

## CHILDREN'S RIGHTS - HEALTH

### III. CONCLUDING OBSERVATIONS

#### CERD

- Bolivia, CERD, A/51/18 (1996) 41 at para 274.

The new measures to provide maternity care and medical care for infants until the age of five years are welcomed and considered to be in conformity with article 5 (e) of the Convention.

- Slovakia, CERD, A/55/18 (2000) 47 at para. 265.

Concern is expressed that a disproportionately large number of Roma suffer higher mortality rates, have poorer nutrition levels, and low levels of awareness of maternal and child health. Moreover, poor access to clean drinking water, adequate sanitation, and high exposure to environmental pollution in Roma settlements are matters of concern. The State party should take all necessary measures to ensure that the Roma enjoy the full right to health and health care. The State party should prioritize and target social services for persons belonging to the most vulnerable groups.

#### ICCPR

- Romania, ICCPR, A/49/40 vol. I (1994) 28 at paras. 142 and 147.

##### *Paragraph 142*

The increasing rate of infant mortality is a matter of concern.

##### *Paragraph 147*

Measures should be taken to reduce infant mortality.

##### *See also:*

- Brazil, ICCPR, A/51/40 vol. I (1996) 44 at para. 328.

- Georgia, ICCPR, A/52/40 vol. I (1997) 40 at para. 243.

Crowding, poor sanitary conditions and lack of medical care have resulted in a high rate of infectious disease and a very alarming mortality rate, in particular among juvenile detainees. This prison situation does not comply with the provisions of article 10 of the Covenant.

## **CHILDREN'S RIGHTS - HEALTH**

- Ecuador, ICCPR, A/53/40 vol. I (1998) 43 at para. 284.

The very high number of suicides of young females, which appear in part to be related to the prohibition of abortion, is of concern. The State party's failure to address the resulting problems faced by adolescent girls, in particular rape victims, who suffer the consequences of such acts for the rest of their lives is regretted. Such situations are, from both legal and practical standpoints, incompatible with articles 3, 6 and 7 of the Covenant, and with article 24 when female minors are involved. All necessary legislative and other measures should be adopted to assist women, and particularly adolescent girls, faced with the problem of unwanted pregnancies to obtain access to adequate health and education facilities.

- Belgium, ICCPR, A/54/40 vol. I (1999) 26 at para. 73.

The Committee notes with satisfaction that children of illegal immigrants are entitled to education and medical care.

### **ICESCR**

- The Gambia, ICESCR, E/1995/22 (1994) 42 at para. 202.

Concern is expressed over the alarming UNDP figures of infant mortality and fertility rates of the Gambia, which are among the highest in Africa: 145.1 per 1,000 live births in 1986-1987 and a 6.5 fertility rate during the same period. The practice of female genital mutilation, which is still prevalent in the Gambia, is deplored. Independent experts report that more than half the female population in the Gambia have undergone this procedure.

- Mali, ICESCR, E/1995/22 (1994) 64 at para. 350.

It is of concern that child, infant and maternal mortality rates in Mali are still among the highest in the world. Thus, almost one in five children under the age of five dies each year. Approximately 1,000 deliveries per 100,000 births result in the death of the mother. Diarrhoea, malaria and acute respiratory infections, aggravated by malnutrition, alone account for more than 40 per cent of deaths. Acquired immune deficiency syndrome (AIDS) is spreading rapidly. With regard to water and sanitation, the average rate of access to water country-wide is about 50 per cent, but as low as 4 per cent in the difficult terrain of the north of the country. The overall rate of access to sanitation facilities is estimated at approximately 15 per cent. The geographical distribution of health services and personnel continues to show a heavy urban bias.

## CHILDREN'S RIGHTS - HEALTH

- Algeria, ICESCR, E/1996/22 (1995) 54 at paras. 298 and 303.

### *Paragraph 298*

The high mortality rate among young girls in the 1-10 age group, which, as acknowledged by the Government, is due to the fact that better care is provided for boys, is noted with concern.

### *Paragraph 303*

The Government is requested to take all necessary measures to ensure that girls are fully able to exercise their right to education and to mental and physical health. Such measures should be accompanied by the setting up of a data-collection system enabling their impact to be assessed.

- Paraguay, ICESCR, E/1997/22 (1996) 22 at para. 78.

The inequitable distribution of health services between urban and rural areas is of concern. The very small number of medical and paramedical personnel in the country is also noted. The high rates of infant mortality and infant morbidity are also matters of concern, as are the high maternal mortality rate and the inadequacy of guidance and family-planning services.

- Peru, ICESCR, E/1998/22 (1997) 33 at para. 152.

The high mortality rate among children and women due to the lack of proper health services, or inadequate health services is of concern.

- Dominican Republic, ICESCR, E/1998/22 (1997) 43 at paras. 216 and 221.

### *Paragraph 216*

It is noted that approximately 500,000-600,000 illegal Haitian workers reside in the State party, some of them for one or two generations, without any legal status and any protection of their economic, social and cultural rights. Particular concern is expressed about the situation of the children, who do not receive Dominican nationality on the grounds that they are children born of foreigners in transit. These children are thus denied their most basic social rights, such as the rights to education and health care.

### *Paragraph 221*

With respect to article 10 of the Covenant, concern is expressed about the situation of children in the State party and, in particular, about reports received on the occurrence of child labour and child exploitation, including sexual exploitation, about the increasing number of street children, the low rate of school enrolment, the high rate of infant mortality and the high number of pregnancies among

## CHILDREN'S RIGHTS - HEALTH

school-age females.

- Iraq, ICESCR, E/1998/22 (1997) 50 at para. 266.

With respect to article 12 of the Covenant, it is noted with concern that, with the destruction of parts of the infrastructure in the State party, the non-availability of safe drinking water has led to widespread contaminated water and related health problems, such as waterborne and diarrhoeal diseases and cholera. Due to food shortages and the resulting restrictions on its distribution, and to the non-availability of certain medicines, medical equipment and other articles of personal hygiene, the standard of physical health of the population is declining at a rapid pace. In particular, certain diseases previously eradicated from the State party have reappeared, such as typhoid, infantile paralysis, tetanus, viral hepatitis, Giardia, German measles, kala-azar, undulant fever, haemorrhagic fever, croup, whooping cough, rickets, scabies, hydrocysts and rabies.

- Uruguay, ICESCR, E/1998/22 (1997) 67 at para. 370.

Concern is expressed at the health situation of young minors, in view of the high incidence of obesity and suicides.

- Luxembourg, ICESCR, E/1998/22 (1997) 69 at paras. 396 and 405.

### *Paragraph 396*

The occurrence in the State party of adolescent health problems, due in particular to drug abuse, is of concern. Alarm is expressed about the high incidence of suicide among young people.

### *Paragraph 405*

The State party should continue its efforts to prevent and combat drug abuse and suicide among the youth and, where necessary, reinforce existing measures.

- Saint Vincent and The Grenadines, ICESCR, E/1998/22 (1997) 72 at para. 434.

With respect to the right to health, the high incidence of pregnancies among females of school age (between 1988 and 1991, 24 per cent of all births were to teenage mothers) is of concern. It is underlined that such pregnancies often have adverse consequences for the health of the child and of the mother and for the latter's ability to continue her studies.

## CHILDREN'S RIGHTS - HEALTH

- Sri Lanka, ICESCR, E/1999/22 (1998) 22 at para. 78.

It is noted that Sri Lanka not only has the second highest rate of suicide among youth in the world, but a rising incidence of drug and alcohol dependence, adolescent crime, child abuse, sexual disorders and domestic violence against women. It is deeply regretted that the Government has failed to comply with its obligation under article 10 of the Covenant (concerning protection of the family) and article 12.

- Nigeria, ICESCR, E/1999/22 (1998) 27 at para. 118.

Most alarming is the widespread problem of children suffering from malnutrition. Almost 30 per cent of Nigerian children suffer from malnutrition and its damaging consequences. According to UNICEF, all available evidence shows that hunger and malnutrition are widely prevalent in Nigeria.

- Denmark, ICESCR, E/2000/22 (1999) 29 at para. 117.

The Government should continue its efforts to combat the problem of youth suicide and it is recommended that statistical data be collected and that thorough and targeted studies be conducted on the extent, the causes and the consequences of this problem. Attention is drawn to the importance of detection measures and preventive policies, and the State party is encouraged to continue with its campaigns for the prevention of this phenomenon.

- Tunisia, ICESCR, E/2000/22 (1999) 36 at para. 168.

The disparities of living standards, especially with regard to education, health, life expectancy, child mortality, access to piped water, electricity and employment, to be found between the prosperous north-east coast of Tunisia and the underdeveloped north-west, between the interior of the country and the south, and between the towns and rural areas, are of concern.

- Solomon Islands, ICESCR, E/2000/22 (1999) 40 at para. 205.

Infant mortality remains a major cause of concern, in spite of the commendable health policies of the Government which have drastically decreased the mortality rate of children under the age of 5. According to WHO, in 1996 the infant mortality rate was estimated at 26.8 deaths per 1,000 live births, while, according to the first country cooperation framework for the Solomon Islands (1997-2001), the maternal mortality rate is as high as 550 deaths per 100,000 live births. The low percentage of the population with access to adequate sanitation (only 9 per cent of the rural

## CHILDREN'S RIGHTS - HEALTH

population) and to safe drinking water available in the home or within reasonable access (63 per cent of the entire population), is of concern. The lack of adequate sanitation facilities directly adds to the severe malaria problem affecting more than one third of the population.

- Argentina, ICESCR, E/2000/22 (1999) 49 at para. 286.

The State party is urged to review its policies on health, and in particular it should pay attention to the issues of mental health, maternal mortality, adolescent pregnancies and HIV/AIDS.

- Cameroon, ICESCR, E/2000/22 (1999) 56 at paras. 339 and 359.

### *Paragraph 339*

The inadequacy of family planning policies and programmes in the State party, which have failed to reduce infant and maternal mortality, is of concern. The high level of clandestine abortion, which is in part responsible for the high maternal mortality rate, is also of concern.

### *Paragraph 359*

The State party is urged to review its policies on health in order to address, in particular, maternal mortality, adolescent pregnancies and the HIV/AIDS epidemic. In this respect, the Government is urged to review its family planning policies with a view to increasing access to information concerning contraceptives through educational programmes.

- Mexico, ICESCR, E/2000/22 (1999) 62 at paras. 390 and 404.

### *Paragraph 390*

The persisting malnutrition, especially in rural areas and among children under five years of age, is of concern. Alarm is expressed that malnutrition-related illnesses are among the chief causes of mortality in the State party.

### *Paragraph 404*

The State party is urged to take more effective measures to ensure access to basic health-care services for all children and to combat malnutrition, especially among children belonging to indigenous groups living in rural and remote areas.

- Jordan, ICESCR, E/2001/22 (2000) 49 at para. 255.

To enable the State party to monitor its compliance with article 11 of the Covenant, concerning the

## CHILDREN'S RIGHTS - HEALTH

right to food, it is recommended that the State party systematically collect data on malnutrition, especially child malnutrition.

- Mongolia, ICESCR, E/2001/22 (2000) 53 at paras. 271 and 273.

### *Paragraph 271*

It is deeply disturbing that the State party has not been able to mitigate the adverse effects of poverty on children, who represent 42 per cent of the population. In particular, concern is expressed about the extent of the phenomenon of street children, whose numbers are currently estimated at 30,000, 60 per cent of whom live in Ulaanbaatar in deplorable conditions with inadequate nutrition and susceptible to disease, violence, sexual and economic exploitation, substance abuse and mental trauma.

### *Paragraph 273*

The Committee is disturbed to learn about the deteriorating health situation for Mongolians since 1990 and regrets that government expenditure on health has decreased in recent years (according to the government submission, public expenditure on health fell from 5.8 per cent of GDP in 1991 to 3.6 per cent in 1998). The challenges faced by the State party include improving access to health-care services in rural areas and for the poor, the relatively low life expectancy, the increase in non-communicable and degenerative diseases, as well as sexually transmitted diseases, substance abuse, child suicide, high maternal mortality, especially in rural areas, and limited access to contraceptives. Concern is expressed that there is no policy response to address increasing substance abuse and child and adolescent suicide.

- Kyrgyzstan, ICESCR, E/2001/22 (2000) 62 at para. 347.

Deep concern is expressed about the high rate of poverty, estimated to affect more than 50 per cent of the population. The most affected areas are the remote southern rural areas, where persons over the age of 60, women and children, especially, suffer from poverty. In particular, concern is expressed about malnutrition, which mostly affects infants (19.7 per cent), children and adolescents.

- Finland, ICESCR, E/2001/22 (2000) 73 at paras. 446 and 458.

### *Paragraph 446*

Particular concern is expressed about certain municipalities that allocate insufficient funds to health care services. This has resulted in inequality with regard to levels of health care service provision depending on the place of residence, to the detriment in particular of children, persons with physical and mental disabilities and older persons.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 458*

The State party is called upon to ensure that municipalities provide adequate health services, especially to vulnerable groups such as children, older persons and persons with physical and mental disabilities.

- Morocco, ICESCR, E/2001/22 (2000) 82 at paras. 540 and 564.

### *Paragraph 540*

The high rate of maternal and infant mortality is noted with concern.

### *Paragraph 564*

The State party is urged to take all necessary measures to address the problem of the high rate of maternal and infant mortality.

- Hong Kong Special Administrative Region (China), ICESCR, E/2002/22 (2001) 39 at paras. 185 and 204.

### *Paragraph 185*

Concern is expressed about the reported increase in the incidence of child abuse and suicide among youth.

### *Paragraph 204*

Urgent measures should be adopted to address the problems leading to youth suicide and all forms of child abuse.

- Bolivia, ICESCR, E/2002/22 (2001) 52 at paras. 268 and 277.

### *Paragraph 268*

Deep concern is expressed about the extent of poverty in Bolivia. According to UNDP figures, 88.8% of all households in Bolivia have an income below the poverty line. Moreover, 90% of these households are in rural areas. This situation is reflected in indicators such as infant mortality, life expectancy, literacy rate and access to sanitation, potable water and health care services. In this regard, the highly uneven distribution of wealth is deplored.

### *Paragraph 277*

The situation of children subjected to physical and mental abuse, as well as the extent of child malnutrition is disturbing.

## CHILDREN'S RIGHTS - HEALTH

- Senegal, ICESCR, E/2002/22 (2001) 61 at paras. 354 and 381.

### *Paragraph 354*

The high incidence of infant mortality, especially in rural areas, is a concern. There is also concern that many children in the rural areas suffer from serious malnutrition and retarded growth.

### *Paragraph 381*

The State party is called upon to make safe drinking water accessible to the entire population and to combat the problems of malnutrition, especially among children, hygiene and water-related diseases.

- Syrian Arab Republic, ICESCR, E/2002/22 (2001) 67 at paras. 397 and 427.

### *Paragraph 397*

The fact that infant mortality has decreased and that life expectancy has increased is welcomed.

### *Paragraph 427*

The State party is urged to take all effective measures to address the problem of child labour in family enterprises and in the agricultural sector, which runs counter to protection of the rights of the child to health and to education.

- Ukraine, ICESCR, E/2002/22 (2001) 78 at paras. 499 and 512.

### *Paragraph 499*

The deterioration in the health of the most vulnerable groups, especially women and children, and in the quality of health services is of concern. The rise in the incidence of sexually transmitted diseases (STD) and the spread of HIV/AIDS is noted with concern. There is also concern about the high incidence of alcohol abuse and tobacco use, especially among persons under 18 years.

### *Paragraph 512*

The State party should ensure that its commitment to primary health care is met by adequate allocation of resources and that all persons, especially from the most vulnerable groups, have access to health care. It is suggested that the State party establish comprehensive reproductive health programmes, as well as measures to ensure that abortion is not perceived as a method of contraception. It is further recommended that adolescents have access to and are provided with reproductive health education, as well as with STD and HIV/AIDS prevention programmes. Children should be provided with accurate and objective information about alcohol and tobacco use, and activities by the public mass media promoting their consumption should be discouraged.

## CHILDREN'S RIGHTS - HEALTH

- Japan, ICESCR, E/2002/22 (2001) 90 at paras. 610 and 637.

### *Paragraph 610*

Concern is expressed about the frequently excessively competitive and stressful nature of all levels of education, which results in school absence, illness, and even suicide by students.

### *Paragraph 637*

A comprehensive review of the educational system should be undertaken, taking into consideration General Comments No. 11 (1999) on plans of education for primary education (art. 14 of the Covenant), and No. 13 (1999) on the right to education (art. 13 of the Covenant), as well as General Comment No. 1 (2001) on the aims of education (art. 29, para. 1, of the Convention on the Rights of the Child). In particular, the review should focus on the frequent excessively competitive and stressful nature of all levels of education, which results in school absence, illness, and even suicide by students.

## CEDAW

- Chile, CEDAW, A/54/38/Rev.1 part II (1999) 64 at para. 227.

Priority should be given to an examination of the situation of adolescents, and various measures should be adopted to effectively address the sexual and reproductive health services and information needs of adolescents, including through the dissemination of family planning and information on contraceptive methods, through, *inter alia*, the introduction of effective sex education programmes. The Government is also urged to make all efforts to ensure the passage of a law explicitly prohibiting adolescent girls from being expelled from private and public schools because of pregnancy.

- Democratic Republic of the Congo, CEDAW, A/55/38 Part I (2000) 21 at para. 227.

The high rates of maternal and infant mortality, the low rate of contraceptive use, particularly in rural areas, and the decline in health services, are noted with deep concern.

- Burkina Faso, CEDAW, A/55/38 part I (2000) 25 at paras. 261, 274 and 275.

### *Paragraph 261*

The State party is particularly commended on the provisions and policies adopted in conjunction with all civil society to eradicate the practice of genital mutilation, which infringes on the right to personal security and the physical and moral integrity of girls and threatens their lives and health.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 274*

The precarious state of women's health, especially in rural areas, is of particular concern. The high rates of maternal and infant mortality caused by infectious diseases and malnutrition result from the lack of local health-care centres and adequate health-care providers.

### *Paragraph 275*

The Government should pay particular attention to this problem, in order to improve the indicators of women's health. National reproductive health programmes should be drawn up both for women and for girls in order to prevent early pregnancy and induced abortion.

- Cameroon, CEDAW, A/55/38 part II (2000) 53 at para. 43.

The Government is commended for its measures aimed at eliminating the practice of genital mutilation, which is a violation of human rights and is injurious to the physical and psychological well-being of girls, and poses a threat to their lives and health.

- Iraq, CEDAW, A/55/38 part II (2000) 66 at paras. 201 and 204.

### *Paragraph 201*

The fact that sanctions have had a negative impact on woman and children in areas such as health care, nutrition, employment and other basic social services, is recognized. Nevertheless, concern is expressed at the failure of the Government to put in place specific and targeted measures to address these problems.

### *Paragraph 204*

Women and children should be targeted effectively so that they benefit from available resources and such resources should not be diverted to other purposes.

- Romania, CEDAW, A/55/38 part II (2000) 77 at para. 314.

While appreciating recent declines in maternal and child mortality rates, these indicators are still high compared to other countries in the region.

- Maldives, CEDAW, A/56/38 part I (2001) 15 at paras. 142 and 143.

### *Paragraph 142*

The health and nutrition of girls suffer after puberty and maternal mortality and morbidity rates and

## CHILDREN'S RIGHTS - HEALTH

the mortality rate of girls under the age of 5 years remain at unsatisfactory levels. Patriarchal and stereotypical attitudes have a negative impact on women's health and nutrition.

### *Paragraph 143*

The Government should obtain information on the causes of maternal mortality, malnutrition and morbidity and the mortality rate of girls under the age of 5 years, and develop programmes to address those problems.

- Uzbekistan, CEDAW, A/56/38 part I (2001) 18 at paras. 185 and 186.

### *Paragraph 185*

The degree of environmental degradation in the country and its extremely negative impact on the health of the whole population, in particular women and children, is a matter of concern.

### *Paragraph 186*

A sound environmental policy aimed at protecting the health of women and children should be designed and implemented.

### *See also:*

- Kazakhstan, CEDAW, A/56/38 part I (2001) 10 at paras. 105 and 106.
- Finland, CEDAW, A/56/38 part I (2001) 29 at para. 309.

Concern is expressed about the increase in smoking and in the use of drugs among young people, particularly girls. Efforts aimed at combatting the use and supply of drugs and smoking should be intensified.

- Guinea, CEDAW, A/56/38 part II (2001) 55 at paras. 130 and 131.

### *Paragraph 130*

Alarm is expressed at the increasing rate of HIV/AIDS and the absence of measures for the care of women and girls infected and affected by HIV/AIDS.

### *Paragraph 131*

Holistic measures should be taken to combat the HIV/AIDS pandemic and further practical preventive measures should be taken by providing access to condoms for women and men. The Government is also urged to ensure that women and girls infected by HIV/AIDS are not discriminated

## CHILDREN'S RIGHTS - HEALTH

against and are given appropriate assistance. It is emphasized that the collection of reliable data on HIV/AIDS is critical to gaining an understanding of the pandemic.

- Guyana, CEDAW, A/56/38 part II (2001) 60 at paras. 178 and 179.

### *Paragraph 178*

The increasing number of HIV/AIDS cases in Guyana, especially among young people, is noted with concern.

### *Paragraph 179*

A multifaceted and holistic approach to combating HIV/AIDS should be taken, including broad-based educational strategies and practical prevention efforts, targeted at women and adolescents.

- Nicaragua, CEDAW, A/56/38 part II (2001) 72 at paras. 298 and 300.

### *Paragraph 298*

The custom of sexual abuse of young girls by older men, particularly in rural areas, is of concern. This violates the rights of girls to reproductive health, as well as other rights under the Convention.

### *Paragraph 300*

The high infant and maternal mortality rates in Nicaragua are of concern.

## CRC

- Bolivia, CRC, CRC/C/16 (1993) 13 at paras. 36 and 37.

### *Paragraph 36*

Vulnerable groups of children, including girl children, indigenous children and children living in poverty, are particularly disadvantaged in their access to adequate health and educational facilities and are the primary victims of such abuses as sale and trafficking, child labour and sexual and other forms of exploitation.

### *Paragraph 37*

Concern is expressed over the fact that only 47 per cent of births are supervised by qualified health care workers, and the implication that this may have for increased likelihood of sickness and disability arising from preventable problems occurring during delivery is alarming. More budgetary support is needed to correct this situation, as well as sufficient support to programmes benefiting the mental and physical development of children.

## CHILDREN'S RIGHTS - HEALTH

- Russian Federation, CRC, CRC/C/16 (1993) 21 at paras. 80, 83 and 88.

### *Paragraph 80*

The problems encountered in the immunization programme, the level of antenatal care, family planning programmes and the training of local community health workers are of concern. The frequent recourse to abortion as what appears to be a method of family planning is also of concern.

### *Paragraph 83*

The increasing crime rate among children and the vulnerability of children to sexual abuse, drug abuse and alcoholism are matters of concern.

### *Paragraph 88*

The primary health care system should be improved regarding the effectiveness of, *inter alia*, antenatal care, health education, including sex education, family planning and immunization programmes. Regarding the problems relating specifically to the immunization programme, the Government should look to international cooperation for support in the procurement and manufacturing of vaccines.

- Egypt, CRC, CRC/C/16 (1993) 24 at para. 103.

The need for measures to improve the health of children, in particular those in the school-age group, is of concern.

- Peru, CRC, CRC/C/20 (1993) 16 at para. 64.

Concern is expressed that stringent budgetary measures amounting to decreases in the resources allocated for social expenditures have entailed high social costs and have adversely affected the rights of the child in Peru. Vulnerable groups of children, including children living in areas affected by internal violence, displaced children, orphans, disabled children, children living in poverty and children living in institutions, are particularly disadvantaged in their access to adequate health and educational facilities and are the primary victims of various forms of exploitation, such as child prostitution. Furthermore, the long-term considerations embodied in the structural adjustment policies have not adequately taken into account the specific needs of the children and, accordingly, dramatic cuts have been made in many social expenditures in recent years, to the detriment of children.

- Sudan, CRC, CRC/C/20 (1993) 22 at para. 117.

## CHILDREN'S RIGHTS - HEALTH

Attention should be given to extending the provision of primary health care and primary education in order to improve the general health and nutritional and educational status of children. In addition, future development plans should accord priority to the situation of disabled children.

- Colombia (preliminary), CRC, CRC/C/24 (1994) 18 at para. 74.

Many children in Colombia, including a large proportion of rural and indigenous children, have been economically and socially marginalized and have limited or no access to adequate education or health care services.

- Belarus, CRC, CRC/C/24 (1994) 24 at para. 119.

A stronger emphasis should be placed on primary health care activities, which would include the development of educational programmes to cover such matters as family education, family planning, sex education and the benefits of breast-feeding. Equally, community health care workers should be trained to develop awareness of these subjects among the general public, including children. In addition, programmes of rehabilitation and reintegration for emotionally disturbed or traumatized children should be developed.

- Pakistan, CRC, CRC/C/29 (1994) 10 at para. 43.

It is noted with concern that national health plans appear to emphasize the training of doctors rather than nurses and other health personnel, including paramedics. Attention is drawn to the apparent lack of a clear division of responsibilities between the provincial and federal levels for the development of a strong primary health-care system.

- Burkina Faso, CRC, CRC/C/29 (1994) 15 at paras. 66 and 70.

### *Paragraph 66*

The negative effects of poverty and structural adjustments on the situation of children, as illustrated by the high rate of infant mortality, malnutrition, as well as the low level of health services and school attendance, are of concern.

### *Paragraph 70*

Vaccination programmes are not adequate, both in terms of the range of vaccines offered and the groups covered, and do not correspond to real needs, especially in rural areas.

## CHILDREN'S RIGHTS - HEALTH

- Chile, CRC, CRC/C/29 (1994) 25 at para. 147.

The fact that the decentralization process might lead to a deterioration in the quality of and effective access to health services and education, in particular for the most vulnerable groups of children, is of concern.

- Norway, CRC, CRC/C/29 (1994) 27 at paras. 165 and 177.

### *Paragraph 165*

The Committee notes that all children who have had their asylum requests rejected but remain in the country have had their rights to health care and education provided *de facto* but not *de jure*. Such services should be provided as a matter of principle according to the letter and spirit of articles 2 and 3 of the Convention.

### *Paragraph 177*

The State party should consider undertaking another comprehensive review of the policy in relation to children seeking asylum in the light of the principles and provisions of the Convention. The State party might also wish to further discuss the provision of education and health services, including with respect to all children under its jurisdiction, in order to ensure that different standards of service do not arise between municipalities.

- Honduras, CRC, CRC/C/34 (1994) 11 at paras. 39, 42 and 55.

### *Paragraph 39*

Worry is expressed over the persisting difficulties in providing the necessary registration certificates and that the absence of such basic documentation detailing the child's age and family affiliations may hamper the implementation of a child's other rights, including his/her access to public health services and to the necessary protection that a child should be accorded under the system of the administration of juvenile justice.

### *Paragraph 42*

The lack of provision of and access to health services and facilities, clean water and sanitation are extremely serious problems in rural areas. The prevalence of the malnutrition of children from the poorer and more disadvantaged sectors of the population, especially as regards the adverse effects of the insufficiency of nutritious food on the child's right to survival and a healthy development, is also of concern.

### *Paragraph 55*

## CHILDREN'S RIGHTS - HEALTH

Measures should be taken urgently to extend and strengthen the primary health care system and to improve the quality of health care, including through incentives to attract higher numbers of volunteers into the system at the community level and through the provision of essential medicines and medical equipment at the various levels of health care in the country.

- Jamaica, CRC, CRC/C/38 (1995) 25 at para. 165.

Further efforts should be made to extend and strengthen the primary health care system. Health education should also be developed so as to ensure a better understanding by the population of the benefits of preventive health care and the detrimental effects on children of the persistence of traditional practices prejudicial to their health.

- United Kingdom of Great Britain and Northern Ireland, CRC, CRC/C/38 (1995) 35 at para. 213.

The principle of the best interests of the child appears not to be reflected in legislation in such areas as health, education and social security, which has a bearing on respect for the rights of the child.

- Belgium, CRC, CRC/C/43 (1995) 20 at para. 104.

The application of the law and policy concerning children seeking asylum, including unaccompanied children, is of concern. Of particular concern is that unaccompanied minors who have had their asylum request rejected, but who can remain in the country until they are 18 years old, may be deprived of an identity and denied the full enjoyment of their rights, including health care and education.

- Ukraine, CRC, CRC/C/46 (1995) 11 at paras. 58 and 69.

### *Paragraph 58*

The health status of children, particularly in the aftermath of the Chernobyl nuclear disaster, the increasing child mortality rate, the apparent priority given to curative rather than preventive health care, the low prevalence of breast-feeding, the high number of abortions and insufficient health, education and services on family planning, and the discrepancy between the urban and rural health systems are matters of concern.

### *Paragraph 69*

## CHILDREN'S RIGHTS - HEALTH

A stronger emphasis should be placed on primary health care activities, especially in rural areas, which would include the development of educational programmes to cover such matters as family education, family planning, sex education and the benefits of breast-feeding.

*See also:*

- Belarus, CRC, CRC/C/24 (1994) 24 at para. 114.
  
- Yugoslavia (Serbia and Montenegro), CRC, CRC/C/50 (1996) 17 at paras. 84, 86, 87, 96 and 116.

*Paragraph 84*

The consequences of the war on the territory of the former Yugoslavia, combined with the realities of sanctions seem to have led to a worsening of the indicators of the health and education situation of the children of the Federal Republic, including lower immunization coverage, more nutrition-related disorders and illnesses, and an increase in the number of children suffering from mild and serious mental disorders. The sanctions against the Federal Republic may have led to the isolation of professionals dealing with the rights of the child.

*Paragraph 86*

Concern is raised about the implementation of article 2 of the Convention relating to non-discrimination. The situation of Albanian-speaking children in Kosovo is a matter of grave concern, especially with regard to their health and education, as well as the degree to which this population is protected from abuse by the police.

*Paragraph 87*

Attention is drawn to the serious problems threatening the health-care system which have involved large-scale dismissals of health personnel, thereby adversely affecting the health and social protection of Albanian-speaking children in Kosovo.

*Paragraph 96*

Concern is expressed at information which indicates that disparities exist between regions and between rural and urban areas with regard to the provision of health care to children. The increase in the number of children, including refugee children, with mild and serious mental disorders is noted with concern. The situation of disabled children generally is an issue of concern.

*Paragraph 116*

The State party should consider as a matter of priority the further development of rehabilitative programmes. In this regard, the problem of the apparent scarcity and inadequacy of programmes for the treatment of post-traumatic stress disorders, identified primarily in refugee children, needs to be

## CHILDREN'S RIGHTS - HEALTH

adequately addressed.

- Finland, CRC, CRC/C/50 (1996) 35 at paras. 225 and 236.

### *Paragraph 225*

The State party's current shortage of facilities for the psychiatric treatment of children is a concern. This shortage may result in the non-separation of children from adults in psychiatric establishments. The high rates of suicide and the increasing rates of drug abuse among youth are also of concern.

### *Paragraph 236*

The State party should take all appropriate measures to prevent mentally-ill children from being institutionalized in the same facilities as adults. Additional research should also be undertaken in the areas of suicide and drug abuse to improve the understanding of those phenomena and generate appropriate measures to deal efficiently with them.

- Lebanon, CRC, CRC/C/54 (1996) 7 at para. 58.

The ban of the commercial marketing of infant formula should be implemented and breast-feeding should be promoted among mothers in health facilities. It is further suggested that a health insurance card be issued for children whose parents are not entitled to social security benefits.

- China, CRC, CRC/C/54 (1996) 18 at paras. 120 and 122.

### *Paragraph 120*

Serious concerns remain as to the effectiveness of measures taken to ensure the registration of all children, through the household registry. Deficiencies in the registration system deprive children of basic safeguards for the promotion and protection of their rights, including in the areas of child trafficking, abduction, sale and maltreatment, abuse or neglect. In this connection, the situation of "unregistered girls" as regards their entitlement to health care and education is a matter of concern.

### *Paragraph 122*

The situation of children provided with care in welfare institutions is an extreme concern. The very high mortality rate in such institutions is a cause for serious alarm. While the separation of children from adults in institutions and the training of staff is appreciated, deep concern remains about the inadequate measures adopted to ensure qualitative care to children as required by article 3, paragraph 3 of the Convention.

## CHILDREN'S RIGHTS - HEALTH

- Nepal, CRC, CRC/C/54 (1996) 25 at paras. 166, 168 and 172.

### *Paragraph 166*

The difficulties encountered by children living in rural and remote areas and disabled children in securing basic services, such as health care, social services and education, is of concern.

### *Paragraph 168*

Appropriate measures have not yet been taken to effectively prevent and combat any form of ill-treatment and corporal punishment of children within the family. The absence of adequate legislation and mechanisms designed to ensure the recovery and reintegration of child victims in light of article 39 of the Convention are also a concern.

### *Paragraph 172*

The increasing phenomenon of child prostitution, that particularly affects children belonging to the lower castes, is a concern. The absence of measures to combat this phenomenon and the lack of rehabilitation measures are also a worry. The inadequate measures taken to address the situation of children addicted to drugs is also a concern.

- Guatemala, CRC, CRC/C/54 (1996) 31 at paras. 207 and 212.

### *Paragraph 207*

Concern is expressed about widespread and severe malnutrition.

### *Paragraph 212*

The relatively high maternal, infant and under-five mortality rates are concerns. Some factors contributing to high maternal deaths may be related to the inadequacies of the training given to birth attendants and of home deliveries. Many problems remain with respect to the reproductive health of women, the low birth weight of children being a possible manifestation of this fact.

- Nigeria, CRC, CRC/C/57 (1996) 12 at paras. 69, 90 and 94.

### *Paragraph 69*

The effectiveness of measures undertaken to avoid regional variations in the provision of health-care services and medical supplies remains a cause for concern. The problems encountered in providing access to safe water are also of concern.

### *Paragraph 90*

Major efforts are required immediately to ensure the equal distribution of health services and medical supplies between and within regions.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 94*

All children should have access to health care, education should be made compulsory as a measure to prevent the economic exploitation of children and further measures should be undertaken to combat exploitation, such as that of child domestic workers, including legislative measures to ensure the effective protection of the child against the performance of any work that is likely to be hazardous or to interfere with the child's education or to be harmful to the child's health or full and harmonious development.

- United Kingdom of Great Britain and Northern Ireland (Hong Kong), CRC, CRC/C/57 (1996) 23 at paras. 139 and 155.

### *Paragraph 139*

Adolescent mental health issues, including the problem of youth suicide, are matters of serious concern.

### *Paragraph 155*

A review should be undertaken of the possible links between school pressures and adolescent health problems. It is also suggested that the reasons for suicide among youth and the effectiveness of programmes for the prevention of suicide among children deserve further study.

- Bulgaria, CRC, CRC/C/62 (1997) 7 at para. 40.

The insufficient measures taken to tackle the issues of child malnutrition, disability, mental health and early pregnancies, as well as cases of early marriage, are of concern. The problem of youth suicide is also of concern.

- Panama, CRC, CRC/C/62 (1997) 19 at para. 116.

The insufficient legal protection and the lack of adequate procedures for refugee children, especially unaccompanied minors, is of concern. The difficulties encountered by those children in securing access to education, health and social services are also of concern.

- Myanmar, CRC, CRC/C/62 (1997) 25 at para. 152.

The high rates of infant mortality and malnutrition, as well as the low level of health services, which are partly due to poverty, deep disparities between urban and rural communities and the impact of the internal conflict are of concern. The insufficient measures taken to offer appropriate and

## CHILDREN'S RIGHTS - HEALTH

accessible social, rehabilitation and educational services to disabled children are also worrisome.

- Ghana, CRC, CRC/C/66 (1997) 15 at paras. 94, 99 and 114.

### *Paragraph 94*

The persistence of malnutrition and the apparent difficulty in reversing this negative trend are matters of concern. The rapid spread of HIV/AIDS throughout the country and its devastating impact on children are also worrisome.

### *Paragraph 99*

The recent emergence of substance abuse among children and the limited prevention and rehabilitation measures and facilities to combat this phenomenon are of concern.

### *Paragraph 114*

All appropriate measures, including through international cooperation, should be taken to prevent and combat malnutrition.

### *See also:*

- Togo, CRC, CRC/C/69 (1997) 39 at para. 267.

- Bangladesh, CRC, CRC/C/66 (1997) 22 at paras. 143 and 165.

### *Paragraph 143*

The high maternal mortality rates, lack of access to prenatal care and, more generally, limited access to public health-care facilities, are matters of concern. The absence of programmes addressing the mental health of children and their families is also of concern.

### *Paragraph 165*

Efforts are required for the treatment of children with disabilities and their prevention, and to raise awareness about the need to facilitate the active participation of such children in the community. Efforts should be pursued to ensure the implementation of integrated mental health programmes and approaches and to make available the necessary resources and assistance for these activities.

- Paraguay, CRC, CRC/C/66 (1997) 29 at paras. 193 and 194.

### *Paragraph 193*

The high rates of infant and child mortality, malnutrition and infectious diseases, as well as the

## CHILDREN'S RIGHTS - HEALTH

unresolved difficulties in providing country-wide maternal and child health services, are of concern.

### *Paragraph 194*

The absence of large-scale public campaigns for the prevention of unwanted pregnancies, STDs and HIV/AIDS, especially for children and adolescents, is of concern. The lack of sufficient reproductive health information and services for adolescents is also of concern.

- Algeria, CRC, CRC/C/66 (1997) 35 at para. 257.

Further steps should be taken to ensure that nomadic children have access to education and health-care services through a system of specifically targeted education and health-care schemes which will allow these children to enjoy their right, in community with other members of their group, to their own culture.

- Azerbaijan, CRC, CRC/C/66 (1997) 41 at paras. 286 and 307.

### *Paragraph 286*

The general health situation of children, in particular with regard to the rise in the infant, child and maternal mortality rates, the decline of breastfeeding, the increase in the number of unwanted pregnancies, nutrition and iodine deficiencies, substance abuse, and the negative impact of environmental pollution, is of grave concern.

### *Paragraph 307*

A comprehensive national policy to promote and advance the health of children and mothers should be adopted. Particular attention should be given to the impact of environmental pollution and a study should be undertaken on this subject. International cooperation in this field should be a priority.

- Lao People's Democratic Republic, CRC, CRC/C/69 (1997) 8 at paras. 50 and 74.

### *Paragraph 50*

Concern is expressed over the high maternal mortality rate, the high mortality and morbidity rates among children, the lack of access to prenatal and maternity care, and the generally limited access to public health care and to medicines, in particular in rural areas, and the very high level of malnutrition. The high incidence of traffic accidents involving children and the inadequacy of the efforts to raise awareness about HIV/AIDS in communities and at school, in particular in rural areas, are also of concern.

### *Paragraph 74*

## CHILDREN'S RIGHTS - HEALTH

Further technical assistance should be considered to continue to strengthen efforts to make primary health care accessible to all children, in particular at the district level. Concerted efforts are needed to combat malnutrition. Adolescent health should be promoted by strengthening reproductive health education and services to prevent and combat HIV/AIDS. All appropriate measures should be taken to prevent traffic accidents, such as teaching traffic rules at school.

- Australia, CRC, CRC/C/69 (1997) 16 at paras. 95 and 114.

### *Paragraph 95*

The special problems still faced by Aboriginals and Torres Strait Islanders, as well as by children of non-English-speaking backgrounds, with regard to their enjoyment of the same standards of living and levels of services, particularly in education and health, are of concern.

### *Paragraph 114*

Further steps should be taken to raise the standards of health and education of disadvantaged groups, particularly Aboriginals, Torres Strait Islanders, new immigrants, and children living in rural and remote areas.

- Uganda, CRC, CRC/C/69 (1997) 21 at paras. 131, 134 and 149.

### *Paragraph 131*

The persistence of discriminatory attitudes against some groups of children, especially girls, children with disabilities and children living in rural areas, which often results in limiting their access to basic social facilities such as health and education, is of concern.

### *Paragraph 134*

The high infant and child mortality rates due to the poor water supply, hygiene and sanitation practices and endemic malnutrition are of concern. The rapid spread of HIV/AIDS throughout the country and its devastating impact on children who are infected and affected are also of concern.

### *Paragraph 149*

All appropriate measures, including through international cooperation, should be taken to prevent and combat infant and child mortality and malnutrition. Further, information and prevention programmes should be strengthened to combat HIV/AIDS, particularly to prevent the transmission to children of HIV/AIDS and other sexually transmitted diseases (STDs) and to eliminate discriminatory attitudes towards children affected by or infected with HIV/AIDS. Family planning and reproductive health educational programmes, including for adolescents, should be pursued and strengthened.

## CHILDREN'S RIGHTS - HEALTH

- Czech Republic, CRC, CRC/C/69 (1997) 28 at paras. 176, 177, 181, 191 and 195.

### *Paragraph 176*

The increasing problems of environmental degradation, which have a harmful impact on the health of children, are worrisome.

### *Paragraph 177*

The insufficient measures taken to ensure effective access of children with disabilities to health, education and social services, and to facilitate their full inclusion in society, are of concern. The small number of well-trained professionals dealing with disabled children is also of concern.

### *Paragraph 181*

The rising incidence of gambling addiction, alcohol consumption and drug abuse among children and the insufficient preventive measures taken to tackle these issues are of concern.

### *Paragraph 191*

Reproductive health measures designed to reduce the incidence of pregnancies among teenage girls should be adopted, and information and prevention programmes to combat HIV/AIDS and other sexually transmitted diseases (STDs) should be strengthened. Adequate measures, including awareness-raising campaigns and the provision of support services to needy families, should be taken in order to prevent the abandonment of children and to protect poor single mothers from child traffickers.

### *Paragraph 195*

Comprehensive research should be undertaken on the possible effects of environmental pollution on the health of children.

### *See also:*

- Germany, CRC, CRC/C/46 (1995) 15 at para. 110.
- Democratic People's Republic of Korea, CRC, CRC/C/79 (1998) 13 at para. 79.
- Fiji, CRC, CRC/C/79 (1998) 18 at para. 142.

- Togo, CRC, CRC/C/69 (1997) 39 at paras. 262 and 291.

### *Paragraph 262*

The difficult health situation faced by a majority of children, *inter alia*, a high under-five child mortality rate, weak nutritional status, high incidence of malaria and iodine deficiency, and limited access to clean water and safe sanitation, is of concern. The spread of HIV/AIDS throughout the population of the country bears a direct impact on the lives of children. The incidence of early

## CHILDREN'S RIGHTS - HEALTH

pregnancies is also worrisome.

### *Paragraph 291*

All appropriate measures should be taken to prevent and combat drug and substance abuse among children, such as public information campaigns, including in schools and in other institutions. All rehabilitation programmes dealing with child victims of drug and substance abuse should be supported. In this regard, technical assistance from relevant international organizations, such as the World Health Organization (WHO), should be considered.

### *See also:*

- Lao People's Democratic Republic, CRC, CRC/C/69 (1997) 8 at para. 79.
- Ghana, CRC, CRC/C/66 (1997) 15 at para. 120.
  
- Ireland, CRC, CRC/C/73 (1998) 14 at paras. 82 and 100.

### *Paragraph 82*

The lack of a national policy to ensure the rights of children with disabilities and the lack of adequate programmes and services addressing the mental health of children and their families are matters of concern.

### *Paragraph 100*

Programmes should be developed to facilitate the active participation of children with disabilities in the community. Efforts should be further pursued to ensure the implementation of integrated mental health programmes and approaches and to make available the necessary resources and assistance for these activities.

- Micronesia, CRC, CRC/C/73 (1998) 20 at paras. 122 and 140.

### *Paragraph 122*

The prevalence of malnutrition and vitamin A deficiency in the State party, as well as the limited access to safe water and adequate sanitation, are of concern. The problems of adolescent health, in particular the high and increasing rate of early pregnancies, the lack of access by teenagers to reproductive health education and services, the insufficient preventive measures for HIV/AIDS, as well as the insufficient sexual education at school, are also of concern. The high rate of suicides among teenagers and the insufficiency of financial and human resources for its prevention are matters of particular concern. The insufficient legal framework, as well as the insufficient social and medical programmes or services to tackle these issues are also of concern.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 140*

Efforts to combat malnutrition and vitamin A deficiency should be continued. Adolescent health policies should be promoted by strengthening reproductive health education and services. A comprehensive and multidisciplinary study should be undertaken to understand the scope of the phenomenon of adolescent health problems, such as early pregnancies and suicide. Further efforts, both financial and human, such as the development of counselling services for both the adolescents and their families, should be undertaken for the prevention and care of adolescents' health problems and for the rehabilitation of victims.

- Hungary, CRC, CRC/C/79 (1998) 7 at para. 46.

The high rate of suicide, the insufficient measures taken to address adolescent health issues such as reproductive health and the incidence of early pregnancies, and the increase in drug abuse and alcohol consumption among children, are matters of concern.

- Democratic People's Republic of Korea, CRC, CRC/C/79 (1998) 13 at paras. 80, 81 and 96.

### *Paragraph 80*

The *de facto* discriminatory attitudes that may occur against children with disabilities and the insufficient measures taken to ensure that these children have effective access to health, education and social services, and to facilitate their full inclusion in society are of concern. The small number of well-trained professionals dealing with children with disabilities is also of concern.

### *Paragraph 81*

The insufficient measures taken to understand and address adolescent health issues, such as teenage suicides, reproductive health and early pregnancies are of concern.

### *Paragraph 96*

A comprehensive study on the issues of reproductive health, youth suicides and early pregnancies should be undertaken so as to identify the scope of the problems and to devote adequate resources to preventing and combatting these phenomena.

- Fiji, CRC, CRC/C/79 (1998) 18 at paras. 118, 119, 123 and 138.

### *Paragraph 118*

The prevalence of malnutrition and high rates of maternal mortality, as well as the limited access to health services on remote islands are of concern.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 119*

The high and increasing rate of early pregnancies, the incidence of sexually transmitted diseases among youth, the occurrence of teenage suicide, the insufficient access by teenagers to reproductive health education and counselling services, including outside schools, and the insufficient preventive measures on HIV/AIDS, are matters of particular concern.

### *Paragraph 123*

The insufficient measures taken to address issues of drug and alcohol abuse which are increasingly affecting children are of concern.

### *Paragraph 138*

Adolescent health policies and reproductive health education and counselling services should be strengthened. Furthermore, a comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent health problems, especially early pregnancies. Further efforts, both financial and human, should be undertaken to develop child-friendly care and rehabilitation facilities for adolescents and their families.

### *See also:*

- Japan, CRC, CRC/C/79 (1998) 25 at paras. 167 and 172.
- Japan, CRC, CRC/C/79 (1998) 25 at para. 188.

All necessary measures should be taken to prevent suicides and incidents of HIV/AIDS among adolescents, including the collection and analysis of information, the launching of awareness-raising campaigns, reproductive health education and the establishment of counselling services.

- Maldives, CRC, CRC/C/79 (1998) 31 at paras. 214, 215, 217 and 239.

### *Paragraph 214*

The prevalence of malnutrition (stunting and iron deficiency) and the high maternal mortality rate, as well as the limited access to safe water and adequate sanitation are of concern. The problems of adolescent health, in particular the high and increasing rate of early pregnancies, the lack of access by teenagers to reproductive-health education and services, and the insufficient preventive measures taken against HIV/AIDS and the need to promote breastfeeding of children, especially in health facilities, are also matters of concern.

### *Paragraph 215*

Insufficient measures have been taken to ensure effective access of children with disabilities to health,

## CHILDREN'S RIGHTS - HEALTH

education and social services, and to facilitate their full inclusion in society. The small number of well-trained professionals working with and for children with disabilities is also of concern.

### *Paragraph 217*

Insufficient measures have been undertaken to address issues of drug abuse which are increasingly affecting children.

### *Paragraph 239*

Efforts should be strengthened to prevent and combat drug and substance abuse among children, and all appropriate measures should be taken, including public information campaigns in and outside the schools. Rehabilitation programmes for child victims of drug and substance abuse should be supported. In this regard, technical assistance should be considered from UNICEF and the World Health Organization.

- Luxembourg, CRC, CRC/C/79 (1998) 38 at paras. 260 and 278.

### *Paragraph 260*

The rate of suicides among young people and the occurrence of suicide among young people when in detention are of concern. The increase of drug and alcohol abuse among youth is also of concern.

### *Paragraph 278*

Studies on the causes of suicide and other mental health problems among young people should be undertaken and measures to combat this phenomenon should be adopted. Youth-friendly preventive, curative and rehabilitative measures should be taken to address the increasing problem of drug and substance abuse among young adolescents.

- Ecuador, CRC, CRC/C/80 (1998) 9 at paras. 45, 46 and 48.

### *Paragraph 45*

The prevalence of malnutrition, high rates of maternal mortality and the limited access to health services in remote rural areas are matters of concern. The appropriate resources should be allocated and technical assistance should be considered, when needed, to reinforce efforts to make basic health-care accessible to all children. Concerted efforts are required to combat malnutrition and ensure the adoption and implementation of a national nutritional policy for children. International cooperation for the establishment of programmes such as the WHO/UNICEF "Integrated Management of Childhood Illness" is recommended. In addition, breastfeeding should be promoted in all health facilities and among the public at large.

### *Paragraph 46*

## CHILDREN'S RIGHTS - HEALTH

The high and increasing rate of teenage pregnancy, the incidence of suicides by girls and insufficient access by teenagers to reproductive health education and counselling services, including outside of schools, and the increasing rate of substance abuse are of concern. A comprehensive multidisciplinary study should be undertaken on adolescent health problems as a basis for promoting adolescent health policies and strengthening reproductive health education and counselling services. Further efforts should be undertaken to develop child-friendly counselling services, as well as care and rehabilitation facilities for adolescents. Measures to prevent and combat substance abuse among adolescents should be strengthened.

### *Paragraph 48*

Comprehensive measures should be taken to establish poverty alleviation programmes with special emphasis on access to health-care and education of children, in particular the most vulnerable groups of children.

- Iraq, CRC, CRC/C/80 (1998) 15 at para. 79.

The deteriorating health situation of children, particularly the high and increasing infant and child mortality rates and serious long-term malnutrition, aggravated by poor breastfeeding practices and common childhood diseases, is of grave concern. Comprehensive policies and programmes should be developed to promote and improve breastfeeding practices, to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children. Technical assistance should be considered for the integrated management of childhood illnesses and other measures for child health improvement from UNICEF and WHO.

- Bolivia, CRC, CRC/C/80 (1998) 22 at para. 111.

The persistence of a high infant mortality rate, the limited access of children to basic health services, the persistence of common childhood disease (such as gastro-intestinal and respiratory illnesses), the increased malnutrition in children under 5 years of age, and the growing adolescent health-related problems (such as teenage pregnancy, smoking and alcohol consumption) are all matters of concern. All appropriate measures, including seeking international cooperation, should be taken to ensure access to basic health-care and services for all children and that adolescent health policy and programmes are developed, including prevention, care and rehabilitation measures. More concerted efforts need to be taken to combat malnutrition and to ensure the adoption and implementation of a national nutritional policy for children.

- Kuwait, CRC, CRC/C/80 (1998) 28 at para. 145.

## CHILDREN'S RIGHTS - HEALTH

The high mortality rate among male adolescents, due to external causes and accidents, is of concern. A comprehensive and multi-disciplinary study should be undertaken on adolescent health problems, with data disaggregated by age and gender, to serve as the basis for developing and promoting adolescent health policies. Further efforts should be undertaken to develop youth-friendly care, counselling and rehabilitation facilities for adolescents.

- Thailand, CRC, CRC/C/80 (1998) 35 at paras. 175, 176 and 179.

### *Paragraph 175*

The persistence of poor breastfeeding practices and the high rate of malnutrition are of concern. Comprehensive policies and programmes should be developed to promote and improve breastfeeding practices, to prevent and combat malnutrition, especially among vulnerable and disadvantaged groups of children, and technical assistance should be considered for the integrated management of childhood illnesses and other measures for child health improvement from UNICEF and WHO.

### *Paragraph 176*

Efforts should be increased to promote adolescent health policies and strengthen reproductive health education and counselling services. A comprehensive and multidisciplinary study should be undertaken on adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and sexually transmitted diseases. Additionally, further measures, including the allocation of adequate human and financial resources, should be taken to develop youth friendly care and rehabilitation facilities for adolescents.

### *Paragraph 179*

The legislative framework should be clarified to ensure adequate protection of unaccompanied and asylum seeking children, including in the fields of physical safety, health and education.

- Austria, CRC, CRC/C/84 (1999) 7 at para. 43.

An appropriate age and structures for medical counselling and treatment without parental consent should be set by law.

- Belize, CRC, CRC/C/84 (1999) 12 at paras. 73, 83 and 84.

### *Paragraph 73*

The practice of not allowing children to pursue medical or legal counselling without parental consent, even when it is in the best interests of the child, is of concern.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 83*

Comprehensive policies and programmes should be developed to reduce the incidence of child and infant mortality, to promote and improve breastfeeding practices, and to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children. Technical assistance for the Integrated Management of Childhood Illnesses and other measures for child health improvement from UNICEF and WHO should be considered.

### *Paragraph 84*

The limited availability of programmes and services and the lack of adequate data in the area of adolescent health, including accidents, suicide, violence and abortion are of concern. The high and increasing incidence of teenage pregnancy, HIV/AIDS and sexually transmitted diseases (STDs) is also of concern. It is recommended that efforts in promoting adolescent health policies and in strengthening reproductive health education and counselling services be increased. A comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to AIDS. Further measures, including the allocation of adequate human and financial resources, should be undertaken to develop youth-friendly care and rehabilitation facilities for adolescents.

- Guinea, CRC, CRC/C/84 (1999) 21 at paras. 114 and 123.

### *Paragraph 114*

The prevalence of malnutrition as well as the limited access to health services, especially in rural areas, and the persistence of health problems related to insufficient access to safe water and sanitation are matters of concern. Appropriate resources should be allocated and, when needed, technical assistance should be considered to reinforce efforts to make basic health care accessible to all children. Concerted efforts are needed to combat malnutrition and ensure the adoption and implementation of a national nutritional policy on children. International cooperation for the establishment of programmes such as the WHO/UNICEF programme Integrated Management of Childhood Illness is recommended.

### *Paragraph 123*

The high and increasing incidence of drug and substance abuse among youth; the lack of legal provisions in relation to narcotic drugs and psychotropic substances; and the limited social and medical programmes and services available in this regard are of concern. The support of rehabilitation programmes dealing with child victims of drug and substance abuse is encouraged. In this regard, technical assistance from UNICEF and WHO should be considered.

- Sweden, CRC, CRC/C/84 (1999) 29 at para. 148.

## CHILDREN'S RIGHTS - HEALTH

The rising incidence of substance abuse among adolescents is of concern. Systematic efforts should be undertaken to collect data on and monitor substance abuse, in particular on its impact among the more vulnerable groups.

- Yemen, CRC, CRC/C/84 (1999) 33 at para. 175.

The high and increasing rate of teenage pregnancies and the insufficient access to reproductive health education and counselling services for teenagers, including outside schools, are of concern. The lack of preventive measures, including information campaigns, regarding STDs and HIV/AIDS is also a concern. Adolescent health policies should be promoted and reproductive health education and counselling services should be strengthened. Awareness-raising campaigns should be undertaken to prevent and combat the spread of STDs and HIV/AIDS and to establish health facilities and programmes for the care of children infected or affected by HIV/AIDS.

- Barbados, CRC, CRC/C/87 (1999) 9 at para. 55.

The high levels of adolescent pregnancy and abortion, the rising incidence of HIV and AIDS and the effect this has on children infected or affected (in particular those orphaned) by the epidemic are matters of concern. Careful attention should be given to the recommendations formulated by the Committee during its day of general discussion on "The rights of children living in a world with HIV/AIDS." Efforts should be increased to provide appropriate adolescent health services. The possibility of actively involving adolescents in the formulation of policies and treatment programmes in accordance with their evolving capacity, and making it possible for adolescents to have access to medical advice and treatment without parental consent in accordance with their age and maturity should be considered.

- Saint Kitts and Nevis, CRC, CRC/C/87 (1999) 17 at paras. 87 and 91.

### *Paragraph 87*

Efforts should be increased in promoting adolescent health policies and counselling services as well as strengthening reproductive health education, including the promotion of male acceptance of the use of contraceptives. A comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Additionally, further measures, including the allocation of adequate human and financial resources, should be undertaken to develop youth-friendly care, counselling, and rehabilitation facilities for adolescents. The development of comprehensive policies and programmes to reduce the incidence of infant mortality and promote proper breastfeeding and weaning practices among teenage mothers is encouraged.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 91*

All appropriate measures should be taken, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances. The support of rehabilitation programmes dealing with child victims of drug and substance abuse is encouraged. In this regard, technical assistance should be sought from UNICEF, WHO and the United Nations Division for Crime Prevention.

- Honduras, CRC, CRC/C/87 (1999) 26 at para. 121.

The persistently high rates of malnutrition in children under 5 years of age and in school-age children and limited access to health-care services in rural and remote areas remain of concern. All appropriate measures, including through international cooperation, should be taken to ensure access to basic health care and services for all children. More concerted efforts need to be taken to combat malnutrition and ensure the adoption and implementation of a national nutritional policy and action plan for children.

- Benin, CRC, CRC/C/87 (1999) 35 at paras. 146, 147, 155, 156 and 162.

### *Paragraph 146*

The insufficient measures adopted to ensure that all children are guaranteed access to education and health services and are protected against all forms of exploitation remain of concern. Of particular concern are certain vulnerable groups of children, including children with disabilities, particularly mental disabilities, girls, particularly “*Vidomegons*”, children living in remote rural areas, children living in extreme poverty, children living and/or working on the street, refugee and asylum-seeking children, children in the juvenile justice system, children born out of wedlock, children of incestuous relations, and institutionalized children. Efforts should be increased to ensure implementation of the principle of non-discrimination, particularly as it relates to vulnerable groups.

### *Paragraph 147*

The continuation of the practice of infanticide, particularly in rural communities and on infants with disabilities, is of concern. Measures, including those of a legal nature, should be taken to prevent and discourage infanticide and protect infants and guarantee their right to life, survival and development. In this regard, education and awareness-raising programmes should be introduced to change societal attitudes.

### *Paragraph 155*

The health situation of children and in particular the limited access to basic health care for children, high maternal, child and infant mortality rates, the relatively short period of breastfeeding, poor

## CHILDREN'S RIGHTS - HEALTH

weaning practices, the high rate of malnutrition, poor sanitation and limited access to safe drinking water, especially in rural communities, are matters of concern. Appropriate resources should be allocated and comprehensive policies and programmes developed to improve the health situation of children; facilitate greater access to primary health services; reduce the incidence of maternal, child and infant mortality; improve breastfeeding practices; prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children; and increase access to safe drinking water and sanitation. Technical assistance for the Integrated Management of Childhood Illnesses and other measures for child health improvement from, *inter alia*, UNICEF and the World Health Organization should be considered.

### *Paragraph 156*

The limited availability of programmes and services and the lack of adequate data in the area of adolescent health, including accidents, suicide, violence and abortion, are of concern. Also of concern is the high and increasing incidence of teenage pregnancy and HIV/AIDS and sexually transmitted diseases (STDs). The 1920 law which continues to prohibit the use of contraceptives, including for health purposes, and to impede the full implementation of family planning programmes, including the safe motherhood initiative, is also of concern. It is suggested that a comprehensive and multi-disciplinary study be undertaken to understand the scope of adolescent health problems, including the negative impact of early pregnancy as well as the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Further measures should be undertaken, including the allocation of adequate human and financial resources, to develop youth-friendly counselling, care and rehabilitation facilities for adolescents that would be accessible, without parental consent, where it is in the best interests of the child. The 1920 law concerning family planning and the use of contraceptives should be repealed.

### *Paragraph 162*

The high and increasing incidence of drug and substance abuse among youth; the lack of legal provisions in relation to narcotic drugs and psychotropic substances; and the limited psycho-social and medical programmes and services available are of concern. All appropriate measures, including legislative, administrative, psycho-social and educational, should be taken to protect children from the illicit use of narcotic drugs and psychotropic substances and to prevent the use of children in the illicit production and trafficking of such substances. Furthermore, programmes should be introduced within the school environment to educate children about the harmful effects of narcotic drugs and psychotropic substances. Technical assistance should be sought from UNICEF, WHO and the United Nations International Narcotics Control Board.

### *See also:*

- South Africa, CRC, CRC/C/94 (2000) 81 at para. 451.
- Chad, CRC, CRC/C/87 (1999) 45 at paras. 192-195.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 192*

The prevalence of malnutrition, as well as the limited access to health services are of concern. The persistence of health problems related to insufficient access to safe water and sanitation is also a matter of concern. Efforts should be increased, with continued support from international assistance, to make basic health care, safe water and sanitation accessible to all children. In particular, concerted efforts are needed to combat malnutrition and to ensure the implementation of the recently adopted national plan of action for nutrition.

### *Paragraph 193*

The spread of the HIV/AIDS epidemic and its direct and indirect effects on children are of deep concern. In this regard, international cooperation should be sought from UNICEF, WHO and UNAIDS to set up programmes relating to the incidence and treatment of children infected with or affected by HIV/AIDS.

### *Paragraph 194*

The difficulties encountered in eliminating the practice of female genital mutilation and other harmful traditional practices affecting the health of children remain of concern. The proposed legislation should be adopted and measures strengthened to combat and eradicate the persistent practice of female genital mutilation and other traditional practices harmful to the health of the child. Awareness-raising campaigns and sensitization programmes for traditional and religious leaders and for practitioners of female genital mutilation should continue to be carried out.

### *Paragraph 195*

The high rate of early pregnancy and the lack of access by teenagers to reproductive health education and services, and to emergency care, are of concern. Also of concern is the punitive legislation regarding abortion and the impact it can have on maternal mortality rates for adolescent girls. A comprehensive and multi-disciplinary study should be undertaken to understand the scope of adolescent health problems, including the negative impact of early pregnancy and illegal abortion. Existing legislation should be reviewed to authorize abortions for therapeutic reasons, with a view to preventing illegal abortions and improving protection of the mental and physical health of girls. Assistance should be sought from UNICEF and WHO to promote adolescent health policies and programmes, including by strengthening reproductive health education and counselling services.

- Nicaragua, CRC, CRC/C/87 (1999) 54 at paras. 238 and 239.

### *Paragraph 238*

The persistent regional disparities in access to health care, high rates of malnutrition in children under five years of age and in school-age children and low access to health care services in rural and remote areas remain matters of concern. All appropriate measures should be taken, including through international cooperation, to ensure access to basic health care and services for all children. More

## CHILDREN'S RIGHTS - HEALTH

concerted efforts need to be taken to guarantee equal access to health care, with special emphasis on rural areas, to combat malnutrition and to ensure the adoption and implementation of a national nutritional policy and plan of action for children.

### *Paragraph 239*

The high and increasing rate of teenage pregnancy, the high maternal mortality rate related to abortion and the insufficient access by teenagers to reproductive health education and counselling services, including outside the school system, remain of concern. Also of concern is the increasing rate of children infected by HIV/AIDS. Measures for the prevention of HIV/AIDS should continue to be taken and consideration should be given to the Committee's recommendations adopted on its day of general discussion on "Children Living in a World with HIV/AIDS." A comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent health problems as a basis for promoting adolescent health policies and strengthening reproductive health education. Further efforts should be undertaken for the development of child-friendly counselling services as well as care and rehabilitation facilities for adolescents. International technical assistance should be sought from UNICEF and UNAIDS.

- Venezuela, CRC, CRC/C/90 (1999) 10 at paras. 53 and 54.

### *Paragraph 53*

The negative impact of the declining economic situation on the health of children, in particular the deterioration of infant and under five mortality rates, as well as the prevalence of malnutrition among children, is of concern. All appropriate measures should be taken, including through international cooperation, to ensure access to basic health care and services for all children and initiatives should be undertaken to reduce infant mortality. More concerted efforts need to be taken to combat malnutrition and to ensure the adoption and implementation of a national nutritional policy and action plan for children.

### *Paragraph 54*

The still high teenage maternal mortality and pregnancy rates, the insufficient access by teenagers to reproductive health education and counselling services, including outside school, and the increasing incidence of HIV/AIDS, STDs and drug and substance abuse (e.g., glue-sniffing) among children and adolescents are matters of concern. A comprehensive and multidisciplinary study should be undertaken of the scope of the phenomenon of adolescent health problems, especially with regard to early pregnancy and maternal mortality. Comprehensive adolescent health policies should be adopted and reproductive health education and counselling services should be strengthened. Measures for the prevention of HIV/AIDS should continue to be taken, taking into consideration the Committee's recommendations adopted on its day of general discussion on "Children Living in a World with HIV/AIDS." Further efforts, both financial and human, should be undertaken for the development of child-friendly counselling services, as well as care and rehabilitation facilities for adolescents.

## CHILDREN'S RIGHTS - HEALTH

Measures to combat and prevent substance abuse among children should be strengthened.

- Russian Federation, CRC, CRC/C/90 (1999) 18 at paras. 76, 84, 85, 89, 107-109, 113, 124, 127 and 128.

### *Paragraph 76*

All appropriate measures should be taken to the maximum extent of its available resources to ensure that budgetary allocations for health, education and other social services for children are adequately protected, in particular for children belonging to vulnerable and marginalized groups.

### *Paragraph 84*

The growing disparities between regions, including notably the far north, and between urban and rural children, in legislation, budgetary allocations, policies and programmes regarding health, education and other social services and with the situation of children in need of special protection, remain of concern.

### *Paragraph 85*

The disadvantaged situation of girls in rural areas, particularly with regard to access to education, health and protection from sexual abuse and exploitation is of concern.

### *Paragraph 89*

All appropriate measures should be taken to reverse the rapidly increasing child suicide and killing rate. Preventive efforts should be promoted, including a strengthening of measures already taken to increase crisis intervention and preventive support and counselling services to assist children, especially adolescents, and families at risk.

### *Paragraph 107*

The persistently high infant mortality rate, the deteriorating health infrastructure and service, the increase in parasitic, infectious and respiratory illnesses (tuberculosis in particular), and the increase in malnutrition and the small percentage of children who are breastfed, are issues of great concern.

### *Paragraph 108*

Technical assistance should be sought to continue efforts to reverse the deterioration in primary health care. In particular, it is urged that efforts continue to be taken to cure and prevent the spread of tuberculosis and other diseases, to reduce the use of abortion as a means of contraception, and to promote breastfeeding.

### *Paragraph 109*

The insufficient information on preventive campaigns and rates of HIV/AIDS and sexually transmitted diseases (STDs) is a matter of concern.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 113*

The practice of preventing parents and their children from having access to medical, educational, and other social services in a city for which they do not have a residency permit, is particularly harmful to internally displaced children, migrants and asylum-seekers, and children working and living in the street, and this is of concern.

### *Paragraph 124*

Additional efforts should be taken to prevent the abuse of alcohol by children and their involvement in the distribution and consumption of drugs. Further measures should also be undertaken to provide adequate treatment, rehabilitation and support services to children and their families involved in alcohol, drug and substance abuse.

### *Paragraph 127*

The living conditions of ethnic minorities, especially in the north, and their access to health, educational and other social services and the growing incidence of societal discrimination against children belonging to ethnic minorities are of concern.

### *Paragraph 128*

All the necessary measures should be taken to protect minority children from discrimination and to guarantee their full access to educational, health and other social services.

### *See also:*

- Costa Rica, CRC, CRC/C/94 (2000) 37 at para. 223.
  
- Vanuatu, CRC, CRC/C/90 (1999) 29 at paras. 144, 153 and 155.

### *Paragraph 144*

The National Programme of Action for Children (1993-2000) which focuses on health, population and family planning, nutrition, water supply and environmental sanitation, agriculture, livestock and fisheries and education has not been allocated a specific budget for its implementation, and this is of concern. In this connection, the State should take all appropriate measures to implement the plan and technical assistance should be sought from UNICEF and the World Health Organization (WHO).

### *Paragraph 153*

The survival and development of children continue to be threatened by malaria, acute respiratory infections and diarrhoeal diseases. The insufficient number of trained health workers, the wide discrepancies in the distribution of health professionals between communities, the limited access to health services in some island communities, the poor sanitation and limited access to safe drinking water, particularly in remote areas, are matters of concern. Appropriate resources should be allocated

## CHILDREN'S RIGHTS - HEALTH

and comprehensive policies and programmes should be developed to improve the health situation of children and facilitate greater access to primary health services. Efforts should be continued to reduce the incidence of maternal, child and infant mortality, to improve breastfeeding practices; and to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children. Additional measures should be taken to increase access to safe drinking water and to improve sanitation. Additionally, technical cooperation programmes with UNICEF, WHO and others to improve primary health care should be continued.

### *Paragraph 155*

The limited availability of programmes and services and the lack of adequate data in the area of adolescent health, including accidents, suicide, violence and abortions are of concern. The high and increasing incidence of teenage pregnancy and sexually transmitted diseases (STDs) as well as the prevalence of the use of alcohol and tobacco among youth are also of concern. Efforts should be increased to promote adolescent health policies, particularly with respect to accidents, suicide, violence, alcohol consumption and tobacco use. Furthermore, a comprehensive and multidisciplinary study should be undertaken on adolescent health problems, including the negative impact of early pregnancy and STDs. Measures should be undertaken, including the allocation of adequate human and financial resources, to develop youth-friendly counselling, care and rehabilitation facilities that would be accessible, without parental consent, in the best interests of the child. Reproductive health education programmes for adolescents should be strengthened and the inclusion of men in all training programmes on reproductive health should be ensured.

### *See also:*

- Marshall Islands, CRC, CRC/C/100 (2000) 89 at paras. 533 and 534.
- Mexico, CRC, CRC/C/90 (1999) 34 at paras. 185 and 186.

### *Paragraph 185*

The regional disparities in access to health care, the high rates of malnutrition among children under five years of age and those of school age, especially in rural and remote areas and among children belonging to indigenous groups remain of concern. Effective measures should continue to be taken to ensure access to basic health care and services for all children. More concerted efforts need to be taken to guarantee equal access to health care and to combat malnutrition, with special emphasis on children belonging to indigenous groups and children living in rural and remote areas.

### *Paragraph 186*

The high teenage maternal mortality rate and the high number of teenage pregnancies remain of concern. Efforts to prevent the spread of HIV/AIDS should be taken and child-friendly counselling services and care and rehabilitation facilities for adolescents should be developed.

## CHILDREN'S RIGHTS - HEALTH

- Mali, CRC, CRC/C/90 (1999) 43 at paras. 219-221 and 224.

### *Paragraph 219*

The high incidence of child and infant mortality, as well as maternal mortality, malnutrition, poor sanitation and limited access to safe drinking water, especially in rural communities remain of concern. The appropriate resources should be allocated to develop comprehensive policies and programmes to improve the health situation of children; to facilitate access to primary health services; to reduce the incidence of maternal, child and infant mortality; to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children; and to increase access to safe drinking water and sanitation. Technical assistance should be sought from UNICEF and WHO for the integrated management of childhood illnesses and other measures for child health improvement.

### *Paragraph 220*

The high and increasing incidence of HIV/AIDS and sexually transmitted diseases remains of concern. Efforts should be increased to promote adolescent health policies, particularly with respect to accidents, suicide and violence, and to strengthen reproductive health education and counselling services. Further measures should be undertaken, including the allocation of adequate human and financial resources, to develop youth-friendly counselling, care and rehabilitation facilities for adolescents that would be accessible without parental consent, where this is in the best interests of the child.

### *Paragraph 221*

The harmful traditional practices, such as excision and early and forced marriages, which continue to be widely practised, are of concern. Efforts to combat and eradicate the persistent practice of female genital mutilation (FGM) and other traditional practices harmful to the health of girls should be strengthened. Efforts to conduct sensitization programmes for practitioners and the general public in order to change traditional attitudes and discourage harmful practices, should be continued. In this regard, alternative career training programmes for practitioners should be established. Collaboration with neighbouring states should be continued in order to identify good practices undertaken in the campaign to combat and eradicate the practice of FGM and other harmful traditional practices affecting the health of girls.

### *Paragraph 224*

The lack of adequate legal provisions, policies and programmes to guarantee and protect the rights of refugee and asylum-seeking children remain of concern. A legislative framework should be developed for the protection of refugee and asylum-seeking children, and policies and programmes should be implemented to guarantee their adequate access to health, education and social services.

### ***See also:***

- South Africa, CRC, CRC/C/94 (2000) 81 at para. 448.

## CHILDREN'S RIGHTS - HEALTH

- The Netherlands, CRC, CRC/C/90 (1999) 53 at paras. 250, 251 and 257.

### *Paragraph 250*

The right of access to medical advice and treatment without parental consent is of concern. Measures should be taken to ensure that medical advice and treatment remain confidential for children of appropriate age and maturity.

### *Paragraph 251*

Breastfeeding promotion campaigns should be undertaken to stress its advantages and the negative impact of substitutes, while providing counselling to HIV/AIDS-infected mothers about the risk of transmission of HIV/AIDS through breastfeeding.

### *Paragraph 257*

The delays faced by juvenile offenders in need of psychological and psychiatric treatment are of concern. The availability of places in institutions should be increased in order to provide these juvenile offenders with timely and appropriate treatment.

- India, CRC, CRC/C/94 (2000) 10 at paras. 80-84, 94, 104 and 105.

### *Paragraph 80*

In light of article 24 of the Convention, it is noted that the State party has already focused and placed priority on the main health issues by establishing several national programmes. Nevertheless, concern is expressed about the high maternal mortality, and very high levels of low birth weight and malnutrition among children, including micronutrient deficiencies, linked to the lack of access to prenatal care and, more generally, limited access to quality public health care facilities, insufficient numbers of qualified health workers, poor health education, inadequate access to safe drinking water and poor environmental sanitation. This situation is exacerbated by the extreme disparities faced by women and girls, especially in rural areas.

### *Paragraph 81*

All necessary steps should be taken to adapt, expand and implement the Integrated Management of Child Illness strategy, and to pay particular attention to the most vulnerable groups of the population. The State party should also undertake studies to determine the socio-cultural factors which lead to practices such as female infanticide and selective abortions, and develop strategies to address them.

### *Paragraph 82*

The health of adolescents, particularly girls, is neglected. For instance, early marriages can have a

## CHILDREN'S RIGHTS - HEALTH

negative impact on health. Adolescent suicides, especially among girls, and HIV/AIDS affected children are of serious concern.

### *Paragraph 83*

It is recommended that the State party strengthen the existing National Reproductive and Child Health programme, targeting the most vulnerable groups of the population. The State party should combat discrimination against HIV/AIDS affected persons by strengthening awareness-raising and sensitization programmes for the public, and particularly health professionals.

### *Paragraph 84*

Concern is expressed about the high percentage of children living in inadequate housing, including slums, and their inadequate nutrition and access to safe drinking water and sanitation.

### *Paragraph 94*

Comprehensive legislation should be adopted to ensure adequate protection of refugee and asylum-seeking children, including in the fields of physical safety, health, education and social welfare, and to facilitate family reunification.

### *Paragraph 104*

In the light of article 33, the Committee is concerned about the increasing use and traffic in illicit drugs, especially in large urban centres, and the growing use of tobacco among persons under 18 years, especially girls.

### *Paragraph 105*

The State party should develop a national drug control plan, or a Master Plan, with the guidance of the United Nations Drug Control Programme (UNDCP). The State party is encouraged to provide children with accurate and objective information about substance use including tobacco use, and to protect children from harmful misinformation through comprehensive restrictions on tobacco advertising. The State party should develop rehabilitation services for children who are victims of substance abuse.

### *See also:*

- Armenia, CRC, CRC/C/94 (2000) 53 at paras. 346 and 347.
- Slovakia, CRC, CRC/C/100 (2000) 100 at paras. 584 and 585.
  
- Sierra Leone, CRC, CRC/C/94 (2000) 24 at paras. 169, 175, 178, 179, 189, 191 and 192.

### *Paragraph 169*

Taking note of the very high child and maternal mortality rates, rates of malnutrition and various

## CHILDREN'S RIGHTS - HEALTH

preventable diseases and the probability of widespread psychological trauma, the Committee is concerned at the very low coverage of basic health services across the country and at the absence of mental health facilities.

### *Paragraph 175*

The State party should urgently develop mechanisms to effectively monitor the incidence and spread of HIV/AIDS. The State party should rapidly develop and implement a strategy for prevention, including through the use of information campaigns, and for care of people who are victims of HIV/AIDS, including for alternative care of their children. The State party is urged to seek assistance from the World Health Organization.

### *Paragraph 178*

That the State party has insufficient capacity to provide psycho-social assistance to the many children who have suffered forms of psychological trauma is a concern.

### *Paragraph 179*

Every effort should be made to strengthen available psycho-social assistance and to recruit more mental health workers.

### *Paragraph 189*

The .5(s Tw [(T.-4.8(b)1udh)15.5 .5(audh)15.5 )9(ag9s)16.6(i)34.6(s)5.4( u4)-10.6(ged t)-25.4(o)-Tw [(T.-4) urel  
8IT8

### *Paragr*



## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 271*

While aware of the State party's efforts to integrate children with disabilities into formal education and into regular recreation programmes, concern remains that children with disabilities are excluded from many activities. The quality of educational, health and other facilities available is a concern.

### *Paragraph 274*

Concern is expressed about the elevated incidence of infant mortality.

### *Paragraph 275*

The correlation, identified by studies, between low education among mothers and high infant mortality, and between the incidence of such mortality and certain regions are noted. The State party is urged to continue its efforts to address this concern, *inter alia*, through the effective provision of adequate health education to mothers.

### *Paragraph 278*

Problems in the area of adolescent and sexual health issues are noted. Concern is expressed about the high level of abortions among girls and at the incidence of sexually transmitted diseases.

### *Paragraph 279*

The State party is urged to strengthen data collection methods with regard to adolescent health concerns. The State party should increase its efforts to promote adolescent health policies and strengthen reproductive health education and counselling services, *inter alia* with regard to HIV/AIDS, STDs, pregnancy among girls and abortion.

### *Paragraph 286*

The absence of measures to provide for the physical and psychological recovery and reintegration of children who have been the victims of crime, and of children who have participated in judicial proceedings or who have been confined in institutions is a concern.

### *Paragraph 287*

In the light of article 39 of the Convention, appropriate programmes should be urgently established to provide for the physical and psychological recovery and reintegration of such children and these mechanisms should be used in the administration of juvenile justice.

### *Paragraph 290*

The Committee acknowledges the State party's recognition of, and expresses its own concern at, recent increases in drug abuse among children.

### *Paragraph 291*

## CHILDREN'S RIGHTS - HEALTH

The State party should continue to monitor the incidence of drug abuse among children, proceed with preventive measures and make appropriate rehabilitative and other assistance available to children who are already addicted to drugs.

- Armenia, CRC, CRC/C/94 (2000) 53 at paras. 330 and 332-335.

### *Paragraph 330*

The Committee wishes to reiterate the concerns expressed by the Committee on Economic, Social and Cultural Rights (E/C.12/1/Add.39) with regard to the deterioration in the health of the Armenian people, especially women and children, and decreasing budgetary allocations in this sector. Concerns include the deterioration in the quality of care; inadequate prenatal and neonatal care; poor nutrition; that the cost of care is a barrier to access to health care for poor households; and that abortion is the most commonly used means of family planning.

### *Paragraph 332*

With regard to adolescent health, concern is expressed at the high and increasing rate of teenage pregnancies, and the consequent high rate of abortions among girls under 18, especially illegal abortions; and the rise in rates of STDs and spread of HIV. Although parents play the most important role in this regard, cultural attitudes and lack of personal knowledge and communication skills on the part of parents are barriers to accurate reproductive health information and counselling.

### *Paragraph 333*

Adolescents should have access to and be provided with reproductive health education, and child-friendly counselling and rehabilitation services.

### *Paragraph 334*

Concern is expressed about the high incidence of environmental threats, including contamination of water supplies, which have a negative impact on the health of children.

### *Paragraph 335*

In the light of article 24 (c) of the Convention, it is recommended that the State party take all appropriate measures, including international cooperation, to prevent and combat the damaging effects of environmental degradation on children, including pollution and contamination of water supplies.

- Peru, CRC, CRC/C/94 (2000) 64 at paras. 369 and 377.

### *Paragraph 369*

Concern is expressed at the existing patterns of gender and racial discrimination; at the

## CHILDREN'S RIGHTS - HEALTH

marginalization of children belonging to indigenous populations; and at the precarious situation of children from the rural highlands and the Amazonia region, especially regarding their limited access to education and health services. It is recommended that the State party increase measures to reduce economic and social disparities, including between urban and rural areas, to prevent discrimination against the most disadvantaged groups of children, such as girls, children with disabilities, children belonging to indigenous and ethnic groups, children living in and/or working on the streets and children living in rural areas, and to guarantee their full enjoyment of all the rights recognized in the Convention.

### *Paragraph 377*

While acknowledging the measures taken to improve the health of children, in particular initiatives related to the reduction of infant mortality, concern is expressed about the persistence of regional disparities in access to health care and about high rates of malnutrition of children, especially in rural and remote areas and in particular among children belonging to indigenous groups. The high maternal mortality and teenage pregnancy rates are a concern as is the insufficient access by teenagers to reproductive health education and counselling services. The increasing rates of substance abuse and of HIV/AIDS among children and adolescents and the constant discrimination they are exposed to are also matters of concern. It is recommended that the State party continue taking effective measures to ensure access to basic health care and services for all children. More concerted efforts need to be taken to guarantee equal access to health care and to combat malnutrition, with special emphasis on children belonging to indigenous groups and children living in rural and remote areas. The State party should continue with its efforts to prevent HIV/AIDS. Further efforts should be undertaken for the development of child-friendly counselling services as well as care and rehabilitation facilities for adolescents.

### *See also:*

- Colombia, CRC, CRC/C/100 (2000) 64 at paras. 369-371.
- Grenada, CRC, CRC/C/94 (2000) 72 at paras. 387, 405, 406, 408 and 410.

### *Paragraph 387*

Efforts in the area of primary health-care services are noted, in particular, the high immunization and low malnutrition rates. The enactment of the School Children Immunization Act is welcomed, as this facilitates the immunization of all children at the pre-school and primary school levels.

### *Paragraph 405*

The limited availability of programmes and services and the lack of adequate data in the area of adolescent health are a concern, including accidents, violence, suicide, mental health, abortion, HIV/AIDS and STDs. The high incidence of teenage pregnancy and the situation of teenaged

## CHILDREN'S RIGHTS - HEALTH

mothers, especially in relation to their late attendance at antenatal clinics, as well as their generally poor breast-feeding practices are a concern. Most of the current cases of infant and maternal mortality are related to teenaged mothers. It is recommended that the State party increase its efforts in promoting adolescent health policies and counselling services, as well as strengthening reproductive health education, including the promotion of male acceptance of the use of contraceptives. A comprehensive and multi-disciplinary study should be undertaken to understand the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Additionally, it is recommended that the State party undertake further measures, including the allocation of adequate human and financial resources, and making efforts to increase the number of social workers and psychologists, to develop youth-friendly care, counselling and rehabilitation facilities for adolescents. The State party is encouraged to develop comprehensive policies and programmes to reduce the incidence of infant and maternal mortality and promote proper breast-feeding and weaning practices among teenaged mothers.

### *Paragraph 406*

The situation of mental health of children is a concern. The absence of legal protection and the lack of adequate facilities and services for children with disabilities are also concerns. In the light of the Standard Rules on the Equalization of Opportunities for Persons with Disabilities (General Assembly resolution 48/96) and the Committee's recommendations adopted at its day of general Discussion on the Rights of Children with Disabilities (see CRC/C/69), it is recommended that the State party develop early identification programmes to prevent disabilities, increase its efforts to implement alternatives to the institutionalization of children with disabilities, establish special education programmes for children with disabilities and further encourage their inclusion in society. The State party should take all appropriate measures to ensure that adequate resources are allocated for the effective implementation of the Early Intervention Programme for Children with Disabilities. It is recommended that the State party undertake a study on the situation of mental health with a view to addressing this concern. Further, it is recommended that the State party undertake an awareness raising campaign to sensitize the public to the rights and special needs of children with disabilities as well as children with mental health concerns.

### *Paragraph 408*

Insufficient resources have been allocated to ensure the sustainability of the school nutrition programme. The lack of health and counselling services in schools are a concern. The State party is urged to take all necessary measures to ensure that adequate resources are allocated to the school nutrition programme and that adequate health and counselling services are made available in schools.

### *Paragraph 410*

The efforts of the State party at both the national and regional levels regarding drug demand reduction and narcotics control are noted. However, the high incidence of alcohol and substance abuse among youth remains a concern as does the limited psychological, social and medical programmes and services available in this regard. In the light of article 33 of the Convention, it is

## CHILDREN'S RIGHTS - HEALTH

recommended that the State party take all appropriate measures, including administrative, social and educational measures, to protect children from the illicit use of alcohol, narcotic drugs and psychotropic substances and to prevent the use of children in the illicit production and trafficking of such substances. The State party is encouraged to support rehabilitation programmes for child victims of alcohol, drug and substance abuse.

### *See also:*

- Georgia, CRC, CRC/C/97 (2000) 18 at para. 125.
- Suriname, CRC, CRC/C/97 (2000) 84 at para. 496.
- United Kingdom of Great Britain and Northern Ireland (Overseas Territories), CRC, CRC/C/100 (2000) 40 at paras. 259 and 260.
  
- South Africa, CRC, CRC/C/94 (2000) 81 at paras. 431, 444 and 446.

### *Paragraph 431*

It is noted that the principle of non-discrimination (article 2) is reflected in the new Constitution as well as in domestic legislation. That insufficient measures have been adopted to ensure that all children are guaranteed access to education, health and other social services is still a concern. Of particular concern are certain vulnerable groups of children, including Black children; girls; children with disabilities, especially those with learning disabilities; child workers; children living in rural areas; children working and/or living on the streets; children in the juvenile justice system; and refugee children. It is recommended that the State party increase its efforts to ensure implementation of the principle of non-discrimination and full compliance with article 2 of the Convention, particularly as it relates to the vulnerable groups.

### *Paragraph 444*

Concern is expressed regarding the limited availability of programmes and services and the lack of adequate data in the area of adolescent health, including teenage pregnancies; abortions; drugs and substance abuse, including alcohol and tobacco use; accidents; violence; and suicide. While the State party has taken a tough anti-smoking stance with the introduction of strong legislation, many under-age smokers are still able to buy tobacco products. The high and increasing incidence of HIV/AIDS and STDs remains a concern. Effective measures should be taken to ensure that legislation is fully implemented and enforced, particularly as regards the use of tobacco products. The State party should reinforce adolescent health policies, particularly with respect to accidents, suicide, violence and substance abuse. A study should also be undertaken to assess the situation of children with mental health concerns and introduce programmes to guarantee adequate care and protection for them. Additionally, the State party should undertake further measures, including the allocation of adequate human and financial resources, to develop youth-friendly counselling, care and rehabilitation facilities for adolescents that would be accessible, without parental consent where this is in the best

## CHILDREN'S RIGHTS - HEALTH

interests of the child. Training programmes are recommended for youth on the topics of reproductive health, HIV/AIDS and STDs . These programmes should be based not only on gaining knowledge, but also on the acquisition of competencies and life skills that are essential to the development of youth. The full participation of youth in the development of strategies to respond to HIV/AIDS at the national, regional and local levels is recommended. Particular emphasis should be placed on changing public attitudes toward HIV/AIDS and identifying strategies to address the continued discrimination experienced by children and adolescents infected with HIV.

### *Paragraph 446*

Concern is expressed that male circumcision is carried out, in some instances, in unsafe medical conditions. Concern is also expressed about the traditional practice of virginity testing which threatens the health, affects the self-esteem, and violates the privacy of girls. The practice of female genital mutilation (FGM) and its harmful effects on the health of girls is also an issue of concern. It is recommended that the State party take effective measures, including training for practitioners and awareness raising, to ensure the health of boys and protect against unsafe medical conditions during the practice of male circumcision. The State party should undertake a study on virginity testing to assess its physical and psychological impact on girls. In this connection, sensitization and awareness-raising programmes should be introduced for practitioners and the general public to change traditional attitudes and discourage the practice of virginity testing in light of articles 16 and 24 (3) of the Convention. The State party should strengthen its efforts to combat and eradicate the practice of FGM and should carry out sensitization programmes for practitioners and the general public to change traditional attitudes and discourage harmful practices.

- Islamic Republic of Iran, CRC, CRC/C/97 (2000) 8 at paras. 66 and 67.

### *Paragraph 66*

The large numbers of children living and/or working on the streets are a concern, particularly in urban centres such as Tehran and Isfahan, who are amongst the most marginalized groups of children in Iran.

### *Paragraph 67*

The State party should ensure that these children have access to health care; rehabilitation services for physical, sexual, and substance abuse; services for reconciliation with their families; comprehensive education, including vocational and life-skills training; and legal aid.

### *See also:*

- India, CRC, CRC/C/94 (2000) 10 at para. 87.
- Armenia, CRC, CRC/C/94 (2000) 53 at paras. 336 and 337.
- Jordan, CRC, CRC/C/97 (2000) 31 at para. 198.

## CHILDREN'S RIGHTS - HEALTH

- Georgia, CRC, CRC/C/97 (2000) 18 at paras. 98-100, 120-123, 131, 132, 140 and 141.

### *Paragraph 98*

That the law does not include legal minimum ages for sexual consent and medical treatment without parental consent is of concern.

### *Paragraph 99*

Relevant legislation should be enacted concerning the minimum legal ages for sexual consent and medical treatment without parental consent.

### *Paragraph 100*

It is noted with concern that the principle of non-discrimination is not adequately implemented with respect to certain vulnerable groups of children, including children living in conflict areas, children living in institutions, children living in the mountainous regions, children with disabilities, children of single parent families, children of poor families, children in conflict with the law, children living and/or working on the streets, refugee children and internally displaced children. Their limited access to adequate health, education and other social services is a concern.

### *Paragraph 120*

Concern is expressed about the health situation of children which continues to be affected by the poor economic situation within the State party. In particular, note is taken of the limited access to and quality of health services, particularly among children living in conflict zones as well as in the mountainous regions; the increasing cost of basic health care of which the State party covers only 15-20 per cent; the inadequate allocation of funding for health; the high maternal, child and infant mortality rates; the increasing malnutrition rate; and the deteriorating situation of sanitation and safe drinking water. While it is noted that the State party is receiving technical assistance for the immunization campaign, vaccines continue to be unavailable. Negative social attitudes towards vaccinations have resulted in a resurgence of preventable diseases such as diphtheria.

### *Paragraph 121*

Appropriate resources should be allocated for the implementation of the National Health Policy and, where appropriate, additional policies and programmes should be developed to improve the health situation of children, especially those living in mountainous regions and conflict zones; facilitate greater access to and quality of primary health services; ensure the availability of vaccines; reduce the incidence of maternal, child and infant mortality; prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children; and increase access to safe drinking water and sanitation. The State party is encouraged to continue its cooperation with respect to the Integrated Management of Childhood Illnesses initiative.

### *Paragraph 122*

## CHILDREN'S RIGHTS - HEALTH

Concern is expressed with respect to the limited availability of programmes and services and the lack of adequate disaggregated data in the area of adolescent health, including teenage pregnancy, abortion, HIV/AIDS and STDs, alcohol, drug and substance abuse, including tobacco use, violence and mental health.

### *Paragraph 123*

Efforts to promote adolescent health policies and child-friendly counselling services should be increased and reproductive health education should be strengthened, including the promotion of acceptance by men of the use of contraceptives. A comprehensive and multidisciplinary study should be undertaken to ascertain the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Additionally, it is recommended that the State party take further measures, including the allocation of adequate human and financial resources, to increase the number of social workers and psychologists, and to develop youth-friendly care and rehabilitation facilities for adolescents.

### *Paragraph 131*

All appropriate measures should be taken to protect the rights of refugee, asylum-seeking and unaccompanied children and to facilitate their access to adequate housing, education, health and other social services. In this regard, the State party should consider the adoption of legislation on asylum-seekers.

### *Paragraph 132*

Note is taken of the State party's efforts, in cooperation with UNHCR, to provide humanitarian assistance to internally displaced persons, including free health care and education for children. However, their situation remains a concern.

### *Paragraph 140*

Concern is expressed about the increasing incidence of drug, alcohol and substance abuse among youth as well as about the lack of financial and human resources, inadequate monitoring mechanisms and insufficient psychological, social and medical programmes and services available in this regard.

### *Paragraph 141*

In light of article 33 of the Convention, all appropriate measures should be taken, including administrative, social and educational measures, to protect children from the illicit use of alcohol, narcotic drugs and psychotropic substances and to prevent the use of children in the illicit production and trafficking of such substances. The State party is encouraged to support rehabilitation programmes dealing with child victims of alcohol, drug and substance abuse.

### *See also:*

- Suriname, CRC, CRC/C/97 (2000) 84 at paras. 493, 494, 503 and 504.
- United Kingdom of Great Britain and Northern Ireland (Overseas Territories), CRC,

## CHILDREN'S RIGHTS - HEALTH

- CRC/C/100 (2000) 40 at paras. 245 and 246.
- Colombia, CRC, CRC/C/100 (2000) 64 at paras. 387 and 388.
- Palau, CRC, CRC/C/103 (2001) 79 at paras. 466, 467, 474 and 475.
  
- Jordan, CRC, CRC/C/97 (2000) 31 at paras. 188 and 191-196.

### *Paragraph 188*

Legislative measures should be taken to prohibit all forms of physical and mental violence, including corporal punishment and sexual abuse of children in the family and the schools. Programmes for the rehabilitation and reintegration of abused children need to be strengthened. The training of teachers, law enforcement officials, care workers, judges and health professionals in the identification, reporting and management of cases of ill-treatment is recommended. Attention should be given to addressing and overcoming socio-cultural barriers that inhibit victims from seeking assistance.

### *Paragraph 191*

Notwithstanding the improvement in Jordan's health indicators over the past 25 years, concern is expressed that children living in rural regions may not have equal access to health services.

### *Paragraph 192*

It should be ensured that vulnerable groups, such as children living in desert regions, benefit from health services. Efforts to increase the quality and coverage of post-natal care, and to raise awareness and disseminate materials on maternal health and family planning should be continued.

### *Paragraph 193*

Concern is expressed that insufficient attention has been given to adolescent health issues, including developmental, mental and reproductive health concerns and substance abuse.

### *Paragraph 194*

A comprehensive study should be undertaken to discover the nature and extent of adolescent health problems, with the full participation of adolescents, and this should be used as a basis to formulate adolescent health policies and programmes. In light of article 24, adolescents should have access to and be provided with reproductive health education, child-friendly counselling and rehabilitation services, and STD and HIV/AIDS prevention programmes.

### *Paragraph 195*

In light of article 24 of the Convention, concern is expressed about problems involving waste treatment and poor access to safe drinking water and adequate sanitation, particularly in rural areas, which negatively impact upon the health of children.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 196*

In light of article 24(c) of the Convention, all appropriate measures should be taken, including through international cooperation, to prevent and combat the damaging effects of environmental pollution and contamination of water supplies on children, and to strengthen procedures for inspection. Collection of data on access to clean water and sanitation is encouraged.

### *See also:*

- Tajikistan, CRC, CRC/C/100 (2000) 53 at paras. 307 and 308.
- Norway, CRC, CRC/C/97 (2000) 43 at paras. 229, 230, 245, 246, 260 and 261.

### *Paragraph 229*

The State party's efforts to ensure that children within Norwegian jurisdiction, including those whose presence is not in line with legal requirements, benefit from the rights defined in the Convention are welcomed. Nevertheless, concern is expressed that this principle is not established in all relevant domestic legislation, that the absence of a legal guarantee may deprive some children without Norwegian nationality of their rights, and that some limitations are placed on these children's access to health and education services.

### *Paragraph 230*

The full, including long-term, impact of this situation on the rights of children without Norwegian nationality and without legal status living within Norwegian jurisdiction should be considered. The State party is encouraged to consider amendments to national legislation which would ensure the full applicability of article 2 of the Convention.

### *Paragraph 245*

Concern is expressed about the high incidence of anorexia nervosa and bulimia and by the prevalence of alcohol consumption among adolescents. Concern is also expressed about the continuing incidence of suicide by children, especially boys.

### *Paragraph 246*

The State party is encouraged to continue its efforts to address cases of anorexia nervosa and bulimia which are both medical and psychological problems. In addition, note is taken of the efforts made to reduce the level of alcohol consumption among adolescents. The State party should continue to promote a healthy life style among adolescents. Further, recognizing that it can be difficult to identify all cases of suicide by children and in accordance with its previous recommendations, research into the incidence and causes of child suicide, including by children under the age of 10, should be continued, and the results of this research should be used to inform and further develop the State party's 1994 suicide prevention programme.

## **CHILDREN'S RIGHTS - HEALTH**

## CHILDREN'S RIGHTS - HEALTH

Integrated Management of Childhood Illnesses strategy, is met by adequate allocation of resources, both human and financial, and that all children, especially from the most vulnerable groups, have access to health care. The State party should undertake awareness-raising campaigns to ensure that families, especially refugee families, are adequately informed of the need to be registered in polyclinics. Comprehensive family planning programmes, as well as measures to ensure that abortion is not perceived as a method of contraception should be established. The State party is encouraged to continue cooperation with and seek assistance from, among others, UNICEF and WHO.

### *Paragraph 312*

With regard to adolescent health, concern is expressed about the high and increasing rate of teenage pregnancies and the consequently high rate of abortions among girls under 18. It is noted that various factors, including limited availability of contraceptives, poor reproductive health education and the requirement of parental consent, have resulted in an increasing number of illegal abortions among girls. The rise in rates of STDs is a concern, particularly syphilis, and HIV/AIDS.

### *Paragraph 313*

A comprehensive study should be undertaken to understand the nature and extent of adolescent health problems, with the full participation of adolescents, and this should be used as a basis to formulate adolescent health policies and programmes. While recognizing that parents play an important role in this regard, cultural attitudes and lack of knowledge and communication skills by parents may be barriers to accurate reproductive health information and counselling. In this regard, adolescents should have access to and be provided with reproductive health education and child-friendly counselling and rehabilitation services.

### *Paragraph 314*

In light of article 24 of the Convention, concern is expressed at problems involving the recycling, collection and disposal of waste in urban areas and poor access to safe water and adequate sanitation in rural areas, which negatively impact upon the health of children. Concern is also expressed about the inadequate measures taken to protect the health of children from the negative impact of dangerous environmental hazards resulting from inappropriate storage of radioactive and toxic wastes.

### *Paragraph 315*

In light of article 24(c) of the Convention, all appropriate measures should be taken, including through international cooperation, to prevent and combat the damaging effects of environmental degradation on children, including pollution and contamination of water supplies.

### *Paragraph 324*

The increasing use of and traffic in illicit drugs, alcohol abuse, and the alarming rates of tobacco use among persons under 18 years is of concern.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 325*

A national survey on the nature and extent of substance abuse should be undertaken. With the full participation of adolescents, including in its implementation and evaluation, the State party should develop a national drug control plan, or a master plan, with the guidance of the United Nations Drug Control Programme (UNDCP). The State party is encouraged to provide children with accurate and objective information about substance use, including tobacco use, and protect children from harmful misinformation through comprehensive restrictions on tobacco advertising. Rehabilitation services for children who are victims of substance abuse should be developed.

### *Paragraph 327*

Rehabilitation programmes and shelters should be established for child victims of sexual abuse and exploitation.

### *Paragraph 328*

Concern is expressed about the poor conditions of the facilities; inadequate nutrition, clothing and psychological and medical care; and the lack of access to adequate recreational, educational and vocational facilities. The lack of facilities for the physical and psychological recovery and social reintegration of juvenile offenders is also a concern.

### *Paragraph 329*

All measures should be taken to integrate fully into its legislation and practice the provisions of the Convention, in particular articles 37, 40 and 39, as well as other relevant international standards in this area, such as the Beijing Rules, the Riyadh Guidelines, the United Nations Rules for the Protection of Juveniles Deprived of their Liberty and the Vienna Guidelines for Action on Children in the Criminal Justice System. Facilities and programmes for the physical and psychological recovery and social reintegration of juveniles should be developed. Assistance should be sought from, among others, OHCHR, the Centre for International Crime Prevention, the International Network on Juvenile Justice, and UNICEF through the Coordination Panel on Juvenile Justice.

### *See also:*

- Djibouti, CRC, CRC/C/97 (2000) 96 at paras. 568 and 569.
- United Kingdom of Great Britain and Northern Ireland (Isle of Man), CRC, CRC/C/100 (2000) 31 at para. 204.
- United Kingdom of Great Britain and Northern Ireland (Overseas Territories), CRC, CRC/C/100 (2000) 40 at para. 263.
- Tajikistan, CRC, CRC/C/100 (2000) 53 at para. 318.
  
- Cambodia, CRC, CRC/C/97 (2000) 64 at paras. 347, 348, 374-377, 380-383, 388, 389, 393 and 394.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 347*

While most of the State party's infrastructure and social services were destroyed as a result of decades of war, concern is expressed about the insufficient attention paid to the provisions of article 4 of the Convention concerning budgetary allocations to the "maximum extent of ... available resources".

### *Paragraph 348*

Priority should be given to ensuring that the maximum available resources are allocated to health, education and social services for children and that particular attention is paid to the protection of children belonging to vulnerable and marginalized groups. In this regard, the State party is encouraged to continue and foster open cooperation with the international community, in particular within the coordinated framework of the donors' Consultative Group on Cambodia.

### *Paragraph 374*

The international cooperation initiative "Strengthening Health Systems" between the Ministry of Health and several United Nations agencies (WHO, UNICEF, UNDP and UNFPA) is welcomed. This initiative aims at rebuilding the Government's capacity in the development of a national programme for immunization, in particular against polio. Nevertheless, concern is expressed that the State party's infant mortality and under-five mortality rates remain among the highest in the region. Child malnutrition is also an area of concern.

### *Paragraph 375*

The issue of childhood morbidity and mortality should be addressed by taking a multisectoral approach recognizing the critical role of illiteracy, lack of clean water supplies and food insecurity in the current pattern of childhood illnesses. Priority areas must be identified on the basis of baseline data collected by careful and comprehensive research. Such a strategy must take into account that most health care takes place outside health facilities and outside State control. It must also recognize the needs of particularly isolated communities. In addition, measures should be put in place for establishing an efficient primary health care sector, including strategies to encourage care-seeking for childhood illnesses. The State party is encouraged to continue working in cooperation with international agencies.

### *Paragraph 376*

The measures taken for the prevention of HIV/AIDS and the care of infected persons are noted. Deep concern is expressed about the fact that the State party has the fastest growing rate of HIV/AIDS infection in the region and that children are among the most affected groups, in particular due to mother-to-child transmission.

### *Paragraph 377*

The State party should continue to take effective measures for the prevention of HIV/AIDS, including

## CHILDREN'S RIGHTS - HEALTH

awareness-raising and educational campaigns. The State party should take into consideration the Committee's recommendations adopted on its day of general discussion on children living in a world with HIV/AIDS (CRC/C/80). International technical assistance from UNICEF, WHO and UNAIDS, among others, should continue to be requested in this regard.

### *Paragraph 380*

Concern is expressed at children's limited access to health services, due notably to the shortage of medical and public health personnel and the insufficient number of primary health centres, in particular in rural areas. The high cost of health care and medicines, which lead families into debt and greater poverty, is also of concern.

### *Paragraph 381*

Access to health-care services and medicines should be improved and extended in order to guarantee access by children belonging to poor families and other marginalized groups.

### *Paragraph 382*

The high maternal mortality rate, the limited access by teenagers to reproductive and sexual health education and counselling services, including outside the school system, and the low level of contraceptive use are of concern. Insufficient attention has been given to issues of adolescents' mental health.

### *Paragraph 383*

A comprehensive and multidisciplinary study should be undertaken to determine the scope of adolescent health problems, including mental health, as a basis for promoting adolescent health policies and strengthening reproductive health education. Further efforts should be undertaken for the development of child-friendly counselling services as well as care and rehabilitation facilities for adolescents.

### *Paragraph 388*

While welcoming the enactment of legislation prohibiting the military recruitment of children under 18 years and the State party's willingness to demobilize the remaining under-age soldiers in the army, concern is expressed at the insufficient measures for social reintegration and physical rehabilitation of former child soldiers. Concern is also expressed at the high number of landmines planted in the State party's territory during the recent armed conflict which represent a threat to the lives of children.

### *Paragraph 389*

Effective measures should be taken for the identification, demobilization and psychological rehabilitation and reintegration in society of child soldiers and to undertake awareness-raising campaigns for army officials to prevent the further recruitment of child soldiers.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 393*

Concern is expressed at the widespread phenomena of child prostitution and the sale and trafficking of children; the inadequate enforcement of the new legislation on these issues; and the shortage of trained people and institutions to provide rehabilitation to the victims.

### *Paragraph 394*

It is recommended that the State party review its legislation to combat sexual exploitation with a view to reinforcing it, and in the meantime to enforce fully its current legislation against sexual exploitation; that the Plan of Action be fully implemented; that sufficient resources, both human and financial, be allocated for the implementation of the Plan; that social services for the rehabilitation of child victims of sexual exploitation be strengthened and expanded; that violators be prosecuted; and that bilateral cooperation, especially with neighbouring countries, be strengthened and border controls increased.

### *See also:*

- Burundi, CRC, CRC/C/100 (2000) 17 at paras. 145 and 146.
- Comoros, CRC, CRC/C/100 (2000) 110 at para. 632.
  
- Malta, CRC, CRC/C/97 (2000) 75 at paras. 418, 419, 432, 433, 436, 437, 440 and 411.

### *Paragraph 418*

It is acknowledged that the State party is reviewing its legislation to include a minimum legal age for medical counselling without parental consent. Nevertheless, concern is expressed that at present the minimum legal age for such counselling is set at 18 years.

### *Paragraph 419*

The State party should review its domestic legislation regarding the minimum legal age for access to medical counselling without parental consent to bring it in accordance with the principles and provisions of the Convention, especially the best interests of the child.

### *Paragraph 432*

Concern is expressed at the State party's low breastfeeding rate and at the high rate of child obesity.

### *Paragraph 433*

Effective measures should be taken to increase and promote the use of breastfeeding practices and to continue and strengthen its special programmes to address the issue of child obesity and promote a healthy lifestyle among children.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 436*

Concern is expressed about the increasing rate of teenage pregnancy; the insufficient access by teenagers to reproductive health education and counselling services, including outside school; and about the lack of a structured policy on health education. Insufficient attention has been given to issues of adolescents' mental health and alcohol consumption, and there is a shortage of psychologists.

### *Paragraph 437*

The State party should take effective measures to develop adolescent-friendly health policies and strengthen reproductive health education and counselling services. The State party should strengthen its programmes on adolescent mental health and continue developing effective educational campaigns to discourage alcohol consumption among children.

### *Paragraph 440*

While it is noted that a bill on a Refugees Act is currently being debated in Parliament, concern is expressed at the lack of domestic legislation for the protection of unaccompanied, asylum-seeking and refugee children and on family reunification of refugees, and at the limited access of refugee children to education, health services and housing.

### *Paragraph 441*

The State party should enact legislation on asylum procedures and family reunification of refugees; continue to undertake effective measures to provide refugee children with access to education, health services and housing; and establish measures to assist refugee children who are victims of any form of neglect, exploitation or abuse.

- Suriname, CRC, CRC/C/97 (2000) 84 at paras. 491 and 492.

### *Paragraph 491*

The health situation of children, especially those living in the interior, is noted with concern. In particular, note is taken of their limited access to basic health care; the insufficient number of trained medical personnel; the high incidence of malaria; high maternal, child and infant mortality rates, including suicides and accidents; inadequate breastfeeding and weaning practices, high rates of malnutrition, poor sanitation and limited access to safe drinking water, especially in rural areas.

### *Paragraph 492*

The Government should allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of children, especially those living in the interior; facilitate greater access to primary health services; increase the number of trained medical and other health personnel; take steps to reduce the incidence of maternal, child and infant mortality; promote healthier breastfeeding and weaning practices; prevent and combat malnutrition, especially among vulnerable

## CHILDREN'S RIGHTS - HEALTH

and disadvantaged groups of children; increase access to safe drinking water and sanitation and reduce the incidence of malaria. A study should be undertaken on suicides and accidents involving children with the view to understanding their nature and scope and implementing appropriate preventative policies and measures.

- Djibouti, CRC, CRC/C/97 (2000) 96 at paras. 536, 537, 550, 551, 554, 555, 558-561 and 564-567.

### *Paragraph 536*

It is noted that the principle of non-discrimination (art. 2) is reflected in the Constitution as well as in domestic legislation. Insufficient measures have been adopted to ensure that all children are treated equally and are guaranteed equal access to education, health and other social services. In this regard, the Committee is extremely concerned about the persistent discriminatory attitudes faced by girls; it is also concerned about the discrimination faced by refugee and asylum-seeking children and about the impact of ethnic discrimination.

### *Paragraph 537*

Efforts should be increased to ensure the implementation of the principle of non-discrimination and full compliance with article 2 of the Convention and address those cases which continue to affect all vulnerable groups, particularly girls, refugee children and those from different ethnic groups.

### *Paragraph 550*

The poor health status of children in Djibouti is of concern. In particular, concern is expressed about the high rates of infant and under-five mortality, maternal mortality, child malnutrition and smoking. While welcoming the adoption of baby-friendly hospital initiatives, the Committee is also concerned about the risk of mother-to-child transmission of HIV, given the high rates of HIV infection. The decline in spending on the health sector and the reduction in vaccination coverage is regretted.

### *Paragraph 551*

The State party is encouraged to increase its efforts in the health sector, including through the strengthening of data collection and disease surveillance mechanisms, the allocation of adequate resources and the reinforcement of training and support for health sector staff. The State party should ensure equitable access to existing health-care services, make every effort to increase vaccination coverage, including by ensuring the maintenance of a cold chain, and undertake effective collection and recording of data in this respect. Effective measures should be taken to provide information and support to HIV-infected mothers to prevent HIV transmission, in particular by providing safe alternatives to breastfeeding. The social factors preventing vulnerable groups (including women and children) from seeking health care should be addressed, and particular efforts should be made to reach refugee and displaced children and those living on the streets. The State party is urged to develop effective partnerships with NGOs and civil society groups, and to seek the

## CHILDREN'S RIGHTS - HEALTH

technical assistance of United Nations agencies such as WHO and UNICEF in this respect.

### *Paragraph 554*

The exposure of older children in the State party, particularly those living on the street or working in port areas and along truck routes, to sexual exploitation and to sexually transmitted diseases, including the risk of HIV infection, is of concern. Concern is also expressed that girls married at a young age may not have sufficient access to family planning services and counselling.

### *Paragraph 555*

The State party is urged to address the sexual and reproductive health-care needs of older children, including those married at a young age and those in vulnerable situations. The State party should provide access to information about sexual and reproductive health. Services in this area should be user friendly and address the concerns and need for confidentiality of adolescents.

### *Paragraph 558*

Concern is expressed about the lack of health and education services for all refugee children, including those living outside the refugee camps.

### *Paragraph 559*

In light of the provisions of articles 2, 10, 24 and 28 of the Convention, an appropriate legislative and administrative framework should be developed to facilitate family reunification and adequate access to all social services and to schools for refugee children outside the camps.

### *Paragraph 560*

Insufficient efforts have been made to introduce adequate programmes to facilitate the rehabilitation of children affected by armed conflict during the civil war and subsequent violence.

### *Paragraph 561*

The State party should take all appropriate measures to introduce programmes to facilitate the physical and psychological recovery and social reintegration of children affected by armed conflict.

### *Paragraph 564*

Concern is expressed about the high and increasing involvement of children in the production, trafficking and consumption of psychotropic drugs (and especially of *khat*), and about the impact on children of widespread *khat* consumption in the State party which affects families and the entire society.

### *Paragraph 565*

In view of articles 33 and 39 of the Convention, the State party is urged to take all appropriate measures to prevent the involvement of children in the production, trafficking and consumption of *khat* and other psychotropic drugs as well as to provide care and rehabilitation, and to pay particular

## CHILDREN'S RIGHTS - HEALTH

attention in this regard to vulnerable groups, including children who drop out of school, live on the streets, or work in the port area. The State party is encouraged to seek technical assistance from UNICEF and WHO, among others, and to involve children in the design, implementation and evaluation of relevant strategies, and to continue its cooperation with the United Nations Drug Control Programme in this regard.

### *Paragraph 566*

The high and apparently increasing incidence of prostitution involving children, in particular girls, and the lack of facilities to provide services to sexually exploited children are matters of concern.

### *Paragraph 567*

In the light of article 34 and other related articles of the Convention, the State party should undertake studies with a view to designing and implementing appropriate policies and measures to promote the physical and psychological recovery and social reintegration of child victims of sexual exploitation.

### *See also:*

- United Kingdom of Great Britain and Northern Ireland (Overseas Territories), CRC, CRC/C/100 (2000) 40 at paras. 261 and 262.
- Finland, CRC, CRC/C/100 (2000) 8 at paras. 65-70.

### *Paragraph 65*

It is noted with concern that families with chronically ill children do not always have enough support, both at the personnel and the financial level.

### *Paragraph 66*

Recognizing the State party's efforts to ensure the rights of children with disabilities, the State party should continue its efforts to provide equal support and assistance to all families with chronically ill children including the help of specialized staff.

### *Paragraph 67*

Concern is expressed about the fact that a number of children's wards have been closed or are threatened with closure because of cost-saving measures and that children are cared for in adult wards, sometimes even in the same room as adults.

### *Paragraph 68*

Effective measures should be taken to ensure appropriate care for children in hospitals in compliance with the Charter for Children in Hospital of the European Association for Children in Hospital (EACH).

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 69*

While acknowledging the additional funds allocated in order to provide government support to psychiatric services, in particular child and youth psychiatry, the Committee reiterates its concern that mentally ill children are institutionalized in the same facilities as adults. Further, it joins the State party in expressing concern at the long waiting list for and delayed access to mental health services and professionals for children because of an insufficient number of psychologists and psychiatrists.

### *Paragraph 70*

The State party is encouraged to address the shortage of child psychiatrists and psychologists, in particular in the northern and eastern parts of Finland and in small municipalities with fewer resources, in order to provide children with more timely access to mental health services and to prevent the institutionalization of mentally ill children with adults.

### *See also:*

- Norway, CRC, CRC/C/97 (2000) 43 at paras. 249 and 250.
  
- Burundi, CRC, CRC/C/100 (2000) 17 at paras. 103, 104, 135-140, 143, 144, 147, 148, 154, 155, 162 and 163.

### *Paragraph 103*

In light of article 4 of the Convention, deep concern is expressed at the low proportion of the national budget invested in health, education and social welfare in contravention of the World Bank's guidelines on minimum spending on these areas, and the high proportion of spending on defence. Resources, whether from State allocations or from direct international assistance, are not distributed evenly among the population according to need.

### *Paragraph 104*

In light of articles 2, 3 and 4 of the Convention, it is recommended that the State party raise the proportion of spending on health, education and social welfare to the maximum of available resources, with a view to ensuring access to these services for all children. The State party should ensure that resources are distributed as evenly as possible according to the needs of vulnerable populations and to all geographical areas.

### *Paragraph 135*

Recognizing the large numbers of orphans and other children in need of alternative care in the State party, deep concern is expressed at violations of child rights that occur in the context of alternative care, at the lack of systematic monitoring of the situation of children in institutions or informal foster families, at the use of children for labour in some informal foster families and at reports indicating that many of these children do not have adequate emotional support or access to health and education

## CHILDREN'S RIGHTS - HEALTH

services.

### *Paragraph 136*

In light of article 21 of the Convention, it is recommended that mechanisms be developed and implemented to ensure the provision of suitable alternative care for children in need of such assistance. Monitoring mechanisms should be established to guarantee a minimum standard of care, including in the long-term, and which ensure that such children are not used for labour and have access to education and health services. A code of standards should be adopted on care and protection of children deprived of a family environment. Recognizing the difficulties encountered by many families that provide alternative care for children, the State party should continue and strengthen its support to such families, including by providing assistance to pay for health and education services.

### *Paragraph 137*

Noting current efforts, concern is expressed about the situation of children with physical and mental disabilities, and in particular about the limited specialized health care, education and employment possibilities available for them. Poor health conditions and poverty are leading to an increase in the number of children with disabilities.

### *Paragraph 138*

It is recommended that the situation of children with disabilities be reviewed in terms of their access to suitable health care, education services and employment opportunities and that a programme of action be established to address all areas of concern. Note should be taken of the Standard Rules on the Equalization of Opportunities for Persons with Disabilities (General Assembly resolution 48/96) and the Committee's recommendations adopted at its day of general discussion on the rights of children with disabilities (see CRC/C/69). The population should be sensitized to the rights of children with disabilities and the difficulties they must face in their daily lives.

### *Paragraph 139*

The low immunization rate, the high levels of malnutrition and micro-nutrition deficiencies and the extremely poor health conditions among children in general, and particularly in camps, are matters of deep concern. Further, the Committee is concerned at high mortality rates among children, high maternal mortality rates, at low investment in health care, the limited number of hospitals and health centres that are operational, the limited drug supply and relatively high cost of medicines, including generic drugs, and the concentration of medical professionals in Bujumbura city.

### *Paragraph 140*

The State party is urged to make significant increases in the health budget, to make every effort to improve public health, including primary health care, and to ensure adequate access for all children to health services, with particular regard to those living in rural communities and in camps. It is recommended that the State party implement integrated policies and programmes for the management

## CHILDREN'S RIGHTS - HEALTH

of childhood illnesses and measures to improve child and maternal health. The assistance of UNICEF and WHO should be sought in this regard.

### *Paragraph 143*

Concern is expressed about the lack of an adolescent health-care policy, particularly with regard to reproductive health, early teenage pregnancy, mental health and problems related to the inhaling of substances such as glue and petrol and the use of marijuana.

### *Paragraph 144*

Additional efforts should be made to develop a comprehensive adolescent health-care policy and to provide reproductive health education and specialized assistance for the treatment of mental, reproductive and other health concerns of adolescents.

### *Paragraph 147*

Noting the current efforts to address trauma, concern is expressed at the inadequacy of specialized psychological care in almost all regions of the State party and the substantial need for such assistance among children who have suffered from, *inter alia*, the ongoing armed conflict, displacement, regroupment, sexual abuse and living conditions in camps. The current ratio of mental health workers to population is very low.

### *Paragraph 148*

Efforts should be increased to make psychological assistance available to those children who have experienced trauma and to increase human resources in the area of psychological care by providing specialized mental health training for existing health professionals.

### *Paragraph 154*

The situation of children living and working on the streets and children living on their own and without proper housing in the hills is of concern. Concern is expressed about the poor access of such children to health, education and other services, about reports that the number of children living or working on the streets is continuing to increase, and about the particular vulnerability of girls in these situations.

### *Paragraph 155*

Current efforts should be reinforced on behalf of street and "hill" children and it should be ensured that these children are protected and have access to health and education services. Taking into consideration the limited availability of social workers and the scarcity of resources, greater support should be given to the work of NGOs in this domain and the police services should be provided with training on children's rights so that the police can contribute to the protection of children from acts of violence or other abuse while on the street. Special attention should be given to improving the situation of girls.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 162*

Deep concern is expressed about the poor situation of Batwa children and the lack of respect for almost all of their rights, including the rights to health care, to education, to survival and development, to a culture and to be protected from discrimination.

### *Paragraph 163*

The State party should urgently gather information on the Batwa people, strengthen the representation of Batwa in national policy-making and elaborate a plan of action to protect the rights of Batwa children, including those rights related to minority populations and indigenous peoples.

- United Kingdom of Great Britain and Northern Ireland (Isle of Man), CRC, CRC/C/100 (2000) 31 at paras. 189, 193, 202 and 203.

### *Paragraph 189*

In the light of article 19, it is recommended that efforts be reinforced to prevent and combat domestic violence, child abuse, including sexual abuse, and ill-treatment and neglect of children. Additionally, all appropriate measures should be taken to guarantee the physical and psychological recovery and social reintegration of child victims, in accordance with article 39 of the Convention.

### *Paragraph 193*

Efforts made to address drug and alcohol abuse and cigarette smoking among adolescents, especially among schoolgirls should be reinforced. All appropriate measures should be taken to strengthen reproductive health education, including the promotion of male acceptance of the use of contraceptives. A comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent reproductive health concerns, including the incidence of STDs. Additionally, the Isle of Man should undertake further measures, including the allocation of adequate human and financial resources to ensure the provision of youth-friendly care, counselling and rehabilitation services for adolescents, and to strengthen child mental health services.

### *Paragraph 202*

The Isle of Man has elaborated a five year drug strategy and developed a drug prevention programme at the secondary school and college levels. However, concern is expressed about the increasing incidence of drug abuse among youth on the island. The introduction of an "arrest referral scheme" is noted. Any steps to divert child victims of drug abuse from entering the criminal justice system are welcomed.

### *Paragraph 203*

In the light of article 33 of the Convention, programmes should be reinforced to guarantee greater protection of children against the illicit use of narcotic drugs and psychotropic substances and to prevent the use of children in the illicit production and trafficking of such substances. The Isle of Man is also encouraged to continue its efforts to strengthen rehabilitation programmes for child

## CHILDREN'S RIGHTS - HEALTH

victims of drug and substance abuse.

### *See also:*

- Burundi, CRC, CRC/C/100 (2000) 17 at para. 134.
- United Kingdom of Great Britain and Northern Ireland (Overseas Territories), CRC, CRC/C/100 (2000) 40 at para. 242.
  
- United Kingdom of Great Britain and Northern Ireland (Overseas Territories), CRC, CRC/C/100 (2000) 40 at para. 264.

While in the juvenile justice system, children should be provided with adequate access to education, health, counselling and other rehabilitative services.

- Tajikistan, CRC, CRC/C/100 (2000) 53 at paras. 302, 305, 306 and 314.

### *Paragraph 302*

In the light of articles 19 and 39 of the Convention, the State party should ensure that all forms of physical and mental violence are prohibited, including corporal punishment and sexual abuse, against children in the family, in schools and in care institutions. Programmes for the rehabilitation and reintegration of abused children need to be strengthened. Attention should be given to addressing and overcoming socio-cultural barriers that inhibit victims from seeking assistance.

### *Paragraph 305*

As a priority, the Committee is seriously concerned at the deterioration in the health of the most vulnerable groups, especially women and children, and in the quality of health services. In particular, note is taken of the increase in communicable diseases, including vaccine-preventable diseases, and the increase in childhood malnutrition.

### *Paragraph 306*

The State party should ensure that its commitment to primary health care, including implementation of the Integrated Management of Childhood Illnesses strategy, is met by the adequate allocation of human and financial resources and that all children, especially from the most vulnerable groups, have access to health care. The State party should undertake awareness-raising campaigns to ensure families are adequately informed of the need to register at polyclinics.

### *Paragraph 314*

In the light of article 38 and other relevant articles of the Convention, it is recommended that the State party at all times ensure respect for human rights and humanitarian law aimed at the protection

## CHILDREN'S RIGHTS - HEALTH

and care of children affected by armed conflict, and provide care and physical rehabilitation and psychological recovery measures for these children.

*See also:*

- Slovakia, CRC, CRC/C/100 (2000) 100 at para. 575.
  
- Colombia, CRC, CRC/C/100 (2000) 64 at paras. 361, 382 and 383.

*Paragraph 361*

Care and rehabilitation programmes should be established for child victims of torture and ill-treatment.

*Paragraph 382*

It is of concern that the State party has one of the largest internally displaced populations in the world, forced to leave their home towns owing to the high level of violence in certain regions of the country. Concern is also expressed about the social deprivation faced by these populations, mainly composed of women and children, especially their limited access to housing, health services and education.

*Paragraph 383*

The highest priority should be given to the protection of the rights of children belonging to internally displaced groups. In this regard, the Committee endorses the recommendations made in the reports of the Special Representative of the Secretary-General on Internally Displaced Persons to the Commission on Human Rights on the situation in the State party (see E/CN.4/2000/83/Add.1 and Add. 2), and recommends that the State party, in cooperation with the international community, urgently follow up these recommendations, in particular that on the incorporation of the Guiding Principles on Internal Displacement (E/CN.4/1998/53/Add.2) in the State party's legislation and policies on internally displaced persons.

- Central African Republic, CRC, CRC/C/100 (2000) 77 at paras. 416, 451-454, 457-462, 464, 477 and 478.

*Paragraph 416*

In the light of article 4 of the Convention, it is recommended that the State party pursue its goals to increase budgetary allocations in the health and education sectors to at least 25 per cent of the national budget and to ensure adequate resource distribution for the implementation of the Convention as a whole.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 451*

Concern is expressed at the very high mortality rate among young children and the high maternal mortality rate, the high level of serious illnesses, problems related to malnutrition among children and mothers, low immunization rates and poor access to safe drinking water. The charging of fees for basic health care, and particularly prenatal and maternal care, may limit the access of disadvantaged children and their mothers to health services.

### *Paragraph 452*

Every additional effort should be made to address urgent health concerns among children and adults and to improve access for the whole population, including poor families, to health services. The State party is urged to consider and apply means through which charges for health services can be removed or reduced for disadvantaged children and mothers and to improve the decentralization of effective health services. Free medical assistance should be available to pregnant women, including the assistance of trained professionals during childbirth.

### *Paragraph 453*

Deep concern is expressed about the high level of HIV/AIDS infection among children or their parents or other persons, such as teachers, with a particular responsibility towards children.

### *Paragraph 454*

The State party is urged to strengthen its efforts to combat HIV/AIDS infection, including through efforts to combat tuberculosis. The State party is also urged to consider ways of minimizing the impact upon children of HIV/AIDS-related deaths of parents, teachers and others, in terms of children's reduced access to a family life, to emotional care and education.

### *Paragraph 457*

Concern is expressed at the limited availability of health assistance for adolescents and of reproductive health education and assistance for adolescents and adults. The number of pregnancies and the incidence of sexually transmitted diseases, including HIV/AIDS, among adolescents are also of concern.

### *Paragraph 458*

The State party should improve the provision of health assistance to adolescents and of reproductive health education and assistance to both adolescents and adults. Special efforts should be made to address the incidence of pregnancy and sexually transmitted diseases among adolescents including through the provision of child-friendly counselling.

### *Paragraph 459*

Concern is expressed about the lack of mental health assistance for children and about the situation of mental health among children and adolescents, particularly in the context of widespread family instability and the armed mutinies.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 460*

The State party should ensure the availability of mental health assistance to children, taking into consideration the developmental needs of children and addressing in particular those children affected by family instability, HIV/AIDS and the armed mutinies.

### *Paragraph 461*

The rights of children with disabilities are respected to only a very limited extent and this is of concern. Particular concern is expressed about the need for improved access for children with disabilities to specialized health and care assistance.

### *Paragraph 462*

The State party should improve the overall protection of the rights of children with disabilities including, in particular, through the improvement of access for children with disabilities to specialized health and care assistance. The State party is urged to apply the recommendations made during the Committee's day of general discussion on children with disabilities and the relevant United Nations guidelines on disability.

### *Paragraph 464*

The State party is encouraged to make every effort to ensure that, at a minimum, children from poorer families and communities, including rural communities, have access to basic health and other services which are either free or within their means.

### *Paragraph 477*

The incidence of drug abuse by children in the State party, including the sniffing of petrol and glue is of concern.

### *Paragraph 478*

Measures should be implemented to prevent and eliminate the abuse of drugs by children, including the sniffing of petrol and glue, *inter alia* through sensitization of children and adults about the harm caused by such abuse and through the implementation of measures providing for the care, rehabilitation and social reintegration of child drug abusers.

- Marshall Islands, CRC, CRC/C/100 (2000) 89 at paras. 511, 512, 517, 518, 527 and 528.

### *Paragraph 511*

The principle of non-discrimination (art. 2) is not fully implemented for children living in the outer islands and in poor urban communities, especially with regard to their access to adequate health and educational facilities.

### *Paragraph 512*

## CHILDREN'S RIGHTS - HEALTH

The State party should collect disaggregated data to enable effective monitoring of potential discrimination, in particular against girls, children living in poor urban communities and in the outer islands and those with disabilities.

### *Paragraph 517*

It is noted with concern that children living in the outer islands do not have adequate access to information and material from a diversity of national and international sources aimed at promoting the child's development and physical and mental health.

### *Paragraph 518*

It is recommended that the State party reinforce measures for the production of programmes and books for children and disseminate them within the country, in particular the outer islands, and in this regard envisage taking steps for the introduction of the use of computers in schools.

### *Paragraph 527*

The survival and development of children within the State party continues to be threatened by illnesses caused by inadequate sanitation, hygiene and diet, and vitamin A and iodine deficiencies are widespread. Concern is also expressed about the insufficient number of local trained health workers; wide discrepancies in the distribution of health professionals between communities; limited access to health services in the outer island communities; and poor sanitation and limited access to safe drinking water, particularly in recently developed urban areas and the outer islands communities.

### *Paragraph 528*

The State party should allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of children and facilitate greater access to primary health services. The State party is encouraged to continue its efforts to reduce the incidence of child and infant mortality and to undertake additional measures to increase access to safe drinking water and to improve sanitation. Further, with reference to the lack of trained local health workers and the tendency for these workers to emigrate, the State party should reinforce its efforts to recruit and train more health workers and take appropriate measures to encourage those trained abroad to return after their training and practice in the Marshall Islands, in particular in the outer islands.

- Slovakia, CRC, CRC/C/100 (2000) 100 at paras. 562, 563, 578, 579, 582 and 583.

### *Paragraph 562*

Children belonging to the Roma minority experience *de facto* discrimination vis-à-vis several provisions of the Convention, particularly the right to the highest attainable health (art. 24), the right to an adequate standard of living (art. 27) and the right to education (art. 28).

### *Paragraph 563*

## CHILDREN'S RIGHTS - HEALTH

All necessary measures should be taken to ensure that all children within the jurisdiction enjoy all the rights set out in the Convention without discrimination, in accordance with article 2. The Committee endorses the recommendations made by the Committee on the Elimination of Racial Discrimination in its concluding observations (CERD/C/57/CRP.3/Add.4), and its general recommendation XXVII on discrimination against Roma, and recommends that the State party implement them.

### *Paragraph 578*

While acknowledging the measures taken to improve the health status of children, in particular initiatives related to the reduction of infant mortality, concerns remain about the persistence of regional disparities, particularly in relation to children belonging to the most vulnerable groups (e.g. Roma), in access to health care and the high rates of malnutrition of children under 5 and those in school.

### *Paragraph 579*

The State party should continue to undertake measures to ensure that all children, without discrimination, have adequate access to health-care services.

### *Paragraph 582*

The high levels of pollution in industrialized areas are of concern, particularly air pollution and water and food contamination caused by nitrates, pesticides and heavy metals.

### *Paragraph 583*

In light of article 24 (c) of the Convention, all appropriate measures should be taken to prevent and combat the dangers and risks to the health of children posed by environmental pollution.

- Comoros, CRC, CRC/C/100 (2000) 110 at paras. 630, 631, and 633-635.

### *Paragraph 630*

The high infant and maternal mortality rates, the large number of births taking place outside the hospital system and the high rate of malnutrition among children are matters of concern. Children's limited access to the health services are of concern, especially with regard to the shortage of medication and technical equipment, and of medical and public health personnel. The spread of the HIV/AIDS epidemic and its direct and indirect effects on children, as well as the general lack of attention to the health problems of adolescents, are also matters of concern.

### *Paragraph 631*

Efforts should be increased in the health sector, including through the strengthening of data collection and disease surveillance mechanisms, the allocation of adequate resources and the reinforcement of

## CHILDREN'S RIGHTS - HEALTH

training and support for health sector staff. The State party should ensure equitable access to existing health-care services and make every effort to increase vaccination coverage. The State party is urged to adopt, in cooperation with international agencies, effective plans to combat childhood and maternal mortality, such as the WHO/UNICEF Integrated Management of Childhood Illness scheme.

### *Paragraph 633*

The State party should study and effectively address the health problems of adolescents, in particular in the area of reproductive health education and the prevention of teenage pregnancies.

### *Paragraph 634*

There is a lack of legal protection, programmes, facilities and services for children with disabilities that are aimed at facilitating their development and full integration in society.

### *Paragraph 635*

The State party should conduct an assessment of the number of children with disabilities, the type of disabilities and the needs of children with disabilities with regard to rehabilitative and other forms of care.

- Latvia, CRC, CRC/C/103 (2001) 9 at paras. 59, 62 and 63.

### *Paragraph 59*

Measures should be taken to provide support services to children in legal proceedings and for the physical and psychological recovery and social reintegration of the victims of rape, abuse, neglect, ill-treatment and violence, in accordance with article 39 of the Convention.

### *Paragraph 62*

While noting that the State party started a process focusing on preventive health care, the situation of maternal, child and reproductive health is poor. In particular, it is noted with concern that infant mortality rates are high. Child morbidity, in particular the high incidence of tick-induced encephalitis and diphtheria is a concern. It is noted that the immunization programme has been delayed because sufficient funds were not available and that it is no longer available in schools.

### *Paragraph 63*

Appropriate resources should be allocated and comprehensive policies and programmes developed to improve the health situation of all children, without discrimination. With reference to the immunization programme, the State party should look to international cooperation for support in the manufacture and procurement of vaccines.

## CHILDREN'S RIGHTS - HEALTH

- Liechtenstein, CRC, CRC/C/103 (2001) 19 at paras. 108 and 109.

### *Paragraph 108*

The comprehensive approach to implementing primary prevention of drug abuse among adolescents is noted with interest. However, concerns remain about the health problems faced by adolescents within the State party.

### *Paragraph 109*

The State party should continue with and expand to other areas, the comprehensive approach of primary prevention, in particular concerning alcohol abuse and also with regard to the possibility of adolescents making independent decisions in health matters that directly affect them. Furthermore, the State party should continue and strengthen its activities to prevent HIV/AIDS and STDs and teenage pregnancies and to pay special and increased attention to adolescent victims of road accidents.

- Ethiopia, CRC, CRC/C/103 (2001) 24 at paras. 168, 169, 172-177, 186 and 187.

### *Paragraph 168*

Deep concern is expressed at the extremely high infant mortality rates and low life expectancy in the State party. In particular, concern is expressed at the high incidence of malaria and tuberculosis and their effects upon children, at the fragile health infrastructure, limited health awareness among the public and the limited implementation of the 1993 Health Policy and the 1994 Social Policy. The implementation of health policies has been slow and only limited progress has been achieved in this area.

### *Paragraph 169*

The State party is urged to ensure that access to primary health care services is increased, that the national health infrastructure is strengthened and that public health education programmes are used to lower infant mortality rates and raise life expectancy. Assistance should be sought from the World Health Organization, UNICEF and the United Nations Development Programme in this regard.

### *Paragraph 172*

Concern is expressed at the relative absence of information on the situation of children with disabilities in the State party and the absence of programmes in favour of children with disabilities.

### *Paragraph 173*

The State party should urgently gather disaggregated data on the numbers and situation of children with disabilities in Ethiopia, and make greater efforts to ensure respect for their rights.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 174*

Concern is expressed at the large number of children with HIV/AIDS or who are affected by the HIV/AIDS-related illness or death of their parents and other family members, and at the need for concerted action by the State party.

### *Paragraph 175*

The State party is urged to make efforts to remain informed of the scale of the HIV/AIDS problem in the country, to reduce the spread of HIV/AIDS and to provide assistance to children with HIV/AIDS and to children whose parents and other family members have HIV/AIDS. The State party should give particular attention to HIV/AIDS orphans and to ensuring that children with HIV/AIDS are not discriminated against. It is recommended that the State party make use of educational measures.

### *Paragraph 176*

The insufficient provision for adolescent health care, the high incidence of early pregnancy, and the incidence of sexually transmitted diseases are matters of concern.

### *Paragraph 177*

Every effort should be made to improve adolescent health services, to lower the incidence of early pregnancy and to lower the incidence of sexually transmitted diseases through, *inter alia*, improved reproductive health education and child-friendly counselling services.

### *Paragraph 186*

Concern is expressed at the difficult situation faced by refugee and internally displaced children and their families in the State party, including in terms of their access to education and health services and in terms of family reunification.

### *Paragraph 187*

The State party should continue and strengthen its efforts to provide assistance to refugee and internally displaced children and their families, including with regard to education and health services and family reunification and reinstallation.

### *See also:*

- Colombia, CRC, CRC/C/100 (2000) 64 at paras. 354 and 355.
  
- Egypt, CRC, CRC/C/103 (2001) 36 at paras. 226, 227 and 235-239.

### *Paragraph 226*

Concern is expressed at the large disparities in the enjoyment of economic and social rights,

## CHILDREN'S RIGHTS - HEALTH

particularly health and education, by children living in rural areas and regions lagging behind in socio-economic development.

### *Paragraph 227*

The State party should take all necessary measures to ensure that all children within its jurisdiction enjoy all the rights set out in the Convention without discrimination, in accordance with article 2. Resources and social services for children belonging to the most vulnerable groups, especially in areas which lack basic services, should be prioritized and targeted.

### *Paragraph 235*

With regard to the situation of children with disabilities, greater efforts should be made to promote community-based rehabilitation programmes and inclusive education; to address geographical disparities in the distribution of services (i.e. in rural areas, and regions such as Upper Egypt); and to ensure the provision of services for children under four years, as well as severely mentally disabled children. The State party is encouraged to undertake greater efforts to make available the necessary resources and to seek assistance from UNICEF, WHO and relevant NGOs, among others.

### *Paragraph 236*

The high incidence of anaemia and parasitic infections among children, particularly in rural areas is of concern.

### *Paragraph 237*

The State party should improve its health infrastructure and continue to cooperate and seek assistance from UNICEF and WHO, among others.

### *Paragraph 238*

Concern is expressed at the insufficient information available in relation to adolescent health, such as access to reproductive health services, STDs and HIV/AIDS prevention programmes, mental health counselling services and substance abuse education.

### *Paragraph 239*

The State party should undertake a comprehensive study to understand the nature and extent of adolescent health problems and, with the full participation of adolescents, use this as a basis to formulate adolescent health policies and programmes. In light of article 24, adolescents should have access to and be provided with reproductive health education and child-friendly counselling and rehabilitation services.

### *See also:*

- Islamic Republic of Iran, CRC, CRC/C/97 (2000) 8 at paras. 64 and 65.
- Saudi Arabia, CRC, CRC/C/103 (2001) 71 at paras. 411 and 412.

## CHILDREN'S RIGHTS - HEALTH

- Lithuania, CRC, CRC/C/103 (2001) 47 at paras. 272, 273, 286-291, 300, 301 and 303.

### *Paragraph 272*

The principle of non-discrimination is not being fully implemented for children living in vulnerable families and in institutions, children with disabilities, Roma children, refugee and asylum-seeking children and children living in rural areas, in particular with regard to their access to adequate health and educational facilities.

### *Paragraph 273*

The State party should collect disaggregated data and other information in order to identify discrimination against children, in particular those belonging to the above-mentioned vulnerable groups, with a view to developing comprehensive strategies aimed at ending all forms of discrimination.

### *Paragraph 286*

The high rates of child morbidity, in particular the increase in cases of tuberculosis, and the low rates of breastfeeding are matters of concern. Further, it is noted that there is a high rate of child deaths due to traumas and accidents, in particular motor vehicle accidents, and that children are particularly vulnerable to the ill effects of contaminants in the soil and air. The growing rates of suicide among children and youth are noted with concern.

### *Paragraph 287*

The State party should allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of all children, including measures aiming at a safe and healthy environment. Further, measures to raise awareness about and prevent deaths from accidents and suicide among children and youth should be taken and enforced.

### *Paragraph 288*

It is of concern that children with disabilities living in rural areas do not have access to the same level of services and medicines as children living in other parts of the country and that not all medicines are available for free. The large number of children with disabilities who are institutionalized is a matter of concern as is the general lack of resources and specialized staff for children with disabilities.

### *Paragraph 289*

The State party should allocate the necessary resources for programmes, medicines, trained staff and facilities for all children with disabilities, especially those children living in the rural areas, and develop community-based programmes in order to allow children to stay at home with their families.

### *Paragraph 290*

Concern is expressed about the following: the increase of cases of sexually transmitted diseases

## CHILDREN'S RIGHTS - HEALTH

(STDs) and HIV/AIDS; the growing abuse of alcohol and tobacco; the frequency of unplanned pregnancies and abortions among youth. Note is taken of the limited availability of programmes and services in the area of adolescent health including mental health, in particular treatment and rehabilitation programmes, and of prevention and information programmes, especially on reproductive health, at school.

### *Paragraph 291*

The State party should continue to increase its efforts to promote adolescent health, including mental health and reproductive health, and to develop a programme for the systematic sexual education of adolescents at school. A comprehensive and multidisciplinary study should be undertaken to determine the scope of adolescent health problems, including the negative impact of STDs, HIV/AIDS and alcohol abuse, in order to develop adequate policies and programmes. Further measures, including the allocation of adequate human and financial resources, should also be undertaken to evaluate the effectiveness of training programmes in health education, in particular reproductive health education, and to develop youth-friendly counselling, care and rehabilitation facilities that are accessible without parental consent, when this is in the best interests of the child.

### *Paragraph 300*

The reported increasing use of drugs, including psychotropic substances, among children and adolescents in the State party, in particular those living in the street is of concern.

### *Paragraph 301*

The State party should undertake studies on the abuse of drugs among children and adolescents, in particular those living in the street, with a view to understanding the extent, scope and nature of these practices, adopting adequate measures and policies and changing attitudes. Further, awareness raising and preventive measures should be pursued, including drug education in schools. More resources should be allocated for treatment and rehabilitation services specifically tailored for children and adolescents.

### *Paragraph 303*

The State party should support existing mechanisms to ensure that children living in the streets are provided with food, clothing, housing, health care and education, including vocational and life-skills training. Moreover, the State party should ensure that these children are provided, whenever necessary, with rehabilitation services for physical, sexual and substance abuse; protection from police brutality; and services for reconciliation with their families.

### *See also:*

- Latvia, CRC, CRC/C/103 (2001) 9 at paras. 50, 51, 64-67 and 77.

## CHILDREN'S RIGHTS - HEALTH

- Lesotho, CRC, CRC/C/103 (2001) 57 at paras. 333-336 and 353-356.

### *Paragraph 333*

Concern is expressed about the very high minimum age for consulting a doctor without parental consent.

### *Paragraph 334*

Existing legislation should be reviewed and amended as appropriate in order to address concerns related to the minimum age for consulting a doctor without parental consent.

### *Paragraph 335*

The State party has not taken measures to address discrimination against children who are born out of wedlock, those affected by HIV/AIDS, children in remote rural areas, children born of incestuous relationships, institutionalized children, pregnant girls, children with disabilities, street children and children of ethnic minority groups. Concern is expressed that many children do not have adequate or equal access to education and health services, in particular children in the vulnerable groups mentioned above.

### *Paragraph 336*

The State party is urged to strengthen its efforts to ensure full implementation of the principle of non-discrimination by amending domestic legislation and increasing awareness among the population. Discrimination against vulnerable groups of children should be addressed effectively by improving their access to education and health services.

### *Paragraph 353*

The poor health situation of children in the State party is noted with concern, particularly the limited access to basic health care for children (especially in rural and mountainous areas), high maternal, child and infant mortality rates, low and decreasing immunization levels, high rates of malnutrition, poor sanitation and limited access to safe drinking water, especially in rural communities. The health risk linked to male circumcision is also a matter of concern. Concern is also expressed about the low and decreasing number of trained health personnel, including mental health and social welfare professionals, which is contributing to the insufficient provision of essential services.

### *Paragraph 354*

It is noted that the State party is currently reviewing its Social Welfare Policy. The State party is urged to pursue its efforts to ensure that the new policy covers all groups of vulnerable children. The State party should ensure that the policy provides an effective basis for addressing the challenges of poverty and HIV/AIDS. Appropriate resources should be allocated and comprehensive policies and programmes should be developed to improve health infrastructure, to increase the number of trained health and welfare, including mental health, professionals, to improve the health situation of children,

## CHILDREN'S RIGHTS - HEALTH

to facilitate greater access to primary health services, to reduce the incidence of maternal, child and infant mortality, to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children, and to improve access to safe drinking water and sanitation. Health risks associated with male circumcision should also be addressed.

### *Paragraph 355*

Extreme concerns exist about the alarmingly high incidence and increasing prevalence of HIV/AIDS amongst adults and children, in particular amongst teenage girls, and the high incidence of teenage pregnancy and sexually transmitted diseases (STDs). Furthermore, concern is expressed about the insufficient availability of adolescent health programmes and services and about the incidence of suicide, violence, sexual exploitation and abortion, alcohol consumption and tobacco and dagger smoking.

### *Paragraph 356*

The State party is strongly urged to fully implement the National AIDS Strategic Plan 2000/2001-2003/2004 and the Policy Framework on HIV/AIDS Prevention, Control and Management as soon as possible and to devote to them ample resources to ensure their success. A comprehensive and multi-disciplinary study should be undertaken to understand the scope of adolescent health problems, including the negative impact of early pregnancy, as well as the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Particular attention should be given to the secondary consequences of HIV/AIDS, such as an increase in child-headed households following the death of adult family members. Additionally, further measures should be undertaken, including the allocation of adequate human and financial resources, to develop youth-friendly counselling, care and rehabilitation facilities for adolescents, especially girls, which would be accessible by them without parental consent. The State party should increase its efforts to promote adolescent health policies, including mental health, particularly with respect to suicide prevention. Reproductive health education and counselling services should also be strengthened. All training programmes on reproductive health should address boys as well as girls. Furthermore, the State party should implement measures to discourage the abuse of alcohol and the smoking of tobacco and dagger by adolescents.

- Palau, CRC, CRC/C/103 (2001) 79 at paras. 450, 451, 464, 465 and 469.

### *Paragraph 450*

It is noted with concern that the principle of non-discrimination is not adequately implemented, in particular with respect to vulnerable groups of children, especially children of non-Palauan parentage, including children of immigrant families and children adopted through inter-country adoptions; children living in the outer islands; and children living and/or working on the streets. Particular concern is expressed about their limited access to adequate health, education and other social services.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 451*

The State party should increase its efforts to ensure the implementation of laws, policies and programmes guaranteeing the principle of non-discrimination and full compliance with article 2 of the Convention, particularly as it relates to the vulnerable groups. In particular, all appropriate measures, including those of a legal nature, should be taken to ensure that non-Palauan children are afforded equal and adequate access to health, education and social services.

### *Paragraph 464*

The decline in breastfeeding, especially among working mothers, is of concern. Increasingly poor nutrition practices and food choices are noted with concern, including within the school lunch programme, as well as the high incidence of overweight and obesity among children, especially those living in urban areas. It is noted that abortion is illegal except on medical grounds and concern is expressed regarding the best interests of child victims of rape and/or incest in this regard. Concern is also expressed about the inadequate environmental health conditions in the State party, particularly as regards solid waste management.

### *Paragraph 465*

The State party should reinforce its efforts to promote proper breastfeeding practices, especially among working mothers and in the work environment. All appropriate measures to promote and encourage healthy nutritional practices should be taken in order to prevent and address overweight and obesity among children. Legislation concerning abortion should be reviewed with a view to guaranteeing the best interests of child victims of rape and incest. Solid waste management should be improved.

### *Paragraph 469*

The State party is encouraged to consider including mental disabilities within the definition of disabilities; to ensure that children with such concerns are provided adequate care, services and rehabilitation; and to guarantee adequate human and financial resource allocations.

- Dominican Republic, CRC, CRC/C/103 (2001) 91 at paras. 503, 504, 507, 508 and 516-519.

### *Paragraph 503*

Deep concern is expressed at the discrimination against children of Haitian origin born in the State party's territory or belonging to Haitian migrant families, especially their limited access to housing, education and health services.

### *Paragraph 504*

In the light of article 2 and other related articles of the Convention, the State party should take, as a matter of priority, effective measures to ensure that children of Haitian origin born in the State party's territory or belonging to Haitian migrant families have the same access to housing, education

## CHILDREN'S RIGHTS - HEALTH

and health services as other children.

### *Paragraph 507*

While efforts in the area of birth registration are noted, concerns remain that a large percentage of children are not registered and are not provided with identity cards, thus preventing them from fully enjoying their rights. In particular, concern is expressed about the situation of children of Haitian origin or belonging to Haitian migrant families whose right to birth registration has been denied in the State party. As a result of this policy, those children have not been able to enjoy fully their rights, such as to access to health care and education.

### *Paragraph 508*

In the light of article 7 of the Convention, the State party should strengthen and increase its measures to ensure the immediate registration of the birth of all children. Special emphasis should be placed on the registration of children belonging to the most vulnerable groups, including children of Haitian origin or belonging to Haitian migrant families.

### *Paragraph 516*

While taking note of achievements in the area of basic health and welfare, the very high infant and under-five mortality rates and the prevalence of malnutrition among children remain of concern. Concern is also expressed at the limited access to health centres, in particular in rural areas. The persistence of health problems related to insufficient access to safe water and sanitation are also matters of concern.

### *Paragraph 517*

All appropriate measures should continue to be taken to improve the health infrastructure, including through international cooperation, to ensure access to basic health care and services for all children and to increase access to safe drinking water and sanitation. More concerted efforts need to be taken to combat malnutrition and to ensure the adoption and implementation of a national nutritional policy and action plan for children.

### *Paragraph 518*

Concern is expressed at the high teenage pregnancy and maternal mortality rates; at the insufficient access by teenagers to reproductive health and sexual education and counselling services, including outside schools; at the increasing rate of HIV/AIDS, STDs and drug and substance abuse (e.g., glue-sniffing) among children and adolescents; and at the lack of information on mental health.

### *Paragraph 519*

A comprehensive and multi-disciplinary study should be undertaken to understand the scope of the phenomenon of adolescent health problems, especially early pregnancies and maternal mortality. The State party should adopt comprehensive adolescent health policies and strengthen reproductive

## CHILDREN'S RIGHTS - HEALTH

health and sexual education and counselling services. The State party should also continue taking measures for the prevention of HIV/AIDS and take into consideration the Committee's recommendations adopted on its Day of General Discussion on "Children living in a world with HIV/AIDS" (CRC/C/80). Both financial and human efforts should be undertaken for the development of child friendly counselling services, as well as care and rehabilitation facilities for adolescents. Measures to combat and prevent substance abuse among children should be strengthened. The development of mental health services is recommended.

- Denmark, CRC, CRC/C/108 (2001) 10 at paras. 68 and 69.

### *Paragraph 68*

While noting efforts already made by the State party, concern remains about the health problems faced by adolescents, particularly the high incidence of eating disorders, especially among teenage girls; drug, alcohol and tobacco abuse; and suicide.

### *Paragraph 69*

The State party should reinforce its efforts to address these adolescent physical and mental health concerns, through preventive education, counselling and rehabilitative programmes to strengthen self-confidence among young people and prevent behaviour that could negatively affect their health.

- Turkey, CRC, CRC/C/108 (2001) 18 at paras. 133, 134, 137, 139 and 140.

### *Paragraph 133*

Concern is expressed regarding the high rates of early pregnancy, the rise in the number of children and young people using tobacco and drugs, the increase in cases of sexually transmitted diseases (STDs), in particular syphilis, and the growing number of cases of HIV/AIDS among young people. Furthermore, the limited availability of programmes and services in the area of adolescent health, including mental health, in particular treatment and rehabilitation programmes for drug addiction, is noted. The lack of sufficient prevention and information programmes, especially on reproductive health, in schools is also noted.

### *Paragraph 134*

Efforts should be increased to promote adolescent health, including mental health, policies particularly with respect to reproductive health and substance abuse, and the programme for health education in schools should be strengthened. It is suggested that a comprehensive and multidisciplinary study be undertaken to understand the scope of adolescent health problems, including the negative impact of STDs and HIV/AIDS, in order to be able to develop adequate policies and programmes. It is also

## CHILDREN'S RIGHTS - HEALTH

recommended that the State party undertake further measures, including the allocation of adequate human and financial resources, to evaluate the effectiveness of training programmes in health education, in particular as regards reproductive health, and to develop youth-sensitive counselling, care and rehabilitation facilities that are accessible without parental consent, when this is in the best interests of the child.

### *Paragraph 137*

It is of concern that only asylum-seekers from European countries are granted refugee status, and thus, child asylum-seekers of non-European origin, who represent the majority, can be granted asylum only on a temporary basis until they find a third country and, therefore, do not always have access to education and health care. It is noted that personnel dealing with child asylum-seekers and refugees do not have training on child rights issues, in particular on how to deal with children who are unaccompanied and in cases of family reunification, as well as with children who come from areas affected by war and who may have been victims of traumatic experiences.

### *Paragraph 139*

The large number of internally displaced children who were forced to leave their home towns in 1990 owing to the high level of violence in the south-east region is of concern. Concern is also expressed at their limited access to housing, health services and education.

### *Paragraph 140*

In line with the Guiding Principles on Internal Displacement (E/CN.4/1998/53/Add.2), the State party should ensure that internally displaced children and their families have access to appropriate health and education services and adequate housing. Further, data and statistics should be collected in order to know how many children are displaced and what their needs are, with a view to developing adequate policies and programmes.

### *See also:*

- Mauritania, CRC, CRC/C/111 (2001) 8 at paras. 68 and 69.
- Democratic Republic of the Congo, CRC, CRC/C/108 (2001) 31 at paras. 197-206, 211, 212 and 219-222.

### *Paragraph 197*

The poor health situation of children, the very limited access of most children to adequate health care, including mental health care, and the very high rates of maternal and infant mortality, the high percentage of children suffering from malnutrition, the low level of breastfeeding and the lack of an adequate family planning policy are matters of deep concern. Particular concern is expressed at the weaknesses in the health infrastructure, including a lack of appropriate equipment within many health

## CHILDREN'S RIGHTS - HEALTH

centres, the limited quality of service and low immunization rates.

### *Paragraph 198*

It is recommended that the State party improve the access of children and mothers to health care, including primary and mental health care, continue and strengthen its vaccination campaign, and develop and implement a clear health policy with regard to children including the promotion of breastfeeding, the implementation of adequate family planning programmes and action to reduce and prevent malnutrition. It is further recommended that assistance be sought from UNICEF and WHO in this regard.

### *Paragraph 199*

Deep concern is expressed about the high numbers of children with preventable and other disabilities, and the fact that these figures are increasing. Noting the very small number of children with disabilities who have access to education, deep concern is expressed that the rights of children with disabilities to education, as well as health services are not respected and that they do not receive adequate assistance towards future development.

### *Paragraph 200*

Measures should be developed and implemented in order to guarantee respect for the rights of children with disabilities, including improving their access to health and education services and vocational training.

### *Paragraph 201*

Deep concern is expressed at the very high number of children affected by HIV/AIDS through direct infection, including mother-to child transmission, or following the illness or death of a parent. There is also concern about provisions in the Criminal Code banning contraception given the growing need to prevent transmission of HIV/AIDS.

### *Paragraph 202*

Every effort should be made to reduce the incidence of HIV/AIDS by preventing its transmission among the population through the procurement of suitable medication, a review of legislation, and suitable prevention campaigns. It is further recommended that assistance be provided to children and their families affected by HIV/AIDS. Assistance should be sought from UNICEF and WHO in this regard.

### *Paragraph 203*

The decline in access to health services, including mental and reproductive health services, for adolescents and the lack of information on adolescent health problems are matters of concern. Concern is further expressed at levels of HIV/AIDS among adolescents, sexually transmitted diseases and reports of high levels of early pregnancy.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 204*

The State party should strengthen its efforts to provide adolescents with easy and adequate access to all child-friendly health care services they may need, including mental and reproductive health services, and should make an assessment of adolescent health problems in order to develop and implement a comprehensive policy in this regard. It is recommended that assistance be sought from UNFPA, WHO and UNICEF.

### *Paragraph 205*

The practice of female genital mutilation and the existence of food taboos, such as that which forbids children and mothers from eating certain essential food items, are matters of concern.

### *Paragraph 206*

In light of article 24 of the Convention, the State party should prohibit and take action to end the practice of female genital mutilation, and raise awareness of its harmful effects. The State party should eliminate harmful food taboos by promoting awareness about their detrimental effects on the health of children and women. Assistance should be sought from WHO and UNICEF in this regard.

### *Paragraph 211*

The very high number of children and their families internally displaced within the State party as a result of the armed conflict is a matter deep concern. Concern is also expressed at the separation of children from their families and the very limited access of displaced children to adequate food and to health and education services.

### *Paragraph 212*

Urgent measures should be implemented to protect civilian populations from further internal displacement, to ensure that those children and their families who have already been displaced have access to food, education and health assistance, and to support the return home of internally displaced populations and their reintegration into their communities.

### *Paragraph 219*

The high number and difficult situation of children living in and/or working on the street is of concern. Concern is expressed about the lack of access of these children to food and health and education services and the exposure of these children to several risks, including those related to substance abuse, violence, sexually transmitted illnesses and HIV/AIDS.

### *Paragraph 220*

The State party is urged to strengthen its assistance to children living in and/or working on the street, by studying the causes and implementing preventive measures and improving the protection of children already in this situation, including through the provision of education, health services, food, adequate shelter and programmes to assist children to leave street life.

## CHILDREN'S RIGHTS - HEALTH

### *Paragraph 221*

The number of children abusing substances, such as by inhaling solvents and using cannabis, is of concern.

### *Paragraph 222*

Measures should be implemented to prevent substance abuse by children, including through preventing the sale of such substances to children and addressing factors leading to vulnerability. The State party should pursue its efforts to use information campaigns to alert children and adults to the risks of substance abuse and child victims of substance abuse should be provided with appropriate care, rehabilitation and assistance towards their social reintegration.

- Guatemala, CRC, CRC/C/108 (2001) 47 at paras. 253, 254, 267-272 and 282.

### *Paragraph 253*

It is of concern that the principle of non-discrimination (art. 2) is not fully implemented for children belonging to indigenous groups; urban and rural poor children, girls, children with disabilities, and displaced children, especially with regard to their access to adequate health and educational facilities.

### *Paragraph 254*

All necessary measures should be taken to end discrimination. In this respect, the State party is encouraged to monitor discrimination against children, in particular those belonging to indigenous groups, urban and rural poor children, girls, children with disabilities, and displaced children, and to develop, on the basis of the results of such monitoring, comprehensive strategies for implementing specific and well-targeted actions aimed at ending all forms of discrimination.

### *Paragraph 267*

Measures such as the launching of a Comprehensive Health Care System (SIAS), the Friendly Hospitals initiative, a national plan for the reduction of maternal and perinatal mortality and a national mother and child programme are positive steps. However, there is concern that the health standard of the children living in Guatemala is inadequate, especially children living in the rural areas and in poor urban areas. In particular, the high infant mortality rates due to nutritional deficiencies, lack of sanitation facilities and limited access to preventive and curative health services, with wide differences between urban and rural areas and between the different ethnic groups, are noted; the high maternal mortality rates, due largely to a high incidence of illegal abortion, are also noted.

### *Paragraph 268*

It is recommended that the State party allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of all children without discrimination, particularly by focusing more on primary-level care and decentralizing the health care system. In particular, to prevent child mortality and morbidity and to address the high maternal mortality rate,

## CHILDREN'S RIGHTS - HEALTH

the provision of adequate antenatal and postnatal health care services and the development of campaigns to provide parents with basic knowledge about child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation, family planning and reproductive health is recommended. The State party is encouraged to look to international cooperation for the full and efficient implementation of the immunization programme. Further, it is recommended that the State party seek technical assistance from, among others, WHO, UNICEF and UNFPA.

### *Paragraph 269*

It is noted that the State party has implemented a number of food and nutrition programmes for children in schools, such as the "Happy Heart" programme. However, by noting the high rates of both chronic and severe malnutrition still affecting, in particular, children under five in rural areas, especially those belonging to indigenous groups, deep concern is expressed that there are no governmental policies to reduce and combat malnutrition among babies and children under five.

### *Paragraph 270*

The Committee reiterates its prior recommendation that the State party develop a comprehensive nutritional programme in order to prevent and combat malnutrition, particularly among children under five, and assess the impact of the programme on those affected, with a view eventually to improving its effectiveness. It is recommended that the State party seek international cooperation from, among others, UNICEF and WHO.

### *Paragraph 271*

Of concern are the high rates of early pregnancy, the rise in the number of children and youths using drugs, the increase in cases of sexually transmitted diseases (STDs), particularly syphilis, and the growing number of cases of HIV/AIDS among youths. Further, the limited availability of programmes and services in the area of adolescent health, including mental health, and the lack of sufficient prevention and information programmes in schools, especially on reproductive health, is noted.

### *Paragraph 272*

Efforts to promote adolescent health policies should be increased, including mental health, particularly with respect to reproductive health and substance abuse, and strengthen the programme of health education in schools should be strengthened. A comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent health problems, including the negative impact of STDs and HIV/AIDS, in order to develop adequate policies and programmes. It is also recommended that further measures be undertaken, including the allocation of adequate human and financial resources, to evaluate the effectiveness of training programmes in health education, particularly in regards to reproductive health, and to develop youth-sensitive and confidential counselling, care and rehabilitation facilities that are accessible without parental consent when this is in the best interests of the child. The State party is encouraged to seek additional technical

## CHILDREN'S RIGHTS - HEALTH

cooperation from, among others, UNFPA, UNICEF, WHO and UNAIDS.

### *Paragraph 282*

The State party should expedite the adoption of a National Plan for the Care of Street Children and ensure that children living in the streets are provided with nutrition, clothing, housing, health care and educational opportunities, including vocational and life-skills training, in order to support their full development. Moreover, the State party should ensure that these children are provided with rehabilitation services for physical, sexual and substance abuse.

### *See also:*

- Turkey, CRC, CRC/C/108 (2001) 18 at paras. 109, 110, 131 and 132.
  - United Republic of Tanzania, CRC, CRC/C/108 (2001) 71 at paras. 378 and 379.
  - Mauritania, CRC, CRC/C/111 (2001) 8 at paras. 64 and 65.
  - Paraguay, CRC, CRC/C/111 (2001) 103 at paras. 506 and 507.
  - Spain, CRC, CRC/C/15/Add. 185 (2002) at paras. 27 and 28.
- 
- Côte d'Ivoire, CRC, CRC/C/108 (2001) 59 at paras. 292, 311, 312, 325-330, 333 and 334.

### *Paragraph 292*

The adoption in 1992 of a national plan of action for the survival, protection and development of Ivorian children for the year 2000, the national plan for health development adopted in November 1996 and the establishment of a committee to consider the plight of children orphaned by AIDS are positive steps for the implementation of the Convention on the Rights of the Child.

### *Paragraph 311*

The situation of children born of incarcerated mothers is of deep concern, as both have very limited access to health services.

### *Paragraph 312*

Children born in prison and their mothers should have access to health services.

### *Paragraph 325*

While taking note of the 1996 National Plan for Health Development, deep concern is expressed about the extremely high and increasing infant mortality rates and low life expectancy in the State party, as well as at the low rates of breastfeeding. It is also of concern that health services in the districts and local areas continue to lack adequate resources (both financial and human). In addition, the survival and development of children within the State party continue to be threatened by early childhood diseases such as acute respiratory infections and diarrhoea. Concern is also raised by the poor situation of sanitation and the insufficient access to safe drinking water, especially in rural

## CHILDREN'S RIGHTS - HEALTH

communities.

### *Paragraph 326*

Efforts should be reinforced to allocate appropriate resources and to develop comprehensive policies and programmes to improve the health situation of children, particularly in rural areas. In this context, the State party should facilitate greater access to primary health services; reduce the incidence of maternal, child and infant mortality; prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children; promote proper breastfeeding practices; and increase access to safe drinking water and sanitation. Additionally, the State party is encouraged to pursue additional avenues of cooperation and assistance for child health improvement with, among others, WHO and UNICEF.

### *Paragraph 327*

Insufficient attention has been given to adolescent health issues, including developmental, mental and reproductive health concerns, and substance abuse. Also of concern is the particular situation of girls, for instance the very high rate of early marriage, which can have a negative impact on their health.

### *Paragraph 328*

A comprehensive study should be undertaken in order to understand the nature and extent of adolescent health problems, with the full participation of adolescents, and it should be used as a basis for the formulation of adolescent health policies and programmes, with particular attention to female adolescents.

### *Paragraph 329*

While noting the existence of the National Programme for the Control of AIDS, Sexually Transmitted Infections and Tuberculosis, the establishment of a special Ministry on HIV/AIDS, and the setting up of a committee on HIV/AIDS orphans, extreme concern remains at the alarmingly high incidence and increasing prevalence of HIV/AIDS amongst adults and children and the resulting large number of children orphaned by HIV/AIDS. The lack of alternative care for these children is also of concern. The large number of teachers dying of HIV/AIDS in the State party is of deep concern.

### *Paragraph 330*

The State party should increase its efforts to prevent HIV/AIDS. The State party is also urged to consider ways of minimizing the impact upon children of the HIV/AIDS-related deaths of parents, teachers and others, in terms of children's reduced access to a family life, to adoption, to emotional care and to education. Technical assistance should be sought from, among others, UNAIDS.

### *Paragraph 333*

The situation of children with physical and mental disabilities is of concern, particularly the limited specialized health care and educational and employment possibilities available for them. It is of further concern that poor health and poverty are leading to an increase in the number of children with

## CHILDREN'S RIGHTS - HEALTH

disabilities.

### *Paragraph 334*

The situation of children with disabilities should be reviewed in terms of their access to suitable health care, educational services and employment opportunities, and a programme of action should be established to address all areas of concern through an inclusive policy. The population should be sensitized to the human rights of children with disabilities. Assistance can be sought from, among others, UNICEF and WHO.

### *See also:*

- Cameroon, CRC, CRC/C/111 (2001) 71 at paras. 371 and 372.
  
- Bhutan, CRC, CRC/C/108 (2001) 85 at paras. 464-467.

### *Paragraph 464*

Problems of access to services and the shortage of trained health workers are matters of concern.

### *Paragraph 465*

The State party should make greater efforts to ensure access to health services and should continue to allocate the required resources to address the shortage of trained health workers.

### *Paragraph 466*

Noting the State party's efforts to address adolescent health, such as the publication of pamphlets on reproductive and mental health, and drug abuse, there is concern about the effectiveness of these efforts.

### *Paragraph 467*

Adolescents should have access to and be provided with education on reproductive health and other adolescent health issues, as well as with child-sensitive and confidential counselling services. Efforts should be strengthened to provide adolescent health education within the educational system.

- Monaco, CRC, CRC/C/108 (2001) 97 at paras. 521, 522, 527 and 528.

### *Paragraph 521*

It is of concern that while Monegasque children have a right to free health care, domestic legislation and practice do not expressly guarantee the same right to all children in the State party, in particular children from disadvantaged backgrounds and who are neither nationals nor residents of the State

## **CHILDREN'S RIGHTS - HEALTH**

party.

### *Paragraph 522*

The State party should ensure that all children within its jurisdiction are treated equally under the law and in particular, that a right to health care be provided to all children.

### *Paragraph 527*

Drug abuse among children is a matter of concern.

### *Paragraph 528*

The State party should implement measures to prevent and end drug abuse among children and to provide rehabilitative assistance, where needed, to children who have abused drugs.