COVID-19 and street-connected children in Latin America

This document brings together documents related to the COVID-19 pandemic and street-connected children in Latin America, collated by Professor Irene Rizzini. With thanks to the Catholic University of Rio de Janeiro (PUC-Rio) and International Center for Research and Policy on Childhood (CIESPI).

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CONANDA RECOMMENDATIONS FOR FULL PROTECTION OF CHILDREN AND ADOLESCENTS DURING THE COVID-19 PANDEMIC

The National Council for the Rights of Children and Adolescents - CONANDA, created by Law No. 8,242 of 1991; the body responsible for making effective the rights, principles and guidelines contained in Law No. 8,069 of 1990 (Statute of the Child and Adolescent); expresses itself in defence of the rights of children and adolescents, during the period in which the whole of society undertakes efforts to contain the COVID19 pandemic, reaffirming that as long as the situation of risk remains, the full protection of children and adolescents must be intensified:

Considering that article 227 of the Federal Constitution establishes the absolute priority of the rights of children and adolescents, their peculiar condition of development, integral protection and best interest, it should be a joint responsibility between State, family and society to guarantee these rights;

Considering that it is essential that the three spheres of the government elaborate Contingency Plans aiming at containing the dissemination of the new coronavirus, and that every measure adopted must have the perspective of global protection of the human rights of children and adolescents and the absolute priority of guaranteeing their rights;

Considering that all children and all adolescents should receive care, protection and education, without discrimination of family situation, age, sex, race, ethnicity or colour, religion or belief, disability, personal condition of development and learning, economic condition, social environment, region and place of residence or any other condition that differentiates people, families or the community in which they live, in accordance with Article 3 of the ECA;

Considering that article 227 of the Constitution and article 4 of the ECA ensure the privileged allocation of resources for childhood and adolescence and article 4 of the Convention on the Rights of the Child establishes that States Parties shall adopt all administrative, legislative and other measures of any nature necessary for the implementation of these rights, it is fundamental to ensure public investment, using the maximum resources available for the implementation of public social policies that allow the guarantee of dignified conditions of existence and the promotion of their full development;

Recommendations:

1. The implementation of emergency measures in the economic and social scope that, besides mitigating the community transmission of COVID-19, also guarantee the right to life and health of the children and adolescents, expressed in article 7 of the Child and Adolescent Statute, through the application of the necessary budgetary resources, including the suspension or revocation of Constitutional Amendment 95/2016.
2. Insurance, both from the perspective of physical and emotional health. Families in condition of social vulnerability should receive government support, with measures of financial subsidy and public services, which include:
   a. The establishment of a universal basic income plan, ensuring that all Brazilian families are supported by social assistance policies that guarantee the minimum necessary for survival and social coexistence, as well as health and education conditions;
   b. The exemption or discount on water, gas and electricity bills for families in situations of risk and social vulnerability throughout the country, with an additional recommendation that under no circumstances, including default, should these services cease to be offered;
   c. Avoid dismissals and maintain the wages of domestic and informal workers who take care of children and adolescents; so that they can guarantee decent conditions of food, housing and preservation of the health of the children and adolescents under their care;
   d. The distribution of food and hygiene products, such as soap and alcohol gel, primarily to the most vulnerable population.

3. That given the impossibility of complete social isolation in shelter institutions, in street situations or domestic violence, public and private health services should carry out tests and ensure treatment of serious cases of COVID-19.

4. That children and adolescents, including children under the age of six, have the right to be properly informed, with accessible, simple, consistent language, in order to strengthen their right to participation, their digital citizenship and intergenerational dialogue:
   a. The right to information includes the possibility of institutionalised children and adolescents, in compliance with a socio-educational measure, in a situation of shared custody or that by any other reason are in isolation from their families being able to communicate with their parents or guardians, as well as to be updated on their health status.

5. The State should ensure the assistance and promotion of mental health actions, in order to allow access to the best treatment, in accordance with the needs of children and adolescents, especially during the period of social confinement, considering that the promotion of affective security, responsive interactions and the right to play are only effective by minimizing feelings of fear, insecurity and anxiety.

6. That the continuity of school feeding be guaranteed, through the distribution of meals or the equivalent in cash, corresponding to the number normally carried out at school, to all students in the public network, at the federal, state and municipal levels, adopting the necessary measures to avoid contagion.

7. Considering the current situation in which the permanence in the family, in the institution or in the street can generate innumerable situations of violation of the right to demand immediate actions of protective intervention, that the attendance of the Guardianship Councils be maintained, on duty, making possible the referral to the services in the agencies of the Executive and Judiciary, and that the Municipality be guaranteed the provision of the necessary resources for remote work (internet and equipment) and to guarantee the security protocols recommended by the sanitary agencies.

8. Considering that children, adolescents and adults are out of their usual activities [school/work], with continuous coexistence in a situation of crisis, uncertainties and stress due to social isolation and the material restrictions and that this scenario can increase the vulnerability of children and adolescents to situations of violence in the domestic/family environment, Tutelary Councils and Health Services and other services of the protection network should implement actions to address the increase in cases of violence against children and adolescents and, for this, it is necessary to:
a. Promote the dissemination of the reporting channels in the media, since several points of the protection network will not be in permanent contact with children/adolescents;
b. Give special attention to families with a history of violence against children, children in street situations, and children in households with caregivers/families who use alcohol and other drugs, monitoring the situations already known and sharing information about the cases to ensure more effective follow-up;
c. Implement strategies to minimize the emergence of new situations in the context of crisis/stress and conflicts that will arise as a result of home isolation;
d. Facilitate children’s contact with the protection network for requesting help and, in the case of Family Health Strategy Professionals (FHSP) who stay in the home visiting activity and take care of families with children, they should be attentive to this issue and always try to keep 2. That actions in relation to children and adolescents recognize that guaranteeing their rights also depends on protecting the rights of their primary caregivers, since the domestic environment should be in direct contact with the child in search of indicative signs of situations of violence, which the units’ management should be informed of for appropriate measures;
e. Include, among the actions of the ESF teams, activities and information on strategies and positive parental practices, in order to reduce eventual sources of conflict that may generate situations of violence against children and adolescents in the domestic environment;

9. Ensure that there are mechanisms to protect children living near borders, areas that are potentially more vulnerable, especially for migrant children, due to the itinerant situation in which they find themselves, often in contexts of family agglomeration and remoteness.

10. Ensure that the responsible bodies elaborate and disseminate campaigns for the prevention of domestic accidents, considering the current scenario, where children will stay for a longer period in their homes and that data from the Ministry of Health show that domestic accidents are the first cause of mortality among children between 5 and 14 years old and the second cause of hospital admissions among children between 5 and 9 years old in 2019.

   a. With regards to the suspension of the ban on the sale of liquid alcohol of 70%, it is understood that the product should not be marketed indiscriminately and that safer alternatives, such as the availability of water and soap, should be chosen. In the last 10 years, more than 3 thousand children from 0 to 14 years of age have died as a result of accidents with burns, and almost 221 thousand have been hospitalized for this reason, more than R$195 million being spent on these hospitalizations. In the context of quarantine, children are spending more time indoors - which naturally increases the chances of accidents.

11. Ensure that, as a matter of urgency, concrete and specific measures be taken for the children and adolescents of the traditional peoples and communities, of the peoples of the countryside, the forest and the waters, to ensure their protection, considering the Resolution 181 of the CONANDA, and that they include:

   a. Each scope of the Rights Guarantee System to monitor the implementation of preventive actions;
   b. A specific emergency communication plan that informs about the seriousness of the situation and effective practical measures, via the municipality, and includes the creation of channels of communication between the populations and the public power;
   c. Integrated plan, elaborated by the public power, with the Health, Education and Social Assistance Secretariats, together with the traditional populations, people from the countryside, forest and water, and that articulates strategies based on the pandemic severity scenario and local circumstances and resources;
   d. Guarantee of emergency income, which includes distribution of medicines, basic food baskets, personal hygiene and cleaning material, considering the needs in the context of the different geographic realities of the country;
   e. Credit line to meet the emergency situation of these communities and peoples;
f. Creation of action protocols and medical emergencies considering the severity and scope of the epidemic in these communities and peoples, including in this action international organizations that work in the community health field;
g. Monitoring of actions and policies, aiming to verify their scope, efficiency, effectiveness, transparency and notification to control bodies via the Ministry of Health;

12. Include street children and adolescents in the group at risk for complications of infection by COVID-19, in view of their social vulnerability, and adopt measures that include:
   a. Elaborate a prevention and treatment plan and create a crisis committee in each sphere of the Rights Guarantee System to monitor the implementation of prevention actions;
   b. Expand the number of teams of Social Educators, health services and social assistance in the street;
   c. Expand vacancies in foster care services, giving priority to foster care services in homes of selected, trained and accompanied families who are not on the adoption register;
   d. Create in all spheres of government, federal, state, municipal and district, a plan that ensures food distribution, drinking water, hygiene kit with disposable masks, alcohol gel and informative graphic material;
   e. Ensure access to financial grants and social rent for families of street children and adolescents;
   f. Guarantee individual protection equipment (IPEs) to health and social workers who will work with street children and adolescents with respiratory symptoms or who have had contact with people diagnosed with COVID-19;
   g. Articulate actions with the CNAS and other Councils in order to avoid breaking family and community ties;
   h. Provide public buildings or other establishments (e.g. hotels) that are not in operation, to serve as sorting centres for reception, provision of meals, bathing and health care for street children and adolescents.

13. That within the framework of the Socio-Educational System, the rights of children and adolescents are guaranteed:
   a. The observation of the Resolution No. 313 of the National Council of Justice, of March 19, 2020, that recommends care with adolescents in detention, including basic care of hygiene, above all, considering the possibility of revision of the measure and progression for the open environment, in situations of imminent risk of contagion due to the absence of the minimum conditions of hygiene in the units of detention, and also, the situation of adolescents with chronic diseases;
   b. The suspension of socio-educational measures for adolescents who are a part of the risk group of coronavirus contamination: people with chronic diseases, such as renal failure, respiratory diseases, cardiovascular diseases, diabetics, hypertensive, people with lower immunity or health already weakened by other diseases acquired through contagion, as well as pregnant women;
   c. The guarantee of communicability by remote means, with the use of technological means, of adolescents in compliance with a socio-educational measure with their family, lawyers, and/or organizations that already accompany and execute projects in the units;
   d. Of cultural and educational activities, even if online, so that the measure is not uncharacterized;
   e. To clean and sanitize the units according to the recommendations of the health authorities and health surveillance;
   f. That states and municipalities inform about the provision of care that has not been suspended, especially within the care units where the number of adolescents exceeds the number of vacancies, and inform about the fulfilment of judicial measures that have suspended socio-educational measures;
   g. From the observation of the Recommendation No. 62 of 2020 of the National Council of Justice, which provides for the preferential application of socio-educational measures in an open environment and the review of the decisions leading to provisional admission, especially in relation to adolescent mothers, indigenous people and people
with disabilities, adolescents who are in overcrowded units or in which there is no
healthcare personnel.

14. That the penalties and the socio-educational measures, respectively, of all women prisoners and
adolescents in compliance with liberty restricting measures, pregnant women, nursing mothers
or mothers of children up to 12 years old, are replaced by house arrest and socio-educational
measures in open environments (in compliance with article 318 of the Code of Criminal
Procedure, referenced by the decision of the Supreme Court in the collective Habeas corpus
143.641).

15. That children and adolescents in institutional foster care (homes and shelters) have their rights
guaranteed, observing Recommendation 313 of the National Council of Justice, especially by
means of:

16. That children and adolescents in institutional shelters (homes and shelters) have their rights
guaranteed, observing Recommendation 313 of the National Council of Justice, especially by
means of

a. Adaptation of institutional routines, throughout the national territory, aiming to
maintain the care of children and adolescents in institutional shelters, but that they may
preferably have guaranteed the possibilities of family coexistence through
   i. Reintegration into families of origin (natural or extensive);
   ii. Moving to the family reception regime (foster families);
   iii. Temporary stay with previously selected and oriented affectionate foster
caregivers; oriented;
   iv. Insertion in adoptive family, obeying the procedural procedures in force.

b. Redefinition of the routines of care and protection of institutional reception services, in
order to:
   i. Inform the risks of transmission;
   ii. Install and supervise hygiene habits in line with current recommendations;
   iii. Promote balanced eating and new forms of participation for varied and
collective menus;
   iv. To review the disposition of furniture as to the distance of two meters or more
between beds, tables, chairs and places of permanence;
   v. Plan and develop pedagogical, cultural and leisure activities that keep children
and adolescents occupied and protected;
   vi. To review the regime of visits by family members, volunteers and others, in
order to avoid the transmission of the virus, promoting other contact activities
at a distance (phone calls, letters, electronic means);
   vii. To review the rules and norms of coexistence of the service, considering the
participation of the children and adolescents who are housed and the situation
of mandatory quarantine;
   viii. Keep staff and educators/caregivers informed and develop strategies for
supervision and informational and emotional support to them in order to avoid
illness, contamination, and stress situations as a result of work overload;
   ix. To review the rules and norms of coexistence of the service, considering the
participation of the children and adolescents who are housed and the situation
of mandatory quarantine;
   x. Review and adapt the rules for situations of unauthorized departure, reserving
autonomy for the equipment to make decisions compatible with the situation
of collective risk, with clear and immediate communication to the competent
channels (Management Body, Justice System and Guardianship Councils);

   c. Increase in transfers and budget flexibility by the public manager for institutional
reception services (public or affiliated) and, for foster families, aiming at the immediate
acquisition of products and services indispensable to:
   i. Health (masks, hygiene and cleaning items, medicines, clothes, etc.),
   ii. Balanced meals for a long period of time with the permanence of all the host
families and professionals in the service;
   iii. Educational, cultural and leisure activities,
   iv. Revision of furniture and spatial adaptation;
v. Possible emergency hiring of support professionals or to replace those who fall ill during the function;
vi. Other emergency situations arising from the pandemic;

d. Expansion of remote communication channels between the reception services (institutional and family) with the public manager of Social Assistance, Child and Youth Justice, Guardianship Councils and intersectional network teams in order to quickly update the guidelines in force, subject to changes in view of the changing circumstances of the current pandemic.

17. Ensure that the rights of adolescents and young apprentices, trainees and workers be fully protected, guaranteeing the preservation of their employment contracts without loss of full pay, with regards to the principle of full protection and the peculiar condition of the developing person, especially those who are in a vulnerable situation and rely on this income to meet their basic needs. Thus, we corroborate with the technical note No. 05 of 2020 of the Public Ministry of Labour and we highlight the following aspects:
   a. That preventive measures be taken in order to avoid the exposure of adolescents and young people to contamination risks, either in the work environment or in their displacement to companies, public agencies and bodies and/or entities where both the internship and professional apprenticeship are carried out;
   b. The internship and the professional apprenticeship contract are special relationships in which there is preponderance of the protective and pedagogical character under the productive aspect, in view of the purpose of these legal instruments, as provided in Law No. 11788 of 2008 and articles 428 et seq. of the Consolidation of Labour Laws (CLT).
   c. The theoretical classes of learning must be interrupted immediately, except if they can be taught in the modality at a distance and, even so, provided that they have a platform approved by the Ministry of Economy, and guaranteed the structure of free and adequate information technology to the apprentice;
   d. Employers, whether companies, public agencies and bodies, and/or entities contracting apprentices, whether in the direct or indirect modality, must immediately interrupt the practical activities, guaranteeing the perception of integral remuneration, as well as before the principle of integral protection and the peculiar condition of a developing person;

18. Given that there are thousands of children in child labour in Brazil and that the consequences of the pandemic caused by COVID-19 may generate a scenario of unemployment and greater vulnerability for low-income families, measures must be taken both to protect children who are currently in child labour and to prevent this number from growing. These actions include:
   a. Mapping children who work on the streets, identifying their parental situation;
   b. The activation of social protection services and childcare, preventing children from remaining exposed to contamination;
   c. The adoption of the recommendations hereby exposed, especially with regards to the public budget and income supplementation measures, ensuring that these children have an economically safe family setting.

19. That children and adolescents whose caretakers are couples with shared or unilateral custody do not have their health and the health of the community at risk as a result of the fulfilment of visits or period of coexistence provided for in the agreement established between their parents or defined in court. For this, the following guidelines should be observed:
   a. Visits and periods of coexistence should preferably be replaced by means of telephone or online communication, allowing the contact to be preserved;
   b. The person in charge who stays with the child should keep the other regularly informed and not hinder the communication between the child or adolescent with the other person in charge;
   c. In cases where permission is given for visits or periods of contact, those responsible who have returned from travel or have been exposed to situations of risk of contagion should respect the isolation period of 15 days before contact with the child or adolescent is made;
d. The displacement of the child or adolescent should be avoided;
e. In case the visit or permission for the period of coexistence is agreed upon, all recommendations from official bodies should be followed;
f. The judiciary, the family and the people in charge shall pay attention, when making decisions regarding the permission of visits or periods of interaction, to the best interest of the child or adolescent, including their right to health and life, and to the health of the community as a whole.

Through the above recommendations, the National Council for the Rights of Children and Adolescents reaffirms its commitment to the integral protection of Brazilian children and adolescents and recognizes that urgent actions to confront the Covid-19 pandemic in Brazil, with adequate budget availability, policies and services are essential to guarantee the absolute priority of children and adolescents' rights.

March 25th, 2020
2. (PROPOSITIONS FROM NATIONAL CIVIL SOCIETY ORGANIZATIONS ON BEHALF OF STREET POPULATIONS: HUMAN RIGHTS, PROTECTION AND ASSISTANCE IN PREVENTING AND COMBATING CORONAVIRUS)

CRIANÇA NÃO É DE RUA – NETWORK: CHILDREN ARE NOT FROM THE STREETS
MOVIMETNO NACIONAL DE MENINOS E MENIAS DE RUA – NATIONAL MOVEMENT OF BOYS AND GIRLS ON THE STREETS
MOVIMENTO POPULAÇÃO DE RUA – STREET POPULATION MOVEMENT
PASTORAL DO POVO DA RUA – PASTORAL OF STREET PEOPLE

PROPOSALS FROM CIVIL SOCIETY TO GUARANTEE HUMAN RIGHTS, PROTECTION AND ASSISTANCE TO THE HOMELESS IN THE PREVENTION AND COMBAT OF CORONAVIRUS

INTRODUCTION

This document is a contribution of Civil Society Institutions, of national scope, which act in defence and guarantee of human rights of the population in homeless situations, which are: National Campaign Children Are Not from the Streets, National Movement of Boys and Girls on the Streets, Street Population Movement, and Pastoral of Street People.

The presence of the street population in the cities of Brazil shows a scenario of inequality and social injustice. Cities appear as the scenery of this reality unveiled in the streets by situations of extreme vulnerability. In face of the current scenario, with the COVID 19 / CORONAVIRUS pandemic, the street population situation appears with one of the most vulnerable social groups.

The Institutions that integrate this group consider that the "population/people in street situation is a social group formed by children, adolescents, adults and elderly people in street situation", that present specificities to which we must take into consideration.

The Presidential Decree Nº 7.053, of December 23rd, 2009, defines street population as "the heterogeneous population group that has in common extreme poverty, interrupted or weakened family bonds and the inexistence of regular conventional housing, and that uses the public areas and degraded areas as space for housing and livelihood, in a temporary or permanent way, as well as the units of shelter for temporary overnight stay or as temporary housing". According to the Joint Resolution CNAS/CONANDA No. 01/2016, "children and adolescents in street situation are the subjects in development with violated rights, using public areas and/or degraded areas as living space or survival, in a permanent and/or intermittent way, in a situation of vulnerability and/or personal and social risk by the breaking or fragility of the care and of the family and community bonds, poverty and/or extreme poverty, difficulty of access and/or permanence in public policies, being characterized by its heterogeneity, such
as gender, sexual orientation, gender identity, ethnic-racial diversity, religion, generation, territory, nationality, political position, disability, among others”.

§ 1st The term "situation" is used to emphasize the possible transience and ephemeral nature of the profiles of this population, and may change the profile completely, suddenly or gradually, due to a change in fact.

§ 2nd The street situation of children and adolescents may be associated to:
I - child labour;
II - begging;
III - sexual violence;
IV - consumption of alcohol and other drugs;
V - family, institutional or urban violence;
VI - death threat, suffering or mental disorder;
VII – LGBT related phobia, racism, sexism and misogyny;
VIII - compliance with socio-educational measures or measures of welcome protection;
IX - imprisonment of parents.

§ 3rd There may also occur the incidence of other circumstances that lead children and adolescents to the street situation, accompanied or not by their families, existing in different regional contexts, such as those of itinerant populations, "trecheiros", migrants, homeless due to disasters, lodged in occupations or displaced from occupations due to the realization of large works and/or events.

PROPOSALS FOR STREET POPULATION CARE WITHIN THE CORONAVIRUS CONTEXT:

1) To create an intersectional crisis committee at the federal, state and municipal levels with the participation of the Movements of the Population in Situations of the Street (children, adolescents, adults, and the elderly) and the social organizations that work with this public, Public Prosecution Service, Public Defender’s Office, Councils of Rights, Tutelary, Legislative and Executive Councils, to follow-up, monitor and control the actions to prevent and combat COVID-19, which will be executed by the government, with transparency of the discussions and deliberations for the entire Brazilian society.

2) To elaborate an emergency plan at federal, state and municipal levels for the prevention and combat of Coronavirus / COVID-19 for the population in a street situation (children, adolescents and adults), considering the participation of the movements of the population in a street situation and the civil society organizations that work with this public.

3) To revoke immediately the Constitutional Amendment 95/2019 - PEC 95/2019, that disposes on the Roof of the public expenses, by the National Congress;

4) To create a humanitarian narrative, of sensitization of the society in relation to the real situation of this population and not to use the prevention and the combat to COVID-19 to increase the discrimination, the hygienic actions and the compulsory internment of the people in street situation.

SOCIAL SUPPORT AND HEALTH

5) Facilitates access to health units, social assistance and other public bodies, releasing the requirement to present documents for those who do not have them;

6) Ensure vaccination against the flu for the street population, as a priority group, as well as perform immediate coronavirus testing for those with symptoms;

7) To expand the supply of health and social services on the street, with the contribution of resources for both the health network and the social assistance that work with people in street situations to ensure quantitative and qualitative (specialized) care: Street offices, POP Centres, CREAM, Shelters (in adequate and dignified conditions), Programs of social approach and social approach without agglomeration.
8) Expand the health and social assistance teams that work with people in street situations.

9) To create / offer the specialized shelter service for children and adolescents in street situation (Joint Resolution CNAS/CONANDA Nº 01/2016), with the enlargement of places for institutional shelter and/or other services with this purpose, respecting the free adhesion and avoiding the compulsory collection.

10) To temporarily enlarge the offer of shelter, houses of passage for adults, with a view to inclusion in housing programs;

11) To guarantee, whenever necessary, the return of people to the specialized shelter, even those who have returned to the street situation and want to return, maintaining these in quarantine, without adopting punitive measures and developing a methodology based on street social education, of respect and dignity of the human person;

12) Large scale distribution of hygiene kits (alcohol gel, disposable facial protection masks, soap, potable water), as well as, guidelines on the use of the kit and informative material about COVID 19;

13) Make available public spaces for hygiene care, with drinking water and soap, offering chemical toilets and showers in those that do not exist;

14) To distribute in large scale 05 daily meals (breakfast, lunch, afternoon snack, dinner and night snack) to the population in street situation, either in the streets, or in the service network, as well as to guarantee free food in popular restaurants. In the absence of popular restaurants, use cafeterias in public schools and / or use the private network of bars and / or restaurants with payment for the supply of snacks and meals;

15) Guarantee hospital treatment for the population on the street infected with the coronavirus, as well as guarantee space for those who are in quarantine and protection space after leaving the hospital;

16) To establish partnerships with medical, nursing, psychology, nutrition and social assistance faculties in order to hire interns to expand the care;

17) To guarantee protection to the population in a street situation in public spaces, either in schools and/or others, with personal and collective hygiene conditions (showers, toilets, laundry, dressing rooms, wagon parking, dog pound); food. Take into account family groups, groups of coexistence, affinity, and non-agglomeration, with emergency hiring.

18) Guarantee employees to work in these spaces, expanding the teams with emergency hiring, guaranteeing rights and preventing the spread of contagion;

19) To prioritize attention, care and welcoming space to the street population that is part of the group at risk for COVID-19 (elderly, pregnant women, people with chronic diseases, diabetics, hypertensive, respiratory diseases, tuberculosis, HIV, kidney diseases...);

20) Construction of human rights protocol, for protection and attendance to children, adolescents and adults in street situation.

REGARDING IMMEDIATE PROTECTION

21) Leasing of hotels, inns and/or motels in the city centre for lodging with state management, being able to count on a partner network;

22) To guarantee, as a matter of urgency, the expansion of social rent and lodging;

23) Temporary use of enclosed equipment of the public net, as schools, for the population in street situation as conviviality space, food and habitation.
INCLUSION IN RESOURCE TRANSFER PROGRAMS

24) Guarantee scholarships (financial) for children and adolescents who work in the streets and offer free food in popular restaurants;

25) Immediate inclusion of the street population in social assistance programs such as *Bolsa Família*;

26) To provide a minimum emergency income, according to the official definition of the federal government, to the street population, as well as to establish partnerships with non-profit civil society organizations that work with this population in defence of their rights, regulated by Law No. 13.019 of 2014, also known as the Regulatory Framework of Civil Society Organizations (CSO), which can be done with exemption of public call, under the terms of Article 30, item II of the above mentioned law through the implementation of a work plan presented by the CSO and approved by the Public Administration responsible, at state and municipal levels.

27) To provide resources for the celebration of partnerships, with transfer of resources, to the civil society organizations (CSOs), in the states and municipalities, that act in the defence of the rights of the people in street situation, for the cooperation in the execution of emergency work plans.

28) To guarantee these same rights for the collectors of recyclable materials in street situations, as well as the right to emergency income for the collectors organized in associations and cooperatives.

ACCESS TO INFORMATION

29) Articulation of the public and private territorial network to assist in the planned distribution of information material to prevent and combat COVID-19.

30) The federal, state, district, and municipal governments should inform public authorities and society about the flows and procedures that are being created and what is working to prevent and combat the coronavirus, and for the population in a street situation.

31) Training for all servants, movements and NGOs that work and act with population in street situation, on qualified assistance and on the theme of prevention of COVID-19; fighting prejudice and ignorance.

*Brazil, March 24th, 2020.*
3. CONSELHO NACIONAL DOS DIREITOS HUMANOS (NATIONAL COUNCIL OF HUMAN RIGHTS, BRASILIA)

PUBLIC NOTE FOR THE DEFENSE OF THE HUMAN RIGHTS OF POPULATION IN STREET SITUATION IN TIMES OF CORONACRISIS

The National Human Rights Council calls on the State - in all its instances - to guarantee the human rights of the population in a street situation (children, adolescents, adults and the elderly) in this context of the pandemic caused by the coronavirus (Covid-19). The Ministry of Health and the World Health Organization have determined that distance and social isolation are the effective measures to contain the advance of the coronavirus. However, this significant portion of the Brazilian population does not have this alternative to protect itself. These people are largely dependent on public policies, which cannot be interrupted and need to be expanded in this current context.

Decree No. 10.282/2020 was issued by the Presidency of the Republic to regulate the definition of what would be the public services and essential activities dealt with by Law No. 13.979/2020, amended by Provisional Measure No. 926/2020. These rules establish the measures for dealing with public health emergencies, arising from the coronavirus (Covid-19) responsible for the outbreak that began in 2019 and has spread internationally at an alarming rate over the past few months.

As well as medical and hospital services, the work of professionals from the Single Social Assistance Service (SUAS) - with special emphasis on the Specialized Reference Centres for Street People (Centro Pop), the Social Assistance Reference Centres (CRAS) and the Specialized Social Assistance Reference Centres (CREAS) - is paramount at this time of pandemic spread. The so-called Coronacrisis is a public health issue that touches frontally on social and economic aspects on a global scale. When a crisis of this magnitude is faced, people in the most vulnerable situation are the most affected.

In this case, people in a street situation do not have the basic conditions to protect themselves, such as adequate housing to achieve social isolation. Their exposure to the outbreak can lead to the lethal potentiality of the virus, considering that the street population faces flagrant difficulties to have primary health care guaranteed. It is a matter of life or death that SUAS is in full operation during the Corona crisis.

Among the services prescribed as essential by Decree No. 10.282/2020, clauses II and XXXIII of Article 3 define within this category those that are linked to "social assistance and care for the population in a state of vulnerability" and to "medical expert activities related to the general social security and social assistance regime". Article 2 determines that the Decree has a national scope, applying "to legal entities of internal, federal, state, district and municipal public law, and to private entities and individuals".

Any establishment of social assistance, public or private, that refuses to carry out services to the population in a street situation or to any other persons in vulnerability in this period, under the justification of social isolation, will be carrying out an illegal act before the Brazilian legal system, and in flagrant violation of human rights, susceptible of the applicable legal responsibilities.
Besides the uninterrupted functioning of the services to assist the population in a street situation, it is urgent that the public authorities adopt other urgent measures to protect the population in a street situation facing COVID-19:

- allocation of resources, by means of transfers or other appropriate and legal means, to the Municipal Social Assistance Funds and the Municipalities, in order to guarantee the extension of social assistance to people in street situations;
- allocation of resources, by means of transfers or other appropriate and legal means, to the Municipal Health Funds and the Municipalities, in order to ensure the expansion of the teams of the Street Office;
- payment of social rent for the entire population in a street situation while the Covid-19 pandemic persists;
- destination of public educational and sports spaces that are with suspended use and that contain sanitary equipment suitable for hygiene personnel, to accommodate and to allow the basic hygiene of people in a street situation, taking the appropriate measures not to generate agglomerations;
- destination of specific space, operating 24 hours a day, for people in a street situation who fit in as a risk group and are not previously registered in equipment and services that serve the population in a street situation;
- Destination of a separate place for people in a street situation who are suspected of contamination by COVID-19, to guarantee isolation in the social assistance network’s own equipment;
- destination of specific space, in the equipment and services that attend the population in a street situation, for those who fit in the Covid-19 risk group (elderly people, pregnant women and people with chronic diseases, immunosuppressed, respiratory and other pre-existing comorbidities that can lead to a worsening of the general health condition from the contagion, with special attention to diabetes, tuberculosis, renal diseases, HIV and co-infections);
- Periodic tests for Covid-19 in street people and service workers, with the strengthening of the office staff in the street and a specialised approach to social assistance, intensifying prevention and harm reduction actions, with inputs (liquid soap, alcohol gel, masks) and specific guidance;
- Providing food and basic hygiene inputs and clothing to people in street situations allocated public equipment;
- Installation and/or reinforcement of taps, water fountains and public bathrooms equipped with all the necessary infrastructure for correct sanitation and sanitization, with piped water, liquid soap, toilet paper and alcohol gel, besides the supply of disposable facial protection masks and informative material about Covid-19 in the equipment aimed at the street population, including for service workers;
- Immediate availability of drinking water points in all squares and public areas, providing immediate access to the existing public toilets, without prejudice to the implementation of other toilets for public use through a plan for proper hygiene, always observing the urgent nature of such measures;
- Supply of alcohol gel, disposable face masks and information material about Covid-19 in the equipment and services that assist the street population.

It should be noted that the Corona crisis cannot be used as a justification for the indiscriminate compulsory detention of persons in a street situation; the deprivation of property of those in a street situation; or the agglomeration of persons in a street situation outside what is admitted by the health authorities for the general population. Thus, the NHRC manifests itself in defence of the human rights of the street population in Corona crisis times.

(1 MELLO, Guilherme; OLIVEIRA, Ana Luíza Matos de; GUIDOLIN, Ana Paula; CASO, Camila de; DAVID, Grazielle; NASCIMENTO, Julio Cesar; GONÇALVES, Ricardo; SEIXAS, Tiago. A Coronacrise: natureza, impactos e medidas de enfrentamento no Brasil e no mundo. Centro de Estudos de Conjuntura e Política Econômica – IE/UNICAMP, Note No.9, Campinas: March 2020.)
Latin America: Caring for the street population is also a public health issue

Through the "Red Internacional por la Defensa de la Infancia y Adolescencia en Situación de Calle - RIDIAC" (International Network for the Defense of Children and Adolescents in Street Situations), which brings together organizations and entities from Brazil, Bolivia, Argentina, Chile, Paraguay, Uruguay, Peru, Colombia, Venezuela, Mexico and the Dominican Republic, we express our concern about the progress of the COVID-19, especially the lack of clear protocols and policies aimed at the street population, specifically children and adolescents.

The street situation already implies the lack of access to rights and the denial of a dignified life. This pandemic, which alarms the whole world, puts at risk the most vulnerable population, being the people, and especially the street children, those who are more unprotected.

Until today, the campaigns of our governments are oriented towards the population with resources to be able to carry out the quarantine. Ventilation and hygiene of homes, cleaning guidelines with drinking water and soap, alcohol gel, adequate food and social isolation.

However, in Latin America the levels of poverty and inequality place us in a drastically different scenario from that of the so-called developed countries. According to the Economic Commission for Latin America and the Caribbean (ECLAC), in our region there are more than 191 million people living in poverty, and to give a comparative idea of the statistics, of In Brazil alone, there are 70,000 children and adolescents on the streets and 351,000 adults in the same situation. This is not formal data, since in Latin America there are very few official statistics that show the seriousness of the street population, which has historically been relegated to the background of all government policies.

For this reason, from RIDIAC we are concerned about the level of impact that this pandemic could have in our territory, and we understand that it is essential that governments and society commit to carry out measures that prioritize EVERY LIFE of EVERY Latin American, beyond their social condition. Caring for homeless and socially vulnerable people who are at risk today is fundamental not only for the restitution of the rights they hold, but also as a public health need of the entire community.

Faced with this critical situation we demand in each of the governments of our countries:
1) To create a Crisis Committee with the participation of movements, collectives and organizations of the integrated civil society that work especially with the population in street situation to accompany, monitor and control in an articulated way the actions to prevent and combat the COVID-19;
2) Coronavirus Prevention and Combat Plan / COVID-19 for street children, adolescents and adults;
3) Facilitate access to health facilities, even for those without documents;
4) Expanding and creating the supply of health and social assistance services in the street; ensuring vaccination against influenza; expanding vacancies for shelter without institutionalization in order to achieve adherence by children in street situations;
5) Guarantee specialized care for street children and adolescents.
6) Provide support to social work teams/street educators to maintain and expand the operation of public social assistance teams, such as day centres, night centres, shelters, homes, shelters and canteens, ensuring all safety conditions against the pandemic, both for workers and for the street population, always avoiding overcrowding.
7) To guarantee access to alcohol gel, disposable protective masks, information material and guidelines for use, as well as basic services of water, soap, other hygiene elements and basic food for nutrition, especially for populations in street situations and associated vulnerabilities;
8) Publication of a bulletin on prevention and combat of COVID-19 addressed to the population in street situation;
9) Guaranteeing access to financial grants, plans, scholarships or socio-economic support for children, adolescents and their families working in the street, as well as protection in terms of clothing, hygiene and safety in their corresponding work;
10) Expand and provide public spaces for hygiene, food and drinking water, in addition to existing public bathrooms, offer chemical toilets;
11) Not to use prevention and fight against COVID-19 to increase discrimination and repression by security forces. Avoid compulsive and restrictive measures towards people in street situations;
12) To guarantee social rents so that street people have a place, a roof and shelter to live in, as well as to be able to comply with the measure to prevent social isolation in a safe, hygienic and closed place.

International Delegates of RIDIAC

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5. CAMPANHA O PEQUENO NAZARENO – CONANDA (CAMPAIGN CIVIL SOCIETY ORGANIZATION O PEQUENO NAZARENO, FORTALEZA, CEARA, AND THE NATIONAL CHILDRE’S RIGHTS COUNCIL, BRASILIA)

CAMPAIGN
O PEQUENO NAZARENO – CONANDA

In order to collaborate in the fight against Covid-19, CONANDA, in partnership with OPN, elaborated a dissemination material with the main recommendations for the integral protection of children and adolescents in street situations in this period of global pandemic. Have a look!

CONANDA’S recommendations for the protection of children and adolescents in a street situation

CONANDA’S recommendations:
To include children and adolescents in street situations in the risk group for the COVID-19 contamination, considering their social vulnerability, and to adopt measures that include:

CONANDA’S recommendations:
To elaborate a prevention and treatment Plan and to create a crisis committee for each scope of the Rights Guarantee System to assist the execution of preventive actions;

CONANDA’S recommendations:
To increase the number of Social Educating teams, healthcare and social assistance services in the street;

CONANDA’S recommendations:
Incluir as crianças e adolescentes em situação de rua no grupo de risco para complicações da infecção pelo COVID-19, tendo em vista sua vulnerabilidade social e adotar medidas que incluam:

CONANDA’S recommendations:
Ampliar o número de equipes de Educadores Sociais, os serviços de saúde e assistência social na rua:
CONANDA’S recommendations:
To increase the number of vacancies in shelter services, prioritising the foster family services in selected family households that must be capable and assisted, and that are not listed in the adoption record;

CONANDA’S recommendations:
To create in all spheres of the Government – federal, state, municipal, and district – a plan for distributing food, drinking water, hygiene kit with disposable masks, alcohol gel and graphic informative material;

CONANDA’S recommendations:
To guarantee access to financial allowances and social rent for families of children and adolescents in street situations;

CONANDA’S recommendations:
To guarantee individual protection equipment (IPEs) to healthcare and social assistance professionals who will have contact with children and adolescents in street situations who have respiratory symptoms or have had contact with people diagnosed with COVID-19;
CONANDA’S recommendations: To articulate actions with the CNAS and other councils, in order to avoid the breaking of family and community bonds.

CONANDA’S recommendations: To ensure the availability of public buildings or other establishments (such as hotels, for instance) that are not currently operating and can be used as sorting facilities for housing and for providing meals, baths and healthcare for children and adolescents in a street situation.

A bath with dignity
Help us ensure the availability of hygiene material. Make your donation.
The population in street situation (children/adolescents/adults) needs your help!

Donate:
- Soap / liquid soap
- Drinking and mineral water
- Paper towels
- Wet paper towels
- Disposable protection masks
- Clothes
- Essential food items and juices, todinho, fruit, biscuits, etc.

Collection point:

Financial aid:

The new coronavirus is extremely contagious! We all have to respect the recommendations: stay home, respect social distancing and quarantine! Wash your hands! And be supportive of the most vulnerable!