

GUIDE TO

CHILD AND ADOLESCENT CENTERED *DISASTER RESPONSE AND EMERGENCY SHELTER*



G20
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AND A SUSTAINABLE PLANET

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GUIDE TO

CHILD AND
ADOLESCENT CENTERED
***DISASTER RESPONSE AND
EMERGENCY SHELTER***

*Guidelines for child and adolescent
centered disaster response and
attention to the specific needs of girls.*



Produced by
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Preamble

During times of crisis, the integral protection of children and adolescents must be at the heart of humanitarian actions and disaster management. UNICEF, in partnership with the **Ministry of Cities (MCID) and Ministry of Integration and Regional Development (MIDR)**, through the **National Secretariat for Civil Protection and Defense (SEDEC)**, reaffirms its commitment to promoting Child-Centered Disaster Risk Reduction (CCDRR). This approach, which puts children at the heart, seeks to ensure not only their physical safety but also their emotional, social and educational well-being.

During disasters, such as floods, droughts, landslides or forest fires, the vulnerability of children and adolescents is exacerbated. Separation from their families, loss of their homes, and disruption of their school routine can have profound consequences for their development and mental health. In these circumstances, it is essential that the response offers protection, safety, health and a healthy environment, integrated with mental health and psychosocial support approach.

All too often, in Brazil and in many other countries affected by disasters, wars or any kind of humanitarian crisis, children and their families are forced to leave their homes. In this context, local authorities offer temporary collective accommodation to provide affected families with a roof over their heads and minimum safety conditions. This short document aims to provide important guidance to local actors to ensure that emergency shelters and, more broadly, the overall response, meet the needs of children and adolescents, specifically adolescent girls who face additional risks.



CCDRR and its Importance in disaster situations

CCDRR (Child-Centered Disaster Risk Reduction)¹ is an approach that places children's needs and rights at the heart of disaster preparedness, response, and recovery strategies. In the context of disaster response and emergency accommodation, CCDRR helps local responders focusing on **3** key principles critical for children and adolescents:



1. BASED ON RIGHTS. The CCDRR ensures that the **rights of all children and adolescents**, including those on the move, migrant and refugee, are a priority in all efforts to prevent and mitigate loss of life, health, livelihoods and access to essential services. It is about ensuring that in any disaster response, the fundamental rights of each child are protected and respected.

2. INCLUSIVE. CCDRR focuses on reaching and engaging the **most vulnerable and marginalized children and adolescents**, ensuring that their voices are heard and that their specific vulnerabilities and risks are actively addressed. The goal is to leave no one behind, promoting inclusion at all levels of response and recovery.



3. HOLISTIC AND MULTISECTORAL. CCDRR takes an integrated approach, working **across different sectors** to support children, youth, families and communities, creating a safety net that strengthens **resilience**. This means investing in education, health, social protection and infrastructure to build safer communities prepared for future disasters.

A Call to Action

Collaboration between governments, civil society organizations, the private sector, and international agencies is critical to ensuring that local disaster response policies adopt CCDRR-based practices and standards. Together, we can construct environments that not only protect children from immediate risks, but also contribute to their rapid emotional, social and educational recovery with long-term effects.

UNICEF call on all parties involved to integrate CCDRR (Child-Centered Disaster Risk Reduction) into each step of disaster responses. Our commitment must go beyond ensuring the survival of children and adolescents in emergency situations. It is critical that they have the conditions they need to **thrive** in the aftermath of disasters, with **continued access to education, adequate protection**, and the **emotional and social support** they need to rebuild their lives with **dignity and hope**.

Abbreviations

CDC	Convention on the Rights of the Child
CF	Federal Constitution
CFC	Core Commitments for Children in Humanitarian Action
CONANDA	National Council on Child and Adolescent Rights
CT	Guardianship Council
ECA	Statute of the Child and Adolescent
IRCC	Children's Climate Risk Index (CCRI, in English)
ISNAC-PD	Assessment of intersectoral needs focusing on post-disaster care for children and adolescents
MIDR	Ministry of Integration and Regional Development
RDD	Disaster Risk Reduction
CCDRR	Child-Centered Disaster Risk Reduction
SEDEC	National Secretariat for Civil Protection and Defense
SCFV	Service of Coexistence and Strengthening of Bonds
SGD	System of Guarantee of Rights
SGBV	Sexual and Gender-Based Violence
SINPDEC	National Secretariat for Civil Protection and Defense
SIPIA	Information System for Children and Adolescents
SUAS	Unified Social Assistance System
UNDRR	United Nations Office for Disaster Risk Reduction
UNFCCC	United Nations Framework Convention on Climate Change
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene

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1. Introduction

The climate crisis, in its multiple manifestations of vast magnitude, reinforces the need **to cultivate a culture of preparation and prevention against risks and disasters**, based on the promotion of dignity, the active participation of all spheres of society, and the common goal of ensuring a resilient present and future against climate change and the worsening of its effects for each and every child and adolescent - *in their rights, dreams and diversity*.

Social and climatic shocks and stresses have a major impact on the rights necessary for the development of children and young people, as stated in General Comment No. 26 of the Convention on the Rights of the Child², compromising full access **to education, the best possible standard of health, social protection and an adequate standard of living, a life free from all forms of violence, non-discrimination, freedom of expression, ethnic culture, the right to play and the best interests of the child**.

According to the **Global Children's Climate Risk Index³**, one in seven children on the planet is currently at **high exposure to the risk of river flooding**, while 920 million children (one in three) face **high exposure to the risk of water scarcity**, including water stress events and severe drought. According to the Index, when analyzing the situation of children and adolescents in Brazil, around 8.6 million children and adolescents are exposed to the risk of water shortages; 13.6 million to the risk of heat waves; 7.3 million to the risk of river flooding; and 1.8 million to the risk of coastal flooding. This data, added to other projections of risks and levels of exposure in the study, calls for **action in the development of public policies and practices focused on the comprehensive protection of children and adolescents** from all disaster risks.



In the construction of the child-centered disaster risk reduction culture at all levels, **it is vital to reaffirm the principles on which planetary climate action is based⁴, in the exercise of 'common but distinct responsibilities' and the promotion of 'intergenerational solidarity'**. It is essential to incorporate greater collaborative and participatory expressions into climate action among the most diverse entities in society, each in their own social roles, but integrated in collective efforts *"in the promotion and protection of all human rights, including the right to development"*⁵ of present and future generations and for promoting the right of all to participate in the governance of disaster risk reduction strategies.

In this sense, in line with the guiding principles of the Sendai Framework⁶, the Sendai Gender Action Plan⁷ and other international instruments, this Guide focusing on providing care to children and adolescents in disaster response contexts aims to disseminate recommendations, that establish **guidelines for a culture of risk and disaster prevention centered on childhood**. These guidelines are based on inclusive, accessible and non-discriminatory strategies, which include the perspectives of age, gender, race, ethnicity, culture and accessibility to disabilities, so that more and more attention is given to people disproportionately affected by disasters.

What is the Guide

UNICEF Brazil, in collaboration with the Ministry of Cities and the Ministry of Integration and Regional Development, through the National Secretariat for Civil Protection and Defense (SEDEC), reaffirms its commitment to the integral protection of children and adolescents, promoting a culture of prevention based on better risks knowledge. This commitment translates into the effort to ensure that, in disaster situations, the needs of children and adolescents, especially girls, are properly met with respect, dignity and safety.

Guided by the fundamental principles of 'Humanity, Impartiality, Neutrality and Independence', this guide aligns with UNICEF's **'Core Commitments for Children in Humanitarian Action'** (CFC). These principles ensure that our actions are guided by humanitarian ethics, prioritizing the well-being of children, adolescents and their families, regardless of their social, cultural or economic context. Through this document, we seek not only to offer immediate solutions, but also to foster a culture of resilience and prevention that strengthens communities' capacity to respond effectively and safely to disasters, ensuring that no child or adolescent is left behind.

This guide is intended to serve as an inspiration to civil defense agents, public managers, social assistance professionals and civil society organizations. It provides guidance for emergency responses and, where necessary, the creation of temporary accommodation that is truly inclusive, safe and responsive to the specific needs of children and adolescents. We hope that this material will contribute significantly to the promotion of emergency responses that ensure full protection and strengthen the capacity of adaptation and recovery of vulnerable communities when facing crises.

This guide does not replace the guidelines of the Brazilian State or international guidelines, but aims to foster **public debate** and contribute to the **improvement of risk and disaster management strategies** with the objective of ensuring all children a present and a future resilient to climate change.



2. Core Commitments for Children in Humanitarian Action and disaster risk reduction

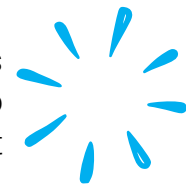
In structuring all phases of the Disaster Risk Reduction (DRR) cycle – prevention, mitigation, preparedness, response and recovery – UNICEF advocates an approach that not only responds to the multiple specific needs of children and adolescents, but also, and above all, puts them at the heart of actions. DRR should be focused on children and adolescents, ensuring that they are informed, included and act as active agents in the development of initiatives and policies aimed at their best interest. In the CCCs, UNICEF defines **Humanitarian Response** as: “Provision of services and assistance during or immediately after a specific emergency in order to save lives, reduce health impacts, ensure public safety, maintain human dignity and meet the basic livelihood needs of affected people”.

For UNICEF, such actions must be governed by fundamental humanitarian principles, such as those provided for and governed by the **Convention on the Rights of the Child**, which focuses on the full protection of children and adolescents, by and in all spheres of society and by the most diverse national contexts. In addition to the humanitarian principles of ‘*Humanity, Impartiality, Neutrality and Independence*’, the design of strategies should also be guided by principles such as:

- **Human rights-based approach:** ensuring that disaster responses not only protect but also empower children, adolescents, women and affected populations, enabling their voices to be heard and their rights to be actively and participatory advocated for;
- **Principle of do no harm:** to ensure that the actions implemented do not aggravate conflicts or increase insecurity for affected communities. Every intervention must be context-sensitive and protect, rather than intensify, the challenges faced by populations at risk;
- **Non-discrimination:** to identify, monitor, and address patterns of discrimination and power dynamics that may emerge or intensify during disaster responses. It is important to ensure that all populations, regardless of their characteristics, receive adequate and equal support;
- **Participation of children and adolescents:** to ensure meaningful participation of girls and boys of different ages and abilities, in which children are listened to and supported to express their opinions freely and safely and to participate in decisions that affect them;



• **The best interests of the child and adolescent:** where humanitarian action is guided by the best interests of the child. Accordingly, if a legal provision is open to more than one interpretation, the interpretation that most effectively serves the best interests of the child must be chosen; and



• **Environmental sustainability:** to adopt measures that minimize environmental impacts, such as reducing greenhouse gas emissions, pollution and waste. This helps protect the environment and strengthens the long-term sustainability of affected communities.

In the response phase, whether in the affected community or in the organization of emergency accommodation, it is critical that the **principles of protection and accountability** are fully integrated, ensuring that the protection of children is paramount, with **zero tolerance** for abuse, sexual exploitation, violence and discrimination.

In addition, it is crucial to generate ethical evidence, i.e., to collect and analyze data responsibly, respecting the rights and dignity of those affected, especially the most vulnerable. This implies obtaining information about the impacts and needs of populations without compromising their privacy, without causing harm and always with informed consent. This data must be used transparently and fairly to guide policies and decisions, not only in the immediate response, but also in the formulation of recovery and preparedness strategies, ensuring more effective action in line with the well-being of the population. In the context of humanitarian responses and structuring of shelters, which, in addition to hosting, promote essential basic services to affected populations, it is important to **structure intersectoral response flows**, in which different sectors- such as Civil Protection and Defense, Social Assistance, Health, Education, Infrastructure, Public Security - are integrated, from the local to the Federal level, in order to meet the broad and specific needs of the most vulnerable groups. To this end, UNICEF has developed a methodology in Brazil for **Assessing intersectoral needs, with a focus on post-disaster care for children and adolescents** (ISNAC – PD / Intersectoral Needs Assessment for Children).

Regarding the protection of children and adolescents in these contexts, the compilation of guidelines below concerns the work carried out by UNICEF in Brazil in recent years.



This document is organized according to UNICEF's key technical areas, which include **Social Policy, Child Protection, Social Behavior Change and Accountability to Affected Population, Health and Nutrition, Water, Sanitation and Hygiene (WASH)** and **Education**. These areas are fundamental to guide integrated and effective actions for the well-being and development of children and adolescents in situations of emergency and vulnerability.

In addition, considering specific challenges that mainly affect girls (and may also affect other groups), special attention will be paid to precepts whose objectives, when implemented, aim to reduce gender disparities and protect girls and children from violence.

3. Integral Protection of Children and Adolescents, a commitment of all, with absolute priority.

In Brazil, art. 227 of the Federal Constitution (CF) establishes that *“it is the duty of the family, society and the State to ensure children, adolescents and young people, **with absolute priority**, the right to life, health, food, education, leisure, professionalization, culture, dignity, respect, freedom and family and community coexistence, in addition to keeping them safe from all forms of neglect, discrimination, exploitation, violence, cruelty and oppression.* In the same sense, this collective responsibility is also provided for in article 4 of the Statute of the Child and Adolescent (ECA)⁸ – Law no. 8.069/1990, which regulates this **Integral Protection of children and adolescents** (article 1).

The integral protection of children and adolescents in situations of risk and disasters, includes the full rights of this group. As such, it cannot be seen as the exclusive responsibility of a single sector or entity, but as a **collective commitment, in addition to shared responsibility, which requires the collaboration of several areas, sectors, institutions and people.** The concept of intersectorality emerges as an essential approach to ensure that this protection is effective, comprehensive and adapted to the multiple needs. The creation of the **basic intersectoral guidelines**, with a guarantee of **priority for this public**, reflects this integrated vision, allowing different sectors to work in a coordinated and complementary manner. Art. 70 of the ECA reinforces the need for this common responsibility: *“it is everyone’s duty to prevent the occurrence of threat or violation of the rights of children and adolescents”*, as well as the **guarantee of priority** is included in art. 4 of the ECA as the **“primacy of receiving protection and help in any circumstances”**, the **“precedence of care in public services of public relevance”**, the **“preference in the formulation and execution of public social policies”** and the **“privileged allocation of public resources in areas related to the protection of children and youth”**.

Intersectorality in the integral protection of children and adolescents in disaster and emergency contexts involves the active and integrated participation of areas such as Civil Protection and Defense, Social Assistance, Health, Education, Infrastructure and Public Security. Each of these areas plays a crucial role in prevention, response and recovery in situations of risk, but it is the articulation between them that ensures an effective outcome. This coordination strengthens responsiveness and extends the reach of actions, ensuring that no aspect of protection is neglected.

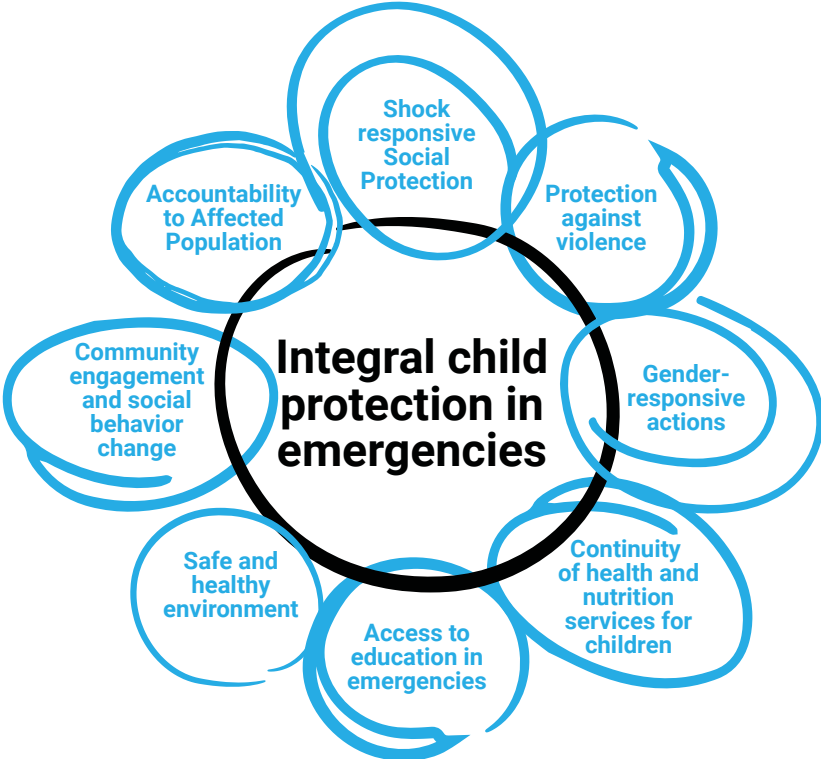
In addition, because children and adolescents are in a process of physical and cognitive development process, they have specific vulnerabilities and face risks that go beyond the disasters themselves, such as **exposure to violence, exploitation and discrimination.**

These additional threats require even stricter protective measures. Intersectorality ensures that public policies and emergency actions include all dimensions of protection, from access to essential services to the integral guarantee of their rights, in accordance with art. 5 of the ECA stipulating that **“no child or adolescent shall be subject to any form of neglect, discrimination, exploitation, violence, cruelty and oppression”**. By integrating different sectors, it is possible to offer a faster, more efficient response, appropriate to the specificities of each situation and region and that reinforces local flows.



4. UNICEF Brazil's Guidelines for the Integral Protection with Absolute Priority of Children and Adolescents in Situation of Risks and Disasters

Pillars of Integral Protection of Children and Adolescents in Situations of Risk and Disasters of UNICEF in Brazil



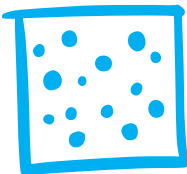
Protection against Violence

In emergency situations, children and adolescents are exposed to risks that threaten their lives, being more vulnerable and exposed to violence, various forms of abuse, susceptible to physical and sexual exploitation, kidnapping, early or forced marriage, human trafficking and recruitment by groups that engage in illegal activities. The dynamics of disasters and risks can also result in family separation, leaving children and adolescents alone or unaccompanied by their caregivers and thus exposed to more risks.

Often, the situation requires families to be accommodated in **collective temporary shelters**, where the risks to **children and adolescents**, especially girls, are exacerbated. In this context, the creation of **Safe and Friendly Spaces** for children and adolescents is an essential strategy to promote the **well-being, safety** and **emotional stability** of this group, inside and outside the accommodation, offering protection and support, reducing exposure to additional risks.



These spaces are designed to meet not only physical needs for protection, but also psychosocial and educational needs, providing an environment that allows for healthy development, even in the midst of adverse circumstances.

Main Child Protection Measures and Structures:




- **Screening Centers.** Once they have been rescued, all children, adolescents and their families must be sent immediately to Screening Centers, where services from the Rights Guarantee System (SGD) are concentrated, such as the Guardianship Council (CT), the Brazilian National Health System (SUS) and the Unified Social Assistance System (SUAS). The aim is to ensure identification, the reuniting of families, attention to immediate needs and referral to public services. The creation of Safe and Friendly Spaces in these centers is recommended.

- **Identification and Protection of Unaccompanied, Separated and Undocumented Children and Adolescents.** When a child or adolescent is found in these conditions, they should be immediately referred to a **safe place**, such as the **Screening Centers** or guardianship councils. These centers must act promptly to identify the child or adolescent and apply the appropriate protective measures, articulating with authorities and services.



- **Integrated Information System.** It is extremely important SDG institutions and actors working the guarantee of child rights use an **integrated and unified** national information system for the management and referencing of protection cases, ensuring data security and protection. In Brazil, **SIPIA** is the official tool for recording and handling sensitive information about children and adolescents victim or at risk of violence, and supporting the planning, monitoring and evaluation of public policies.

- **Registration and Training of Volunteers.** We recommend that government agencies set up a **unified register of volunteers** and civil society organizations, as well as offering basic training in child and adolescent protection and **specialized listening**. This ensures an agile and organized response in crisis situations, avoiding overlapping services and ensuring the maintenance of family ties and protection against violence.





• **Safe and Friendly Spaces**¹. These spaces should provide a safe and focused environment for children and adolescents, promoting their **psychosocial well-being** and **protection from violence**. They are places where they can play, express themselves, socialize and learn skills to face challenges. They should include:

a. Guarantee of Protection: Spaces should be safe environments where children and adolescents can voice their concerns and share experiences. Special attention should be paid to girls and their caregivers, encouraging them to exercise their rights. In Brazil, the team must be qualified for **specialized listening** and **referral** of cases, according to Law no. 13.431/2017 and Decree no. 9.603/2018.

b. Interdisciplinary and Skilled Team: Spaces must have an interdisciplinary team trained to welcome and listen without revictimization, creating activities that promote emotional and social support.

c. Mental Health Promotion and Psychosocial Support: The mental health and psychosocial well-being of children, adolescents and caregivers should be promoted through sports, recreational, artistic and cultural activities, strengthening their resilience capacities and helping them cope with trauma and stress.

d. Education and Continuity of Learning: Educational and pedagogical activities should be offered to ensure that the cognitive and educational development of children and adolescents is not interrupted during an emergency. The articulation of the formal education system is fundamental for a safe return to school.

e. Access to Rights and Services: Strengthen child protection in the community and ensure access to secure information on services and rights by facilitating access to these resources.

f. Inclusive and Accessible Environment: Spaces should be accessible to all children and adolescents, including those with disabilities, fostering an inclusive environment that values diversity and ensures the full participation of all.

¹ Learn about the 'Espaços da Gurizada' (Children's Spaces), created by UNICEF in Rio Grande do Sul to support children and families affected by the heavy rains that hit the state in the first half of 2024: <https://www.unicef.org/brazil/enchentes-no-rio-grande-do-sul>

g. Active Participation of Children and Families: The participation of children, adolescents and their families is essential in the creation and management of spaces. This promotes a sense of belonging and facilitates emotional recovery and resilience.

h. Guarantee of Privacy and Personal Hygiene: Adequate privacy areas must be ensured so that children and adolescents can take care of their hygiene with dignity and safety. Special attention to adolescents, especially in relation to menstruation, should be treated with respect and sensitivity.

Gender Perspective and Protection of Girls from Sexual Violence

Disaster situations affect women, men, boys and girls in different ways, also varying according to age, color/race, ethnicity, disability condition and economic conditions. For women and girls, deep-rooted gender disparities can worsen.

These disparities can lead to greater vulnerability to violence and lack of safe and adequate access to humanitarian assistance. This can manifest itself in various ways during and after a disaster, such as increased household responsibilities, exposure to violence, including in collective temporary settings, difficulties in accessing education, and lack of adequate access to hygiene items, especially related to menstruation. Therefore, it is essential that public actions and policies consider these specific needs to ensure full protection and promotion of gender equity, as guided by the Gender Action Plan (SENDAI GAP) linked to the Sendai Framework (2015-2030).



- **Planning for the collection of data disaggregated by age, sex, color/race, and disability conditions is critical to creating more inclusive response strategies.** It is also necessary to identify those who are pregnant, breastfeeding or have recently given birth, with children in their care. This data informs the specific needs of women and girls and helps in formulating actions that promote gender equity.

- **Observe issues that affect the safety of women and girls, children and adolescents in emergency accommodation,** as a way of distributing people in the spaces, lighting the paths to collective structures, such as bathrooms and kitchens, among other aspects.



- **Promote participatory spaces in emergency accommodation where women and girls can express their needs.** Active participation helps to identify and solve issues that may affect access to education, health, assistance and, above all, the right to protection against violence.

- **Ensure emergency accommodation monitoring teams include female staff to ensure gender balance.** This provides different perspectives on the conditions of shelter spaces and can result in environments that are more sensitive to the specific needs of girls.



- **Ensure the supply of personal hygiene items, such as menstrual products, which allow women and girls to maintain routine care and identify demands for access to essential medicines, including post-exposure prophylaxis and contraceptive medications.** Define the necessary inputs always jointly with women and girls, ensuring adequacy to their needs, including from a cultural point of view.

- **Ensure that girls and boys have access to formal and non-formal education in a way that is integrated into the recovery process in the event of a crisis.** In active school search strategies and the re-establishment of learning, consider the factors of exclusion that affect girls and boys differently. For example, the increase in domestic child labor of girls, leading to permanent withdrawal from school.



- **Identify the operating conditions of services and channels for reporting and helping in cases of violence against women and girls and strengthen the dissemination of information to the population affected.** In shelters, in addition to disseminating this information, we recommend defining focal points for violence protection topics, including receiving reports of violations committed by emergency response teams. Ensure that all humanitarian aid staff are trained to promote proper listening to children and adolescents who are victims of violence, as established by Law no. 13.431/2017, which deals with the Protection System for Children and Adolescents who are victims and witnesses of violence.

- **Ensure the training of teams so that they know the mechanisms for protecting women and girls.** In Brazil, teams must know how to welcome girl and boy victims according to the Law 13.431/2017. Establish mechanisms so that humanitarian teams do not adopt practices that violate the rights of women and girls.



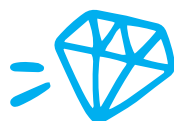
- **Include gender equity as part of contingency plans and response strategies.** This ensures that the needs of women and girls are addressed at every stage of the disaster response process, from preparedness to reconstruction.

- **Ensure Gender-Responsive Early Warning Systems** by developing strategies that reach out to peripheral and high vulnerability areas areas where women, including girls, may be victims of violence and rights violations. This ensures that all parts of the community receive emergency information in a timely and effective manner.



Shock responsive social protection

Situations of risks and disasters can lead children, adolescents and their families to poverty or worsen the conditions of those who are already in it. Effective actions in social protection, focused on the most vulnerable groups, are crucial to prevent and combat multidimensional poverty. The recommendations below aim to strengthening components of social protection to ensure that children and adolescents have access to basic rights and meet essential needs before, during and after emergencies.



- Guarantee **state and municipal Social Assistance budget** for emergency, especially provision of occasional benefits - preferably in cash - and the installation of accommodation sensitive to the specificities of children and adolescents, including the provision of safe spaces for recreational and educational activities with the provision of adequate material (Play and Learn kit, rubber mats to concentrate babies and children in early childhood, etc.) and trained professionals.

- **Map families with children and adolescents** in territories at risk of disasters in the pre-emergency period. Multidimensional indicators that allow the selection and classification of the most vulnerable territories, such as the Single Registry's Family Vulnerability Index in Brazil, can be used to identify families with children and adolescents with possible situations of vulnerability in the territory and that may be aggravated in case of emergency;





- Update the registry or include families with children and adolescents in the **Single Registry**², which, in Brazil, will allow the access to cash transfer programs, other benefits and social programs, in addition to facilitating the planning of actions before, during and after the emergency and monitoring of affected families in the long term.

- Ensure the **registration** of the population affected by the emergency, including the implementation of quick population census in temporary accommodation, respecting principles of confidentiality and informed consent, allowing the collection of the collection of disaggregated data, at least, of age, sex and household structure. It is also recommended, whenever possible, to collect information on race, nationality, migration status, the presence of pregnant or breastfeeding women, people with disabilities, self-identification as LGBTQIA+, among other characteristics or situations that are important for mapping specific needs. This information recognizes children and adolescents who have been affected by the emergency and whose daily lives have been disrupted, in order to target actions aimed at ensuring their rights;



- Ensure access to **benefits and cash transfer programs** such as the *Bolsa Família* Program and the Continuous Cash Benefit (BPC) in Brazil, preferably in a anticipated way, using the mapping of families in territories at risk of disasters. For new emergency programs, **prioritize families with children and adolescents**. It is essential to disseminate information and guidance to affected families about the cash transfer programs, aid and services available through multiple communication channels, including door to door strategies in affected areas to adapt everyone's capacity to access updated information in the affected areas;

- **Evaluate the interruption of cash transfer program conditionalities** of social cash transfer program transfer programs such as the *Bolsa Família* Program³ as soon as a state of emergency or calamity is declared, avoiding the worsening of situations of vulnerability due to the impacts of the emergency;



- Ensure social work is carried out by **social workers and psychologist** in affected communities to identify vulnerabilities, specificities and ensure the referral of children, adolescents and their families to **access concrete supports** through articulation with education, health policies, with the guardianship council, among others;

2 The Single Registry for Social Programs identifies and characterizes low-income families residing across the national territory. It is the main tool of the Brazilian State for selecting and including low-income families in social programs.

3 The conditionalities are commitments taken by beneficiary families in the areas of health and education. They exist to reinforce the families' entitlement to access their basic social rights. In health, the conditionalities are tied to compliance with the national vaccination schedule, monitoring the nutritional status of beneficiaries up to 7 years of age, and ensuring prenatal care for pregnant women. In education, they are linked to a school attendance rate of 60% for beneficiaries aged 4 to 6 and a school attendance rate of 75% for beneficiaries aged 6 to 18 who have not completed basic education (elementary and high school).

- Ensure the continuity of the **Service of Coexistence and Strengthening of Bonds (SCFV)** teams in temporary accommodation to offer recreational and coexistence activities and avoid the interruption of service in territories affected by the emergency, with a special attention to the provision for children and adolescents and with specific methodologies for the emergency context; and



- Avoid the suspension of **home visits** for families with **children aged 0-6 years** (Early Childhood in SUAS/Happy Child) and with **children with disabilities** (Home Basic Social Protection Service for People with Disabilities) in emergency situations. If it is necessary to suspend home visits, evaluate the possibility of carrying out the visits in the temporary accommodation, defining a adapted methodology.



Right to Education in Emergencies

Crises and emergencies deeply affect the school community, especially the most vulnerable ones. In addition to damage to facilities, equipment, and recreation spaces, many schools are used as temporary housing, and educational activities are usually the last to normalize. It is therefore essential to act quickly and effectively in creating or re-establishing safe, secure and inclusive environments that allow for the continuity of learning and development.

- **Creating safe, welcoming and suitable spaces** in emergency accommodation is necessary to ensure the protection of children and adolescents. Spaces for exclusive use by girls and boys, that are **safe** and **comfortable** – covered, ventilated, illuminated and with nearby sanitary facilities – facilitate the care and ensure the rights of babies, children and adolescents. The availability of **didactic and playful materials**, organized by age groups, promotes the integration and emotional comfort of children and adolescents. Play time, music, and games help relieve stress and minimize traumatic experiences⁴.



- Ensure the presence of **trained and engaged support personnel**. Teams with education and social assistance professionals can monitor and conduct educational and play activities. These actions help mitigate negative impacts, prevent violence and protect boys and girls, including by referring cases to specialized care. Schedules and planned collective activities contribute to the entertainment and interaction of boys and girls, promoting moments of meaningful exchange and providing a sense of normalcy.




- **Protect the school**, which represents an essential space in the development of children and adolescents. It is important to prevent schools from being used as emergency shelters. The preparation phase should provide alternative locations for the installation of temporary collective accommodation. If the school is affected or occupied in times of crisis, it is essential that actions are prioritized for its reopening and resumption of regular activities. The school environment is crucial for the development, learning, coexistence and full protection of each child and adolescent, their families and education professionals⁵.



- **Taking care of the mental health** of the entire school community is a priority during emergencies and after a crisis. Disasters can affect everyone's mental health in different ways and intensities. It is important that all members of the school

4 https://www.unicef.org/brazil/media/14501/file/deixa-que-eu-conto_guia-de-possibilidades-pedagogicas.pdf

5 <https://www.unicef.org/brazil/relatorios/guias-por-uma-educacao-que-protege-em-situacoes-de-crise>



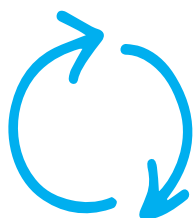
community are attentive, take care of themselves, receive support and can seek professional help. Thus, the school will be able to play its fundamental role so that students and their families can deal with and recover from emergency situations.

- **Keeping every child and adolescent in school** should be a primary goal of the education sector after a disaster. Re-establishing and strengthening the bond between students and the school is essential in times of crisis. The intersectoral action of the protection network, in the family and community context, allows the identification of children and adolescents who are out of school or at risk of dropping out, occurrences that are significantly accentuated in emergencies. In Brazil, UNICEF supports the implementation of Active School Search, with the strategy of coordinating intersectoral efforts to reestablish and strengthen bonds between girls and boys and school, even in emergency situations.⁶



Continuity of Health and Nutrition services

Emergencies, whether due to disasters, epidemics or lack of assistance, contribute significantly to the burden of disease and mortality, requiring governments and civil society organizations and communities to **improve preparedness and response capacities**. Social, economic and environmental vulnerability increases the risk of impact on human health, and among the various demographic groups, children and adolescents stand out for their protection and care needs. It is critical that health services, specifically maternal and child health and nutrition services, are prepared and resilient in crisis and disaster situations.

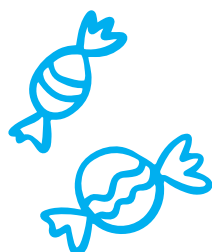






- **Ensure coordination**, clarifying responsibilities and roles of the various players involved, national and local, governmental and civil society. This coordination makes it possible to improve the collective impact, from gathering needs and managing information, setting objectives and priorities, identifying the technical and financial resources available and needed, planning and aligning activities and workflows, avoiding gaps and duplications.

- **Strengthen and ensure continuity of essential services**, including immunization, maternal and childcare, HIV prevention and treatment, by re-establishing, maintaining and expanding safe and equitable access to basic services with adequate quality, including access to essential inputs such as medicines and vaccines. Decentralized and strengthened community-based primary care is critical in the most disaster-prone areas. The resilience of communities and health infrastructure must be strengthened to prevent the collapse of the health system and ensure its ability to respond quickly and effectively. The re-establishment of information systems is also essential for monitoring the local health situation, including the notification of health problems and the active search for populations targeted by priority interventions, such as vaccination⁷.




- **Preventing, tracking and referencing micronutrient malnutrition and deficiencies** is critical in an emergency context. Caregivers should be supported to adopt recommended breastfeeding and infant feeding practices in order to prevent malnutrition in children, as well as eventual micronutrient supplementation and food fortification. Pregnant women and lactating mothers require iron and folic acid supplementation in addition to weight monitoring, counseling, and nutritional support. Children should be monitored, and, in case of malnutrition, treatment should be ensured, including referral of severe cases. Nutrition monitoring and information systems, including nutritional assessments, should be re-established and strengthened, as timely data and evidence allow for better decision-making and targeting of actions.





• **Regulating and advising on the use of breastmilk substitutes**, promoting the protection of breastfeeding against unethical marketing practices is essential, and follows the International Code on the Marketing of Breastmilk Substitutes and subsequent World Health Assembly resolutions as well as the Brazilian Standard for the Marketing of Foods for Infants and Young Children. In addition, it is important to consider the increased risk of diarrhea and infections related to the use of breast milk substitutes in emergencies with unhealthy water access conditions and difficulty in obtaining clean and properly sterilized utensils. In this sense, in addition to access to counseling services, it is essential to discourage the donation of breast milk substitutes, the use of nipples, pacifiers and bottles, and the offering of ultra-processed products aimed at children up to three years of age, such as baby food.




• **Protecting early childhood** involves ensuring safe spaces for protection and care, which access to essential services in an integrated manner. Promoting social interaction between peers in environments protected from accidents and violence must be a priority. In addition to direct care for children, it is essential to offer support to parents and caregivers, including the protection and promotion of breastfeeding and healthy supplemental feeding. These actions benefit both children and their caregivers, helping to protect caregivers' mental health and creating a more balanced and healthier environment for all.



Safe and healthy environments


In situations of risk and disaster, **safe access to water, sanitation and hygiene (WASH) services** is essential to promote the **health, well-being and dignity** of affected populations, especially vulnerable groups such as children, adolescents, people with disabilities and pregnant women. The lack of adequate WASH infrastructure can result in unsanitary conditions, increased risk of disease and exposure to violence, especially for girls and women. To protect their rights and ensure an effective response, specific measures must be implemented to **promote healthy environments** in reception spaces and to re-establish access to essential public service infrastructures, also considering vulnerable populations.

- **Quick needs assessment**, with a view to assessing the direct and indirect impacts on the provision of water and sanitation services in essential public service infrastructures, focusing on **health units, schools, collective housing, small municipalities, traditional communities and peripheral neighborhoods**, in order to subsidize integrated and timely actions, based on evidence, to reestablish access to water and sanitation services for vulnerable communities.



- **Ensure the regular distribution of potable water, in sufficient quantity for consumption, personal hygiene and food preparation.** Water should be treated and provided at safe and accessible access points, considering the specific needs of girls and other vulnerable groups, based on the key information and priorities identified in the rapid needs assessment.

- **Ensure sanitary facilities that ensure privacy and security, with gender separation and adaptations for people with disabilities.** These spaces need to protect girls from potential harassment or violence and address their specific hygiene needs, such as during their menstrual period.



- **Monitoring sanitary conditions through constant surveillance of sanitary conditions and infrastructure** is crucial to ensure that the water supplied is of quality and that sanitary facilities are clean and safe. This monitoring is essential to prevent the spread of diseases, especially in vulnerable groups such as girls and young children.

- **Providing personal hygiene products**, including items such as menstrual pads, soap bars, toothbrushes and diapers for families with babies, is essential for girls and boys to maintain their personal hygiene with dignity during the emergency period, based on a survey of key needs, especially with families in temporary accommodation.



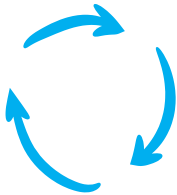


- **Promoting health and hygiene practices on an ongoing basis during emergencies** is critical to preventing diseases related to inadequate environmental sanitation and ensuring the dignity of each person. We recommend addressing the promotion of personal hygiene, menstrual care, and hygiene practices that protect the health of girls and boys, such as hand washing with soap and water, including guidance initiatives with the most vulnerable families on strategies for cleaning and disinfecting water tanks and environments.

Social & Behavior Change and Accountability to Affected Populations

Effective communication in disaster situations is critical to ensuring the safety and well-being of affected populations, especially vulnerable groups such as children, adolescents, people with disabilities and traditional communities. When information about safe routes, weather conditions, and services is transmitted in a clear, accessible way that is tailored to diverse cultural and age needs, the chances of reducing harm and saving lives increase considerably.

- **Ensuring effective coordination between government, civil society, affected communities and community leaders** is critical to ensuring access to information during emergencies. Each actor's role must be clear to ensure that everyone acts in an integrated manner. Tools such as the formation of working groups, regular meetings and collaboration platforms help to avoid duplication of efforts and the dissemination of contradictory information, optimizing resources and strengthening the trust of communities.



- **Develop an adapted and adequate communication strategy**, including early warning systems, based on detailed analysis of the risks to communities, especially the specific risks to children and adolescents. We recommend identifying the target audience to ensure communication that reaches quickly and effectively to everyone in need, including traditional communities such as indigenous peoples and quilombolas in Brazil, covering all phases of the disaster cycle, from preparedness to recovery. For these strategies to be inclusive, it is essential to ensure the accessibility of the language and cultural specificities of these groups, in addition to evaluating the most appropriate communication channels for each context. It is essential to provide for community engagement activities aligned with communication actions, including door-to-door contact actions where this is the best or only option to reinforce access to services and encourage preventive behaviors.





- **Create forms of community engagement and feedback, including children and adolescent participation**, so that emergency actions are aligned with the needs of the communities, through a **process of continuous listening and accountability** with affected families. Through channels with diverse methodologies, such as social media, surveys and focus groups, it is possible to capture concerns, gather feedback and complaints, and quickly discover any harmful effects of ongoing humanitarian action, allowing adjustments and improvements for an improved and more effective response.

- **Disseminating the rights of children must be a priority** in order to ensure the right to life and protection of this public, with the **proper referral** of children to protection services, through the dissemination of **reporting channels** to report violations, identify unaccompanied children and ensure their transfer to the **competent bodies**, such as those of protection, health, social assistance and education.



- **Children's right to privacy must be secured during emergency situations.** Taking and publishing images of children and women on vulnerable situations can put them at risk of reprisals, including physical or psychological harm and life-long stigmatization or rejection. Moreover, any use of images of children require permission from the child and his or her guardian. Most importantly, unaccompanied children in humanitarian situations should not have their images disseminated due to human trafficking risks, and family reunification needs to be overseen only by protection and assistance services. Children, adolescents and their families have the right to have their images treated with respect in any situation.



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GUIDE TO
**CHILD AND
ADOLESCENT CENTERED
DISASTER RESPONSE AND
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