

HEALTH - FAMILY PLANNING

III. CONCLUDING OBSERVATIONS

CERD

- Peru, CERD, A/54/18 (1999) 21 at para. 155.

Note is taken of the information on major shortcomings in the health services provided for the rural population in the Andes and in Amazonia and of the allegations of forced sterilization of women belonging to indigenous communities. It is also noted that there are reports that there is a difference of almost 20 years between the life expectancy of people of indigenous origin and that of the rest of the population.

ICCPR

- Peru, ICCPR, A/52/40 vol. I (1997) 28 at paras. 160 and 167.

Paragraph 160

It is of concern that abortion gives rise to a criminal penalty even if a woman is pregnant as a result of rape, and that clandestine abortions are the main cause of maternal mortality. Those provisions not only mean that women are subject to inhumane treatment but are possibly incompatible with articles 3, 6 and 7 of the Covenant.

Paragraph 167

Peru must ensure that laws relating to rape, sexual abuse and violence against women provide women with effective protection and must take the necessary measures to ensure that women do not risk their lives because of the existence of restrictive legal provisions on abortion.

- Bolivia, ICCPR, A/52/40 vol. I (1997) 35 at para. 212.

The very high level of maternal mortality, much of which arises as a result of illegal abortion, is of concern.

See also:

- Colombia, ICCPR, A/52/40 vol. I (1997) 44 at para. 287.

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- Georgia, ICCPR, A/52/40 vol. I (1997) 40 at para. 239.

That methods of contraception other than abortion are very difficult to obtain is of concern.

- Colombia, ICCPR, A/52/40 vol. I (1997) 44 at para. 300.

Priority should be given to protecting women's right to life by taking effective measures against violence and by ensuring access to safe contraception.

- 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, particularly rape victims who suffer the consequences of such acts for the rest of their lives, is regretted. Such situations are, from both the 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.

- United Republic of Tanzania, ICCPR, A/53/40 vol. I (1998) 57 at para. 399.

The Committee deplores the law in force in Zanzibar, which allows for the imprisonment of both mother and father in the event of an unmarried woman becoming pregnant. This law carries risks to the right to life (art. 6) (through resort to illegal abortion) and to the rights of the child (arts. 23 and 24) if born in such circumstances. This law in Zanzibar should be abolished, and noting in this connection that illegal abortion is a major cause of maternal mortality, a national review should be carried out on the restrictions on abortions (arts. 3, 6 and 26).

- Japan, ICCPR, A/54/40 vol. I (1999) 36 at para. 173.

While the forced sterilization of disabled women has been abolished, the necessary legal steps should be taken to provide a right of compensation to persons who were subjected to forced sterilization.

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- Chile, ICCPR, A/54/40 vol. I (1999) 44 at para. 211.

The criminalization of all abortions, without exception, raises serious issues, especially in light of unrefuted reports that many women undergo illegal abortions which pose a threat to their lives. A legal duty imposed upon health personnel to report on cases of women who have undergone abortions may inhibit women from seeking medical treatment, thereby endangering their lives. State parties have a duty to take measures to ensure the right to life of all persons, including pregnant women whose pregnancies are terminated. Therefore, exceptions to a general prohibition of all abortions should be introduced and the confidentiality of medical information should be protected.

See also:

- Costa Rica, ICCPR, A/54/40 vol. I (1999) 54 at para. 280.

- Lesotho, ICCPR, A/54/40 vol. I (1999) 51 at para. 254.

The Committee is concerned that the law in force in the State party makes abortion illegal except in cases where the woman concerned is of unsound mind or the conception is the result of rape or incest. The abortion law should be reviewed to provide for situations where the life of the woman is in danger.

- Mexico, ICCPR, A/54/40 vol. I (1999) 61 at para. 329.

Measures should be taken to investigate allegations that women seeking employment in foreign enterprises are subjected to pregnancy tests and required to respond to intrusive personal questioning, and that some women employees have been administered anti-pregnancy drugs. Such measures should be taken with a view to ensuring that women whose rights to equality and to privacy have been violated in this way have access to remedies and to preventing such violations from recurring.

- Poland, ICCPR, A/54/40 vol. I (1999) 65 at para. 344.

Policies and programmes promoting full and non-discriminatory access to all methods of family planning should be introduced and sexual education at public schools should be reintroduced.

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- Morocco, ICCPR A/55/40 vol. I (2000) 24 at paras. 100 and 101.

Paragraph 100

Strict prohibitions on abortion, even in cases of rape or incest, and the stigmatization of women who give birth to children outside marriage results in clandestine, unsafe abortions which contribute to a high rate of maternal mortality.

Paragraph 101

Women should be assured full and equal access to family planning services and to contraception, and criminal sanctions should not be applied in such a way as to increase the risk to life and health of women.

- Cameroon, ICCPR, A/55/40 vol. I (2000) 36 at paras. 199 and 200.

Paragraph 199

The criminalization of abortion leads to unsafe abortions which account for a high rate of maternal mortality.

Paragraph 200

Measures must be taken to protect the life of all persons, including pregnant women.

- Mongolia, ICCPR, A/55/40 vol. I (2000) 49 at para. 323.

Many areas of concern remain in relation to discrimination against women and the inability of women fully to enjoy Covenant rights (articles 3 and 26 of the Covenant). Women should be protected from maternal mortality. In particular, attention has been drawn to the acute problem of maternal mortality, due in part to unsafe abortions, and the unavailability of family planning advice and facilities.

- Argentina, ICCPR, A/56/40 vol. I (2001) 38 at para. 74(14).

On the issue of reproductive health rights, the criminalization of abortion deters medical professionals from providing this procedure without judicial order, even when they are permitted to do so by law, *inter alia* when there are clear health risks for the mother or when pregnancy results from rape of mentally disabled women. Discriminatory aspects of the laws and policies in force, which result in disproportionate resort to illegal, unsafe abortions by poor and rural women, are of concern. The State party should take measures to give effect to the Reproductive Health and Responsible Procreation Act of July 2000, by which family planning counselling and contraceptives are to be

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provided, in order to grant women real alternatives. The laws and policies with regard to family planning should be reviewed on a regular basis. Women should be given access to family planning methods and sterilization procedures; and in cases where abortion procedures may lawfully be performed, all obstacles to obtaining them should be removed. Argentine law should be amended to permit abortions in all cases of pregnancy resulting from rape.

- Peru, ICCPR, A/56/40 vol. I (2001) 45 at para. 76(21).

Recent reports of forced sterilizations, particularly of indigenous women in rural areas and women from the most vulnerable social sectors, are of concern. The State party must take the necessary measures to ensure that persons who undergo surgical contraception procedures are fully informed and give their consent freely.

- Guatemala, ICCPR, A/56/40 vol. I (2001) 93 at para. 85(19).

The criminalization of all abortion, with the severe penalties imposed by the legislation in force except where the mother's life is in danger, gives rise to serious problems, especially in the light of unchallenged reports of the serious impact on maternal mortality of clandestine abortions and the lack of information on family planning. The State party has the duty to adopt the necessary measures to guarantee the right to life (art. 6) of pregnant women who decide to interrupt their pregnancy by providing the necessary information and resources to guarantee their rights and amending the legislation to provide for exceptions to the general prohibition of all abortions, except where the mother's life is in danger.

ICESCR

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

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.

- Dominican Republic, ICESCR, E/1997/22 (1996) 44 at para. 233.

The failure of the Government to protect women workers from discrimination and arbitrary dismissal related to pregnancy, including failure to discourage employers from the practice of pregnancy testing, and the failure to develop and promote family-planning services are of concern.

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See also:

- Dominican Republic, ICESCR, E/1998/22 (1997) 43 at para. 214.
- Poland, ICESCR, E/1999/22 (1998) 32 at paras. 150 and 158.

Paragraph 150

It is noted that restrictions have recently been imposed on abortions that exclude economic and social grounds for performing legal abortions. It is of concern that because of this restriction, women in Poland are resorting to unscrupulous abortionists and risking their health in doing so. It is also of concern that family planning services are not provided in the public health-care system so that women have no access to affordable contraception.

Paragraph 158

Every effort should be made to ensure women's right to health, particularly reproductive health. Family planning services should be made available to all persons, including counselling on safe alternatives to contraception and reliable and informative sex education for school-age children.

- Armenia, ICESCR, E/2000/22 (1999) 54 at paras. 305 and 309.

Paragraph 305

Alarm is expressed at the fact that abortion remains the most commonly used means of family planning in the country, owing particularly to inadequate education and the high cost of contraceptives.

Paragraph 309

Family planning programmes should be set up for women, particularly to decrease the incidence of abortion, along with programmes for the prevention and treatment of cancer.

- 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

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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. 391 and 405.

Paragraph 391

Concern is expressed at the fact that the fourth highest cause of death among women in the State party is illegal abortion.

Paragraph 405

The State party is called upon to closely monitor the female mortality rate and to take steps to reduce the incidence of death caused by illegal abortion. In particular, the State party should intensify its educational campaign regarding women's sexual and reproductive health, and include such subjects in school curricula.

- Georgia, ICESCR, E/2001/22 (2000) 30 at paras. 92 and 104.

Paragraph 92

It is noted with concern that there is limited knowledge among the general public with regard to reproductive health issues in general, and in particular with regard to the availability and use of contraceptives.

Paragraph 104

The State party should take steps to improve the awareness and knowledge of the public about reproductive health issues. In this regard, the Government might seek the advice and assistance of international organizations such as WHO, UNAIDS and the United Nations Population Fund.

- Mongolia, ICESCR, E/2001/22 (2000) 53 at para. 273.

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.

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- Sudan, ICESCR, E/2001/22 (2000) 57 at para. 297.

The Committee welcomes the establishment of the Sudan National Committee for the Eradication of Harmful Practices, as well as the State party's various measures to improve the status of women, to alleviate or remove some of the obstacles to their freedom to travel, the Government's active campaign against female genital mutilation and against early marriage, the encouragement of child spacing, safe motherhood, women's and children's rights and reproductive health, and measures to increase the number of women working in government service.

- Honduras, ICESCR, E/2002/22 (2001) 33 at paras. 134 and 155.

Paragraph 134

The problems encountered by the State party in its efforts to implement its reproductive health policy are of concern, including the distribution and use of condoms, as a result of resistance from certain religious institutions and the fact that educational programmes often only target women but not men. In this regard, concern is also expressed at the high rate of teenage pregnancy among young girls who are deprived of the opportunity to continue their education.

Paragraph 155

It is recommended that the State party continue to implement its reproductive health policy, with a particular focus on young persons, and that it develop training programmes and counseling services in this regard for both men and women.

- Republic of Korea, ICESCR, E/2002/22 (2001) 45 at paras. 226 and 253.

Paragraph 226

The continued unequal status of women is noted with deep concern. Persisting problems include the traditional preference for sons, which is manifested in a high incidence of induced abortions of girl fetuses that threaten the reproductive rights of women.

Paragraph 253

In so far as traditional practices pose an obstacle to the fulfilment of some rights or perpetuate discrimination of any kind, including the preference for sons and the abortion of girl fetuses, the State party should carry out large-scale public campaigns to promote understanding among the general public about human rights.

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- Bolivia, ICESCR, E/2002/22 (2001) 52 at paras. 278 and 298.

Paragraph 278

Concern is expressed about the current status of reproductive health rights of women, and particularly the high rate of maternal mortality - the highest in Latin America; that is attributed to illegal abortions and to the absence of medical assistance during child birth.

Paragraph 298

The State party is called upon to take measures to reduce the female mortality rate and in particular to bring about a reduction of deaths caused by illegal abortion and unassisted child birth. In particular, the State party should intensify the implementation of its National Sexual and Reproductive Health Programme, organize educational campaigns regarding women's sexual and reproductive health, and include such subjects in school curricula.

- Senegal, ICESCR, E/2002/22 (2001) 61 at paras. 352 and 373.

Paragraph 352

The rise in clandestine abortions, unwanted pregnancies and the high rate of maternal mortality, which is as high as 500 deaths per 100,000 live births, is of concern.

Paragraph 373

The State party is urged to take remedial action to address the problems of clandestine abortions, unwanted pregnancies and the high rate of maternal mortality. In this regard, the State should undertake more effective reproductive and sexual health programmes in schools and colleges.

- Panama, ICESCR, E/2002/22 (2001) 73 at paras. 458 and 475.

Paragraph 458

There is concern about respect for the rights of women with regard to reproductive and sexual health and, in particular, the high rates of illegal abortion and early pregnancy.

Paragraph 475

Urgent measures should be taken that are aimed at reducing the excessively high maternal mortality rate. The availability and accessibility of reproductive and sexual health information and services should be expanded, so as to encourage a reduction in the rates of illegal abortion and early pregnancy.

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- Ukraine, ICESCR, E/2002/22 (2001) 78 at para. 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.

- Nepal, ICESCR, E/2002/22 (2001) 83 at paras. 549 and 571.

Paragraph 549

It is noted with alarm that abortion is absolutely illegal and is considered a criminal offence, punishable by severe sentences, and cannot be carried out even when pregnancy is life threatening or the result of incest or rape. The fact that the reproductive and sexual health programmes are not implemented because of lack of financial resources is also regretted.

Paragraph 571

Remedial action should be taken to address the problems of clandestine abortions, unwanted pregnancies and the high rate of maternal mortality. In this regard, State party is urged to reinforce reproductive and sexual health programmes, particularly in rural areas, and to allow abortion when pregnancies are life threatening or a result of rape or incest.

CEDAW

- Chile, CEDAW, A/50/38 (1995) 35 at para. 158.

The extremely restrictive legislation on abortion should be revised, taking into account the relationship between clandestine abortion and maternal mortality.

- Uganda, CEDAW, A/50/38 (1995) 61 at para. 340.

Campaigns should be initiated to prevent children from forming a family too early.

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- Peru, CEDAW, A/50/38 (1995) 79 at paras. 446 and 447.

Paragraph 446

The Government should look into the causes of high maternal mortality rates arising from clandestine abortions and review the law on abortion, taking into consideration the health needs of women, and should consider suspending the penalty of imprisonment for women who have undergone illegal abortion procedures.

Paragraph 447

The Government should seek the cooperation of medical associations and of judges and lawyers to consider more expansive use of the therapeutic exception to the criminal prohibition of abortion, in cases of danger to the mother's health.

- Iceland, CEDAW, A/51/38 (1996) 12 at para. 84.

Concern is expressed over the fact that the cost of contraception was not covered under the public health system.

- Cuba, CEDAW, A/51/38 (1996) 26 at para. 224.

The Government should do everything possible to meet the demand for contraceptives. Special information programmes relating to sexually transmitted diseases, especially HIV/AIDS, should be strengthened for young girls, particularly those engaged in prostitution, in keeping with General Recommendation 15.

- Hungary, CEDAW, A/51/38 (1996) 29 at paras. 254 and 260.

Paragraph 254

The state of health of the female population was unsatisfactory when judged by international standards. In particular, the high cost of contraceptives prevented women from freely planning when to have children. The very high increase in the rate of abortions was of concern.

Paragraph 260

Sex education programmes should be offered to all young people and contraceptives should be subsidized in order to promote family planning and reduce the number of abortions.

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- Ukraine, CEDAW, A/51/38 (1996) 32 at paras. 287 and 291.

Paragraph 287

The limited access of rural women to effective, affordable and acceptable methods of family planning is noted. This situation often led large numbers of women to resort to unsafe abortions.

Paragraph 291

The deep demographic crisis in the country, in particular, and the fact that the number of abortions exceeded the number of births is of serious concern.

- Rwanda, CEDAW, A/51/38 (1996) 36 at paras. 321 and 329.

Paragraph 321

The Committee was dismayed at the deep psychological trauma, the unwanted pregnancies and the massive rape of women and girls during the genocide, which resulted in widespread HIV/AIDS and other sexually transmitted diseases. This can eventually lead to further illness and death for thousands of women and girls.

Paragraph 329

Legal provisions that would advance women's reproductive and sexual rights, land titles to women and the right of women to be their children's legal guardian must be put into place.

- Morocco, CEDAW, A/52/38/Rev.1 part I (1997) 11 at para. 78.

Special measures should be taken to reduce maternal mortality rates and protect women's right to life by ensuring full and timely access of all women to emergency obstetric care.

- Saint Vincent and the Grenadines, CEDAW, A/52/38/Rev.1 part I (1997) 21 at paras. 140, 147 and 148.

Paragraph 140

That women had to seek spousal consent for tubal ligation is of concern. Concern is also expressed over the fact that the law precluded safe abortion and prevented women from taking control of their reproductive health.

Paragraph 147

The Government, in collaboration with non-governmental organizations, churches and all individuals and competent authorities, should introduce gender-sensitive reproductive and sexual health

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education, information and counselling in order to curb the very high rate of pre-teen and teenage pregnancy and should integrate reproductive and sexual health services, including family planning, into primary health care.

Paragraph 148

The law on abortion should be reviewed with a view to removing the penal provisions and in order to guarantee safe abortion and motherhood.

- Turkey, CEDAW, A/52/38/Rev.1 part I (1997) 24 at paras. 184 and 196.

Paragraph 184

Spousal consent was required for abortion, a requirement considered to be in contravention of article 15 of the Convention.

Paragraph 196

The requirement of spousal consent for abortion should be reviewed.

- Venezuela, CEDAW, A/52/38/Rev.1 part I (1997) 30 at paras. 236 and 243.

Paragraph 236

The reduction in health budgets, the rise in the maternal mortality rate, the lack of and limited access to family-planning programmes (especially for teenagers), and the lack of statistics on acquired immunodeficiency syndrome are of concern. In addition, legislation that criminalized abortion, even in cases of incest or rape, remained in force.

Paragraph 243

Policies and programmes should be undertaken to halt the rise in the maternal mortality rate and family-planning programmes for teenagers should be developed, in both urban and rural areas.

- Namibia, CEDAW, A/52/38/Rev.1 part II (1997) 82 at paras. 111 and 127.

Paragraph 111

The high number of illegal abortions, the high rate of maternal mortality, and the fact that the inadequacy of the existing law on abortion contributed to the problem are of concern.

Paragraph 127

The necessary measures should be adopted to review the laws containing punitive measures against women who had undergone illegal abortions.

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- Israel, CEDAW, A/52/38/Rev.1 part II (1997) 87 at paras. 167 and 181.

Paragraph 167

Concern is expressed over the fact that the public health system allocated considerable resources to in vitro fertilization, yet contraceptives were not free of charge.

Paragraph 181

Public health services should supply free and accessible contraceptives.

- Argentina, CEDAW, A/52/38/Rev.1 part II (1997) 101 at para. 319.

Legislation which penalized mothers who had abortions should be reviewed.

- Italy, CEDAW, A/52/38/Rev.1 part II (1997) 106 at para. 353.

The limited availability of abortion services for women in southern Italy, as a result of the high incidence of conscientious objection among doctors and hospital personnel, is of concern.

- Bangladesh, CEDAW, A/52/38/Rev.1 part II (1997) 117 at para. 438.

Concern is expressed over the fact that maternal mortality and infant mortality rates remained high and that available primary health and reproductive health services were still inadequate and often inaccessible to poor, rural and marginalized women. Moreover, family planning services still mainly targeted women, and not enough education on male responsibility in reproduction had been introduced.

- Azerbaijan, CEDAW, A/53/38/Rev.1 part I (1998) 7 at paras. 66 and 73.

Paragraph 66

The widespread use of abortion as a basic means of family planning is alarming.

Paragraph 73

The elaboration of adequate family-planning programmes, with the help of the United Nations Population Fund, so as to avoid the use of abortion as a means of family planning and thereby diminish the risks of maternal mortality resulting from unsafe abortions, is recommended.

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- Croatia, CEDAW, A/53/38/Rev.1 part I (1998) 10 at paras. 109 and 117.

Paragraph 109

Concern is expressed over the services pertaining to women's reproductive health which are the first to be affected as a result of the Government's financial constraints. Information regarding the refusal, by some hospitals, to provide abortions on the basis of conscientious objection of doctors is also of concern, as this is considered to be an infringement of women's reproductive rights.

Paragraph 117

Steps should be taken to secure the enjoyment by women of their reproductive rights by, *inter alia*, guaranteeing them access to abortion services in public hospitals. The Government should examine fully the implications for women, in particular, of funding cuts for contraceptives and should implement strategies to address any detrimental impact on women.

- Zimbabwe, CEDAW, A/53/38/Rev.1 part I (1998) 13 at paras. 148, 160 and 161.

Paragraph 148

The refusal of some health-care providers to give family planning services to sexually active adolescents, despite there being no legal restrictions in this regard, is of concern.

Paragraph 160

The Government should increase its efforts to combat the HIV/AIDS pandemic and to ensure that appropriate sexual and reproductive health information, education and services are provided to all women, and particularly to adolescents.

Paragraph 161

Sex education and practical family planning should be provided to both youth and adults.

- Czech Republic, CEDAW, A/53/38/Rev.1 part I (1998) 16 at paras. 197 and 205.

Paragraph 197

The high rate of induced abortions in the Czech Republic, particularly in the face of the wide availability of contraceptives, is of concern. The lack of information and training of health professionals with regard to contraceptives is of further concern.

Paragraph 205

Specific training programmes should be launched to educate health professionals, as well as mass campaigns to inform the public on the use of contraceptives and misuse of induced abortions as a means of family planning.

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- Indonesia, CEDAW, A/53/38/Rev.1 part I (1998) 24 at paras. 284, 297 and 307.

Paragraph 284

Concern is expressed at the existence of laws that are not in accordance with the provisions of the Convention. Discrimination against women exists in laws regarding health, including the requirement that the wife obtain her husband's consent with regard to sterilization or abortion even when her life is in danger.

Paragraph 297

The reported cases of coercion in the course of the implementation of the family planning programme is of grave concern. Such coercion contravenes the Government's obligations under the Convention to ensure women's reproductive rights and freedom of choice and informed consent with respect to methods of family planning.

Paragraph 307

Immediate steps should be taken to eradicate the practice of polygamy and to change the other discriminatory laws identified by the Committee in paragraph 284 above.

- Dominican Republic, CEDAW, A/53/38/Rev.1 part I (1998) 28 at para. 337.

The high rate of maternal mortality, which is caused by toxæmia, haemorrhages during childbirth and clandestine abortions, is of deep concern. Toxæmia may be caused by induced abortions. The high rate of maternal mortality, in conjunction with the fact that abortions in the Dominican Republic are absolutely and under all circumstances illegal, causes very great concern and attention is drawn to the implications of the situation for women's enjoyment of the right to life.

- Mexico, CEDAW, A/53/38/Rev.1 part I (1998) 32 at paras. 394, 408 and 410.

Paragraph 394

The high and unsatisfied demand for contraceptive methods, particularly among poor urban women, rural women and adolescents, is noted. Cases in some localities in which contraceptive methods have been used without women's expressed consent, which is required under Mexican law, are also noted with concern.

Paragraph 408

The legislation which criminalizes abortion should be revised and the possibility of authorizing the use of the RU486 contraceptive, which is cheap and easy to use, should be weighed as soon as it becomes available.

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Paragraph 410

The introduction of training for health personnel with regard to women's human rights, and particularly their right, freely and without coercion, to choose means of contraception is recommended.

- Slovakia, CEDAW, A/53/38/Rev.1 part II (1998) 55 at paras. 91 and 92.

Paragraph 91

The high rate of abortions among Slovak women is of concern. Concern is also expressed over the fact that abortion is being used as a form of family planning.

Paragraph 92

An increase in family planning education and accessibility of affordable and safe contraception, in order to reduce the number of abortions carried out, are strongly recommended.

- South Africa, CEDAW, A/53/38/Rev.1 part II (1998) 58 at para. 134.

The Government should continue its efforts to ensure women, particularly poor women, have access to family planning programmes and related information to increase women's choices and as a means of empowerment.

- Peru, CEDAW, A/53/38/Rev.1 part II (1998) 72 at paras. 337 and 339-342.

Paragraph 337

The Committee notes with concern that maternal and infant mortality and teenage pregnancy rates are high and that preventable diseases are common, all of which contributed to serious flaws in the Peruvian health system. The main factor which affected women primarily in the most disadvantaged sectors is lack of resources to avail themselves of medical care when needed and with the necessary speed.

Paragraph 339

The close link between the number of abortions performed and the high maternal mortality rate is of concern. Criminalizing abortions does not discourage abortions, but rather has the effect of making the procedure unsafe and dangerous for women.

Paragraph 340

The law on abortion should be reviewed to ensure that women have access to full and complete health services, which include safe abortion, and to emergency medical attention when complications arise

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from abortions.

Paragraph 341

The lack of information and lack of access to adequate contraception among poor women in urban and rural areas, indigenous women and teenage girls is of concern.

Paragraph 342

Family planning programmes that emphasize sex education, use of adequate contraception and responsible use of sterilization services where necessary, with the patient's express authorization and after the consequences of such procedure had been fully explained, should be established.

- Republic of Korea, CEDAW, A/53/38/Rev.1 part II (1998) 76 at para. 382.

The high rate of abortion is of concern.

- Kyrgyzstan, CEDAW, A/54/38/Rev.1 part I (1999) 15 at paras. 136 and 137.

Paragraph 136

The situation of women's health, particularly the increase in the incidence of maternal mortality and morbidity, as well as the high rates of infant mortality and the use of abortion as a method of contraception, are of concern.

Paragraph 137

Comprehensive family-planning programmes based on the right to reproductive choice, as well as measures to ensure that abortion is not perceived as a method of contraception should be introduced.

- Greece, CEDAW, A/54/38/Rev.1 part I (1999) 20 at para. 208.

The Government should introduce sex education as part of the school curriculum. Family-planning policies should also be improved and measures taken so that all women and men have access to information about and measures of contraception. The Government is urged to target men in its family-planning efforts and to stress the shared responsibilities of women and men in this regard.

- China, CEDAW, A/54/38/Rev.1 part I (1999) 26 at paras. 300 and 301.

Paragraph 300

The ways in which the Government's population policy is implemented at the local level should be

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examined and publicly debated. The Government is urged to promote information, education and counselling, in order to underscore the principle of reproductive choice, and to increase male responsibility in this regard. The Government should make clear that coercive and violent measures are prohibited and enforce such prohibition through fair legal procedures that sanction officials acting in excess of their authority. The Government is urged to introduce gender-sensitivity training for family planning officials.

Paragraph 301

The Government should explicitly address the linkages between economic security in old age and its family planning policies. It should take all appropriate measures to modify and eliminate son preference, *inter alia*, by expanding educational and employment opportunities for women in rural areas. The Government should enforce laws against sex-selective abortion, female infanticide and abandonment of children and remove all legal disabilities from "out-of-plan" and unregistered children.

- Colombia, CEDAW, A/54/38/Rev.1 part I (1999) 33 at paras. 393-396.

Paragraph 393

It is a great concern that abortion, which is the second largest cause of maternal deaths in Colombia, is punishable as an illegal act. It is also a concern that women who seek treatment for induced abortions, women who seek an illegal abortion and the doctors who perform them are subject to prosecution.

Paragraph 394

The Government should consider taking immediate action to provide for derogations from this legislation.

Paragraph 395

Sterilization is the most widely used family planning method. It might be unnecessary to make such widespread use of sterilization if couples were better informed and instructed in the use of family planning methods and had ready access to contraceptives.

Paragraph 396

Information on the use of contraceptives should be more widely disseminated, necessary efforts should be made to ensure that women, including women in the most vulnerable population segments, have access to affordable contraceptives, and action should be taken to promote the use of contraception by men, particularly vasectomy.

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- Belize, CEDAW, A/54/38/Rev.1 part II (1999) 49 at para. 57.

The Government is urged to revise its abortion laws, since according to the information, existing legislation penalizing abortion is not strictly enforced. The Government is also urged to include age-appropriate sex education in school curricula and to conduct awareness campaigns so as to reduce teenage pregnancy rates and to increase girls' and women's life choices. The Government should also implement programmes and policies aiming to increase knowledge about, and availability of, various types of contraceptives, with the understanding that family planning is a joint responsibility of both partners.

- Georgia, CEDAW, A/54/38/Rev.1 part II (1999) 53 at para. 112.

The enhancement of family planning programmes and the dissemination of various forms of contraceptives are recommended. Georgia should take advantage of assistance available from international agencies in this regard. The creation of insurance plans that sufficiently cover women patients in hospitals and in ambulatory medical care is also recommended.

- Nepal, CEDAW, A/54/38/Rev.1 part II (1999) 57 at paras. 139 and 148.

Paragraph 139

The Government is urged to amend discriminatory criminal laws, including the new law on abortion.

Paragraph 148

The Government should revise existing legislation and reconsider the proposed amendments so as to provide services for safe abortions. The Government should prioritize prevention of unwanted pregnancy through family planning services and sex education.

- Ireland, CEDAW, A/54/38/Rev.1 part II (1999) 60 at paras. 185 and 186.

Paragraph 185

It is a concern that women who wish to terminate their pregnancies need to travel abroad. This creates hardship for vulnerable groups, such as female asylum seekers who cannot leave the territory of the State.

Paragraph 186

The Government is urged to facilitate a national dialogue on women's reproductive rights, including on the restrictive abortion laws. It is also urged to further improve family planning services and the availability of contraception, including for teenagers and young adults and to promote the use of

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condoms to prevent the spread of HIV/AIDS.

- Chile, CEDAW, A/54/38/Rev.1 part II (1999) 64 at paras. 227 and 229.

Paragraph 227

Priority should be given to an examination of the situation of adolescents, and various measures should be adopted to address effectively 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 that adolescent girls be expelled from private and public schools because of pregnancy.

Paragraph 229

The Government should consider review of the laws relating to abortion with a view to their amendment, particularly to provide safe abortion and to permit termination of pregnancy for therapeutic reasons or because of the health, including the mental health, of the woman. The Government is also urged to revise laws which require health professionals to report women who undergo abortions to law enforcement agencies and which impose criminal penalties on these women. The Government is also requested to strengthen its actions and efforts aimed at the prevention of unwanted pregnancies, including by making all kinds of contraceptives more widely available and without any restriction. Women should be granted the right to undergo sterilization without requiring their husband's - or anyone else's - prior consent.

- Spain, CEDAW, A/54/38/Rev.1 part II (1999) 67 at para. 266.

Abortions among adolescents should be addressed by a multiplicity of means, including age-appropriate sex education in primary and secondary schools.

- United Kingdom of Great Britain and Northern Ireland, CEDAW, A/54/38/Rev.1 part II (1999) 71 at para. 310.

Teenage conception and pregnancy should be addressed by a multiplicity of measures, including a greater focus on male responsibility and a review of the primary school curriculum with a view to introducing age-appropriate sex education. Resources should be allocated for prevention and treatment programmes for sexually transmitted diseases directed at adolescents within a holistic approach to sexual and reproductive health, including sexual violence. The Government should also initiate a process of public consultation in Northern Ireland on reform of the abortion law.

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- India, CEDAW, A/55/38 part I (2000) 7 at paras. 50, 78 and 79.

Paragraph 50

The Government is commended for introducing legislation that has banned sex-selective abortions.

Paragraph 78

The adverse sex ratio and the incidence of sex-selective abortions despite the law banning that practice are noted. Family planning is only targeted at women.

Paragraph 79

The Government is called upon to elicit the support of medical associations in enforcing professional ethics and preventing sex-selective abortions. The Government should also obtain the support of the medical profession in creating awareness of the urgent need to eliminate practices associated with son preference.

- Myanmar, CEDAW, A/55/38 part I (2000) 12 at paras. 129 and 130.

Paragraph 129

There is no information on a woman's right to terminate a pregnancy resulting from sexual violence. The high rate of maternal mortality in Myanmar is of concern, since induced abortion often results in maternal mortality.

Paragraph 130

The Government is urged to extend the coverage of the contraceptive distribution programme to reduce maternal mortality from unsafe abortions.

- Jordan, CEDAW, A/55/38 part I (2000) 16 at paras. 162, 180 and 181.

Paragraph 162

The progress made in improving women's health situation, including the provision of reproductive health services and the prevalence of contraceptive use among married women, is commended.

Paragraph 180

That the prohibition of abortion also applies to cases where pregnancy is due to rape or incest is a matter of concern.

Paragraph 181

The Government is called upon to initiate legislative action to permit safe abortion for victims of rape and incest.

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- Democratic Republic of the Congo, CEDAW, A/55/38 part I (2000) 21 at paras. 227 and 228.

Paragraph 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.

Paragraph 228

The Government is called upon to make efforts to improve the use of contraceptive methods, to repeal article 178 of the Penal Code, which prohibits the dissemination of contraceptive methods, and to provide sex education for young people.

- Burkina Faso, CEDAW, A/55/38 part I (2000) 25 at paras. 274-276.

Paragraph 274

The lack of access for women to family planning services is noted with concern.

Paragraph 275

National reproductive health programmes should be drawn up both for women and for girls in order to prevent early pregnancy and induced abortion.

Paragraph 276

The Government is encouraged to integrate family planning services in primary health care so that women can have easier access to them. The State party should organize awareness-raising and information activities for women about contraceptive measures and should involve men in these activities. The legislation on abortion should be reviewed and coverage should be provided by social security.

- Belarus, CEDAW, A/55/38 part I (2000) 34 at para. 374.

The Government is urged to increase affordable contraceptive choices for women and men so as to increase the use of contraception.

- Luxembourg, CEDAW, A/55/38 part I (2000) 38 at paras. 406 and 407.

Paragraph 406

Concern is expressed over certain laws, including the legislation governing abortions, which appears

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anachronistic in a country like Luxembourg. It is of particular concern that the Government appears to lack the commitment to review and adapt this legislation to changing attitudes and developments in the European region.

Paragraph 407

The Government should provide the necessary leadership and develop a comprehensive legislative agenda to amend such laws.

- Cameroon, CEDAW, A/55/38 part II (2000) 53 at paras. 59 and 60.

Paragraph 59

The high rate of fertility and repeated pregnancy, the high mortality rate among mothers and children, and the HIV/AIDS pandemic in Cameroon, are noted with concern.

Paragraph 60

The Government is urged to review the abortion laws, to undertake to increase the use of contraceptives, and to develop programmes to protect mothers and children.

- Republic of Moldova, CEDAW, A/55/38 part II (2000) 56 at paras. 109 and 110.

Paragraph 109

While declines in women's mortality rates are noted, concern is expressed about the status of women's health, especially women's reproductive health, and that abortion is apparently used as a means of fertility control.

Paragraph 110

The Government is urged to improve its family planning and reproductive health policy, including availability and accessibility of modern contraceptive means. The Government is encouraged to include sex education systematically in schools, including vocational training schools.

- Lithuania, CEDAW, A/55/38 part II (2000) 61 at paras. 158 and 159.

Paragraph 158

The high rate of abortion among women and a lack of access to various methods of family planning, including contraceptives, especially among women in rural areas, also noted with concern.

Paragraph 159

Comprehensive research into the specific health needs of women, the financial and organizational

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strengthening of family planning programmes and the provision of wide access to contraceptives for all women, including rural women, are further recommended. Programmes of sexual and reproductive education for both girls and boys should be introduced as a regular part of the school curriculum.

- Cuba, CEDAW, A/55/38 part II (2000) 73 at para. 257.

The State party is commended with appreciation for its encouraging national indicators for social development, especially women's generally high literacy rates, and the favourable indicators in the field of women's health, including access to basic health care, low maternal, infant and women's mortality rates and a decline in abortion rates.

- Romania, CEDAW, A/55/38 part II (2000) 77 at paras. 314 and 315.

Paragraph 314

Concern is expressed over the health situation of women, especially women's reproductive health. While appreciating recent declines in maternal and child mortality rates, these indicators are still high compared to other countries in the region. The abortion rates and the use of abortion as a means of fertility control, are of particular concern.

Paragraph 315

While commending the State Party for maintaining a system of universal free health care, it is recommended that increased efforts be placed on improving women's reproductive health. In particular, the availability, acceptability and use of modern means of birth control to avoid the use of abortion as a method of family planning should be improved. The Government is further encouraged to include sex education systematically in schools, including vocational training schools.

- Burundi, CEDAW, A/56/38 part I (2001) 7 at paras. 61 and 62.

Paragraph 61

Concern is expressed over the high rate of maternal mortality, especially in rural areas, including deaths as a result of illegal abortions.

Paragraph 62

Effective measures, such as sex education and information campaigns and the provision of effective contraception should be introduced, in order to reduce the number of clandestine abortions. It is emphasized that abortion should not be used as a method of family planning.

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

Paragraph 105

While noting a decline in the mortality rate of women, the status of women's health, especially their reproductive health, is of concern. That free access to health care appears to be no longer available to all women is alarming. It is also of concern that abortion continues to be used as a means of birth control.

Paragraph 106

The State party is urged to maintain free access to adequate health care and to improve its family planning and reproductive health policy, including availability of and accessibility to modern contraceptive means. The Government is encouraged to promote sex education for both girls and boys, as well as educational programmes to combat alcohol and drug abuse among women.

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

Paragraph 185

While noting a decline in the maternal mortality rate, concern is expressed over the status of women's health, especially their reproductive health, and the high birth rate. It is also of concern that abortion remains a primary means of birth control, and that the use of tobacco by women is increasing.

Paragraph 186

Free access to basic health care should be maintained and the family planning and reproductive health policy, including the availability and accessibility of modern contraceptive means should be improved. The State party is encouraged to promote sex education during the compulsory school years.

- Jamaica, CEDAW, A/56/38 part I (2001) 22 at paras. 223 and 224.

Paragraph 223

The high rate of teenage pregnancies is of concern.

Paragraph 224

Family planning and reproductive health policy and programmes should be improved, including availability and accessibility to affordable modern contraceptive means for both women and men. Education programmes on reproductive rights and responsible sexual behaviour for both women and men, particularly young people, should be promoted.

- Mongolia, CEDAW, A/56/38 part I (2001) 26 at paras. 273 and 274.

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Paragraph 273

Concern is expressed with regard to women's health throughout their life cycle. The fact that economic hardship impacts negatively on women's reproductive and mental health is also a matter of concern. In particular, the acute problem of maternal mortality is noted with concern, owing in part to abortions performed under unsafe conditions and the non-availability of family planning services.

Paragraph 274

The Government should maintain adequate safe, affordable and accessible physical and mental health services for women throughout their life cycle. The Government is urged to increase access, particularly in the rural areas, to affordable contraceptives for women and men, and to provide sex education to girls and boys.

- Andorra, CEDAW, A/56/38 part II (2001) 49 at para. 48.

Concern is expressed about the punitive abortion laws that could cause women to seek unsafe and clandestine abortion. The revision of such punitive laws should be considered, according to general recommendation 24 of the Committee.

- Guinea, CEDAW, A/56/38 part II (2001) 55 at paras. 128 and 129.

Paragraph 128

While the Government has made progress in addressing the basic health needs of the population, concern is expressed at the prevalence of maternal and infant mortality, the persistent practice and high rate of female genital mutilation, women's lack of access to health-care facilities and the lack of access to family-planning services.

Paragraph 129

Women's access to health-care and family-planning services should be increased.

- Viet Nam, CEDAW, A/56/38 part II (2001) 68 at paras. 266 and 267.

Paragraph 266

While noting a decline in women's mortality rate, concern is nevertheless expressed about the status of women's health, especially women's reproductive health, and the high rate of abortion among young unmarried women. The persistence of stereotypical attitudes with respect to women's health concerns is also of concern, especially contraception which appears to be regarded as the sole

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responsibility of women, as well as the increased incidence of HIV/AIDS, malaria and tuberculosis among women.

Paragraph 267

The Government is urged to maintain free access to basic health care and should continue to improve its family planning and reproductive health policy, *inter alia*, through making modern contraceptive methods widely available, affordable and accessible. Also, sex education for both boys and girls should be promoted, paying special attention to HIV/AIDS prevention.

- Nicaragua, CEDAW, A/56/38 part II (2001) 72 at paras. 302 and 303.

Paragraph 302

Concern is expressed about the high fertility rate in Nicaragua.

Paragraph 303

Family planning and reproductive health policy and programmes should be improved, including the availability and accessibility of affordable modern contraceptive means to both women and men. Educational programmes on reproductive rights and responsible sexual behaviour on the part of both women and men, particularly young people, should be promoted.

CRC

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

See also:

- Armenia, CRC, CRC/C/94 (2000) 53 at paras. 330 and 331.

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- Romania, CRC, CRC/C/24 (1994) 21 at para. 97.

Greater efforts should be made to provide family education; to develop awareness of the equal responsibilities of parents; and to disseminate widely knowledge about modern methods of family planning and thereby reduce the practice of abortion.

- 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.

- Pakistan, CRC, CRC/C/29 (1994) 10 at para. 54.

The Government is encouraged to continue taking measures to strengthen the primary health-care system. Greater emphasis should be placed on family education, including family planning, and the training of community health care-workers to assist in these tasks is encouraged. An outreach programme should be developed at the community level to address issues relating to disabled children, in view of their particular vulnerability.

- Burkina Faso, CRC, CRC/C/29 (1994) 15 at para. 68.

The low coverage and acceptance of family planning programmes is of concern.

- Jamaica, CRC, CRC/C/38 (1995) 25 at para. 162.

The need for greater efforts in developing family education and awareness of the common parental responsibilities of both parents is stressed. Family planning information and services should be given greater attention and resources.

- Nicaragua, CRC, CRC/C/43 (1995) 10 at paras. 46 and 64.

Paragraph 46

The relatively high maternal mortality rate, especially as it affects young girls, is of concern. Clandestine abortions and teenage pregnancies appear to be a serious problem in the country.

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Paragraph 64

The provision of primary health care should be emphasized, with family planning services and knowledge of nutrition as two of its major components, and strategies should be developed to provide families with the necessary technical and other support to grow their own food.

- Ukraine, CRC, CRC/C/46 (1995) 11 at paras. 58, 69 and 72.

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

The Committee would like to see a stronger emphasis 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.

Paragraph 72

In view of the high rate of abandonment of children and of abortion, a strategy and policy to assist vulnerable families for the support of their children should be adopted. The adequacy of the current social security system and of the family planning programmes should be evaluated. The training of social workers with the aim of mobilizing and strengthening communities is recommended.

See also:

- Belarus, CRC, CRC/C/24 (1994) 24 at para. 114.

- Cuba, CRC, CRC/C/66 (1997) 9 at paras. 51 and 67.

Paragraph 51

The remaining obstacles to the effective implementation of the family planning and education programmes in the country, particularly in view of the lack of quality materials and services available, are of concern.

Paragraph 67

Further resources and assistance should be devoted to activities in the area of family planning and health education programmes, with a view to addressing the problem of teenage or unwanted

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pregnancies and changing male sexual behaviour. Issues relating to the incidence and treatment of children infected with or affected by HIV/AIDS and STDs and to reducing the apparent recourse to abortion as a method of family planning should also be the focus of programmatic actions. Major efforts should be undertaken to broaden the coverage of reproductive health educational programmes beyond married couples.

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

See also:

- Grenada, CRC, CRC/C/94 (2000) 72 at para. 405.
- Georgia, CRC, CRC/C/97 (2000) 18 at para. 123.
- Suriname, CRC, CRC/C/97 (2000) 84 at para. 494.

- Honduras, CRC, CRC/C/87 (1999) 26 at para. 122.

The high and increasing rate of teenage pregnancy, the insufficient access to reproductive health education and counselling services, including outside schools, and the increasing rate of substance abuse among adolescents are of concern. Further efforts should be undertaken for the development of child-friendly counselling services as well as care and rehabilitation facilities for adolescents.

- Benin, CRC, CRC/C/87 (1999) 35 at para. 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 impede the full implementation of family planning programmes, including the safe motherhood initiative, is of concern. 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. 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 assessable, without parental consent, where in the best interests of the

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child. The 1920 law concerning family planning and the use of contraceptives should be repealed.

- Chad, CRC, CRC/C/87 (1999) 45 at para. 195.

The rate of early pregnancy and the lack of access by teenagers to reproductive health education and services, and to emergency care is 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. Continued assistance sought from UNICEF and WHO to promote adolescent health policies and programmes, including by strengthening reproductive health education and counselling services, is also encouraged.

- Venezuela, CRC, CRC/C/90 (1999) 10 at para. 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.

- Russian Federation, CRC, CRC/C/90 (1999) 18 at paras. 108 and 110.

Paragraph 108

Technical assistance should be considered in order to continue efforts to reverse the deterioration in primary health care. Efforts to cure and prevent the spread of tuberculosis and other diseases; to continually reduce the use of abortion as a means of contraception; and to promote breastfeeding, are particularly encouraged.

Paragraph 110

The effectiveness of measures taken should be guaranteed to ensure access for adolescents to sex education, including information about contraception and STDs, to promote adolescent health by strengthening reproductive health and family planning services, as well as counselling services, and to prevent and combat HIV/AIDS, STDs and teenage pregnancy and abortions.

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- The Former Yugoslav Republic of Macedonia, CRC, CRC/C/94 (2000) 45 at paras. 278 and 279.

Paragraph 278

Concern is expressed about the high level of abortions among girls and at the incidence of sexually transmitted diseases.

Paragraph 279

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.

- Jordan, CRC, CRC/C/97 (2000) 31 at para. 192.

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.

- Kyrgyzstan, CRC, CRC/C/97 (2000) 51 at paras. 312 and 313.

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.

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.

See also:

- Armenia, CRC, CRC/C/94 (2000) 53 at para. 332.

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- Cambodia, CRC, CRC/C/97 (2000) 64 at paras. 382 and 383.

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.

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.

- Djibouti, CRC, CRC/C/97 (2000) 96 at paras. 554 and 555.

Paragraph 554

Concern is 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.

- Tajikistan, CRC, CRC/C/100 (2000) 53 at para. 308.

In the light of article 24, adolescents should have access to and be provided with reproductive health education, child-friendly counselling and rehabilitation services. The State party should establish comprehensive family planning programmes, as well as measures to ensure that abortion is not perceived as a method of contraception.

See also:

- Kyrgyzstan, CRC, CRC/C/97 (2000) 51 at para. 311.

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- Central African Republic, CRC, CRC/C/100 (2000) 77 at paras. 457 and 458.

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 counseling.

- Latvia, CRC, CRC/C/103 (2001) 9 at paras. 66 and 67.

Paragraph 66

The increase in cases of sexually transmitted diseases (STDs) and HIV/AIDS among youth, and the growing use of abortion as a method of birth control is also of concern. The lack of sufficient prevention and rehabilitation information, especially on reproductive health in the schools, is also noted.

Paragraph 67

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 be able to develop adequate policies and programmes. It is also 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-friendly counselling, care and rehabilitation facilities that are accessible, without parental consent when this is in the best interests of the child.

See also:

- Marshall Islands, CRC, CRC/C/100 (2000) 89 at para. 534.
- Lithuania, CRC, CRC/C/103 (2001) 47 at paras. 290 and 291.

- Democratic Republic of the Congo, CRC, CRC/C/108 (2001) 31 at paras. 197 and 198.

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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.

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.

See also:

- Malawi, CRC, CRC/C/114 (2002) 104 at paras. 422 and 423.

- Guatemala, CRC, CRC/C/108 (2001) 47 at paras. 267 and 268.

Paragraph 267

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, 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.

See also:

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- Chile, CRC, CRC/C/114 (2002) 90 at paras. 363 and 364.