Decent Jobs to Youth was released in 2011, a year where Brazil started the preparations for the I National Conference on Employment and Decent Jobs, held in 2012.

85. At the end of 2013, the period for the monitoring of PNETD ended. Such monitoring consisted in reviewing the indicators proposed and analyzing the results achieved regarding the targets established. Thus, it was verified that a total of 51.5% of the PNETD targets were achieved or partially achieved.

86. Launched in November 2014, the Local Decent Job Indicator System (SIMTD) is composed by the local database and reports, which present the situation of Decent Jobs in each one of the cities in Brazil, based on the analysis of the main indicators thereof.

B. Measures adopted for the progressive implementation of Occupational Safety and Health

87. Regarding health and safety in the work environment, Brazil relies on widely accepted international criteria and grants workers important guarantees regarding their safety, health, and physical integrity.

88. Seeking to more and more consolidate occupational health and safety, Decree No. 7.602 of 2011 established the National Policy for Occupational Safety and Health (PNSST), the objective of which is to promote health and quality of life for the worker, providing for his/her inclusion in the national system for promotion and protection of health, in addition to the organization of the integrated network of occupational health information.

89. A partnership between the ILO and the Labor Prosecution Service (MPT) resulted in a tool that monitors real-time data on occupational accidents in Brazil. The Digital Occupational Health and Safety Observatory informs, through its website, the number of accidents, with a map displaying the regions where most of the accidents occur, the costs of Social Security, and the types of accident.

³ The Continuous PNAD is a household survey that, every quarter, captures socio-economic and demographic information from about 211 thousand households in about 16 thousand census areas, distributed over about 3.5 thousand cities. The household income per capita is the result of the sum of income earned by each resident divided by the total resident in the household.

C. Measures adopted for the progressive implementation of the fight against moral and sexual harassment in the work environment

90. In Brazil, there are still no specific federal laws and regulations classifying moral harassment. However, in order to combat and punish moral harassment in the work environment, the Country created in 2012 the *Assédio é Imoral* National Project.

91. In certain situations, moral harassment may characterize a criminal conduct and the persons committing the crime may be held liable for crimes against honor, illegal constraint, and abuse of authority. Moral harassment may also characterize administrative impropriety, according to the understanding of the Superior Court of Justice (STJ)

D. Measures adopted for the progressive implementation of the abolition of slavery

92. The progress made in the process of creation of the policy for eradication of Brazilian contemporary slavery was significant and acknowledged by ILO as an example to be followed. Over the last 20 years, Brazil has rescued about 50 thousand workers in a situation similar to slavery. Also, a modern concept of slavery was introduced in the Country, involving not only the restriction on freedom and the servitude due to debts, but also other violations of the dignity of the human being.

93. Among the measures adopted to eradicate slavery, it is worth to mention the inspection of the work, carried out by the Labor Tax Auditors of the Division for Eradication of Slavery (DETRAE).

94. The first assessment of the second Plan for the Eradication of Slavery, performed in 2010, demonstrated that more than 50% of the goals had been achieved in whole or in part. The third Plan is on the preparation stage and has not yet been published.

95. One of the most important projects for fight against slavery was the approval, in 2014, of the Proposed Constitutional Amendment (PEC) No. 438, known as Slavery PEC, which establishes the expropriation of urban and rural properties caught in the act of putting a worker in a situation similar to slavery and the use of its lands for agrarian reform or for programs of public housing. In these cases, the employers shall not be entitled to compensation and shall be subject to the punishments set forth in the Brazilian Penal Code.

96. Aiming at boosting integration and institutionalization of the sub-national policy of fight against slavery, the National Pact for the Eradication of Slavery was created through Ordinance No. 110 of January 24, 2017.

97. Constitutional Amendment Proposal No. of 2017, which aims at making the crime of slavery imprescriptible, is under discussion in the Federal Senate. The crime of slavery currently has a penalty of 2 to 8 years of confinement and is prescribed within 12 years.

98. The Brazilian Government established January 28⁴ as the National Day of Fight Against Slavery. During that week of the year, several activities are organized by civil society, unions, and the Government, expanding the visibility of the issue and aiming at the eradication thereof.

E. Domestic Helper

99. April 2013 is a milestone for domestic helpers in the Country, when Constitutional Amendment No. 72, also known as the PEC for Domestic Workers (PEC No. 66/2012), was enacted, equaling the rights of domestic helpers to the rights of other workers.

100. With this achievement, domestic workers acquired a workday of 8 hours, totaling 44 weekly hours, being entitled to overtime pay. Complementary Law No. 150/2015 regulated the Constitutional Amendment. Meanwhile, in order to consolidate the rights of domestic

⁴ The date was created in 2009 to pay a tribute to Erastóstenes de Almeida Gonçalves, João Batista Soares Lage, and Nelson José da Silva, and the driver Ailton Pereira de Oliveira, assassinated on January 28, 2004.

workers, in December 2017, the National Congress enacted Legislative Decree No. 172/2017, making Brazil the 25th country to sign ILO Convention No. 189 and Recommendation No. 201. ILO Convention No. 189 sets forth that domestic helpers have the same rights as other workers.

Article 8

101. Brazil has a history of commitment to the guarantee of rights to association for its workers, effected through the implementation of the principle of freedom of association, which involves: i. freedom of organization and the impossibility that the Government imposes restrictions on the creation, operation, division, or extinction of a union; ii. the freedom of affiliation and the consequent restraint to the prevention of affiliation, permanence, or dismissal of the associate of any union; iii. freedom of organization and management of unions.

102. The National Registry for Unions (CNES) has been responsible since 2008 for the registration and control of unions. On its turn, the Special Registry of Fishermen Communities is the system responsible for the registration of Communities, State Federations, and the National Confederation of Fishermen governed by Law No. 11,699/2008 as unions for workers of the industry of artisanal fishing.

103. According to the Ministry of the Economy, at the end of 2017, there was a total of 16.7 unions with active registration on Brazil – and 11,478 were for workers and 5,242 were for employers – not to mention confederations, federations, and union centers, representing 91% of all unions in the world.

104. Notwithstanding the extent ensured by the Brazilian Federal Constitution, the exercise of the right to strike has limitations posed by the Brazilian State. Law No. 7,783/1989 clarifies that strike shall be peaceful, prohibiting violent movements, and also imposes limitations regarding essential activities, the provision of which cannot be interrupted even during shutdown, such as: water treatment and supply; production and distribution of electrical energy, gas, and fuel; medical and hospital assistance; among others.

105. The right to strike of the public servant demands the enactment of a regulatory act ensuring its efficacy. Given the absence of specific laws and regulations in this regard, STF consolidated the understanding in the sense that Strike Law (Law No. 7,783/1989) shall apply to public servants.

106. At an international level, the Brazilian State enacted, in 2010, ILO Convention No. 151 and ILO Recommendation No. 159. The texts provide for the principles that ensure protection of the workers of Public Administration in the exercise of their rights. The Brazilian Federal Constitution established the Social Security System as an integrated set of actions directed to ensure rights related to health, social security, and social assistance. Social security operates as a protection system and its purpose is to reduce inequalities through eradication of poverty and marginalization.

107. The indemnity fund, on its turn, aims at ensuring income for the worker and for his/her dependents upon payment of benefits at moments in which there he/she is unable to work, forming one the pillars of social security along with health and social assistance, which shall be addressed in articles 10 and 12, respectively. It is organized in 3 different systems, which are independent from each other: General Social Security System (RGPS); Public Servants Specific System; Private Pension System.

108. According to the PNAD, the share represented by retirees and pensioners in the Brazilian population grew by 72.1% in 23 years. From 1992 to 2015, inactive persons went from 8.2% to 14.2%. Elderly above the age of 80 went from 10.5% to 13% between 1992 and 2015.

109. The contribution system includes several forms of support for the Brazilian worker, among which we may mention retirement due to time of contribution. In this category, beneficiaries may choose to receive the assistance based on the social-security rate rule or on the progressive 85/95 formula, effective as of 2015, considering the enactment of Law No. 13,183. The social-security rate is a complex formula that reduces the amount of the benefit in order to prevent early retirement. However, there is no minimum age to request

the benefit, if the taxpayers have at least 30 years of contribution, for women, or 35, for men.

Article 9

110. The assistance to workers who are permanently incapable of developing any working activities and who may not be rehabilitated into another profession occurs through the concession of the sick pay or disability retirement. The sick pay is a temporary benefit payable to the insured person who proves, in a medical examination, to be temporarily incapable of doing the work as a result of a sickness or an accident.

111. The RGPS provides differentiated treatment, with less strict rules, to rural workers in a family economy regime and without permanent employees and to agriculturalists, artisanal fishers, and indigenous persons. These workers may retire by evidencing the development of rural or fishing activity, individually or with help from the family, for 15 years, and with a minimum age of 55 for women and 60 for men.

112. Upon the enactment of Complementary Law No. 142, in 2013, the Brazilian Government established a specific model of retirement for persons with disabilities. Until May 2017, 6,168 of the persons insured by the Brazilian National Social Security Institute (INSS) had access to the benefit. In this context, persons with disabilities may retire due to age or due to time of contribution.

113. In order to provide assistance to families, one of the forms adopted by Brazil is the payment of the family allowance benefit, intended for employees, including domestic workers, and to the independent worker with children or similar in any condition up to the age of 14 or with any disability at any age, as long as they are within the maximum income limit (currently set as R\$1,319.18).

114. The Brazilian Federal Constitution ensured stability to all urban and agricultural pregnant workers working under the CLT system by defining a period of maternity leave of 120 days. Afterwards, there were infra-constitutional amendments, such as Decree No. 6,690/2008, that ensured to federal public servants extension of the maternity leave to 180 days, and Law No. 11,770/2008, which created the *Empresa Cidadã* Program, which provides that companies that increase maternity leave for its employees in 60 more days, thus amounting to 180 days, would have tax benefits.

115. Concerning paternity leave, Law No. 13,717 of September 2018 increased the paternity leave period for men serving the Armed Forces from 5 to 20 days. Companies bound to the *Empresa Cidadã* Program may also increase the paternity leave period from 5 to 20 days (Law No. 13,257/2016).

116. The increase in the maternity and paternity leaves for all Brazilian citizens, paralleling the benefits granted to private sector workers to those of public sector workers, was the subject of Proposed Constitutional Amendment No. 1/2018, which is being examined by the Federal Senate, providing for the increase in the maternity leave to 180 days, including in case of adoption, without prejudice to the employment bond and the salary.

A. Bolsa Família Program (PBF)

117. The PBF is an income supplement program, created in 2003 and, since 2011, it has been part of the Brazil Without Misery Plan, which comprehends several initiatives to allow families to overcome extreme poverty, providing effective access to basic rights, as well as to job and entrepreneurship opportunities.

118. Over the last few years, the PBF had a relevant impact with more than 36 million Brazilians leaving the condition of extreme poverty, among which, 39% were between the ages of 0 and 14, 29% were between the ages of 15, 29, 78% were people of African descent and 54% were women.

119. The proportion of poor persons in the country decreased from 23.4% in 2002 to 7% in 2014. In addition to statistically helping decrease not only poverty, but also extreme

poverty, the PBF was responsible as well for removing Brazil from the UN Hunger Map in 2014.

120. Nonetheless, until July 2018, more than 28 million families had been included in the CadÚnico, which corresponds to approximately 78 million persons registered and, out of those, 13.9 million families were beneficiary of PBF. It is important to note that, out of the total number of beneficiaries, 122,015 are *Quilombola* families, 117,620 are indigenous families, and 4,936 are Roma families.

121. Accordingly, almost 22% of the population counts, every month, on the essential PBF assistance in order to ensure access to food, health, and education to their families. In 2014 and 2015, the budget was of 27 billion, going to R\$29 billion in 2016 and R\$28.5 billion in 2017, when 268.3 thousand new families were included in the Program. Nevertheless, the PBF is considered a low cost program, since the investments correspond to 0.5% of the GDP while the people who benefit from it and the impact on the reduction of the indicators of poverty and inequality are significant.

122. In 2008, Law No. 11,692 created the Variable Benefit linked to Adolescents (BVJ), intended for those families benefiting from the PBF with 2 adolescents of ages between 16-17 as its members. In 2011, under the BSM, Law No. 12,512 increased the limit on variable benefits by families and ensured the implementation of the variable benefits to pregnant women and nursing mothers, identified in the CadÚnico.

123. In 2012, with the creation of the *Brasil Carinhoso* Action, Law No. 12,722, created the Benefit of Overcoming Extreme Poverty at Early Childhood, intended for families in the PBF with children with ages between 0-6 that, even after receiving the benefits, still had a per capita household income of equal or less than R\$70. In 2013, Law No. 12,817 extended the BSP to those families with children between ages 0-15 and, soon after, to all families that were still under the poverty line.

124. In 2013, PBF was already considered the largest income transfer program in the world. As evidence of this international recognition, it was the winner of the first edition of the Award for Outstanding Achievement in Social Security, granted by the International Social Security Association, which gathers 330 organizations in 157 countries.

A.1. Monitoring of PBF Conditions

125. A central aspect to achieve the objectives established by the PBF is that the benefitted families must meet conditionalities. Regarding the conditionalities in the health care field, guardians have to take children under 7 years old to take the recommended vaccines, be weighted, measured, and monitor their growth and development, while pregnant women, should do the pre-natal exams and attend appointments at the Health Unit.

126. In 2017, the effects of non compliance caused 3.9% of the families to be warned, 1.4% of the families to have the benefit blocked, 1.2% to have the benefit suspended, and only 0.0099% (corresponding to 2,065 families) to have the benefit cancelled. Brazil integrates other actions to the conditionalities, developing strategic partnerships in the areas of education and health, aiming at stimulating the development of families and offering better opportunities so that future generations can overcome poverty.

B. Continuous Cash Benefit (BPC)

127. The BPC, established by the Organic Law of Social Assistance (LOAS), ensures a monthly minimum wage to the persons with disabilities and to older persons of over 65 years old who have proved not to have the means to provide for themselves or to be supported by their families, regardless of prior contribution to the INSS.

128. Additionally, important initiatives were adopted in order to promote the access by the beneficiary of the BPC to the social assistance services and other public policies, as well as for the overcoming of challenges and the effective autonomy of the beneficiary with disabilities following the Programs BPC for Work and BPC for School, addressed in articles 6 and 6, respectively.

129. The families that do not meet the conditions for the Program are subject to progressive consequences, ranging from a warning to the cancellation of the benefit.

C. Social-Security System

130. The approval of Constitutional Amendment No. 72/2013, mentioned in article 7, contributed to the extension of social security rights to domestic workers. Social Security also provides an online tool for domestic workers and employers to find information on their contribution and other services related to social security.

131. Social Security has also intensified international technical cooperation and, in January 2018, it had 14 bilateral agreements and two multi-lateral agreements, benefitting more than one million Brazilians living in the countries that are part to these international agreements.⁵

132. Nevertheless, despite all efforts by the Brazilian State, the current situation of Social Security faces challenges. The deficit reached R\$268.8 billion in 2017, recording an 18.5% increase in comparison with 2016, in which case it amounted to R\$226.88 billion. In the first quarter of 2018, the Social Security deficit reached R\$49.1 billion, 20.5% higher than the same period in 2017. The deficit includes all Social Security systems. INSS expenses are of around 8% of the GDP and the projections for 2060 indicate that this percentage shall reach 18%, a ratio that would render Social Security unfeasible.

Article 10

133. The family is the base of the Brazilian society and is under special protection of the State based on the provisions of the Brazilian Federal Constitution. It must be emphasized that protection of the family is extended to families formed by same-sex couples, which, as already addressed in article 2, have the right to constitute a family through domestic partnership or marriage and adoption, as ensured by the Supreme Court. This legal framework establishes that power within the family shall be exercised equally in terms of conditions and provides grounds for the organization and provision of services within the social assistance scope directed to protect and strengthen family bonds, articulated based on the Unified Social Assistance System (SUAS).

134. The SUAS is a public system that organizes social assistance services within Brazil through a participative management model for implementation and funding of the National Policy for Social Assistance (PNAS). The SUAS service network covers about 30 million families registered in CadÚnico in 100% of the cities. The organization of SUAS provides social welfare in two levels: Basic and Special.

135. The Basic Social Protection aims to the prevention of social and personal risks through the offer of programs, projects, services, and benefits to individuals or families in situation of social vulnerability.

136. On the other hand, the Special Social Protection is directed to families and individuals that are in risk situations and who had their rights infringed as a result of abandonment, ill-treatment, sexual abuse, and drug use.

137. Within the scope of SUAS, the Specialized Reference Centers for Homeless Populations (POP Centers), allows for the inclusion of this population in the CadÚnico and their access to additional programs and to the network of services, benefits, and programs for income transfer. There are currently 230 POP Centers in Brazil.

138. In addition to the benefit of maternity leave, Brazil has a series of mechanisms to ensure that pregnant women and mothers are not harmed in the labor market due to their condition. Therefore, pregnant women cannot be fired during the period in which she is pregnant and up to 5 months after childbirth, except for just cause; they must be excused from work to attend medical appointments and exams, without prejudice to remuneration; lactating mothers must also be excused from work on a daily basis, for 2 half-hour periods or one hour period, for breastfeeding. In addition to work-related rights, pregnant women

⁵ Brazil has bilateral agreements with the following countries: Germany, Belgium, Cape Verde, Canada, Chile, South Korea, Spain, France, Greece, Italy, Japan, Luxemburg, Portugal, and Quebec. Multi-lateral agreements are entered into with Mercosur countries (Argentina, Paraguay, and Uruguay) and Ibero-American Peninsula countries (Argentina, Bolivia, Brazil, Chile, El Salvador, Ecuador, Spain, Paraguay, Peru, Portugal, and Uruguay).

also have access to benefits in the social sphere, such as priority care in public and private spaces.

Article 11

A. Poverty Reduction and the Human Right to Adequate Food

139. In this regard, in 2009 and 2013, surveys were conducted within the scope of PNAD to measure the state of food and nutritional security, using as a methodological reference the Brazilian Scale of Food Insecurity (EBIA),⁶ which enables the identification and quantification of social groups at risk of Food Insecurity (IA), providing strategic information for improvements in the management of public policies. This classification uses four degrees of food conditions: i. Food Security (SA); ii. Mild food insecurity; iii. Moderate food insecurity; and iv. Severe food insecurity.

140. The North and Northeast regions had the highest IA proportions (36.1% and 38.1%, respectively). In the other Regions, the percentage of households in IA situation was below 20%: 14.5% in the Southeast; 14.9% in the South; and 18.2% in the Midwest.

141. The Country achieved the main international goals established for overcoming hunger in the world, becoming an international reference. Among them, goal C of the Millennium Development Goal to reducing hunger, by 2015, to half of the level in 1990 – and the goal established in the 1996 World Food Summit, reducing by half the absolute number of people living in hunger.

142. The Report “The State of Food Security and Nutrition in the World 2014” shows that, for the first time, Brazil was out of the World Hunger Map, since its indicator of Prevalence of Undernourishment, which estimates the insufficient energy consumption in the population, was below 5%, a limit below which it is considered that a country has overcome the issue of hunger. The Report has also pointed out that there has been an 84.7% decrease in the number of undernourished people between 1990 and 2013 (19.1 million people).

A.1. Promotion of Access to Food

143. In the last few years, two lines of action regarding the fight against hunger and the promotion of nutritional security, developed by the Federal Government are noteworthy: policies aimed at raising incomes, such as the increasing the real value of the minimum wage and the progressive expansion of the PBF, and actions aimed at active search and mapping of traditional and specific population groups, such as the strengthening of CadÚnico.

144. Constitutional Amendment No. 64/2010 established food as a fundamental social right into the Brazilian Federal Constitution. This structure also comprises the Organic Law for Food and Nutritional Security (Law No. 11,346/2006), the Interministerial Chamber for Food and Nutritional Security, created in 2007, and the National System for Food and Nutritional Security (SISAN), which established the National Policy on Food and Nutritional Security in 2010.

145. In 2011, the I National Plan for Food and Nutritional Security was put in place, with goals for 2012-2015. To keep ensuring food security, the Brazilian Government approved the II National Plan for Food and Nutritional Security in 2017, with 121 goals and 99 structured actions to be implemented by 2019, amounting to an investment of R\$98.6 billion.

146. The National Program for School Meals (PNAE) aims at meeting the nutritional needs of students in public schools, ensuring access to school meals.

⁶ In the '90s, a methodology for assessment of the severity of food security was developed by the US Department of Agriculture – USDA. After adaptation and validation by the State University of Campinas – UNICAMP, the Brazilian Scale of Food Insecurity (EBIA) was established. The 14 questions in the Food Security questionnaire investigated in 2013 were the same as in 2009, thus comparing the indicators of those years.

147. In 2017, the program budget was R\$4.5 billion. Of this total, R\$1.24 billion was directed to the purchase of food produced by family agriculture. In 2017, the PNAE benefited over 41.5 million children, mostly from low-income families, while in 2008 it benefited 34.6 million.

A.2. Promotion of Production, Supply, and Distribution of Food

148. Another core axis for the promotion of SA is the improvement of the conditions for production, supply, and distribution of food. It is worth to emphasize the important role played by family agriculture in Brazil. In 2006, there were 4.4 million family agricultural facilities (809.4 thousand non-family facilities) occupying a land area of 80.1 million hectares (253.6 million hectares occupied by non-family agriculture), where 12.3 million persons worked (4.2 million in non-family agriculture) and their productivity by hectare corresponded to R\$680 (R\$432.00 in non-family facilities).

149. Given this scenario, the Program for the Acquisition of Food (PAA) is considered particularly relevant to ensure SA in Brazil, as well as to strengthen the production of family farmers, and to direct food to population in situation of food and nutritional insecurity. Among the core progress towards strengthening the PAA 2 new categories can be emphasized: Acquisition of Seeds, which allows for the purchase and donation of seeds by the Program, and Institutional Purchase, which authorizes entities of direct and indirect Public Administration to purchase food from family farmers through public calls, with their own financial resources, bidding process dismissed.

150. The PNAE gives priority to land reform settlements, traditional Indigenous communities and *Quilombola* communities for the acquisition of products of Family Agriculture, as well as to differentiate the amount transferred to students enrolled in schools located in Indigenous areas and areas of *Quilombola* origins.

151. The Program for the Promotion of Agricultural Productive Activities, created by Law No. 12,512 in 2011, within the scope of the BSM, is an important strategy for combating poverty and hunger among the poorest in rural Brazil. By coordinating the ATER offer with transfers of non-refundable financial resources to rural families registered in CadÚnico, it increases the productive possibilities and their sustainability.

152. Brazilian family agriculture has also benefited from the 2017/2020 Harvest Plan, which assists about 40 million family farmers, representing 84% of the agricultural facilities, responsible for 70% of the food production in the country.

153. Other essential measures are the actions for the promotion of products of sociobiodiversity and ethnodevelopment among Indigenous, *Quilombola* and traditional peoples. In 2009, the National Plan for the Promotion of Sociobiodiversity Product Chains was established, aiming at the productive inclusion of traditional peoples and communities and family farmers, along with the sustainable use of their biodiversity.

154. Finally, the Program for the Support of Environmental Protection – *Bolsa Verde*, created in 2011 within the scope of the BSM, consisted in the transfer of income to families in situation of extreme poverty that living in relevant areas in terms of environmental protection, serving as an incentive to the sustainable use of ecosystems.

A.3. Promotion of Adequate and Healthy Food

155. Food consumption patterns of the Brazilian population combine a traditional rice and bean-based diet with low-nutritional value and high-calorie food, as well as low consumption of fruits and vegetables. According to data of the Ministry of Health, obesity grew almost 60% in the country in 10 years, going from 11.8% in 2006 to 18.9% in 2016.

156. The prevalence of this issue among children and youth led to the inclusion, in 2013, of the topic of food and nutritional education and promotion of proper diets in the education process, as well as in the PNAE guidelines, with the inclusion of healthy food in school meals.

157. In this context, the Brazilian Government made the commitment of decreasing obesity in adults by 2019, with the implementation, in 2014, of the Intersectoral Strategy of Prevention and Control of Obesity, which gathers several actions to reduce obesity in the country.

158. The food and nutritional security policies implemented in Brazil over the last few years have contributed to reduce the indicators regarding infant mortality rate and the prevalence of malnutrition in children from 0 to 5 years old. However, malnutrition among specific population, such as indigenous and *Quilombola* peoples is still present. Accordingly, the System for indigenous Food and Nutritional Security (Indigenous SISVAN), established in 2006, aims at monitoring the situation of the nutritional status of this population, prioritizing indigenous children under 5 years old and pregnant women, in addition to obtaining information regarding breastfeeding and accession to social benefits.

B. Access to Water and Sanitation

159. The sanitation service in Brazil is regulated by Law No. 11,445/2007, which establishes national guidelines for federal policies, such as the set of services, infrastructures, and operational facilities for drinking water supply; sanitary sewer; urban cleaning and solid waste management; drainage and management of urban rainwater.

160. The right to access to water is understood as a fundamental human right intrinsically related to the rights to life, food, and health, having a critical effect on socio-economic development. In 2017, 83.3% of Brazilian households had access to the general water supply network, an increase of 0.5% comparing with 2003. If compared to the 1990 indexes, Brazil reached goal C of the Millennium Development Goals, referring to the reduction by half of the proportion of the population without permanent and sustainable access to drinking water, from 29.9% to 14.6% in 2012.

161. Concerning the access to water, by May 2018, more than 97% of the Brazilian households had access to piped water, which corresponds to 67.3 million households. Of this total, more than 85%, i.e. 57.7 million families were served by the general distribution network and, of those, more than 87% had access to drinking water on a daily basis, according to IBGE.

162. However, the main progress in ensuring quality water over the last few years was obtained in the region that historically faced more significant challenges: the Brazilian semi-arid region. The Cistern Program and the *Água para Todos* Program, implemented in 2003 and 2011, aim at combatting the effects of drought and dry weather and have already benefitted more than 4 million families in the rural area and in situation of extreme poverty, registered in CadÚnico. The regulatory framework for access to water was improved through Law 12.873 of 2013, which created the National Program to Support the Collection of Rainwater and Other Social Technologies - Cisterns Program, allowing for the recognition and improvement of the implementation of social technologies for access to water for human consumption and food production.

163. The *Garantia-Safra* Program offers insurance to low-income family farmers, guaranteeing to them a minimum income in case of significant losses in the harvest. For the 2018/2019 harvest season, these workers were offered R\$31 billion in rural credit, which is an amount R\$1 billion higher than that of the 2017 harvest season.

164. In order to ensure that the population in the regions affected by the drought has immediate access to drinking water, actions for drilling and restoration of wells are taken through the *Carro-Pipa* Operation. Between 2012-2013, 9.2 thousand tanker truck drivers were hired, serving 1,483 Cities, benefitting more than 1.3 million families. In 2015, the funding of the Operation reached R\$918.8 million and more than 45.6 thousand persons assisted. In 2016, there were 6,926 trucks of the Operation working to supply the population in 827 cities of 9 states, with more than R\$1 billion invested.

165. With respect to specific populations, between 2003-2013, 5,802 *Quilombola* families and 2,162 indigenous families received cisterns for water for human consumption, while 776 *Quilombola* families and 128 indigenous families received social technology for water for production.

166. With the same purpose, the Project for the Integration of the São Francisco River can be considered the most important water supply work in the country. Measuring 477 kilometers, distributed into the North and East axes, it is responsible for bringing water to more than 12 million persons, in 390 cities of the states of Ceará, Paraíba, Pernambuco, and Rio Grande do Norte. With water redistribution by abstraction systems, the Project serves

294 rural communities, 12 *Quilombola* communities, 23 indigenous peoples, and 9 settlements of the National Institute of Colonization and Agrarian Reform (INCRA).

167. From another perspective, attention is called to the efforts made by Brazil to expand access to sanitary sewer and solid waste management services. In 2007, 42% of the population was served by sewerage systems and, in 2017, 55% of the Brazilian households counted on these services, of which, 43% were served by a collective system (collection network and sewage treatment plant) and 12% by a septic tank (individual solution). Among the population that does not have this service, 18% have sewage collected but not treated sewer and 27% do not receive assistance.

168. Between 2003-2013, the growth in the access to these services was more significant in the rural area (34.4%, in comparison to 9.3% in the urban area), especially in households headed by people of African descent: 63%, in comparison to 26.3% in those headed by Caucasians. It was also more significant in extremely poor and poor households, reaching, in the rural environment, 78.4% for the former and 45.7% for the latter, and, in the urban environment, 37.3% and 2.7%, respectively.

169. Among the cross cutting measures adopted to the benefit of the vulnerable population over the last few years, the National Plan for Sanitation (PLANSAB), created in 2013, established goals and actions related to sanitation for the following 20 years (2014–2033).

170. Most of the investments intended for the sanitation policy can be found under the scope of the Growth Acceleration Program (PAC), which promoted the resuming of the planning and execution of major social, urban, logistic, and energy infrastructure works in Brazil, contributing to its fast and sustainable development.

B.1. Solid Waste

171. According to the latest Diagnosis of Urban Solid Waste Management carried out in 2016, based on data provided by 3,670 cities, equivalent to 65.9% of the country, it is possible to acknowledge that 98.6% of the urban population is contemplated by the domestic collection service, with an assistance deficit of approximately 2.7 million inhabitants.

172. To improve this situation, Law No. 12,305/2010 established the National Solid Waste Policy, which promotes prevention of and reduction in waste generation, through an increase in recycling and reuse, as well as environmentally friendly waste disposal.

173. Brazil has positive results when it comes to recycling, and based on the work of garbage collectors, public cleaning, and recycling cooperatives, we can highlight recycling in the pesticide industry where 94% of primary packaging and 80% of empty packaging is recycled.

174. An important initiative along these lines was the establishment, in 2007, of the *Cataforte* Program, which aims at strengthening the socioproductive organizations of recyclable waste collectors, as well as their forms of self-management based on the principles of solidary economy.

C. The Human Right to Adequate Housing

175. Efforts to address the housing deficit in Brazil have had important results. Between 2008 and 2012, permanent and improvised private housing fell from 9.8% to 8.5% of the total. In 2012, urban areas and rural areas corresponded to 86% and 14% of the housing deficit, respectively. Families with income of up to 3 minimum wages monthly corresponded to 79.7% of the deficit. In 2015, the estimated housing deficit corresponded to 6.35 million domiciles, of which 5.57 million, or 87.7%, were located in urban areas, and 783 thousand units were in rural areas.

176. Between 2008 and 2012, the housing deficit related to poor housing had a 20.1% reduction, reaching 16%, while the housing deficit related to family cohabitation decreased 11.7%, reaching 34%. The deficit due to excessive densification remained stable in the period, while the excessive rent expenses increased by 25.5%.

177. As a central strategy for the implementation of the right to proper housing, Law No. 11,977/2009 created the *Minha Casa Minha Vida* Program (PMCMV), which encourages the production, acquisition and requalification of housing units for low-income families, giving priority to those registered in CadÚnico, in addition to the development or renovation of rural residences. With an investment of approximately R\$295 billion, 4.2 million housing units contracted and about 10.5 million persons benefited, an estimated number of 1,000 homes were delivered per day. Between 2010 and 2014, the Program was responsible for decreasing in 2.8% the housing deficit per year, especially in the North and Northeast regions.

178. The PMCMV provides at least 3% of housing units for older persons, persons with disabilities or their families, as long as there is no higher percentage set by municipal or state laws and regulations.

179. Within the scope of the *Viver sem Limites* Program, until 2013, 941,994 adaptable PMCMV housing units were contracted, of which 11,492 were adapted for persons with disabilities. 73 Inclusive Residencies were also established, aimed at young people and adults with disabilities in a situation of dependency and who are leaving long-term care institutions.

180. In addition to the PMCMV guaranteeing the right to adequate housing, it also moves the economy, since the civil construction and service sector employs 13% of the workforce and represents 10% of the Brazilian GDP. Annually, on average, the PMCMV generates 921 thousand direct and indirect jobs, an additional income of R\$ 22.1 billion and generates business in the order of R\$ 15.4 billion in the markets of materials and services directed at civil construction.

181. PAC-Urbanization of Precarious Settlements, created in 2007, has been improving living conditions in precarious housing areas of low-income families, subject to regularization.

182. The Social Tariff on Electricity, created by Law No. 10,438/2002 and restated by Law No. 12,212/2010, provides for discounts in the electricity bill for families with an income of up to half the minimum wage per capita; persons with disabilities or elderly benefitting from the BPC; families with a monthly income of up to 3 minimum wages; and indigenous and *Quilombola* families registered with CadÚnico.

C.1. Land Regularization

183. Actions of land regularization aim at legalizing irregular occupations in Brazilian cities, ensuring access to urbanized, regularized land. Law No. 11,977/2009 provides for land regulation of social interest and expansion of access of low-income population to urban lands, prioritizing their permanence in the occupied areas and ensuring a proper level of habitability and sustainability along with other social policies.

184. Law No. 13,465/2017 made essential aspects for urban and rural land regularization simpler and more flexible, by removing criteria that required the social role of property. Between 2004 and 2013, investments in land regularization amounted to R\$101 million, benefitting 337,976 families.

185. The Intersectoral Committee for Urban Land Conflict Mediation, created in 2014, prevents and negotiates urban land conflicts in order to reach peaceful solutions. During the enforcement of court decisions, this Committee proposes measures that ensure respect for human and social rights of the persons involved in land conflicts.

186. The land regularization Program *Terra Legal*, created by Law No. 11,952 of 2009 and amended by Law No. 13,465 in 2017, aims at legalizing possession of land for whoever lives off it by offering legal protection, productive inclusion and access to public policies. The process of demarcating and acquiring titles for rural land effectively contributes to the decrease in agrarian conflicts, land grabbing and illegal deforestation in the Amazon.

187. The Project for Support to Land Regularization Policy in the Amazon, launched in 2017, aims at speeding up the process of public land regularization of the *Terra Legal* Program. The initiative, funded by the European Union, will benefit 8,500 families living in public federal lands in the states of Pará, Amazonas, Mato Grosso and Amapá by 2020.

C.2. Agrarian Reform

188. In order to implement agrarian reform, the Brazilian Government currently purchases or expropriates private land deemed unproductive in several areas of the federation. INCRA distributes and allots the land for the families who receive the lots and also provides them with financial assistance, consulting services and inputs so they can produce in such land. Between 2008 and 2017, more than 300 thousand families were settled as a result of agrarian reform.

189. Beneficiaries of the National Plan for Agrarian Reform (PNRA) have at their disposal credit facilities that allow them to settle and develop productive activities in the plots. Between 2009 and 2013, the Women's Support Credit covered 17,228 women, who had larger participation in the production of food, generation of income and strengthening of economic organization.

190. Enacted in July 2017, Law 13,465/2017 changed the entry procedures in agrarian reform, establishing a priority order in the distribution of plots of land. This Law gives special consideration to groups such as former workers at the expropriated property; victims of work in a condition similar to slavery; farmers relocated from areas as a result of the demarcation of indigenous and *Quilombola* territories or other public interest measures; female-headed families and socially vulnerable families.

D. Prevention of Risks

191. Most of the recurring natural events and interruptions are hydrometeorological, such as drought, torrential rain and landslides. According to data from the Integrated Disaster Information System, 20,613 disasters were detected in 14,213 Brazilian cities between 2008 and 2016.

192. In order to address this issue, Law 12,608/2012 established the National Policy of Protection and Civil Defense (PNPDEC) and the National System of Protection and Civil Defense, also providing for the creation of an information and disaster monitoring system.

193. Furthermore, the Joint National Protocol for the Full Protection of Children and Teenagers, the Elderly and Persons with Disabilities in Risk and Disaster Situations, launched in 2013, aims at ensuring special and priority protection to these groups in risk and disaster situation, in order to reduce their vulnerability.

Article 12

194. The right to health is one of the social rights ensured by the Constitution. Brazil is the only country with more than 200 million inhabitants which provides for a public, universal, full and free healthcare system for the entire population.

195. Fertility rate in Brazil has been fairly stable over the last few years, but it follows a downward trend.

196. At the same time, mortality rate in Brazil is also dropping. In 2016, life expectancy was 75.8 years for the total population, an increase of 3 months and 11 days compared to the number estimated in 2015 (75.5 years). For the male population, life expectancy increased from 71.9 years to 72.2 years in 2016. For women, life expectancy at birth was 79.1 years in 2015 and increased to 79.4 years in 2016.

197. Decrease in the infant mortality rate was an important achievement. Within the Millennium Development Goals framework, Brazil anticipated by 4 years the achievement of the goal of reducing infant mortality by 2/3 between 1990 and 2015.

198. The National Policy for Comprehensive Health Care to the Population of African Descent, established by Ordinance No. 992, of 2009, is a milestone in the fight against health-related racial disparities. This policy encompassed a growing process for recognition of traditional assistance and healthcare practices preserved by the traditional peoples and communities of African origin, as well as actions that enhance knowledge preserved in traditional territories.

A. Primary Care

199. The main strategy to ensure the universal right to health in Brazil focuses on the expansion and strengthening of primary care. This first level of health care comprises a set of individual and collective actions, including promotion and protection of health, prevention of damage, diagnosis, treatment, rehabilitation, harm reduction and health maintenance. Primary care has comprehensive nature and aims at causing a positive impact on communities' health.

200. In 2017, Consolidation Ordinance No. 2/2017 created the National Primary Care Policy (PNAB), which provides for the revision of guidelines for organization of Primary Care in SUS. Family health constitutes this new policy's priority strategy for expansion and consolidation of primary care, emphasizing the dynamics of the territory and the existence of specific, itinerant and dispersed populations.

201. The Family Health Strategy teams (eSF) achieved positive results for primary care. In 2012, Brazil had 33,404 family health teams. In December 2017, this number increased to 42,119 teams in 5,467 Brazilian cities, including the Riparian Family Health teams (eSFR), devoted to the care of the riparian population in the Legal Amazon and the Pantanal of Mato Grosso do Sul.

202. In 2017, the Government reconfigured the work of the eSF teams and primary care teams. Ordinance No. 2,436/2017 created the Expanded Family Health and Primary Care Support Center (NASF-AB), expanding the clinical functions of the former Family Health Support Center (NASF). NASF-AB comprises multiprofessional teams that work in an integrated manner with the eSF, the mobile clinic teams, the riparian family health teams, the river family health teams and the Health Academy Program poles.

203. The National Program for Improving Access and Quality of Primary Care was created in 2011, in order to improve the quality of health services offered at the Primary Healthcare Facilities (UBS). This program provides strategies for the qualification, monitoring and evaluation of the work of the health teams of the cities adhering to it.

204. Regarding the health care coverage of the population, in 2013, Brazil had a doctor-patient ratio of about 1.8 doctors for each thousand inhabitants. In order to expand and strengthen the provision of primary care services, Law 12,871/2013 created the *Mais Médicos* Program.

205. Up to September 2014, the *Mais Médicos* Program allocated 7,786 doctors, including Brazilians and foreigners, reaching a total of 14,462 active doctors in 3,785 cities. Priority was given to Brazil's inland locations and the peripheries of large cities. The program served more than 50 million people (25% of the total population), of which 61% lived in the Northern and Northeastern regions and had the highest poverty rates. The Program was replaced in 2019 with *Médicos Pelo Brasil*.

206. In 2017, 2,022 new primary care teams were trained and 404 ambulances were donated to renew the fleet, which reached a population coverage of 82%. Moreover, R\$2.3 billion were allocated for the implementation of new hospital beds, elective surgeries and implementation of new medium and high complexity services.

207. The Mobile Clinics 2012 are also playing an important role since 2012. They aim at increasing street population's access to health services, offering them comprehensive health care in a timely manner. There are currently 161 of those facilities throughout Brazil.

208. Under the Smiling Brazil Program, there were 25,391 oral health teams in the country in 2017, which corresponds to a 467% increase since the Program was started, in 2004, and amounts to a R\$9.6 billion investment. More than 79 million Brazilians have access to free dental treatment in 5,013 cities.

209. The National Health Safety Program, created in 2013 and consolidated in 2017, aims at contributing to the qualification of healthcare in all healthcare facilities of the national territory, whether public or private. The Program is an integral part of the World Health Organization's Global Patient Safety Network and shares its actions and solutions for patient safety.

B. Pharmaceutical Assistance

210. The Specialized Pharmaceutical Assistance Component (CEAF), implemented in 2010, is proving to be an important strategy for ensuring access to medicines within SUS. The main feature of CEAF is attempting to ensure comprehensive outpatient drug treatment for some clinical conditions that have higher treatment costs or that are more complex.

211. The *Farmácia Popular do Brasil* Program (PFPB), created in 2004, guarantees access to essential medicines. It has 30,993 active pharmaceutical facilities in 4,338 cities. Within the *Saúde não tem preço* campaign, which aims at offering medicines free of charge, the transfer of amounts to registered establishments reached R\$831 million, and in 2017, investments exceeded R\$2 billion.

212. In light of the need to qualify pharmaceutical assistance, the National Qualification Program for Pharmaceutical Assistance (QUALIFAR-SUS), created in 2012, contributes to the process of improvement, implementation and systemic integration of pharmaceutical assistance activities in healthcare actions and services. This program aims at creating conditions for a continuous, integral, safe, responsible and humanized care.

C. Urgencies and Emergencies

213. Within the framework of the SUS Urgency and Emergency Care Network (RUE), the *SOS Emergências* Program, launched in 2012, is a strategic action aimed at helping hospital units to improve the management and quality of care offered in urgent situations.

214. The Emergency Care Units (UPA), also an important part of the RUE, operate on a non-stop basis. UPA establish a link between UBS, eSF and hospital emergencies and have the potential to solve up to 97% of registered cases, reducing queues in hospital emergency rooms.

D. Specialized Care

215. With respect to the improvement and expansion of specialized care services and procedures, the National Policy for Access to Elective Surgical Procedures, approved in 2013, aims at enlarging the number of medium and high-complexity procedures. More than 80.6 thousand elective surgeries were performed in 2017, under a R\$250 million budget.

E. Mental Health

216. Since the passing of Law No. 10,216 (also known as the Psychiatric Reform Law) in 2001, the Brazilian Mental Health Policy has been shifting from a mental-institution centered model of care to a territorial one, based on the Psychosocial Care Network. Brazil has registered a significant increase in the number of psychosocial support units: the number of Psychosocial Care Centers (CAPS) grew by 1,658.7% between 1998 (148 CAPS) and March 2017 (2,455) and the number of Hosting Units increased from 10 to 59 between 2012 and 2015, i.e. a 590% increase.

217. In December 2017, Brazil announced measures for strengthening this service within SUS, changing the National Mental Health Policy (Ordinance No. 3,588/2017) in order to make it more accessible and effective.

218. Also in 2017, a new model of the CAPS was created, centering on the use of drugs, especially crack cocaine. The Psychosocial Care Centers for Alcohol and other Type IV Drugs (CAPS AD-IV) operate 24/7 with multiprofessional teams in metropolitan regions, together with the Mobile Clinics and other assistance services.

219. In early 2018, there were changes in the guidelines of the National Drug Policy (Resolution No. 1/2018 of the National Council for Drug Policies), aiming at addressing serious social demands related to the growing consumption of alcohol and drugs. Since 2011, Brazil has developed the Program, comprising actions to combat crack and other drugs.

220. Additionally, in order to boost communication channels with society, the Government has expanded the “Dial 132” helpline (Service for Guidance and Information on Drugs), created in 2005. With the same purpose, the *Crack, é Possível Vencer* Observatory was launched in 2013, aiming at making the *Crack, é Possível Vencer* Program more transparent and allowing citizens to follow up on its actions.

221. With respect to care of patients with autism, the Ministry of Health has made a partnership to offer training to parents and caregivers of children of ages 2 to 9 with such clinical status. In this context, a Program was developed by the entity Autism Speaks and validated by the WHO.

222. In addition to assistance measures, Brazil is attempting act more effectively on prevention. With respect to suicide, the Government made a partnership with the Center for Appreciation of Life (CVV), making it possible for calls to the institution to be made free of charge.

223. The *De Volta para Casa* Program has increased in 12.2% the number of persons benefited from the psychosocial rehabilitation pay, rising from 3,961 in 2011 to 4,445 in 2016.

F. Sexual and Reproductive Health

224. Brazil has ensured access to vasectomies and tubal ligations within SUS. The Government also offers 8 types of contraceptive methods free of charge, as well as some contraceptive methods at reduced prices within the *Farmácia Popular* Program.

G. Health Surveillance

G.1. HIV/Aids and other Sexually Transmitted Diseases

225. Since 2014, HIV and AIDS infection is part of the National List of Mandatory Notification of Diseases; therefore, it must be reported to health authorities. This requirement was formerly restricted to cases of infection in pregnant woman, women in labor, puerperal women and child exposed to the risk of vertical transmission of the virus.

226. According to the Epidemiological Report of the Ministry of Health, from 2007 to June 2017, the System for Information on Disease Notification (SINAN) registered 194,217 cases of HIV infection in Brazil. In this period, 131,969 (67.9%) cases in men and 62,198 (32.1%) cases in women were notified to SINAN.

227. Nonetheless, the rate of HIV detection has been gradually dropping in Brazil over the last few years. Over a 10-year period, it showed a 5.1% drop. In 2006 the rate was 19.9 cases for each 100 thousand inhabitants, whereas in 2016, it was 18.5 for each 100 thousand inhabitants.

228. Between 2014 and 2015, upon the beginning of the *Tratamento para Todos* Policy, there was a 7.2% reduction in the standard mortality rate, from 5.7 to 5.3 for each 100 thousand inhabitants. In the period between 2006 and 2016, there was a drop in the mortality coefficient, from 5.9 to 5.2 deaths for every 100 thousand inhabitants, which corresponds to an 11.9% drop.

229. This concentrated profile of the epidemics led to the prioritization of actions in 4 axes: i. increase in available rapid tests; ii. promotion of treatment with antiretroviral drugs for all persons diagnosed; iii. prevention combined with new strategies such as pre- and post-exposure prophylaxis; and iv. priority actions in regions with more significant rates.

230. To ensure early detection of the infection, there was a 161% increase in the number of rapid tests between 2008 and 2013, amounting to over 16.8 million units. As a result, there was a 9.7% decrease in the proportion of the late diagnosis of HIV infection for that period.

231. Prevention campaigns take place both in conventional and alternative media and via internet, primarily on 2 dates: World AIDS Day and Carnival. In 2017, more than 4.7 million male condoms and 110,400 female condoms were distributed by health authorities.

232. Regarding treatment for persons living with AIDS, Brazil guarantees universal and free access to antiretroviral therapy. Up to July 2018, 572 thousand Brazilians received free antiretroviral treatment within SUS, whereas in 2013, 354.5 thousand patients were assisted. Growth in the number of patients in treatment became stronger upon implementation of the Treatment as Prevention strategy, which offers therapy to all seropositive adults, including those with no damage to their immune system.

233. Brazil has also made progress in addressing stigma and discrimination against persons with AIDS. Law No. 12,984/2014 criminalizes any act of discrimination directed to these persons. Persons carrying the virus are also guaranteed the right to keep their serological condition confidential in the workplace and on admission, periodic or dismissal examinations. Also, social-security benefits are available due to one's serological condition, such as sick pay, disability retirement and the BPC.

234. In 2017, the Brazilian Health Regulatory Agency (Anvisa) approved the use of Pre-Exposure Prophylaxis (PrEP), aimed at reducing the risk of HIV transmission. Also, the National Commission for Incorporation of Technologies in the Unified Health System (CONITEC) published PrEP's Clinical Protocol and Therapeutic Guidelines (PCDT). The new strategy for prevention consists in the preventive use of Tenofovir and Emtricitabina, combined in a single pill.

235. The HIV/AIDS Human Rights Violation Monitoring and Evaluation System is also in place. Such system acts as a record of complaints about human rights violations against persons living with AIDS, persons with viral hepatitis and vulnerable populations.

236. In 2016, the total number of acquired syphilis cases reported in Brazil was 87,593. With the inclusion of rapid syphilis tests in the list of procedures of the *Rede Cegonha* strategy, in October 2012, there was an increase in prenatal coverage and consequently in the number of syphilis cases diagnosed. The Strategic Actions Agenda for the reduction of Congenital Syphilis in Brazil, prepared in 2016 also, included syphilis in the list of priority drugs for SUS.

237. Regarding viral hepatitis, 587,821 cases were registered in 2017. In comparison to the 2016 figure – i.e. 561,058 cases – there was a 4.7% increase. Cases increased among men from 20 to 39 years old. From 1999 to 2017, 718,837 persons were diagnosed with viral hepatitis. Hepatitis C continues to report the largest number of cases: 11.9 cases per each 100 thousand inhabitants. Hepatitis B showed the smallest variation: 14.7 thousand cases in 2016, against 13.4 thousand in 2017.

G.2. Other Diseases

238. Brazil has met in advance the Millennium Development Goals target C for reducing the incidence of tuberculosis, malaria and leprosy (the latter having been voluntarily adopted) by 2015.

239. Regarding tuberculosis, between 2003 and 2013 both the incidence rate and the mortality rate decreased 18%. Some activities for control of tuberculosis developed by Brazil are deemed examples by the WHO, such as the implementation of the rapid molecular test for tuberculosis and the concern about social welfare of the sick in situation of poverty. In 2016, 4,426 deaths by tuberculosis were recorded, resulting in a mortality coefficient of 2.1 deaths for each 100 thousand inhabitants, showing an annual average drop of 2% from 2007 to 2016.

240. The National Plan for Ending Tuberculosis as a Public Health Problem, launched in 2017, aims at reducing the disease incidence and mortality coefficients to respectively less than 10 cases and less than 1 case in 100 thousand inhabitants by 2035.

241. Regarding malaria, in 2015 Brazil recorded the lowest number of cases in the last 35 years. Between 2000 and 2015, there was a decrease of over 75% in cases. In 2016, Brazil recorded 117,832 cases in 9 states. In 2017, this number reached 174,522, i.e. a 48% increase. This is however a much smaller number than the 600 thousand cases reported in the beginning of the century.

242. Over the last few years, Brazil has strengthened measures to reduce leprosy. The fight against this disease is based on the active search for early diagnosis of new cases,

timely treatment, prevention of incapacities and monitoring of cohabitants, aiming at eliminating infection sources and avoiding damages and incapacities deriving from them.

243. Over the last decade, Brazil achieved a 37.1% reduction in the number of new leprosy cases, from 40.1 thousand diagnoses in 2007 to 25.2 thousand in 2016, according to data from the World Epidemiological Record, published by the WHO in 2017. The general detection rate dropped 42.3%, i.e. from 21.19 to 12.23 cases for each 100 thousand inhabitants for the same period.

244. The viruses and the microorganisms that cause zika, dengue fever and chikungunya use the mosquito *Aedes Aegypti* as a vector. Out of the three, dengue fever accounts for the most cases in Brazil: 72% of suspected cases and 78% of deaths. In the beginning of 2015, Brazil suffered a Zika epidemics that started in the Northeastern region and quickly spread to all Latin America, resulting in the birth of children with microcephaly. WHO declared global emergency due to the zika virus in February 2016. In May 2017, Brazil managed to lift the warning due to the decrease in the number of cases.

245. Until April 2018, 101,863 probable dengue cases were reported throughout Brazil, i.e. a 20% reduction in comparison to the same period in 2017 (128,730). There was also a significant drop in the number of deaths i.e. a 44% reduction, going from 72 in 2017 to 40 in 2018. Regarding Chikungunya, there were 29,675 probable cases, i.e. a reduction of 65% when compared to the same period in 2017, when 86,568 cases were recorded. 2,985 probable cases of Zika were also recorded in the entire country, i.e. a 70% reduction when compared to the same period in 2017 (10,286).

246. Preventive actions and the fight against *Aedes Aegypti* are permanent and constitute a priority for the Federal Government. Since Zika virus was detected in Brazil and its relation to neurological malformation was established, the country has mobilized all federal agencies with the creation of the National Coordination and Control Office.

247. Funds for health surveillance actions, which include the fight against *Aedes Aegypti*, grew over the last few years, from R\$924.1 million in 2010 to R\$1.94 billion in 2017 and 2018.

248. Since 2011, there has been an increase in the administration of vaccines for certain age groups or priority groups: Hepatitis B for people in all age groups; period extension for administration of the first and second doses against rotavirus; MMR (triple viral vaccines) for people up to 49 years old; and influenza for healthcare workers, persons deprived of their liberty, groups with morbidity and women in postnatal period. IV and V CRC Reports and their Optional Protocols address progress in vaccination for children and teenagers.

249. Regarding Chronic Non-Communicable Diseases (CNCDs), the Strategic Action Plan for Fight against CNCDs, launched in 2011, establishes measures and investments to deal with risk factors between 2012–2022.

250. Law No. 12,546/2011 prohibits the use of any tobacco-related products in a closed collective venue, provides for the prohibition of advertising such products and establishes rules concerning their packages. Moreover, in 2013, access of users of tobacco to smoking treatment was expanded.⁷

251. With respect to the fight against inappropriate alcohol consumption, Law No. 11,705/2008, also known as Brazilian Drinking and Driving Law, prohibits the commercialization of alcoholic beverages in federal roads. Furthermore, Law No. 12,760/2012 raises fines and authorizes the use of evidence such as videos and testimonies in order to prove driver's alcohol intoxication within criminal proceedings. In 2016, Law No. 13,281 raised fines imposed on persons alcohol-intoxicated drivers and established a penalty for refusing to undergo a breathalyzer test. In April 2018, an amendment to the Brazilian Traffic Code established a more rigorous penalty for alcohol-intoxicated drivers who cause deaths in traffic.

252. According to the Mortality Information System, reduction in the number of deaths by traffic accidents in Brazil was higher than 14% since the enactment of these laws. In

⁷ Decree No. 8,262/2014 established taxation on cigarettes at 85%, defined the minimum price of these products and enlarged space for warnings on packages.

2008, 38,273 deaths were recorded from this cause. In 2017, this number decreased to 32,615.

253. Finally, Brazil has also made important progress in the field of environmental health surveillance, with emphasis on the atmospheric pollution surveillance. 100% of the cities in 25 states filled the Form for Identification of Cities at Risk. There was also a strengthening for populations exposed to pesticides through federative partnerships which, in 2013, encompassed 16 states.

H. Healthcare for Specific Populations

H.1. Women's and Pregnant Women's Health

254. Actions to fight breast cancer and cervical cancer within the SUS prioritize tracking and early diagnosis. The National Program for Quality Mammography, created in 2012, assesses the provision of services of medical imaging through mammography. The National Qualification in Cytopathology, created in 2013, aims at improving the quality of laboratory analyses and encouraging the offering of preventive examination for cervical cancer for women between 25 and 64 years old.

255. Between 1990 and 2015, maternal mortality dropped from 143 to 62 deaths for every 100 live births i.e. a 56% reduction, a fact acknowledged by the WHO.

256. In order to strengthen reduction in maternal mortality, *Rede Cegonha*, created in 2011 within SUS, aims at ensuring to women access to voluntary family planning and humanized healthcare services during pregnancy, labor and puerperium, as well as ensuring to children the right to a safe birth and healthy development. Since its launching, investments in this policy exceeded R\$3.1 billion.

257. One of the most important actions of *Rede Cegonha* is the implementation of Normal Childbirth Centers, which operates together with maternity hospitals in order to humanize deliveries.

258. Additionally, within the scope of *Rede Cegonha*, the system Sis prenatalWeb enables registration of pregnant women to monitor the access to and quality of medical appointments, examinations, results and recommended treatments. Also, since 2012, an active ombudsman service is in place to contact all women that had their deliveries within SUS network, aiming at assessing their satisfaction level with the service.

H.2. Healthcare for Persons with Disabilities

259. Since 2002, Brazil has had National Policy for Healthcare for Persons with Disabilities, aimed at including persons with disabilities in the entire SUS service network. Healthcare for persons with disabilities is one of the axes of the *Viver sem Limite* Plan and since 2011, has been based on the Healthcare Network for Persons with Disabilities.

260. The Dental Specialty Centers Qualified for Assistance to Persons with Disabilities are healthcare facilities prepared to offer qualified and remedial assistance to persons with disabilities, considering their needs and specificities. Brazil currently has 490 centers of this kind.

261. The Brazilian Government also funds the acquisition of Vehicles Adjusted to the Sanitary Transportation of Persons with Disabilities and Mobile Orthopedic Workshops aiming at expanding access to rehabilitation services and to orthoses, prosthesis and mobility aids for persons with disabilities.

262. Within the scope of the National Plan for Neonatal Screening, the neonatal heel prick, which aims at diagnosing genetic and congenital disorders in newborn babies, was expanded to all states.

H.3. Health of the Elderly

263. The National Policy for the Health of Elderly People, launched in 2006, aims to recover, maintain and promote the autonomy, rehabilitation of functional capacity, and independence of the elderly. Within this framework, in 2013, the Model of Integral Attention to the Health of Elderly People was elaborated. It was integrated to the healthcare

networks and to strategic actions, such as the expansion of access to medicine and medical supplies, as well as preventive and health promotion actions.

H.4. Indigenous Health

264. In 2010, the Brazilian State created the Special Secretariat for Indigenous Health, which is responsible for coordinating and implementing the National Policy for the Care of Indigenous Peoples and the entire management process of the Indigenous Health Subsystem in the SUS.

265. The Special Indigenous Health Districts (DSEI) are decentralized management units, which aim, through a set of technical activities, at rationalizing and qualifying health care, as well as developing administrative and management activities necessary to the provision of the assistance.

266. The *Mais Médicos* Program has prioritized the allocation of these professionals in indigenous villages located in the most remote regions of the country to provide direct care to the indigenous population. Until July 2015, 582 doctors of the Program acted in 34 DSEI.

267. The oral health education actions directed to this population are part of the *Brasil Sorridente Indígena* Program. In 2017, 2.6 million dental hygiene kits were delivered to over 750 thousand indigenous persons across the country, which required an investment of 4 million. More than 923 professionals, including dentists and technical assistants in oral health, work in indigenous villages across Brazil.

268. One of the strategies used to increase indigenous peoples' access to vaccination is the holding of the Indigenous Peoples' Vaccination Month, which is part of the Vaccination Week in the Americas, led by the Pan American Health Organization. In 2015 alone, 141 thousand vaccine doses were applied to 115,863 indigenous persons from 849 villages.

Articles 13 and 14

269. The National Education Plan (PNE) 2014-2024 was approved by Law No. 13,005/2014. Its project was debated in the National Congress since 2010.

270. According to data by the PNAD, between 2016 and 2017, the illiteracy rate among persons aged 15 and over was estimated, in the country, at 7%, which represents a 0.2% decrease in comparison to the rate of 7.2% registered in 2016. This amounts to less than 300 thousand persons. Thus, in 2017, there were 11.5 million illiterate persons in Brazil.

271. Brazil has made progress in education, from the perspective of the increase of the average number of years of study and of the percentage of persons who completed basic education. For persons aged 25 or more, the average in 2017 was of 9.1 years of study, while in 2013 it was of 7.3 years.

272. Brazil has invested annually 6% of its GDP in education, a 72.9% increase in comparison with 2000, which corresponds to 108.9% of the average investment in the countries of the Organization for Economic Co-operation and Development, which was of 5.6%. The PNE 2014-2024 establishes the investment of 7% of the GDP until 2019 and of 10% until 2024. The federal expense in education almost doubled its share with respect to the proportion of the Federal Government revenues, going from 4.7% to 8.3% during the period from 2008 to 2017, corresponding to a GDP expansion from 1.1% to 1.8%.

273. The Fund for the Development of Basic Education and Appreciation of the Teaching Profession (FUNDEB) had an 80% increase in its funds since 2007, the first year of its implementation. The FUNDEB promotes the distribution of funds from the states, the Federal District, and the municipalities.

274. The progress in the various dimensions of the Brazilian education stems from efforts in different fronts. In order to strengthen and complement the legal and institutional framework related to the right to education, Constitutional Amendment No. 59/2009 was enacted, which expanded mandatory education from ages 7 to 14 to ages 4 to 17, ensuring free education to all of those who did not have access to it in the appropriate age; Law No. 11,645/2008 was enacted, which made it compulsory the teaching of Afro-Brazilian and indigenous history and culture in elementary and middle schools, as well as high school,

and Law No. 12,695/2012, which established an Articulated Action Plan to enable the direct transfer of resources for educational actions from the Federal Government to states, the Federal District, and municipalities, in a faster way.

275. The Brazilian basic education has been undergoing important changes, which will continue over the next years. The National Common Curricular Base (BNCC), a regulatory document that defines a set of essential skills to be developed by all students throughout basic education, has served as a curricular guide to education systems, which had to adapt and revise their curricula in 2018 in order to start implementing the BNCC until 2020.

276. With regards to early education, the several actions that have been implemented for the expansion of its provision, including the *Brasil Carinhoso* initiative, are presented in the IV and V reports to the CRC and its Optional Protocols.

A. Literacy

277. The important evolution in literacy rates stems from efforts over the last years towards developing policies to combat the high illiteracy rates that historically affected the country. Law No. 12,801/2013 launched the National Pact for Literacy at Proper Age (PNAIC), with the purpose of ensuring that children can read and write by the age of 8. In February 2018, the *Mais Alfabetização* Program was established in its place. Since 2003, the *Brasil Alfabetizado* Program has been operational, with the objective of alphabetizing young people, adults, and the elderly. The Program, which is nationwide, prioritizes cities with high illiteracy rates, 90% of which are in the Northeast region.

B. Access to Basic Education and Avoidance of School Dropout

278. In order to encourage and ensure children and teenagers' access to schools, as well as to avoid their dropout, major programs were developed and reinforced. Among them, the *Mais Educação* Program (PME), created in 2007, with the objective of expanding school hours, through supporting public schools financially to develop integral education projects for after school hours. This project aims at removing children from the streets.⁸ Between 2008 and 2013, the funds transferred amounted to more than R\$404.2 million.

279. In 2018, the PME began a new phase. The new *Mais Educação* Program, ruled by Resolution No. 17/2017 of the National Education Development Fund (FNDE), aims at improving the learning of Portuguese and mathematics in elementary and middle school through an increase in school hours, optimizing the students' time in school.

280. The National Program of Support to School Transportation (PNATE) and the *Caminho da Escola* Program operate, since 2004 and 2007, through the granting of funds and credit lines so that school transportation can be offered on a daily basis to public schools' students of rural areas that are in basic education.

281. In 2017, the National Program of Textbooks benefitted 30 million students, distributing 152 million books to 117 thousand schools. In the same year, the acquisition and distribution of textbooks and literature titles was unified, with the creation of the National Program of Books and Didactic Material, which includes, in addition to textbooks, educational software and games, materials for school tutoring, and materials for pedagogical training and school management.

282. Moreover, pregnant women are allowed by the national legislation to fulfill their school commitments at home, being entitled to maternity leave and to taking the final exams without losing the school year.

⁸ The program includes activities of pedagogical supervision, culture and arts, sports and leisure, digital culture, communication, use of media, human rights, environmental education, economic education, promotion of healthcare, and investigation in the field of natural sciences.

C. Quality of Education

283. In order to ensure quality and equity in education, systems for assessing education in several levels have been developed and expanded, enabling the monitoring of the performance of students and education institutions, as well as the constant improvement of educational policies. One of them is the Basic Education Development Index (IDEB), which is calculated based on data about school approval and students' average performance. For elementary and middle school, the national IDEB results showed a constant improvement from 2007 to 2017. The results in high school however remained stable from 2011 and 2015, which led to a reform in high school, approved by the Federal Senate in February 2017. Among other things, this reform made the curriculum more flexible.

284. Since 1998, the National High School Examination (ENEM) also plays a central role in improving the quality of education, through assessing students' performance at the end of basic education. As of 2009, the examination started to be used as a selection mechanism for admission into higher education, contributing to the democratization of the access to federal higher education institutions and to the restructuring and enhancement of the high school curricula.

285. As of 2014, Brazil started to enter into inter-institutional partnerships with Portuguese universities, enabling the access to and the use of information about the performance of Brazilian students who took ENEM, for purposes of admission to Portuguese higher education institutions, expanding the possibility of educational exchanges. Until now, the Brazilian government has concluded 34 inter-institutional partnerships with Portugal.

C.1. Promoting and Training Education Professionals

286. Appreciation of the value of school education professionals is provided for in article 206 of the Brazilian Federal Constitution. Moreover, teachers' right to continuous training is ensured by Law 12,056/2009, which determines that the federal government, the Federal District, the states, and the municipalities shall collectively promote the initial and continuous training of educators.

287. The PNE target 15 establishes that all primary education teachers should have specific higher education degrees in the fields in which they work by 2024. This way, in 2009, Decree No. 6,755 established the National Policy for Basic School Teachers Education, which fostered cooperation for the training of teachers.

288. There is also the National Plan for Basic School Teacher Education (PARFOR), which seeks, through cooperation between states and municipalities, to promote the access to higher education to professionals teaching in public primary schools who do not have specific education in the area in which they are working.

289. In 2013, the National Pact for Strengthening High School Education was launched, in order to promote the continuous training of teachers and pedagogical coordinators working in public high schools.

290. Furthermore, with Law 12,863/2013, the PRONATEC started to offer courses specifically aimed at training teachers in the same level as high school, which is the minimum training for teaching in early education and in the first 5 years of elementary and middle school.

291. As a result, there was an important increase in the percentage of teachers with higher education in public elementary and middle school, as well as in high schools, between 2008 and 2017. According to the 2017 School Census, the percentage of high school teachers with higher education was of 93.8% in 2016. In elementary and middle school, the rate was of 82.1%.

292. In addition to initiatives regarding teacher education, the Institutional Program of Initiation to Teaching Scholarship (PIBID), created in 2007, offers scholarships to undergraduate students to encourage them to perform educational activities in public primary schools.

293. Moreover, in 2012, the National Guidelines on Human Rights Education started to be a part of the compulsory curriculum for a teaching degree in the initial and continuous training of all education professionals.

D. Inclusive Education

294. The debate on special and inclusive education in Brazil has been intense in recent years. At the same time, there has been a significant growth in the number of students with disabilities enrolled in ordinary classes of basic education.

295. In 2008, the National Policy for Special Education within the Perspective of Inclusive Education was approved. This policy, which defines special education in a cross-sectional way, provides resources, services, and specialized educational assistance. Among the actions taken, there are the *Escola Acessível* Program, which includes the transfer of resources for architectural adaptation of school buildings and the acquisition of assistive technology devices for special education students.

296. The Brazilian Law for the Inclusion of Persons with Disabilities, promulgated in 2015, established that the education system must be inclusive at all levels, prohibiting the collection, by schools, of additional values for the implementation of accessibility features.

297. The *BPC na Escola* Program, created in 2007, aims at identifying barriers that prevent or hinder the access of children and adolescents with disabilities and Continuous Cash Benefit beneficiaries to school and, from then on, implementing intersectoral actions in the areas of education, social assistance, health and human rights. The school enrollment of persons with disabilities under 18 years of age assisted by the BPC has quadrupled, rising from 78.8 thousand to 319 thousand.

E. Education of young people, adults and the elderly

298. Brazil has had a significant reduction in its functional illiteracy rate,⁹ which, between 2008 and 2013, dropped by 13.8%. This reduction results from gradual provision of free basic education for young people, adults, and the elderly (EJA) who did not have access to it at appropriate age.

299. Through the *Brasil Alfabetizado* Program (PBA), actions have been developed, since 2003, throughout the national territory, aiming at promoting literacy among young people, adults and the elderly. In the current cycle of the program, which started in 2015, there are 191 entities responsible for its execution, 17,445 classes, 167,971 students acquiring basic literacy skills, 17,088 teachers, 2,902 coordinators, and 105 interpreters of the Brazilian sign language. In 2017, the Program was expanded, raising the number of students assisted from 168 thousand to 250 thousand.

300. The National Youth Inclusion Program (PROJOVEM) is another initiative that helps young persons aged between 18 and 29 to complete elementary school and obtain a professional certificate to enter the job market.

301. The National Institute for Educational Studies and Research (INEP) is responsible for conducting the National Examination for Youth and Adult Skills Certification (ENCCEJA), which aims at establishing a national reference for youth and adult education through the assessment of the skills, abilities, and knowledge acquired in the educational, social, and cultural process.

F. Vocational and Technologic Education

302. Technical-vocational education equivalent to high school has undergone important transformations over the last few years. In 2008, the Federal Plan for the Expansion of Vocational Education was established and, in 2011, the PRONATEC was launched, ensuring the legal conditions for the development of a unified policy, as mentioned above.

⁹ To calculate functional illiteracy, the number of people over the age of 15 with less than 4 years of study is used as a reference.

G. Equal Access to Higher Education

303. Over the last few years, there has been a gradual increase in ethnic and racial equality and diversity in higher education institutions. Law No. 12,711/2012 ensured that 50% of enrollments in federal universities and institutes would be reserved for students from public high schools, with the distribution of vacancies between persons of African descent, indigenous people, and persons with disabilities proportionally, at the very least, to the ratio of these groups in the overall population of the federative unit where the institution is located. It also ensures that half of those vacancies are reserved for students from public schools with gross family income equal to or of less than one and a half minimum wage per capita.

304. Between 2013 and 2015, the affirmative policy of quotas ensured access to around 150 thousand students to higher education institutions all over the country. In 2013, 50,937 persons of African descent entered into higher education and, in 2014, this number increased to 60,731. Therefore, there has been a gradual adjustment of the offer of vacancies in these institutions pursuant to the Law.

305. The PROUNI, the Student Financing Fund (FIES) and the Unified Selection System (SISU) are the main programs that the Brazilian Government has developed to expand the number of vacancies in higher education in a significant way.

306. Since its creation in 2005, the PROUNI assisted, until the second half of 2016, more than 1.9 million students, 70% of which were granted full scholarships. Moreover, 51% of these scholarships were granted to persons of African descent.

307. From 2009 onwards, one of the factors responsible for the improvement in the Brazilian educational policy was the expansion of the FIES, which went from approximately 182 thousand active contracts, in 2009, to 1.9 million in 2015, an average increase of 280 thousand enrollments per year.

308. The SISU is a digital platform available since 2010 that aims at democratizing the access of students to public higher education institutions all over the country. The vacancies made available are free of charge, being directed to students that have taken the ENEM and signed up to the computerized selection system. In 2017, more than 238 thousand vacancies in 131 institutions were offered, while, in the first edition of SISU, in 2010, 47 thousand vacancies were offered.

309. Furthermore, in 2013, the *Bolsa Permanência* Program was created, which provides for the granting of financial assistance to students in a situation of socio-economic vulnerability, as well as indigenous and *Quilombola* students in federal higher education institutions. Until 2016, there were 22,430 students assisted by the Program in federal institutions, of which 5,171 were indigenous persons, 1,898 were *Quilombolas*, and 15,361 were students in a situation of social vulnerability.

H. Education of indigenous persons and persons from Quilombola communities

310. There has been a gradual increase in the number of enrollments of indigenous and *Quilombola* populations in basic education. The Indigenous School Education Policy is based on a definition of Ethnic-Educational Territories as a management model of education based on the territoriality of indigenous peoples. Until 2012, there were 2,872 indigenous schools in 385 Brazilian cities. Of these schools, 2,864 were public.

311. Regarding the education of persons from *Quilombola* communities, in 2012, the National Curriculum Guidelines for *Quilombola* School Education were approved. They revised the curricula, so that they would respect the historical and cultural values of students and teachers from *Quilombola* communities.

312. The Program for the Support of Indigenous Higher Education and Intercultural Teaching Degrees, of 2005, aims at offering support for teachers who work at indigenous basic education schools to obtain a higher education degree. According to data provided by INEP, until 2015, more than 32 thousand indigenous persons were enrolled in higher education throughout the country. In the framework of the Institutional Program for

Scholarships to Promote the Teaching Profession, a category for indigenous teaching degrees was created. Between 2011 and 2013, 735 scholarships were granted to indigenous students and 95 were granted to indigenous teachers participating in the Program.

313. Furthermore, in 2012, the National Program for Rural Education (PRONACAMPO) was launched, which establishes a set of actions divided in 4 axes: teaching practices and management, training of teachers, education of youngsters and adults, and technological and vocational education, with the objective of strengthening rural and *Quilombola* schools.

Article 15

314. Brazil has shown a significant growth in the number of cultural facilities and means of communication. Open television remains the main responsible for providing access to cultural content in Brazil, being available in 99.9% of the cities. The ratio of cities with libraries increased from 76.3% to 97.1% between 1999 and 2014. Out of 5,570 cities, only 112 still did not have a public reading space during this period. From the services that showed a greater expansion until 2014, the Internet providers stand out, being present in 65.5% of the cities, as well as community radio stations, present in 64.1% of the cities.

315. With respect to literature, in 2014, 25 federative units had programs or actions intended to promote creative writing and literary production, as well as the circulation and diffusion of literary works, including several public notices, awards, and direct measures to promote literature. Among all cities, 56.3% had actions and programs to promote reading, books and literature.

316. Among the measures adopted in the country in this area, there is the National Cultural Plan (PNC), established by Law No. 12,343, of 2010, with the objective of planning and implementing public policies to safeguard the constitutional right to culture, as well as the protection and promotion of the ethnic, artistic, and cultural heritage and diversity.

317. These measures are organized by the National System of Culture (SNC), an apparatus for the shared management of public policies of culture that encompasses the federated entities and civil society. It was created by Constitutional Amendment No. 71, of 2012, which added article 216-A to the Federal Constitution. The main purpose of the SNC is to strengthen the country's cultural policies through institutionalization and expansion of social participation, aiming at ensuring development with full access to and enjoyment of cultural rights.

A. Fostering and Encouraging Cultural Production

318. The Brazilian State has developed several measures aiming at encouraging cultural production in the country. Law No. 12,853/2013 provides for the collective management of copyright, bringing important changes to this area, among them the characterization of activities performed by entities in charge of the collective management of copyright as activities of public interest, the need for prior authorization of these entities by the Special Secretariat of Culture and the proportionality of administration fees to the costs of collecting fees and distributing royalties.

319. Since 2006, the Audiovisual Sector Fund has been promoting audiovisual production by launching public notices for the production, distribution, and commercialization of audiovisual works. Between 2007 and 2017, more than 2,450 projects were selected and received support, in a total investment of over R\$4.3 billion.

320. The Program for Public Notices for the Promotion of the Brazilian Audiovisual Production aims at providing annual support to the sectors involved in the creation of audiovisual works through public selection processes. Between 2008 and 2013, the Program supported 715 projects, amounting to an investment of more than R\$84.2 million.

321. In the same period, a public notice was issued to support the production of documentaries in 18 Member States of the DOCTV Network, an incentive program for the production and broadcasting of Ibero-American documentaries. There was also the launching of the second edition of CPLP Audiovisual, which aims at promoting the

production of documentaries and films in the Member States of the Community of Portuguese Language Countries.

B. Democratizing the Access to Culture

322. Since 2007, the *Mais Cultura* Program has been promoting cultural diversity through actions aiming at fostering the work of artists, independent art groups, and small cultural producers. The Program operates by supporting microprojects developed mainly by young people between the ages of 17 and 29.

323. With regards to initiatives to promote art and culture within the school environment, Laws No. 11,769/2008 and 12,287/2010 establish the obligation of the teaching of music and art, especially their regional expressions, in basic education. Another core legislative step was the approval of Law No. 11,645/2008, which makes the teaching of indigenous history and culture mandatory at all stages of education. The teaching of Afro-Brazilian history and culture was already provided for by Law No. 10,639/2003.

324. Also, in 2013, the public notice for the preservation of and access to the assets of the Afro-Brazilian heritage, developed by the Federal University of Pernambuco, was endorsed. With a total investment of R\$1.7 million, the public notice selected 24 projects for the collection, recovery, repair, preservation, and availability of archives of scientific and cultural interest related to the Afro-Brazilian heritage. Each project received R\$60 thousand.

C. Access to Books and Reading

325. Over the last few years, the investments in the National Public Library System have increased through actions aimed at the expansion of archives, the modernization of equipment, and the publication of public notices for the selection of projects.

326. In July 2018, the National Policy on Reading and Writing (PNLE) was established as a strategy to promote books, reading, writing, literature, and public libraries in Brazil.

327. In 2013, the Project *Acessibilidade em Bibliotecas Públicas* was launched, with the objective of renovating 10 selected public libraries so that they would set the benchmark in terms of accessibility, establishing parameters for the renovation of all of Brazilian public libraries, with an investment of R\$2.70 million.

328. In 2015, Brazil ratified the Marrakesh Treaty, which aims at facilitating the access to published works for people with visual impairments and people with difficult access to printed texts. The Treaty was based on an initiative co-funded by Brazil and other countries of Latin America and the Caribbean.

D. Cultural Heritage and Memory

329. There was significant growth in the mechanisms for protection of the cultural heritage in Brazilian cities. In 2012, 31.2% of the cities had legislation to this end, an increase of 76.3% over 2006.

330. One of the most significant initiatives in this regard was the implementation of the PAC for Historical Cities, with the objective of turning cultural heritage into an inducer of sustainable social and economic development.

331. In 2013, the Museum Statute (Decree No. 8,124) was approved, with the purpose of preserving the cultural heritage present in museums or that could eventually be in museums, by setting a series of actions and procedures that must be followed in this sector.

332. Several permanent actions have been developed with the purpose of increasing visits to museums and diversifying their public. The *Conhecendo Museus* Project deserves highlighting, as it is a documentary series about Brazilian museums broadcast in a public TV channel.

333. In September 2018, a fire partially destroyed the collection of the National Museum, which is linked to the Federal University of Rio de Janeiro (UFRJ). The Brazilian State has established a renovation plan, earmarking R\$15 million to be invested in the safety of the

site, in the strengthening of physical structures, in containment works, in the recovery of part of the collection, and in the creation of an executive project for the restoration of the Museum.

E. Sports

334. The *Bolsa Atleta* Program, in place since 2005, invests in athletes of high performance sports, giving priority to sports that are contested in the Olympic Games and the Paralympic Games. It aims at training sportsmen, in order to guarantee that Brazil constantly has a generation of athletes with potential for representing the country. Initiatives to promote children and adolescents' access to sporting activities are addressed in the IV and V Reports to the CRC and the Optional Protocols thereto.

F. Right to Access to Science and Technology, and to Social Inclusion

335. In order to promote the consolidation, expansion, and internationalization of Brazilian science and technology, innovation, and competitiveness, the *Ciência sem Fronteiras* Program was launched in 2011. Since its creation, the Program has granted around 104 thousand scholarships to Brazilian students, investing R\$13.2 billion. In 2017, the *Ciência sem Fronteiras* Program was reformulated, shifting its focus to post-graduation.

336. The promotion of digital inclusion aims at ensuring to vulnerable populations access to the benefits of information technology. The *Governo Eletrônico* Program has more than 13 thousand Internet connection hotspots throughout the national territory, especially in rural areas or areas with limited access to these services. Since 2006, 9 thousand "telecenters"¹⁰ have received equipment, besides receiving support to establish connection, and grant scholarships for monitors. Such facilities are distributed into 98% of the cities.

¹⁰ A "telecenter" is a public place where people can access computers, the Internet and other digital technologies that enable them to gather information and develop essential digital skills.