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The Permanent Mission of Brazil to the United Nations Office and other International Organizations in Geneva presents its compliments to the Human Rights Council Special Procedures mandate holders and Human Rights Treaty-based bodies and has the honor to submit herewith information on Brazilian national measures taken in the context of the fight against the pandemia of COVID-19 while mindful of the need to protect and promote human rights.

In order to foster transparency, constructive dialogue and the exchange of good practices, this non-exhaustive list of human rights-responsive measures and policies seeks to provide details in issues of interest to human rights stakeholders, including, but not limited to, the access to health, economic alleviation to workers and support to businesses, attention to vulnerable groups, indigenous peoples, domestic violence, migrants and refugees, persons deprived of liberty, funding of actions to children and the elderly, access to information and consular assistance.

The Permanent Mission remains attentive to statements and guidance provided by Human Rights Council Special Procedures and Treaty-based Bodies according to their respective mandates and bearing in mind the utmost objective of leaving no one behind in the context of the COVID-19 pandemia.

Please feel free to share this information as you deem appropriate. The Permanent Mission of Brazil remains at your disposal for any further enquiry.

The Permanent Mission of Brazil in Geneva avails itself of this opportunity to renew to the Human Rights Council Special Procedures and Human Rights Treaty-based Bodies the assurances of its highest consideration



Geneva, April 28, 2020

To: Office of the United Nations High Commissioner for Human Rights (OHCHR) -
Human Rights Special Procedures and Human Rights Treaty body secretariats

BRAZILIAN GOOD PRACTICES IN POLICIES AND MEASURES ADOPTED IN THE CONTEXT OF THE FIGHT AGAINST THE COVID-19 PANDEMIA

With regard to the many press releases and statements issued by Human Rights Special Procedures mandate holders and treaty bodies representatives in the recent weeks and, particularly, in response to the call from the OHCHR for member states to share good practices adopted in the context of the sanitary crisis while promoting and protecting human rights, the Brazilian government wishes to highlight the following list of policies put in place that were deemed appropriate to support the response.

This list is non-exhaustive and does not include additional measures taken by States and Municipalities in regard of isolation and other complementary socio-economic measures. It might be subject to changes and adjustments in the course of the development of the pandemic. The measures listed are related to issues such as access to health, economic alleviation to workers and support to businesses, vulnerable groups, domestic violence, migrants and refugees, prisoners, funding of actions to children and the elderly, access to information and consular assistance.

A- Access to health

The human right to health is a fundamental right enshrined in the Brazilian Constitution, which also established Brazil's Universal Health System (SUS). In fact, Brazil is the only country with a population of over 100 million people to have a universal health care system. Our approach to the centrality of health as a human right has been fundamental to our response to the COVID-19 pandemic.

The services provided by SUS are based in the following principles: universality, equity and integrality. Universality means that **every person (including non-residents, migrants and refugees) has access to public health services in Brazil, without discrimination**. The principle of equity seeks to guarantee the reduction of inequalities, by recognizing the different needs of individuals and groups. Integrality refers to the access to not only primary care, but also secondary care and high complexity services, as well as emergency services, hospital care, epidemiological, sanitary and environmental surveillance and pharmaceutical assistance. It is important to highlight that all services provided by SUS are free of charge.

The “Charter on the Rights of Health Care Users”, which is applicable both in the public and private spheres, establishes that all citizens have the right to an orderly and organized access to health systems; an adequate and effective treatment to his or her health condition; an humanized and welcoming care, free of any discrimination; and a service that respect his or her person, values and rights, as well as the duty to allow that his or her treatment are adequately performed. All citizens have also the right to count on the engagement of health managers for the compliance with all these principles.

Since the beginning of the pandemic, the Federal Government, as well as States and Municipalities have been making every effort to strengthen and preserve the system so as to ensure that it is not overloaded and is therefore able to attend to the needs of those affected by the virus without compromising the access of users affected by other health conditions. Private health care providers and research institutions are also fully engaged in the national endeavors to combat the pandemic.

In this regard, it is important to highlight some of the strategic timebound measures adopted at the federal level (by the Ministry of Health) such as:

- Guidelines for local authorities and health workers to deal with the exceptionalities of the pandemic, including the use of isolation/quarantine as well as the change of purpose of equipment, workforce and other resources to complement the efforts to combat COVID-19;
- Decentralization of financial resources (aprox. R\$ 5 billion) to States and Municipalities to support local actions;
- Launching of the Strategic Action “Brazil count on me”, to allow the engagement of undergraduate students from Medical, Nursing, Physiotherapy and Pharmacy Colleges as supplementary workforce in hospitals;
- Flexibilities for self-isolated citizens to resort to telemedicine consultations and to receive medication at home.

In a very competitive international trade environment, the Brazilian government is tirelessly making efforts to guarantee that our system is well equipped with medicines, vaccines, diagnostics and other medical products and equipment to guarantee the right to health in our country. All information concerning the pandemic in the country, as well as the governmental expending in the context of the crisis is accessible here: <https://coronavirus.saude.gov.br>.

B - Economic alleviation

(i) Support to informal workers (“Coronavoucher”)

Law no. 13,982 of April 2, 2020 amended the Law No. 8,742 of December 7, 1993, to provide for additional parameters to characterize the situation of social vulnerability for the purposes of eligibility to the continued provision welfare benefit (BPC), and established exceptional social protection measures to be adopted during the period of the public health emergency of international importance due to the coronavirus (Covid-19).

Early estimations indicate that up to 54 million Brazilians would have the right to the emergency financial aid of R\$ 600/month (aprox. US\$ 120), to be paid for up to three months, limited to two persons per family, with a total estimate cost of R\$ 98,2 billion (aprox. US\$ 19,64 billion). Women who are mothers and heads of family are eligible to receive in double (1,200 reais).

To solicitants that were not previously registered at the federal government unified registry system (“CadÚnico”), the law allowed the possibility of a self-declaration, to be sent through the internet. Eligible persons that are also beneficiaries of the Bolsa Família Cash transfer program will receive the new aid as a replacement.

The implementation of this measure is coordinated by the Ministry of Citizenship and has as the main target the low-income informal workers that do not receive any other benefit from the government (with the exception of Bolsa Família Cash Transfer program). Therefore, the eligibility criteria of “Coronavoucher” include the following:

- 18 years old or above;
- no current formal employment relationship;
- either be (i) an informal, autonomous or intermittent worker, or (ii) an Individual Microentrepreneur (MEI); or (ii) a contributor to the National Social Security Institute – INSS – with simplified or low income plans in the categories of individual or optional contributor.
- not recipient of other official monetary benefits (social assistance; other benefits from the INSS; unemployment insurance; or government cash transfer programs, with the exception of Bolsa Família)
- family per capita income of up to half the minimum wage (R\$ 522.50);
- monthly family income of up to three minimum wages (R\$ 3,135.00);
- having been exempted of Income Tax declaration in the year of 2018 (annual taxable income lower than R\$ 28,559.70);

Migrants who meet these criteria and refugees (already beneficiaries of the Bolsa Família Cash Transfer program) are eligible as well.

The Brazilian government, UNHCR and IOM released a leaflet for immigrants and refugees living in Brazil with information on the "coronavoucher".

(ii) Support to formal workers

With the Provisional Measure n. 946, the Federal government provided a transfer of resources from public funds to FGTS (a compulsory individual savings accounts which every employee in the private sector is entitled to withdraw in part or in total in specific occasions). The measure also allows for the one-time withdrawal of an amount up to one minimum wage (R\$ 1,045), per person, from FGTS.

The Ministry of Citizenship, together with the Special Secretariat for Social Security and Labor (Ministry of Economy) established a joint regulation to allow the anticipation of sick leave benefits for up to three months in order to avoid procedural delays due to the sanitary emergency.

(iii) Support to Businesses (to preserve jobs)

Provisional Measures n. 927 and n. 936, in force as from 1st April, enable the anticipation of annual paid leave, the adoption of teleworking schemes and the possibility of future compensation of hours not worked during the pandemic ("bank of hours"), in order to prevent wage cuts, and also allow the reduction in work hours or temporary suspension of the employment contract (max. 90 days), with government-funded compensation. During the period of reduction in work hours, that is compensated by the payment of benefits, a dismissal of the employee is not permitted, unless upon payment of a special indemnity by the employer or in the case of a termination for cause. The relevant labour unions must be given notice whenever the arrangements include individual agreements.

The deadline for payment of contributions related to the payroll and to be transferred by employers to the federal government (FGTS, Supersimples and PIS/COFINS) has been deferred by 4 to 5 months, aiming at reducing the short-term impact of the lockdown measures in the cash flow of enterprises (Provisional Measure no. 927).

Moreover, Brazil's National Bank for Economic and Social Development (BNDES) has expanded its lines of credit, in order to help recovering from the economic crisis arising out of the lockdown measures. Small and medium enterprises are eligible to credit with low interest rates, in order to help them avoid running out of cash flow and to finance the payment of wages (2 minimum wages per worker, for up to 2 months).

C - Contingency Plan for Vulnerable Groups

The contingency plan, designed of the Ministry for Women, Family and Human Rights, covers the monthly payment of the **emergency financial aid** for three months to 1.8 million families of traditional peoples and traditional communities registered in the Bolsa Família program. In total, more than 6.4 million people will benefit, in an investment of over R\$ 3.2 billion (aprox. US\$ 640 million).

A total of R\$ 1.5 billion will be transferred to states and municipalities for **school meals**. It will reach 40 million students. Among them, 274.2 thousand indigenous people, 269.3 thousand Quilombolas (AfroBrazilian traditional communities) and almost five million rural students, including all other traditional groups of people. There will be 150,000 schools benefited, of which more than 58,000 serve students from traditional peoples and communities.

In addition to 80 beds in a campaign hospital in Boa Vista (RR), the Federal Government will supply one million personal protective equipment kits (PPEs), such as masks and gloves, for **indigenous health** professionals, in an investment of R\$ 60 million.

Another measure will be the distribution of basic food packages ("cestas básicas"), with 8 items each, to guarantee the **food security** of roughly 154,400 indigenous families and 7,300 Quilombola families. The total investment will be more than R\$ 40 million.

In addition to these measures, by means of the Provisional Measure 950 (April 8, 2020), the government exempted 9 million low income families from paying electricity bills for a period of three months (the Ministry of Mines and Energy received public funds totaling R\$ 900 million to compensate generation and distribution costs related to this measure).

D – Reports of human rights violations, including related to domestic violence

Since self-isolation measures increase the time of cohabitation between victims and perpetrators of **domestic violence**, the MMFDH has adopted a series of measures to strengthen the network of protective measures, including:

Digital Ombudsmanship: expansion of the reach of the services "Dial 100" and "Dial 180" to the digital media with the launch of the Human Rights Brazil mobile phone application and dedicated web portal.

The "app" presents a complete step by step for the complainant to register the complaint in a practical and safe way. The **tool** can receive **reports of human rights violations of women, children or adolescents, the elderly, people with disabilities and other social groups**. There is an option to attach files, such as photos and videos. The website (www.ouvidoria.mdh.gov.br), in addition to offering the usual services, provides areas with indicators on violence based on surveys by the National Human Rights Ombudsman's Office, news related to the topic and frequently asked questions.

E - Migrants and Refugees

Brazilian legislation already assures immigrants and refugees living in Brazil the **right to public health and access to the social assistance system** on equal terms with Brazilians, whatever their nationality and migratory status.

In addition, MMFDH released in 1st April 2020 a **leaflet for immigrants and refugees living in Brazil with recommendations to combat the new coronavirus (Covid-19)**, translated into English, Spanish and French.

F - Persons deprived of liberty

The **National Council of Justice (CNJ)** issued in 17 March 2020 the **Recommendation n. 62**, advising courts and magistrates on the adoption of measures to prevent the spread of the new coronavirus in the criminal justice and socio-educational system.

The recommended measures include: suspension of custody hearings for 90 days; re-evaluation of provisional detention, especially for the most vulnerable groups (such as mothers, indigenous and persons with disabilities) or whenever the place of detention is overcrowded or lacks medical attention; re-evaluation of pre-trial detention for more than 90 days or for less serious crimes; and the respect to the 'maximum exceptionality' for new imprisonment orders.

As for prisoners already serving a sentence, the text suggests that magistrates evaluate granting of early release to the cases provided for in the law and jurisprudence; reassessment of temporary releases schedule in accordance with contingency plans prepared by the authorities; the option of home detention for prisoners in open or semi-open regime or in the case of individuals with symptoms of illness, as well as suspension of the obligation to present to court for a period of 90 days in applicable cases.

The text also recommends that magistrates ensure the preparation and implementation of a contingency plan by the Executive with measures on hygiene, screening and circulation, as well as streamlining the organization of visits to ensure the health of those involved while maintaining the supply of items for basic need brought by visitors.

In relation to adolescents who have committed infractions, the text recommends that judges prioritize socio-educational measures in an open environment and the revision of the decisions that determined provisional detention.

G – Access to Funding (Older Persons and Children)

The Ministry of Women, Family and Human Rights (MMFDH) and the National Council for the Rights of the Elderly (CNDI) authorized on March 30, 2020, the use of the National Fund for the Elderly to help nursing homes overcome supply shortages during the pandemic of the new coronavirus (Covid-19). Registration of Institutions will also provide an overview of their situation in responding to the sanitary crisis.

The National Council for the Rights of Children and Adolescents (CONANDA) authorized on April 3, 2020, the use of the National Fund for the Rights of Children and Adolescents (FIA) to help fund actions not provided for it the law that created the fund aiming at the protection of childhood and adolescence during the pandemic of the new coronavirus (Covid-19).

H – MMFDH guidelines (most of them in Portuguese only) on the COVID-19 epidemics to vulnerable groups (published in March and early April 2020)

Brazilians that live abroad

<https://sway.office.com/xmFK9mACBV0BcQob?ref=Link>

Professionals that support Persons with Disabilities and Rare Diseases

<https://sway.office.com/j2akoXNcMGj7Q2cn?ref=Link>

Children (“Almanaque Turminha Reconecte” – child-friendly language)

<https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/marco/almanaque-da-turminha-reconecte-traz-informacoes-sobre-coronavirus-para-criancas/almanaquereconecte.pdf>

Organizations sheltering homeless persons (“Protocol for Civil Society and Religious Organizations on sheltering homeless people” – March 2020)

<https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/abril/ministerio-da-orientacoes-para-acolhimento-da-populacao-em-situacao-de-rua-durante-pandemia/PROTOCOLOPARAORGANIZAESPopRuaCovid19.pdf>

LGBTI persons

https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/abril/Corona_banner_LGBT.pdf

Prevention of Domestic Accidents and first aid

https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/abril/ministerio-publica-guia-de-prevencao-a-acidentes-domesticos-e-primeiros-socorros/SNDCA_PREVENCAO_ACIDENTES_A402.pdf

Home Office

<https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/abril/ministerio-divulgadicas-sobre-home-office>

Migrants (English version)

https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/abril/ministerio-elabora-cartilha-em-tres-idiomas-para-auxiliar-imigrantes-sobre-o-coronavirus/Corona_banner_SNPG_EN.pdf

Families in self-isolation

<https://www.gov.br/mdh/pt-br/assuntos/noticias/2020-2/marco/ministerio-divulga-dicas-para-aproveitar-a-quarentena-em-familia>

Indigenous, Quilombola and Roma peoples (available in social media only)

Instagram: @min_direitoshumanos @igualdaderacial / **Facebook:** @direitoshumanosbrasil @igualdaderacial.br / **Twitter:** @DHumanosBrasil @seppir

I – Access to Information

By means of the Decree no. 10,288 (March 22, 2020), the Brazilian government recognized of "essential nature" the activities and services of the press as a measure to

combat the covid-19 pandemic. In this sense, the full exercise and functioning of all available means of communication and dissemination should be safeguarded, "including the broadcasting of sound and image, the internet, newspapers and magazines, among others". The measure aims to ensure the dissemination of information to the population and also complies with the constitutional principle of publicity in relation to acts performed by the government.

The Brazilian government holds daily briefings with updated epidemiological information and on the measures taken by sectoral Ministries, including the MMFDH and Ministries of Economy, Justice and Public Security, Citizenship and Health – the latter, in its leading management role of the Brazilian Unified Health System (SUS).

J – Consular Assistance

The Ministry of Foreign Affairs, together with the Ministry of Defense and other partners, in an unprecedented effort of consular assistance to Brazilians that had impediments to their return to the country as a result of “lockdowns” established all around the world and the disruption of transport routes (air and land), was able to provide for the repatriation of more than 13,000 people to Brazil and, in some cases, the transport arrangements also allowed the return to South America of citizens from neighboring countries that were facing the same challenges.

The repatriation process reached persons in Africa (211, in 23 countries), North America, Central America and the Caribbean (125 people, 9 countries), South America (1,060 people, 5 countries), Asia and Oceania (1,472 people, 17 countries), Europe (2,473 people, 18 countries) and Middle East (240 people, 14 countries). Many repatriation procedures included negotiations with local governments and airline companies, to facilitate self-funded returns, as well as special flight arrangements (“charter flights”) in countries like India, Nepal, Philippines, Egypt, South Africa, Peru, Colombia, Ecuador, Guatemala, Panama, Nicaragua, Costa Rica, Curaçao, among others. Additional operations are planned to happen in these and other countries to try to accommodate an estimate of 5,500 Brazilian citizens who are still in need of assistance to return.

Further information and video records of successful repatriation operations can be found in the MFA’s press releases and social media:

Press releases: <http://www.itamaraty.gov.br/pt-BR/acontece-no-exterior>

Twitter: <https://twitter.com/ItamaratyGovBr>
