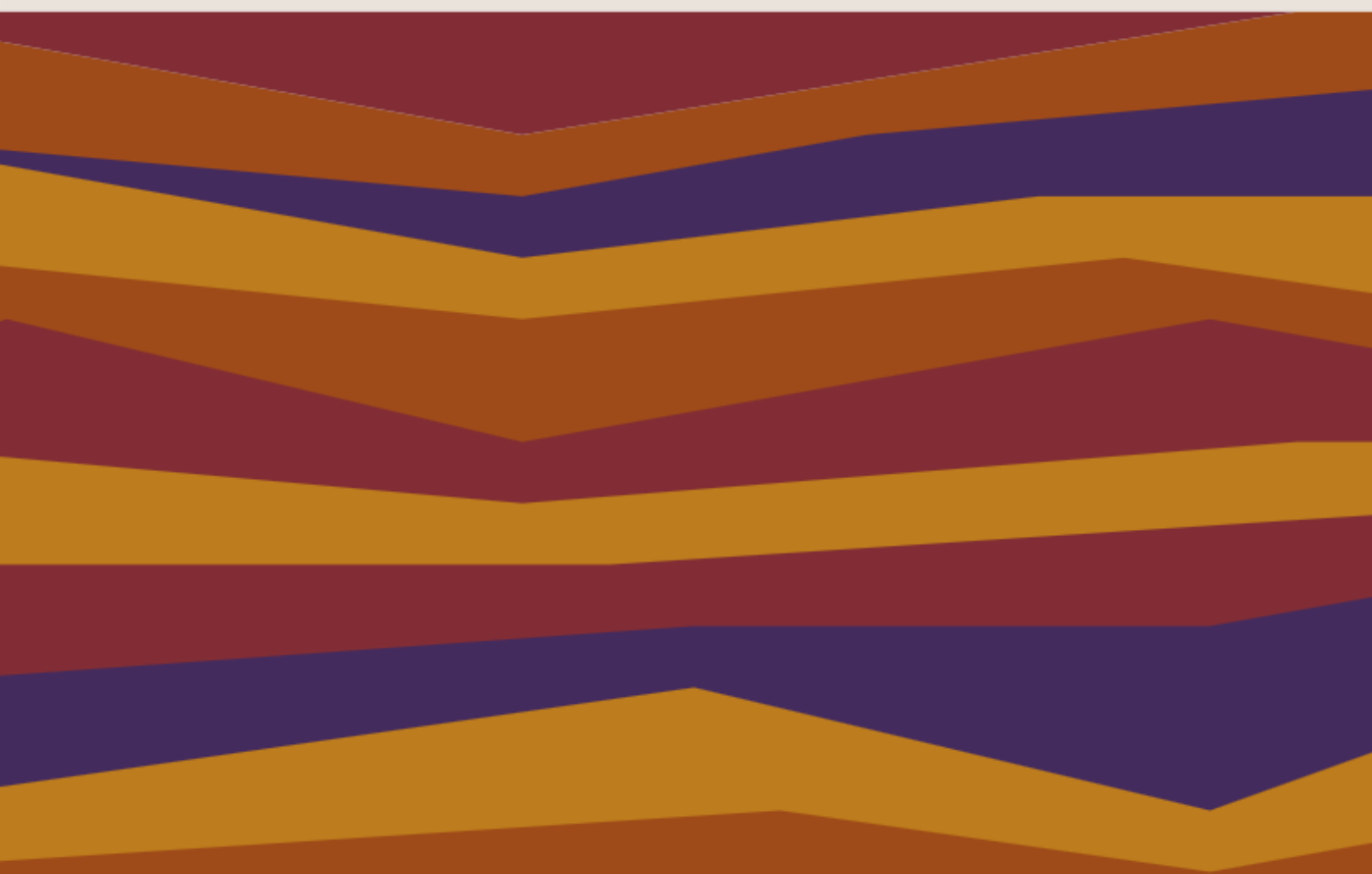




Social Assistance in Brazil: Organization of SUAS



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INTRODUCTION

This report inaugurates a series of three studies on Social Assistance in Brazil, organized by IMDS with the objective of offering a structured view of this public policy and answering, in a systematic way, the central question: "What is Social Assistance in Brazil and how does it work?". The elaboration of this series was born from the realization that, although there is a broad normative framework that regulates social assistance, there was still a lack of material that systematized, in an accessible way, its main elements of organization, management and financing. The reports, therefore, intend to fill this gap, offering public managers, technical teams and researchers a qualified synthesis that serves as a reference for understanding the policy.

This effort at synthesis interacts with other material produced by IMDS: the illustrated architecture of the current functioning of Social Assistance. While architecture organizes information into three major axes — organization, management, and financing — and offers a graphic and immediate representation of policy, reports deepen the analysis, detailing the normative and institutional structure that supports each axis. The two materials, therefore, are complementary: together, they favor a comprehensive understanding of policy, combining visual clarity and analytical depth.

The main purpose of the series is directly linked to the mission of IMDS, which consists of understanding the factors that drive or restrict social mobility in Brazil, offering evidence capable of supporting the design and implementation of more effective public policies. Social Assistance occupies a central role in this debate, since both the Federal Constitution and the Organic Law of Social Assistance (LOAS/1993) establish, among their objectives, the promotion of integration into the labor market. By recognizing productive inclusion as an essential part of social protection, social assistance connects directly to the field of social mobility.

This first report is dedicated to the organization of the offers and begins with a preliminary section that answers the question "What is Social Assistance", consigning it as a public policy of the State, recognized by the 1988 Constitution and organized by the Unified Social Assistance System (SUAS). In this section, its central objectives are highlighted — social protection, social assistance monitoring and defense of rights — as well as organizational principles such as decentralized management and tripartite financing. Next, the report deepens the analysis of the organization of the offers, exploring how the services, programs, benefits and units of the SUAS are structured in the territory and how they are operationalized by the reference teams. Although social protection is divided into Basic Social Protection and Special Social Protection, for the sake of clarity and didactics, it was decided to emphasize, at this time, Basic Social Protection.

The following reports will deal with the management of actions, with emphasis on the mechanisms for planning, coordinating, monitoring and Workforce Management, and financing, addressing the evolution of co-financing mechanisms, fund-to-fund transfers, financing blocks and financial sustainability instruments of the policy. It should be noted that all the reports focus on federal standards, which serve as a national reference, acknowledging, however, the existence of complementary regulations at the state and municipal levels.



1. WHAT IS SOCIAL ASSISTANCE?

Social Assistance began to be recognized as a public policy of the State with the Federal Constitution of 1988, which integrated it into Social Security alongside Health and Pensions, ensuring it is offered to those who need it, regardless of prior contribution. This normative framework was followed, in 1993, by the enactment of the Organic Law of Social Assistance (LOAS – Law No. 8,742/1993), which represented a fundamental step in the consolidation of the policy by defining its principles, guidelines and execution structure.

As provided for in article 203 of the Federal Constitution and in LOAS, Social Assistance has the following objectives: (i) social protection, aimed at guaranteeing life, harm reduction and risk prevention — including protection of the family, maternity, childhood, adolescence and old age; support for children and adolescents in vulnerability; promotion of integration into the labor market; support for people with disabilities through habilitation, rehabilitation and community inclusion; and the guarantee of a minimum monthly wage for the elderly and people with disabilities in conditions of vulnerability; (ii) social assistance monitoring, dedicated to information management through the analysis of territories, vulnerabilities and risks; and (iii) defense of rights, ensuring full access to social assistance provisions.

The Unified Social Assistance System (SUAS) is the public model that organizes, throughout the national territory, the provision of Social Assistance, consisting of services, programs and benefits aimed at the population in situations of socioeconomic vulnerability. Established by the National Social Assistance Policy (PNAS), approved in 2004, and implemented from 2005 (Basic Operational Norm of SUAS – NOB-SUAS/2005), SUAS consolidated Social Assistance as a right of citizenship and as a responsibility of the State, being incorporated into LOAS as of 2011, by Law No. 12,435/2011.

According to PNAS/2004, the structure of SUAS is guided by certain organizational principles¹. Political-administrative decentralization and territorialization guide management through councils, funds, and social assistance plans in each federative sphere, as well as the articulation of intersectoral policies according to local characteristics. The relationship between the State and civil society combines the primacy of the State in coordination with the complementary action of civil society organizations in the execution of services and social control. Funding is shared between the Union, States, Federal District, and Municipalities, with funds in each sphere, structured by automatic fund-to-fund transfers and care floors linked to the complexity of the services. Social control is exercised by councils and conferences, which ensure deliberation, supervision and participation of users. The human resources policy emphasizes appreciation, permanent training and the need for career plans, recognizing professionals as agents of effective rights. Finally, the information, monitoring, and evaluation dimension seeks to consolidate a National Information System that ensures transparency, measurement of results, and efficiency in management, supported by information technologies.

In addition to the principles, SUAS has become a network of public reference units — such as the Social Assistance Reference Centers (CRAS) and the Specialized Social Assistance Reference Centers (CREAS), articulated with complementary services provided by civil society organizations. Thus, SUAS constitutes the institutional arrangement that organizes social assistance in Brazil. In addition to bringing together benefits, services and programs, the public system distributes

¹ BRAZIL, 2004.



responsibilities among the federated entities, defines supply standards and establishes parameters for non-contributory social protection, reinforcing its character as a structured public policy and citizenship right.

2. ORGANIZATION OF OFFERS

Social assistance in Brazil is organized as an integrated set of services, benefits and programs that make up the SUAS offerings. These provisions are intended to prevent, protect and address situations of vulnerability and social risk, resulting from poverty, insufficient access to public policies, the weakening of family and community ties or other forms of rights violations. Its logic articulates actions of a continuous nature, which guarantee permanent responses to the essential needs of the population, with interventions of a punctual nature, aimed at meeting immediate demands.

This section presents how these provisions are structured in the social assistance network, composing the organization of social protection in the country. To this end, it describes its three complementary components: social assistance services, which constitute the backbone of the policy; welfare benefits, aimed at ensuring basic security and responding to contingencies; and national programs, designed to broaden the reach of social protection and articulate specific responses to priority public and situations. Together, these components materialize social assistance as a right of the population.

2.1. Social Assistance Services

Social assistance policy in Brazil is implemented, above all, through a set of continued services that aim to prevent vulnerabilities, protect individuals and families, and address social risks associated with poverty, absence or insufficiency of access to public services, the weakening of family and community ties, and other forms of rights violations. The services constitute the core of non-contributory social protection and articulated with benefits and programs, shape the social assistance network organized by the Unified Social Assistance System (SUAS).

The normative framework that organizes this network of services is the National Classification of Social Assistance Services², an instrument that standardizes the nomenclature, contents, and parameters of execution throughout the Brazilian territory. The Classification establishes essential elements for each service: target audience, objectives, expected results and acquisitions, forms of access, provisions, coverage, reference units and expected impact. With this, it seeks to ensure uniformity, quality and coherence in the offer, guiding the policy towards promotion of rights, strengthening of bonds, and preservation of the protective function of families.

According to the Classification, social assistance services are structured in two major levels of protection: Basic Social Protection (PSB) and Special Social Protection (PSE). PSB is aimed at preventing risks and promoting family and community life, stimulating autonomy and protagonism of families, in conjunction with other public policies such as health, education, culture, work and sports. PSE, in turn, is aimed at families and individuals in situations of threat or violation of rights, which may include different forms of violence and neglect, situation of breakdown of family and

² BRAZIL, 2014a.



community ties, or other serious vulnerabilities³. It is organized into two degrees of complexity: medium complexity, aimed at situations that require specialized attention, but preserve family and community life; and high complexity, intended for cases in which, exceptionally and temporarily, there is a need for shelter in specific units, when it is not possible to remain in the family or community nucleus.

Table 1 summarizes the typified services and their respective levels of protection.

Table 1 – Nationally Typified Services

| | | |
|----------------------------------|---|---|
| Basic Social Protection | | Family Protection and Integral Care Service (PAIF) |
| | | Service of Coexistence and Strengthening of Bonds (SCFV) |
| | | Basic Social Protection Service at Home for People with Disabilities and the Elderly |
| Special Social Protection | Medium Complexity | Specialized Protection and Care Service for Individual Families (PAEFI) |
| | | Specialized Service in Social Approach |
| | | Social protection service for adolescents in compliance with socio-educational measures of Assisted Liberty (LA) and Community Services (PSC) |
| | | Special Social Protection Service for Persons with Disabilities, Elderly Women and Their Families |
| | Specialized Service for Homeless People | |
| High Complexity | | Institutional Shelter Service |
| | | Shelter Service in Group Home |
| | | Foster Family Shelter Service |
| | | Protection service in situations of public calamities and emergencies |

Source: National Classification of Social Assistance Services. 2014 reprint.

The provision of services is carried out by the social assistance network, composed of public units and non-profit civil society entities. These must be registered with the Social Assistance Councils and registered with the National Registry of Social Assistance Entities (CNEAS).⁴ This arrangement seeks to guarantee territorial capillarity and ensure that the population in vulnerable situations has effective access to the provisions of the policy.

In basic social protection, the public reference unit⁵ is the Social Assistance Reference Center (CRAS), installed primarily in territories with higher levels of vulnerability and social risk. CRAS is

³ Examples provided for in the Typification include physical, psychological or sexual violence; negligence; abandonment; child labor; withdrawal from family life; homelessness; human trafficking; discrimination; or non-compliance with conditionalities as a result of violation of rights.

⁴ According to Article 6-B of Law No. 12,435 of 2011, the recognition of the performance of the entities goes through registration with the Municipal Council or the Federal District, as the case may be, and registration in the National Registry of Social Assistance Entities (CNEAS) carried out by the Municipal Secretariats and the Federal District of Social Assistance.

⁵ CRAS is the reference unit of Basic Social Protection (PSB) and is the space responsible for offering the Family Protection and Integral Care Service (PAIF). The PSB also includes the Coexistence Centers, in their different modalities - aimed at children, adolescents, young people and the elderly - all referred to CRAS. (BRAZIL, 2009.)



responsible for the exclusive execution of Family Protection and Integral Care Service (PAIF), but its role goes beyond offering this service. It performs the function of territorial management of basic protection, which involves articulating the local social assistance network, promoting intersectoral articulation and carrying out active searches to identify and monitor families in vulnerable situations⁶.

Another central aspect is the organization of the referral and counter-referral flows. The reference occurs when CRAS directs the user to benefits, services, programs, and projects appropriate to their needs, either in the basic network itself, or in special protection. Counter-referral, on the other hand, occurs when CRAS receives referrals from special protection, ensuring the user's return to PSB services and benefits, which guarantees integrality and continuity of care. Due to these functions, CRAS consolidates itself as the main gateway to social assistance and as an axis of policy articulation in the territory.⁷

In special social protection, two reference units stand out⁸. The Specialized Social Assistance Reference Center (CREAS) that is responsible for assisting families and individuals in situations of personal and social risk resulting from rights violations and organizes referral flows, articulates with the social assistance network and monitors cases of greater complexity⁹. The Specialized Reference Center for the Homeless Population (POP Center) provides care to people who use the streets as a space for housing and survival, promoting shelter, qualified listening, monitored referrals and articulation with sectoral policies¹⁰. Although essential, these units operate in contexts of greater complexity, complementing the network, but having a distinct role from CRAS, which remains as the gateway and organizing axis of basic social protection.

In the case of the PSB, three services are structured as fundamental for the consolidation of protection: the Service of Protection and Integral Care to the Family (PAIF), the Service of Coexistence and Strengthening of Bonds (SCFV) and the Service of Basic Social Protection at Home for People with Disabilities and the Elderly. This cut was adopted because the focus of this study falls on Basic Social Protection, as already indicated in the introduction. Each of these services will be described below, based on the National Classification of Social Assistance Services.

2.1.1. Protection and Comprehensive Care for Families (PAIF)

The Family Protection and Integral Care Service (PAIF) is the structuring service of basic social protection in SUAS. Of a preventive, protective and proactive nature, it is organized as continuous social work with families, recognizing them as the central nucleus of social protection and

⁶ The territorial management function comprises i) articulation of the basic social assistance network referenced to the CRAS, ii) promotion of intersectoral articulation and iii) active search. The articulation of the social assistance network of basic social protection organizes and integrates the services, benefits and programs available in the territory, ensuring that the population has effective access to them. It also guides the definition of the functions of each unit and establishes service flows between PAIF and other services, allowing for coordinated management that connects beneficiaries of income transfer programs to the local social assistance network. The intersectoral articulation strengthens the dialogue between social assistance and other public policies and sectors, expanding families' access to services and enhancing joint actions at the federal, state and municipal levels. Active search, on the other hand, identifies the vulnerabilities and potentialities of the territory, providing information that is essential for local planning and risk prevention. (BRAZIL, 2009).

⁷ BRAZIL, 2009.

⁸ The reference units of Special Social Protection (PSE) are CREAS and the POP Center. In addition to these, this protection includes the set of equipment intended to assist people and families in situations of personal or social risk, including the Reference Day Center for People with Disabilities and the various types of Reception Units - such as Institutional Shelter, Long-Term Care Institution for the Elderly (LTCF), Temporary Home, HOME HOME, Halfway House, Inclusive Residence, Welcoming Family, Republic and Temporary Accommodations, the latter aimed at serving in situations of public calamity - all referred to CREAS.

⁹ BRAZIL, 2011b.

¹⁰ BRAZIL, 2011c.



community coexistence. Its purpose is to strengthen the protective function of families, prevent the rupture of bonds, develop potentialities and expand access to rights, promoting autonomy and protagonism. Thus, the PAIF does not only act on vulnerabilities, but also on the capacities of families, seeking to consolidate them as subjects of rights.¹¹

The action is materialized through a diversified set of continued activities, which include: welcoming, social study, home visits, guidance and referrals, family groups, family monitoring, community actions, socio-educational campaigns, information and rights defense activities, support for access to personal documentation, strengthening of social support networks, encouragement of family and community life, mobilization for the exercise of citizenship, reading and knowledge of the territory, socioeconomic registration, preparation of reports and medical records, notification of situations of vulnerability and social risk, in addition to active search. All these activities have as a common horizon the prevention of risks, the strengthening of links and the intersectoral articulation with other public policies.

PAIF's priority audience is composed of families in situations of social vulnerability, especially those benefiting from income transfer programs and social assistance benefits. Families that, even if not contemplated, meet the eligibility criteria, as well as elderly people and people with disabilities in risk contexts, are also prioritized. Although all families in the territory can be served, the service is concentrated on those in a situation of greater social fragility.

Due to its scope and objectives, PAIF constitutes the organizing axis of basic social protection. All PSB services must be referenced to it, so that the network linked to CRAS is articulated around social work with families, ensuring integrality and continuity in care.

2.1.2. Service of Coexistence and Strengthening of Bonds (SCFV)

The Service of Coexistence and Strengthening of Bonds (SCFV) is a continuous service of basic social protection, complementary to PAIF. Its purpose is to strengthen family and community relationships, promote social integration and value community life, preventing situations of isolation, exclusion or institutionalization. Of a preventive, protective, and proactive nature, SCFV contributes to increasing the social resilience and autonomy of users, while reinforcing the protective function of the family and the territory.

SCFV activities are offered in groups organized by life cycles — children up to 6 years old; children and adolescents from 6 to 15 years old; adolescents and young people from 15 to 17 years old; young people from 18 to 29 years old; adults aged 30 to 59 years; and elderly people. Heterogeneity and intergenerationality are central principles, stimulating coexistence between different ages. The actions include artistic, cultural, sports and leisure experiences, as well as collective experiences that favor exchange of knowledge, acquisition of knowledge and strengthening of bonds. All are designed to complement the social work with families carried out in PAIF and ensure access to sectoral and intersectoral information and services.

SCFV's priority audience covers children, adolescents, young people, adults and the elderly in situations of social vulnerability, with priority given to children and young people with disabilities, beneficiaries of the BPC, the *Bolsa Família* Program (PBF) or with an equivalent profile, those out of school, in compliance with or egressed from protection or socio-educational measures, in addition

¹¹ BRAZIL, 2012c.



to those referred by special social protection. Among young people and adults, the service also includes people with disabilities, in situations of social isolation, with school lapse or dropout, experience of violence or neglect, homeless or linked to programs to combat sexual exploitation. In the case of the elderly, BPC beneficiaries and those belonging to families benefiting from the PBF are prioritized.¹²

SCFV can be carried out in CRAS or in Community Centers — public or civil society organizations — always referred to CRAS, which ensures integration with the social assistance network and the monitoring of families. In this way, the service works as a space for protective coexistence, prevention of vulnerabilities and promotion of citizenship, expanding opportunities for social participation and the exercise of rights.

2.1.3. Basic Social Protection Service at Home for People with Disabilities and the Elderly

The Basic Social Protection Service at Home for Persons with Disabilities and the Elderly is part of basic social protection and has a preventive, protective and proactive character. Its purpose is to guarantee access to rights, prevent social risks associated with precarious family care, exclusion and isolation, and promote social inclusion and autonomy of elderly and disabled people. By offering direct care at home, the service ensures that users in greater vulnerability, unable to regularly attend units of the social assistance network, are not left unprotected.

The service's activities include periodic home visits, welcome and qualified listening, socio-family guidance, referrals to the social assistance network and sectoral public policies, support to overcome accessibility barriers, continued monitoring, and strengthening of family and community bonds. These actions aim not only to respond to risk situations, but also to stimulate social participation and expand the autonomy of users, connecting them to opportunities for inclusion in the territory.

The public to be served by the service is composed of people with disabilities – of any age group – and/or elderly people – 60 years of age or older – in a situation of social vulnerability due to the weakening of ties and/or access barriers, with priority given to BPC beneficiaries or who are members of families benefiting from income transfer programs.¹³

This service acts in a complementary way to PAIF and SCFV, functioning as a strategy that enables the participation of its users in the social assistance network and in other public policies, even in the face of physical, social or relational barriers that hinder access. In this way, it reaffirms the principle that social protection should reach everyone, including those who, due to their conditions, remain invisible to conventional forms of care.

2.2. Assistance Benefits

Social assistance benefits are integrated, along with services and programs, in the network of provisions of social assistance policy in Brazil. Originally provided for in LOAS/1993 and reaffirmed by PNAS/2004, this set aims to ensure minimum conditions of survival and to be integrated in a complementary way with the other SUAS offers. The policy is based on the guideline that social

¹² BRAZIL, 2013b

¹³ BRAZIL, 2017a.



protection must combine benefits, services and programs to respond to both immediate needs and long-term strategies aimed at inclusion, strengthening bonds, and reducing inequalities.

Two types make up this axis: Continuous Cash Benefit (BPC) and Temporary Benefits. Although they are of different natures, both are considered transversal provisions, related to both basic and special social protection, and have CRAS as a reference unit for organizing access.

2.2.1. Continuous Cash Benefit (BPC)

The Continuous Cash Benefit (BPC), provided for in CF/1988 and regulated in LOAS/1993, is an individual, non-contributory and non-transferable benefit, which guarantees a minimum monthly wage to the elderly person aged 65 or over, and to the person with disabilities who have long-term impairments — of a physical, mental, intellectual or sensory nature, with a minimum duration of two years — and who prove that they do not have the means to provide for their own maintenance or to have it provided by the family.¹⁴

Access to the benefit depends on proof of per capita family income equal to or less than 1/4 of the minimum wage, and may be increased to up to 1/2 minimum wage in specific situations of vulnerability, degree of disability, dependence on third parties for activities of daily living or commitment of the family budget to health and care expenses not covered by SUS or SUAS¹⁵. To apply for the benefit, it is required that the applicant and his family are registered and have updated their data in the Unified Registry.

BPC's priority audience is composed of elderly people and people with disabilities in situations of socioeconomic vulnerability, especially those belonging to low-income families. The benefit cannot be accumulated with another benefit of a social security or assistance nature, except for the exceptions provided by law, such as medical assistance benefits, special pensions of an indemnity nature and income transfer programs.

In the calculation of per capita household income, the regular income of family members is considered¹⁶, but the legislation provides for important exclusions: benefits and assistance of an occasional and temporary nature, amounts arising from social income transfer programs, supervised internship scholarships, learning income, special pensions of an indemnity nature, health care benefits and annuities of an occasional or seasonal nature. Social security or assistance benefits of up to one minimum wage received by an elderly person over 65 years of age or by a person with a disability are also not considered, for the purpose of granting another BPC to a member of the same family.

The management of BPC is carried out by the Ministry of Development and Social Assistance, Family and Fight against Hunger, through the National Secretariat of Social Assistance (SNAS), responsible for the coordination, regulation, financing, monitoring and evaluation of the benefit. Its

¹⁴ Art 203. CF, 1988; Art. 20. BRASIL, 1993 (LOAS).

¹⁵ The BPC income criterion is, as a rule, up to 1/4 of the minimum wage per capita (art. 20, §3, of the LOAS). Law No. 14,176/2021 including paragraph 11-A (in article 20) and article 20-B, providing for the possibility of increasing this limit to up to 1/2 minimum wage in specific situations, such as a higher degree of disability, dependence on third parties for activities of daily living, or high commitment of family income to health expenses. However, this expansion is only achieved through a regulation still pending publication (art. 20-B, §1).

¹⁶ According to paragraph 1 of article 20 of Law No. 8,742/1993 (LOAS), as amended by Law No. 12,435/2011, the family is composed of the applicant, the spouse or partner, the parents (or, in the absence of one of them, the stepmother or stepfather), unmarried siblings, unmarried children and stepchildren and minors under guardianship, as long as they live under the same roof.



operationalization — which involves application, concession, maintenance, review, and payment, in addition to the medical and social evaluation — is the responsibility of the National Institute of Social Security (INSS).¹⁷

2.2.2. Temporary Benefits

Temporary Benefits are temporary provisions, aimed at preventing and coping with temporary situations of vulnerability caused or aggravated by birth, death, temporary vulnerability or public calamity. Regulated by LOAS/1993 and incorporated into SUAS in 2011, they integrate social protection as emergency or short-term responses, ensuring welcoming, coexistence and survival in times of crisis.

These benefits can be granted in cash, goods, or services, ensuring the social security of welcome, coexistence, and survival to individuals and families who, for a period, cannot face adversity alone. Such situations arise from contingencies — unexpected and sudden events that can generate or aggravate vulnerabilities, impacting daily life and requiring an immediate response from the government, regardless of the income of the affected people.

Depending on local regulations, the Temporary Benefits are directed to specific situations. In the case of birth, they include financial support or delivery of layettes and hygiene items; in situations of death, they pay for urn, wake, burial and transportation expenses; in the face of temporary vulnerability, they may cover housing assistance, food, transportation, and access to civil documentation; and in situations of public calamity, they are aimed at the provision of essential items, support for the reacquisition of goods, and coverage of emergency expenses¹⁸.

The responsibility for regulation and supply falls on Municipalities and the Federal District, which must regulate and operationalize the granting of Temporary Benefits, according to the local reality. States can participate in co-financing as long as it is agreed and regulated in the appropriate instances and there is no provision for federal transfers for this purpose.

2.3. Programs

The social assistance programs, provided for in LOAS/1993¹⁹, constitute integrated and complementary actions to the services and benefits, with defined objectives, duration and area of coverage. Its purpose is to qualify and enhance the social assistance network, adding components that respond to specific demands and reinforce social protection.

The following are the main national programs currently implemented in the field of social assistance: Access to Work (*Acessuas Trabalho*), BPC Work, BPC at School, Early Childhood in SUAS/Happy Child (*Criança Feliz*), Child Labor Eradication Program (PETI), and *Bolsa Família* Program (PBF).

2.3.1. Access to Work (*Acessuas Trabalho*)

CF/1988 and LOAS/1993 establish that the promotion of integration into work is one of the central objectives of the social assistance policy, as a way to guarantee livelihoods, reduce vulnerabilities and expand citizenship. To fulfill this function, SUAS incorporated, in 2011, the National Program for

¹⁷ BRAZIL, 2007a.

¹⁸ BRAZIL, 2010; BRAZIL, 2018a.

¹⁹ Art. 24, BRAZIL, 1993.



the Promotion of Access to the World of Work (Access to Work/*Acessuas Trabalho*), conceived as the main strategy of the policy aimed at the productive inclusion of its users.

Access to Work seeks to promote access to the world of work for people in situations of social vulnerability, through the mobilization and awareness of users, referral to courses and opportunities available in the territory, and monitoring of their trajectory, in order to favor autonomy, social emancipation and the strengthening of rights. It is important to highlight that it is not the responsibility of SUAS to carry out qualification courses or productive actions directly. In this field, social assistance is responsible for mobilizing, forwarding, and monitoring, ensuring that users have access to policies and initiatives that already exist in other sectors.²⁰

The program is referenced to CRAS and articulates directly with PAIF, in order to complement social work with families. While PAIF works to identify vulnerabilities and strengthen the family protective function, Access to Work expands the possibilities of productive inclusion, connecting users to work, education, and professional qualification policies.

The priority audience of Access to Work is composed of people aged 16 to 59 in situations of social vulnerability, and adolescents aged 14 and 15 are also admitted as apprentices with disabilities. The program emphasizes users already accompanied by the social assistance network, especially those enrolled in the Unified Registry and beneficiaries of income transfer programs and social assistance benefits. Among the groups that receive special attention are families and individuals in situation of extreme poverty, people with disabilities who are beneficiaries of the BPC, adolescents and young people in compliance with or ex-educational measures, families with children in a situation of child labor, people living on the streets, families with children and adolescents in institutional or family care, individuals who have left the penal system, women in situation of violence and people from the LGBTQIA+ population.

From an institutional point of view, the program is assigned to CRAS, but has its own additional technical team, so should not overload the basic social protection reference team. Its implementation occurs in a decentralized and agreed manner: the Union is responsible for national coordination and provision of technical guidelines; the States and the Federal District, the support and monitoring of the execution; and the Municipalities, the realization of local diagnosis, mobilization of the public, articulation with the network of qualification opportunities, and evaluation of results.

By articulating productive inclusion and social protection, Access to Work implements a central guideline of Brazilian social assistance: it promotes integration into the world of work as a way to expand citizenship and favor social mobility.

2.3.2. BPC Work

BPC Work is a program created to promote the access of people with disabilities who are beneficiaries of the Continuous Cash Benefit (BPC) to professional qualification and the world of work. Established in 2012²¹, the program aims to expand opportunities for qualification and labor

²⁰ BRAZIL, 2022; BRAZIL, 2021.

²¹ BRAZIL, 2012b.



inclusion, encourage autonomy and protagonism, overcome barriers that hinder productive insertion, expand social participation and foster practices that contribute to the elimination of discrimination.

The program's activities include identifying the target audience, carrying out a social diagnosis, awareness-raising actions, monitoring individuals and families, and referrals to the social assistance network and other public policies on education, health, work, and income. BPC Work maintains articulation with programs such as Access to Work and Pronatec, enhancing its effectiveness through intersectoriality.

One of the central mechanisms of the program is the possibility for the beneficiary to enter into paid activity without permanently losing the benefit. In these cases, the Continuous Cash Benefit (BPC) is suspended, not canceled, and can be reactivated if the person ceases to exercise the activity, without the need for a new concession process. This rule seeks to reduce the fear of permanent loss of the benefit, often pointed out as a barrier to entry into work.

The program's priority public is people with disabilities between 16 and 45 years of age who receive the BPC and express interest in working, but face obstacles in overcoming barriers to their insertion in the world of work.

The institutional arrangement provides for decentralized execution. The program is assigned to CRAS, and its activities are conducted by the technical teams of the units. The Union is responsible for guiding implementation, ensuring national execution, and carrying out monitoring and evaluation. The States are responsible for technical support and monitoring of municipal execution. The Municipalities and the Federal District, on the other hand, carry out the mapping, mobilization, and direct monitoring of the beneficiaries.

2.3.3. BPC at School

BPC at School is a program aimed at monitoring access and permanence of children and adolescents with disabilities, beneficiaries of the Continuous Cash Benefit (BPC), in the school network. Created in 2007²², the program's main objective is to ensure attendance and continuity of studies, expanding social protection and promoting the educational inclusion of beneficiaries.

The program's actions are structured in four axes: (i) identification of children and adolescents with disabilities who attend or are out of school; (ii) survey barriers that hinder access and permanence; (iii) conduct studies and define joint strategies to overcome these barriers; and (iv) monitor the execution of actions. To support this process, the Barrier Identification Questionnaire is used²³, an instrument that collects information directly on the challenges faced by beneficiaries, supporting the planning and development of appropriate interventions.

The target audience of BPC at School are children and adolescents with disabilities up to 18 years of age, beneficiaries of the BPC, whose educational inclusion is a fundamental condition for the expansion of autonomy and citizenship.

The program adopts an intersectoral and federative arrangement, articulating the responsibilities of the Union, States, Federal District and Municipalities through Management Groups. The Union is

²² BRAZIL, 2007c

²³ Questionnaire for the Identification of Barriers to Access and Permanence in School for Beneficiaries of the BPC with disabilities.



responsible for providing general guidance, identifying beneficiaries and providing technical support. The States are responsible for monitoring the adherence of the Municipalities, ensuring the enrollment of beneficiaries, monitoring the execution and offering technical support. The Municipalities and the Federal District, on the other hand, have the role of ensuring enrollment, training local teams, applying the questionnaire, monitoring beneficiaries and conducting direct monitoring.

BPC at School, by integrating social assistance and education, reinforces the perspective that social protection must go beyond income transfer, facing structural barriers and promoting inclusion in fundamental rights. It is, therefore, an initiative that links access to income guaranteed by the BPC to the guarantee of the right to education, expanding the conditions for development and social participation of children and adolescents with disabilities.

2.3.4. Early Childhood Program at SUAS/*Criança Feliz*

The Happy Child Program (*Criança Feliz*) was created in 2016 with the objective of supporting integral development in early childhood, considering the living conditions of families. It is an intersectoral strategy aimed at families with children from zero to six years of age, in line with the Legal Framework for Early Childhood.²⁴

The program articulates actions of Social Assistance, Health, Education, Culture and Human Rights policies. In the field of social assistance, its participation seeks to promote human development through monitoring and support for child development, support pregnant women and families, strengthen parenting, and facilitate access for pregnant women, children, and vulnerable families to available public policies.

The actions in SUAS are structured along two axes: (i) the carrying out of planned and periodic home visits by trained professionals to support families, stimulate bonds, and promote child development; and (ii) the qualification and integration of the early childhood care policies in the territory, expanding intersectoral articulation. This monitoring model brings public policies closer to local realities, allowing interventions that are more appropriate to each context.

The program's target audience is families in vulnerable situations: pregnant women, children up to 36 months old and their families benefiting from Bolsa Família; children up to 72 months old who are beneficiaries of the BPC; and children up to 72 months old who are away from family life due to protective measures.

The execution is decentralized and agreed upon. The Union is responsible for coordinating nationally, providing information on the priority public and offering technical support and training. The States have the function of articulating these actions in their territories and providing technical support to the Municipalities. The Municipalities and the Federal District are responsible for local coordination,

²⁴ The Happy Child Program was originally instituted by Decree No. 8,869, of October 5, 2016. Subsequently, this decree was revoked by Decree No. 9,579, of November 22, 2018, which consolidated several normative acts on policies aimed at childhood and adolescence, maintaining the Happy Child Program in its essence, but inserting it in a broader normative framework. In 2023, CNAS/MDS Resolution No. 117 approved the reorganization of the actions of *Criança Feliz* with full integration into the SUAS. The reorganization aims to align with the guidelines of the Social Assistance policy and incorporate the logic of social assistance services. A series of adjustments are planned, such as the expansion of the target audience, the definition of a minimum periodicity for home visits, the incorporation into the Basic Social Protection Service at Home, and the change of name to Early Childhood Program in SUAS/*Criança Feliz*, among others.



team formation, planning and monitoring of actions, implementation of home visits and definition of service flows to ensure a response to the identified demands.

By combining home visits, intersectoral articulation and close monitoring of families, the Happy Child Program (*Criança Feliz*) strengthens the perspective that social assistance must go beyond immediate protection, promoting conditions for human development and social inclusion from early childhood.

2.3.5. Child Labor Eradication Program (PETI)

The Child Labor Eradication Program (PETI) was created in 1996 as a specific strategy to address child labor in Brazil.²⁵ Over the years, the program expanded and, in 2005, with the implementation of SUAS, it became part of the set of actions of the social assistance network. In 2011, LOAS formally incorporated PETI as an intersectoral program, part of the National Social Assistance Policy.

In its initial formulation, PETI served children and adolescents from 7 to 15 years of age in situation of dangerous, arduous or degrading work. The program combined Extended Journey activities complementary to the school, income transfer to families through the Child Citizen Grant, and family support with referral to qualification and income generation actions, seeking to address both early work and its structural causes. With the consolidation of the *Bolsa Família* in 2005, the financial benefit was integrated into the new income transfer program, but PETI maintained its specific functions in combating child labor, focusing on family monitoring and the development of social protection activities.²⁶

As of 2013, the program was redesigned in the form of the Strategic Actions of PETI (AEPETI), which organized its activities in five axes: i) *information and mobilization* of professionals and communities; ii) *identification* and diagnosis of child labor in the territories, with the support of the Social Assistance Monitoring; iii) *social protection*, through the creation of care and referral protocols; iv) *defense and accountability*, based on the articulation with inspection agencies and the application of protective measures; and v) *continuous monitoring* of actions and results. This reformulation sought to consolidate PETI as a policy articulated with the entire SUAS protection network, in permanent dialogue with other sectoral policies, such as education, health, culture, and labor.

The program's target audience is made up of children and adolescents in situations of child labor, with priority given to those under the age of 16, except for those in the condition of apprentices from the age of 14. The service includes both the immediate removal of children and adolescents from work and the monitoring of families to prevent recurrence, ensuring access to social assistance services and other public policies.

The management of PETI is shared between the Union, the States, the Federal District and Municipalities, each with its own responsibilities. The Union is responsible for the formulation of national guidelines, intersectoral articulation, the production of diagnoses at the national level, the training of managers and technicians, in addition to monitoring and evaluation. The States are responsible for preparing regional diagnoses, providing technical support to the Municipalities, and monitoring the execution of actions. Furthermore, the Municipalities and the Federal District play a central role in the execution, which involves local diagnosis, mobilization of families and

²⁵ The program was initially conceived to face situations of exploitation in charcoal factories in Mato Grosso do Sul, an experience that served as the basis for its subsequent national expansion.

²⁶ BRAZIL, 2018b.



communities, articulation with the social assistance and intersectoral network and execution of social work with families and children.

2.3.6. Bolsa Família Program (PBF)

The *Bolsa Família* Program (PBF) is the largest income transfer program in Brazil and is one of the main instruments for the immediate alleviation of poverty. Created in 2004, extinguished in 2021 and relaunched in 2023²⁷, the program aims to fight hunger and poverty, through direct income transfer to the beneficiary, expand access to rights and promote the social development of families in vulnerable situations.

Access to the benefit depends on two basic criteria: the family must be enrolled in the Unified Registry and have a monthly income of up to R\$ 218 per person. Once granted, the minimum amount guaranteed is R\$ 600 per family. The composition of the benefit combines different installments according to the family profile: the Citizenship Income Benefit, in the amount of R\$ 142 per person; the Complementary Benefit, a portion intended to complement the total amount of the benefit up to the floor of R\$ 600 per family, whenever the sum of the other installments does not reach this amount; the Early Childhood Benefit, of R\$ 150 per child up to 6 years old; and the Family Variable Benefit, of R\$ 50 for pregnant women, nursing mothers, children and adolescents between 7 and 18 years old. This design allows for the incorporation of elements of differentiation according to family composition, although the minimum floor of R\$ 600 per family does not vary according to the size of the household.

Remaining in the program requires compliance with health and education conditionalities: prenatal care, vaccination according to the national calendar, nutritional monitoring of children under seven years of age, and minimum school attendance of 60% for children aged 4 and 5 years and 75% for students aged 6 to 17 who have not yet completed basic education. Failure to comply with these rules may result in blocking, suspension or cancellation of the benefit, but the program adopts a non-punitive logic: it considers that non-compliance with the conditionalities is an indication of vulnerability, and the family should receive special attention and intensified monitoring by social assistance.

The management of *Bolsa Família* is decentralized and involves different institutional actors. The National Secretariat of Citizenship Income (Senarc) is responsible for the national coordination and operationalization of the program, while Caixa Econômica Federal acts as the operating and paying agent. The National Secretariat of Social Assistance (SNAS) does not directly execute the program but participates in its intersectoral management. The States are responsible for coordinating the dialogue between secretariats, providing technical support to the Municipalities, managing resources and promoting training. The Municipalities and the Federal District, in turn, play a central role: they identify and register families in the Unified Registry, monitor compliance with conditionalities, coordinate local resources and ensure the integration of *Bolsa Família* with the social assistance network.

Bolsa Família has consolidated itself as a milestone in Brazilian social protection by articulating income transfer, access to basic rights and monitoring social assistance, thus ensuring security of

²⁷ BRAZIL, 2023b.



survival for the poorest families, whilst promoting conditions for their development and social inclusion.



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