Social Protection Systems in Latin America and the Caribbean: Brazil

In recent years, Brazil has developed a series of economic and social policies designed to overcome social exclusion, hunger, inequality and poverty. The non-contributory social protection programmes developed over the past two decades are some of the best known of these efforts. However, Brazil has also implemented substantial economic reforms, driving economic growth, creating new job opportunities and regulating the labour market—including raising the minimum wage. These actions, together with the expansion and improvement of both contributory and non-contributory benefits, have helped improve access to welfare for the population as a whole.

The foundation for social protection in Brazil derives from the country’s 1988 Constitution, which recognises the role of the State in ensuring social rights in the areas of education, health, labour and social security for all citizens. The Constitution also promotes decentralisation and social participation in implementing public policies, and created the social security system, Sistema de Seguridade Social, which consists of a non-contributory pillar (assistência social), a contribution-based social security system (previdência) and health policies (saúde).

Brazil has implemented two multi-sector plans to comprehensively fight poverty and hunger: Fome Zero (Zero Hunger) (2003) and Brasil Sem Miséria (Brazil Without Extreme Poverty) (2011). Fome Zero includes various multi-sector policies related to food security and reducing poverty, grouped into four main areas: nutrition, strengthening family agriculture, family income, and social responsibility and participation. Brasil Sem Miséria was set up in response to the persistence of extreme poverty among certain population groups that were excluded from the social protection umbrella. It aims to foster cooperation among social programmes in the areas of education, health, social welfare, sanitation and electricity, with economic and job policies organised into three categories: income guarantees, economic inclusion and access to public services.

Non-contributory cash transfers are probably the best known welfare programmes in Brazil. Three cash transfer programmes are especially notable: the rural pension for rural workers; the Benefício de Prestação Continuada (BPC—Continuing Benefit Payment), a cash amount equivalent to the minimum wage and defined as a constitutional right for persons with disabilities or elderly people above age 65 with insufficient pensions and no other economic resource; and the conditional cash transfer programme Bolsa Família (Family Allowance) for people living in extreme poverty, which also includes various health and education benefits. Bolsa Família is highly dependent on multiple sectors, as it requires the coordination of public health, education, food security, labour, social welfare and economic development services made available to beneficiary families. More recently, the programme Brasil Carinhoso (Caring Brazil) has joined this list, specifically targeting families in extreme poverty with children under the age of six, and ensuring preferential access to the network of social services, as well as a guaranteed cash transfers for families in extreme poverty. Alongside these programmes, there are others implemented at state and municipal levels.

For contribution-based pensions and social security, there is a dual system with different benefit structures for public- and private-sector workers. Besides the classic contribution-based benefits and the BPC, semi-contribution-based rural pensions are managed by the Ministério da Previdência Social (Ministry of Social Security), to which rural workers contribute an amount equivalent to 2.1 per cent of their production sold each year. The rural pension derives from the constitutional guarantee of equal treatment for urban and rural workers to deliver a pension equivalent to the minimum wage. Together with the BPC, these are highly progressive transfers that have helped to substantially reduce poverty among people aged 65 years and older.

In the area of sector-based policy, educational coverage has recently been expanded, and a unified public health system, the Sistema Único de Saúde (SUS—Single Health System), has been created. The SUS ensures that access to health care is comprehensive, universal and free of charge, although Brazil has a mixed system of access and financing for health care. Despite this progress, both sectors still face challenges in terms of the quality of services provided, especially among the poorest and most vulnerable populations. Something similar is true of employment policy. Although directed actions have been taken in favour of public employment, existing benefits are mainly oriented towards formal workers. Job opportunities and training for the most vulnerable populations are largely available thanks to the connection between programmes and initiatives such as Bolsa Família or Brasil Sem Miséria.

Finally, other key challenges facing social protection in Brazil include the need for greater cooperation between federal and decentralised agencies and better definition of their respective roles in managing social protection policy. It will also be necessary to bolster the fiscal sustainability and efficiency of non-contributory and rural pension operations. That said, the Brazilian social protection system is still a clear example of lasting innovation and substantial progress on the path towards eliminating hunger, eradicating poverty and achieving greater social justice in the country.

References:
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