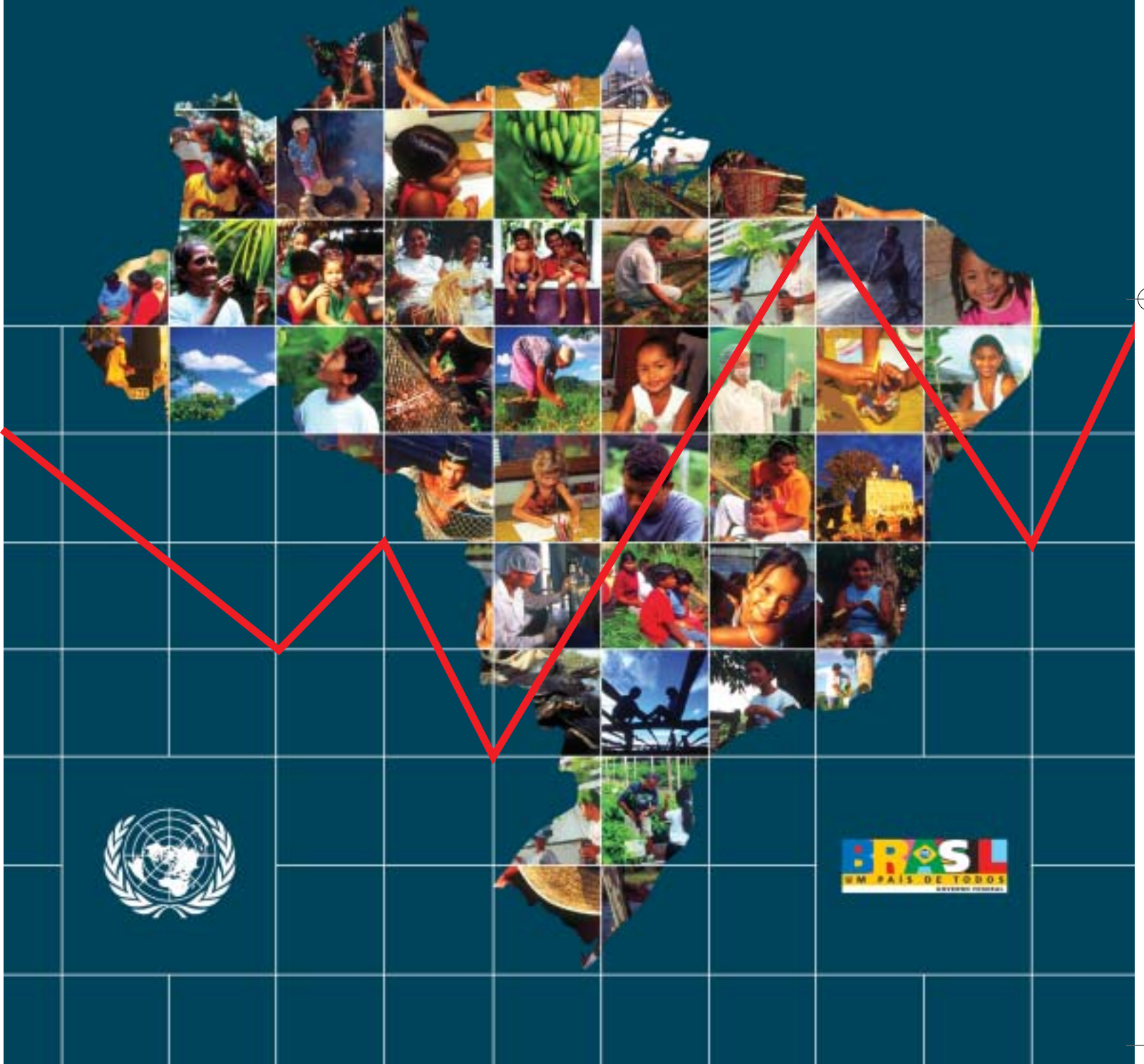


Presidency of the Republic • Government of the Federative Republic of Brazil

BRAZILIAN MONITORING REPORT ON THE MILLENNIUM DEVELOPMENT GOALS

September 2004



MILLENNIUM DEVELOPMENT GOALS

Brazilian Monitoring Report

September 2004

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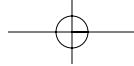
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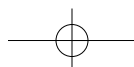
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PRESENTATION

Much has already been done – and there is still a lot to be done – since 147 Heads of State and Government, representing 189 countries, including Brazil, gathered in the United Nations Millennium Summit, in 2000, and undertook the commitment to fulfill the Millennium Development Goals by 2015.

The 2004 Human Development Report of the United Nations Development Program – launched in July – revealed that the quality and coverage of education, life expectancy and the income of the population in the 177 analyzed countries are not growing at the same pace as in the 1980's.

According to the United Nations Development Programme (UNDP), a large number of countries experienced a backward trend in their development during the 1990's. In 46 of them, people are poorer today than they were a decade ago. In 25 countries more people suffer from hunger.

If this pace is maintained, the Millennium Development Goals will simply not be achieved in many parts of the world. In the case of Sub-Saharan Africa, for example, the eradication of hunger and extreme poverty, as well as access to basic sanitation are goals that would only be reached after 2200.

I have said that the State alone is not able to solve the most deep-rooted problems in our country. Civil society – labor unions, business entities, non-government organizations, churches, and social movements – plays a role as important as the government's in effectively transforming the country.

Brazilian society has an extraordinary ability for mobilization around major causes. And it has amazing strength and energy to help our country overcome social problems that have accumulated along the centuries and, in many cases, have been aggravated in the last years.

This Report concerns the eight Millennium Development Goals. In this presentation, I will address the first one, which aims to eradicate hunger and extreme poverty.

Everyone knows that this fight constitutes one of the main objectives of our government: the *Fome Zero* Program.

I believe the first major result of *Fome Zero* was to place the issue of hunger in the political agenda of our country.

In addition, it allowed the improvement of social indicators in the 1,227 municipalities where it was implemented, enabled the development of 110 thousand small properties and kept these families in rural areas, through the purchase of milk and agricultural products from small farmers.

Over 17 thousand water tanks for the collection of rainwater were built in the Brazilian semi-arid region and the quality of school meals in day-care centers, schools and charity organizations was improved.

Actually, the amount per pupil allocated to school meals, which had not been changed since 1993, was increased by 40%.

The target of *Fome Zero* gained new strength in October 2003, when the *Bolsa Família* Program was launched, unifying existing income transfer programs – including the Food Card Program, aimed at nutritional and food security.

The *Bolsa Família* Program also significantly increased the number of families served and almost tripled the amount paid to each family, which went from R\$28.00 to R\$ 75.00.

In July, the *Bolsa Família* Program benefited over 4,279 million families – around 17,118 million people – in 5,500 Brazilian municipalities, and the aim is to extend it to 6.5 million families, or more than 26.7 million people, by December of 2004.

The benefit is conditioned to the children's school attendance and regular examinations in health services. Thus, the program encourages positive actions towards breaking the cycle of extreme poverty and towards social inclusion.

The strategy of expansion of the program prioritizes families living in metropolitan regions, where the situation of social risk is more severe, due to problems of demographic concentration, violence and family disintegration.

In 2004, a total amount of R\$ 6 billion in budgetary resources has been allocated to the actions for nutritional and food security, and income transfers.

And all this was done in spite of the huge obstacles created by the recessive environment we inherited: fortunately, the economy resumed growth and the Brazilian agenda today is already one of sustainable development with social inclusion.

I wish, therefore, to affirm that we are seeking to do our part, in addition to contributing to the economic and social development at the international level. This is, undoubtedly, a task that requires the establishment of new partnerships and a lot of joint effort.

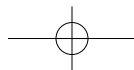
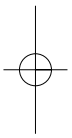
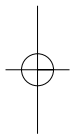
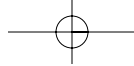
In this regard, I submitted to the United Nations General Assembly, in September of 2003, the idea of creating, within the scope of the United Nations Organization itself, a World Committee Against Hunger, composed of heads of State and government from all continents, aiming at unifying proposals and making them more effective.

To this end, we invite heads of State and government from around the world, directors of international organizations and representatives of civil society to a meeting in New York, in September of 2004, before the United Nations General Assembly.

We are convinced that the resources – material and human – to address the main problems of today's world already exist. It is only a matter of political decision and will.

And strong partnerships among governments and civil society are essential for the achievement of our objectives.

Luiz Inácio Lula da Silva
President of the Republic



INTRODUCTION

The year 2000 was marked by the commitments undertaken by the international community at the Millennium Summit. We hope that, shortly, there will be a new setting with the implementation of these commitments throughout the world. The evolution of this process is important to reduce poverty and promote sound and sustainable development.

The Millennium Development Goals (MDGs) point to some priority areas that need to be addressed in order to eliminate extreme poverty. These objectives do not constitute a comprehensive view of development, but rather milestones, providing clear indications concerning the progress of inclusive and equitable development in different societies.

In the scope of the United Nations, a campaign was launched to raise public awareness with regards to the Millennium Development Goals. The mobilization of support for the achievement of the MDGs constitutes the most expressive effort of the international community in recent times.

Although the Millennium Summit has its roots in the United Nations, its objectives are related to people and can only be achieved if the efforts are nationally controlled and conducted by the countries. The strong partnerships among actors at different levels - global, national and local - are essential in order for significant changes to be carried out and for the worst forms of human poverty and deprivation to be eliminated.

In the domestic sphere, Brazil is one of the main world leaders in the fight against hunger and poverty. Upon taking office, the President of the Republic, Luiz Inácio Lula da Silva, committed himself to eradicating hunger in Brazil. This commitment was later reaffirmed in the 58th Session of the United Nations General Assembly. Furthermore, Brazil took the initiative of convening world leaders, in September 2004,

to discuss financing alternatives for development and against poverty, as well as to gather support for the achievement of global objectives.

The Brazilian government was able to group its various income support programs under a single coordinated national program, with the distribution of resources directed to extremely poor families. The *Bolsa Família* Program replaced a series of fragmented initiatives in education, health, the fight against hunger, child labor, social development, among others, with a single program focusing on the country's poorest social groups.

Brazilian activism in the government sphere finds equal expression in civil society. As one of the actions in its campaign, the National Week for Citizenship and Solidarity drew the support of different sectors to the MDGs.

The Brazilian Report is another example of the commitment of Brazilians to this collective effort. The process of nationally reporting the progress of MDGs brings together decision-makers, experts and researchers of different institution to evaluate how progress can be expedited and sustained.

The United Nations System in Brazil is filled with the spirit of collaboration with national efforts for the achievement of the MDGs. We hope that, in the 11 years remaining to meet the targets defined in 2000, this mobilization will continue on a global scale and in the different levels of society.

Carlos Lopes

Resident Coordinator of the United Nations System in Brazil

UNDERSTANDING THE REPORT

In September 2000, leaders of 189 countries agreed on a pact during the Millennium Summit convened by the United Nations in New York. This agreement gave rise to a document named the Millennium Declaration, establishing as a priority the eradication of extreme poverty and hunger in the planet by 2015. To this effect, eight goals were agreed, called the Millennium Development Goals (MDGs), which are to be achieved by means of specific actions to fight hunger and poverty, combined with the implementation of policies in the areas of health, sanitation, education, housing, promotion of gender equality and environment. In addition, the development of a global partnership was agreed, with a view to contributing to sustainable development. For every goal, targets were established, in a total of 18, to be monitored by a set of 48 indicators proposed by a group of experts from the United Nations Secretariat, the International Monetary Fund, the World Bank and the Organization for Economic Cooperation and Development.

The current government has sought to reinforce these multilateral initiatives on several occasions, as for example in the World Economic Forum, in January 2003 in Davos (Switzerland), and in the Expanded G-8 Summit, in June of the same year in Evian (France). At both events, Brazil proposed the creation of an international fund exclusively intended to fight hunger and extreme poverty. In September 2003, in the opening of the 58th United Nations General Assembly, together with India and South Africa, Brazil created the Trust Fund for Hunger and Poverty Alleviation, within the scope of the United Nations Development Programme

(UNDP), aimed at replicating, on a global scale, successful social projects.

In the domestic sphere, President Luiz Inácio Lula da Silva, since taking office in January 2003, has reaffirmed on several occasions his commitment to addressing the historical challenge of eradicating hunger in the country. The President aims to promote sustained development together with equitable income distribution. Society has been called on to participate in the great collective effort against hunger. Also, a series of measures are under way to mobilize resources and, thus, promote the resumption of economic growth with social inclusion. In this sense, one can observe that the priorities established by the Brazilian government are strictly in line with those of the World Summit.

This report is the first of a series that will regularly track the progress of the living conditions of the Brazilian population, as well as the government's commitments undertaken in the international arena. The task is neither simple nor trivial. The difficulties are numerous. One that deserves mention, for example, is the need to reassess some targets and indicators proposed by the United Nations – the characteristics and specificities of the Brazilian nation are so varied that they are often not addressed satisfactorily in the agreed instruments. In some instances, the targets set up have already been achieved in Brazil, no longer constituting a problem to be tackled in the next years. Finally, the Brazilian federative structure implies that public policies aiming at the fulfillment of the MDGs have to be undertaken and implemented in its three spheres: federal, state and municipal.

As observed in this report, the 1990's presented a series of improvements concerning the selected indicators. However, Brazil is still a long way away from reaching a level of social well-being compatible with its level of wealth and development – despite having progressed in several policies and programs in the social area. Although the current government has doubled the efforts, it is aware the issue is not one to be resolved with the implementation of good social policies alone, but with the adoption of a development model which is inclusive and sustainable along time.

The preparation of this document, concerning progress in the living conditions of the Brazilian population, was based on an analysis of the indicators suggested by an international group of experts. The selection of the time cut-off point was due to the fact that 1990 is the baseline date proposed by the United Nations for the beginning of the follow-up process, and 2002, the year with the most recent statistics available. It is worth highlighting that, whenever pertinent, the indicators were disaggregated by race/color, in order to portray one of the most serious social problems in Brazil – racial inequality.

Subsequently, the main measures of government intervention at federal level that directly affect the achievement of the goal under analysis were selected. Each chapter of this report corresponds to a Millennium Development Goal: eradicating poverty and hunger; achieving universal primary education; promoting gender equality and empowering women; reducing child mortality; improving maternal health; combating HIV/AIDS, malaria and other diseases; ensuring environmental sustainability; and establishing a global partnership for development. In each chapter, information is presented in the following manner: diagnosis, implemented programs and policies; and priority actions as from 2003.

The report presents the result of a partnership between the Brazilian government and the different agencies composing the United Nations System in Brazil. Six work groups were created dedicated to the themes of hunger and poverty; education; gender and racial issues; health; environmental sustainability; and global partnership. On the part of the Brazilian government, the following institutions participated in the initiative: Civil House of the Presidency of the Republic, coordinating the process within the government; Ministry of Planning, Budget and Management; Ministry of Foreign Affairs; Ministry of Finance; Ministry of Health; Ministry of Education; Ministry of Environment; Ministry of Cities; Ministry of Social Development and Fight Against Hunger; and Special Secretariat for Women's Policies. The Institute for Applied Economic Research (Ipea) and the Brazilian Institute of Geography and Statistics (IBGE), both linked to the Ministry of Planning, Budget and Management, were responsible for the selection and analysis of the indicators used, coordination of the thematic groups,

and consolidation of the final text of the report.

On the part of the United Nations, in addition to the UNDP, responsible for the interagency coordination of the MDGs monitoring process, the following institutions participated: Inter-American Development Bank (IADB); The World Bank; Economic Commission for Latin America and the Caribbean (ECLAC); Food and Agriculture Organization of the United Nations (FAO); International Labour Organization (ILO); Pan American Health Organization/World Health Organization (PAHO/WHO); United Nations Environment Programme (UNEP); International Telecommunication Union (ITU); Joint United Nations Programme on HIV/AIDS (UNAIDS); United Nations Educational Scientific and Cultural Organization (UNESCO); United Nations Fund for Population (UNFPA); United Nations Human Settlements Programme (UN-HABITAT); United Nations Children's Fund (UNICEF); United Nations Development Fund for Women (UNIFEM) and United Nations Office on Drugs and Crime (UNODC).

Therefore, this document consolidates an initial effort of the federal government to structure a systematic monitoring system of the main indicators and targets of the MDGs. Its publication aims to launch a comprehensive national debate on the issue, thus mobilizing society for the fight against the social exclusion still prevailing in our country. It involves the beginning of a process that will, hopefully, allow all concerned, government – in its three levels – and civil society, to engage in monitoring the progress of living conditions in Brazil and in the construction of new commitments, in order to establish a development model that will transform Brazil into an inclusive country for all its citizens.

12

MILLENNIUM DEVELOPMENT GOALS • BRAZIL

GOAL
ERADICATING
EXTREME POVERTY
AND HUNGER



1

■ TARGET 1

TO HALVE, BETWEEN 1990 AND 2015, THE PROPORTION OF PEOPLE WHOSE INCOME IS LESS THAN 1 DOLLAR PPP A DAY.

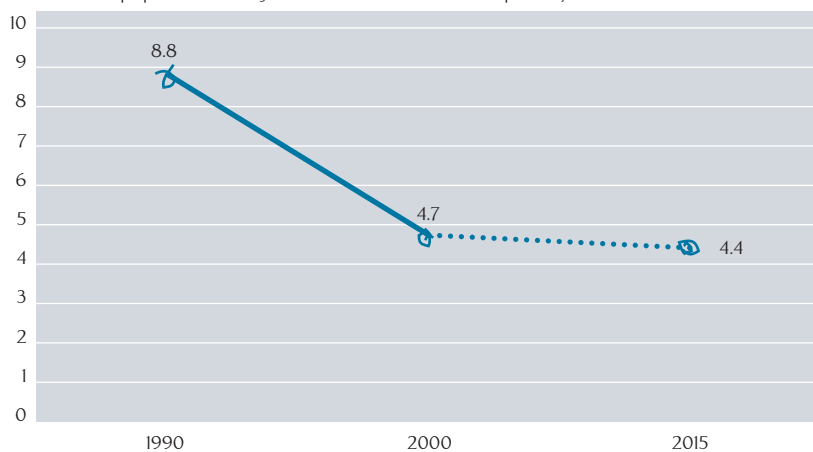
■ TARGET 2

TO HALVE, BETWEEN 1990 AND 2015, THE PROPORTION OF PEOPLE WHO SUFFER FROM HUNGER.

MILLIONS OF PEOPLE STILL LIVE IN EXTREME POVERTY

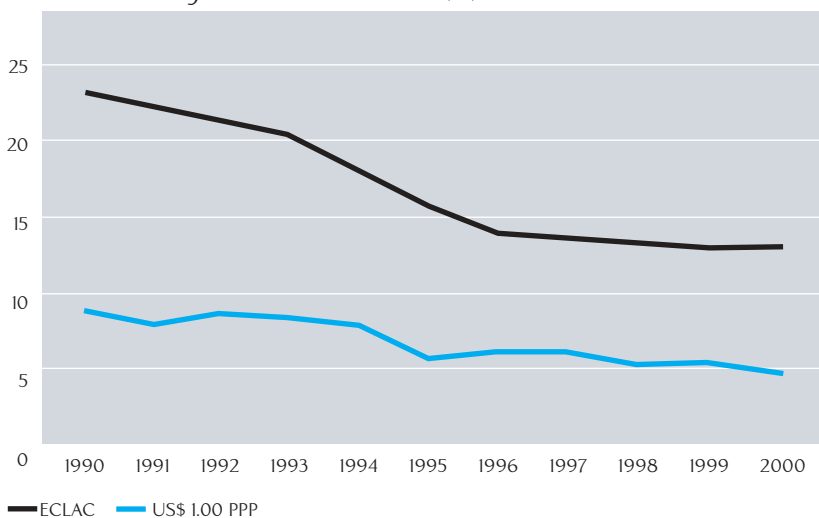
If only the target of halving, by 2015, the proportion of people living on less than 1 dollar a day (adjusted by purchasing power parity) was to be considered, Brazil would be very close to achieving the part of the Millennium Development Goals (MDGs) related to extreme poverty. In 1990, year of reference for the MDGs, 8.8% of Brazilians lived under this per capita income line. Therefore, the target would be to reduce this percentage to 4.4% in 25 years. However, after only one decade, this proportion had reached 4.7%, only 0.3 percentage point away from reaching the target.

Graph 1
Brazil – People in extreme poverty
(% of the population living with less than 1 dollar PPP per day)



Source: The World Bank

Graph 2
Brazil – Proportion of indigents according to different methodologies – 1990 to 2000 (%)



— ECLAC — US\$ 1.00 PPP

Source: Social Panorama of Latin America, ECLAC, several years. US\$1.00 and US\$2.00 lines, purchasing parity methodology of the World Bank

These statistics, however, should be analyzed with caution, to avoid the risk of considering, prematurely, that the issue of extreme poverty has been overcome in Brazil. The result can be more or less positive depending on the indicator chosen to measure what the MDGs define as “extreme poverty”. Although the international benchmark is the so-called PPP dollar (as it eliminates the differences in the costs of living among countries), institutions such as ECLAC, Ipea and the World Bank adopt in their studies other parameters to define national extreme poverty lines. The discussion regarding the advantages and disadvantages of each methodology is summarized in the *Box* “What are the lines of poverty and extreme poverty?”.

Whatever the “thermometer” used, the absolute number of people living in extreme poverty in Brazil is still extremely high, even exceeding the total population of many countries. The extremely poor can total 8 million or 17 million, depending on how the extreme poverty line is defined. Another reason to be cautious about the data is that the reference period established by the MDGs, the early nineties, presents added complications in the case of Brazil. In those years, the country experienced extremely high inflation rates, making it difficult to compare financial values of the time with cur-

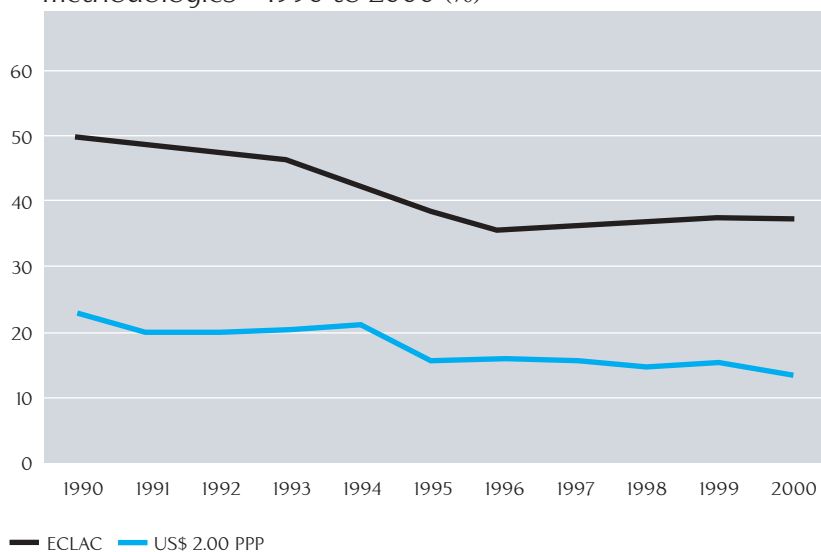
rent ones, regardless of whether, the minimum wage or the PPP dollar is used as the updating parameter.

In Brazilian public policies, the most widely used criterion to measure poverty and extreme poverty levels uses the minimum wage as reference. It places under the poverty line those living on a monthly family income of less than half a minimum wage per capita. Those on a monthly per capita income of up to a quarter of a minimum wage are considered as living in extreme poverty, or indigence.

Based on such criteria, in 2002 there were 52.3 million poor people in the country, or 30.6% of the population, while extreme poverty affected 11.6% of the population, e.g. 20 million people. Between 1992 and 2002, the incidence of poverty dropped 9.1 percentage points, from 39.7% to 30.6%. Such reduction, however, presents a very heterogeneous path. The first three years (1992 – 1994) were characterized by a moderate reduction. Between 1994 and 1995, the drop was significant as a result of the stabilization of the economy generated by the Real Plan. After this period, the number of poor people remained relatively stable. The same trend can be observed in relation to extreme poverty: a moderate reduction in the first triennium, followed by a strong retraction in 1994 – 1995 and, from then on, relative stagnation.

Regardless of the methodology used to measure it, poverty followed a downward trend, always more intense during 1994 – 1995. According to the methodology of the United Nations Economic Commission for Latin America and the Caribbean (ECLAC), the proportion of those who lived under the extreme poverty line corresponded to 23.4% of the population in 1990. Eleven years later, in 2001, it had dropped to 13.2%. Therefore, also based on this indicator, Brazil is close to achieving the target of halving the percentage of extremely

Graph 3
Brazil – Proportion of poor according to different methodologies – 1990 to 2000 (%)



Source: Social Panorama of Latin America, ECLAC, several years. US\$1.00 and US\$2.00 lines, purchasing parity methodology of the World Bank

poor people. According to ECLAC's criteria, the target to be achieved by 2015 would be of 11.7%.

Participation of the poor in income increases, but inequality persists

A third indicator used in the target of reducing extreme poverty is the participation of the poorest 20% in the national income or consumption. In the last two years, this participation has increased in Brazil. In 1992, the 20% belonging to the base of the social pyramid held 3% of the total income of families. After a decade, this percentage increased to 4.2%. The growth was more intense in the country's poorest region, the Northeast. Among other factors, the income transfer carried out by Social Security and Assistance programs contributed to this result. In 2002, 14 million benefits amounting to one minimum wage were paid, out of a total of 21 million permanent benefits (urban and rural retirement, pensions, continued benefits to low income elderly people and poor people with disabilities). According to simulations

carried out by Ipea, if this set of benefits were suspended, the impact on the extreme poverty line considering those with a monthly per capita income of up to a quarter of a minimum wage would increase it by more than 10 percentage points, which would place around 17 million people under this line.

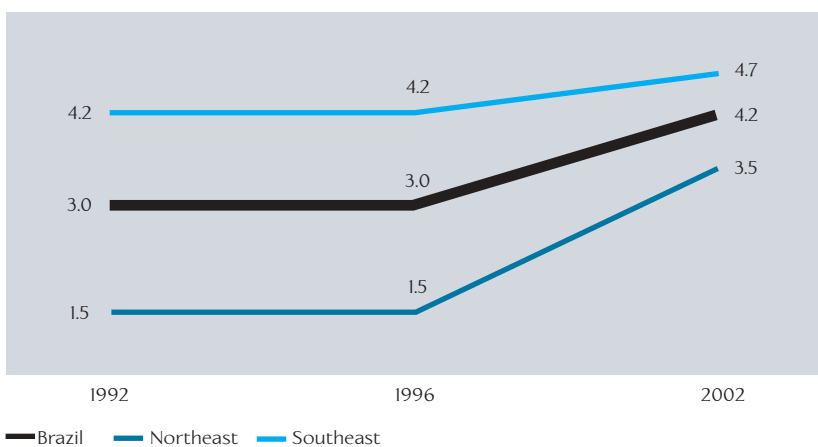
Despite improvements in the income of the poorest, the distance in relation to the wealthy was hardly changed, since the wealthy have also increased their participation in the national income. In

1992, the wealthiest 20% had 55.7% of the national income. In 1996, they had 55.8% and in 2002, 56.8%. Between 1990 and 2002, the main indicator for measuring income inequality, the Gini index, remained at 0.57 in the Brazilian case, which corresponds to one of the highest in the world. The Gini index presents values in the interval between 0 (perfect equality) and 1 (maximum inequality).

The poorest among the poor in Brazil are in the Northeast region. In this region, the disproportion between the base and the top of the social pyramid is even higher than in the rest of the country. Data show that, in 2002, the poorest 20% in the Northeast held an income share (3.5%) even smaller than the poorest 20% in the Southeast (4.7%). At the same time, the regional income share of the wealthiest 20% in the Northeast (62.6%) was larger than their peers in the Southeast (53.9%). The regional differences are evident when one analyzes the proportion of people living on an income equivalent to a quarter of a minimum salary. In 2002, 5.2% of the inhabitants of the Southeast were in extreme poverty or indigence; in the Northeast, this proportion was almost five times higher: 25.2%.

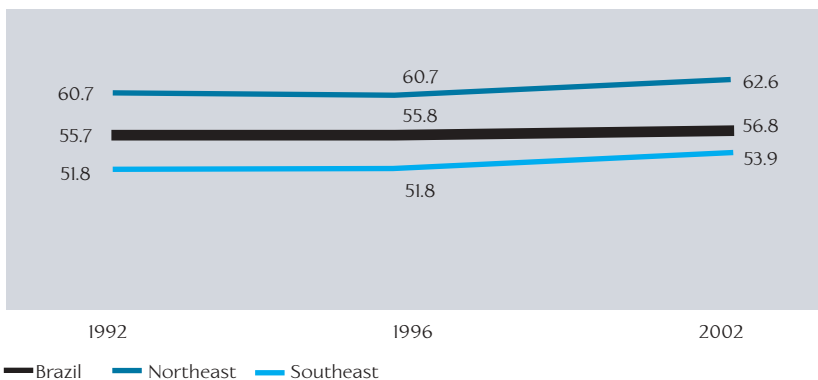
Inequality in Brazil is also related to race, affecting blacks and mulattos more intensely. *Graph 8* shows the relative participation of different racial groups in the national income. The distribution of these groups within the poorest 10%, on the one hand, and within the wealthiest 1%, on the other, shows that 86% of those in the most privileged class were white, while 65% of the poorest were blacks or mulattos.

Graph 4
Participation of the 20% poorest in the national income* (%)
Brazil, Northeast and Southeast – 1992, 1996 and 2002



Source: IBGE/PNAD, 1992 – 2002.
* Total household income.

Graph 5
Participation of the 20% richest in the national income* (%)
Brazil, Northeast and Southeast – 1992, 1996 and 2002



Source: IBGE/PNAD, 1992 – 2002.
* Total household income.

Unemployment among youths is double the national average

The possibility of overcoming poverty and hunger once and for all is linked to the ability to find decent work. The last

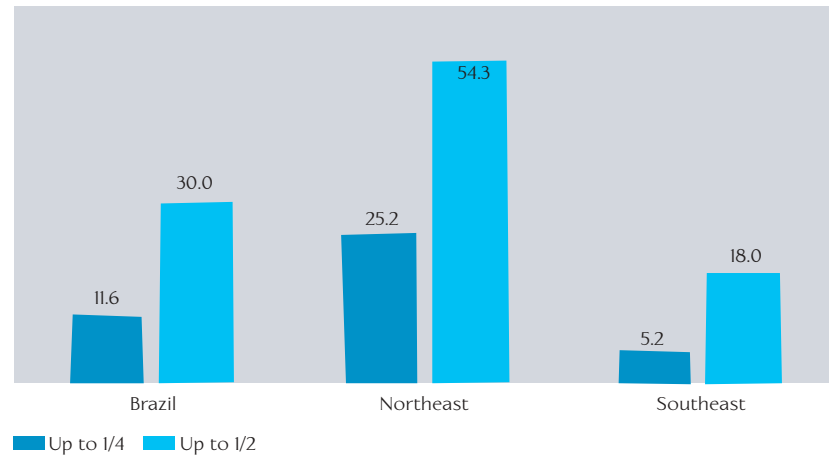
decade in Brazil was not characterized by a sustainable expansion of employment and income, although there have been some gains concerning poverty reduction. The difficulties in finding employment are greater for those first entering the labor market. Such concern is identified in Target 16 of the Millennium Development Goals, which calls on world cooperation, especially developing countries, in the design and implementation of strategies for productive decent work for youths. In the case of Brazil, this target is related, particularly, to the strategy against hunger and poverty, especially in initiatives to reduce child labor, encourage the entry of youths into the labor market after they finish their schooling and fight slave work in a comprehensive manner.

Between 1991 and 2002, the evolution of employment in Brazil was very unstable, with periods of expansion and retraction, in addition to fluctuations in real earnings. Three problems can be pointed out in this process: unemployment increased, showing rigidity for its reduction; informal employment rose above formal employment; and earnings reversed the trend of real increase observed during part of the previous decade. The unemployment rate in the main metropolitan areas, according to the Monthly Employment Research (PME), of IBGE (Brazilian Institute of Geography and Statistics), increased from an average of around 5.5% between 1991-1997 to an average higher than 7% between 1998-2000. After a certain improvement in 2001, the average returned to near 7% in 2002. This increase was related, among other factors, to the uncertainties regarding the evolution of the Brazilian economy, especially with regards to the sustainability of its growth vis-à-vis the variations in the external scenario and in the domestic monetary policy.

The situation tends to worsen in the case of youths. The unemployment rate for the 15-24 age group is around double

Graph 6

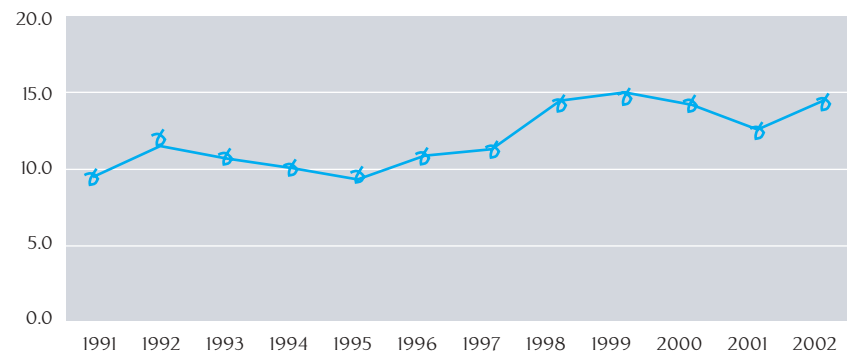
Proportion of people with per capita household income of up to 1/4 and up to 1/2 minimum wage – Brazil, Northeast – 2002 (%)



Source: IBGE/PNAD, 2002.

Graph 7

Brazil – Unemployment rate of 15-24 year-olds – 1991-2002



Source: IBGE/PME. Previous methodology.

the national average: it increased from 10% in 1991 to around 15% in 2002. It should be highlighted that, within the period analyzed, the process of child labor reduction was consolidated, with the implementation of new legislation prohibiting the entry of youngsters into the labor market before the age of 16, except in the case of apprentices, with a minimum age of 14. In addition, the government implemented actions of income transfer and social and edu-

From 1991 to 2002, informal employment grew to a point that it exceeded formal employment, and the income increase trend was reversed

*Hunger in Brazil
is above all a
matter of unequal
access to food,
not lack of food*

cational activities for members of families facing the problem, and one can observe, within the age group of 15-17, higher rates of permanence in school. The movement towards a later entry into the labor market, whether by a longer stay in school, or by legal restrictions, is revealed by the drop in the rate of participation of youngsters between 15-17 years of age. The level of occupation within this age group also dropped: it went from 761 thousand working youngsters in 1990 to 390 thousand in 2002, in the main metropolitan areas.

More than 1 million children are underweight

The second target of the first Millennium Development Goals is to

halve, between 1990 and 2015, the proportion of people who suffer from hunger. The first international indicator used in this target is the prevalence of underweight children under five years of age. It is known that child malnutrition has been reduced in the country. Between 1975 and 1996, it dropped by around 70%. In 1975, the prevalence of child malnutrition was 18.4%; in 1996, this percentage went to 5.7%. This index is close to that of countries with better levels of development than Brazil's. An expressive part of this drop can be explained by the urbanization process and by health, sanitation and food distribution policies implemented in Brazil in the period.

The noticeable improvement in

What are the lines of poverty and extreme poverty?

There are several definitions of poverty and extreme poverty lines. For international comparisons, organizations such as the World Bank adopt as poverty line an income of two American dollars a day per capita, and as extreme poverty line one American dollar a day per capita. Both lines consider an exchange rate with purchasing power parity (PPP), which eliminates the differences among the countries' costs of living. This rate takes into account price differences among countries, allowing international comparisons, unlike nominal exchange rates, which can either overvalue or undervalue purchasing power. One-dollar PPP has the same purchasing power in the country concerned (in Brazil, for example) as one

American dollar in the United States.

Other institutions, such as ECLAC for example, design extreme poverty lines using information about the cost structure of a geographically defined food basket that contemplates a person's minimum caloric needs. On the other hand, the Brazilian government, despite not having official poverty and extreme poverty lines, used as a reference in the design of the 2004-2007 Multi-Year Plan (PPA), the proportion of people on a family per capita income of up to half a minimum wage or up to a quarter of a minimum wage respectively.

What is common in both definitions is the use of family income as the cut off point. However, it

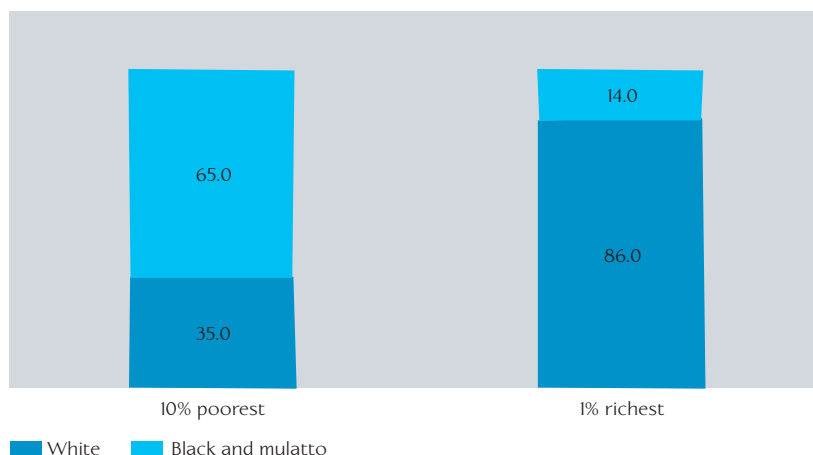
should be pointed out that the monetary income does not totally explain an individual's consumption capacity, since there are sources such as subsistence production/consumption (for example, family farming) and availability of goods and services free of charge. Family budget surveys – detailing family earnings, expenditures and how they distribute these expenditures, especially with food – are important tools for the establishment of the cut off point of poverty and extreme poverty lines. These lines, therefore, are the proxies that allow considering as poor or extremely poor individuals whose income is under a certain monetary value that would potentially allow for the consumption of a set of goods and services.

health and nourishment of Brazilian children does not take place in a homogeneous manner for all. The most recent information on the nutritional conditions of the Brazilian population, of 1996, allows the calculation of three indicators related to the malnutrition of children under 5: height in relation to age, weight in relation to age and weight in relation to height. According to these data, chronic malnutrition (height deficits in relation to age) affected 10.5% of the population under 5 years of age; 5.7% of these children had low weight for their age, and 2.3% presented a low weight/height ratio. It is also observed that, regardless of the indicator, there are considerable differences among the country's regions according to the place, whether urban or rural. The problem of chronic malnutrition is worse in the North and Northeast regions and in rural areas. It is important to emphasize that the prevalence of chronic child malnutrition in Brazil (10%) is four times higher than the expected prevalence in healthy populations (2.5%).

Despite the drastic reduction in child malnutrition in recent years, there are still over 1 million children underweight for their age in the country. This nutritional disorder, being the most severe expression of food deficiency, is the harshest sign that hunger remains in Brazil. And with the aggravating factor that it is not for lack of food, since Brazil produces more than what is needed to meet the food demands of its population.

Data from the Food and Agriculture Organization of the United Nations (FAO) reveal that food availability in Brazil went from 2,216 calories per person per day in 1961 to 3,002 calories in 2001. In both cases, values exceed the recommended minimum of 1,900 kcal/person/day. In the Brazilian case, hunger is essentially an issue of unequal access to food, and not of lack of availability.

Graph 8
Distribution of people among the 10% poorest and 1% richest, by race – Brazil – 2002 (%)



Legend: ■ White ■ Black and mulatto

Source: IBGE/PNAD, 2002.

PROGRAMS AND POLICIES

In the beginning of the nineties, the first national Council for Food Security (Consea) was created and the first National Conference for Food Security (I CNSA) was convened. These experiences inaugurated the partnership between State and society in the implementation and control of public policies against hunger and poverty. They were strengthened by a unique mobilization of society that materialized in the campaign Citizenship Action against Hunger, Poverty and for Life. Such movement, which reached its peak in 1993 and 1994, evoked the feeling of solidarity for the excluded and promoted countless food collection and distribution campaigns throughout the country.

In order to face the lack of food security, Brazilian governments developed, along the nineties, a set of policies that can be grouped around three main axes: agrarian development; proper conditions for participation in the labor market; and increased access to

*Along the 90's,
Brazil developed
a set of policies to
address food
insecurity*

The Federal Government established fighting hunger in the country as a priority

food. Within agrarian development policies, one can highlight support to small scale farming, particularly farming within a family economy regime, by means of the National Program for the Strengthening of Family Farming (Pronaf). In addition, land reform has been accelerated in the last years, generating the inclusion of thousands of new producers in the universe of family farmers. These two initiatives are extremely important from the point of view of food supply, since Brazilian family farming is responsible for more than 30% of the country's food production. It is also important to highlight the implementation, by the Ministry of Health, of the *Leite é Saúde* Program, which was substituted by the *Incentivo para o Combate às Carências Nutricionais* (ICCN) and, afterwards, by the *Bolsa-Alimentação*.

In the second axis, policies for income generation, one should underscore the actions carried out the Ministry of Labor and Employment aiming to increase work and income prospects for the population of working age, such as unemployment benefit, credit within the Urban Program for Employment and Income Generation (Proger), professional qualification through the National Plan for Professional Qualification (Planfor), which has been reformulated by the government and is now developed within the scope of the National Program for Qualification (PNQ).

As for the third axis, increased access to food, one should mention two food distribution programs existing for decades in the country: the National Program for School Meals (PNAE) and the Workers' Food Program (PAT). School meals are also important to encourage children's permanence in school and contribute to the reduction of school dropout rates. Every year, during 200 school days, 37 million students are served in the government school network and in philanthropic entities. It is one of the largest food programs in the

world, using resources from the Ministry of Education amounting to around R\$ 1 billion a year. The Workers' Food Program, implemented by the Ministry of Labor and Employment, aims to improve nutritional conditions of low-income workers in the formal sector of economy. Every year, this program benefits 7 million employees in 100 thousand private companies.

PRIORITIES AS OF 2003

Lula's government established the fight against hunger as a priority in the country. The *Fome Zero* Program aims to expand and enhance the series of actions aimed at guaranteeing the human right to food and also those aimed at combating poverty. The program attempts to intervene in the causes of the problem, implementing several policies: direct income transfers to the poorest families by the *Bolsa-Família* (a family grant program); structural policies for employment and income generation; specific policies to fight hunger and promote access to food; and emergency policies focused on the more vulnerable groups. In addition, with these activities, a broad effort of mobilization and participation of the civil society is promoted.

Within the scope of income transfer policies, the *Bolsa-Família* Program deserves to be highlighted. By the end of 2004 it should reach 6.5 million poor families with an average monthly benefit of around R\$75. This number of beneficiaries should be increased to 11.2 million families by 2006. Implemented by the recently created Ministry of Social Development and Fight Against Hunger, the Program's objective is to fight hunger and poverty by combining access to basic social rights (health, education and social assistance) to the transfer of financial benefits. The benefit is paid out to families with a per capita income lower than

R\$100 and the transfers, drawn by means of a single magnetic card, are prioritized to women and mothers.

Within structural policies for employment and income generation, the highlights are the actions aimed at strengthening family farming. In the area of land reform, the objective is to promote settlements with quality and socioeconomic and environmental sustainability, including technical assistance and rural extension for settled farmers, access to credit and appropriate technologies. In 2004, the target is to settle 115 thousand families. Until 2006, the National Plan for Land Reform (PNRA) envisages the settlement of 530 thousand families. Adding these to the other 500 thousand families that will have the final land titling of their land, the PNRA should benefit, in total, more than 1 million families.

With regards to Pronaf, the expansion of the program takes place in two areas: increase in availability of resources and new mechanisms for commercialization of agricultural products. In the 2003-2004 harvest, R\$5.4 billion in credit were released, the highest amount since its creation. Concerning the 2004-2005 harvest, the federal government is making available R\$7 billion for family farmers. In July 2003, the federal government launched the Food Purchase Program (PAA) that buys food from family farmers, in order to encourage them through adequate remuneration of production, besides contributing to maintaining minimum stocks of the food basket products with direct and anticipated purchase of production. In order to participate in this initiative, family farmers should preferably be organized in cooperatives, associations or informal groups.

In local policies to promote access to food, public systems foster and finance integrated supply and food security programs by means of actions taken in the stages of production, distribution,

preparation and consumption of foods. The various actions planned should constitute an integrated set, with different characteristics according to the size of the municipality: a) local food purchase programs for the supply of municipal food programs (school meals, day care centers, hospitals, popular restaurants, assistance and charity entities); b) implementation of urban vegetable patches and animal rearing associated to food and nutritional educational programs; c) implementation of a network of foodstuffs supply at affordable prices, such as markets selling direct from the producer; d) incentive to the creation of popular public restaurants and community kitchens in large and medium sized cities; e) support to the building and expansion of food banks and urban crop networks, aiming at combating food waste.

Programs that transfer income to families should increase from the current 6.5 million paid benefits to 11.2 million by 2006

GOAL
ACHIEVING UNIVERSAL
PRIMARY EDUCATION



2

■ TARGET 3

TO ENSURE THAT, BY 2015, CHILDREN EVERYWHERE, BOYS AND GIRLS ALIKE, WILL BE ABLE TO COMPLETE A FULL COURSE OF PRIMARY SCHOOLING.

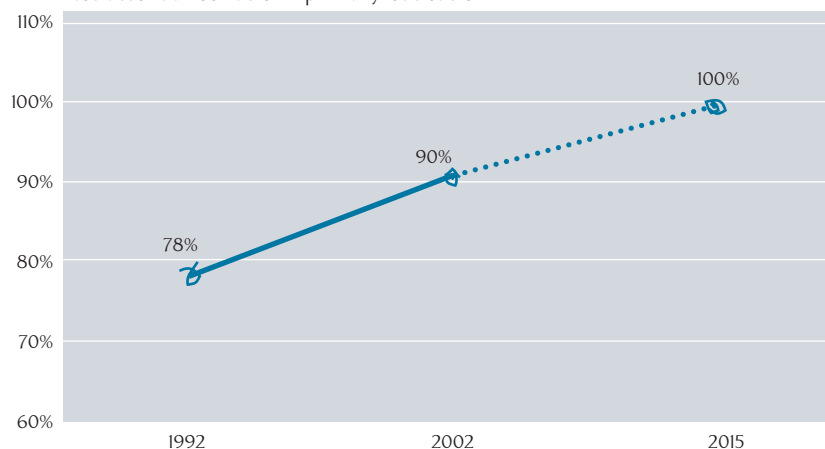
ELEMENTARY EDUCATION MOVING TOWARDS UNIVERSAL ACCESS

The population's access to education has been increasing continuously over the last years in Brazil. In 2002, almost all children aged 7 to 10 were attending the first four grades of elementary education (formerly called primary school). However, the near universal access to elementary education does not guarantee quality, since a significant share of these children actually finishes 4th grade without adequate reading and writing skills. According to data from the National Basic Schooling Evaluation System (Saeb), in 2001, 59% of the pupils in the 4th grade of elementary education had not developed basic reading skills, and 52% were severely deficient in Mathematics. Illiteracy among 15 to 24 year-olds, even though it is dropping, still affects more than 1 million people in this age group. Other indicators also show very high dropout rates and poor performance at school, as well as significant regional, and racial inequalities.

The public provision of education is leading to increased numbers of children attending school. In September 2002, the net attendance ratio in the four first grades – that is, the proportion between the number of children aged 7 to 10 who were attending primary education and the total population in this age group – was of 90%. Even in an analysis per region, there were few variations. The Northeast recorded 86.6% and the Southeast, 92.6%.

Since elementary schooling in Brazil provides for eight years of study (see Box), the net attendance ratio in elementary education for students aged 7 to 14 was also calculated. In 2002, it was of 93.8% and, similarly to the ratio for the first grades, regional variations were small (see Table 1). It can also be observed that the net attendance ratios in elementary education are higher than in primary school. One of the reasons for this is schooling setbacks: pupils over 10 years of age attending

Graph 1
Net attendance ratio in primary education*



* Adaptation of indicator "Net enrollment ratio in primary education"
Source: IBGE, National Household Sample Survey (PNAD), 1992/2002.

Table 1
Net attendance ratio in primary and elementary education
Brazil and Major Regions – 1992/2002 (%)

	Primary Education		Elementary Education	
	1992	2002	1992	2002
Brazil **	78.0	90.0	81.4	93.8
North **	76.8	87.5	82.5	92.1
Northeast	61.7	86.6	69.7	91.6
Southeast	86.9	92.6	88.0	95.2
South	88.3	91.9	86.9	95.8
Center-West	84.0	89.2	85.9	93.8

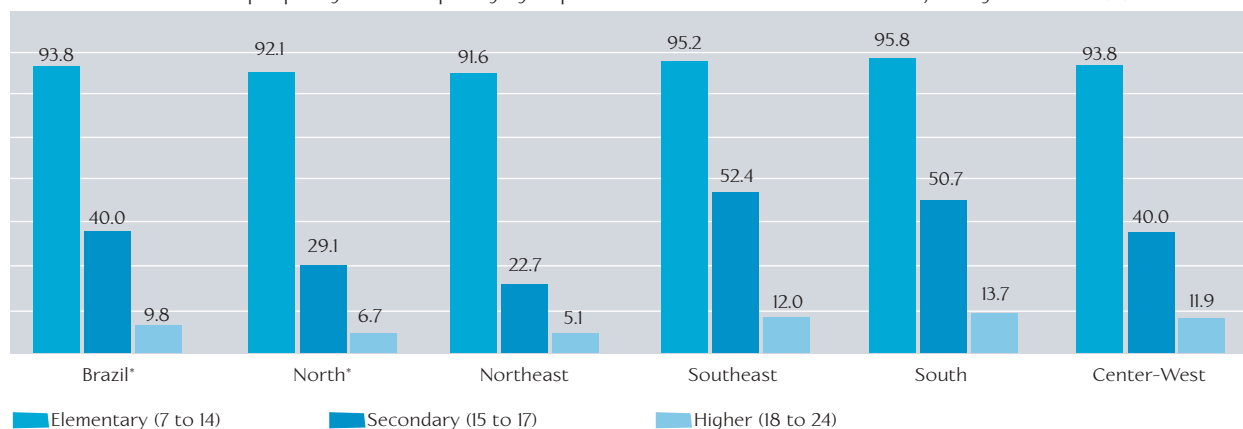
Note: Primary and elementary education comprise people aged 7 to 10 and 7 to 14, respectively.

*Adaptation of indicator "Net enrolment ratio in primary education".

** Excluding rural population in the states of RO, AC, AM, RR, PA and AP.

Source: IBGE, National Household Sample Survey (PNAD) 1992/2002.

Graph 2
Net attendance ratio for people aged 7 to 24 per age group and educational level – Brazil and Major Regions – 2002 (%)



* Excluding rural population in the states of RO, AC, AM, RR, PA and AP.
Source: IBGE, National Household Sample Survey (PNAD), 2002.

primary school, for instance, are only considered in the calculation of the net attendance ratio in elementary education, raising its percentage.

A consideration must be made on the values of the ratios observed in *Table 1*. They were calculated on the basis of data collected in the second term of the school year, when a significant degree of students have already dropped out of school. According to data from the School Census, there was a dropout rate in elementary education of 8.7% in Brazil in 2002. Therefore, in the beginning of the school year, the net enrollment ratio is expected to be much higher.

Setbacks are worse in secondary education

The provision of vacancies in elementary education, however, is only the first step in promoting education. In a country with huge social and regional inequalities, there is still much to do in order to ensure good school performance and attendance.

The 2002 figures reveal a strong delay in the school flow of students. Delay is verified through the difference between net attendance ratio, which con-

siders only pupils in the age group appropriate for a certain education level, and gross attendance, which takes into account all the pupils that attend a certain level of education, regardless of their age. Although it is only 3.2 percentile points in elementary education, this difference increases in the analysis per grade and in the other levels of education. Among 15 to 17 year-olds, for example, about 81% stated that they were attending school, but only 40% were in secondary education, which is the appropriate level for this age.

Regional imbalances also stand out in the analysis of higher schooling levels. In the South and Southeast regions, on average, 51,5% of the young people aged 15 to 17 attend secondary education, against a ratio of only 22.7% in the Northeast. In higher education, the contrast is even bigger: the variation ranges from 5.1% of 18 to 24 year-olds in the Northeast to 13,7% in the South (*see Graph 2*).

Secondary education is not inclusive

Disaggregation of this indicator per race and gender provides a perspective on the social inequalities present in the

The minimum compulsory schooling in Brazil

The Law of Guidelines and Bases (LDB) for education in Brazil (Law n. 9.394, of 20 Dec. 1996) establishes that school education is composed of two major segments: basic schooling, comprising preprimary education, elementary education and secondary education; and higher education. In particular, elementary education, with a minimum duration of eight years, compulsory and free in public schools, is aimed at the basic development of the citizen.

Achieving universal primary education is the second goal to be monitored by the United Nations in the fulfillment of the Millennium Development Goals. In calculating the indicator for this goal, the first four years of elementary education were considered, which in the former educational structure corresponded to primary education. However, since in Brazil the minimum obligatory schooling is of eight years, the indicator for elementary education was also calculated.

Public provision of education results in more children enrolled in school

country in terms of access to education. Attendance in elementary education does not present differences among children as a result of race or gender, to a large extent due to the minimum compulsory schooling established by the 1988 Constitution and regulated by the 1996 Law of Guidelines and Bases.

In the other levels of education, overall, the net attendance ratio for females was higher than for males (44.5% against 35.6% in secondary education and 11.3% against 8.3% in higher education). Gender imbalance, in this case, weights against males, since they, more than females, end up dropping out of school to try to enter the labor market.

However, in the analysis of school attendance according to race, the contrast increases considerably. Young whites aged 15 to 17 in secondary education have almost double the attendance of young blacks and mulattos. In higher education, this difference increases fourfold. And this same picture is found in all the regions in the country (see Graph 3).

In the Northeast, 30% do not reach 5th grade

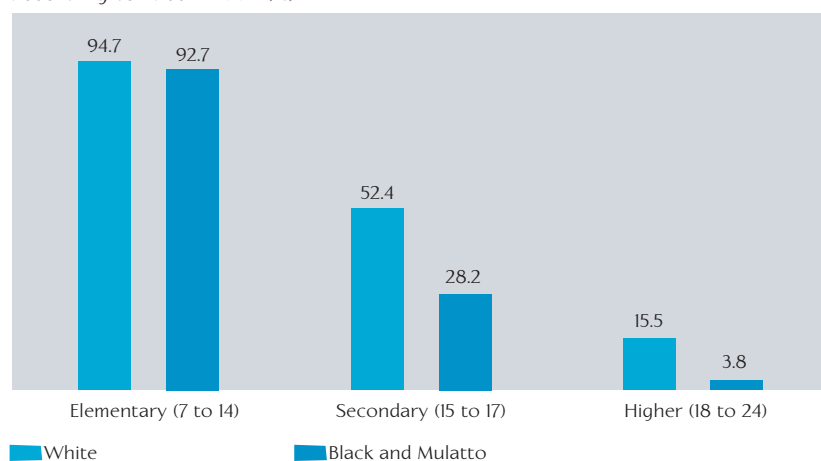
In order to estimate the ratio of pupils who start 1st grade and reach 5th grade, it was necessary to make some methodological adjustments to the model of school flow initially proposed by UNESCO in 1986. In the Brazilian average, the ratio of students who reached 5th grade was of 82.7% in 2002 (see Table 2). That is, almost one fifth of the pupils dropped out of school at some point in primary education. The regional differences are very expressive and exceed 20 percentile points between the two extreme cases. While in the South and Southeast regions the ratios were of 91.7% and 91.4% respectively, in the Northeast region only 70.2% of the pupils reached 5th grade.

Table 2
Proportion of pupils starting grade 1 who reach grade 5 – 2002 (%)

Brazil	82.7
North	74.9
Northeast	70.2
Southeast	91.4
South	91.7
Center-West	81.1

Source: Ministry of Education (MEC)/INEP

Graph 3
Net attendance rate of people aged 7 to 24 per age group and educational level, according to race – 2002 (%)



Source: IBGE, National Household Sample Survey (PNAD) 2002.

The adopted school flow simulation model also allows calculating the expected average rate of conclusion and the expected average time to finish the 4th grade of elementary education. It is estimated that 88.6% of the pupils finish 4th grade in an average of five years (see Table 3).

Almost all young people are literate

Literacy among young people in Brazil is moving towards universality. In 2002, the ratio of the population aged 15 to 24 able to read and write a simple note reached 96.3% in the country. In the comparison per regions, although it recorded the lowest rate, the Northeast presented the highest growth

between 1992 and 2002 – from 80% to 91.6% (see Graph 4). These figures reveal the huge weight of illiteracy among the population aged 25 or older in the average rate of the country. In 2002, the illiteracy rate was of 12% for the population aged 15 or more.

PROGRAMS AND POLICIES

The new Law of Education Guidelines and Bases (LDB) clearly defined the roles of the Union, states, Federal District and municipalities, based on a regime of collaboration among the spheres of the Federation. The Union is responsible for the coordination of the national education policy, the linkages among the different levels and systems, in addition to carrying out the normative, re-distributive and supplementary functions. The priority of the states is to provide secondary education and also to define the forms of collaboration with the municipalities in the delivery of elementary education. The municipalities, in turn, are mainly responsible for providing elementary education, including to people who did not have access to it at the right age, in addition to providing preprimary education (children aged 0 to 6).

As for elementary education, the LDB introduced a series of innovations, particularly the need for the Union to establish a basic standard of educational opportunities and corresponding minimum cost per pupil; the redistributive and supplementary attributions of the Union and the states; and a minimum of 200 school days (800 class hours) a year, with gradual increase in class hours to full time.

In addition, new performance parameters were established for the Ministry of Education (MEC) which, along the nineties, accelerated the process of revision of the centralized pattern that historically shaped actions at the federal level. Among the new mechanisms,

Table 3

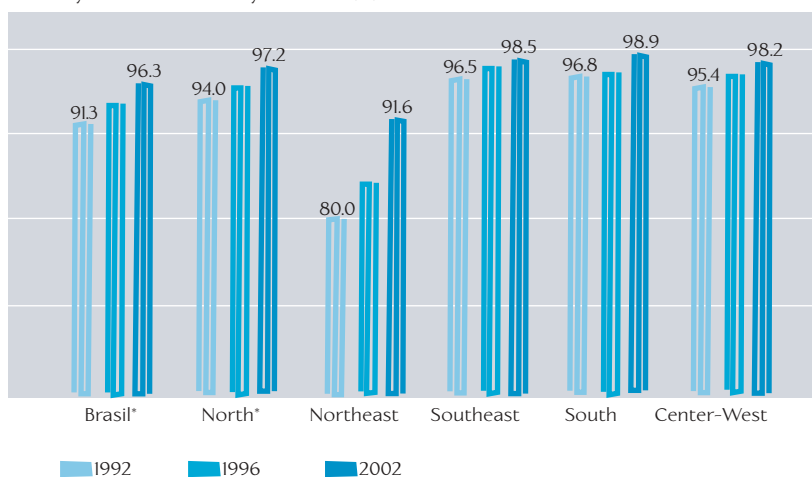
Expected average rate of conclusion and expected average time for conclusion of the 4th grade of elementary education – 2002

	Expected average rate of conclusion (%)	Expected average time for conclusion (years)
Brasil	88.6	5.0
North	84.6	5.8
Northeast	78.7	5.7
Southeast	94.3	4.4
South	94.1	4.6
Center-West	86.9	4.9

Source: Ministry of Education (MEC)/INEP

Graph 4

Literacy rate of 15 to 24 year-olds (%)



Excluding rural population of the states of RO, AC, AM, PA, AP.
Source: IBGE, National Household Sample Survey (PNAD), 1992/2002.

there is the Fund for Maintenance and Development of Elementary Education and Appreciation of Teaching (Fundef), through which the Union has undertaken the responsibility to implement a financing policy, of a redistributive nature, for elementary education.

It belongs to the states, Federal District and municipalities to provide the necessary resources for the creation of this fund. However, due to the existing social-economic inequalities among them – resulting in low annual expenditure per pupil, particularly in the

North and Northeast – the Union complements the resources whenever, in any Federative Unit, the per capita amount fails to reach the nationally defined minimum.

Fundef reinforced the need for states, Federal District and municipalities to comply with the provisions of the 1988 Constitution regarding the allocation of 25% of their tax revenues, and of revenues transferred to them, for the maintenance and development of education. It also compelled them, as from 1998, to allocate 60% of these resources to elementary education, with the establishment of a sub-allocation of 15% of the revenues to this level of education. Furthermore, its institution reiterated the constitutional provision of compulsory elementary education and its priority provision by the public power, to the extent that it enables an improved budgetary and financial management process in the sector; increased allocation of resources; implementation of a re-distributive policy that addresses regional and social inequalities; greater visibility to resource management; and training and appreciation of teachers.

The Union has also undertaken a re-distributive role, by delivering supplementary financial and technical assistance to the states and municipalities with less spending capacity, based on the redesign of forms of management and criteria for distribution of the resources, which took place through the following actions:

- Decentralization of programs managed by MEC – particularly the National School Meals Program (PNAE);
- Direct transference of resources to school units, funds and municipal and state agencies;
- Redesign of resource allocation criteria, resulting in the creation of the *Dinheiro Direto na Escola* Program,

which transfers resources directly to the schools;

- Alteration in the selection, production and distribution processes of School Textbooks Books for elementary education schools and pupils;
- Introduction of the criterion of focus on the Northeast Region and the municipalities selected by the *Comunidade Solidária* Program, as a parameter for the transfer of federal resources to national programs such as School Transport, School Children's Health and School Materials;
- Creation of the Program of Guaranteed of Minimum Income linked to Education – the *Bolsa-Escola* – to provide socio-economic assistance and minimum conditions of citizenship to people living in extreme poverty. The aim of *Bolsa-Escola* is to complement the income of poor families with children aged 6 to 15 who are attending school. With the unification of the income transfer programs, the program was included in the *Bolsa-Família* in January 2004;
- Creation of programs that introduce technological innovations, with a view to improving the quality of teaching and learning processes – *Escola na TV* Program (televised classes), Technological Support to School Program and National Program of Computer Science in Education.

Another important area of federal action has been the pedagogical issue. In this field, the assessment of the quality of education was continued, by means of the Basic Schooling Evaluation System (Saeb) and preparation of the National Curricular Guidelines by the National Education Council and of National Curricular Param-

The Bolsa-Escola Program complements the income of poor families with children aged 6 to 15 years attending school

eters (PCN) for the eight grades of elementary education.

In order to address the problem of poor academic performance and repetition, MEC encouraged initiatives in learning acceleration, aimed at pupils in elementary education with age-grade delay of at least two years. Among actions to correct school flow, the following are worth highlighting: restructuring of the organization of education in special classes, training of teachers and production and distribution of teaching materials.

As to the expansion of literacy among youths and adults in the nineties, particularly in the 15 to 24 age group, it can be largely attributed to the governmental effort undertaken towards providing universal access to elementary education for children and youths. However, several other specific initiatives must be pointed out for their direct impact in reducing illiteracy in the country.

The Ministry of Education has traditionally held an important role in the national coordination and induction of literacy and basic schooling policies for youths and adults. In the early nineties, however, with the extinction of the *Educar* Foundation, the responsibility over federal policies for education of youths and adults was delegated to MEC's Coordination of the Elementary Education Secretariat, whose status did not correspond to the one in the former structure.

In fact, in the second half of the nineties, the coordination of initiatives in this area was transferred to other spheres of government: the *Comunidade Solidária* Council, in the case of the Alfabetização Solidária Program, and the Ministry of Agrarian Development, with the action Literacy of Youths and Adults in Land Reform Areas. This federal action was characterized by interventions aimed primarily at less developed regions, which historically

presented the highest rates of illiteracy in the country. In parallel, MEC continued to exercise its function of regulation and national control of decentralized actions by establishing guidelines and curricular references, introducing national certification exams, in addition to the implementation of teacher education programs, requiring states and municipalities to join such programs in order to receive the voluntary transfers of federal resources.

It is worth noting that, as from 1996, a growing number of state and regional forums for Education of Youths and Adults (EJA) have been created, initially inspired by the process of mobilization around the 5th International Conference on Adult Education, held in Germany in July 1997. Currently there are EJA forums in 23 states, bringing together the main actors in this field: state and municipal governments, universities, the "S" System (Industry Social Service – Sesi, Commerce Social Service – Sesc, National Service of Industrial Training – Senai, National Service of Commerce Training – Senac, among others), and popular and trade union movements. Since 1999, the forums, together with other national and international organizations, have been promoting national meetings every year to discuss youth and adult education.

In face of this mobilization, MEC's action went through changes, with the creation of the Program to Support States and Municipalities in providing Elementary Education to Youths and Adults – *Recomeço*. By significantly increasing the transfer of federal resources, the program has strengthened the supplementary role of the federal government in expanding the provision of vacancies in the state and municipal education network, contributing to the fight against illiteracy and low schooling in the country's pockets of poverty, where most of the youth and adult population that did not conclude elementary education are

Age/grade delay is addressed with accelerated learning initiatives

located. Fourteen states in the North and Northeast regions (covering 2,015 municipalities) benefited from the Program, as well as 389 municipalities of microregions in nine other states, with low Human Development Index (HDI lower than 0.5).

PRIORITIES AS FROM 2003

In the current government, in addition to the maintenance and improvement of policies and actions aimed at the development of elementary education implemented along the nineties, the educational programs have been in tune with the objectives of ensuring universal access to school and keeping the pupil in school. However, there has also been a greater focus on improving the quality of education.

The currently proposed Program of Appreciation and Education of Teachers and Workers in Basic Schooling aims at addressing problems related to deficiencies in the education of teachers and lack of incentives for them to renovate their teaching practice. Under this program, the National Network of Centers for Research and Development in Education is being established, composed of twenty university centers organized by field of knowledge, for the continued education of teachers, development of research, technology, management and evaluation, and rendering of services to the public education networks. These centers will encourage partnerships with other higher education institutions, with a view to ensuring linkages with the state and municipal schooling systems.

Another initiative that deserves to be highlighted is the proposal to expand elementary education, from eight to nine years, with the inclusion of 6 year-old children, in order to provide greater learning opportunities in the compulsory schooling period. This

will not involve teaching 1st grade content to 6 year-olds, but rather designing a new structure of organization of the contents for an elementary education period of nine years, considering the profile of the pupils.

The evaluation area has been reinforced since the establishment of the National Basic Schooling Evaluation System (Saeb). Applied for the first time in 1990, the Saeb was conceived as a means to gather information on pupils, teachers, directors and teaching conditions in public and private schools throughout Brazil. At the moment its expansion is being discussed, in order to reach all pupils in the 4th and 8th grades in the public network, in schools with more than ten pupils in the evaluated grade, in a larger number of municipalities. All the state capitals would take part in the evaluation. The proposal is to create an exam to evaluate the performance of the pupils that is representative of the main municipalities in the country.

There have also been changes in the way support is provided to students in public elementary education. As from the end of April 2004, the National Education Development Fund (FNDE) has altered the way in which resources are transferred for the financing of school transport of pupils living in rural areas. Previously, municipalities and states had to apply, through a project, for funds to purchase vehicles, and for maintenance and support actions. The amount transferred was fixed and did not take into account issues such as the size of the area to be served and number of pupils. With the new rules, the transfer will be made on the basis of a per capita amount per pupil, with the resources allocated specifically to covering maintenance and support expenses.

The government's focus in the education area has also been shaped by the effort to address the lack of an education policy focusing on diversity and

*Educational
programs prioritize
access to school and
improvement of
schooling quality*

citizenship, particularly directed towards specific social segments, such as afro-descendants and indigenous populations. As a means to solve the more urgent issues of inequality, exclusion and prejudice, the scope for participation of civil society is being strengthened.

In the current strategic reorientation of the education policy, one of the central pillars is the sustainability of the financing sources, with the proposal for institution of the Fund for Maintenance and Development of Basic Schooling and Appreciation of Education Professionals (Fundeb). This will be a single fund in each Federative Unit, of an accounting nature, intended to replace the current Fund for Maintenance and Development of Elementary Education and Appreciation of Teaching (Fundef). Its attribution is the maintenance and development of elementary education (preprimary, elementary and secondary education), by means of allocation of resources according to a proportional distribution. This distribution will respect the differences and balances between the stages and modes of basic schooling, in compliance with the priorities established in the Federal Constitution. The Union will complement the resources of the funds whenever the amount per pupil does not reach the minimum amount defined nationally.

As regards government policies and programs aimed at youth and adult literacy, in 2004 the government made an important alteration concerning the beneficiaries of the Program to Support States and Municipalities in Providing Elementary Education to Youths and Adults. In addition to the pupils in municipalities already contemplated, those registered in states and municipalities already linked to the *Brasil Alfabetizado* Program (Literate Brazil Program) and that have enrolled in youth and adult courses will be covered. Launched by MEC in the

beginning of 2003, the *Brasil Alfabetizado* Program can be considered a milestone in the resumption of youth and adult literacy policies. Another initiative that deserves to be highlighted is the creation of the Extraordinary Secretariat for Eradication of Illiteracy, responsible, in 2003, for the decentralized implementation of the program, by means of transfers of financial resources to state and municipal public agencies, higher education institutions and non-profit organizations developing literacy actions. With the internal restructuring of the Ministry of Education, carried out in 2004, the Secretariat for Continued Education, Literacy and Diversity was created, and is responsible for the implementation of the literacy program.

At first, the *Brasil Alfabetizado* Program took in initiatives already in progress and a variety of alphabetizing literacy methodologies. In 2004, some changes were made in order to improve it, particularly as regards the establishment of criteria for the beneficiaries of the transfers and definition of some basic parameters for the implementation of the literacy process. In order to speed up the process of transfer of federal resources, the system of agreements was replaced by a system of automatic transfer.

It is important to point out that the concern over ensuring continuity in the schooling of recently alphabetized people has led to the establishment of links between literacy actions and elementary education actions for youths and adults. In the recent review of the Multi-Year Plan, which becomes effective in 2005, a new program was created to integrate these actions: *Brasil Alfabetizado* and *Educação de Jovens e Adultos* (Literate Brazil and Youth and Adult Education). This is based on recommendations from studies showing that pupils who attended mass literacy courses, but are not immediately directed to elementary education, can quickly slip back into illiteracy.

In order to implement the literacy programs, the Secretariat for Continued Education, Alphabetization and Diversity was created

GOAL
PROMOTING
GENDER EQUALITY AND
EMPOWERING WOMEN



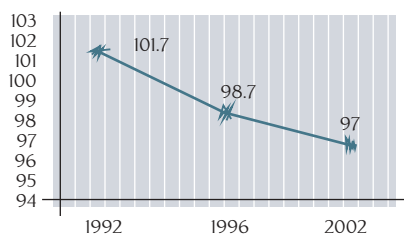
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■ TARGET 4

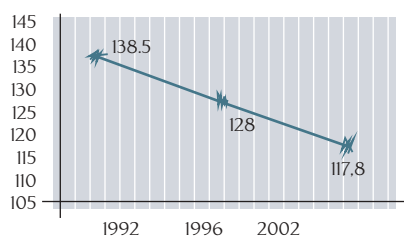
TO ELIMINATE GENDER DISPARITY
IN PRIMARY AND SECONDARY
EDUCATION, PREFERABLY BY 2005,
AND IN ALL LEVELS OF EDUCATION
NO LATER THAN 2015.

WOMEN STUDY MORE, BUT EARN LESS AND HAVE LIMITED POLITICAL PARTICIPATION

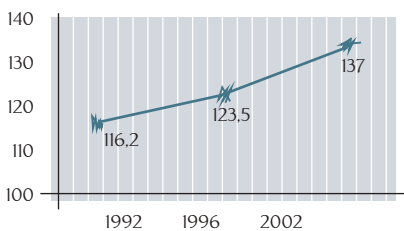
Graph 1
Ratio of females to males in
elementary education
Brazil - 1992, 1996 and 2002 (%)



Graph 2
Ratio of females to males in
secondary education
Brazil - 1992, 1996 and 2002 (%)



Graph 3
Ratio of females to males in
higher education
Brazil - 1992, 1996 and 2002 (%)



Source: IBGE, National Household Sample Survey (PNAD) 1992, 1996 and 2002.

The third Millennium Development Goal is to promote gender equality and to empower women. Its main target is to eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015. In Brazil, formal education no longer represents a major obstacle in achieving gender equality for women. They have a higher schooling level than men. The discrimination is unveiled when one analyzes the indicators of their participation in the labor market and in the political sphere, aggravated by the domestic violence that they suffer.

This picture is above all a reflection of the cultural patterns of Brazilian society, which confer to men the role of providers and to women the care of the home and family. Gender inequalities arise, therefore, from the socio-cultural and historical constructions that turn sexual differences into discriminations. Such inequalities are expressed in the most varied fields of social relations, beginning in the domestic environment, reaching the world of work, the educational sector, among others. On the other hand, differences in participation between the sexes are also visible in access to goods and services produced collectively by society, as

well as in the structure of power, in its various spheres.

Besides hindering the empowerment of women, this culture creates other types of imbalances and even paradoxes – such as the disadvantage of men in terms of education. Pressured to seek work at an early age, youngsters end up dropping out of school. Since the activities of adolescent girls are traditionally domestic, with more flexible schedules, they generally manage to finish school.

The ratio of females to males shows that is only in basic education that the proportion of boys and girls is balanced (see Table 2). In secondary education, the reduction of this ratio is maintained, although the proportion of girls is already visibly higher. This fact is probably not due to a reduction of girls in school, but rather, to some extent, related to the universalization of the elementary education, which incorporated proportionally more boys, resulting in a more significant participation of boys along the decade. However, in higher education, there is an increasing female presence in relation to males. This is mainly due to the fact that young men leave school in search of work, while women stay in school and finish the educational cycle.

School dropout rates are higher among blacks and mulattos

This dropout is even more severe when race is considered. According to data from the 2002 National Household Sample Survey of the Brazilian Institute of Geography and Statistics (IBGE), among blacks and mulattos, 51.9% of the males and 49.6% of the females, between 18 and 25 years of age, entered the labor market at the age of 14 or less (which does not necessarily mean that they stopped studying, but it does imply in increased dropout). This percentage decreases to 47.7% among white males and 34.3% among white females. These figures

clearly indicate that being male and, particularly, being black or mulatto, are factors that represent an obstacle to staying in school.

The analysis of the females to males ratio, taking race into account, as seen in *Table 1*, reveals that in elementary education the presence of boys and girls in school varies very little, regardless of race, remaining close to the Brazilian average (97%). In secondary and higher education, although women are present in higher numbers regardless of race, among the black and mulatto population the ratio increases: it leaps to 125.9%, reaching 143.3% in higher education. Once again, this is probably related to the even more increased dropout of black and mulatto men to enter the labor market, and to the phenomenon of discrimination, which affects blacks and mulattos of both genders and ends up moving them away from school.

As to the proportion of literate men and women in the 15 to 24 age group (see *Table 3*), there are no disparities, and along the decade the small difference recorded decreased steadily – from 104.8% in 1992, to 102.5% in 2002. In this case, although young

Table 1
Ratio of females to males per education level and race in 2002

RACE	Female students/male students (%)		
	Elementary (aged 7 to 14)	Secondary (aged 15 to 17)	Higher (aged 18 to 24)
Brazil(1)	97.0	117.8	137.0
White	100.5	121.3	134.9
Black and Mulatto	97.6	125.9	143.3

(1) Excluding rural population in the states of RO, AC, AM, RR, PA and AP.

Note: Indicator adapted according to age groups appropriate for each level of schooling and race.

Source: IBGE, National Household Sample Survey (PNAD) 1992, 1996 and 2002.

women are still more literate than men, it is possible to say that there is gender equality in terms of the country's general average.

However, illiteracy rates for 15 year-olds or older, taking race into account, present discrepancies. The convergence observed between men and women – beginning respectively at 15.3% and 15.9% in 1992, and reaching 12% and 11.7% in 2002 – is not repeated when the black and mulatto population is separated from the white population. In this case, illiteracy rates

Table 2
Ratio of females to males by education level

Brazil and Major Regions	Female students/male students by education level(%)								
	Elementary			Secondary			Higher		
	1992	1996	2002	1992	1996	2002	1992	1996	2002
Brazil(1)	101.7	98.7	97.0	138.5	128.0	117.8	116.2	123.5	137.0
North	108.2	100.0	101.4	147.9	140.1	140.2	137.4	159.0	159.4
Northeast	110.2	103.5	97.6	165.9	161.1	136.0	129.8	122.1	157.9
Southeast	96.9	95.7	97.5	134.0	113.1	107.1	107.3	112.5	125.6
South	97.3	95.5	92.1	121.7	124.5	110.0	121.2	135.4	143.7
Center-West	99.8	99.8	96.0	127.7	149.9	130.1	137.1	163.6	138.3

(1) Excluding rural population in the states of RO, AC, AM, RR, PA and AP.

Source: IBGE, National Household Sample Survey (PNAD) 1992, 1996 and 2002.

Female and male occupational niches are valued differently

were, respectively, of 24.8% and 10.1% in 1992. Although there was a significant reduction in 2002 – to 17.2% and 7.5% – the gap between the two groups is still virtually the same.

The old culture of the strongest persists

It should be pointed out that, despite women's educational advances, there are certain spaces in higher education that they traditionally occupy. There is a predominance of women in courses in the social and human sciences, whereas men dominate in the exact sciences courses. That is, areas related to care and aspects of the private world end up being occupied by women, while activities associated with the public world, by men. This extends to the labor market, contributing to the creation of female and male occupational niches, which are valued differently, both in

terms of remuneration and in terms of the recognition and status that society attributes to the professionals.

In the Brazilian case, it is observed that the target and indicators proposed for the monitoring and assessment of its fulfillment are insufficient to address the issue of gender equality. Improved access to education is not enough to promote gender equality and empower women. On the contrary. By portraying the better position of women in access to school, the figures mask the real situation of gender relations in the social, professional and political spheres. Complex and difficult to measure, inequality is determined by factors that are both objective and material, as well as subjective in nature, shaped by cultural conditioning that reinforces the system of women's dependence and interferes with their self-esteem and self-image. Added to

Gender violence in Brazil

Gender violence, in its aspects of physical, sexual and psychological violence, is a problem linked to power relations, in which, on the one hand, the domination of men over women rules and, on the other, a system of principles and values legitimizes it. The phenomenon occurs throughout the world and reaches women regardless of age, educational level, social class, race/ethnicity and sexual orientation.

In Brazil, in a survey conducted by the Perseu Abramo Foundation in 2001, with 2,502 women over 15 years of age, living in 187 municipalities, one out of every five declared they had suffered some type of violence perpetrated by a man. When stimulated by reference to different forms of aggression, 43% of the

interviewees confirmed they had been victims of gender violence. One third admitted they had already suffered some form of physical violence – threat with firearms, aggressions and marital rape. Other surveys, such as those of the World Health Organization and International Amnesty, point to similar data.

However, there is still a great lack of data on the phenomenon of violence in Brazil. Periodic surveys are not carried out, nor is there a systematization of the data referring to cases reported at police stations, that is, there are no official and continuous statistics. Moreover, estimates indicate that women are still reluctant to denounce domestic violence, due to affective bonds

and, in many cases, for lack of alternatives to support themselves and their children, due to economic dependence in relation to their partners.

According to the 2002 World Report on Violence and Health, of the World Health Organization, violence against women "in addition to its human costs, places an enormous economic burden on societies in terms of lost productivity and increased use of social services". Although it does not seem to interfere with the ability to get a job, the violence that women are subject to tends to affect their wages and permanence at their jobs, as a result of the physical and psychological problems that undermine their professional performance.

this, is the severe picture of domestic and intra-family violence against women in Brazil, aggravated by poverty and exclusion (see Box “Gender violence in Brazil”). In other words, gender equality in Brazil entails two key objectives: economic equality and political equality.

Female labor is underused

The increased participation of women in the labor market is a trend that began to be observed in the seventies. In that decade, the gradual industrialization and urbanization that the country went through enabled quite a high degree of economic growth, favoring the inclusion of new workers, including of female workers. In parallel, values related to social roles began to change, largely due to the feminist movement and greater participation of women in the public sphere. These changes, added to the reduction of fecundity and the gradual increase in schooling level, contributed to increasing the supply of female labor in the following decades.

The rate of participation in the labor market, however, is still very

Table 3

Ratio of 15-24 year-olds literate females to 15-24 year-olds literate males - Brazil and Major Regions

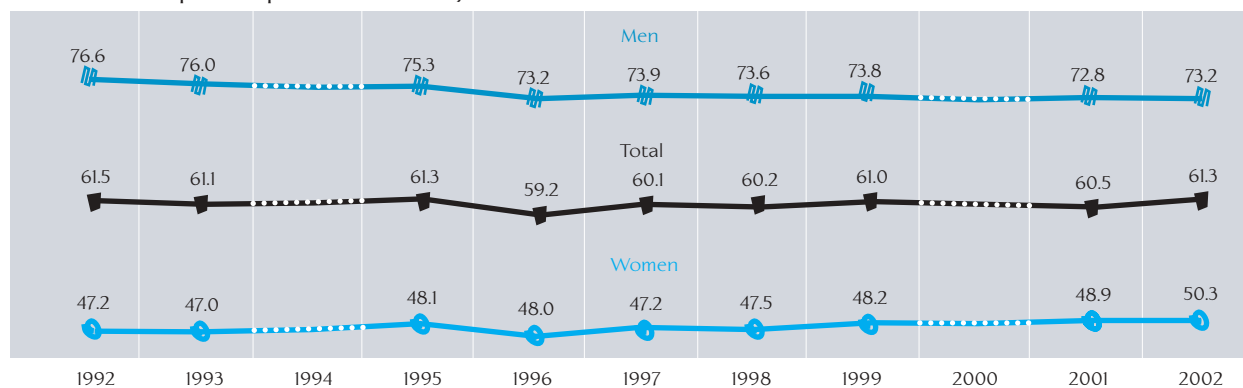
Brazil and Major Regions	Ratio of 15 to 24 year-olds literate females /15 to 24 year-olds literate males (%)		
	1992	1996	2002
Brazil(1)	104.8	103.9	102.5
North	102.3	102.7	101.3
Northeast	116.1	112.2	106.3
Southeast	101.1	100.9	101.0
South	100.2	100.2	100.4
Center-West	102.1	101.3	101.1

(1) Excluding rural population in the states of RO, AC, AM, RR, PA and AP.
Source: IBGE, National Household Sample Survey 1992, 1996 and 2002 (PNAD).

unequal. The growth that took place between 1992 and 2002 is predominantly urban and concentrated in the South and Southeast regions, where services activities are more intense. Moreover, when compared to men, this rate is very low (see Graph 4). In 2002, it was of 50.3% against 73.2%. Among the factors that contribute to this scenario, some can be pointed out: the persistent sexual division of jobs; the lack of public facilities, such as day-care centers and pre-schools,

Graph 4

Labor force participation rate* by sex (%)



Note: Survey was not conducted in 1994 and 2000.

* Proportion of people in the labor market, employed or seeking employment, in relation to the total population of 10 year-olds and over.

Source: IBGE National Household Sample Survey (PNAD) 2002.

Participation in the labor market is still very unequal between men and women. In 2002, the ratio was 73.2% against 50.3%

which can free lower-income women for remunerated work; and the non-consideration, among the employed population, of women who contribute in a significant way to the Brazilian economy, by working in family farming or other traditional services, such as home-makers.

As regards the proportion of women occupied in the non-agricultural sector, 95.9% of them are remunerated for the activities they carry out, against 98% of the men. In this case, there are no significant discrepancies. In the case of women, the percentage of non-remunerated work in this sector is concentrated, predominantly, in the services segment, and it may be the result of employment in family businesses, in which they work but do not receive earnings because they are seen as helpers.

However, the issue of women's remuneration is a problem that can be observed more intensely among rural workers. On average, 38.2% of the women who work in the agricultural sector are not remunerated. This phenomenon can be explained, among other factors, by the different social roles men and women play, which, in the rural setting, tend to be even more rigid. The definition of the limits of so-called reproductive work (that does not generate income) and productive work is still a major issue to be decided. The activity that women carry out in the field is not seen as productive work, often not even by the women themselves. Their work in the field is perceived as an extension of their domestic chores and, therefore, is not remunerated.

Wages confirm discrimination

Gender inequalities are reflected mainly in remunerations, even when the hourly income of men and women (or blacks, mulattos and whites) with the same schooling level are compared.

And the higher the schooling level, the greater the difference. As evidenced in *Table 4*, women with up to four years of schooling received, in 2002, 81% of men's wages per working hour – R\$ 1.70 against R\$ 2.10. On the other end, women with twelve years of schooling received R\$ 9.10, while men received R\$ 14.50, that is, 63% of the hourly wage of men. These differences are the result of gender discrimination, which contributes to undervaluing the occupations traditionally exercised by women. After all, they are strongly concentrated in the services sector, particularly in personal, health, education and domestic services, considered "less important" and, therefore, less remunerated.

In the case of the black population this situation is even more serious. The data in *Table 4* show that an advantage of little over two years of schooling among the white population resulted in almost double the wages in relation to that of the black and mulatto population. Considering wages per race and years of schooling, the persistence of inequality among the four classes studied can also be observed. Thus, even among those with 12 or more years of schooling, the white population had an hourly wage almost 40% higher than that of the black and mulatto population with the same schooling level. In addition to the discrimination that is expressed by the occupation of posts requiring similar schooling levels with lower remuneration, the explanation of this phenomenon is also related to the issue of occupational segmentation. Thus, being a woman and part of the black and mulatto population makes it harder to earn higher wages.

There are other factors that reveal the precariousness of work that affects women more intensely. Data of the National Household Sample Survey (PNAD) show that, in 2002, 65% of the formally registered employees and 73% of the employers were men.

Table 4
Hourly wage of employed population, per sex, race and years of schooling
Brazil - 2002

Brasil*	Hourly wage of employed population, per sex (R\$)				
	Total	Class of schooling years			
		up to 4 years	5 to 8 years	9 to 12 years	more than 12 years
Total (I)	3,90	2,00	2,60	4,00	11,70
Men	4,20	2,10	2,90	4,70	14,50
Women	3,60	1,70	2,10	3,20	9,10
Hourly wage of employed population, per race (R\$)					
Total	3,90	2,00	2,60	4,00	11,70
White (I)	5,00	2,50	3,00	4,50	12,30
Black and Mulatto	2,60	1,60	2,20	3,30	8,80

Note: Hourly wage of primary job of employed people ten year-olds and over, excluding studying years and working hours declaration.

(I) Excluding rural population of RO, AC, AM, RR, PA and AP.

Source: IBGE, National Household Sample Survey (PNAD), 2002.

On the other hand, about 90% of the domestic workers, 74% of the workers in production for self-consumption and 55% of the non-remunerated workers were women. The most significant differences in the distribution of men and women in the various types of occupation refer to the relative presence in domestic work (in which only 6.6% are men, against 93.4% of women) and to being an employer (73.3% are men and only 26.7% are women). It is clear that the first case corresponds to an occupation that requires less qualification, remunerates poorly, has low social status and provides little social protection. On the other hand, the occupation of employer requires, in general, some physical capital, remunerates better and enjoys greater prestige in society.

One concludes, therefore, that the participation of women and black and mulatto individuals in the labor market, as well as the nature of this participation, is conditioned to other factors beyond those that refer to qualification and supply of jobs. Moreover, they face

internal discriminatory mechanisms, such as difficulties in promotion and different remuneration levels.

It should be noted, however, that improvements have been achieved in the last decade. More women were promoted to positions of prestige in society – and entered traditionally male spaces – and are becoming increasingly more independent and self-sufficient.

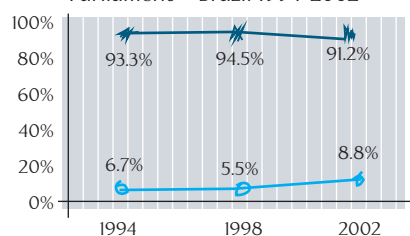
They hold 9% of the seats in Parliament

Another indicator of the degree of women's empowerment and of gender equality is the participation of women in politics. The number of women occupying parliamentary seats in the Brazilian National Congress is still very low. In 2004, there are only 53 female parliamentarians, of which 45 are federal representatives and eight are senators, corresponding to 9% of the total of 594 federal parliamentarians. This percentage varies along the terms of office, due to parliamentarians being replaced by substitutes. Such participation seems even smaller when

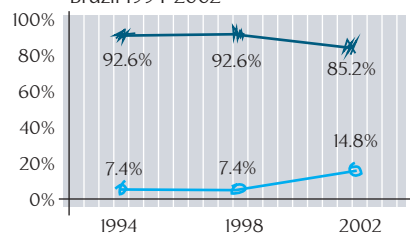
taking into account that the Brazilian population is divided into 48.8% of males and 51.2% of females, according to data of the 2002 PNAD.

As seen in the *Graphs 5, 6 and 7*, between 1994 and 2002, a period that covered three elections at the federal level, the participation of women in Parliament presented a small advance. The proportion of women elected to the Federal Senate doubled, from 7.4% in 1994 to 14.8% in 2002. However, in the House of Representatives the increase was not so significant: from 6.6% in the 1994 election to 8.2% in 2002. An analysis of the Legislative Branch at state and municipal levels reveals a similar trend to that of the federal level.

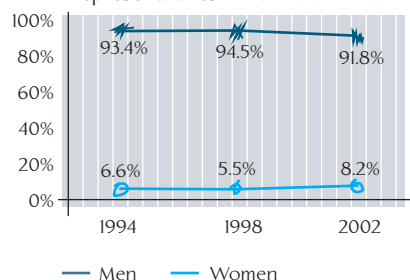
Graph 5
Evolution of the proportion of men and women in the National Parliament – Brazil 1994-2002



Graph 6
Evolution of the proportion of men and women in the Senate – Brazil 1994-2002



Graph 7
Evolution of the proportion of men and women in the House of Representatives – Brazil 1994 - 2002



Source: IBAM (Brazilian Institute of Municipal Administration) and websites from Brazil's bicameral legislature - the Chamber of Deputies (www.camara.gov.br) and the Federal Senate (www.senado.gov.br).

Within the agencies of the Legislative, the participation of women is not equal to men's. The increase in the number of female parliamentarians is not enough in itself. It is necessary to increase their visibility, which can be expressed by the number of decision-making and positions of authority held at the national, municipal or local levels. In this sense, it is illustrative that, in July this year, none of the twenty Permanent Commissions of the House of Representatives was chaired by a woman, while only one of the eight Senate Commissions (on Social Affairs) was chaired by a woman.

In the Executive, male predominance can be seen in the number of elect mayors and governors between 1992 and 2002. In 2002, only two women governors were elected, corresponding to 7.4% of the total of 27 positions available. In the two previous elections, only one woman governor had been elected. In the case of the municipalities, the situation is similar. In 2000, 318 women mayors were elected - 5.7% of the total of 5,559 municipalities, against only 3% of the 4,972 vacancies in 1992. Regarding the command of the Federal Executive, throughout its history as a Republic, Brazil has never elected a woman president or vice-president.

Few women reach decision-making positions

Although the Legislative is the highest representative level, political participation cannot be reduced to this field, so data was collected to measure it in other State Branches or levels. The conclusion was that women remain excluded from decision-making positions or positions that allow effective exercise of power.

Among federal civil servants, there is a relatively large presence of women, particularly in bureaucratic and routine functions, of low remuneration and responsibility. According to the Human Resources Secretariat of the Ministry of Planning, Budget and Management, the situation begins to turn around as one climbs up the hierarchy, as if there were, in civil service as well, a segregation of female and male positions. This fact is confirmed by the occupation of high command positions in the federal government, called Higher Command and Advisory Position (DAS). The higher the DAS, the greater the responsibility and power of the civil servant, as well as the bonus added to his or her remuneration. On *Graph 8*, it can be observed that at DAS 1 level, with a remuneration of R\$ 1,232.20, there is practically one woman for each man, in a total of 6,786 positions. Whereas, at DAS 6, of R\$ 7,575.00, the ratio is of one woman for every four men and only 161 such positions are available in the Federal Public Administration.

It should be pointed out that, in 2003, the participation of women in the higher DAS positions increased, due to the creation of the Special Secretariat for Women's Policies and, to some extent, of the Special Secretariat for Policies to Promote Racial Equality, where women hold a significant number of higher positions.

In the Judiciary Branch, entry into the

career occurs by means of public contest – which, in itself, guarantees formal and clear selection criteria. However, the system of appointment of ministers or other higher positions is based on less objective criteria, involving valuation issues and specific interests. Thus, although the number of female judges and magistrates has increased, their participation in higher positions is still very small. In the Supreme Federal Court, in June 2004, out of the ten ministers, only one was a woman. In December 2003, the Higher Court of Justice had 32 ministers, of which four were women. The Higher Military Court, in May 2003, had all the 15 minister positions held by men. And, in August 2003, out of the 17 ministers of the Higher Labor Court, only one was a woman.

With these figures, it becomes clear that women's right to vote, guaranteed in 1932, was not enough to assure equal participation in politics. This under-representation of women is related, above all, to unequal access to economic resources and political abilities, to different standards of political socialization and State structures that standardize cultural codes of representation, excluding those that are peculiar to women.

PROGRAMS AND POLICIES

The National Council on Women's Rights (CNDM) was one of the milestones in the history of women's political struggle to achieve effective equality of rights in relation to men. Law 7.353 of 1985, which instituted CNDM and linked it to the Ministry of Justice, established as its function the promotion of equality between men and women, especially in the political, economic and cultural spheres, by means of actions aimed at eliminating discrimination against women, assuring them conditions of freedom and equality of rights. The CNDM was also

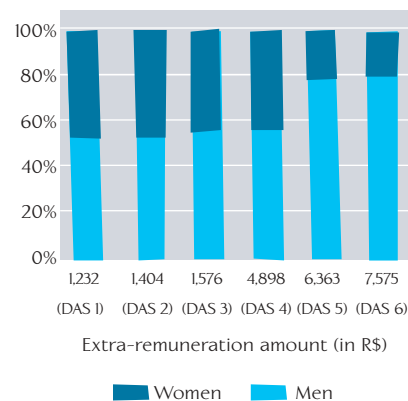
extremely important in the elaboration of the 1988 Federal Constitution, since most of the achievements of women consolidated in it were the result of demands arising in the scope of the Council.

In 2002, the federal government created the Federal Secretary for Women's Rights (Sedim), also linked to the Ministry of Justice and responsible for the CNDM. Its creation was, to a large extent, due to the need for a policy-making and implementing agency focusing on reduction of gender inequalities and meeting the needs of women. Its main role would be to guarantee the attention of the whole of government to the gender issue, also working with the women's movement, and the Judiciary and Legislative Branches.

In addition to the institutional consolidation of the gender issue, there were other advances along the last decade. In the political sphere, an important initiative was the creation of the quota system for candidacies to the federal, state and municipal parliaments. Initially, in 1995, an article in the legislation was approved on municipal elections, establishing women should fill a minimum of 20% of the candidacies to the municipal government. In 1997, this measure was amplified. The quota system was extended to all legislative levels and was increased to at least 30% of the total number of candidates.

In May 2002, the National Program for Affirmative Actions was instituted. Under this program, the agencies of the Federal Public Administration must establish participation quotas for blacks, women and people with disabilities in filling the DAS positions; grant extra points in procurement processes to bidders that prove the adoption of affirmative policies; and include, in the contracts with service rendering companies or with consultants in the scope of projects developed in partnership with international organizations, provisions establishing

Graph 8
Participation of men and women in DAS positions in the Federal Government – Brazil – 2002



Source: Human Resources Secretariat/Ministry of Planning, Budget and Management.

Women's right to vote was not enough to ensure equal political participation

participation quotas, in order to guarantee the presence of women, blacks and people with disabilities.

As to tackling violence against woman, the National Program to Fight and Prevent Domestic and Sexual Violence Against Women stands out, initially managed by the CNDM and later placed under the responsibility of Sedim. Its aim was to strengthen entities that work on fighting domestic and sexual violence, such as Police Stations Specialized in Assistance to Women (DEAMs) and Shelter Homes, which are spaces that provide, for a certain length of time, shelter and full care to women under imminent risk due to domestic violence. To this end, representatives of various government organizations, as well as professionals from NGOs, received training to work as multipliers in the DEAMs throughout the country. Events, studies and researches were carried out, in order to increase the visibility of the issue of violence against women, removing it from the private world and turning it into a public issue, under the responsibility of the government and the whole of society.

PRIORITIES AS FROM 2003

In 2003, the Special Secretariat for Women's Policies (SPM) was created, directly linked to the Presidency of the Republic. With ministerial status, the

*Since 1997,
30% of the
candidatures to the
Legislative
are reserved for
women*

main purpose of the SPM is to assure that the gender perspective cross-cuts all sectors that work towards the construction of democracy and social development. It belongs to the secretariat, among others functions, to assist the Presidency of the Republic in the design, coordination and integration of policies for women, as well as to implement cooperation programs with international and national public and private organizations focusing on the implementation of these policies. To this end, increasing the institutional space for defense of women's rights and promotion of equity was an important step in tackling the gender issue. In its new role, the SPM began to implement the following three programs directly: Program for Preventing and Fighting Violence Against Women, Incentive to the Economic Autonomy of Women in the World of Labor and Management of the Cross-Cutting Nature of Gender.

As regards tackling violence, the effectiveness of the actions for prevention and reduction of domestic and gender violence requires a combination of efforts from different areas, given the complexity of the problem and its aftermath. The strategy of creating assistance networks is recommended by global and local experiences and corresponds to a concept of collaboration and integration of services aimed at providing full assistance to women in a situation of violence, in services such as police stations, shelter homes and health.

Still in its initial phase, the development of this network has been the priority of the Program for Preventing and Fighting Violence Against Women, involving the government and different sectors of civil society. The action lines are, among others, to provide support to the shelter homes and specialized services, to train professionals at public institutions and to improve the legal framework that deals with violence against women. Among the specialized

services, the Reference Centers deserve mention. They are an integral part of the network, and their role is to provide assistance and psychological and social support to women in a situation of violence, recovering and strengthening their self-esteem and enabling the exercise of their rights. In addition to the centers, services established in the Institute of Legal Medicine and the Public Defender's Offices, among others, are also supported.

Still on this issue, a law was approved in June 2003 characterizing domestic violence in the Brazilian Criminal Code. With the presidential sanction, article 129 of the Criminal Code is in effect with the following change of language:

"Domestic Violence

Paragraph 9 If the injury is practiced against ascendant, descendant, brother, spouse or partner, or someone with whom the offender cohabits or has cohabited, taking advantage of domestic relations, cohabitation or hospitality:

Penalty – detention, of 6 (six) months to 1 (one) year

Paragraph 10. In the cases provided for in paragraphs 1 to 3 of this article, if the circumstances are those indicated in paragraph 9 of this article, the penalty shall be increased by 1/3 (one third)."

As it constitutes one of the areas where gender inequalities are expressed most strikingly, the world of tasks is another important axis for the tasks of the new Secretariat created by the government. Among other actions, qualification for work and employment and income generation are being developed, as well as promotion of access to microcredit to stimulate the economic autonomy of women.

In the scope of the Ministry of Labor and Employment, the Program Brazil, Gender and Race, which promotes discussion on discrimination in the world of work, deserves mention, as well as

the actions of the Nuclei for Promotion of Equal Opportunities and Fight Against Discrimination, at Regional Labor Offices. Gender and race issues are also taken into account in programs such as First Job and, in the scope of the Ministry of Agrarian Development, in the National Program for Strengthening Family Farming (Pronaf), with the creation of a credit facility especially dedicated to women agricultural workers.

It should also be pointed out that 2004 was instituted by law as the Year of Women, with wide national mobilization in preparation for the First National Conference on Women's Policies. Thus, in July 2004, more than two thousand Brazilian women attended the Conference. Organized by the SPM and the National Council on Women's Rights, the theme "Policies for women: a challenge for equality from the gender perspective" was discussed, with the presence of indigenous and black representatives, in addition to several social segments. The guidelines of the National Policy for Women should emerge from the conference, aiming at the design of the First National Plan for Women's Policies. This was the first time that the federal government carried out a conference in this area, with wide consultation to women of all the regions in the country. In the first semester of this year, more than 100 thousand women from 2 thousand municipalities, 26 states and the Federal District convened in plenary sessions and conferences to decide on their main demands.

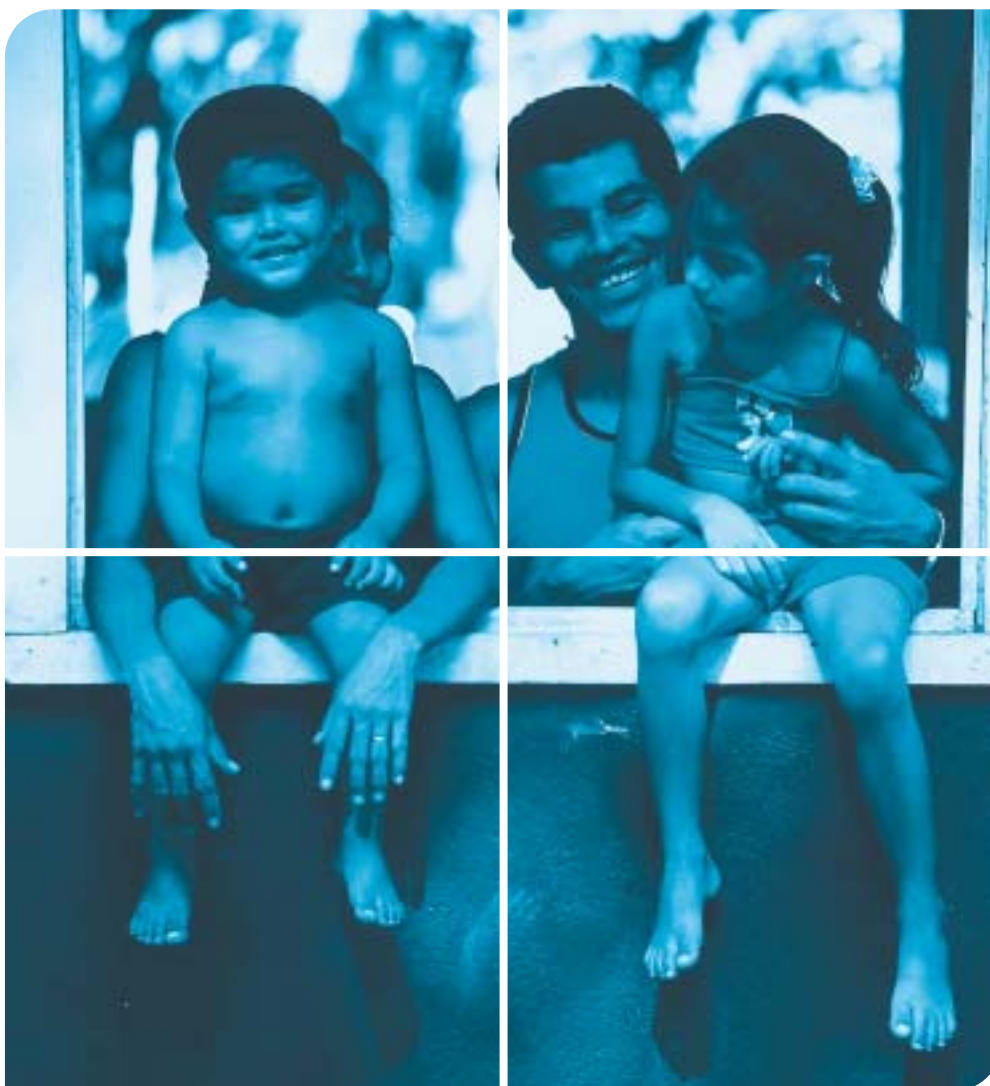
Another important event was the launching of the National Program of Documentation of the Woman Rural Worker in the scope of the National Land Reform Plan. Developed by the Ministry of Agrarian Development and the National Institute of Colonization and Land Reform (Incra), in partnership with other governmental bodies, the objective of the program is to provide, free of charge, along 2004,

basic civil documentation – CPF (register of individual entity), employment registration and identity registration, birth certificate and Social Security registration – to approximately 41 thousand women settled under the land program and working in family farming. Such documentation is a requirement for access to a range of federal government public policies, such as the Bolsa-Família Program, credit programs, welfare benefits and joint land titles, which contribute to the promotion of women's autonomy and to gender equality.

Finally, one of the focuses of the Strategic Government Guideline for the 2004-2007 Multi-Year Plan is the challenge of "Promoting the reduction of gender inequalities", among the thirty challenges to be addressed in the four-year period. These challenges integrate the document governing the design of the programs and actions to be implemented by the federal government, ensuring the commitment and the attention of the government to the needs of women and the promotion of gender equality.

Special policy for women should maintain initiatives towards emancipation in the economy, such as microcredit to open business

GOAL
REDUCING CHILD
MORTALITY



4

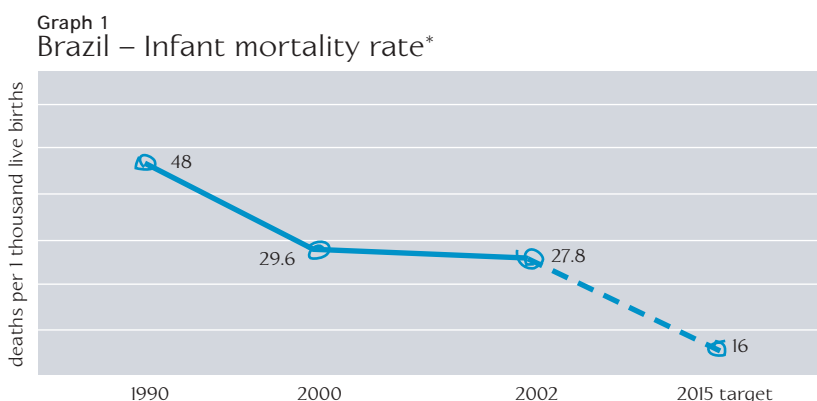
■ TARGET 5

TO REDUCE BY TWO THIRDS,
BETWEEN 1990 AND 2015,
THE UNDER-FIVE MORTALITY RATE

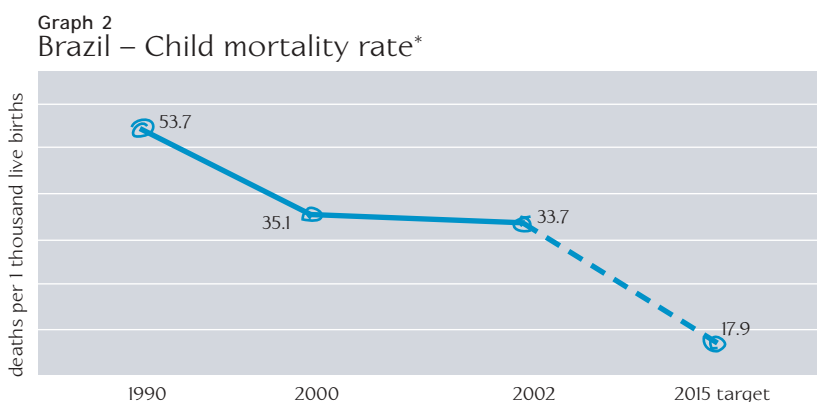
BRAZIL WILL REACH THE TARGET IF IT KEEPS THE PACE OF CHILD MORTALITY REDUCTION

Since the mid 1970's, child mortality (of children under 5 years of age) and infant mortality (of children under 1 year of age) have been decreasing at an escalating pace in Brazil. In 1990, for every thousand live births, 53.7 died before reaching the age of 5. In 2002, this number fell to 33.7 – a 37.2% reduction. Among children under 1 year, the drop was even more expressive: 42.1%. The rate went down from 48.0 to 27.8. In twelve years, therefore, both dropped by more than one third.

The size of the gaps among the different regions in the country has also been decreasing along the last decades. However, in 2000, the Northeast still stood out with a rate 57% higher than the national average and 160% higher than the rate in the South region. The contrasts are even greater when certain states within these two regions are compared.



*Number of deaths of under 1 year-olds per 1 thousand live births at year of death
Source: IBGE/ Estimates by demographic methods, Demographic Censuses from 1970 to 2000.



*Number of deaths of under 5 year-olds per 1 thousand live births at year of death
Source: IBGE/ Estimates by demographic methods, Demographic Censuses from 1970 to 2000.

Drop in mortality due to transmissible diseases

In the period analyzed, the drop in child mortality reflects changes in the demographic field and advances in the living conditions of the population. Thus, for example, the general educational level increased and a drop in fecundity was observed, from 2.9 to 2.3 children per woman, between 1991 and 2000. In the scope of health policies, the expansion of the vaccination coverage and other basic measures for prevention and treatment of diseases were vital, as well as access to sanitation.

The elimination of measles is a good example of the reach of public policies in the health area. With its recurrent epidemics, the disease was, particularly when associated with malnutrition, an important cause of child mortality until the first half of the 1980's. In 1980 alone it caused 3 thousand deaths of children under 5 years of age. Ten years later, this number had fallen to 400. In the mid 1990's, vaccination cam-

paigms aimed at the Brazilian population aged 9 months to 14 years were expanded. As can be seen in *Table 1*, the national coverage of measles vaccination went from 79% in 1996 to 100% in 2000. From the very first year, no death occurred from measles in the country and the last case of infection was reported in 2000.

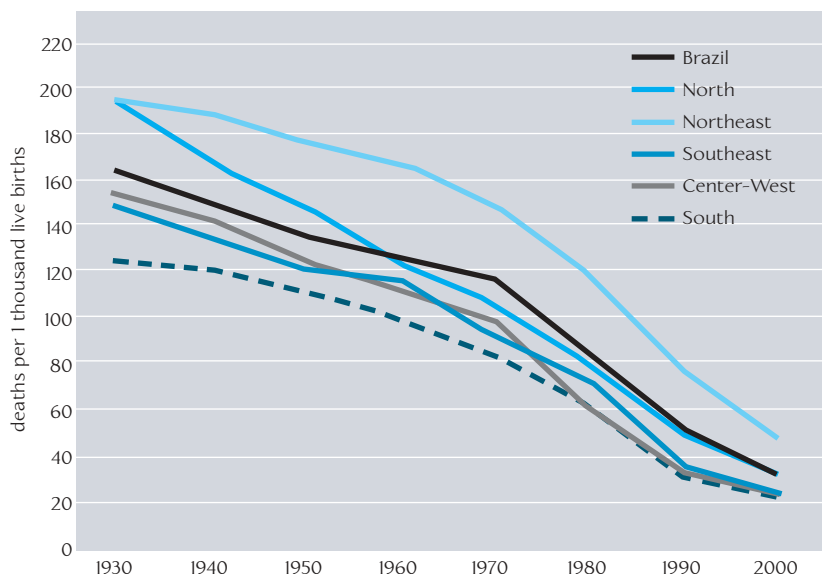
In relation to other transmissible diseases, the reduction in morbidity and mortality that took place along the nineties in the country was also due to a significant increase of vaccination in the first year of life. In 2000 the national coverage was equal to or higher than 95% for DPT (diphtheria, whooping cough and tetanus), against polio and BCG (tuberculosis).

Public policies have also had an impact in the drop of child mortality rates from diarrhea and acute respiratory infections. In the case of diarrhea, parents were taught how to administer a homemade solution for oral rehydration. Mortality from acute respiratory infections was reduced through the use of simplified standard diagnosis and treatment procedures by health services. As shown in *Table 2*, proportional mortality from diarrheic diseases in children under 5 years of age dropped 59% between 1990 and 2001. In some regions, 70% reductions were achieved. In the same period, proportional mortality from respiratory infections in this age group dropped 45%.

Rates are still high in the North and Northeast

A substantial part of the reduction of infant mortality in Brazil since the 1970's is related to the reduction of the incidence of deaths from infectious diseases in the period between four months and 1 year of age (post-neonatal mortality). However, in the last years, the country has entered a phase where the causes related to the conditions of the pregnant mother, child-

Graph 3
Brazil and Major Regions – 1930/2000
Evolution of the infant mortality rate*



Source: IBGE/ Estimates by demographic methods, Demographic Censuses from 1970 to 2000.

Table 1
Brazil and Major Regions – Vaccination coverage in the first year of life (%)

	DPT*		Measles		Poliomyelitis		BCG**	
	1996	2000	1996	2000	1996	2000	1996	2000
Brazil	76	95	79	100	78	100	100	100
North	76	77	68	100	64	100	100	100
Northeast	69	89	77	100	76	96	100	100
Southeast	76	100	83	100	77	100	98	100
South	85	98	88	100	86	98	100	100
Center-West	84	96	76	91	82	100	100	100

*Against diphtheria, whooping cough and tetanus **Against tuberculosis
Source: DATASUS/IDB 2003/RIPSA/Ministry of Health.

birth and the newborn infant are increasingly prominent, particularly in the period going from birth up to four weeks of life (neonatal period). The reduction of infant mortality in Brazil, similarly to what has already happened in developed countries, depends to a greater extent on prevention of deaths in this period, although there is still room for reduction of post-neonatal mortality, mainly in the North and Northeast regions. As shown in *Table 3*,

From 1990 to 2002, infant mortality rate in Brazil fell 42.1%

Table 2
Brazil – Proportional mortality*
in children under 5 years old (%)

Year	Acute Diarrheic Disease	Acute Respiratory Infection
1990	10.8	10.3
1995	8.3	9.4
2000	4.5	5.9
2001	4.4	5.6
1990–2001 Variation	–59.5	–45.5

* Percentage of deaths from this cause in relation to total of deaths with definite causes.
Source: DATASUS/IDB 2003/Ministry of Health.

Table 3
Brazil – Infant mortality rates in 2001
(per 1.000 live births)

	Total	Early neonatal (0 to 6 days)	Late neonatal (7 to 27 days)	Post-neonatal (28 to 364 days)
Brazil	27.4	14.0	3.8	9.6
North	28.1	14.7	3.7	9.7
Northeast	43.0	21.4	4.9	16.7
Southeast	18.2	9.5	3.0	5.8
South	16.4	8.2	2.4	5.8
Center- West	20.9	11.3	3.3	6.3

Source: DATASUS/IDB 2003/Ministry of Health.

neonatal mortality, it is not enough to guarantee access to health services, nor to apply simplified assistance resources. It is also necessary to ensure the quality of the care provided in prenatal clinics and of hospital deliveries, both in technological and staff qualification terms, in order to guarantee the infant's survival in the first days of life. This quality requirement is as big a challenge in the current decade as it was, in the nineties, to expand health care by means of the development and consolidation of the Unified Health System (SUS).

The conclusion, therefore, is that the trend of neonatal mortality will become, in the next years, the most important aspect in reaching the 2015 target. The same can be concluded with regards to perinatal mortality (fetal deaths at 22 weeks of pregnancy added to deaths in the early neonatal period up to the seventh day after birth), to the extent that it involves the same endogenous causes and requires similar prevention methods.

PROGRAMS AND POLICIES

In the process of expansion of coverage and reorganization of basic health care services, the Community Health Agents and Family Health programs deserve mention. They are largely focused on monitoring the growth and development of children under 5 years of age. These programs include household visits by members of the health teams, with the aim of monitoring the health of pregnant women, mothers who are breastfeeding, newborns and the whole child population.

In the fight against child mortality, national priorities include increased vaccination coverage; oral rehydration therapy; treatment of acute respiratory infections; prenatal care for pregnant women; incentive to breastfeeding; as well as a range of intersectoral actions

considering all the regions, neonatal mortality (adding early and late periods) exceeds post-neonatal mortality.

Thus, the fight against neonatal mortality has become the key to continuing the accelerated pace of infant mortality reduction in Brazil. However, it must be pointed out that the reduction of the child mortality national average will also continue to depend on efforts to prevent deaths from infectious diseases and other exogenous causes related to poverty, including children's poor nutritional conditions and lack of a healthy environment, especially in the North and Northeast regions.

The highest risks of death during the neonatal period correspond to infants born with low weight and deliveries carried out before term. In order to address the challenge of reducing

related to the environment and the education of mothers. In 2002, 80% of the Brazilian municipalities had already established, to a greater or lesser extent, the Family Health Program. The current goal is to expand the program to the municipalities with more than one hundred thousand inhabitants and consolidate it in the others.

The Ministry of Health has also been supporting, with regular financial transfers, an important civil society initiative, the *Pastoral da Criança* (Pastoral for the Child), which maintains an extensive network of voluntary health agents dedicated to monitoring the growth and development of children under the age of six. In 2002, the Pastoral assisted 1.6 million poor children and 76 thousand pregnant women throughout the country, with actions of health, education and nutrition promotion.

PRIORITIES FOR 2003

According to the analysis above, the gradual reduction in infant mortality achieved in the last decades has led to a greater concentration of infant deaths in Brazil in the first four weeks of life, that is, the neonatal period. This change took place simultaneously with the reduction of the proportion of deaths from infectious diseases and respiratory problems, which occur most frequently after this period.

The current Government understands that the fight against the various causes of infant mortality can only be undertaken effectively through integration of a range of intersectoral actions leading to improved living conditions of the population in the social dimensions of nutrition, education, sanitation, housing and access to health services. Public social security policies and specific poverty reduction programs contribute significantly to the achievement of this objective, but intersectoral

action to fight infant mortality has to include specific improvements in the technical quality and humanization of the care provided to pregnant women, at birth and to the newborn, in order to have an impact on mortality in the neonatal period.

In 2003, the Ministry of Health proposed the National Pact for Reduction of Maternal and Neonatal Mortality, involving the government, managers of the Unified Health System (SUS), health institutions and professionals, in addition to non-government organizations developing public interest actions in the area. By means of the National Health Plan, the Ministry ratified the set of priority actions provided for in that said pact, whose aim is to promote full childcare and reduction of infant mortality, with a focus on the reduction of neonatal mortality. The lines of care defined in the pact, directed to the health of women and newborn infants, include the following actions:

- Promotion of healthy births;
- Monitoring of newborns at risk;
- Monitoring of growth and development and guarantee of high vaccination coverage;
- Promotion of breastfeeding and healthy nutrition, with special attention to nutritional disorders and deficiency anemia;
- Addressing respiratory and infectious diseases;
- Surveillance of infant deaths.

The Plan foresees the development of a program directed toward the reduction of neonatal infant mortality, with monitoring, inspection and research actions and improvement in the quality of prenatal care, childbirth and newborn care. These initiatives seek to permanently assess maternal and infant

mortality indicators from Brazilian hospitals. The surveillance of infant and fetal death is another guideline expressed by the Plan. With the aim of identifying the problems leading to death from avoidable causes, it will be carried out by the basic care team at the municipal level.

Government plan includes actions in the areas of social security and poverty reduction, with improvement of care provided to pregnant women and newborns

GOAL
IMPROVING
MATERNAL HEALTH



5

■ TARGET 6

TO REDUCE BY THREE QUARTERS,
BETWEEN 1990 AND 2015,
THE MATERNAL MORTALITY RATE.

POOR INFORMATION MAKES IT DIFFICULT TO MONITOR DEATHS

It is estimated that maternal mortality rate in Brazil was 75.3 per 100 thousand live births in 2002. There is, however, a high incidence of under-notification of maternal deaths, as a result of several factors. The main one is inadequate filling out of death certificates, particularly as regards the presence of pregnancy. This fact was proven by the survey "Mortality of women aged 10 to 49 years, with emphasis on maternal mortality", carried out in 25 capitals and the Federal District, by researchers of the College of Public Health of the University of São Paulo. The figure found in this survey is 67% higher than the one informed. Based on this finding, maternal mortality statistics for the year 2002, obtained through the information systems of the Ministry of Health, were multiplied by a correction factor of 1.4, extracted from the data obtained from the survey, and thus arriving at the estimated number above (75.3 per 100 thousand).

Taken as a parameter, the 2002 result shows a high proportion of women's deaths from causes related to pregnancy, childbirth or puerperium in Brazil. For the World Health Organization (WHO), this proportion is in the high mortality band, far from the developed world, where countries register a maximum of 20 deaths per 100 thousand live births.

*Investigation
on maternal deaths
has been conducted
only in 18 States*

Under-registration and poor information are still the norm in many countries, not only in Brazil. In order to map maternal health and improve the services that provide care to women of fertile age, it is necessary to improve the quality of the information. The Committees on Maternal Mortality being established in the country have precisely this attribution: to raise and identify the reasons for death, thus contributing to the prevention of similar cases. In 2001, there were 25 state, 141 regional and 387 municipal committees and about 200 hospital committees in the country. The activity of investigation of maternal deaths, however, is only being carried out in 18 states, of which only seven rely on regional and municipal committees that undertake this investigation in a systematic manner. This work, in spite of limitations, has been helping to define intervention measures and has reached some significant results.

Care in pregnancy and childbirth requires qualification

Although there is no information to calculate the proportion of childbirths attended by skilled health personnel, there are some approximations. One of them is the number of hospital childbirths, which is growing continuously. In 2001, it reached 96% of the total number of childbirths, varying from 90% in the North Region to 99% in the South, Southeastern and Center-West Regions.

The standards introduced by the Ministry of Health establish that the pregnant woman be assisted with a number equal to or higher than six prenatal monitoring appointments with a physician or a nurse. According to data of the National System of Information on Live Births (Sinasc), for the period of 1997 to 2001, it was found that the proportion of women who had had seven or more prenatal appointments increased from 41.6% to 45.6%.

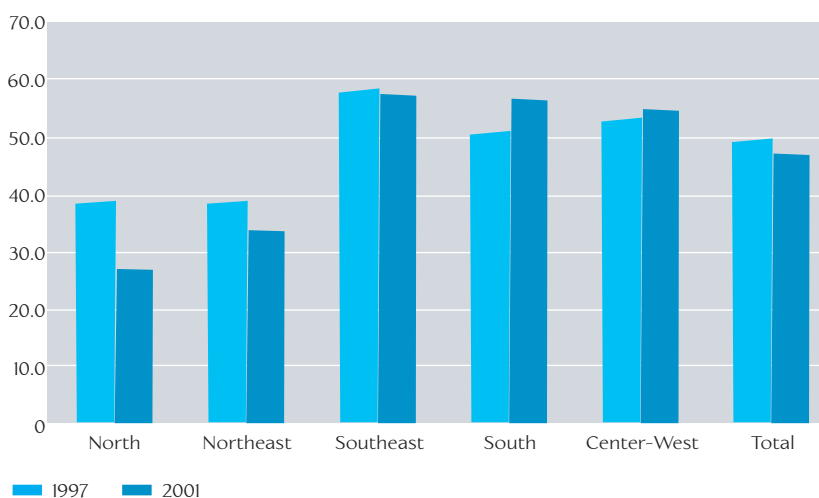
However, about half of the women still did not have the required minimum assistance. The prenatal care indicator masks important regional differences: in 2001, while in the South Region 56.3% of the women had been to seven or more prenatal appointments, in the North Region this percentage was only of 26.2% (See Graph 1).

The Health Surveillance Secretariat (SVS) of the Ministry of Health analyzed the number of prenatal appointments according to the educational level of the mothers. This study showed that 75.9% of the women with 12 or more schooling years had attended seven or more prenatal appointments, while this percentage was of 21.9% for mothers with no schooling.

Moreover, the National Demography and Health Survey, carried out by the institution *Bem-Estar da Família* - Bemfam (Family Well-Being) in Brazil, revealed that women living in rural areas have less access to health services: in 1996, 32% of them had not attended any prenatal appointment, against 9% of those living in urban areas. Differences related to color or race were observed in the study carried out by Estela da Cunha, *Condiciones da mortalidade infantil segundo raça/cor no Estado de São Paulo, 1997/1998* (Conditioning factors of infant mortality according to race/color in the State of São Paulo, 1997/1998), whose data shows that, in prenatal appointments attended by black and white women, double the number of black women declared they had not been to any previous appointment during the pregnancy.

There is also an excess of caesareans in both public and private health systems. The WHO recommends that caesarean births should not exceed 15% of the total of births. In 2002, caesarean births accounted for almost half of the total hospital childbirths in some Brazilian states. In addition to inherent risks of a surgical procedure,

Graph 1
Brazil and Major Regions – 1997–2001 – Percentage of live births whose mothers had seven or more prenatal appointments per region of residence of the mother



Source: *Saúde Brasil 2004: uma análise da situação de saúde* (Health in Brazil 2004: an analysis of the health situation), SVS, Ministry of Health.

such as postpartum infection and risks related to anesthesia, studies indicate that caesarean birth can increase the maternal mortality rate up to seven times.

In countries where rates are low according to WHO criteria, the main causes of maternal mortality are the so-called indirect causes – resulting from preexisting diseases or diseases developed during the pregnancy due to physiological problems before pregnancy. In developing countries, in general, direct causes – related to diseases resulting from the pregnancy itself – are responsible for most deaths, largely avoidable with adequate medical care.

In Brazil, the main causes of maternal death are arterial hypertension, hemorrhage, postpartum infection and complications related to abortion (direct causes). According to estimates of the Ministry of Health, 260 thousand hospitalizations due to abortion are registered annually in the Unified Health System (SUS). The practice of abortion is considered a crime against

*Around half
of the women
have not the
required minimum
pre-natal
assistance*

*Abortion is
an important
cause for
maternal death*

life, being allowed only “if there is no other way to save the life of the mother or if the pregnancy results from rape and the abortion is preceded by consent from the woman or, if incompetent, from her legal representative” (article 128 of the Criminal Code). In addition to these cases provided for in the law, in July 2004, the Supreme Federal Court (STF) issued a preliminary order with immediate and binding effect (that is, valid for all judicial proceedings in course in the Brazilian Justice System), recognizing the right of pregnant women to interrupt the pregnancy if the fetus has anencephaly (absence of the brain) confirmed by a medical report. This decision still has to be submitted to the plenary assembly of the STF.

Abortion carried out in unsafe conditions is among the main causes of maternal death, since it is often followed by severe complications, aggravated by the delay in seeking health services. This delay is largely due to the fact that women who have abortions are victims of discrimination in the health services, and health professionals show little interest and are slow in assisting them.

Most of the causes mentioned above can be prevented with good prenatal care and adequate assistance in childbirth and puerperium. According to estimates of the Ministry of Health, in 92% of the cases, maternal death is avoidable. There is a need for better qualification not only in the public network, but also of private health care providers, with or without link with the SUS.

**Cardiovascular diseases
and AIDS are major
causes of women deaths**

In Brazil, maternal mortality is not among the ten major causes of deaths of women at childbearing age. Cerebral vascular accident (stroke), AIDS, homicide and breast cancer are, in this order, the main causes of death of women

aged between 10 and 49 years, according to survey data of the College of Public Health.

Mortality due to cerebral vascular accident is associated to risk factors such as arterial hypertension and diabetes (*diabetes mellitus*). As to breast cancer, it is observed that diagnosis is delayed in about 60% of the cases. Moreover, some changes of habits such as reduction of smoking, alcohol consumption, obesity and lack of physical activity can reduce the risk factors associated to these two diseases.

Another concern is related to the health of adolescents. In 2001, data from Sinasc showed that 22.4% of the total of live births in the country were born to mothers aged between 15 and 19 years. This percentage was higher in the North (28.9%), Northeast (24.9%) and Center-West (24.4%) than in the South (20.3%) and the Southeast (19.2%). Moreover, the total fecundity rate dropped significantly (57%) between 1970 and 2000. The only group that had an increase in specific fecundity rate in this period was the 15 to 19 group. It is the health services duty to provide adequate health care to adolescents. It is also important to integrate actions to support youths and educative actions that address sexuality with clear and easy-to-understand information.

**PROGRAMS
AND POLICIES**

In the aftermath of the 1988 Constitution, health policies were marked by the effort to ensure the effectiveness of the constitutional rights of universal and full access to health services. There was an attempt, with some success, to organize the service network, defining the role of each federate entity and guaranteeing financing stability for health policies, in order to fulfill these rights. Within the expansion and reorganization of the basic health care ser-

vices, the Community Health Agent and Family Health programs, whose priority is assistance to children and pregnant women, stand out.

In 2000, the Program to Humanize Prenatal Care and Birth (PHPN) was launched, based on the analyses of the specific health care needs of pregnant women, newborns and women in the postpartum period. Among other objectives, the PHPN seeks to concentrate efforts on reducing the high rates of maternal and perinatal morbidity and mortality and to adopt measures to increase the coverage and quality of prenatal, childbirth and postpartum care. In addition, it is expanding the actions already adopted in the area of pregnancy care, such as investment in state assistance networks to high risk pregnancies, financing of specialization courses in obstetric nursing and training of traditional midwives. Each municipality joining the program defines its network of prenatal, childbirth and postpartum care, selecting the reference units responsible for the required appointments and tests, and the hospitals responsible for childbirth attendance.

The PHPN monitoring data reveal that childbirth and postpartum attendance are not yet consolidated in the health services: in 2001, 9.4% of the pregnant women enrolled in the program had only been to the six prenatal appointments and the puerperal appointment. In addition, although most women return to the health service within the first month after childbirth, their main concern, as well as that of the health professionals, is with the newborn. This would indicate a lack of clarification of both women and health professionals on the importance of puerperal appointment. Furthermore, reports on the actions of the Ministry of Health between 1998 and 2002 indicate that, in this period, reproductive health was prioritized. This perspective made it difficult to establish a broader agenda of women's health care.

PRIORITIES AS FROM 2003

In March 2004, the government launched the National Pact for Reduction of Maternal and Neonatal Mortality, whose objective is to reduce by 15%, by the end of 2006, the current maternal and neonatal mortality rates. The pact refers, above all, to the strategies to humanize prenatal care and childbirth. In order to achieve this target, the government relies on the participation of professional councils, trade unions, study and research centers, social movements and non-government organizations. The programs and actions that compose the pact received added resources, allocated to the municipalities with the worst indicators. Of the 28 strategic actions undertaken in the pact, the following should be highlighted:

- To guarantee at least the minimum number of prenatal appointments and tests;
- To guarantee that women and newborns are not refused assistance in the services nor have to run about in search of it;
- To qualify and humanize delivery, birth, legal abortion or the consequences of unsafe abortion;
- To expand the provision of laboratory tests in prenatal care;
- To include pediatric neonatal and obstetric emergencies in the Emergency Assistance Service (Samu); and
- To prioritize the permanent training and education of all the professionals involved in obstetric and neonatal care.

As stated in the proposal of the National Health Plan, the qualification and humanization of care in delivery, birth

and legal abortion are important steps. In this area, there are measures intended to ensure for women the right to have a companion before, during and after childbirth and rooming-in with the newborn. The measures also include intensive training of the professionals, in order to provide adequate obstetric and neonatal care, with the definition and implementation of specific assistance and humanization practices. Another basic point is the guarantee of access to family planning, providing educative actions and contraceptive methods. As to reduction of maternal mortality, one of the strategies is the creation of study and prevention committees for monitoring in all the municipalities with more than 50 thousand inhabitants.

Without leaving aside the serious problem of maternal mortality, attention deserves to be drawn to the need for actions of full health care for women, taking into account color or race, ethnicity, age and place of residence. Within this perspective, the Ministry of Health launched, in 2004, the "National Policy of Full Health Care for Women: Principles and Guidelines", whose objectives are:

- To promote improvement of the living conditions and health of Brazilian women, by ensuring legally constituted rights and expanding access to the means and services of promotion, prevention, assistance and recovery of health throughout the Brazilian territory;
- To contribute to the reduction of female morbidity and mortality in Brazil, especially due to avoidable causes, in all life cycles and the various population groups, without any form of discrimination; and
- To expand, qualify and humanize full health care for women in the Unified Health System.

GOAL
COMBATING
HIV/AIDS, MALARIA
AND OTHER DISEASES



6

■ TARGET 7

TO HALVE, BY 2015, AND BEGIN TO REVERSE THE SPREAD OF HIV/AIDS.

■ TARGET 8

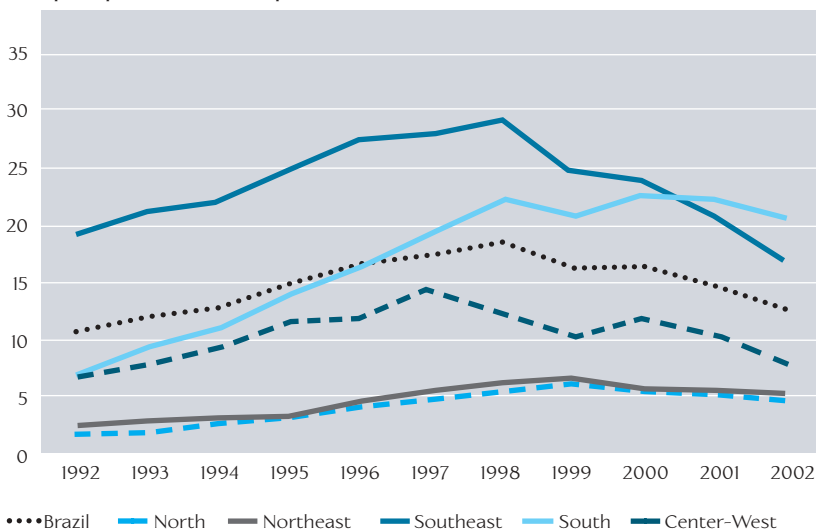
TO HALVE, BY 2015, AND BEGIN TO REVERSE THE INCIDENCE OF MALARIA AND OTHER MAJOR DISEASES.

AIDS CONTROL MOVES FORWARD, BUT PROBLEMS SUCH AS MALARIA, TUBERCULOSIS, LEPROSY AND OTHER DISEASES STILL PERSIST

The first case of AIDS was reported in Brazil in 1980, and in the following eighteen years increasing rates of incidence among the population were recorded. In 1998, there were 18.7 people infected in every 100 thousand inhabitants. With a series of measures applied to contain it, the epidemic started to lose strength and, by 2002, the rate had decreased by one third. Currently, the challenges posed by AIDS are related not only to the consolidation of this reduction trend, but also to changes in the profile of the people living with the syndrome. Initially restricted to specific groups, such as adult homosexual males, hemophiliacs and people who had received blood and blood product transfusions, the disease today reaches men and women indiscriminately.

Other examples of infectious and parasitic diseases that continue to represent public health problems are malaria, tuberculosis and leprosy. There has been a general fall in the incidence of malaria cases, but with periods of significant new outbreaks. Tuberculosis, which was already a serious public health problem, began to have its slow reduction rates halted by its association with AIDS. And the rate of leprosy is four times higher than what is considered reasonable for the disease to be eradicated.

Graph 1
Brazil and Major Regions - Rate of AIDS Incidence
(people infected per 100 thousand inhabitants)



Source: MS/SVS/DST and AIDS/SINAN.

AIDS has greater incidence in the South and Southeast

Up to 2003, about 310 thousand cases of AIDS had been diagnosed in Brazil. The Southeast and South regions presented the largest concentration of cases in the period between 1980 and 2003: 84%. The Southeast, however, despite the high incidence rate, is the only region that shows a consistent declining trend since 1998. Comparing this year's figures with those of 2002, the national rate fell 31.5% – from 18.7 to 12.8 people infected by HIV per 100 thousand inhabitants – and the rate in

the Southeast region, 41% – 29 per 100 thousand to 17.1 per 100 thousand. There was an increase trend in the number of cases in some states of the North and Northeast regions, related to alterations in the social-economic patterns of the disease, which began to strike harder within the poorer segments of the population.

Regarding category of exposure, the data reveal a significant evolution in the number of cases associated to heterosexual transmission. It went from 17.4%, the average in the 1980-1991 period, to 56.1% in 2002. One of the major contributing factors to this is the increase of the syndrome's incidence among women. And the higher the number of infected women, the more orphans there will be as a result of maternal AIDS. In a period of ten years, between 1989 and 1999, it is estimated that the number of children who lost their mothers as a result of the syndrome rose sharply from 383 to about 5,500 (See Table 1).

New cases strike people with lesser schooling

Regarding the social-economic characteristics of the infected population, the lack of information on the income of people living with AIDS led to the use of data on schooling as a proxy in the analysis. Up to 1982, all the cases with known educational level were people with higher education or more than eleven years of schooling. In the subsequent years, an increase trend in the reporting of cases of people with less schooling was observed. In 1999-2000, among those with known educational level, 74% were illiterate or had up to eight years of schooling, and only 26% had eleven years of schooling or more. Given the correlation between schooling and poverty, this might be evidence of a higher incidence of AIDS cases in the poorer groups.

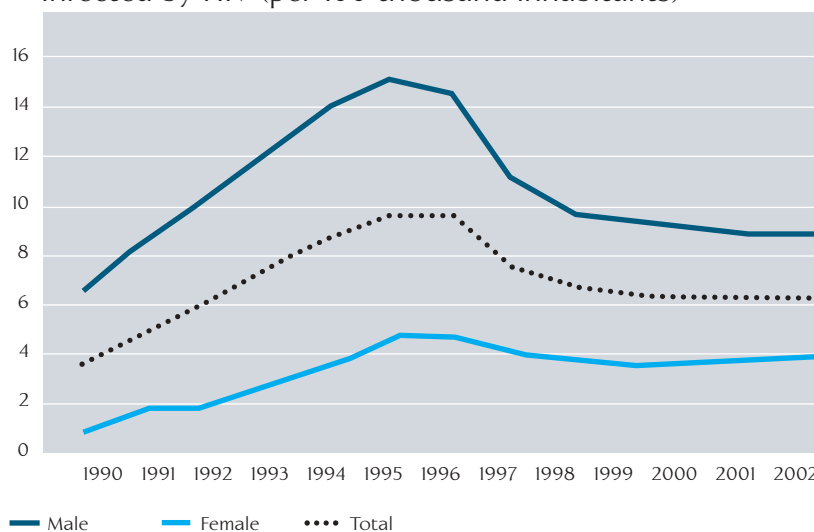
Gender differences in mortality are also decreasing. Between 1990 and

Table 1
Brazil and Major Regions - Estimated number of orphans due to maternal AIDS - 1987-1999

Year	North	Northeast	Southeast	South	Center-West	Brazil
1987	0	4	62	5	2	73
1988	3	21	198	14	9	245
1989	5	44	305	25	4	383
1990	10	66	587	30	22	715
1991	10	145	894	92	34	1175
1992	21	177	1152	124	40	1514
1993	33	228	1547	229	84	2121
1994	70	355	1874	256	93	2648
1995	104	448	2215	316	171	3254
1996	133	482	2293	377	186	3471
1997*	187	575	2589	459	286	4096
1998*	256	668	2857	554	401	4736
1999*	348	774	3149	667	560	5498
Total	1180	3987	19722	3148	1892	29929

*Projections based on previous years' estimates and subject to revision.
Source: MS/SVS/PN DST and AIDS/FIOCRUZ. "Estimativa do número de órfãos decorrentes de AIDS materna" (Estimated number of orphans due to maternal AIDS). Célia Szwarcwald, Carla Andrade and Euclides Castilho (1999).

Graph 2
Brazil - Rate of Total Mortality of men and women Infected by HIV (per 100 thousand inhabitants)



Source: MS/SVS/DASIS - System of Information on Mortality (SIM)

2002, the gender ratio went from 6.2 to 2.2 male deaths for each female death. Moreover, the female mortality rate has been relatively stable since 1997 (See Graph 2).

The AIDS mortality rates began to decline in 1995, which is when stronger

Evidences have indicated an increase of AIDS incidence among the poor

Cases associated to heterosexual HIV transmission went from 17.4% in the 1980-1991 period to 56.1% in 2002

antiretroviral therapies were made available in the market, and the Brazilian policy for universal and free access to antiretroviral drugs was established. Also worthy of note are the strategies and campaigns for raising awareness on the risk factors of the disease, such as the risks of needle sharing and of not using male condoms.

Another indicator to analyze the fight against HIV is the rate of condom use in relation to other contraceptive methods. In Brazil, the last survey that allows the calculation of this ratio was carried out in 1996 by the institution Family Well-Being in Brazil (Bemfam), a non-government organization that focuses on sexual and reproductive health. According to the data collected, condom use represented 12.9% of the total contraceptive methods used by women aged 15 to 49 years.

In an opinion poll conducted in November 2003 by Ibope Opinião with 15 to 25 year-olds who had already had sexual intercourse, more than half (52%) declared they always use condoms; about one fifth (21%) sometimes use condoms; 6% use condoms rarely; 13% said they had used condoms but stopped; and 7% stated they had never used condoms.

In 2003, the National Sexually Transmitted Diseases (STDs) and AIDS Program conducted a survey aimed at investigating the knowledge, attitudes, practices and behaviors related to AIDS, to assess the vulnerability of the population. This study indicates an increase in condom use by the sexually active population aged 16 to 65 years. Considering only the last sexual intercourse with a non-regular partner, the rate of condom use was of 79% in 2003, against 64% five years earlier. On the other hand, regarding sex with a regular partner, 20% of the sexually active population declared having used a condom in the last sexual intercourse, a figure similar to one found in 1998 (21%).

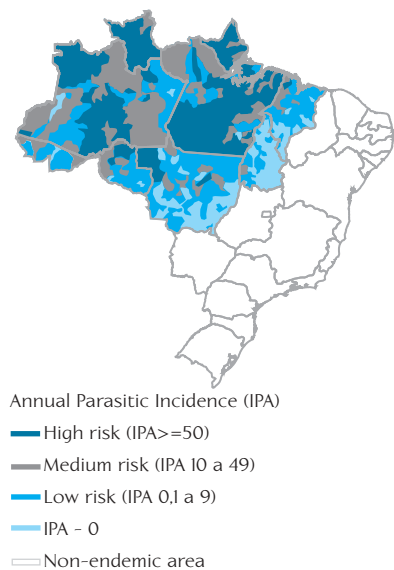
99% of the malaria cases occur in the Amazon region

Malaria is currently concentrated in the *Amazônia Legal* area (made up of the seven states in the North Region, and the states of Maranhão and Mato Grosso), where 99% of the cases in the country are reported (See Map 1). In spite of a general drop in the incidence of the disease in the country, outbreaks occur as a result of disordered growth of the cities, ecological imbalances and the migratory process in the *Amazônia Legal* area.

In the nineteen seventies and eighties, the Amazon development projects, with the construction of highways, colonization, expansion of prospecting areas, among others, promoted significant environmental changes, creating favorable conditions for the expansion of malaria and exposing large populations to the disease. This process caused, along the eighties, a great rise in the number of cases, from 170 thousand in 1980 to about 572 thousand in 1992. There was a period of stabilization and, in 1996 and 1997, a reduction to less than 450 thousand cases a year. After that, there was a new increase in incidence, reaching about 600 thousand cases in 1999 and 2000.

This situation led the National Health Foundation to design a Plan for Intensification of Malaria Actions (Piacm), launched in July 2000. A series of actions were implemented in partnership with states and municipalities, which contributed to halting the growth trend of the disease. In absolute numbers, there was a drop from 637 thousand positive tests in 1999 to 349 thousand in 2002. In the same period, the number of high risk municipalities fell from 160 to 76, hospitalizations fell by 69.2% and deaths from malaria decreased 36.5%. The results achieved through Piacm, however, were not uniform. There was a bigger reduction in Roraima (78%) and in

Map 1
Classification of risk areas for malaria, according to the Annual Parasitic Incidence (IPA) – 2001



Source: Ministry of Health (MS). Health Surveillance Secretariat (SVS). National Malaria Control Program 2003.

Maranhão (71%) than in the other states of *Amazônia Legal* (between 35% and 58%). In Rondônia, instead of a decrease, a 12% increase was recorded.

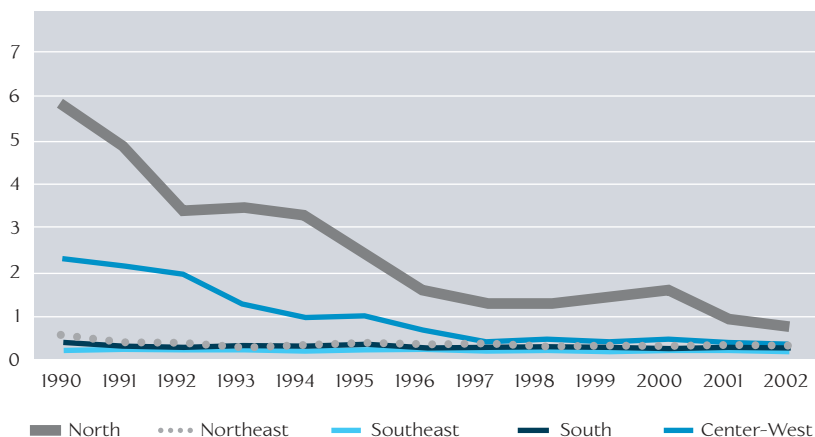
Malaria increases again

After this important reduction in transmission, malaria is growing again in the endemic areas of *Amazônia Legal*, strongly associated with the problems caused by disordered growth and invasions in the peripheries of Manaus and Porto Velho. The housing problems result in ecological imbalances, with a large number of people living on the margins of rivers (*igara-pés*), with little or no infrastructure and urban services networks. Moreover, the intense migratory process in the Amazon has increased social contact and, consequently, the transmission of the disease.

The general trend of mortality from malaria had been decreasing since 1988, due to the reduction of the number of cases by *Plasmodium falciparum* – responsible for 80% of the lethal cases of the disease. The drop coincides with the introduction and use of new drugs in the country and with the expansion of the diagnosis and treatment network through the inclusion of local and permanent health services in the malaria control program. A small increase in the mortality rate in the North region in 1999 and 2000 and the reduction in subsequent years are associated to the increase of incidence and the implementation of the Piacm, respectively (See Graph 3).

One of the indicators for the goal of fighting the disease is the ratio of the population in risk zones that use efficient means of treatment and protection against malaria. Control through impregnated mosquito nettings is not a public health strategy for malaria control in Brazil, since peridomiciliar transmission (around the domicile)

Graph 3
Brazil (Major Regions) – Mortality Rate due to Malaria (per 100 thousand inhabitants)



Source: Ministry of Health (MS), Health Surveillance Secretariat (SVS).

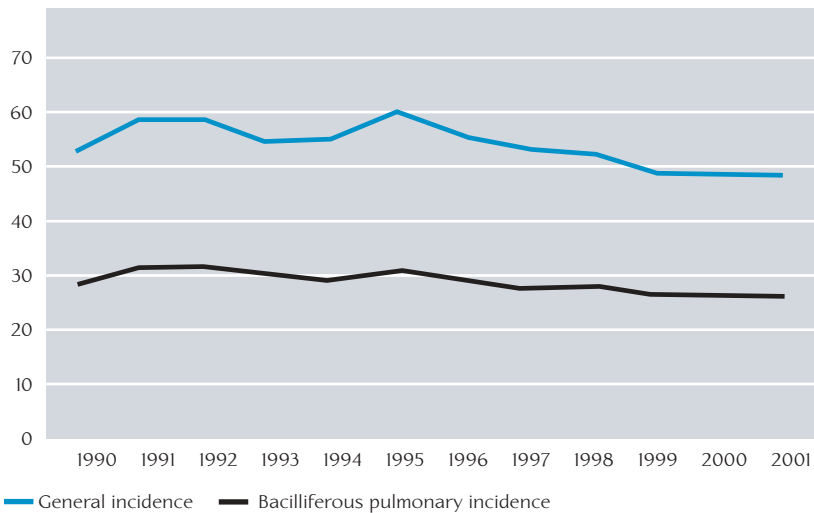
predominates in the country, rather than intradomiciliar transmission (inside the domicile), as in most African countries. However, the Ministry of Health is designing a study to analysis the effectiveness of this type of strategy in Brazil. The action adopted by the Ministry since the Interministerial Conference on Malaria, held in Amsterdam in 1992, is prompt diagnosis and treatment of the cases as a general practice and use of control methods, adjusted to specific local characteristics of transmission.

Tuberculosis falls, but is associated to 25% of AIDS cases

Brazil is among the 22 countries with the highest tuberculosis burden in the world, according to the criteria defined by the World Health Organization (WHO). Typically urban, the disease strikes mainly the economically active population and in worse social-economic conditions, in the peripheries of large cities. Throughout the country, a slow reduction in the incidence of tuberculosis can be observed. Between 1990 and 2002, the general incidence fell from 51.8 to 44.6 cases per 100,000

According to the WHO, Brazil is among the 22 countries with the highest incidence of tuberculosis in the world

Graph 4
Brazil – Rate of tuberculosis incidence – 1990–2001
(per 100 thousand inhabitants)



Source: Ministry of Health, National Tuberculosis Control Program, SES/SINAN data (Oct./2003).

inhabitants. The incidence of bacilliferous pulmonary forms also dropped. These forms have the most serious effects, since untreated patients can potentially infect, on average, ten to fifteen people a year. Overall, it is estimated that 85 thousand new cases and 3 thousand deaths from tuberculosis occur every year (See Graph 4).

With the emergence of AIDS, there has been, both in developed and developing countries, an increasing number of reported cases of tuberculosis in HIV-infected people. In Brazil, 25.5% of the AIDS cases have tuberculosis as an associated disease.

In 2002, 58% of the tuberculosis cases detected were cured. According to preliminary data of the Ministry of Health, an estimated 25% are being treated with DOTS methods.

Leprosy rate is the highest in the world

Leprosy is still endemic in the country, although significant progress has been achieved in the last years, with a

prevalence rate reduction of more than 70%. Based on the latest data disclosed by the WHO, among countries where leprosy is still constant, Brazil holds the first place in prevalence rate and the second in number of new cases. In December 2003, the rate was 4.52 infected people per 10 thousand inhabitants and 79,908 cases reported, of which 49,026 had been diagnosed that year. The higher risk areas are the states in the North, Northeast and Center-West regions.

Most of the 186 countries considered endemic in 1985 had already managed to eliminate leprosy by early 1999. Furthermore, in the last fifteen years, the average prevalence of the disease in these countries had dropped 85%. Although progress around the world has been impressive, in Brazil, India, Madagascar, Mozambique, Myanmar and Nepal, levels are still four times higher than the elimination target, in spite of the huge reduction already achieved. As defined by the WHO, eliminating leprosy means maintaining a prevalence rate of less than one case per 10 thousand inhabitants. When this occurs, there is a decrease in infection sources, which allows the natural disappearance of the disease.

PROGRAMS AND POLICIES

The Brazilian response to the AIDS epidemic completed twenty years in 2003. The model of care created in 1983, three years after the first case was reported in Brazil, was consolidated in 1986, with the establishment of the Brazilian STD/AIDS Program. In these years, the response to the epidemic was expanded and strengthened on all battlefronts: prevention, treatment, research, human rights and social organization. On the federal level, a coordination office for Sexually Transmitted Diseases (STDs) and AIDS was created in 1985, within the Ministry of Health.

The elimination of leprosy in Brazil by the end of 2000, established as a target during the 44th World Health Assembly in 1991, was not reached

The focus has been on an approach that combines prevention and treatment. Brazil is one of the few countries in Latin America that ensures free access to the antiretroviral (ARV) therapy and treatment. This strategy allowed, among other things, to reduce the rate of AIDS mortality, as well as the number of hospitalizations due to processes related to the syndrome. Universal access to ARVs is partly due to the fact that the country produces eight generic versions of not-patented ARV drugs at a low cost. Moreover, there is a continuous establishment of partnerships with non-government organizations (NGOs) on the design of policies to promote human rights of people living with AIDS. The biggest challenge is to achieve an effective drop in new cases.

In malaria control, Brazil's most recent intervention was the Plan of Intensification of Malaria Control Actions (Piacm) in the Amazon region. In 2000, the Ministry of Health launched the program in partnership with states and municipalities, to address the severe incidence of the disease in the country. The main goal of Piacm was to reduce malaria cases by 50% by the end of 2001. The strategy focused on political mobilization, structuring of the local health systems, early diagnosis and treatment, education in health and social mobilization, human resources training and inter-institutional actions.

In 1993, when the WHO declared tuberculosis a global priority, the Brazilian government initiated the design of an Emergency Plan, established in 1996. This plan recommended supervised treatment (DOTS), formally made official in 1999 by the National Tuberculosis Control Plan (PNCT). In 2001, actions were being developed based on the following axes: technical, social and political mobilization; decentralization; improved epidemiological surveillance and information system; expansion and qualification of the laboratory network; guar-

anteed access to treatment and human resources training. In the same period, three anti-tuberculosis actions were included in the Family Health Program. There were difficulties in the process of decentralization of the PNCT to the municipalities. In addition, patient care continued to take place in specialized clinics, without expansion to the basic network. Strategies for decentralization and expansion to the basic network are priorities in the current government.

The elimination of leprosy in Brazil by the end of 2000 was established as a target during the 44th World Health Assembly in 1991, but it was not reached. During the 3rd World Conference on the Elimination of Leprosy in 1999, the end of 2005 was defined as the new deadline for the achievement of the target. The strategies included the establishment of a network of clinical services under municipal management, relying on the work of community health agents and Family Health Program teams. The aim was to provide care to people in their own community and make sure that health actions included promotion, protection, diagnosis and treatment. Even so, as seen above, despite the reductions observed, the prevalence rate is still high. The country already has a considerable structure of services in place, through which diagnosis and treatment can be provided to the population, but their coverage has to be extended.

PRIORITIES AS FROM 2003

Expanded HIV testing

The Brazilian HIV/AIDS control program is recognized worldwide. The last report of the Joint United Nations Program on HIV/AIDS Program (UNAIDS) highlights the advances of the country in the treatment of people living with the disease: out of the 400

Brazil is one of the few countries in Latin America to guarantee free access to antiretroviral therapy and treatment

thousand people who have access to antiretroviral drugs in the world, 140 thousand live in Brazil. In the efforts to stabilize the AIDS epidemic, the National STD/AIDS Program's 2004-2007 Strategic Plan was designed. It has three objectives: to reduce the incidence of AIDS and other sexually transmitted diseases; to promote human rights of people living with HIV and other STDs and of the most vulnerable populations; to promote and expand access to the health care network qualified and organized by the Unified Health System (SUS).

In order to reach these objectives, the Ministry of Health, through the National STD and AIDS Program, established strategies to be adopted and targets to be reached in a period of four years (up to 2007). Among these strategies and targets, the following stand out:

- To guarantee universal access to antiretroviral and medicines for opportunist infections and STDs, with a view to providing all the ARV drugs to 100% of the people included in criteria established in the therapeutic consensuses of the Ministry of Health;
- To expand access to laboratory diagnosis of HIV and other STDs, with 80% of the more vulnerable populations tested for HIV and increase by 150% the number of HIV tests done and paid by the SUS in 2002 (with 1.8 million tests done this year);
- To expand access of pregnant women and children exposed to HIV and/or congenital syphilis to appropriate diagnosis and treatment, with 75% of pregnant women and women in labor assisted under SUS with knowledge of their serologic status for HIV infection until the moment of childbirth and 100% of the pregnant women/women in labor with AIDS receiving treatment/prophylaxis; and

- To contribute to the promotion of sexual and reproductive health and adoption of safe sexual practices in the various situations of vulnerability and different phases of the life cycle, also increasing to 1.2 billion per year the number of condoms provided by government and private sources and raising to 90% the use of condoms in non-regular sexual relations.

Aim is to reduce significantly the incidence of malaria

The National Malaria Control Program (PNCM), launched in 2003 and reviewed in 2004, is aimed at reducing the incidence of malaria, its mortality, its transmission in urban areas in the capitals, and the severe forms of the disease, besides maintaining the absence of its transmission in places where it has been halted.

The main strategy of the PNCM is early laboratory diagnosis, and special attention is conferred to surveillance, prevention and control of malaria, seeking to engage different social segments. The Amazon requires priority action, due to the concentration of incidence in the region. Detection – in less than 24 hours after the onset of the symptoms – and adequate treatment of the cases, together with training of health professionals, selective control of vectors and adequate supply of the necessary inputs for fieldwork, are all essential measures. The program's targets are:

- To reduce the Annual Parasitic Incidence of Malaria (IPA) by 15% in 2003 and the same percentage in subsequent years;
- To reduce the malaria mortality coefficient by 15% in 2003 and the same percentage in subsequent years;
- To reduce the percentage of malaria hospitalizations by 15% in 2003

and the same percentage in subsequent years;

- To reduce malaria transmission in urban areas by 15% in 2003 and the same percentage in subsequent years; and
- To prevent occurrence of autochthonous cases (emerging on the site) in places where malaria transmission has been interrupted in the last five years.

In order to reach its targets and objectives, the PNCM is based on nine components: support to the structuring of local health services; diagnosis and treatment; strengthening of malaria surveillance; human resources training; education in health, communication and social mobilization; selective vector control; research; monitoring of the PNCM; and political sustainability.

Adults with tuberculosis will be tested for HIV

The National Tuberculosis Control Program, in addition to the DOTS strategy, recognizes the importance of fighting tuberculosis horizontally, extending the actions against the disease to all health services under SUS. Therefore, its aim is to integrate tuberculosis control with basic care, including the Community Health Agents Program (PACS) and the Family Health Program (PSF). It also emphasizes the need to engage non-government organizations and partnerships with national and international organizations in the fight against the disease.

Its overall objective is to reduce tuberculosis morbidity, mortality and transmission, which includes fourteen specific objectives, among which: to improve epidemiological surveillance; to expand the DOTS strategy under Basic Care; to train professionals who work in tuberculosis control and prevention at all management levels; to

maintain adequate vaccination coverage. Based on criteria established in the program, 290 municipalities have been selected as priorities in 2004.

The program also includes the following targets:

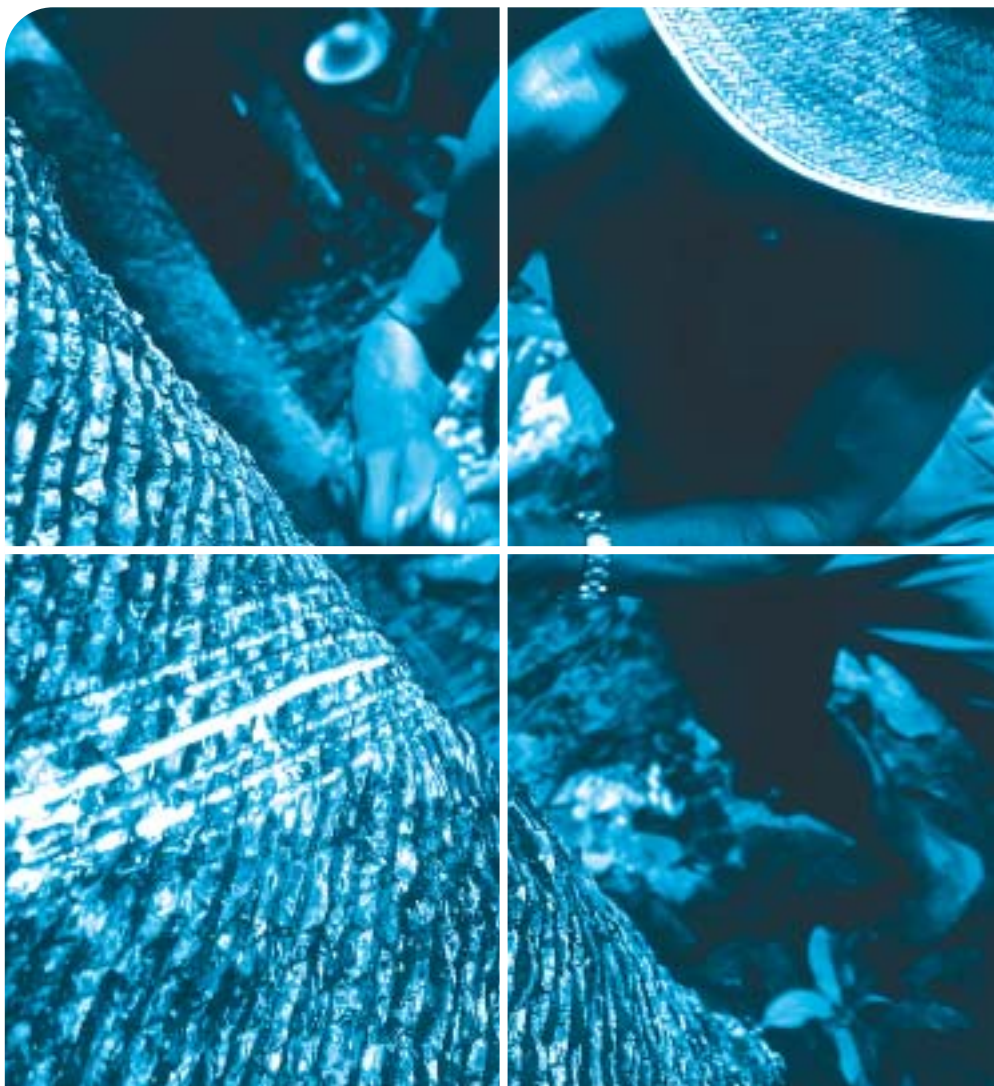
- To maintain annual detection of at least 70% of the estimated tuberculosis cases;
- To correctly treat 100% of diagnosed tuberculosis cases and to cure at least 85% of them;
- To maintain abandonment of treatment at percentages considered acceptable (5%);
- To expand DOTS to 100% of the health units in the priority municipalities and to at least 80% of the bacilliferous cases in these municipalities by 2007;
- To maintain updated records of diagnosed cases and 100% of the treatment result;
- Increase by 100% the number of respiratory symptomatic patients examined (2004-2007); and
- Offer HIV testing to 100% of adults with tuberculosis.

Plan seeks to eliminate leprosy

The aim of the National Plan to Eliminate Leprosy is to reach of prevalence levels compatible with elimination of the disease (less than one case per 10 thousand inhabitants). Among its actions are the diagnosis of expected new cases and treatment of people with the disease – with reduction, in a constant manner, of abandonment of treatment –, increasing growth of treatment discharges due to cure, and effective monitoring of all cases. In addition, continuous supply of medicines must be assured.

The strategy to enable these and other measures aimed at the control of tuberculosis and elimination of leprosy will be to decentralize the actions to all basic health units in priority municipalities; permanent mobilization of the states and municipalities; and systematic information to the population of the signs and symptoms of these diseases, particularly to those living in the higher risk priority areas.

GOAL
ENSURING
ENVIRONMENTAL
SUSTAINABILITY



7

■ TARGET 9

TO INTEGRATE PRINCIPLES OF SUSTAINABLE DEVELOPMENT INTO COUNTRY POLICIES AND PROGRAMS AND TO REVERSE THE LOSS OF ENVIRONMENTAL RESOURCES.

■ TARGET 10

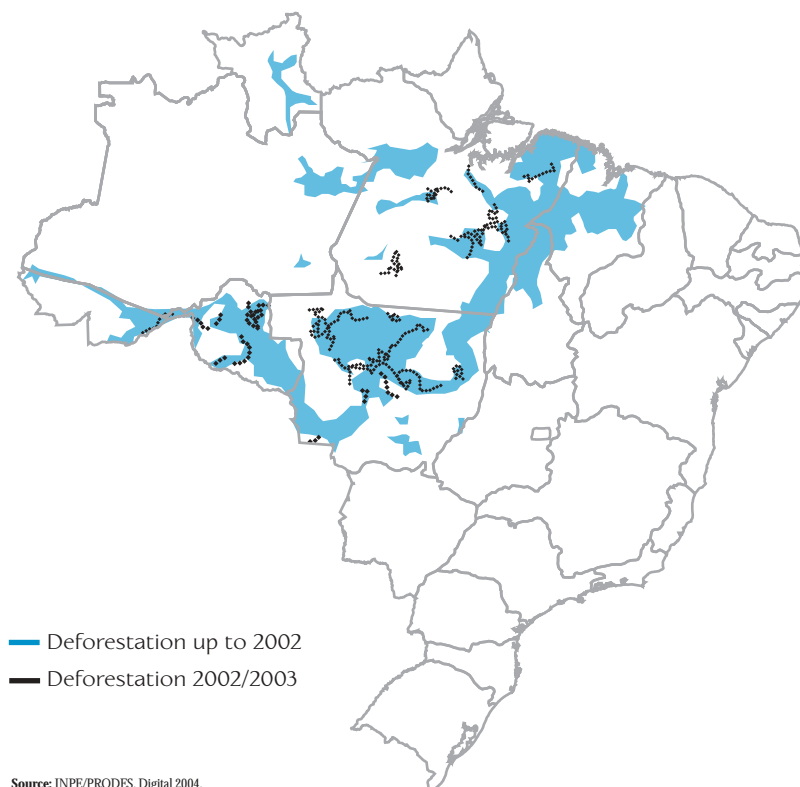
TO HALVE, BY 2015, THE PROPORTION OF PEOPLE WITHOUT PERMANENT AND SUSTAINABLE ACCESS TO SAFE DRINKING WATER AND BASIC SANITATION.

■ TARGET 11

TO HAVE ACHIEVED, BY 2020, A SIGNIFICANT IMPROVEMENT IN THE LIVES OF AT LEAST 100 MILLION SLUM DWELLERS.

POLICIES CONVERGE TO ENVIRONMENTAL SUSTAINABILITY; POPULAR HOUSING AND SANITATION STILL REPRESENT MAJOR CHALLENGES

Map 1
Arc of Deforestation in the Amazon – 2002–2003



The first target of the seventh Millennium Development Goal (Target 9) is to integrate principles of sustainable development into country policies and programs and to reverse the loss of environmental resources. The first indicator related to this goal is the proportion of land area covered by forests. In Brazil, the available information refers only to the Amazon and Mata Atlantica (Atlantic Rainforest), which, together, represent more than half of the Brazilian forests.

The Amazon has lost 570 thousand square kilometers of forests, equivalent to 15% of its original area (*See Map 1*). This significant deforestation is due to, among others factors, the settlement and colonization processes, as well as to the expansion of agricultural borders, particularly since the 1990's. According to data from the National Institute of Space Research (Inpe), the annual deforestation average was around 17.6 thousand square kilometers between 1994 and 2001. The estimate is that, if this rate is maintained, in little more than 30 years the devastated area will have doubled.

The Mata Atlantica is the most threatened forest. Its original area, 1.36 million square kilometers, was reduced to less than 8%. This process of destruction continues until today. Its domains currently shelter around 70% of the Brazilian population and concentrate the largest cities and major industrial hubs of the country. In the period between 1985 and 1995, approximately 10 thousand square kilometers were deforested, representing a loss of 11% of its remainders – special attention should be drawn to the deforestation of the Atlantic forest in the south of the Bahia State.

The ratio of protected area needed to maintain biological diversity to the total surface area is the second indicator related to the target in question. Brazil stands out as a country of great biodiversity, holding around 30% of

the tropical forest areas in the world, concentrating more than half of the known species of the fauna and flora. According to the Brazilian Institute of the Environment and Natural Renewable Resources (Ibama), Brazil shelters 15% of the microorganism species, 17% of the plant species and 10% of the animal species known in the whole world. It is estimated that there are around 850 public and private conservation areas in the country, corresponding to 8.49% of the national territory. It should be noted that these areas are irregularly distributed, with great discrepancies in protection percentages, whether among biomes, or among the different geographic regions of the country. Although the proportion of protected areas is still very small, it

should be highlighted that, in the last years, there has been a significant increase in the number of conservation areas created, considering both the number of units and the size of the areas. As can be observed in *Graph 1*, this increase started in the seventies, but was accelerated between 1990 and 2000, showing a 22% rise in the period. Many conservation areas, although legally created, still have not been fully implemented and consolidated. It is worth pointing out that indigenous reserves constitute vast areas whose natural environments are in good conservation conditions, regardless of being considered areas of biodiversity protection. The 441 existing indigenous areas amount to almost 100 million hectares.

*Mata Atlântica
has been reduced
to less than 8%
of its original area*

Table 1
Federal Conservation Units (UCs) in Brazil per biome in hectares

Biome	Biome area*	% of total	Area under sustainable use**	% of biome	Full Protection *	% of biome
Amazon	368,900,747.92	43.17	23,190,270.58	6.29	17,941,687.67	4.86
Caatinga (semi-arid)	73,683,355.62	8.62	1,617,669.77	2.20	572,089.73	0.78
Southern Fields	17,138,461.41	2.01	319,867.77	1.87	62,512.62	0.36
Cerrado (grassland and savanna)	196,777,081.36	23.03	1,401,325.79	0.71	3,342,444.80	1.70
Coastal	5,057,202.13	0.59	359,576.27	7.11	324,514.96	6.42
Caatinga – Amazon Ecotones	14,458,278.52	1.69	1,064,638.35	7.36	7,792.17	0.05
Cerrado – Amazon Ecotones	41,400,747.69	4.84	119,436.68	0.29	5,678.90	0.01
Cerrado-Caatinga Ecotones	11,510,825.60	1.35	15,527.22	0.13	383,734.50	3.33
Mata Atlântica (Atlantic Rainforest)	110,628,585.32	12.95	1,953,272.89	1.77	1,042,282.60	0.94
Pantanal (Wetland)	13,685,141.89	1.60	-	-	78,188.78	0.57
Total	853,240,427.46	99.85	30,041,585.32	-	23,760,926.74	-
Non-mapped area	1,310,194.36	-	-	-	-	-

*According to Ibama/WWF mapping elaborated in the scale 1-5.000.000, considering only the continental area.

** The overlap between the UCs was processed considering their inclusion in the most restrictive category.

Note: The biome term refers to the collection of beings inhabiting in a specific area, being adapted to the ecological conditions of a region, specially vegetation, and living in a constantly interaction process.

Source: Ibama, condition in August 28^o, 2003.

*Brazil
concentrates 30%
of the tropical forests
in the world*

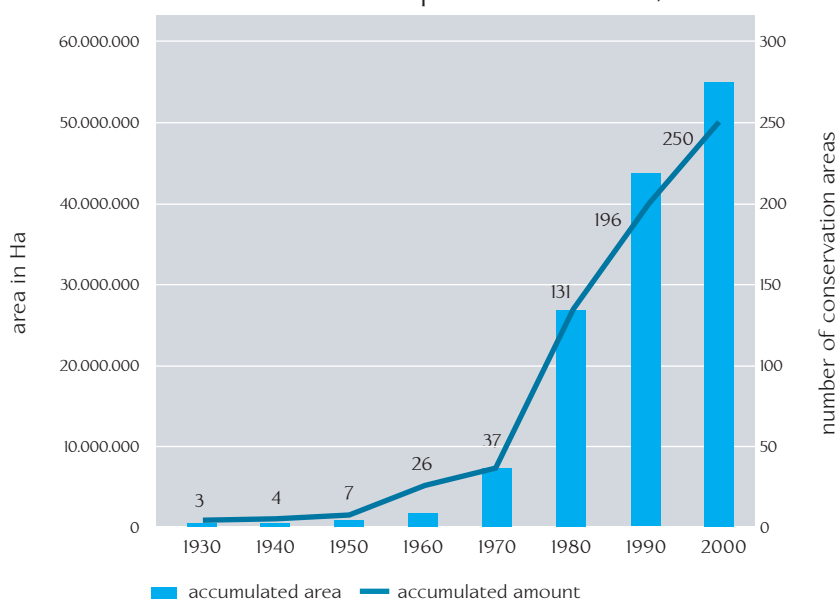
Energy use (kg oil equivalent) per US\$ 1 Gross Domestic Product (GDP) is the third indicator related to target 9. The domestic energy supply in the country and the total final energy consumption show strong correlation with the growth of the GDP. The relation

between consumption and GDP expresses the intensity with which the country uses energy, as shown in the *Graph 2*. Energy intensity generally increases in the stage of industrial growth and diminishes as countries reach a high level of development, since they begin to use more efficient technologies and transfer industries with intensive energy consumption to developing countries. This behavior, in the shape of a “bell curve” graph, can be partially avoided by developing countries as they anticipate the use of more efficient technologies and reduce energy waste.

Brazil is still experiencing moderate growth of its energy intensity, but has sought to develop and import technologies that are more efficient in energy conversion, besides undertaking energy efficiency and waste reduction programs, such as the National Program for Electricity Saving (Procel) and the National Program for Rationing the Use of Petroleum and Natural Gas Products (Conpet). The country has a relatively clean energy matrix when compared to most countries (See *Graph 4*). According to the National Energy Report of the Ministry of Mines and Energy, 41% of the Internal Energy Supply of the country comes from renewable sources, mainly hydric, while the world average is 14%, and 6% in OECD countries.

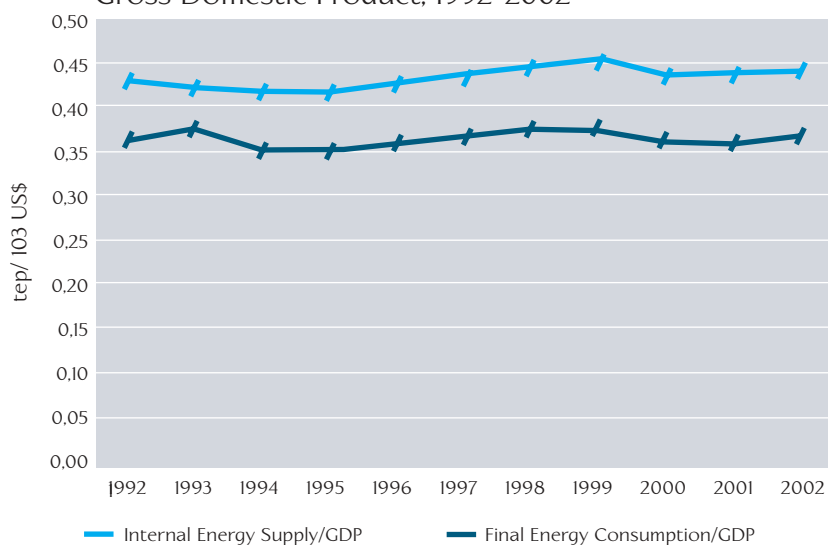
The fourth indicator for target 9 is carbon dioxide (CO₂) per capita emissions and consumption of ozone-depleting chlorofluorocarbons (CFCs). Two important sectors with regards to the emission of these gases are those of energy and cement. In the energy sector, 64.4 million tons of CO₂ were emitted in 1994, as a result of fuel burning. Based on the population projected by IBGE for that year, emissions amounted to approximately 411 kilos of CO₂ per inhabitant. The emitted amount is, therefore, relatively low when compared to other countries, due to the structure of its energy matrix, with pre-

Graph 1
Brazil – Evolution of the creation of conservation areas per decade – 1930/2000



Source: Ibama, 2004.

Graph 2
Brazil – Ratio of energy supply and consumption to Gross Domestic Product, 1992–2002



Note: GDP amounts are adjusted for 2002.

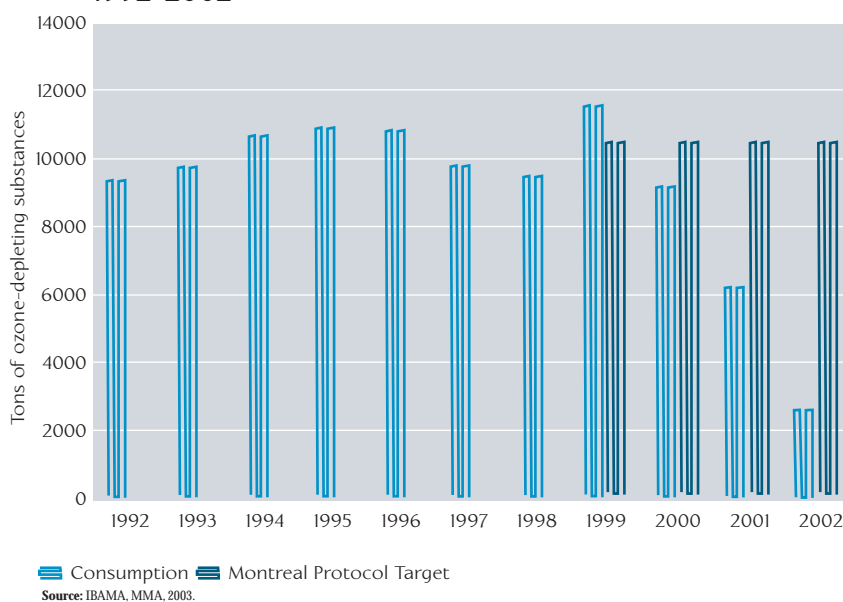
Source: National Energy Report 2003, base year 2002, Ministry of Mines and Energy.

dominantly renewable energy sources, such as hydroelectricity and biomass fuels, which together account for 41.0% of the country's energy consumption. For the same reason, Brazil has one of the lowest CO₂ emission indices in relation to GDP in the world, due to the fact that most of the electricity in the country is generated by hydroelectric plants.

In the cement sector the analysis is slightly more complex, because there are several types of cement. The Portland type consists of a mixture of clinker and plaster. CO₂ emissions occur mainly in the production of clinker. In 1992, it is estimated that 59 kilos of CO₂ per inhabitant were emitted in its production, and in 1993 and 1994, this type of emission remained constant at 60 kilos of CO₂ per inhabitant. It is worth pointing out that Brazil is a signatory of the Kyoto Protocol and, because it is a developing country, does not have targets related to the reduction of greenhouse gas emissions for the first period of commitments (2008-2012). However, the country has a significant potential to develop reforestation and renewable energy projects in the scope of the Clean Development Mechanism for Commercialization of Carbon Credits. As for ozone-depleting gases, Brazil has satisfactorily achieved the targets of reduction of CFCs consumption according to established standards.

The last indicator for target 9 is the proportion of population using solid fuels. In Brazil, the consumption of solid fuels has a significant participation in the national energy matrix (33.6%), where biomass accounts for 27% and mineral coal for 6.6% of the total of energy consumed in the country, respectively. In the case of biomass (27%), the main solid sources are firewood, sugarcane bagasse and charcoal. Firewood consumption occurs mainly in the residential, industrial and farming sectors. It is also consumed in the production of charcoal and electricity,

Graph 3
Brazilian consumption of ozone-depleting substances in relation to the goals of the Montreal Protocol 1992-2002

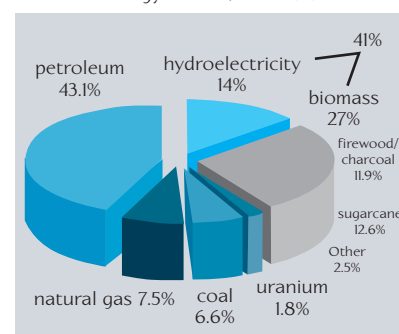


by means of different transformation processes.

In the residential sector, the traditional use of firewood takes place in regions where it is difficult to introduce Liquefied Petroleum Gas (LPG), especially in the North and the Northeast. Despite traditional practices of daily firewood collection for cooking in regions of extreme poverty, as the northeastern semi-arid, LPG has been widely accepted and widespread in the Brazilian residential sector for decades. In industry, the main consumers are the areas of food and beverages, paper and cellulose and ceramics. The country has attempted to encourage the sustainable use of biomass in its matrix by means of reforestation and agroforestry systems.

The charcoal consumed in the country is aimed at the supply of the residential, commercial and industrial sectors, with emphasis on the areas of pig iron and steel, iron-alloys and cement. Total consumption of charcoal, in 1992, was

Graph 4
Brazilian Energy Matrix, 2002 (%)



Country presents one of the loosest indices of atmospheric emission of carbon dioxide in relation to GDP in the whole world

Table 2
Brazil - Percentage of residents in private housing units with water supply in relation to the total population, by type of supply and urban rural residence- 1992/2002

Year	Type of supply		
	Water supply system	Well or pump	Other
Urban			
1992	88.3	7.7	4.0
1993	89.0	7.4	3.5
1995	89.8	7.1	3.1
1996	90.6	7.3	2.1
1997	90.6	6.7	2.7
1998	91.4	6.3	2.3
1999	91.9	6.2	1.9
2001	91.0	6.9	2.1
2002	91.3	7.0	1.7
Rural			
1992	12.3	63.9	23.7
1993	14.2	61.6	24.2
1995	16.7	61.6	21.7
1996	19.9	61.3	18.8
1997	19.6	60.4	19.9
1998	22.2	55.2	22.6
1999	25.0	55.0	20.0
2001	20.9	58.4	20.6
2002	22.7	57.9	19.4

* Exclusive the rural population of the states of RO, AC, AM, RR, PA and AP.
Note: There was no survey in 1994 and 2000.

Source: IBGE - National Household Sample Survey (PNAD) 1992-2002.

In urban areas, the percentage of the population with access to water supply system went from 88.3% in 1992, to 91.3% in 2002

7,6 million tons, which was kept practically constant until 2002, when a consumption of 7,2 million tons was registered. As regards sugarcane bagasse, it is a by-product of sugar and alcohol plants used for heating and electricity generation. In 1992, the total bagasse consumption was of 62 million tons, growing to 87,2 million tons in 2002. The sugar and alcohol sector can still expand and has great potential for co-generation use.

According to data from the 2002 PNAD, in Brazil the use of solid fuels for residential lighting and cooking is quite low, accounting for 0,3% and 8,0% of the total permanent private housing units, respectively.

Only a third of the sewer collected in Brazil is treated

To halve, by 2015, the proportion of people without permanent and sustainable access to safe drinking water and basic sanitation is the second target for the seventh MDG (Target 10). Brazil concentrates 13.7% of the surface freshwater of the world and its water production reaches 8,160 cubic kilometers per year – almost 20% of the production of all countries. However, there is a share of the population that still has no access to adequate water supply services. Some factors, such as the unequal distribution of water resources among the different regions of the country, inadequate water quality standards, in addition to irrational water use, hinder access to water that is safe for human consumption.

The first indicator for this target is the proportion of the population (urban and rural) with access to an improved water source. As observed in *Table 2*, in urban areas the percentage of the population with access to water supply system, went from 88.3%, in 1992, to 91.3%, in 2002. In rural areas, however, coverage is much lower: the population served by the general water supply system increased from 12.3%, in 1992, to 22.7%, in 2002. Adding the population with access to water from wells or pumps – which in rural areas constitute relatively adequate alternatives – the proportion of the population covered went from 76.2%, in 1992, to 80.6%, in 2002.

The proportion of the population with access to improved sanitation is the second indicator related to Target 10. With regards to this item, the data reveal a more worrying scenario. In urban areas, the percentage of the population served by the public sewer system or septic tank was 65.9% in 1992, increasing to 74.9% in 2002. In rural areas, the same coverage increased from 10.3% in 1992, to 16.0% in 2002

(See Table 3). The problems resulting from poor sanitation supply are aggravated by the lack of adequate treatment. According to the National Basic Sanitation Survey of 2000, out of the sewerage volume collected in the country, only one third is treated, which contributes to the deterioration of environmental conditions in Brazilian human settlements.

41.5% of urban dwellings are inadequate

The third target of the seventh MDG (Target 11) is, by 2020, to have achieved significant improvement in the lives of

at least 100 million slum dwellers in all over the world. The indicator chosen for this target is the proportion of housing units with access to secure tenure. However, observing the methodology proposed by the United Nations Human Settlements Program (UN-HABITAT) for its monitoring, one can observe that this indicator is more strongly related to adequate housing than to secure tenure. For this reason, in this report the indicator will be treated as relative to the number of housing units with adequate housing conditions (See Box "Methodological notes for the calculation of adequate urban housing").

In rural areas, sanitation coverage rose from 10.3% in 1992, to 16.0% in 2002

Table 3
Brazil* – Percentage of residents in permanent private housing units in relation to total population, by type of sanitary sewer and urban/rural residence – 1992-2002 (%)

Year	With sanitary sewer by type						None
	Public sewer	Septic tank	Rudimental tank	Ditch	Straight to river/lake or sea	Other	
Urban							
1992	45.5	20.4	22.9	2.0	2.5	0.3	6.2
1993	45.4	22.3	21.9	2.2	2.4	0.5	5.2
1995	46.0	22.4	22.1	1.9	2.5	0.5	4.6
1996	46.9	25.4	19.4	1.5	2.5	0.1	4.1
1997	47.6	24.0	20.1	1.7	2.5	0.1	3.9
1998	49.3	23.9	19.4	1.8	2.2	0.1	3.2
1999	50.6	23.2	19.6	1.6	2.0	0.1	3.0
2001	50.8	23.1	18.7	1.6	2.2	0.2	3.3
2002	51.6	23.3	18.1	1.6	2.4	0.1	2.9
Rural							
1992	3.0	7.3	32.7	3.0	4.4	0.6	49.0
1993	3.1	8.1	34.1	3.4	4.1	1.0	46.3
1995	3.2	9.9	35.1	3.9	4.2	1.7	42.0
1996	3.5	13.8	35.5	3.9	3.7	0.4	39.1
1997	3.5	10.9	39.0	3.4	3.9	0.7	38.7
1998	4.5	10.3	39.9	4.0	4.6	0.5	36.3
1999	4.5	11.2	41.2	3.6	4.2	0.7	34.7
2001	3.1	10.6	40.5	4.7	4.1	0.8	36.2
2002	3.7	12.3	40.7	5.9	3.9	0.6	32.9

* Exclusive the rural population of the states of RO, AC, AM, RR, PA and AP.
Note: There was no survey in 1994 and 2000.

Source: IBGE - National Household Sample Survey (PNAD) 1992-2002.

The proportion of urban dwellings in adequate housing conditions went from 50.5% in 1992, to 59.5% in 2002

In Brazil, there has been an increase in the proportion of urban houses with appropriate housing conditions, going from 50.5%, in 1992, to 59.5% in 2002 (See Table 4). Despite the improvement in average housing conditions of Brazilians, a considerable share of urban housing stock (41.5%) still presents some sort of housing inadequacy, either in relation to increased density, or to lack of water and sanitation services, ill-defined property rights, non-compliance with civil construction standards or houses built with non-durable materials. The lowest indices of housing adequacy in relative terms are found in the North region (26.5%). If appropriate water supply provided by well or spring channeled to the housing unit or to the property is considered, the level of adequacy of urban housing units climbs to 61.6% in the country as a whole and to 36.7% in the North region.

The federal government focuses on national policies for precarious settlements in the areas defined by IBGE as

special sectors of subnormal settlements, which correspond, in general, to slums and similar settings. According to data from the demographic censuses of the IBGE, the population living in slums and similar settings, corresponding to 3.1% of the total population in 1991, grew at a rate of 4.3% a year between 1991 and 2000, period in which the average growth of the Brazilian population was only 1.6% a year (See Graph 5). The 2000 census registered the existence of 1.7 million of housing units located in this type of settlement, encompassing 6.6 million people, or 3.9% of the Brazilian population. Out of this total, 78.5% are located in the nine main metropolitan areas of the country – Belém, Fortaleza, Recife, Salvador, Belo Horizonte, Rio de Janeiro, São Paulo, Curitiba and Porto Alegre. The metropolitan areas of São Paulo and Rio de Janeiro together, account for 44.6% of the total slum dwellers.

The social and environmental prob-

Methodological notes for the calculation of adequate urban housing

The proportion of urban housing units with adequate housing conditions was calculated based on the microdata of the National Household Sample Surveys (PNADs) of IBGE, using the methodology proposed by UN-HABITAT, duly adapted to the Brazilian context and to availability of data. Out of the total permanent urban private housing units, the ones presenting at least one of the following types of housing inadequacies were subtracted:

absence of water supplied through the general system, channeled to the housing units or to the property; absence of sanitation supplied through the general system or septic tank; insufficient living area, measured by increased density, that is, housing units with more than three people per sleeping room; inadequate structural quality, due to the use of non-durable materials in the walls and ceiling, or to non-compliance with building and urban standards (subnormal

settlements); and insecurity of tenure, as in the case of houses built on properties belonging to others and other housing conditions, such as invasions. It is worth pointing out that none of the concepts adopted, whether by UN-Habitat or IBGE, clearly represent either the number of precarious human settlements in Brazil or the number of housing units with insecurity of tenure, which is the object of study on the part of the Brazilian government.

blems resulting from the precariousness of housing conditions are particularly serious in major urban centers, where the phenomena of the slums and informal housing are more visible. The probability of existence of precarious settlements increases with the size of cities. According to data from the Basic Municipal Information Survey (Munic) of IBGE for 2001, all the Brazilian cities with over 500 thousand inhabitants had slums, 93.8% had irregular land occupation, 87.5% had clandestine land occupation and 65.6% reported the existence of slum tenements or similar housing conditions, showing that the problems of urban land scarcity and adequate housing are more serious in major cities and the metropolitan areas of the country. The most affected social groups are the poor and the afro-descendant population, who live in areas with higher levels of inadequate housing and do not have access to credit for housing purposes.

PROGRAMS AND POLICIES

Policies aim at environmental sustainability

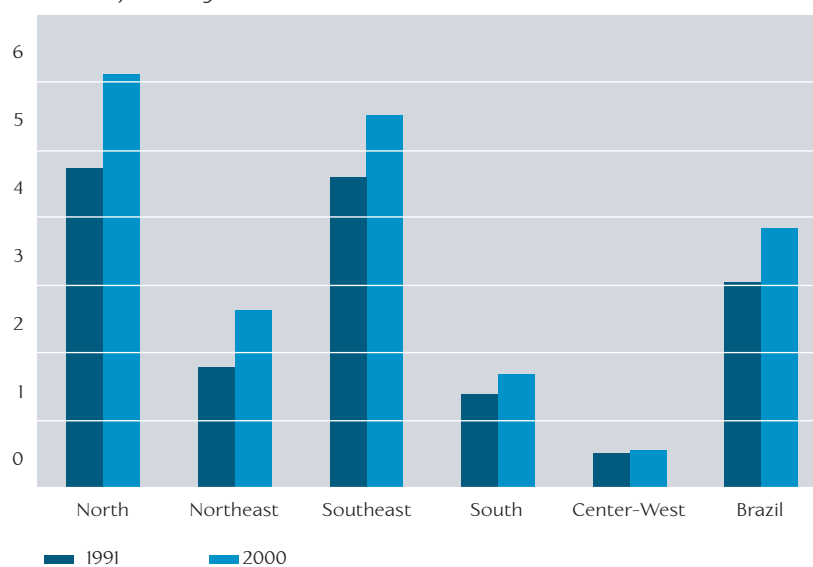
With regards to forest protection policies, the Brazilian government has invested in capacity-building within Ibama and state environmental bodies, and has sought to promote economic development based on the sustainable use of forests, in addition to increasing the inspection of forest areas to reduce illegal exploitation. There have been changes in legislation and more encouragement to forest stewardship. The future of forests in Brazil will depend on the consolidation of policy instruments, such as the Economic Ecological Zoning (ZEE), Environmental Zoning, and environmental control of economic development areas. Among the main actions related to the subject of forests, one should highlight the creation, in 1998, of the Program for Prevention

Table 4
Brazil – Urban permanent private housing units with adequate housing conditions according to Major Regions – 1992-2002 (%)

	North	Northeast	Southeast	South	Center-West	Urban Brazil
1992	23.3	31.7	62.8	52.3	30.5	50.5
1993	23.2	33.7	64.3	54.4	34.4	52.3
1995	24.5	34.9	66.5	56.3	32.2	53.7
1996	26.2	38.6	67.3	59.6	35.8	55.7
1997	27.0	37.1	68.5	57.2	37.4	55.8
1998	26.9	38.6	70.2	59.4	39.2	57.4
1999	29.3	40.0	70.6	62.1	38.6	58.4
2001	25.5	42.2	70.6	62.1	38.5	58.1
2002	26.5	42.9	71.8	65.2	39.5	59.5

Source: IPEA, based on microdata of the PNADs of IBGE.

Graph 5
Brazil – People in subnormal agglomerations according to Major Regions (%)



Source: IBGE – Universe: Demographic Censuses of 1991 and 2000.

and Control of Slash-and-Burn Practices and Forest Fires in the Arc of Deforestation (Proarco/Ibama). Its function is to identify and monitor alterations in the native plant cover in the Arc of Deforestation (area of the Amazonian forest encompassing fifty municipalities), by means of satellite

*Six million
Brazilians live
in slums or other
forms of precarious
settlements*

images and geographic information systems. Also deserving mention is the implementation, as from 2000, of the National Forests Program (PNF) for the promotion of sustainable forest development.

As to the legal framework aimed at the protection of biodiversity in Brazil, the following should be highlighted:

- The Biosafety Law, which establishes guidelines for the control of activities and products originated through biotechnology and creates the National Technical Commission on Biosafety (CTNBio), aiming at the formulation of a national biosafety policy and the establishment of rules and regulations related to activities involving genetically modified organisms;
- The Law of Environmental Crimes, introducing the legal framework and consolidating penalties to environmental crimes;
- Law 9.985/00, which institutes the National System of Conservation Areas (SNUC) for forest protection and conservation of biodiversity. The establishment of SNUC created the possibility of increasing the proportion of conservation areas to maintain the biological diversity of the country. SNUC should enable the implementation of a system of conservation areas that integrates, under one single legal framework, conservation areas of the three spheres of government (federal, state and municipal); and
- Decree 4.339/02, which creates the Project of Conservation and Sustainable Use of Brazilian Biological Diversity (Probio) in the scope of the Convention on Biological Diversity. The objective is to evaluate each Brazilian biome to provide inputs for the design of actions directed at the conservation of biodiversity, by means of significant

increase of environment protection areas.

With regards to the different forms of intervention of the Brazilian government in the energy area, the National Pro-Alcohol Program (*Proálcool*) deserves mention. Created in 1975, this program enabled a massive introduction of fuel alcohol as an additive and as a substitute for petrol in the transport sector. Currently, the emergence of bi-fuel engines (flex fuel, fired both by petrol or alcohol) promises to further extend the participation of alcohol in the national energy matrix. There are two other important programs for the country: National Program for Electricity Saving (Procel) and the National Program for Rationing the Use of Petroleum and Natural Gas Derivatives (Conpet). Both were established in 1991 and are under the management of the Ministry of Mines and Energy. Finally, with regards to eliminating toxic gas emissions, the National Plan for the Elimination of CFC was created in 2001, coordinated by the Ministry of Environment, aiming at eliminating the use of CFCs in production sectors and at the qualification of technicians in the area of refrigeration for adequate use of existing CFCs in the equipment still in operation.

Investment in basic sanitation drops as from 1999

Government efforts to reverse the general scenario that characterizes basic sanitation in Brazil were hindered by the fiscal and economic restrictions faced by the country in the last decade, which resulted in fluctuations in the yearly average of investment in the sector. Between 1995 and 1998, the percentage of participation of federal investment in sanitation in the Gross Domestic Product increased, gradually, from 0.04% to 0.19%. Since 1999, except in 2001, this participation was drastically reduced due to policies to

Legislation already provides for biodiversity, biosafety and prevention of crimes against the environment

cut back spending adopted by the government in order to reduce public indebtedness and to promote fiscal adjustment. This generated a negative impact in the performance of the main sanitation programs implemented at the time.

Resources for housing grow, but participation is still modest

As to the evolution of investment in housing and urban planning along time, an increase of federal resources was observed in the 1995-2001 period, even though the participation of these areas in the Gross Domestic Product is still quite modest, going from 0.1%, in 1995, to 0.3%, in 2001, reaching a maximum of 0.5% in 2000. Despite the effort, most of the investment carried out with federal resources did not follow the regional nor the social profile of the housing needs, being earmarked, preferentially, to the richest regions of the country, as the South and the Southeast, and to the classes with higher incomes. The resources invested by the federal government in housing programs earmarked to the population with a gross family income of up to three minimum wages represented less than 20% of the total investments, despite the fact that housing needs are concentrated in this income category.

In the last decade, the Brazilian government undertook several actions to promote access to adequate housing. From the legal point of view, the most significant advances were the inclusion of housing rights in the minimum social rights of the Brazilian population through Constitutional Amendment n. 26, of 2000, the promulgation of the Statute of the City and Provisional Measure n. 2220, in 2001, which created and regulated new legal and urban instruments to ensure that the social function of properties, housing rights and the right to the city can be duly materialized. The institution of the

Zones of Special Social Interest (Zeis) and of Areas of Special Social Interest (Aeis) in several Brazilian municipalities, allowed for more flexible urban parameters and technical standards for public infrastructure service rendering in popular settlements, legally backing local urbanization and land regularization initiatives, allowing the improvement of housing conditions, social inclusion in these settlements, reduction of occupations in risk areas and the minimization of reallocation of existing housing units. Municipal land regularization programs have also privileged the granting of property rights to women heads of families, in the understanding that they assure the benefit will stay in the family. In 2001, 11.6% of the total of municipalities and 84.4% of the municipalities with more than 500 thousand inhabitants had Zeis.

The federal government also carried out several programs and actions directed towards the diversification of the forms of access to housing, such as: programs of support to the construction of popular houses; urbanization and regularization of precarious settlements; loans for expansions and building in owned land; lease with purchase option; production of urbanized plots; emergency actions and prevention of occupations in risk areas; building of houses for residents in land reform settlements, indigenous and quilombola (slave descendant) communities, in addition to the supply of direct subsidies to the poorer population. The efforts of the federal government are added to the programs and actions undertaken by state and local governments. According to IBGE data, in 2001, 78.1% of the municipalities with over 500 thousand inhabitants implemented housing programs or actions for building houses; 56.3% undertook actions to provide plots; 53.1%, urbanization of settlements; 68.8%, land regularization programs; 34.4%, provision of building materials; 18.8%, improvement of slum tenements; and 18.8%, other housing programs.

Federal Government has been implementing programs to expand and diversify means to allow the population to buy their own dwellings

PRIORITIES AS FROM 2003

Government defines 900 areas for conservation and sustainable use

Since 2003, the federal government has given priority to policies aimed at ensuring environmental sustainability. In the case of biodiversity protection, deserves mention the approval of a decree, on May 21st, 2004, defining 900 priority areas for conservation, sustainable use and distribution of benefits of the Brazilian biodiversity. These selected areas encompass 248 million hectares of the Amazon, 37 million hectares in the *Caatinga* (semi-arid), 74 million hectares in the *Cerrado* (grassland and savanna) and in the *Pantanal* (wetland), 45 million hectares of *Mata Atlântica* (Atlantic Rainforest) and the Southern Fields, and 109 million hectares in the Marine Coastal Zone.

In November 2003, two events were held in Brasilia in defense of the Brazilian natural heritage. The 1st National Conference on the Environment mobilized, in its preparation phase, more than 60 thousand people in the National Juvenile Conference for the Environment. Between April and October, meetings were held, with representatives of the civil society and students in all states to approve the basic text and to elect delegates for the national meeting. Around 2 thousand delegates debated and approved the proposals in the three days of the meeting. Among priority proposals of the National Conference on the Environment, is the consolidation of the National System for the Environment (Sisnama), which seeks better linkages among the federal, state and municipal levels of government.

Another commitment towards guaranteeing the conservation of Brazilian biodiversity was undertaken during the Seventh Conference of the Parties (COP 7) to the Convention on Biological Diversity (CDB), in February

2004. On the occasion, it was signed a Protocol of Intentions in which the Brazilian government and the signatory civil society institutions commit themselves to establishing a common agenda, aiming to implement the goals and targets defined by the Work Program for conservation areas of the CDB. With the purpose of guaranteeing the effective implementation of the agreement, the National Forum on conservation areas was created, and the National Plan for Protect Areas is underway. Both should constitute instruments to enable the country to achieve the global target of significant reduction of the loss of biodiversity rate by 2010, established by governments in the World Summit on Sustainable Development, and the target of protection of at least 10% of each ecoregion by 2010, defined in the Global Strategy of Plant Conservation. Such targets were adopted in the strategic plan of the Convention on Biological Diversity, which incorporated contributions from the 5th World Congress on Parks, in 2003, in Durban, South Africa.

In order to address the deforestation in the Amazon region, several actions are being implemented, some of which deserve special mention, such as the Program for Protection of Amazon Areas, aiming to increase the proportion of conservation areas in that region; the Sustainable Amazon Program, contemplating policies for environmental management, land-use planning, sustainable production, social inclusion, infrastructure and a new model of financing, enabling integrated sustainable development policies. Also aimed at facing deforestation, the Presidential Decree of July 3rd, 2003, was issued, establishing an inter-ministerial work group with the purpose of proposing measures and of coordinating actions aimed at reducing the deforestation indices in the Legal Amazon.

The debate on environmental issues

There are 900 natural areas defined as conservation priorities throughout the country, from the Amazon to the Southern Fields

has encouraged the Ministry of Environment to design policies to render environmental conservation compatible with economic development. To this end, the Plan for Sustainable Development of the Area of Influence of the BR-163 (*Cuiabá –Santarém* highway) was proposed, with a view to implement, in the region surrounding the highway, a set of public policies structuring and inducing sustainable development combining both the guarantee of social inclusion and the conservation of natural resources with the process of paving the highway. The plan is being designed in partnership with the governments of the States of Mato Grosso, Pará and Amazon, municipal governments, company and workers entities, as well as civil society organizations.

Moreover, in the period of 2004-2007, several programs of environmental public policies have been prioritized, especially the development of the Brazilian Agenda 21; the promotion and expansion of drinking water supply and conservation of water resources; the integrated management and the sustainable development of Amazonian natural resources; the expansion and consolidation of the National System of Conservation Areas, aiming at protecting Brazilian biodiversity; and the reduction of the rate of growth of desert areas or in the process of desertification.

Efforts are being employed with a view to intensifying the production of alternative energy sources. The Ministry of Environment is working with the Ministry of Mines and Energy in the implementation of a new model of management for the electricity sector, whose innovations include the incorporation of the environmental dimension right from the investment planning phase. In 2004, the Program of Incentive to Alternative Sources of Electricity was created (Proinfra), contracting 3,300 MW of renewable energy, being 1,100 MW for each source:

aeolian, small hydroelectric plants and biomass. Brazil is also renowned as a major fuel alcohol producer and is planning, for the next years, large-scale production of bio-diesel for domestic consumption and exportation.

Considering the programmatic content of the 2004-2007 Multi-Year Plan, the following programs are the most relevant for the achievement of Target 9:

- The National Program for Forests, which contemplates actions for the promotion of sustainable stewardship. The target is to promote an annual index of plantation of 450 thousand hectares, reaching an area of 700 thousand hectares in 2007;
- The Program for Conservation and Recovery of Brazilian Biomes, which contributes to the establishment of ecological corridors;
- The Brazilian Protected Areas Program, which has as target the creation of 25 million hectares of conservation areas;
- The Program for Conservation, Sustainable Use and Recovery of Biodiversity, whose target is the conservation of 141 species of threatened fauna and the recovery of 48 thousand wild animals apprehended in inspection operations or removed from their natural habitat;
- The Program on Climate Change and Environment, with actions to promote projects for the use of bio-fuels and alternative sources of renewable energy;
- Support to projects for the use of energy from methane emissions resulting from solid waste; and
- The Socio-Environmental Development Program (*Proambiente*), aimed at family farming production.

The electric energy program provides for 3,300 MW from aeolic source, biomass and small hydroelectric plants

Priorities up to 2007 include expansion of the supply of drinking water and conservation of water springs, as well as control of desertification

Target is to double investment in basic sanitation

As from 2003, the environmental and basic sanitation sector began to show signs of recovery and to receive priority attention from the government. The institutional framework of the sanitation policy is being rearranged. The government has attempted to allocate, in its medium-term planning and budget instruments, resources in greater amounts than those spent in the last years. In this perspective, the Executive Branch prepared the Sanitation Draft Bill, which should be submitted to the National Congress for discussion, establishing new guidelines and the National Policy for Environmental Sanitation. This Draft Bill defines more clearly the relations between federative entities in metropolitan areas and encourages associative arrangements not only among municipalities, but also among these and the States in the process of planning and operation of water supply and sanitation services. As to investment, the Multi-Year Plan includes several programs and actions aimed at the provision of water and sanitation, with budgetary provisions that express the government's intention of, at least, doubling the yearly average of investment made along the last nine years.

The Multi-Year Plan provides for the investment of resources in the order of R\$ 16.2 billion in sanitation (water and sewerage). Between the end of 2003 and mid-2004, contracts totaling R\$ 6.4 billion were signed, considering all federal government bodies involved with environmental sanitation actions.

In urban areas, the process of resource allocation will prioritize metropolitan areas and small municipalities. Brazil has 27 institutionalized metropolitan areas and three Integrated Development Regions (Ride), which concentrate over 40% of the Brazilian

population. Within this universe, priority is focused on metropolitan areas under risk, which encompasses approximately 30% of the Brazilian population and a large part of the sanitation deficit and of the housing considered inadequate in the country. These regions are composed of the metropolitan areas of Belém, Fortaleza, Recife, Salvador, Belo Horizonte, Rio de Janeiro, São Paulo, Curitiba, Porto Alegre, Manaus and the Brasília Ride.

In small municipalities, priority is given to increased coverage of water supply services, in addition to appropriate waste treatment, including the sewerage collection system and individual treatment. Around 40% of the Brazilian population lives in less than 10% of the Brazilian municipalities.

Out of the total number of municipalities, 85% have a population of less than 30 thousand inhabitants and present lower sanitation services coverage indices than the national average. In rural areas, the expansion of sanitation services also constitutes a government priority for the next four years, notably with regards to catering for indigenous populations and the residents of extractivist reserves areas, quilombolas and land reform settlements.

In addition to increasing access to sanitation and water supply in urban and rural areas of the country, the government is concerned with the sustainability of this access, especially with regards to the quality of the water used by the population. For this reason, the Ministry of Health is structuring the National System for Environmental Surveillance in Health, which will have as one of its main components the surveillance of the water quality for human consumption, intensifying the enforcement of Brazilian legislation updated in 2000, which establishes the procedures and responsibilities related to control and monitoring actions for

human consumption water, as well as adopting a new standard of potability. Such legislation is also applicable to alternative sources of water supply.

Government Focuses on Popular Housing

The urbanization and regularization of informal urban areas, prevention of disordered urban growth and of occupation of risk and environmentally fragile areas, and guarantee of secure tenure compose the main challenges to be faced by the current government in order to provide access to adequate housing to all and to guarantee the environmental sustainability of Brazilian human settlements. From the institutional point of view, one can highlight the creation of the Ministry of Cities in January 2003, responsible for designing a national policy of urban development and of sectoral policies in the areas of housing, sanitation, transport and urban mobility, territorial planning and the land issue. Among the initiatives in the scope of this Ministry one can point out the institution and operation of the Cities Council, with representatives of several segments of society, as a result of a sequence of conferences involving 3,547 municipalities; the proposal for the creation of the National System and the National Policy on Housing; the new legislation of urban ground partitioning and the mobilization of municipalities for the implementation of the Statute of the City, by means of Participatory Master Plans, whose key role is to develop a land policy for the low-income population.

Other relevant facts for the achievement of improved housing conditions of low-income families were the launching of the *Crédito Solidário* Program, in 2004, to develop projects in partnership with popular cooperatives and associations, and the increase of resources earmarked to the Housing Subsidy Program. The approval, by the Federal House of Representatives, in

June 2004, of the Bill of Law n. 2710/92 – originated from popular initiative, establishing the National Fund for Popular Housing, currently going through the Senate – will also be of critical importance for guaranteeing the right to adequate housing. The initiatives of the federal government for the period of 2004-2007 focus on the fulfillment of the housing needs of the population with a family income of up to five minimum wages, in particular, actions for social interest housing, urbanization of slums and land regularization in metropolitan areas; and also actions of prevention and elimination of the risk situation for the population.

With regards to the programmatic content of the Multi-Year Plan, the most relevant points for the achievement of Target 11 are the following:

- The Program of Urbanization, Regularization and Integration of Precarious Settlements, contemplating integrated actions of urbanization, environmental sanitation, prevention of risks, improvement of housing conditions and land regularization. The actions “Improvement of the Conditions of Housing, Urbanization” and “Environmental Sanitation in Precarious Settlements” aim to benefit 843 thousand families in the period, involving investment in the order of R\$ 4.23 billion; the action “Support to Land Regularization” – *Papel Passado* aims to guarantee the secure tenure and the right to the city for 787 thousand families between 2004-2007, acting in urbanized areas or in areas undergoing urbanization processes, and to provide for investment in the order of R\$ 80 million; the action “Prevention and Eradication of Risks” will support civil defense actions in 95 Brazilian municipalities;
- The Program for Social Interest Housing, which will contribute with

R\$ 15 billion in investment (considering the 2004 Federal Government General Budget and R\$ 540 million from the Social Development Fund, added to the action of Housing Financing for Popular Cooperatives and Associations – *Crédito Solidário*), aimed at the housing needs of 1.54 million families with income lower than five minimum wages;

- The investment of R\$ 400 million of the Federal Government General Budget in environmental sanitation works in metropolitan areas, in projects whose eligibility criteria favor precarious settlement areas; and
- The actions of support to construction works for preventing disasters, training of Civil Defense agents and implantation of the National Center for Disaster Management contained in the Program of Prevention and Preparation for Emergencies and Disasters, under the Ministry of National Integration.

Despite the efforts undertaken to improve the living conditions of slum dwellers, investment in the sector comes across barriers imposed by macroeconomic restrictions, scarcity of subsidized resources, increased levels of poverty and the growing slums of major cities of the country. It is necessary to increase the federal resources earmarked to investment in slums and to the National Fund for Social Interest Housing, as well as to leverage resources of the other levels of government, in order to achieve a significant improvement in the quality of life of slum dwellers.

GOAL
ESTABLISHING
A GLOBAL PARTNERSHIP
FOR DEVELOPMENT



BRAZIL BUILDS PARTNERSHIPS FOR DEVELOPMENT

TARGET 12

To develop further an open trading and financial system that is rule-based, predictable and non-discriminatory.

TARGET 13

To address the least developed countries' special needs.

TARGET 14

To address the special needs of landlocked and small island developing States.

TARGET 15

To deal comprehensively with developing countries' debt problems through national and international measures to make debt sustainable in the long term.

TARGET 16

To develop decent and productive work for youth, in cooperation with the developing countries.

TARGET 17

To provide access to affordable essential drugs in developing countries, in cooperation with pharmaceutical companies.

TARGET 18

To make available the benefits of new technologies – especially information and communications technologies, in cooperation with the private sector.

The eighth Millennium Development Goal proposes the establishment of a global partnership able to reduce, in time, the deep differences between richer and poorer nations. Its targets and indicators focus on the actions that developed countries should carry out in order to help reduce structural restrictions preventing global economic growth and the potential progress of those in the process of development.

In recent years, in most developing countries, the level of productive investment has been lower than expected; the qualification of labor has been residual; and the incorporation of technology, insufficient. In the current international scenario, these deficiencies require more than the individual efforts of each government. There needs to be a broad effort, on the part of nations, especially the richer ones, for the construction of economic, political and social relations that are more favorable to development, in addition to substantial increase of resources aimed at international cooperation. Otherwise, it will not be possible to carry out the project designed by all nations for 2015, of construction of a more equitable and socially inclusive world.

Brazil has undertaken an active role in this global task of construction of a less asymmetric reality. From the fight

against hunger to sustainable development, the Brazilian government has defended in several international forums initiatives aiming, in different ways, at building partnerships that contribute to improvements in the living conditions of populations in low and medium income countries.

Brazil moves forward in the global fight against hunger and poverty

In the World Economic Forum, held in Davos, in January 2003, the Brazilian government defended a new economic and social order, able to combine economic growth with social justice. Five months later, in Evian, this objective was reiterated in the G-8 Summit. On both occasions, Brazil suggested the creation of an international fund to address exclusively the fight against hunger and poverty, and drew attention to the need for alternative financial sources for the economic development of poor countries.

In the following September, together with India and South Africa, Brazil created the IBAS Trust Fund for Hunger and Poverty Alleviation, in the opening of the 58th United Nations General Assembly. Established within the scope of the UNDP, the fund will have the mission of disseminating and reproducing successful social projects in areas such as health, education, sanitation and food security, with the active participation of the private sector, by means of voluntary contributions from companies. The implementation of the projects will be led by agencies of the United Nations System, according to their competence areas. Although the allocated resources have only reached around US\$1.6 million so far, it is important to point out that this is the first fund established exclusively by developing countries aiming to contribute to the improvement of living conditions in least developed countries.

In January 2004, another partnership

was formed, this time with France and Chile. On the occasion, the Presidents of Brazil, France and Chile announced the Geneva Declaration, recently subscribed by Spain. This declaration set up an action program to identify alternative financing sources for development and for fighting hunger and poverty. The technical group that was composed discussed new sources of resources to be channeled to the program, among which one should point out: incentive to voluntary contributions by socially responsible companies; taxation on financial transactions; and taxation on the trade of certain weapons. The group is also studying the British proposal for the establishment of an international financial mechanism to support development, called International Finance Facility (IFF). The conclusions contribute to debates during the world leaders meeting, convened by the Brazilian government, to be held on 20th September, just before the opening session of the 59th United Nations General Assembly. It is expected that the meeting will draw increased attention to the theme of hunger and poverty reduction, as well as renew commitments related to partnerships aimed at the implementation of the MDGs.

Heavily indebted nations received debt cancellation

With regards to the promotion of external debt relief of less developed countries for the reduction of poverty, Brazil (with great difficulty, given its condition of debtor as well) has followed the recommendations of the Paris Club for the concession of discounts to its debts, under the Heavily Indebted Poor Countries (HIPC) Initiative.

The great majority of Brazil's debtor countries face serious problems in maintaining debt service and would need substantial debt reduction in order to manage interest payment and

amortizations. Brazil has not received debt payments from some countries since the 1980's. Prior to the establishment of the so-called Naples Terms Treatment (67% discount), Brazil sought to proceed with bilateral negotiations by using Brazilian external debt bonds acquired in the secondary market (swap). With the appreciation of Brazilian papers, however, negotiated nowadays with a maximum discount lower than 17%, and with the increase of the reduction granted to our debtors in the Paris Club (between 90% and 100%), this instrument is no longer effective for the bilateral treatment of HIPC's debt, nearly eliminating the possibilities for Brazil to offer comparable treatment to the other creditors of the Paris Club through the swap mechanism.

The HIPC Initiative constitutes an integrated and coordinated debt reduction approach requiring the participation of all creditors: bilateral (Paris Club and other bilateral creditors), multilateral and commercial. After undergoing a broad review, the Initiative underwent modifications, in September 1999, aimed at enabling debt relief to take place in a more expedite, profound and extensive manner, and also in order to strengthen the link between debt relief, poverty reduction and social policies. After such modifications, the Initiative was renamed Enhanced HIPC Initiative.

The IMF classified 41 countries as potentially eligible in the category of "Heavily Indebted Poor Countries". This category includes 32 countries that had, in 1993, a per capita income equal to or lower than US\$ 695 and a debt service ratio (debt/exports) higher than 220% in the same year. It also includes nine countries granted debt reduction by the Paris Club. The HIPCs are the following (countries marked in bold are Brazil's debtors): **Angola**, Benin, **Bolivia**, Burkina Faso, Burundi, Cameroon, Chad, **Congo**, **Ivory Coast**, Ethiopia, Gambia, Ghana,

The Brazilian Government proposes to IMF the creation of special credit lines for countries that have been hit by external crises

Guinea, Guinea Bissau, Guyana, Honduras, Yemen, Laos, Liberia, Madagascar, Malawi, Mali, **Mauritania**, **Mozambique**, Myanmar, **Nicaragua**, Niger, Kenya, Central African Republic, **Democratic Republic of Congo** (formerly Zaire), Rwanda, Sao Tome & Principe, **Senegal**, Sierra Leone, Somalia, **Sudan**, **Tanzania**, Togo, Uganda, Vietnam and **Zambia**.

Considering the HIPCs, the discounts granted by Brazil totaled US\$ 993.1 million and, taking into account other developing countries, especially in Latin America, US\$ 149.9 million. The amounts are significant, given the size of the Brazilian economy, relatively smaller than that of more active countries in Official Development Assistance (ODA), and given the level of new resources needed to guarantee the attainment of the MDG, as measured by the IFF.

Since the HIPC Initiative is to expire at the end of 2004, the Brazilian government proposes the immediate start of a transparent dialogue about new mechanisms to guarantee the sustainability

of the debts of countries with a lower degree of relative development. In this new stage, the focus would be on how to expand the benefit to developing countries facing harder social situations, and that would effectively commit themselves to achieving the MDGs.

Finally, it is worth emphasizing that Brazil has always defended the need for new resources for the different initiatives of assistance to highly indebted poor countries, which would have a complementary use to those already planned for disbursement.

In addition to the countries in *Table 1*, Brazil implemented, in 1992, the London Terms Treatment, granted by the Paris Club to the Polish debt, which characterized a cancellation of 50% in the option DSR (Debt Service Reduction) through the interest rate. The affected debt was of US\$ 3.7 billion and, at the end of the rescheduling expected in 2009, Poland would have been granted a debt pardon of US\$1.9 billion. However, in November 2001, Poland paid out US\$2.5 billion, by means of a buyback operation of the stock of its debt to Brazil, whose debit balance on September 30th, 2001 was US\$3.3 billion. The amount paid also included the last period of interest on a pro-rata basis. The total pardon granted to Poland was US\$ 1.8 billion.

Table 1
Discounts granted by Brazil until 9th August 2004 - US\$ million

HIPC*		993,1
	África	806,6
	Other countries	186,5
Other developing countries		149,9
	África	41,7
	Other countries	108,2
Total		1.143,0

*Heavily Indebted Poor Countries

Source: Ministry of Finance, International Affairs Secretaria.

Finance mechanisms should reduce inequalities

In different world forums, Brazil has participated in the discussion of mechanisms to finance development. The goal is to build a new international financial architecture that enables crises to be avoided and managed, both by multilateral mechanisms and by domestic actions, in such a way as to provide solidity and reliability to the national economy and thus reduce current asymmetries in international finance.

In the International Monetary Fund (IMF), Brazil defends the creation of special credit lines as a rapid and efficient mechanism for preventing and managing world financial crises. Within the Rio Group, the country supports the institution of “Innovative Financial Mechanisms for Democratic Governance”. Presented for the first time in the Meeting of the Presidents of the Rio Group, in May 2003, in Cuzco, Peru, the proposal aims at creating cooperation mechanisms between governments and international financial organisms targeted at enhancing the financial instruments available to Latin American and Caribbean countries. This would make it possible to overcome current budget restrictions which prevent the channeling of resources to infrastructure works. The proposal involves the use of new debt instruments, the creation of regional authorities for infrastructure and the adoption of modifications in fiscal accountancy, in such a way as to recognize the favorable impact over the balance of the public sector through the execution of productive investment.

The same goal of development and social progress that mobilizes governmental action in global plans has shaped domestic policies. In order to leverage economic development, the Brazilian government implemented, in the last decade, several measures aimed at restructuring the financial system and expanding the credit market. Since the elimination of the chronic inflationary process, the country has enhanced rules of banking inspection and regulation, adapting them to the Basel criteria; provided encouragement to credit cooperatives and microcredit programs; and implemented a more transparent and consistent fiscal regime for a federative country, largely consolidated in the Fiscal Responsibility Act of 2000. Together, international efforts and national actions aim at achieving stable financial conditions favorable to economic development.

Brazil proposes improvement of trade among developing countries

At the XI Quadrennial Meeting of the United Nations Conference for Trade and Development (XI UNCTAD), in June 2004, in São Paulo, the Brazilian government encouraged the launching of the third negotiations round within the Global System of Trade Preferences among Developing Countries (GSTP), negotiated between 1986 and 1989 by 44 G-77 member-countries, under the Enabling Clause of the General Agreement on Trade and Tariffs (GATT) valid at the time.

The GSTP has the objective of promoting trade among developing countries by means of concession of tariff preferences. Along the last decade, South-South trade grew to rates twice as high as the global average, being consolidated as a factor of global economic expansion and an exporting drive for developing nations (it is worth noting that manufactured goods account to around two thirds of the trade among these nations). The GSTP, however, contributed little to this process, due to its low reach and the small coverage of negotiated concessions. Hence the need to improve it, through a new negotiation round.

The system may have a key role in increasing trade among developing countries, as it provides better geographical coverage; confers better legal assurance and predictability to the diversification of exports; encourages a higher level of competitiveness among member-countries with regards to products that are more dynamic in the international market; and ensures more favorable conditions for the participation of countries with a lower degree of relative development. Based on this, the “São Paulo Declaration on the Launching of the Third GSTP Negotiation Round”, signed during the XI UNCTAD, invites all 132 members of

South-South trade grew twice as much as the world average in the last decade and has become a factor of global economy expansion

*Brazil participated
actively in negotiations
for the São Paulo
Declaration, signed
at the XI UNCTAD
in June 2004*

G-77, besides China, which has special participation in the Group, to enter the system.

**Brazilian initiatives
are prominent in global
trade negotiations**

In the scope of the Doha Round of the World Trade Organization (WTO), Brazil took on a leading role in the coordination among developing countries that gave rise to the G-20. The group was created during the weeks preceding the V Ministerial Meeting of WTO, held in September 2003 in Cancun, Mexico, with the aim of drawing developing countries around a proposal on negotiating modalities in agriculture. Under Brazil's coordination, the G-20 had an important role in the WTO meeting. It presented concrete, realistic proposals for negotiation, grouping both countries with agroexports interests (Brazil, Argentina, Chile) and nations with large rural populations and food security concerns (China and India). Owing to the competitiveness of developing countries in the agricultural sector, the G-20 expects to accomplish the reform of the trade rules enabling increased agricultural exports, with potential income and investment gains, which would bring positive effects over the economic and social development of its member-countries.

The legitimacy of G-20 is revealed not only in the consistency of its positions, but also in the representation of its members in world trade and population. They amount to 12.6% of the global GDP and 20.7% of global agricultural GDP and correspond to 56.6% of the world's population and 69.8% of the total rural population.

After the meeting in Cancun, the group worked intensely on coordinating positions at WTO, in Geneva. In addition, two ministerial meetings were held, both in Brazil (Brasília, December 2003, and São Paulo, June 2004),

demonstrating Brazil's willingness to take on a leading role in negotiation, always in defense of what was agreed in Doha. G-20's platform attempts to incorporate the "development" dimension of negotiations in agriculture through the following objectives: elimination of all forms of subsidies to exports that reduce the price of international commodities, such as sugar, cotton, dairy products and meats; significant reduction of the levels of trade support, such as the incentive to production and price support; and substantial increase of access to markets, through tariff reduction and differential treatment for developing countries.

G-20's key objectives for the initial phase of negotiations were reflected in the final version of the negotiating structure, approved by the ministers in July 2004. The successful results achieved in this phase will be the basis for the definition of agricultural modalities. For the succeeding negotiation stages, G-20's objectives can be summarized as follows: to maintain its protagonist role in negotiations; to preserve the intense political and technical coordination among its delegations; and to promote close contact with other WTO members.

**Right to health
prevails over patents**

Brazil has sought international partnership to establish the recognition that patent restrictions should not intervene in the rights of countries to protect public health and to ensure medicines for all. This concept was recognized by the WTO IV Ministerial Conference, held in Doha, Qatar, in November 2001, after extensive negotiation with developed and developing countries.

In order to achieve this result, the country used the different international forums, attempting to underline the importance of access to medicines – especially those related to more complex diseases such as AIDS – at prices

affordable by developing countries. It thus obtained recognition, through resolutions of the United Nations Commission on Human Rights and the WHO, of the principle that access to medicines is a basic human right, especially for medicines to control AIDS. As an initial response, developed countries supported the creation of the Global Fund to fight AIDS, Malaria and Tuberculosis that provides for the financing and preferential sales of medicines to poorer countries.

In the WTO, after extensive negotiations, the Doha Ministerial Conference recognized, in a specific declaration, that the interpretation and implementation of the treaty on the Trade-Related Aspects of Intellectual Property Rights – known as TRIPS – should be carried out in a manner consistent with the rights to protect public health and ensure medicines for all.

In general, Brazil has defended in international forums the need to balance preventive and treatment actions, the allocation of specific resources for fighting AIDS, the reduction of medicine prices, the use of generic drugs, as well as the important link between human rights and the fight against the HIV/AIDS pandemic.

Sustainable development has to be extensive

The Millennium Development Goals, with their priority focus on the fight against poverty, are closely connected to the main international commitments related to sustainable development. In the United Nations Conference on Environment and Development (UNCED), in Rio de Janeiro, in 1992, the concept of sustainable development was consolidated with its three pillars – economic, social and environmental. The Agenda 21, one of the most important accomplishments of the Rio Conference, dedicates the whole of its Chapter 3 to the fight against poverty.

The Implementation Plan of the World Summit for Sustainable Development (Johannesburg 2002) explicitly incorporated the MDGs, including the target of halving, by 2015, the proportion of people living on less than 1 dollar a day. The United Nations Commission on Sustainable Development (CSD), responsible, since *Rio-92*, for the follow up of the implementation of Agenda 21, was reorganized to make this task more effective.

Brazil has had an active role in these discussions, as well as in the context of the main multilateral environmental agreements, presenting proposals to improve partnerships among countries and encourage the debate and utilization of new, clean, renewable technologies. Brazilian leadership in the setting up of the Clean Development Mechanism (CDM) – one of the most innovative aspects of the Kyoto Protocol within the United Nations Framework Convention on Climatic Change – and the call for widespread use of renewable sources in the energy matrix, expressed in the Johannesburg Conference, in 2002, with the support of African and European countries, are examples of this initiative.

In the domestic sphere, one should highlight the creation, in 1997, of the Commission on Policies for Sustainable Development and for Brazilian Agenda 21 (CPDS), aiming at, through dialogue between governmental and non-governmental representatives, translating international commitments related to sustainable development into the particular needs and characteristics of Brazil. The Brazilian Agenda 21, designed by CPDS during the preparatory process to the Johannesburg Summit, was incorporated as a program into the Brazilian Multi-Year Plan.

Digital inclusion

Digital inclusion is a priority for the Brazilian government. It promotes

Patent restrictions should not be placed above the right to protect public health and ensure provision of medicines to people

The country has been investing in the development of digital inclusion programs based on open platforms and free software

social inclusion and plays a key role in the fight against poverty, allowing the access of citizens to information and knowledge. With regards to the digital inclusion effort, there are two indicators included in the Millennium Development Goals: access to telephony and use of computers, through the Internet. Along the 1990's, Brazil has witnessed substantial transformations in the supply of these services, with exponential expansion. According to information from the International Telecommunication Union (ITU), there were in Brazil, in 1992, 10.8 million installed landline telephones, representing a density of only seven telephones per 100 inhabitants. Mobile telephony in 1992 was still incipient, with around 32 thousand in operation. In the same year, the National Household Sample Survey (PNAD), of IBGE (Brazilian Institute of Geography and Statistics), registered that only 20% of Brazilian households had telephones. As from the second half of the nineties this scenario has been drastically changed. In 2003, Brazil had 85.6 million telephones, being 39.2 million landline telephones in service and 46.4 million mobile terminals, increasing total telephony density to 48.4 telephones per 100 inhabitants. The 2002 PNAD indicated that 61.6% of households had a telephone line.

This revolution in access to telephony allowed the more widespread use of the Internet by Brazilians. In 1988, according to data from the first yearly survey of the São Paulo Business Administration School of the Getulio Vargas Foundation about the Brazilian market and the corporate use of information technology, there were around 1 million computers in the country. The most recent survey, of May 2004, estimated more than 22 million computers, including those used domestically, that is, around 12 computers for every 100 inhabitants. Such a base enables Brazil to have around 12 million internet users, according to data from IBOPE Netratings. It is estimated that, in April

2004, Brazilians spent an average of 13 hours and 43 minutes on the Internet – an amount of time similar to the Americans'.

As is the case for several other indicators in Brazilian circumstances, the size of the absolute figure, or of its average, does not inform about substantial inequalities in the distribution of telephones or in the use of computers. The concern with the universalization of these technologies is present in public policies, with the use of resources to achieve different targets at the end of 2005 such as, for example: all localities with over 100 inhabitants should be served by at least one public telephone, and all localities with over 300 inhabitants should have access to individual telephones. The widespread use of prepaid mobile telephones (76.2% of the total in operation in 2003), the access to collect calls even for local calls, and the extensive network of public telephones with more than 1.3 million phones are ways to overcome income restrictions in the use of telephony.

With regards to the use of computers, Brazil has dedicated efforts to the development of digital inclusion programs, based on open platforms and free software. The Executive Committee on Electronic Government is an example of a program of modernization of Public Administration through the use of new technologies, focused on the citizen and on the provision of basic services to the population, such as education and health, through the Internet.

The Brazilian government is also designing the *Casa Brasil* Project, which intends to implement 7 thousand telecenters in low Human Development Index regions. By August 2005, one thousand telecenters should be in operation. The program is to be implemented in partnership with federal, state and municipal governments and civil society. In addition to free access to the Internet, the telecenters will pro-

vide training and qualification in the use of new technologies to the poor population.

In the World Summit on Information Society and in other international forums on the subject, the Brazilian government has defended the use of new information technologies as a tool for promoting economic, social and cultural development, as well as highlighting the importance of reducing the “digital divide” between developed and developing countries. The “digital divide” intensifies existing social, economic and cultural disparities. More specifically, Brazil has taken a position favorable to the use of free and open software, to a new model of Internet governance that is multilateral, transparent and democratic, and to objective criteria which orient sharing connection costs among backbone services providers of different countries.

Brazilian cooperation and partnerships for development

In the last decades Brazil has implemented, with other developing countries, comprehensive technical cooperation programs that directly or indirectly affect the capacity of the receiving country to achieve the MDGs. Through the Brazilian Cooperation Agency, of the Ministry of Foreign Affairs, several programs are being implemented using Brazilian resources and technology and, in some cases, in partnership with developed countries and international organizations, such as the UNDP, as templates of International Technical Cooperation. This growing cooperation also encompasses themes related to regional integration, such as the joint initiatives of Mercosur member-countries in the debate and design of actions addressing issues such as customs, agriculture, technical standards, statistics and institutional strengthening.

Several bilateral cooperation initiatives

between Brazil and developing countries in the social area can be highlighted. In South America, partnerships with Argentina, Chile, Ecuador and Peru, for example, deserve mention. The main goal is the exchange of successful experiences in these countries which might be applied in the region.

Actions in the area of food security

Brazilian cooperation in this area aims at increasing food production capacity, improving productivity and quality of supply, in such a way as to enable income increases in rural areas, which is where poverty is generally concentrated in developing countries.

Indeed, Brazil has dedicated efforts to meet specifically the interests of family farming. Firstly, by providing land to landless farmers through the land reform. Countries like the Philippines, Namibia, Mozambique and South Africa have sought Brazilian cooperation in this field, which is distinguished especially for its open participatory dialogue with social movements. Together with the Philippines, Brazil is carrying out a global awareness-raising campaign to restore land reform to the core of the international social-economic agenda, including the establishment of a Land Reform Committee at FAO.

Secondly, the Brazilian government has sought to guarantee agricultural policies that enable family farming production, through credit, technical assistance and agricultural insurance. In this sense, it is worth pointing out the specificity that has been coherently attributed to family farming in international agricultural discussions, hence the recent creation of specific forum for the debate of policies for this sector within the scope of Mercosur. Furthermore, the Brazilian government is encouraging the World Food Program (WFP) to jointly study means for the institutional purchase, by the

Partnerships with other countries in the agricultural and trade areas are directed towards achieving the MDGs

Brazil already contributes with HIV/AIDS drugs to several countries in Africa as well as in Latin America

WFP, of food produced by family farming, in order to guarantee food security not only for the receiving end but for suppliers.

Numerous technical cooperation projects have supported interested institutions from countries in Latin America, Africa and East Timor. The actions are aimed, mainly, at increasing the capacity to generate and adapt new technologies for development of fruit and vegetable cultures, as well as the introduction of new technologies in different areas focusing on small local production.

With regards to livestock raising, there are initiatives aiming at improving the capacity to generate and adapt new technologies for the development of cattle and goat raising by small farmers. Furthermore, there are actions to promote rural extension, working with family farmers and their forms of organization, in order to establish mechanisms for technology transfer and training of human resources.

Moreover, Brazil is promoting actions in food security with intense participation of the civil society, a model that has been adopted in all government policies. In this sense, the Brazilian government is verifying with the government of Haiti the possibility of providing cooperation to that country for the creation of a Food Security Council similar to the Brazilian Consea, which, subordinated to the Presidency of the Republic, is composed of one third government representatives and two thirds civil society representatives.

Parallel to this, nutritional security has gained extraordinary emphasis. Besides the increase in the amount allocated to school meals (the first in ten years), Brazil has sought to bring this theme to a high position in its international agenda. To this end, for the first time in the history of the United Nations Standing Committee for Nutrition, the annual meeting took

place in Brazil, in March 2004, when the most highly regarded international experts in the subject discussed with Brazilian professional the theme of nutritional security.

Similarly, the Brazilian government has fomented in international forums the theme of Human Right to Food, especially within the scope of FAO, where Voluntary Guidelines are currently being designed to guarantee this basic right. The Brazilian government believes that food security for citizens will be guaranteed to the extent that this right is overall disseminated and valued.

Actions in support of educational programs

Because of its large population and continental dimensions, Brazil developed several educational programs that enable access to education by means of different forms of media and dissemination.

In East Timor, Brazil has supported the process of reintroduction of the Portuguese language and the fight against illiteracy, with projects such as *Telecurso* (classes on TV) and Community Literacy. Similar efforts are being made in Central America, where the purpose is to structure and implement a pilot project to assist low-income families, as part of the government program to reduce child labor, besides transferring the methodology of the *Bolsa-Escola Cidadã* Project through staff training and structuring and implementation of a pilot project.

Brazil has also supported the fight against illiteracy, providing consultancy for the implementation of an integrated policy of literacy and education of youths and adults. In the field of education for professional qualification, Brazil has implemented Professional Qualification Cen-

ters in South America, Africa and East Timor. The qualification areas offered include, among others, civil construction (masonry, carpentry, hydraulic installations), building electricity, industrial dressmaking, diesel mechanics, information technology, bakery.

Cooperation actions in the health area

Brazilian technical cooperation in the health area encompasses several actions. Besides the implementation of the National Program against AIDS, whose efficiency is recognized by the main international organizations, Brazil implements various technical cooperation projects based on its experience of access to HIV antiviral drugs for treatment. The central objective of these projects is to enable developing countries to have access to drugs at affordable prices. This collaboration involves different countries in Latin America and Africa, especially Portuguese speaking African countries. Some of the countries under Brazilian cooperation projects in the area of drugs against AIDS are Colombia, El Salvador, Dominican Republic, Paraguay, Bolivia, Namibia, Burundi, Burkina Faso, Kenya, Angola, Sao Tome and Principe and Mozambique.

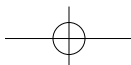
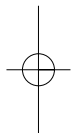
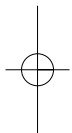
In addition to cooperation in the fight against AIDS, other Brazilian initiatives with African and Latin American countries should be pointed out in the area of child mortality control and the contributions to the control of diseases such as cholera, tuberculosis, malaria, yellow fever, Chagas' disease and dengue. The Brazilian experience in mass vaccination, by means of national campaigns with the involvement of the government, means of communications, private sector and civil society, resulted in a vaccination coverage higher than that of developed countries, and it is being largely passed on to other countries.

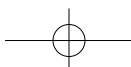
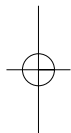
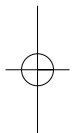
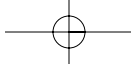
Actions for citizenship and democracy

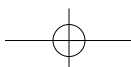
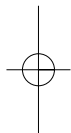
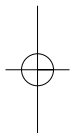
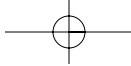
The construction of more democratic societies has received Brazilian support through cooperation in the computerization of the polling process. Brazil developed computerized polling systems of easy access and low cost. The Electoral Justice has shared its experience in this field with interested countries, among which some that are undergoing a democratization process and wish to introduce efficient, reliable polling systems.

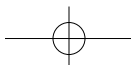
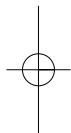
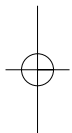
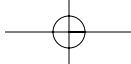
Aiming at guaranteeing higher and better participation in its policies, the Brazilian government has monitored with great interest the World Social Forum, in order to receive impressions and suggestions that help to demonstrate it is possible to achieve a different Brazil and a different world.

The Brazilian 1988 Constitution establishes that Brazil's international relations should be guided by principles such as peace defense, repudiation of terrorism and racism, prevalence of human rights, peaceful resolution of conflicts and cooperation among peoples for the progress of humankind. Brazil's participation in developing partnerships for development, as described in Goal 8, reflects our constitutional commitments, as well as our history in world politics and diplomacy. Therefore, the MDGs are connected to the Brazilian people's fundamental principles, of building a free, fair and caring society, of eradicating poverty and exclusion and reducing social and regional inequalities, and of promoting the well-being of all, without prejudice of origin, race, sex, color, age or any other type of discrimination. Thus, the Brazilian government's commitment to achieve the Millennium Development Goals also reflects the desires and ambitions of Brazilians towards the improvement of the living conditions of all people throughout the world.









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