

Convention on the Rights of the Child

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COMMITTEE ON THE RIGHTS OF THE CHILD

Forty-eighth session

SUMMARY RECORD OF THE 1335th MEETING

Held at the Palais Wilson, Geneva, on Monday, 2 June 2008, at 3 p.m.

Chairperson: Ms. LEE

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The meeting was called to order at 3.10 p.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (continued)

Consolidated second and third periodic reports of Eritrea (continued) (CRC/C/ERI/3, CRC/C/ERI/Q/3 and Add.1)

1. <u>At the invitation of the Chairperson, the members of the delegation of Eritrea took places</u> <u>at the Committee table</u>.

2. <u>Mr. KOTRANE</u> said that although Government action aimed at curbing child labour and the rehabilitation of street children was highly encouraging, the economic exploitation of children, especially those engaged in dangerous work, was a source of concern. "Cultural factors", as cited in paragraph 342 of the consolidated report, even in combination with legislation, had not been sufficient to prevent children from undertaking harmful employment. He therefore asked the delegation to provide further details on the current situation and the Government's strategy to eliminate child labour. He was also curious to know whether Eritrea would participate in the International Programme on the Elimination of Child Labour (IPEC) launched by the International Labour Organization.

3. <u>Ms. HERCZOG</u> asked what opportunities were available for parents to improve their parenting skills, and enquired whether they were involved in any school programmes, or whether any studies had been conducted on parenting and the situation of children. Referring to paragraph 82 of the consolidated report, she asked why the State party believed that childcare support should be offered only to disadvantaged families. In her opinion, input from the community and the extended family network were probably not enough to prepare young children for school, even within families that might not be regarded as disadvantaged.

4. With regard to child abuse and neglect, she asked the delegation to explain the procedure for referring offences to the justice system, and to provide information on rehabilitation programmes targeting abusive or neglectful families and their children. Was there a national standardized assessment and documentation system to make fair decisions on abuse and neglect?

5. <u>Ms. AL-THANI</u> said that she found some provisions of the Transitional Penal Code of Eritrea (TPCE) contradictory, and wished to know how the State party dealt with discrepancies in its legislation.

6. She drew attention to the statistics in the written replies on the number of reported cases of child abuse that had resulted in court decisions or counselling of victims, but she believed that there were likely to be unreported cases of abuse that were not taken into account. In that context, she asked whether there was a helpline through which victims of abuse could seek assistance, and whether the Government had contacted international entities providing outreach services such as Child Helpline International. She requested additional information on recovery and reintegration services that were offered to children who had been abused or neglected.

7. <u>Mr. CITARELLA</u> drew attention to the fact that although children in conflict with the law were usually accommodated in special detention centres, separate from adults, it had come to his attention that in some instances they were actually held in police stations. He did not believe that such arrangements were in the best interest of the children in question, especially when there was no infrastructure for providing assistance or educational facilities for their benefit. He also invited the delegation to clarify the minimum age of criminal responsibility, since it appeared that persons between 15 and 18 years of age were treated as adults under the law.

8. <u>Ms. AIDOO</u> asked for more information on the policy adopted under the strategic plan on adolescent health. She commended the efforts undertaken by the Government so far and asked whether it targeted particular groups of adolescents, geographically or demographically, or encompassed the large number of adolescents outside the school system. She was also curious to know whether adolescents could seek medical care without the consent or presence of their parents.

9. Eritrea had recognized the enormity of the challenge posed by the HIV/AIDS epidemic, and the need for concerted and sustainable assistance. She asked what specific measures had been adopted to improve access to antiretroviral drugs, and to tackle adverse factors. She also noted that there was insufficient information in the periodic reports on mother-to-child transmission, which was suspected to be a major mode of infection.

10. <u>Ms. ORTIZ</u> asked whether children actively participated in the dissemination of information on their rights within the framework of media campaigns. She shared the concerns pertaining to children living without parental care and in other vulnerable situations, and was alarmed at the level of malnutrition. She asked how the Government was addressing those problems, and what regulations and monitoring mechanisms had been established.

11. Given the large pool of orphans in Eritrea, she asked how the Government planned to increase the number of adoptions, whether it had data on the number of national and intercountry adoptions, and whether it had considered ratifying the Hague Convention on intercountry adoption.

12. <u>Ms. KHATTAB</u> (Country Rapporteur for the Optional Protocol on the involvement of children in armed conflict) asked the delegation to elaborate on its strategy to maintain the practice of breastfeeding at its current high level, and on its policies for the marketing of breast milk substitutes and for "baby-friendly" hospitals.

13. <u>The CHAIRPERSON</u> asked about the impact of programmes for the rehabilitation of child sex workers, and whether there was a stigma attached to children who had been victims of such exploitation.

14. <u>Mr. HAILEMARIAM</u> (Eritrea), responding to earlier queries, said that current regional disparities were a legacy from Eritrea's former period of deprivation. The Government was fully committed to addressing imbalances by focusing on previously disadvantaged population groups, and was hopeful that it was simply a matter of time before an equitable balance would be achieved.

15. On the issue of decentralization, he said that over the past two years an increasing degree of autonomy had been granted to regional administrations, an approach that had proved to be effective in dealing with disparities.

16. He did not have statistics concerning the education budget other than those which had already been provided in the written documentation, but he could confirm that spending on education had quadrupled since 2002, from 200 to 800 million Nakfa. For a number of reasons, it was difficult to compile precise statistics on what proportion of the budget that represented in relation to overall Government expenditure, but he assured the Committee his delegation would submit such information as soon as possible.

17. Enrolment rates had not yet reached a satisfactory level, even though Eritrea had made considerable progress in improving access to education in recent years. The Government was earnestly dealing with the situation in a phased approach over a five-year period, which included the construction of schools and teacher training, and had planned to intensify its strategy in that regard.

18. He outlined the various factors that had contributed to the high dropout rate and listed a number of measures designed to raise awareness within families and communities, and to provide incentives for children to remain in school. Much effort had been made to drastically improve the quality of education offered, upgrade teacher qualifications, reduce overcrowding and strengthen infrastructure and curriculum. Already, after a period of rapid expansion, facilities had been modernized to accommodate the current level of demand.

19. He explained that, at the time, the transfer of students to the Sawa location had been inevitable because the school system had been suffering from an acute shortage of classroom and teaching facilities. However, he emphasized that a normal academic setting was provided for the students, who were not involved in any form of military exercise. The military base had subsequently moved elsewhere and the school had evolved into a vocational training centre for approximately 6,000 students.

20. With regard to the involvement of teachers in military manoeuvres, he explained that there had been a period of instability in 2005 when teachers, amongst others, were subject to a short-term call-up, but that the teachers were able to resume their duties immediately following the end of hostilities. He emphasized that children under the age of 18 years were not under any obligation to do military service, and that such participation was outlawed. The summer work programme for high school students should not be confused with military service: he explained that students from all over the country spent a month working together on various outdoor projects, such as reforestation and soil conservation, which gave them the opportunity to combine theoretical knowledge with practical field work.

21. With reference to the Committee's query about disparities, and the fact that the capital Asmara tended to be favoured, particularly as it was the site of the country's only university, he was pleased to report that eight new higher education establishments had been created within a very short period of time. The Government had taken pains to ensure that they were spread around the country and, initially, only the School of Medicine was located in Asmara. The Government was trying not to concentrate all facilities and services in the capital.

22. <u>Mr. PARFITT</u> said it would be useful to learn whether there was any military education in secondary schools, and whether the sanitary conditions in schools, especially at the primary level, had been improved in order to encourage girls to attend.

23. <u>Mr. HAILEMARIAM</u> (Eritrea) said that children did not receive military training of any kind. However, since Eritrea had to be in a position to defend itself and assert its sovereignty, every able-bodied Eritrean was obliged by law to do national service, which included military training. Young people did their national service after completing their education, even if, in some cases, that included university or vocational training. Since Eritrea was no longer involved in an armed conflict, some people performed their national service in a civilian capacity, by working in ministries or in agriculture for example.

24. Sanitary installations in schools were a major concern of the Government. Most schools did not have adequate latrines or potable water, which was a disincentive for the enrolment of girls. All new schools were being provided with suitable installations and funding had been made available to address the problem in older establishments in collaboration with the Ministry of Health, the Water Resource Department and the community.

25. <u>The CHAIRPERSON</u> enquired whether military service was compulsory for all men and women, including teachers.

26. <u>Mr. HAILEMARIAM</u> (Eritrea) said that the Government had decreed that everyone had to do national service for 18 months. If, in the future, the situation required a military response, they would be expected to carry out military tasks. Currently, the emphasis was on service in the Government's development programmes or the productive sector.

27. <u>Ms. AIDOO</u> wanted to know at what age high school children attended the summer camp where they received some military training.

28. <u>Mr. HAILEMARIAM</u> (Eritrea) said that there was nothing military about the summer work programme, whereby most children merely carried out tasks such as planting trees for part of the day. On the other hand, all citizens over 18 years of age had to undergo military training.

29. <u>Ms. MENKERIOS</u> (Eritrea), referring to the issue of female genital mutilation, said that it was of great concern to the Government and had been condemned nationally. There was a programme to create awareness among women who performed the practice, which was often carried out in the privacy of the home at the request of mothers, based on Christian, as well as Muslim, religious beliefs. However, all the religious leaders had made it clear that the practice had no basis in religion. Nevertheless, the elimination of female genital mutilation in Eritrea would take time, as attitudes and beliefs had to be changed.

30. There was no child labour in Eritrea. When children helped their family in the home, in agriculture or in commerce, it was not considered child labour, provided that it did not interfere with schooling. Such help was often given when a woman was the head of the household. The Labour Code permitted and regulated work by children over 14 years of age. Currently, the Department of Labour was conducting a survey of the labour force in conjunction with United Nations agencies and, if any problems were identified, the necessary measures could be taken.

31. Given the existing disparities, the country's development policy was giving priority to rural development. The Constitution proclaimed the equality of women, but it would take time to achieve, owing to the disadvantaged position of women in the past. As regards the different regions, those that had been neglected earlier could not be expected to reach the standard of others which had offered access to education, health-care services and employment. The Government's intention was to extend such services to all regions.

32. In its concluding observations on Eritrea's initial report in 2003, the Committee had recommended that juvenile detention centres should be improved. Several centres had been built but were not operating yet, because the equipment had not been installed. Currently, children were detained in adult facilities, but in separate units, or in police stations, separated from adults and supervised by social workers.

33. <u>Mr. KOTRANE</u> said that, in 2003, the Committee had expressed its concern regarding child labour in agriculture, on the streets, and in domestic service. According to the delegation there was now no child labour in Eritrea. However, according to the report (para. 344), the Government has designed a research proposal to determine the situation of child labour in the country. The Committee would like to know whether the research had been completed and, if so, what its findings had been.

34. Also, according to the report (para. 335), adolescents between the ages of 15 and 18 were treated as adults under the ordinary provisions of the Penal Code. However, the delegation should provide more specific information on how adolescents were currently treated under the juvenile justice system (para. 336).

35. <u>Mr. CITARELLA</u> requested information on the length of pretrial detention, whether the 24-hour rule was applied everywhere, and whether it could be prolonged because of fear of revenge against the child, as reported in the written replies. Since there were no juvenile courts, he wanted to know what type of courts heard civil and criminal cases concerning children and whether there were any special judges.

36. <u>Ms. MENKERIOS</u> (Eritrea) said the survey had not been concluded yet. If a child was detained for certain crimes, pretrial detention could be extended, based on two criteria: rehabilitation and protection. There were no children's courts; consequently, children found guilty of a serious crime were sent to rehabilitation institutions until they were 18 years of age, or they could be released earlier in the case of minor offences. The programmes to rehabilitate vulnerable children in conflict with the law provided them with food, health care, educational services and recreational activities.

37. <u>Mr. PARFITT</u> asked whether judges were given any special training on the rights of the child, particularly in relation to the best interests of the child and the participation of young people in legal proceedings, either as victims or witnesses.

38. <u>Mr. OGBAZGHI</u> (Eritrea) said that, in general, the provisions of ordinary law applied to children of 15 to 18 years of age, but there were exceptions and certain provisions were slightly different to take into account the age and circumstances of the child. For example, the death

penalty could not be applied and, at times, punishments could be mitigated. The Penal Code had elaborate provisions concerning juvenile justice even though there were no juvenile courts as yet. Given existing conditions in Eritrea, it would be impossible to have three judges sitting just for the rare juvenile cases. Nevertheless, people involved in juvenile justice from the police, the courts and the ministries had been sent to Holland for training on how to deal with juveniles in court and in prison.

39. <u>Mr. KRAPPMAN</u> (Country Rapporteur for the Optional Protocol on the involvement of children in armed conflict) said the Committee would welcome further information on the rehabilitation programmes and whether adolescents of 15 to 18 years of age could benefit from them.

40. <u>Ms. MENKERIOS</u> (Eritrea) confirmed that adolescents were entitled to benefit from such programmes. He said that the 18,000 children mentioned in the written answers (para. 9) referred to orphans and vulnerable children in general. As the report stated, only 537 orphans were being cared for in institutions. The Government had revised its policy on institutionalization and currently favoured family reunification, foster care and, in particular, group homes in the community. In general, adoption was not encouraged, particularly international adoption, owing to the difficulty of carrying out a proper assessment of potential families.

41. As a result of the early childhood development programme, the number of establishments offering preschool education had been increased by over 200 per cent.

42. <u>Ms. ORTIZ</u> asked how the group homes in the community were regulated and monitored, and how children could make complaints in cases of abuse.

43. <u>Ms. MENKERIOS</u> (Eritrea) said that the Social Affairs Department regulated the group homes, which were each headed by three "mothers" and a "father" to ensure a family atmosphere. Children in the homes attended the regular community school and were monitored by social workers; to date, there had been no reports of complaints.

The meeting was suspended at 4.30 p.m. and resumed at 5 p.m.

44. <u>Ms. MENKERIOS</u> (Eritrea) said that the country needed a mechanism to monitor child abuse. It did not have a 24-hour child help line and, unless the case was reported to the police, there was no way of knowing that a child was being abused. Regarding parenting, the establishment of parent-teacher-student committees had led to much greater transparency regarding the situation in schools, since children could raise issues that they would not have broached alone with their teachers.

45. <u>Mr. TESFASELLASSIE</u> (Eritrea) said that the infant mortality rate had declined significantly and Eritrea had already reached its Millennium Development Goals target in that area. Four years ago it had adopted a very successful programme for the comprehensive management of childhood illnesses, with a detailed action plan and guidelines for interventions. The country had developed a programme to provide new infrastructure for children under 5 years of age, particularly newborns. A neonatal intensive-care unit had been established and the intention was to set up such units in the six Zobas or regions. 46. Maternal mortality was still very high, although the Government was trying to reduce it by opening well-equipped maternal care facilities at the national and regional level, and by providing training in emergency obstetric and neonatal care. The Ministry of Health had tried to reach out to the communities through traditional midwives and health promoters. Eritrea had a traditional society, and there were customs and practices that would have to be overcome. Accordingly, community health committees had been established to deal with health and social service issues, working with the different administrative structures at the Zoba and sub-Zoba levels. An action plan had been drawn up to implement the programme in stages through different Government ministries and the communities, and some training had been provided. Maternal care was a very complex issue, and the Government was trying to address it at the community level by improving the quality of health services.

47. With the aid of the World Bank and United Nations agencies, Eritrea ran programmes on immunization and nutrition, and on the prevention of communicable and non-communicable diseases. There were separate programmes for sexually-transmitted diseases, HIV/AIDS and mental health, each operated in collaboration with a different international agency. A policy and a strategy had been developed and disseminated to health workers throughout the country. A recent joint review with its partners had noted the success of such programmes and a second stage was being prepared.

48. Health workers and doctors were very motivated, despite the low salaries, and were given the opportunity of taking distance education courses in collaboration with international universities.

49. Regarding the provision of antiretroviral drugs to children, he said that the overall programme for the prevention and control of HIV/AIDS particularly addressed mothers and children and all parties involved were working together to implement it. Regarding the prevention of mother-to-child transmission of HIV, pregnant women were being checked and advised in various areas and were provided with antiretroviral drugs if necessary. Demobilized persons were being checked for HIV/AIDS and, if the tests were positive, given drugs if they fulfilled the criteria, and counselling and support measures were provided for the patients themselves and their families. Identification of false claims on drugs was essential and even more care was needed in administering drugs to children in order to ensure their safety. The challenge of achieving the overall aim of providing antiretroviral drugs to all child sufferers was, however, being addressed on a step-by-step basis. To his knowledge, there was no legal framework in place regarding HIV/AIDS. National policy indicated very clearly how child sufferers should be treated and that any stigma should be actively avoided, and that policy was currently acting as a substitute for legal framework.

50. Breastfeeding was a tradition in Eritrean society, and under a programme to promote exclusive breastfeeding, approximately 18 to 20 hospitals had been certified as "baby-friendly hospitals" by relevant independent international authorities. Work had been under way since 1994 under the national nutrition programme to address the problem of early weaning and progress had been made. In response to a question as to whether a code of marketing existed in relation to breast-milk substitutes, he said that the message was that substitutes should be

avoided to the extent possible. However, it was difficult to apply in a society that held traditional views with regard to breast milk and that was often unable to provide for its children. Despite the possible controversy, national policy had declared that milk substitutes could be dangerous and should be banned, and mothers were encouraged through Government measures, by the media and at health facilities to use only breast milk for the first four to six months of a baby's life.

51. <u>The CHAIRPERSON</u> asked whether the State party had adopted the International Code of Marketing of Breast-Milk Substitutes and suggested that the process of certifying baby-friendly hospitals should be reviewed. She drew the State party's attention to the new policy adopted by the World Health Organization (WHO) whereby the benefits of breastfeeding by HIV-positive mothers far outweighed the risks.

52. <u>Ms. MENKERIOS</u> (Eritrea) said that the situation in which both of a child's parents were engaged in national service did not arise as it would be irresponsible. A benefit could be claimed for the child by one parent if the other was engaged in national service.

53. <u>Ms. AIDOO</u> asked whether children and young people were involved in campaigns outside the school context to raise awareness about HIV/AIDS.

54. <u>Ms. ORTIZ</u> requested further clarification as to the number of orphans in the State party and asked how extended families who cared for orphans were assisted. She also asked whether any legislation regulated the adoption procedure, and whether any reports had been received of children being taken to other countries to be adopted.

55. <u>Ms. MENKERIOS (Eritrea)</u> said that the community-based rehabilitation programme focused mainly on persons affected by natural causes, and therefore did not discriminate, for instance, between child landmine victims and other children with disabilities. It was run by volunteers who contributed greatly to raising awareness among local communities. A disability policy did exist, which clearly defined the rights and benefits of children and adults with disabilities.

56. The main priority of the orphan protection programme was for orphans to be placed with family members, who were provided with economic support. Otherwise, orphans could be placed, with assistance, in families to which they were not related and which were willing to care for them. Vulnerable children and street children could be placed in foster care, with support provided in order to identify the children's problems and to reunify them with their families.

57. International adoption was practised, by arrangement between the courts and the family which was giving the child away. However, the policy for the previous three years had been that international adoption should not be encouraged and that the adoption procedure should be through the social affairs services and not the courts.

58. <u>Ms. ORTIZ</u> asked what the difference was between families to which the children were not related and foster families, and who followed up such cases. Noting it was imperative for the State party to enact legislation to regulate national and international adoption, she asked who authorized national adoptions and pointed out that international adoptions carried out simply by agreement between families amounted to the sale of children.

59. <u>Mr. OGBAZGHI</u> (Eritrea) said that approval by a court of law was strictly required in order for adoption to take place. Current adoption practices did not amount to the sale of children, and the courts ensured that the proper procedure was followed. Traditionally, children whose parents could not care for them would always be taken in by the extended family, but the concept of adoption was slowly becoming more widespread. Measures were being taken to amend legislation accordingly, with the provision of arrangements for the child in cases where international adoption was unsuccessful.

60. <u>Mr. TESFASELLASSIE</u> (Eritrea) said that children were involved in awareness-raising and prevention campaigns related to HIV/AIDS outside school through various media, including radio and television.

61. <u>Mr. HAILEMARIAM</u> (Eritrea) said that it was true that the University of Asmara was no longer accepting students. The Government's programme of overall reform of tertiary education, including its initiative to establish eight new colleges in order to accommodate the growing number of high-school leavers, had rendered it necessary to withdraw financial and human resources from the University of Asmara. The university was therefore not in a position to accept new students, but it was hoped that it would resume normal functioning in the future.

62. <u>Ms. KHATTAB</u> (Country Rapporteur for the Optional Protocol on the involvement of children in armed conflict), noting that the policy of not accepting students had been introduced three years previously and that there would come a point when there would be no students left once they had all graduated, asked what reasoning lay behind the policy.

63. <u>Mr. HAILEMARIAM</u> (Eritrea) said that there were currently no students at the university owing to the redistribution of resources in the current transitional phase of the reform process.

64. HIV/AIDS issues and life skills were included on the new curriculum, using methods such as drama, general knowledge competitions, clubs and singing. Children were therefore learning through that process, but were also instrumental in the awareness-raising and in passing the message on to the general public, which was vital in a country such as Eritrea, in which a large proportion of the adult population was illiterate.

65. <u>The CHAIRPERSON</u> repeated her earlier question as to what powers were held by the 12 well-being committees that provided remedy for violations, noting that they were part of a pilot project, and what funding was allocated to them.

66. <u>Ms. MENKERIOS</u> (Eritrea) said that the committees' mandate was to address all violations. There was no separate budget for them and their budget was allocated from the child protection fund. The committees' work and the question of whether there was a need for a written mandate would be assessed on an ad hoc basis.

67. <u>Ms. KHATTAB</u> (Country Rapporteur for the Optional Protocol on the involvement of children in armed conflict) thanked the State party for its patience and endurance in the face of the flood of questions from the Committee, and for the open and frank dialogue that had developed. Outlining the main points that would appear in the Committee's recommendations, she noted that the Committee was well aware of the difficult situation in Eritrea, but, whatever the challenges, children should be the priority.

68. <u>Mr. KRAPPMAN</u> (Country Rapporteur for the Optional Protocol on the involvement of children in armed conflict) thanked the State party for all the information provided during the meeting and sent the children of Eritrea his best wishes.

69. <u>Ms. MENKERIOS</u> (Eritrea) thanked the Committee members for their comments and criticisms. Recalling the first time Eritrea was examined under the Convention, she said that the Committee had been encouraging, sympathetic and supportive, and the current examination had also been positive. The Committee's previous recommendations had been widely disseminated and used, and, although much remained to be done, the State party was pleased at what had been achieved given its budget constraints. In view of the current food and fuel crises, all Eritreans would have to work together and to continue making personal sacrifices for the good of the country and its children. The State party would send written replies to all unanswered questions and would be committed to responding to the Committee's recommendations.

70. <u>The CHAIRPERSON</u> said that the State party could rely on the Committee's assistance in ensuring that its hardworking population would not have to continue making sacrifices for long and in maintaining morale and motivation. She thanked the State party for participating in a fruitful dialogue, and said that it was blessed to have such an experienced minister at the helm. She urged the State party to continue their commitment to the quest for a perfect world for children.

The meeting rose at 6 p.m.