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Civil Society Alternative Report

Brazil's Bogotá commitments ahead of the Manila Ministerial Conference

Progress, gaps and priorities for preventing and responding to violence against children and adolescents

Coalizão Brasileira
pelo Fim da Violência
contra Crianças e Adolescentes

The **Brazilian Coalition to End Violence against Children and Adolescents** comprises more than 90 civil society organizations and works to prevent and respond to violence through advocacy, data and evidence. The INSPIRE Brasil Platform provides indicators and knowledge for public policy and monitoring of the seven **INSPIRE** strategies. The full report is available in Portuguese only.

Key findings and methodology

As at 29 October 2026, six Bogotá commitments were partially implemented and two, I and IV, had implementation under way. None had sufficient evidence of full implementation. Legal and regulatory measures, training and reports are documented, but gaps remain in coverage, quality, results, responsibilities and funding.

A commitment is classified as partially implemented where a substantive part has been delivered, and as implementation under way where concrete preparation or implementation is documented but the main deliverable has not been demonstrated. These categories do not express percentages or measure impact. Insufficient public information does not mean no action has been taken. Deadlines in December 2026 had not yet elapsed.

The eight pledges reproduce Note No. 524/2024 in full, with editorial headings. Review was completed on 12 November 2026 without changing the cut-off date. Quotations retain the original wording; analysis follows United Nations and UNICEF terminology. [1]

Commitment I: Unified national protocol for care

> *The Brazilian government commits to developing and implementing a unified national protocol for the care of children and adolescents who are victims of violence, including when such violence occur in digital environments, by December 2026.*

Implementation under way. Terms of Reference No. 2/2026 provide for a glossary and procedures for digital reports. The Ministry of Human Rights and Citizenship (MDHC)'s **2025 Management Report** records one integrated centre opened in Amazonas and three partnerships to equip facilities. These outputs do not demonstrate nationwide approval and implementation of the comprehensive care protocol, including offline. Implementation must comply with **Law No. 13,431/2017** and monitor access, continuity of care and prevention of revictimization. [2] [3] [4]

Commitment II: Safe school environments and violence prevention

> *The Brazilian government commits to improve initiatives to promote safe school environments and prevent all forms of prejudice, discrimination and intolerance associated with hate speech and extremism, including in the digital environment, and to develop and disseminate anti-bullying materials, with a focus on positive parenting, hate speech prevention and self-protection for children and teenagers as a pedagogical tool for teachers by December 2026.*

Partially implemented. All state education systems had joined the **Escola que Protege Programme** by June 2025. **Technical Note No. 5/2026** records 5,544 municipalities, 104,931 schools and 26,904,790 students in the **School Health Programme** (**Programa Saúde na Escola**). These figures concern

participation in a programme prioritizing violence prevention, not receipt of a specific intervention. Consolidated data on content, materials used, coverage and outcomes are lacking. The 2025 Management Report's 28,879 enrolments in the **National School for the Rights of Children and Adolescents** cover varied topics and audiences and cannot all count as teacher training under this commitment. [5] [6] [3]

Commitment III: Dialogue across levels of government and sectors and preventive mobilization

> *The Brazilian Government commits to promote continuous and transparent inter-federative and inter-sectoral dialogue to disseminate preventive concepts regarding all forms of violence against children and adolescents, and to develop a mobilization guide for states and municipalities, with suggestions for activities for children and adolescents, in context of May 18 (National Day to Combat Child and Adolescent Sexual Abuse and Exploitation), by December 2026.*

Partially implemented. The **Pedagogical Guide Sexual Violence, No! - Prevention, Protection and Comprehensive Care** provides age-specific guidance, jointly developed by civil society and government. In Caruaru, UNICEF reported 238 professionals trained, 40 protection activities and direct reach of 42,508 people in July 2026. Reach does not equate to children and adolescents protected or establish unique individuals. This local initiative concerns major events. Correspondence with the 18 May guide, dissemination and continuous, transparent dialogue across government levels and sectors remain to be demonstrated. [7] [8]

Commitment IV: Age assurance and data protection

> *The Brazilian Government commits to develop, by December 2026, solutions to improve the age verification system in digital environments, in order to limit children and adolescents' access to content that is inappropriate for their age, while guaranteeing the right to data protection of these individuals.*

Implementation under way. In June 2026, the National Data Protection Agency (ANPD) began monitoring app stores and operating systems on age assurance and age signals, initially focusing on Apple, Google and Microsoft. This regulatory action under the Digital Statute for Children and Adolescents (**ECA Digital**) does not demonstrate performance, coverage, safeguards or compliance by all providers. The guide published on 28 October sets out general obligations, not evidence of an age assurance solution's performance. [9] [10]

Commitment V: Support for caregivers and health workforce training through international cooperation

> *The Brazilian government commits to ensuring universal access to assistance for parents and caregivers and to promoting care services to prevent child abuse. At an international level, Brazil will promote cooperation through the* ***Strategy for the Training of Primary Health Care Team Professionals****, based on the* ***Child Development Care*** *(CDC). The strategy's innovation lies in the use of distance learning and self-instruction, which will be available on a public platform for workers, making it possible to train professionals on a large scale both in Brazil and in interested countries, and strengthening the prevention of violence against children globally. The number of professionals to be trained is 20,000 PHC professionals over a period of 18 months.*

Partially implemented. In March 2026, the Pan American Health Organization (PAHO) reported over 66,000 enrolments in **Care for Child Development** (CCD) and 90 trained facilitators in 33 services. Enrolments do not confirm 20,000 primary health care professionals trained within 18 months; the starting date is unspecified. Consolidated evidence of universal family access and international cooperation delivered is lacking. National Council for Social Assistance (CNAS) Resolution No. 219/2025 regulates the **Home-Based Basic Social Protection Service for Pregnant Women and Children Aged 0-6**. Its institutionalization requires funding, participation, staffing and service data, without assuming universal coverage. [11] [12]

Commitment VI: Comprehensive prevention and evidence-based approaches

> *The Brazilian government commits to promoting prevention actions with a broader perspective, encompassing actions aimed at preventing the use and problematic use of substances and preventing violence and crime, promoting citizenship and strengthening individuals and the communities in which they live, and contributing to a more equal society. In this sense, the government is committed to agreeing with states and municipalities to disseminate prevention methodologies in the school environment, aimed at strengthening family ties based on evidence and training guardianship advisors ("conselheiros tutelares") and education and care professionals to support decision-making.*

Partially implemented. The **Work Plan for Technical Cooperation Agreement No. 5/2026** with Minas Gerais provides for **Elos** and **#Tamojunto**, training, and quality and fidelity monitoring. It demonstrates agreed arrangements and implementation design, not results achieved.

Consolidated data on local implementation, continuity, coverage and training of all intended groups are lacking. [13]

Commitment VII: Homicide prevention and social protection for Black adolescents and adolescents in peripheral areas

> *The Brazilian Government commits to promoting actions aimed at preventing homicides and promoting social protection, within the scope of the drug policy, with a focus on black adolescents and those living in peripheral territories, who are disproportionately affected by drug trafficking.*

Partially implemented. In August 2025, the Ministry of Justice and Public Security (MJSP) reported direct support for 4,000 people aged 15-24 through **Pronasci Juventude**. This includes adults and does not fully identify Black adolescents and adolescents in peripheral areas. Reported implementation does not demonstrate coverage of the priority population or a causal contribution to reducing homicides. [14]

Commitment VIII: Annual monitoring and strategic resource allocation

> *The Brazilian government commits to present an annual report to track progress on the goals outlined in the **Cross-Cutting Agenda for Children and Adolescents** within the **Multi-Year Plan 2024-2027**. This report will detail outcomes that contribute to the fight against violence affecting children and adolescents. In addition to promoting transparency and accountability in government actions, this initiative will enhance the strategic allocation of resources toward public policies aimed at preventing violence against children.*

Partially implemented. The Ministry of Planning and Budget (MPO) published reports on the **Cross-Cutting Agenda for Children and Adolescents**, reporting BRL 264.2 billion committed in 2025 across 218 budget lines. The reporting output is substantiated. The total covers diverse policies, not specific violence prevention funding. Commitments do not mean payments, services or results. Evidence of allocations addressing prevention gaps is lacking. The report published in 2026 covers 2025 implementation. [15] [16]

Recommendations for the Brazilian delegation in Manila

For commitment I, present the protocol's approval status, the **implementation timetable through December 2026** and responsibilities across levels of government. Agree on referral pathways, staffing and co-financing under **Law No. 13,431/2017**. Report separately on the operation of the digital reporting channel and implementation of integrated care.

For commitments II and III, identify materials, promised content, **teachers who actually used the materials** and schools reached. Demonstrate how the guide fulfils the 18 May commitment and how it has been disseminated. Establish a schedule for dialogue across levels of government, with participants, published decisions and feedback.

For commitment IV, disclose the **age assurance solutions assessed**, coverage, performance, ways of circumventing them and data safeguards. Report outstanding steps through December 2026 and mechanisms for reviewing errors. Assess exclusion risks while safeguarding privacy, respecting children's evolving capacities and ensuring accessibility for children and adolescents with disabilities.

For commitment V, assess progress towards training 20,000 professionals, **distinguishing places offered, enrolments and completions**, links to primary health care, dates and the start of the 18-month period. Identify countries and cooperation activities delivered. For services under V and approaches under VI, report municipalities, teams, families served, training, expenditure, and verification of quality and cultural and linguistic appropriateness, with Indigenous participation.

For commitment VII, disaggregate the 4,000 people reportedly supported by age, race, gender and location, **distinguishing adolescents from adults**. Report retention and service access. Agree on local targets to prevent homicides, recruitment into criminal activities and institutional violence,

including within the child justice system. Do not automatically attribute changes in lethal violence to interventions.

For commitment VIII, identify the **budget lines financing each commitment**, with appropriations, commitments, verification of entitlement to payment (liquidação), payments and inclusion criteria. Explain decisions addressing geographical gaps and sustaining services, avoiding double counting. Ensure continuity in the next **Multi-Year Plan**, with responsibilities across levels of government and sources of co-financing.

In the Manila update, link child labour prevention and elimination to the **Fourth National Plan for the Prevention and Elimination of Child Labour and Protection of Adolescents at Work 2026-2035**. Agree on **local targets and co-financing** for identification, referral, school retention and sustained protection, including responses to sexual exploitation and in digital environments. Monitor recurrence and distinguish legally protected adolescent employment from exploitation.

For Manila, adopt a specific commitment to prevent avoidable family separation and ensure safe family reintegration, aligned with the **National Plan for Family and Community Life 2025-2035**. Provide for early identification and preparation of extended family, financial, legal and psychosocial support, child participation and cross-sectoral responsibilities. Follow up after discharge from alternative care, measuring safety, stability, well-being and re-entry into care alongside the number of discharges. [17]

Link implementation to the seven **INSPIRE** strategies and the Committee on the Rights of the Child's recommendations, with safe, accessible participation, feedback and State accountability. [18] [19]

Limitations of the assessment

Sources include administrative and implementer-reported data, sometimes lacking coverage denominators, expenditure or independent evaluation. This is not an audit or impact evaluation. The Coalition had received no substantive response to its Federal Government information request by the cut-off; this does not establish non-implementation. New evidence should inform explicit classification revisions.

Sources

[1] Brazil. Note No. 524/2024. Bogotá pledges, 2024.

[2] MJSP. Terms of Reference No. 2/2026, 4 March 2026.

[3] MDHC. 2025 Management Report, pp. 41-42, 2026.

[4] Brazil. Law No. 13,431 of 4 April 2017.

[5] Ministry of Health. Technical Note No. 5/2026. School Health Week.

[6] Ministry of Education. Escola que Protege Programme. State participation, June 2025.

[7] Oficina de Imagens and National Committee. Pedagogical Guide Sexual Violence, No! - Prevention, Protection and Comprehensive Care.

[8] UNICEF. Assessment of the protection initiative in Caruaru, 30 July 2026.

[9] ANPD. Monitoring of app stores and operating systems, 10 June 2026.

[10] ANPD. Guide to platform responsibilities, 28 October 2026.

[11] PAHO. Progress on Care for Child Development, 4 March 2026.

[12] CNAS. Resolution No. 219 of 25 November 2025.

[13] MJSP. Work Plan for Technical Cooperation Agreement No. 5/2026.

[14] MJSP. Pronasci Juventude. Programme overview, 26 August 2025.

[15] MPO. Budget assessment for children and adolescents, 18 May 2026.

[16] MPO. Cross-Cutting Agenda for Children and Adolescents Report 2026, covering 2025.

[17] CNAS/Conanda. Joint Resolution No. 1 of 23 December 2025. National Plan for Family and Community Life 2025-2035.

[18] Committee on the Rights of the Child. CRC/C/BRA/CO/5-7, 2025.

[19] WHO. INSPIRE. Seven strategies for ending violence against children, 2016.

Coalizão Brasileira pelo Fim da Violência contra Crianças e Adolescentes

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