



SAFER ACCESS FOR PUBLIC ESSENTIAL SERVICES

SAFER ACCESS FOR PUBLIC ESSENTIAL SERVICES





ARMED VIOLENCE IN URBAN CENTERS

Two-thirds of the world's population is expected to be living in urban centers by 2030, and as these areas grow – often times in an unorganized fashion –, supporting this increased population will involve challenges and, in particular, a likely increase in armed violence.

This global phenomenon is typical of the 21st century and requires tailored approaches and responses to reduce and mitigate these humanitarian consequences. In Brazil, the effects of a rapid and unregulated urban sprawl can be felt as slums/favelas and low-income neighborhoods in the outskirts of cities are increasingly perceived as violent places. In several cities, large territories are occupied by armed groups¹ that confront each other and the police and military forces in Law and Order Assurance (GLO in the Portuguese acronym) operations to gain control over neighborhoods and funds. The years 2016 and 2017 saw an increase in armed violence and its most apparent

indicators: murder rates, clashes between armed groups, deaths and injuries from stray bullets, etc. In addition, armed violence is not only an issue in large cities such as Rio de Janeiro and Sao Paulo, but has encroached into medium-sized cities that were previously considered as “quiet and safe” places. This change has affected local authorities in their ability to provide key services, who are now faced with obstacles and challenges that were not so evident in the past. Armed violence affects access to public essential services is not often covered in the media, and has an impact and comes at a high cost for the country's efforts to achieve the Sustainable Development Goals².

1 This refers to non-governmental armed groups involved with illicit activities. In Brazil, the major groups are known as “criminal factions, gangs, drug dealing groups” and “militias”.

2 The Sustainable Development Objectives (SDGs) are included in an International Protocol by the United Nations (UN) General Assembly, where Brazil has committed to implement Agenda 2030 for Sustainable Development. See (in Portuguese): <http://www.itamaraty.gov.br/pt-BR/politica-externa/desenvolvimento-sustentavel-e-meio-ambiente/134-objetivos-de-desenvolvimento-sustentavel-ods>

THE COST OF ARMED VIOLENCE IN THE PROVISION OF PUBLIC ESSENTIAL SERVICES

In addition to its direct consequences, armed violence in urban settings causes schools and health clinics or other core public service facilities to be shut down, which entails a high cost:

- Low-income communities, who are often vulnerable and rely on scarce services, are the deprived of these services.
- It hinders achievement of the Sustainable Development Goals and other goals set by the various levels of government (Federal, State or Municipal). For example, it could affect the implementation of preventive health programs, such as immunization campaigns, or access of chronic patients to treatment, which involves a high economic and social cost.
- The direct economic costs resulting from various facilities being shut down. According to data from Rio de Janeiro Municipal Health-care Bureau in 2017, incomplete and inter-

rupted services had an economic impact around BRL 6 million. Even when shut down, schools continue to incur costs, such as school meals, which must be paid for regardless of whether the school is in operation or not. In addition to the economic cost, one must consider the social cost of these facilities: many children rely on school meals for their required daily nutritional intake; in some cases, this is the only meal some children will have on a day. Another significant obstacle to the provision of public essential services is the difficulty of staffing areas vulnerable to armed violence, not to mention the high turnover of workers who are either directly or indirectly affected by violent events.

These are just a few examples that simply help illustrate the countless direct and indirect humanitarian consequences arising from the lack of access to public essential services that are rarely considered and measured by the authorities and known to the general public.



RIO DE JANEIRO

"It is not easy to describe how a frightened face looks. To walk on the streets today means to be filled with tense and fearful expressions though. Even the local residents, who are used to see people holding guns, make serious faces and are extremely cautious when they talk. They say the actual scenario is not normal. Since the middle of last year, the clashes in the community were intensified, and lots of people assure they had never seen so much gunfights, specially on the daylight. Parallel to the confrontations between drug dealers and the police, there are now knocks between drug dealers and militiamen. In this context, everybody is affected, but not only psychologically: schools, public health services and commerce are often forced to close or to interrupt their services."



A. Löhn/ICRC



N. Cohen/ICRC



M. Cruppe/CRC



ICRC'S WORK

The ICRC is concerned about the increasing humanitarian consequences of armed violence, and therefore develops specific responses in a number of countries (South Africa, Pakistan, Colombia, Mexico, Venezuela, etc.).

In Brazil, after offering its services to the Federal Government in 2009, the ICRC launched the Rio Project, which covered the municipality of Rio de Janeiro and included specific actions for the communities most affected by armed violence. As part of this project, the ICRC developed the Safer Access to Public essential services methodology and has since successfully implemented it in other municipalities.

The International Committee of the Red Cross at the regional level

The Regional Delegation of the International Committee of the Red Cross (ICRC) for Argentina, Brazil, Chile, Paraguay, and Uruguay seeks to respond to and ensure that the relevant authorities respond to the humanitarian needs of people affected by armed violence in urban settings.

The ICRC supports international humanitarian law (IHL) and humanitarian principles with authorities and institutions from all five countries. In addition, it supports National Red

Cross Societies in order to enhance their ability to respond to humanitarian needs.

The organization seeks to raise awareness of authorities and the public regarding the deep suffering of family members and the impact of the disappearance of a loved family member. It also provides support and training to workers on the identification of the remains of missing persons.

In addition, it takes steps to minimize the effects of armed violence in urban settings. Experience in the poor communities of Rio de Janeiro in 2009–2013 resulted in integrated actions in health care and education aimed at protecting the public and developing the resilience of people who live or work in these communities. Five years into a Pilot Project, the ICRC provides technical support to partners so they can follow up on these actions, ensure their sustainability and promote their expansion to other areas plagued by armed violence in urban settings. Upon request by the authorities, it supports implementation and adaptation of these methodologies in other cities and regions of Brazil, and also in other countries around the world.



SAFER ACCESS FRAMEWORK (SAF)

Safer Access Framework (SAF) is a methodology to reduce, mitigate and respond to the consequences of exposure to armed violence settings.

The SAF methodology is harmonized according to the policies and guidelines of the international standard ISO 31000³, and is based on and adapted from ICRC's security protocols, drawn from its extensive experience in conflict and armed violence environments. Its objectives include:

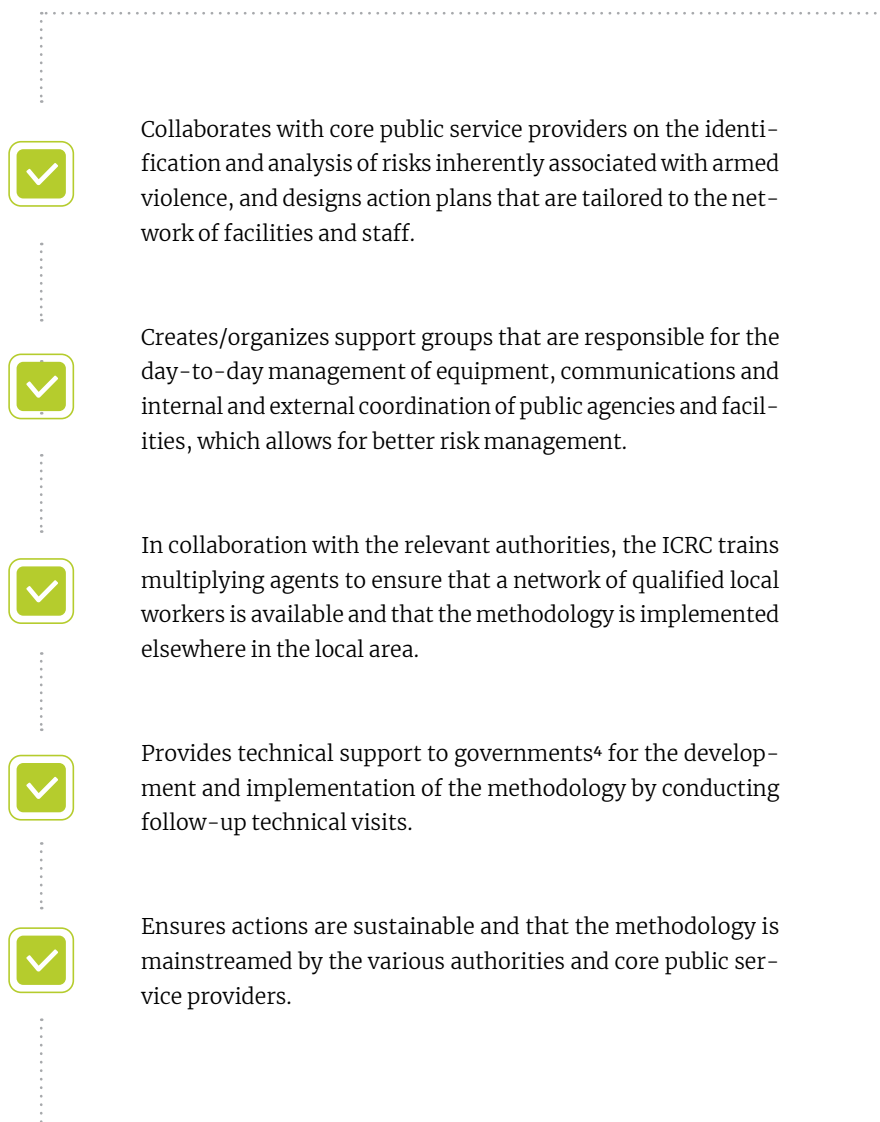
- To protect lives, foster safe environments and strengthen the resilience of staff in public institutions and core public service facilities working in areas affected by armed violence.
- Collaborate with the bureaus in charge of providing core public on the development of integral strategies to manage risks, manage crises, treat risks, and manage stress, all based on concrete actions to put in place a system of worker self-protection.
- To carry out changes in the knowledge, behavior and attitude of workers and managers in the face of risks related to armed violence so that they can be managed in an effective, efficient and consistent manner.
- To enhance the overall efficiency of services and to leverage human and financial resources.
- To expand access to public essential services by allowing workers to have free access to communities, and the communities to service outlets.

3 ABNT-NBR ISO 31000:2009 – Risk Management. ISO is an international standardization system developed by the International Organization for Standardization. See: <https://www.iso.org/home.html>

SAF IMPLEMENTATION

The SAF includes raising awareness among managers and/or decision makers of the security situation of workers and people who operate in violent and insecure environments on a daily basis.

The ICRC extends its expertise and experience to local, state and federal public authorities voluntarily and free of charge, and conducts specific programs tailored to the local needs and capabilities of each public agency (Bureau) as follows:



⁴ Under the cooperation agreement between the ICRC and the municipal authorities. The cooperation agreement provides for technical support, and no remuneration is paid to the ICRC.

TESTIMONY OF PARTICIPANTS OF THE SUPPORT GROUP OF THE DEPARTMENT OF HEALTH OF DUQUE DE CAXIAS (RJ)

“The SAF tool proved to be a key solution for the management to respond more quickly, expertly and decisively to the consequences of the armed violence that affected the health workers and prevented the public from having access to public essential services. By entering the incidents of armed violence in a structured and standardized information system, they were also able to provide data that help us to inform and direct managerial decisions. This translates into greater peace of mind and the certainty that we are using the best practices to mitigate the consequences of the armed violence affecting our workers.

It is the duty of the management to protect its workers on the ground; it is our mission to take responsibility for one other. It is extremely rewarding to know that we also have the endorsement of workers on the ground when they report a positive result of the SAF tool in their day to day work.

For workers, the impact of the SAF has translated into reduced stress caused by armed violence in the workplace due to the new perception of the inherent risks in the area where they operate. Improvements were also made to communication among team members, between the central management and the team on the ground and the analysis of incidents of violence based on proper identification of signs on the ground. On the other hand, having a plan in place that makes it possible to report incidents easily and clearly, being able to receive a prompt response from the management and following up during and after the incident also help the staff make safer decisions during crises.”





KEY ASPECTS OF THE SAF

The SAF methodology includes ongoing actions under four pillars; these are integral to the SAF and follow a schedule during implementation.

The methodology builds on the experience and adaptation of ICRC security rules and draws on the ISO 31000 Standard.

1 Context and risk analysis

Both access to the workplace and the provision of public essential services can be affected by risks associated with armed violence in urban centers.

Risks can range from property damage to loss of human life, and differ in both probability of occurrence and severity of impact, and are specific to individual environments and vary over time. Therefore, the first step is to conduct an adequate analysis of the settings and existing risks, which should be carried out on an ongoing basis given the changing nature of areas affected by urban violence.

2 Risk treatment

Existing risks are often overlooked or simply addressed inappropriately, which fails to help reduce unwanted events.

The SAF provides a chain of risk awareness and management activities carried out by various actors in order to enhance the security and protection of officials and communities located in vulnerable areas.

EXAMPLE It has come to the attention of the Rio de Janeiro Municipal Education Bureau that unprotected gas cylinders are located outside schools and thus exposed during shootings or clashes.

Although not very likely, its impact is extremely high and may cause the cylinder to explode, which could in turn cause damages to infrastructure and even death and injuries.



IDENTIFICATION

Exposed, unprotected gas cylinders.
Risk of explosion.



ANALYSIS

Likelihood: low.
Impact: very high.



ASSESSMENT

Inadequate infrastructure for gas cylinders, thus posing risks for everyone in the building.
Cost: low, and no complex actions are required.



TREATMENT

Adapt the location where cylinders are stored.
External Coordination: Fire Department.





3 Crisis management

Although the Risk Management pillar is conducted in an extremely careful and qualified manner, one cannot assume there will not be any risks or completely prevent an undesired event from occurring. Therefore, the Crisis Management pillar involves preparedness and direct response to a potential safety incident involving the infrastructure and staff of core public service facilities.

For the preparation of staff and premises, in addition to actions planned for risk management, the

SAF includes a Safer Access Plan in each facility where the methodology is used.

The plan is a binding document developed locally by the staff with the support and endorsement of the authorities. It may include drafting specific action protocols, establishing appropriate communication and coordination flows, as well as assigning roles and responsibilities to each team member in case of incidents. These preparation and organization efforts prior to a crisis help provide a structured, effective and less emotional response, which also impacts on staff stress management.



4 Stress management

A specific pillar for stress management stems from the need to support staff who are exposed to an armed violence environment on a daily basis and who can have their mental health affected. The stress caused by safety incidents (intense emotions associated to the event) is considered, as well as the daily discomfort and insecurity that could decrease the resilience and the well-being of workers.

The perception shared by some workers that managers seem to be insensitive to the challenges they face is an aspect that also directly interferes with the staff's willingness to work in the most vulnerable areas. When concrete measures for stress management are in place, these people feel they have been taken care of in a significant manner.

Some staff psychosocial support measures are recommended as part of the SAF, in addition to a specific mental health care work flows and measures in case of safety incidents.

PORTO ALEGRE

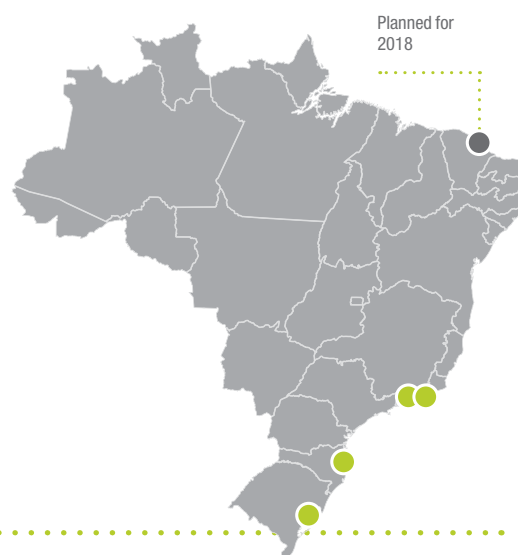


"It was an afternoon in November 2016. A team of five teachers and a coordinator were organizing a sports tournament with the attendance of about 60 teenagers aged 15-18 in a sports gym in an area in the outskirts of Porto Alegre (RS). Toward the end of the event, three armed men unknown to the group entered the court and assaulted one of the boys who was playing. Upon realizing the issue, one of the teachers tried to intervene and was threatened with a weapon while the others realized that the only exit had been closed by one of the invaders. The team was confused and did not know what to do. After beating the teenager, the attackers left. The team was severely traumatized by the incident and found it hard to return to their local area."

WHERE THE METHODOLOGY HAS BEEN IMPLEMENTED

In Brazil, the SAF has now been implemented in various cities in the South and Southeast regions, in areas that are highly vulnerable to armed violence: Duque de Caxias (RJ), Florianópolis (SC), Porto Alegre (RS), and Rio de Janeiro (RJ).

In 2018, Implementation is planned in Fortaleza (CE), in the Northeast region. In some of these municipalities, project implementation relied on broad-based collaboration among various government agencies, which helps leverage risk management efforts.



The primary SAF domains are: health care, education and social assistance. However, actions were also conducted with workers in other domains, such as sports and leisure, housing and human rights.



MAIN RESULTS

Key results provided by the SAF include:

- Continued provision of services in areas most vulnerable to armed violence.
- Empowerment of staff, increased satisfaction and commitment at work.
- Integrated management across bureaus and services and development of shared strategies for reducing safety incidents in cities.
- Management of workers' stress and resulting decrease in turnover rates/easier allocation of staff.
- Improved internal organization and assignment of roles, including internal communication and coordination and teamwork.
- Effective allocation, availability and management of funds.
- Reduced response time to safety incidents.

"In August 2017, Safer Access training was delivered by the team of a Reference Center for Social Assistance (CRAS) in Porto Alegre, RS. Approximately 15 local staff members received training in the methodology and began putting together the 'Safer Access Plan'. However, some of them doubted the need to use the plan due to their location, physical facilities and service characteristics. The day after the training, a clash between local armed groups seemed imminent, but thanks to the training session the team were able to identify the signs of risk and managed to return to the CRAS without any problems. The following week, the CRAS was invaded by an armed individual who was looking for a young man who had taken refuge there. The team was able to act promptly and the incident had no major consequences. The internal evaluation under the Safer Access methodology showed that the whole team was confident in the plan they had built."



SAF NETWORK

The SAF is a platform for exchanging experiences and improving work; it brings together officials and workers from the municipalities where SAF has been or is being implemented. The primary objective of this initiative is to provide a joint learning environment by sharing good practices and disseminating overall SAF guidelines and innovative and successful experiences.

- The ICRC is an active member of the Network. In addition to its role in advancing meetings and providing technical guidance, it also takes into consideration all comments and suggestions made by other participants, and incorporates them into their work and SAF implementation in the municipalities.
- Participation of municipal representatives in the Network is fundamental to ensure that the SAF develops in a sustainable, qualified and participative manner over time. The various reports made by the participants show that the meetings are opportunities to expand on and strengthen their work since they often encounter similar challenges and can have an open discussion to find the best solutions.
- The Network also helps raise awareness and generate buy-in of the relevant SAF work at the political and strategic levels as it allows the different actors to share and obtain approval from the Senior Management of the benefits and progress of the work performed by other municipalities even when implementation is in its early stages.

WHAT NEEDS TO BE DONE

Political commitment

The primary goal of the municipality should be to develop a public policy to protect the staff of core public service providers by improving the service and the conditions of access to and by the community.

This change may entail making other human and financial resources available. However, with full and adequate implementation of the SAF, most actions do not entail financial costs, but rather the commitment and political will to support the staff.

This commitment and willingness are translated into the development of public policies, directives, resolutions, internal protocols, internal reorganization and other actions that leverage the safe provision of public services.

Context and risk analyses

These are essential tools for a specific understanding of how armed violence affects the provision of public essential services, existing vulnerabilities and how they should be patched or mitigated. This assessment provides the initial indicators so that the SAF implementation can be properly evaluated and improved in the future.

Comprehensive understanding

It is essential that the actors in charge of implementing the SAF understand the far-reaching nature of risk management, which involves not only crisis management or direct treatment of any risks identified, but also measures to enhance communication, stress management and services, for instance.

Ongoing monitoring and improvement

In order for the SAF to be consistently effective in protecting workers and ensuring access by the public, objective monitoring of performance and informed decisions against each scenario are necessary. As such, it is important to put in place a monitoring system to keep track of indicators, enhance crisis management and make objective decisions that are suitable for each site. Monitoring helps ensure consistency over time, even in the face of changes in a given site, and helps maintain the quality of work based on careful analysis of the data collected.



Protection of key services and associated staff

Under all circumstances, whether in times of peace or in times of armed conflict, States have certain obligations, such as maintaining the health care system in operation. They must therefore maintain core public primary health care services, access to minimum essential food, housing, basic health conditions, clean drinking water supply, essential medicines, etc., while respecting the principles of non-discrimination and equitable access.

Brazil's Constitution defines the State as the subject with the duty to provide certain social benefits in relation to the object, which is, for example, the right to education or the right to health, among others. Therefore, the State must universally extend education to all, as well as provide primary health care to all citizens.

The physical facilities, the means and the staff supporting the provision of public essential services and contribute to the fulfillment of this constitutional obligation must be protected and respected by all in the performance of their duties.

The workers who provide a core public service serve the common good of Brazilian society and, therefore, must be respected and have appreciation for their

work by the public. The State can take multiple actions to achieve this goal, e.g. public awareness campaigns that could in some way generate buy-in and protection of these workers, or appropriate administrative or legislative measures to ensure their security and protection, among others.

As such, authorities must ensure that their bylaws contain provisions for the protection of these workers. In the absence of appropriate rules, the authorities must take the necessary administrative or legislative measures immediately.

The work performed by these service providers and these workers is in the best interest of all Brazilian citizens and, therefore, is universal and unbiased since it must not make any distinction as to race, sex, religious, political or ideological affiliation.

Such protection, acceptance and respect should be well understood by all Brazilian citizens, including those involved in armed violence and, in particular, how their actions either directly or indirectly affect access to public essential services and their consequences for the public as a whole. The work carried out by these service providers and their staff serves the most basic principles of humanity.

In the case of Brazil, the domestic legal framework⁵ and the international standards (International Human Rights Law⁶) that govern and protect the mission of core public service providers are:

- Everyone has the right to life. States must refrain from deliberately withholding or delaying health care for the wounded and the sick in life-threatening circumstances.
- Whenever the use of force is unavoidable, law enforcement officials must ensure that health care is provided as soon as possible.
- Everyone has the right to the highest standards of physical and mental health and adequate basic education. States must provide primary health care and basic education at a minimum.
- Everyone has the right to have access to public health and education facilities and services without being discriminated against.
- States must take active measures to enable and assist individuals to enjoy the right to health and education.

The ICRC assists people around the world who have been affected by armed conflict and other situations of violence by doing everything possible to protect their dignity and alleviate their suffering, often in conjunction with Red Cross and Red Crescent partners. It also seeks to prevent hardships by promoting and strengthening Humanitarian Law and advocating for universal humanitarian principles.

5 The 1988 Constitution of the Federative Republic of Brazil, among others.

6 Pursuant to the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, and various other international treaties.

DUQUE DE CAXIAS



“A family health clinic in Duque de Caxias, RJ, opened its doors for another day's work. Around 8:20 a.m., a group of armed individuals carrying a shot person came up and demanded immediately assistance. Only a nurse and some community health agents were present. The nurse was in shock and had to try hard to put on an emergency bandage, and then persuaded the group to take the wounded individual to a hospital for proper treatment. The health clinic staff were threatened, coerced and assaulted by members of the armed group, who even fired shots into the air at the clinic entrance. As they left, they stole a patient's car. As a result of this incident, this health clinic was shutdown for a few years, thus preventing the public from having access to primary health services.”





“ We live in a climate of risk; we witness shootings almost on a daily basis. Most of the times, it occurs in front of the clinic, which is located at the thoroughfare that leads to our community. We were always in great fear and did not know how to act before the SAF because we were not in a position to make any decisions. We would stay inside the clinic with the entrance doors open, and we

would call the bureau and wait for an order that sometimes took too long to come, an hour or even more. This was very bad. Now, under the SAF system, we know what to do. Some days we can work normally, even if something happens in the community; it is quite big and sometimes an incident will not pose us any risk. The program has given us this sense of protection, this safety, and especially this autonomy. ”

STAFF TRAINED IN 2016 WORKING IN THE MANGUEIRINHA – DUQUE DE CAXIAS HEALTH CLINIC (RJ)

“ After the SAF was implemented in the SESC Health Clinic, the staff felt safer again. Of the 32 employees, only one did not return to work after the security incident. The staff no longer feels vulnerable in their work. ”

PHYSICIAN FROM THE SESC HEALTH CLINIC
PORTO ALEGRE (RS)

“ It's great to know that we are now able to put together a document that is endorsed by the management and that considers the protection of workers. ”

COORDINATOR OF THE AR 10 SHELTER: TRAINED IN 2016
FOUNDATION FOR SOCIAL ASSISTANCE AND CITIZENSHIP
(FASC) – PORTO ALEGRE (RS)

“ The timing was just great. I was prompted to rethink my attitudes at the workplace. I did not act properly on a number of situations. ”

“ The Clinic started shutting down less often. After implementation of the SAF we only had one severe incident, which was solved the following shift and the clinic re-opened in the afternoon. ”

COORDINATOR-GENERAL OF CHILD PROTECTION
COUNCILORS – PORTO ALEGRE (RS)

“ The strategy was successful because our colleagues who experience the same situation became responsible for the training. These people were also affected and felt uncomfortable took over the SAF methodology in a desire to help other colleagues cope with the violence they are faced with. ”

NURSE FROM HEALTH CLINIC
FLORIANÓPOLIS (SC)

“ “Our work is now slightly safer as we are able to evaluate and identify the signs that previously would go unnoticed. So, as a member of staff, I think the SAF is a great resource, and those clinics where it is not in place should have it since you never now when an incident might happen. ”

WORKERS IN THE SANTA LUCIA FAMILY HEALTH
CLINIC – FLORIANÓPOLIS (SC)



“ “I’ve been a CHA for 15 years now, and it was the first time anyone considered and cared about the problem of street violence we face. ”

COMMUNITY HEALTH AGENT (CHA) TRAINED IN
2016 – FLORIANÓPOLIS (SC)





We help people around the world affected by armed conflict and other situations of violence, doing everything we can to protect their dignity and relieve their suffering, often with our Red Cross and Red Crescent partners. We also seek to prevent hardship by promoting and strengthening humanitarian law and championing universal humanitarian principles.

 facebook.com/ICRC
 twitter.com/ICRC

Regional Delegation for Argentina,
Brazil, Chile, Paraguay and Uruguay
SHIS QI 15 Conj. 05, Casa 23, Lago Sul,
71635-250
Brasília, DF - Brazil
T +55 61 3106 2350
F +55 61 3248 7908
E-mail: bra_brasilia@icrc.org
www.icrc.org
© ICRC, february 2018