

MANAGEMENT OF THE UNIFIED SOCIAL ASSISTANCE SYSTEM IN BRAZIL



SOCIAL PROTECTION SERIES - POLICY BRIEF #4

**MANAGEMENT OF THE UNIFIED SOCIAL
ASSISTANCE SYSTEM IN BRAZIL**

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ACRONYMS

ABC	Agência Brasileira de Cooperação
BPC	Benefício Prestação Continuada (Continuous Cash Benefit Program)
CEAS	Conselhos Estaduais de Assistência Social (State Councils of Social Assistance)
CF 88	Constituição da República Federativa do Brasil de 1988 (Brazilian Federal Constitution of 1988)
CIT	Comissão Intergestores Tripartite (Tripartite Inter-managers Commission)
CMAS	Conselhos Municipais de Assistência Social (Municipal Councils of Social Assistance)
CNAS	Conselho Nacional de Assistência Social (National Council of Social Assistance)
CONGEMAS	Colegiado Nacional de Gestores Municipais de Assistência Social (National Collegiate of Municipal Secretariats of Social Assistance)
CRAS	Centro de Referência da Assistência Social (Reference Centre for Social Assistance)
CREAS	Centros de Referência Especializado da Assistência Social (Specialized Reference Centres for Social Assistance)
DPDI	Serviço de Proteção Social Básica no Domicílio para Pessoas com Deficiência e Idosas (Basic Social Protection Homecare Service for People with Disabilities and the Elderly)
FNAS	Fundo Nacional da Assistência Social (National Social Assistance Fund)
Fonseas	Fórum Nacional de Secretários/as de Estado da Assistência Social (National Forum of Social Assistance State Secretaries)
LA	Liberdade Assistida (Probation)
LOAS	Lei Orgânica da Assistência Social (Organic Law of Social Assistance)
MRE	Ministério das Relações Exteriores (Ministry of Foreign Affairs)
MSE	Serviço de proteção social a adolescentes em cumprimento de medida socioeducativa de Liberdade Assistida e de Prestação de Serviços à Comunidade (Social Protection Service for Adolescents under Probation and Community Services Measures)
NOB/AS 1988	Norma Operacional Básica da Assistência Social (Basic Operational Norm for Social Assistance)
NOB/SUAS	Norma Operacional Básica do Sistema Único de Assistência Social (Basic Operational Norm of the Unified Social Assistance System)
PAIF	Serviço de Proteção e Atendimento Integral à Família (Protection and Integral Support Service to the Family)
PAEFI	Serviço de Proteção e Atendimento Especializado a Famílias e Indivíduos (Protection and Specialized Care Service for Families and Individuals)
PBF	Programa Bolsa Família (Bolsa Família Programme)
PCD	Pessoa com Deficiência (People with Disabilities)
PCDIF	Serviço de Proteção Social Especial para Pessoas com Deficiência, Idosas e suas Famílias (Special Social Protection Service for People with Disabilities, the Elderly and their Families)
PNAS	Política Nacional de Assistência Social (National Policy on Social Assistance)
PSC	Prestação de Serviços à Comunidade (Provision of Community Services)
PSE	Proteção Social Especial (Special Social Protection)
SAI	Serviço de Acolhimento Institucional (Institutional Shelter Services)
SAR	Serviço de Acolhimento em República (Communal Housing Services)
SCFV	Serviço de Convivência e Fortalecimento de Vínculos (Service of Coexistence and Strengthening of Bonds)
SEAS	Serviço Especializado em Abordagem Social (Specialized Care for Vulnerable Populations)
SFA	Serviço de Acolhimento em Família Acolhedora (Foster Family Care Services)
SEPS	Serviço Especializado para Pessoas em Situação de Rua (Specialized Homelessness Services)
SGDCA	Sistema de garantia de Direitos de Crianças e Adolescentes (Child-Rights Guarantee System)
SUAS	Sistema Único de Assistência Social (Unified Social Assistance System)
SUS	Unified Health System
UNICEF	The United Nations Children's Fund



1. Introduction

This Policy Brief aims to enhance the discussion around the organization of social protection programs in Brazil. It does so by examining the management of the Unified Social Assistance System (SUAS, by its acronym in Portuguese) in the context of programs and services directly linked to the system as well as those that have their implementation facilitated by SUAS. SUAS also plays a central role in the sector's strategic planning and ensures government adherence to national policies, programs, and services.

To emphasize the importance of SUAS in the Brazilian federal context, Chapter 2 ("Context") starts by analyzing the shared responsibility for social assistance among various tiers of the national government and highlighting the necessity for coordination mainly because of the lack of clear functional divisions between the programs and services provided by each one.

In Chapter 3 ("History of the creation and consolidation of SUAS") there is a concise analysis of the 17-year process that ultimately led to the solidification of the system. Chapter 4 ("SUAS management elements and practical implications") highlights concrete gains for the organization of Brazilian social protection initiatives. The consolidation of this system has been essential for the creation of national programs like the Bolsa Familia Program (PBF, by its acronym in Portuguese), as much as for the expansion and improvement of tools such as the Unified Registry, which most Brazilian social policies are linked to.

Chapter 5 ("Strategic and operational management of SUAS through Councils") outlines the decision-making, management, and implementation structures of the system's initiatives. It also encompasses topics like the mandates of its various committees and their composition. Chapter 6 ("SUAS facilities for program implementation and service delivery") introduces the diverse range of facilities necessary for national programs and services, as well as the components that promote coordination between these facilities and the initiatives they provide to the public. Chapter 7 ("Social Assistance Monitoring as a bridge between management and operations") summarizes a SUAS function that, despite being formally associated with management responsibilities, has significant and immediate effects on policy implementation. Many times, it ultimately shapes the entire targeting framework of these initiatives.

Last, Chapter 8 ("Conclusions and final remarks") summarizes key factors that support the governance of SUAS and the broader impact on the social protection system as a whole. It also emphasizes areas for improvement within SUAS and within the larger context of social protection. To summarize, the text posits that the inter-federative structure of the system is pivotal for sub-national governments to adhere to federal government actions aimed at covering the entire national territory. This is particularly important because states and municipalities are not compelled to conform to these initiatives.

Moreover, the national typification of services provided by SUAS serves to ensure autonomy for states and municipalities in implementing sub-national policies, while also mitigating the exacerbation of regional disparities resulting from the multiple institutional capacities across the country. Likewise, the national classification of services is regarded as advantageous, as it entails prescribed national guidelines for SUAS facilities to operate under, and a shared financing system.

The text concludes by recommending the broadening of SUAS coverage, specifically in relation to services and facilities of Special Social Protection, which are currently highly constrained to large urban centers. A collaborative approach to designing structured resources is suggested in the text to enhance the management of the social protection system, highlighting the need for consistency in the fulfillment of the commitments agreed upon with SUAS participatory committees.



2. Context

According to the Brazilian Federal Constitution of 1988 (CF 88, by its acronym in Portuguese), social policies such as health, education, and social assistance are considered a shared responsibility of federal bodies. Consequently, a mutual agreement is required to prevent overlapping initiatives and secure appropriate funding. When it comes to health and education policies, the Constitution specifies the services within these sectors that are allocated to each tier of government. In the case of social assistance, however, there is no differentiation of responsibilities based on program or beneficiary type. Hence, it is crucial to implement governance mechanisms that facilitate collaborative involvement in setting strategic priorities and executing public policies.

As stated in another text in this series, Brazil's revenue system is highly focused on the federal government, causing sub-national governments to encounter difficulties in financing their own policies and services (UNICEF Policy Brief #1). In light of this, the Federal Constitution stipulates the transfer of resources from the Union/federal government to subnational governments to support their responsibilities. It also allows the federal government to potentially undertake supplementary actions beyond the ones under the scope of subnational governments. This provision, nevertheless, assumes mutual agreement among the federal entities involved. For instance, without the consent of each municipality, the federal government, is prohibited from recruiting more doctors to strengthen the primary healthcare system. In the scenario of social assistance, where there is no differentiation between the types of services that each federated entity

is responsible for, the importance of coordination and mutual agreement becomes even more pronounced. Even federal government cash transfer programs, like the PBF, cannot be mandated upon any municipality, hence necessitating the municipal government's participation and consent to the initiative.

In this context, SUAS serves as the main entity responsible for coordinating sectors across different levels of government (Lopes e Rizzoti, 2013; Colin e Pereira, 2013). With an inter-federative nature, it provides avenues for dialogue and decision-making to be mutually determined by various government tiers, while also incorporating meaningful roles for civil society. Besides this strategic coordination, SUAS provides a range of initiatives, incentives, and accountability mechanisms that aid subnational governments in aligning with federal actions. It also establishes a common framework for social assistance services at the subnational level in Brazil, with minimum input requirements.



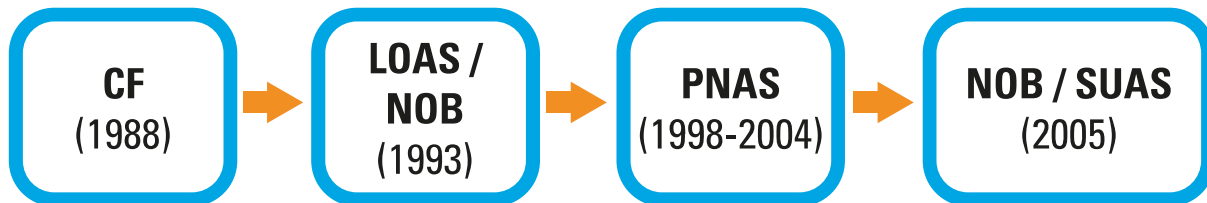
3. History of the creation and consolidation of SUAS

In response to the complexities of coordinating public policies of shared responsibility across federal entities, the CF 88 mandated the creation of dedicated systems for inter-federative management in health and social assistance sectors, namely the Unified Health System (SUS, by its acronym in Portuguese) and SUAS. Despite the swift implementation of the SUS in 1990, SUAS was only put into effect after a prolonged period of contention surrounding the execution of this constitutional requirement. In 1993, the Organic Law on Social Assistance (LOAS, by its acronym in Portuguese) was enacted, reflecting the aims and principles of social assistance as stated in the Federal Constitution, while establishing a monetary aid for impoverished and vulnerable elderly and People with Disabilities (PCD, by its acronym in Portuguese) known as the Continuous Cash Benefit Program (BPC, by its acronym in Portuguese). Furthermore, the LOAS implemented and established the authorities of the National Council of Social Assistance (CNAS, by its acronym in Portuguese) and mandated the creation of a National Policy on Social Assistance (PNAS, by its acronym in Portuguese) and a National Social Assistance Fund (FNAS, by its acronym in Portuguese) to be administered under the coordination of the CNAS (Medeiros, 2020; Lonardon et al. 2006).

The LOAS provisions, however, would still take almost a decade to be implemented, mainly due to the challenges of breaking with past practices and establishing new procedures and perspectives. One of the goals established by LOAS was for CNAS to grant approval for a PNAS. Because of the initial challenges the CNAS only sanctioned this policy in 1997/98, concurrently with the Basic Operational Norm for Social Assistance (NOB/AS 1988, by its acronym in Portuguese), designed to implement its provisions. Nevertheless, this initial

PNAS and its NOB/AS had minimal practical impact. In 2004, however, a new PNAS and its corresponding NOB/AS were sanctioned, resulting in the establishment of the SUAS in the subsequent year (Ibid.).

Figure 1. Milestones in the design and structuring of SUAS



Source: Elaborated by the authors

It should be emphasized that the consolidation of the PNAS and NOB/AS in 2004, followed by the creation of SUAS in the subsequent year, occurred amidst other significant developments in social assistance. Upon assuming office in 2003, President Lula da Silva established a dedicated ministry for social assistance, consolidating previously dispersed responsibilities across various ministries. Additionally, he started the Bolsa Família cash transfer program and enhanced the efficiency and effectiveness of the Unified Registry (Cadastro Único) - a comprehensive social program registry introduced in 2001. These achievements not only show the prioritization of social assistance and anti-poverty measures during this period, but also the necessity to solidify SUAS as a fundamental mechanism for the functioning of the PBF, the Unified Registry, and many other initiatives (Colin, Pereira e Goneli, 2013).



4. The management component of the SUAS and its practical consequences

The consolidation of SUAS was a fundamental factor in the positive social policy outcomes seen in Brazil over the past two decades. The system played a crucial role in ensuring that the Unified Registry was consistently fed and updated with high-quality data by qualified teams. This, in turn, enabled the country to count with a highly effective instrument for identifying the most vulnerable populations and targeting of social programs.

SUAS also created a governance structure that fostered collaboration between the federal government and all 5,570 Brazilian municipalities, enabling their participation in federal programs, such as the PBF, which were endorsed by each one of them. As a result, there has been a significant decline in the fragmentation of the social protection system provided by subnational governments, as they have gradually halted the provision

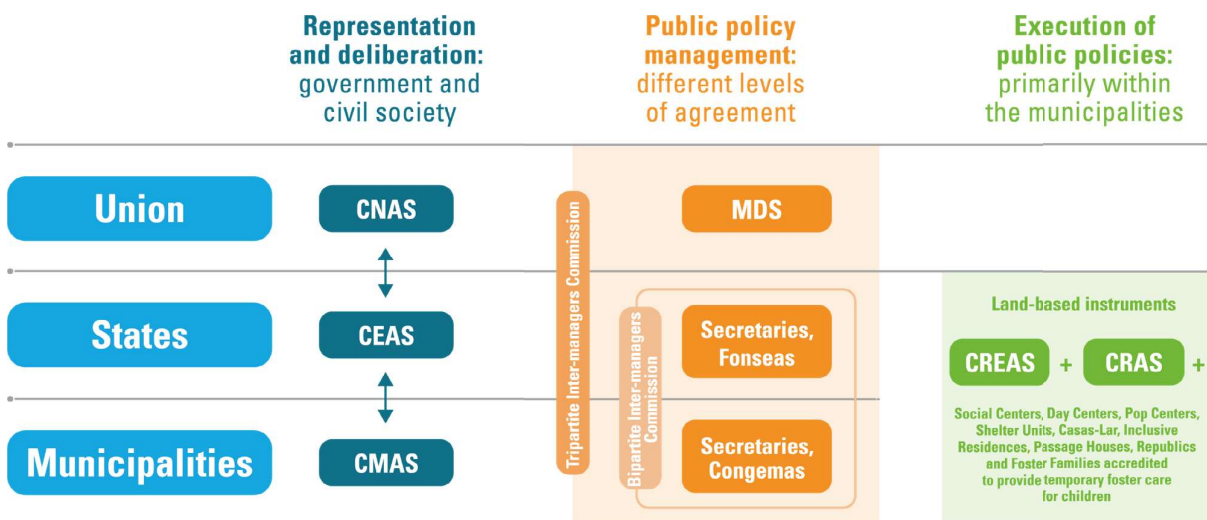
of overlapping programs with the federal government. This enables them to allocate their budgets towards implementing alternative programs and services. Additionally, SUAS has successfully preserved the autonomy of local governments in delivering social assistance services, while conforming to its national typification, setting minimum wage thresholds, and implementing parameters that have mitigated national disparities in the implementation of associated public policies.



5. Strategic and operational management of SUAS through Councils

As depicted in Figure 2, SUAS exerts an impact on the strategic planning of social assistance policies through a council system spanning the national, state and municipal levels, namely the National Council of Social Assistance (CNAS), State Councils of Social Assistance (CEAS), and Municipal Councils of Social Assistance (CMAS). They all have an impact on matters like the delineation of strategies, objectives, and yearly milestones for the social assistance sector. Moreover, there must be an equal split of 50% between the government and civil society representatives, with the government having the authority to determine the specific implementation at each administrative level.

Figure 2. An overview of SUAS across the three tiers of government and in three dimensions of the public policy cycle (deliberation, management, and implementation)



Source: Extracted from Arruda et al. (2022)

In terms of policy management, SUAS operates through the Tripartite Inter-managers Commission (CIT, by its acronym in Portuguese), comprising the MDS¹ as the central government representative, the National Forum of Social Assistance State Secretaries (Fonseas)² as the representative of state governments, and the National Collegiate of Municipal Secretariats of Social Assistance (CONGEMAS)³ representing municipal governments (Jaccoud et al. 2020; Jaccoud, Licio e Leandro, 2018).

It is the responsibility of the CIT members to ensure that the implementing partners follow the strategies determined by the social assistance councils, or conversely, communicate the concerns and demands of the implementing partners to these councils. Since there is only one secretary per state (26 states + the Federal District), the composition of Fonseas is thus quite simple, as all state secretaries take part in this forum. On the flip side, CONGEMAS is constituted by elected representatives who are selected from the accredited social worker managers of the municipal government (Ibid.).



6. SUAS facilities for program implementation and service delivery

At the level of policy implementation, SUAS comprises two primary facilities: the Reference Centers for Social Assistance (CRAS), which handle Basic Social Protection (PSB, by its acronym in Portuguese), and the Specialized Reference Centers for Social Assistance (CREAS, by its acronym in Portuguese), which handle Special Social Protection (PSE, by its acronym in Portuguese). Together, these instruments offer frontline case management, referral, and overall support for social assistance programs in over 98% of Brazilian municipalities (Jaccoud et al. 2020).

The Basic Social Protection aims to extend social assistance services to assist vulnerable families dealing with fragmented family and community ties, experiencing deprivation of consumption and access to basic services, but who have not yet been subjected to rights violation or abandonment. The terms right violation

¹ Established in 2004, the Ministry of Social Development (MDS, by its acronym in Portuguese) underwent a name change to the Ministry of Citizenship from January 2019 until December 2022. Subsequently, it was further renamed as the Ministry of Development and Social Assistance, Family, and Fight against Hunger (also MDS by its official acronym in Portuguese). In the text, our objective is to cite documents from this directory by alluding to its name when these documents and resources have been published or made public. Nonetheless, in broad terms we employ the acronym MDS to denote this directory in various historical instances (including when it was referred to as the Ministry of Citizenship).

² Fonseas was formed with the purpose of facilitating discussions, negotiations, and consensus-building around social assistance actions, promoting decentralization and participation in the social assistance process, and strengthening coordination among municipal secretariats to enhance the effectiveness and efficiency of these actions (Agência Brasília, 2022).

³ CONGEMAS is a civil association that operates under its own statutes and regulations, serving as a representative body for Brazilian municipalities in their interactions with the federal government, particularly the Ministry of Social Development and Fight against Hunger, as well as state governments. Its primary aim is to enhance municipal representation on councils, committees, and collective bodies nationwide (CONGEMAS, n.d).

and abandonment, in this context, pertain to cases such as domestic violence, mistreatment of the elderly and people with disabilities, work similar to slavery, sexual exploitation, child labor, institutionalization of a family member, compliance with a precautionary measure issued by the judiciary, severe drug addiction problems, and homelessness. Cases of rights violations should be addressed by the Special Social Protection, which possesses the composition and resources to handle these demands, often necessitating strong and broader coordination with the Child-Rights Guarantee System (SGDCA)⁴ and the judiciary (GoB, Min. of Social Development, 2014).

Besides CRAS and CREAS, SUAS also counts with other facilities for more specific purposes, such as Pop Centers (dedicated spaces for homeless individuals, offering sanitary facilities and occasional meals during daytime), the Social Centers (spaces allocated for community activities related to Basic Social Protection), the Day Centers (spaces for Special Social Protection actions with elderly and PCD population), the Shelter Units (Casas-Lar, Inclusive Residences, Passage Houses, Communal Housing) and the Foster Family Residences (registered for temporary child placement). These Shelter Units and Foster Families provide temporary housing for individuals who are experiencing homelessness, abandonment, or have been victims of violence.

Table 1 displays the overall quantity of SUAS facilities in Brazil, alongside the national typification of services they provide or have the capacity to provide, followed by a succinct description of these services.⁵ It is evident from Table 1 that CRAS, Social Centers, and Shelter Units are the most predominant. While acting as the core of the PSE, the CREAS are predominantly clustered in medium and large cities, as well as capitals and metropolitan regions.⁶ They are therefore less commonly found than other instruments in municipalities, irrespective of their size (GoB, Min. Social Development, 2014).

⁴ As stipulated by the Ministry of Human Rights and Citizenship (2023): "the Child-Rights Guarantee System (SGDCA, by its acronym in Portuguese) was established in 2006 to enhance the enforcement of the Statute of the Child and the Adolescent (ECA, by its acronym in Portuguese) and ensure comprehensive protection for children and adolescents. The SGDCA, initiated by the National Council for the Rights of Children and Adolescents (CONANDA, by its acronym in Portuguese) through Resolution No. 113, fosters collaboration between public government bodies and civil society in Brazil to ensure the realization of children and adolescents' human rights across the country. The system consists of guardianship councils, prosecutors, judges, public defenders, child and adolescent rights advisors, social educators, professionals in public education, health and social assistance policies, police officers, and professionals and volunteers from organizations advocating for the rights of children and adolescents.

⁵ For a more in-depth examination of each national service offered under SUAS, we recommend referring to our main research report (UNICEF in press).

⁶ Medium-sized cities, between 50,001 and 100,000 inhabitants; Large-sized cities, between 101,000 and 900,000 inhabitants; and metropolises, corresponding to municipalities with over 900,000 inhabitants. Sources: 1) IBGE, Censo 2010; 2) PNUD - Atlas do Desenvolvimento Humano no Brasil: Atlas Brasil 2013. Acronyms: IDH, Índice de Desenvolvimento Humano (Human Development Index); IBGE, Instituto Brasileiro de Geografia e Estatística (Brazilian Institute of Geography and Statistics).

Table 1. The total number of SUAS facilities available across the country and the array of services provided by each variant

SUAS facilities	Total number of facilities available across country	SUAS services implemented
CRAS	8.557	<u>Basic Social Protection Homecare Service for People with Disabilities and the Elderly (DPDI)</u> : consists of an organized and continuous monitoring of vulnerable elderly and/or PCD individuals, as well as their families. In addition to regular home visits, there are group activities and supplementary services for this target population.
		<u>Protection and Integral Support Service to the Family (PAIF)</u> : consists of an organized and continuous monitoring of families in situations of social vulnerability.
Social Centers	7.837	<u>Service of Coexistence and Strengthening of Bonds (SCFV)</u> : comprises group-oriented activities, mainly on a regular basis, for vulnerable families.
Pop Centers	235	<u>Specialized Homelessness Services (SEPS)</u> : involves the establishment of a space dedicated to meeting the hygiene needs of homeless individuals during daytime, while also providing supportive activities to assist them in overcoming homelessness.
CREAS	2.782	<u>Specialized Care for Vulnerable Populations (SEAS)</u> : encompasses a mobile operation that approaches individuals experiencing homelessness and invites them to explore other structured services aimed at helping them overcome this situation, such as SEPS, SAI, and SAR.
		<u>Protection and Specialized Care Service for Families and Individuals (PAEFI)</u> : consists of organized and consistent monitoring of families with individuals who have been subjected to or are enduring rights violations.
		<u>Social Protection Service for Adolescents under Probation and Community Services Measures (LA) and Provision of Community Services (PSC) - (MSE)</u> : its purpose is to provide support for adolescents who are sentenced to Probation or Community Services Measures. This includes identifying suitable activities for them to fulfill their sentences and collaborating with the Judiciary to ensure compliance.
Day Centers	1.886	<u>Special Social Protection Service for People with Disabilities, the Elderly and their Families (PCDIF)</u> : involves systematic and ongoing monitoring of elderly individuals and/or individuals with disabilities who have encountered or are encountering rights violations, including interventions that encompass their family members as well.
Shelter Units	6.536	<u>Institutional Shelter Services (SAI)</u> : involves offering transitory accommodation in institutional shelters for individuals who would otherwise be homeless. The service additionally provides social aid to empower the beneficiaries in their independent efforts to overcome homelessness.
		<u>Communal Housing Services (SAR)</u> : involves provision of temporary housing in communal residences, allowing residents some level of self-governance, for individuals who would otherwise be homeless. The service also provides social aid to empower the beneficiaries in their independent efforts to overcome homelessness.
Foster Families	543	<u>Foster Family Care Services (SFA)</u> : involves accrediting families to provide foster care for orphaned or displaced children until a permanent guardianship solution is identified.

Source: Elaborated by the authors based on data from the most recent ⁷SUAS Census (GoB, Min. Social Development, 2022b; 2022a; 2022d; 2022c; 2022e; 2021a; 2021b). Information on CRAS, Social Centers, Shelter Units, and Foster Families are derived from the SUAS Census of 2022. All other information has been derived from the SUAS Census of 2021.

Note: The count of facilities may exceed the reported figure, considering potential underestimation in the SUAS Census. Nevertheless, we opted to use these estimated figures, given that the available administrative data lacks complete facility coverage and pertains to 2020, thus reflecting lower values compared to the 2021 and 2022 SUAS Censuses. (GoB, Min. Social Development, 2023)

⁷ The SUAS Census is a monitoring process that gathers data via an electronic form completed by the Social Assistance Secretariats and Councils of the states and municipalities. Among the objectives of the Census, we can mention: 1) To generate data on the implementation of the social assistance policy in the country; 2) To optimize the governance of the SUAS and the quality of social assistance services offered to the population; 3) To determine advancements, restrictions, and obstacles in the institutionalization of SUAS; 4) To deliver information that assists the government in maintaining transparency and accountability to society.

As a rule, SUAS gives preference to the direct implementation of social assistance services through teams hired directly by state and municipal governments, with CRAS and CREAS being managed exclusively by public authorities. However, other facilities can be overseen by the private sector and civil society, provided they receive accreditation and supervision from CRAS and CREAS. In any event, guidelines are in place for both these two instruments and others managed by public authorities, as well as those under private or civil society management. These guidelines outline criteria such as salary floors and minimum qualifications and minimum social assistance team size, taking into account the unique characteristics of different municipalities and the SUAS services they offer (GoB, Min. Social Development, 2014).



7. Social Assistance Monitoring as a bridge between management and operation

The Social Assistance Monitoring, a crucial function of SUAS, involves monitoring and analysis of social data on a territorial scale. This helps determine priorities and target strategies to effectively provide social assistance services. While formally falling under policy management, this area ultimately impacts on service implementation. Generally, these functions are not connected to the SUAS management councils, nor to the facilities used for implementing social assistance services, despite their influence on and despite being influenced by both.

As per Article 90 of the Basic Operational Norm of the Unified Social Assistance System (NOB/SUAS/2012), the scope of the Social Assistance Monitoring is intricately connected to the governing bodies of the Secretariat responsible for implementing the Social Assistance Policy at the local level. These governing bodies must receive financial resources to support their establishment and upkeep, making it the responsibility of the executive offices overseeing social assistance in each sub-national government (GoB, Coordination of SUAS Management, 2014).



8. Conclusions and final remarks

As emphasized throughout the text, SUAS emerged as a result of the necessity for governance coordination among various governmental tiers. Prior to SUAS, governmental entities had a shared responsibility in providing social assistance policies, without a specified distribution of services or intended beneficiaries. To tackle this challenge, the social assistance sector in Brazil required a management system with the capacity to actively foster inter-federative coordination and engagement. In response to this demand, the Brazilian Federal Constitution stipulated the necessity of constructing a system similar to SUAS, despite the lengthy and challenging 17-year-long process of its consolidation.

The solidification process of this new system faced considerable resistance as part of a project to emphasize the importance of social assistance policies offered primarily by public authorities, even though civil society's value is acknowledged, including its participation in advisory and deliberative councils guiding the SUAS. In addition, the consolidation of SUAS was a negotiation process between the federal government and sub-national counterparts to strike a balance that would enable service standardization on a national scale, while allowing for some autonomy to tailor common guidelines to specific sub-national needs. The implementation of instruments that regulate the actions of sub-national governments in providing nationally standardized programs, the establishment of minimum parameters for each facilities and service, and the adoption of a unified monitoring system for these facilities are measures that enable SUAS to fulfill its inter-federative role without causing excessive fragmentation. Consequently, further endeavors in this direction are likely to enhance the efficiency of the system.

In the sphere of structured elements that support SUAS management, it is important to acknowledge the existence of various social assistance facilities, each with its own distinct characteristics and aimed at providing specific services. Clarity regarding which services can be offered jointly by multiple facilities, as well as the directing flows that ensure the complementarity of network action, is paramount. In this regard, it is noteworthy to emphasize the extensive availability of facilities designed for the Basic Social Protection implementation, despite crucial facilities for the Special Social Protection, like CREAS, being limited to larger cities. This indicates the potential for substantial system improvement through significant expansion efforts.

In conjunction with the instruments used to steer policy execution by sub-national governments, the extensively participatory structure of SUAS management is a significant advantage. The system operates through a network of councils and committees, engaging public authorities and civil society, spanning all three levels of government, and performing both advisory and executive roles in policy management and implementation. Even in a scenario where the federal government becomes the primary contributor to SUAS funding, it is crucial to highlight that its decisions align with the collective interests of national and sub-national governments, without which Brazilian social policies would not have attained the success witnessed in the past

twenty years. Therefore, the federal government's commitment to the collegiate decisions of SUAS is crucial in maintaining the inter-federative structure and avoiding a regression to the fragmented and less cooperative state of Brazilian welfare policy prior to the establishment of SUAS. Despite the natural cyclical divergences between federal government preferences and those prevailing in the inter-federative and participatory sphere of the SUAS, it is essential to perceive these divergences as a means of control rather than as factors that weaken the federative pact driving the system.

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