

# BRAZILIAN ALTERNATIVE CARE REPORT

FOR THE UN COMMITTEE ON THE  
RIGHTS OF THE CHILD

DAY OF GENERAL DISCUSSION  
CHILDREN'S RIGHTS AND  
ALTERNATIVE CARE

## AUTHORS:



**Movimento Nacional pró-Convivência Familiar e Comunitária**  
**National Movement of the Rights of Children to Live in Family and Community**

Brazilian network of approximately 60 Civil Society Organizations focusing on strengthening technical and political incidence in the field of human rights for children and adolescents. Its main objective is to promote the implementation of the National Plan for the Rights of Family and Community Living, with the prevention of children entering into care by the strengthening of family and community, the bettering of care practice and the guaranteeing of child-centred adoption policy.



**Instituto Fazendo História (IFH)**  
**Making History Institute**



Civil Society Organization established in 2005 with the mission of contributing to the development of children, adolescents, and young people with a history of institutional care. IFH runs a foster family care service and five other programs. We are a member of Red Latinoamericana de Egresados de Protección, Coalizão pelo Acolhimento Familiar, Rede Nacional da Primeira Infância, and Movimento Nacional pró-Convivência Familiar e Comunitária. We currently hold the elected position of vice counselor on the Brazilian National Council for the Rights of Children and Adolescents (CONANDA).

## 1. Brazilian Alternative Care Report:

Based on recent studies, this report reviews alternative care in Brazil and proposes necessary improvements in two main areas: Strengthening Foster Care and Providing Improved Services for Care Leavers.

## 2. Background and Sources used in this Report:

### **Study 1 (S1): The Reorganization of Alternative Child and Adolescent Care Services for the Implementation of New Methods of Care**

The Brazilian Ministry of Welfare requested this quantitative report as part of the actual assessment process of the National Steering Document published in 2006, the Brazilian National Plan for the Promotion, Protection, and Defense for the Rights of Children and Adolescents to Live in Family and Community (PNCFC). The source of information was databases resulting from the Annual Welfare Census conducted by the National Unified Welfare Services System (Censo SUAS) from 2012 through 2018 (data in this report is from 2018).

### **Study 2 (S2): More autonomy, more rights. Instituto Fazendo História / Red LatinoAmericana de Egresados de Protección, 2019**

This qualitative study was conducted in 5 Latin American countries. The fieldwork in Brazil was carried out in the city of São Paulo and involved five interviews with key participants and two focus groups with fourteen young care leavers. The survey looked into the effectiveness of strategies developed to monitor young people's transition to independent life.

### **Study 3 (S3): My Life on the Outside: A perspective of young care leavers on their care experience, Luciana Cassarino-Perez PhD, 2020**

The Brazilian National Movement of the Rights of Children to Live in Family and Community commissioned this qualitative study as part of the actual assessment process of the National Steering Document published in 2006, the Brazilian National Plan for the aforementioned PNCFC. Guaranteeing youth participation in this process the study sought to understand the perspectives of 27 young care leavers in all the five Brazilian macro-regions, using both group activities and individual interviews.

### **Study 4 (S4): Diagnosis: "Factors promoting or hindering the implementation of foster care services in Brazilian municipalities: perspectives of managers and technical teams" (unpublished), Luciana Cassarino-Perez PhD, 2021**

A qualitative and quantitative diagnosis commissioned by the Coalition for Foster Care in partnership with the National Welfare Service Secretariat to understand the implementation of foster care services in Brazilian cities. The study included the representative opinion of 158 foster care service managers and 133 foster care service professionals, including 45 individual interviews.

### 3. The context of alternative care in Brazil:

According to data from the National Registry of Children in Alternative Care of the National Council of Justice (CNJ) <sup>1</sup>, there are 30,180 children and adolescents in alternative care in Brazil. There is an approximately equal distribution of boys and girls, and 16.8% have physical or mental disabilities (S1).

Brazilian legislation permits three types of alternative care: (1) institutional based care services in institutions (up to 20 spaces), with caregivers and educators working shifts; (2) residential based care services (up to 10 spaces), with residential caregivers and educators; and (3) foster care services with families selected, trained, and monitored by a technical team.

The average number of children and adolescents in alternative care in Brazil is 59 per 100,000 inhabitants, with 98 available spaces per 100,000 inhabitants. The distribution of these services is uneven: two out of three children in care live in alternative care services in the Southeast and South regions. Availability falls short of demand especially in small cities in the North and Northeast regions of Brazil. For example, 14% of children in care live in institutions located in different cities than their families (S1).

Alternative care services and their practices have changed for the better after national regulations and guidelines were published in 2009 as a requirement of the Brazilian PNCFC. In general, the national trend has shown an increase in the number of institutional and residential based services each with a fewer number of children and adolescents (average is 10.6 per service). The quantity and quality of work with the child's family of origin has also increased, as well as an increase in the involvement of children in decisions regarding their lives. Monitoring of the child or adolescent after leaving alternative care service generally (74% of cases) occurs for a period of six months, as required by national law (S1).

However, new and old challenges remain: lack of coordination among national, state and municipal authorities to fully implement what is required in the regulations and guidelines; remnants of the rationale for the justification of the institutionalization of children and adolescents by blaming poverty, with poverty still a major motive for continued placement in care (S2). Additionally, progress is needed in the Brazilian alternative care scenario in two specific areas, as detailed below.

1 - NATIONAL COUNCIL OF JUSTICE. National Adoption and Alternative Care System. Brasília, DF, 2021. Available at <https://paineisanalytics.cnj.jus.br/single/?appid=ccd72056-8999-4434-b913-f74b5b5b31a2&sheet=4f1d9435-00b1-4c8c-beb7-8ed9dba4e45a&opt=cursel&select=clearall>. Accessed on: June 1, 2021.

## 4. The need to increase the ratio of foster care, existing challenges and other recommendations

Although the Brazilian Statute of the Child and Adolescent (SCA, 1990) has given preference to foster care over institutional care since 2009, and with recent increases in national funding to better expand the service, its coverage remains quite incipient. The 333 Foster Care Services reach little more than 1,392 children, which is about 4% of the total of children in care. The regional distribution of foster family care services is also uneven, with more than 80% of the services being concentrated in the Southeast and South (S1).

There is an international consensus around the importance of prioritizing family based care. In its 2015 report on Brazil, the UN Committee on the Rights of the Child recommended the priority implementation of foster care services in the country. The academic community<sup>2</sup> has also recognized the advantages of family based care for the physical, neurological, psychological, and mental health development of children and adolescents. Expanding the availability of this type of alternative care is urgent, especially in early childhood, where the potential effects of prolonged institutionalization may be more serious.

The national study (S4) identified the main obstacles to the advancement of foster care services in Brazil. Regarding the civil society, the lack of knowledge of foster care overlaps with narratives that make it difficult to bring necessary change. Some examples are the perception of children or adolescents (especially poor and black or minority race) as a source of social threat and not as the rightful holder of human rights, the culture of ownership (seeing the child as the individual property of the responsible adult), the prevalence of the promotion of adoption as a social change method with the idealization of the traditional family model, as well as the perceived fear of an insurmountable bond severance experience when leaving care (S4).

Regarding funding, there is lack of support for foster care services, their technical teams and the foster care families, other than a small subsidy at best. In addition, it has been difficult to secure office space and appropriate facilities for the service (S4).

In terms of human resources, the teams related that they are overloaded and feel undervalued. While there is significant turnover in foster care services, professionals also lack continued education and technical supervision for their work in foster care, especially regarding family selection and training methodology (S4).

Significant difficulties have also been found in implementing the various stages of the service (with respect to legislation and procedures), mainly due to bureaucracy, slowness and the need to raise awareness among the various actors involved in the process of drafting, approving, and publishing local legislation (while there is a national law, it must also be published in local jurisdictions) (S4).

2 - GOLDMAN, Philip S. et al. Institutionalisation and deinstitutionalisation of children 2: policy and practice recommendations for global, national, and local actors. *The Lancet Child & Adolescent Health*, v. 4, n. 8, p. 606-633, 2020. Available at: [https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642\(20\)30060-2/fulltext?dgcid=raven\\_jbs\\_etoc\\_email](https://www.thelancet.com/journals/lanchi/article/PIIS2352-4642(20)30060-2/fulltext?dgcid=raven_jbs_etoc_email). Accessed on June 02, 2021.

## **Brazil needs to promote the expansion of the foster care service, with the following recommendations:**

- Offer **wages and/or tax benefits** to foster families;
- Invest in a **broad campaign to publicize** this type of care and raise awareness amongst the public in order to create interest and engagement;
- Allocate **financial resources** to hire technical staff, train and supervise teams, prepare support materials, launch publicity campaigns, and improve the infrastructure of services;
- Create **support networks** among existing services and foster families;
- Establish **partnerships with Civil Society Organizations** to implement the service and/or undertake complementary actions;
- Mobilize **actors in the justice system** to become multipliers of these initiatives in their sector;
- Help **trainers and advisors** in implementing foster care services;
- Promote related **conferences, and events**;
- Revise regulations in order to allow **new service management models** that may be more appropriate for difficult-to-access small towns.

## 5. The need to develop public policy for care leavers, existing challenges, and other recommendations

In Brazil, alternative care is provided for children and adolescents from 0–18 years of age. There are approximately 3,900 young people aged 16 and 17 in alternative care, and in addition, about 540 young people between the ages of 18 and 21 who, for diverse motives, remain in alternative care services for children and adolescents (S1). There is scarcely any data on the location or whereabouts of care leavers in Brazil, which shows the grave necessity of surveys and development of specific policy for this group. The national legislation (SCA, 1990) does not have specific or additional provision for the protection or provision for these adolescents, nor does it expressly mention the possibility of protecting them until the age of 21. The only public guideline related to the provision of care to these young people in their transition to independent living is the guidelines for the Subsidized Youth Housing Program.

There are only a very small number of youth subsidized housing programs with communal living homes offering housing for care leavers. In 2018, there were only thirty units of this service in all of Brazil, and none in the North and Midwest (S1).

Of the total of 244 spaces available, only about 60% are occupied. Some factors related to unused occupancy are their inconvenient location in towns far from the alternative care services where the adolescents were previously living, and stringent requirements for their acceptance in the subsidized housing programs, which prevent many of them from qualifying for a space. Additionally, it must be taken into consideration that young people may not want or choose this kind of program for themselves (S1).

Studies showed low youth participation in several aspects of their life in care, ranging from a lack of dialogue regarding the establishment of rules of living conduct to low participation in their Individual Care Plan (ICP). Institutional care services can be characterized by a lack of listening, unnecessary restriction of personal freedom, discriminatory attitudes and partial treatment (S2).

Work with the natural and extended family was also criticized by young people in the studies. Nonetheless, family reintegration, which generally involves extended family, is the second most common path to leaving care, accounting for approximately 40% of all the cases in this sample (S3).

Also with respect to the weakening of significant bonds for the adolescent, it was clear of the impact of the difficulty for the care services to retain the same adult caregivers over time. It also should be noted the high turnover of children and adolescents among the services. A number of those interviewed (S2) went through two, three, four or more alternative care institutions before reaching adulthood. The young people reported the difficulty of establishing relationships outside their institution. For a number of them, sponsorship programs offered the best opportunity to engage in community life (S2).

Young people interviewed noted that their care institutions prioritize their entry into the job market and neglect other key aspects of preparing for their independence, such as education, life skills, and personal finances (S3). They reported that strategies to prepare them for independent living are varied, inconsistent, and often improvised. In many cases, the individual progression plan to independent living is only developed when the adolescent is just a few months shy of 18 years of age (S2).

Many young care leavers find it too difficult to continue their education, when earning a sufficient income is the first priority. However, work is generally informal and unplanned. Unprepared and without the support of tailored public policy, young care leavers find themselves exposed and drawn back to life on the streets, living in drop-in shelters, and similar precarious conditions that lead to the vicious circle of rights violations and trouble with the law (S3).

# **Brazil needs to better care for young people in their transition to independent living, with the following recommendations:**

## **5.1. Specific policy to support care leavers**

- **Full and personalized technical monitoring** to ensure the availability of emotional, professional, and financial support to care leavers – such as the Grupo Nós Care Leavers Group organized by the Instituto Fazendo História, which stands out with its positive results in this field. The process needs to start at the age of 16 at the latest, be continuous and consistent, and have the guidance of a professional of reference. It needs to include access to group spaces to gain knowledge, acquire information and get peer-to-peer support, preparing for the outside world and autonomous living.
- **Priority access to existing social policy** in all of the following areas: education, health, employment, housing, leisure, social welfare, mother and child protection, and others.
- **Financial support** for 18–21 year olds to provide them with an additional 80% of the minimum national salary.
- **More supportive youth housing programs** as options for young people who wish to take advantage of this service (S3).
- **Other subsidized housing options:** rent subsidy and grants for first home purchasing.
- **Support for continuity of education:** admission quotas or full scholarship opportunities at higher and/or vocational education.

## **5.2. Enhanced preparation for independent living**

- Prepare for independence with consistent **exercises** (S2);
- Planned spaces for day-to-day participation and listening, for active adolescent **participation in decisions** regarding their life and individual plans (S2, S3);
- Greater use of welfare and community services and **participation in community life** (S3);
- **Information** for adolescents regarding their rights, and public and welfare services they can rely on (S3);
- Strengthening of the significant references of adolescents, expanding their **social support network** (S2, S3);
- Preparation of young care leavers to and facilitate **youth participation** (S3).

## **5.3. Enhanced programs in institutional care services**

- Further work with families and community **reintegration** (S2);
- Training and better **working conditions** for the service professionals (S3);
- **Reduction of child and adolescent transfers** between different alternative care services (S3).

## 6. Conclusion

Despite significant progress in recent years, the scenario presented in this report calls the UN Committee's attention to the urgent need for integrated actions that may bring Brazil into compliance with international guidelines. In the two areas highlighted – the increased availability of foster care services and the necessity for improved care leaver support policy – Brazil has outdated and inadequate practices that fall short of the necessary guarantee of the rights of children and adolescents in and leaving alternative care. The two highlighted areas are related, as it is well understood that the quality of foster care may provide better conditions for the development of independence among young people, and therefore allow a smoother and more supported transition to life after leaving care.



**THANK YOU**