

Summary

ChildFund Brasil has been operating in the country since 1966. It has a partnership with 41 community organizations (including Local Partners with national sponsors) that implement 188 projects and social technologies in 56 municipalities in 6 states of Bahia, Ceará, Goiás, Minas Gerais, Piauí and Pernambuco. These organizations serve an audience of 115 thousand people, of which 41 thousand are children. There are approximately 30 thousand families involved in the actions in 698 urban and rural communities.

The COVID 19 pandemic has impacted the entire Brazilian population, especially those in poverty and extreme poverty in urban and rural communities. It is evident that this worldwide problem has generated implications in Brazil, such as the worsening of limitations related to health services, the interruption of classes due to the closure of schools, the reduction of access to income due to the discontinuity of productive activities, especially for workers who live from the informal market. There are reports of an increase in cases of violence and mental illness in the domestic environment. And, as time goes by, the poorest populations are having difficulty accessing basic food, a factor aggravated by deficiencies in the sanitation system that implies non-access to quality water for human consumption and personal hygiene.

The programmatic intervention of ChildFund Brasil is based on the architecture of social development, with social intelligence and the implementation of a programmatic approach (social technologies) aligned with the global strategy of ChildFund International which represents audiences by life cycle, respecting the contexts and valuing the potential of each group with a systemic approach based on the defense and guarantee of rights and active participation of social actors who empower themselves as agents of social transformation.

The programmatic intervention in the emergency period advocates the impact: "Contribute to food security and the comprehensive well-being of children, adolescents and their families during the emergency generated by COVID-19" and was redesigned for priority action in four objectives aligned with the strategy regional and international office:

- Provide subsistence, comfort and relief to vulnerable families during the emergency (COVID-19)
- Increase prevention, protection and emotional care measures with families during the emergency (COVID-19)
- Improve the emergency response capacity of local hospitals by providing personal protective equipment (PPE)
- Engage ChildFund Brasil youths against COVID-19
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ChildFund Brasil will keep on working with the 41 Local Partners (including those with national sponsors) to support our operations. A close monitoring and support will be given to them in order to operationalize the intervention.

Context

Brazil is a country of great territorial proportions divided into 5 macro-regions: South, Southeast, Midwest, Northeast and North. Regional differences are found mainly in socioeconomic issues. In general, the states located in the center-south regions have better living conditions. In contrast, the states in the north and northeast regions have worse indicators related to quality of life.

With regard to the public of high vulnerability and resilience, the problems and challenges faced are derived from cultural and historical issues that mark the population affected by poverty and the lack of effective public policies for this group. Children and young people have social markers that already establish the challenges that will be faced, due to race, ethnicity, gender and origin.

Based on data from the Brazilian Institute of Geography and Statistics (IBGE), in 2019 the existence of 13.5 million people in extreme poverty in the country was identified, with 24.6% of people located in the north and northeast regions of Brazil. The integrated report prepared by ChildFund Brasil in 2018 pointed out that approximately 60% of Brazilian children experienced some type of deprivation between the years 2011 and 2017, with an 83% increase in the number of cases of sexual violence against women. children and adolescents notified by the Unified Health System (SUS).

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COVID-19 Impact

The COVID 19 pandemic has impacted the entire Brazilian population, especially those in poverty and extreme poverty in urban and rural communities. It is evident that this worldwide problem has generated implications in Brazil, such as the worsening of limitations related to health services, the interruption of classes due to the closure of schools, the reduction of access to income due to the discontinuity of productive activities, especially for workers who live from the informal market. There are reports of an increase in cases of violence and mental illness in the domestic environment. And, as time goes by, the poorest populations are having difficulty accessing basic food, a factor aggravated by deficiencies in the sanitation system that implies non-access to quality water for human consumption and personal hygiene.

In particular, these social impacts directly affect the public benefited by ChildFund Brasil's Local Partner Organizations, generating exacerbation of the effects of poverty on their lives and communities. Situations of deprivation in relation to food and personal hygiene items are already identified as a result of the lack of access to financial resources to supply these and other issues essential to the survival of families. Emphasizes the fact that the homes that are mostly run by women who work informally and thus families are suffering the impacts of not being able to maintain their income generating activities.

In response to the status of the pandemic in Brazil, a public health emergency situation was decreed on 03/02/2020 (Ordinance 188/2020) and soon after, a federal law was published to order measures to deal with the emergency situation (Law 13,979 of February 6, 2020). Among the

adopted measures, the definition of the isolation and quarantine status in the country for life protection stands out, in accordance with guidelines established by the World Health Organization.

On 4/2/2020, Federal Law No. 13,982 established the rules for granting a financial benefit in the amount of R\$ 600.00 (USD 120) for informal workers and in the case of mothers who are heads of household this amount will be R\$ 1,200.00 (USD 240) with the objective of guaranteeing minimum income to the most vulnerable people and families for a period of three months. It was also defined by the flexibilization of labor laws providing, among other things, for reducing the hourly wages and wages, anticipating vacations and reducing the tax burden.

The Unified Health System (SUS) has also undergone adjustments aimed at expanding and adapting health units focused on the mass population care, highlighting the construction of field hospitals and the acquisition of personal protective equipment for health teams, equipment for the treatment of the most serious cases with the opening of new beds in intensive care units.

The other federative entities (States and Municipalities) also established specific decrees and measures for emergency action during the pandemic period. However, there is no standard answer due to the regional differences and dimensions of the Brazilian territory, a factor that is also influenced by the political and institutional issues inherent to the federal system.

Community groups and civil society organizations are also mobilizing to provide humanitarian aid to people and communities that require some form of material assistance.

Programmatic Intervention in Emergency

The programmatic intervention of ChildFund Brasil is based on the architecture of social development, with social intelligence and the implementation of a programmatic approach (social technologies) aligned with the global strategy of ChildFund International which represents audiences by life cycle, respecting the contexts and valuing the potential of each group with a systemic approach based on the defense and guarantee of rights and active participation of social actors who empower themselves as agents of social transformation.

Our efforts are anchored in the Brazilian Legal Framework through the National Social Assistance Policy, and in the UN Global Agenda 2030 through the Sustainable Development Goals (SDGs). We will also articulate alliances with the segments of civil society, government and private initiative to build knowledge and partnerships to strength our approach with children, adolescents and youngsters.

The programmatic intervention in the emergency period advocates the impact "Contribute to food security and the comprehensive well-being of Children, Adolescents and their families during the emergency generated by COVID-19" and was redesigned in four objectives aligned with the regional and international strategies:

- Provide subsistence, comfort and relief to vulnerable families during the emergency (COVID-19)

The intervention will consist in the delivery of a kit with foodstuffs and hygiene products (Kit Compaixão) for the most vulnerable families and, if necessary, the transfer of resources in cash to the families through the feasibility and absence of public policies on behalf of this target public; When possible, water purification sachets (P&G) will be included in the kits for families (only those already benefited by the project)

- Increase prevention, protection and emotional care measures with families during the emergency (COVID-19)

During the process of social isolation experienced by the families, it is essential that they are informed about hygiene measures and the prevention of contamination of COVID-19, as well as the importance of preventing violence by promoting recreational activities and emotional and self-care. We will produce informative material to be disseminated to the public benefited with child protection themes.

ChildFund Brasil, in coordination with the Joining Forces Organizations, will carry out an advocacy action focused on making school lunches provided by the schools to be relocated and distributed to the students' families.

In addition, there will be a dedicated effort to inform families about the channels for reporting cases of violence (dial 100) that may be enhanced during this quarantine period. This intervention will be coordinated with the Child Protection Network and Child Protection and Rights Councils

- Improve the emergency response capacity of local hospitals by providing personal protective equipment (PPE)

The pandemic resulted in the scarcity of personal protective equipment needed in health centers and hospitals to enable safe medical care for professionals, in addition to contributing to the protection of virus contamination. This approach still needs to be considered as so far, the municipalities are not requiring support on this.

- Engaging Youths from ChildFund Brasil against COVID-19

Considering that ChildFund Brasil has a Network with approximately 8 thousand young people called (REJUDES), there is an opportunity to promote the engagement and mobilization of its communities and youth.

For the implementation of this Emergency response Plan, the actions will be divided by the life cycles of 0-6, 7-14 and 15-24 years of age. These age groups are linked to the national policies and guidelines for both children and youth and will contribute for the strengthening of stakeholder policies and engagement. Our programmatic approach will be structured primarily in the social technologies: Casinha de Cultura (little house of culture), Bons Tratos em Família (Good Treatments in Family) and Brincando nos Fortalecemos (Playing together to strengthen our bonds) and REJUDES (Youth Network for the Defense of their Social Rights),

Operations in Emergency

ChildFund Brasil will keep on working with the 41 Local Partners (including those with national sponsors) to support our operations. A close monitoring and support will be given to them in order to operationalize the intervention.

During this period in which we are going through the Covid-19 pandemic, we need to give special attention to children, adolescents and young people, looking at them in an integral way.

The intervention in the territories will be on an integrated way and aligned with Local Partners (OSPs) ensuring the ethical principles and protection of children in this pandemic period. Its intervention is structured in the following axes:

.Health

In the Health axis, we aim at promoting an adequate and timely response to the emergency needs presented by children and families (given that many parents work informally and with the interruption of their activities, they lack of financial means to supply the basic needs of their family, putting at risk the health of children, adolescents and young people). This intervention will be possible through the following activities:

- Contribution to the food and nutritional security of children, adolescents and young people (Access to water, foodstuffs, etc.) by providing food kits;
- Promotion of Self-care, space cleaning, personal hygiene;
- Identification of symptoms and activation of the health system;
- Comply with the recommendation to social isolation;
- Alert about the specific needs of groups at risk, children in need of differentiated health monitoring;
- Take care of the mental health of children, adolescents, young people and families in the period of social isolation;
- Provide guidance to families so that they can access services and responses from the federal and municipal governments in this emergency situation.

.Education

In the Education axis, we aim at encouraging good educational practices for children, adolescents and young people in this period of isolation and providing pathways and suggestions that can assist families in this monitoring and encourage children, adolescents and young people in this perspective by:

- Maintain the routine of studying and reviewing school content (homework);
- Sharing and encouraging participation in courses, educational games and free educational content via internet;
- Establishment of content by life cycle in order to reach children, adolescents and young people in their specific needs;
- Production of educational content by local partner (OSPs) in order to maintain contact with children, adolescents and young people and to continue the activities that were carried out face-to-face. Video lessons of ballet, judo, graffiti. Meeting of youth groups with an social educator as a mediator via WhatsApp and other channels for virtual meetings. Promoting of live meditation, children's storytelling with encouragement for reading;
- Encouraging activities and games that are part of the programmatic approaches (social technologies) that can be performed at home, with the participation of all family members without requiring the presence of a facilitator and or material resources that the family does not have available. Social Technologies: Casinha de Cultura (Little House of Culture), Bons Tratos em Família (Good Family Treatments), as examples;
- Delivery of a play kit for children with colored pencils, crayons, a block of paper to draw and color, a memory game, children's literature. Each OSP has made the kits according to their conditions and the children's age group;
- REJUDES has produced locally and nationally the production of content to encourage dialogue between youth, mental health, prevention and self-care, dissemination of opportunities to take courses, among others. This content reaches young people aged 15 to 24 who are part of the network and other young people across the country, as the content is disseminated on social networks, WhatsApp.
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Safe Family and Child Protection

The intervention on this axis is based on the availability of resources and possibilities for family integration in the period of pandemic/social isolation such as:

- Dissemination via social networks and through printed material of playful content that values:
 - Safe bonds within the families,
 - Communication with empathy,
 - Establishing cooperative relationships,
 - Establishment of routines;
- Suggestion of games, games and activities that can be developed individually and collectively in the family environment;
- Children's right to play and integral development

In the Child Protection area – (CBCPM) Community-Based Child Protection Mechanisms it will be by intensifying child protection actions at the community level with Prevention and Response as follows:

- Paying attention to risks in the family environment, domestic accidents, violence (physical, sexual and psychological), domestic violence. Dissemination of informational content and mobilization via social networks, radio, posters / banners and printed material delivered to families;
- Hold meetings involving the local protection committee and the team of Local Partners (OSPs) to assess the main risks in the communities and identify the possibility of intervention to intensify preventive work against any type of violence against children, adolescents and young people.
- Disseminate the reporting channels for situations of violence by reinforcing child protection principles - Inform about the reference offices, formal protection mechanisms existing in the communities and their respective means of contact (telephone, address, it is important to include dial 100) - All violence against children, adolescents and young people must be reported competent bodies.
- Dialogue and activate the local protection network with a perspective of an integrated work.
- Contact (virtually) community leaders (community animators and others who already support the Local Partners (OSPs) on this agenda) so that they are also relevant actors in this protection process. Align and guide them on what and how to proceed. Reinforce security measures and establish a strong communication channel with them.
- Many women are responsible alone for raising their children. They generally work in informal activities and receive low wages, the need for social isolation can result in major restrictions for these families. It is very important to update and guide these mothers about their rights and available public services (such as: emergency financial aid – cash transfers) and other ways to support them in the face of these challenges.
- Articulation with the Rights Guarantee System, a local protection network, with a view to ensuring that children, adolescents and young people have adequate care, access to services and in time. Ensure that infected children are entitled to communication and monitoring by their parents and guardians. To guide and accompany children in a system of guarantee of local rights, when their parents and guardians need to be isolated and / or under health treatments, in order to ensure that they stay in safe places and with people of their family preferably.
- • Distribute the booklet #ocuidadotransforma with guidance on good family treatment, child protection, safe use of the Internet, the actors of the Rights Guarantee System, their respective functions and when they should be activated.

ChildFund Brasil will not focus on the cash transfer approach as well as the delivery of personal protective equipment (PPE). Regarding the cash transfer, the Federal Government has already implemented a social program to address this problem. We might take this opportunity to provide some financial orientation to the families on how to better make use of the resource.

Monitoring and Evaluation

ChildFund Brasil developed an M&E plan aligned with the Regional framework which includes all actions related to the COVID-19 response plan. There are two initiatives:

- 1) We developed a platform (BI) where all partner social organizations report daily the number of children with confirmed cases, hospitalized and death, so we have daily monitoring <https://app.powerbi.com/view?r=eyJrIjoiMDQ3NjhkMzMtNWVhOS00OTIxLTgzMzQtYWY2OWQ3MTMxY2YwIiwidCI6IjhmYzcxMmQ4LTBmMGMtNDRhMS04YjVmLWY5MTI3MTNiODA3MiJ9>. If we have any suspicious cases, ChildFund will be immediately notified to provide all necessary support to the child and family, for that, the partner organization must fill out an online form with main information to carry out the response plan.
- 2) The other refers to a spreadsheet for the monitoring delivery of the Kits including foodstuffs and hygiene to bring families emergency support, comfort and relief in times of pandemic. The monitoring is being done daily with reports from Local Partners about the effective delivery. For follow-up, we are requesting evidences of deliveries with photos and lists of beneficiaries. In addition, we are giving every support to use all the necessary equipment to avoid contagion and giving instructions to avoid agglomerations and other suggestions that come according to the instructional rules of the local health secretary.

We will use our SIGA software and also coordinate with the regional office to see an opportunity of integration with SIMA.

SPONSORSHIP

The chart below provides additional information about the operational aspects of Sponsorship Implementation and community supports in Brazil:

Activity	Actions & Supports
Participant Incidents – Child Death Reports	maintaining listening mechanisms with LPs and using Participant Incidents to report any child death for any reason
Other child departures	maintaining listening mechanisms with LPs and processing child departures discovered for any reason.
New Assignments & Departure Replacements	No new enrollments are being made at this time. We have an adequate reserve of children available to wait for that moment to pass.
Supporter Inquiries	Whatsapp groups with LP's/communities and other networking tools are being used to answer Sponsors Inquiries
DFC Delivery	DFCs are being hold at the NO level (March) and IO level (April) until the situation normalize.
Correspondence collection and delivery	We have submitted a Letter Standard Model for answering specific cases and we are waiting for IO approvals
RAM / Materials Update	Any Materials are being updated at this time. We have an adequate reserve of children available to wait for that moment to pass.

Currently, ChildFund Brasil is operating with 41 Local Partners but only 37 includes international sponsors as below:

#	Partner Organization (Use Salesforce identifying code/name.)	# of Enrolled and Sponsored Children	
		Sponsored	Enrolled
1	9182 - ADECAVE	527	660
2	9202 - AJENAI	276	331

3	3718 - ARACUAI FAMILY HELPER PROJECT	330	409
4	9683 - ARAIC - Associação Rural de Atendimento Infanto-Juvenil de Comercinho	423	484
5	1058 - AS COM CULT ED E AG VALE DO CURU	404	420
6	9682 - ASCAI - Associação da Criança e Adolescente de Itaobim	756	909
7	1736 - ASSOC COMMUNITARIA DE PADRE PARAISO	537	611
8	4028 - Assoc Moradores Cariri Mirim	243	267
9	1737 - ASSOCIACAO COMUNITARIA DE MEDINA	587	736
10	1775 - ASSOCIACAO COMUNITARIA DO GUARANI	348	390
11	3394 - ASSOCIACAO DAS FAMILIA DO PECEM	309	432
12	1052 - ASSOCIACAO UNIDOS PARA O PROGRESSO	907	1093
13	3176 - BADARO RURAL FAMILY HELPER PROJECT	485	570
14	3179 - BERILO FAMILY HELPER PROJECT	773	927
15	3392 - CENTRO DE APOIO A CRIANCA	1474	1869
16	2362 - Centro Social Apoio Crianca Adolescente	223	225
17	3397 - CENTRO SOCIAL DE OROS	673	826
18	3863 - CHAPADA DO NORTE F H P	436	591
19	1733 - CONACREJE - CONS ASSOC CRECHES JEO	608	788
20	3177 - CORONEL MURTA FAMILY HELPER PROJ	461	562
21	1471 - CRIANCA FELIZ	1294	1592
22	1458 - FRENTE BENEFICENTE PARA A CRIANCA	975	1277
23	1662 - GEDAM GRUPO DE APOIO AO MENOR	308	316
24	317 - GRIASC GRUPO DA VILA SAO CAETANO	142	150
25	318 - GRUPO CRIANCA NOVA VIDA	340	527
26	3862 - MINAS NOVAS FAMILY HELPER PROJECT	409	468

27	3724 - MOV DE AJUDA FAMILIAR DE OCARA	536	646
28	1613 - PROCAJ-DIAMANTINA	1021	1227
29	1289 - PROJETO ALEGRIA DA CRIANCA	1423	1619
30	4000 - PROSESC - Projeto Semear Esperanca de Carbonita	892	1087
31	3729 - SOC DE APOIO A FAMILIA CARENTE	611	739
32	427 - SOC DE EDUC E SAUDE A FAMILIA	1103	1215
33	3393 - SOC PROM APOIO A FAMILIA ITAPIOCA	366	433
34	1766 - SOCIEDADE DE ASSISTENCIA A CRIANCA	1081	1225
35	1451 - SORRISO DA CRIANCA	730	891
36	3178 - TURMALINA FAMILY HELPER PROJECT	549	684
37	3175 - VIRGEM DA LAPA FAMILY HELPER PROJ	505	568

In the Brazilian Sponsorship we are using this moment to develop a pilot project for new ways of communication with Brazilian sponsors. Letters are being answered by children in audio/photo format and being sent via WhatsApp and other networking tools (such as e-mails, Telegram), for sponsors who are willing to receive content in this way and for families who have these tools available.

RESOURCE MOBILIZATION

In order to raise local funds to support the emergency fund, the campaign “Nem Vírus, nem fome: Compaixão” (neither hunger nor virus: Compassion”) was developed to mobilize donors to benefit 30,000 families during the critical period of the pandemic. The donation refers to one kit compaixão (with foodstuff and hygiene to each family).

Campaign strategies:

- Upsell - Link donation of kits with request for sponsorship.
- Seek sponsorship and support to publicize companies.
- Conquer influencers, mainly from the ecclesiastical environment, to publicize the campaign.
- Use P2P tool to encourage people to support the campaign.
- Create sponsored adds.
- Ask for support for sponsors, partners and supporters.

In addition, we are working on to identify resources available at national level to submit proposals for grants and provide guidance for our Local Partners as well.

Major donors will be mapped out and approached for any potential donations