



Convention on the Rights of the Child

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Committee on the Rights of the Child Seventy-seventh session

Summary record of the 2264th meeting

Held at the Palais Wilson, Geneva, on Monday, 22 January 2018, at 3 p.m.

Chair: Ms. Winter

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The meeting was called to order at 3 p.m.

Consideration of reports of States parties (continued)

Combined fifth and sixth periodic reports of Spain (continued) (CRC/C/ESP/5-6; CRC/C/ESP/Q/5-6 and CRC/C/ESP/Q/5-6/Add.1)

1. *At the invitation of the Chair, the delegation of Spain took places at the Committee table.*
2. **Mr. Kotrane** (Country Task Force) said that he appreciated the large amount of information provided on measures to combat the sale and sexual exploitation of children. In that regard, he asked what progress the Children's Observatory of the Ministry of Health, Social Services and Equality had made in drawing up a framework protocol for the identification and care of child victims of trafficking in persons, with a view to ensuring that all stakeholders adopted the same practices when identifying children in need of protection.
3. Noting that 17 Spanish companies and organizations had subscribed to the Code of Conduct for the Protection of Children from Sexual Exploitation in Travel and Tourism, he asked the delegation whether any criminal proceedings had been brought against companies or organizations as a result of their involvement in such exploitation. Lastly, recalling that Spain recognized extraterritorial jurisdiction under Organic Act No. 1/2014, he asked whether there had been any investigations, prosecutions or convictions relating to acts contrary to the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography that had been committed outside Spain.
4. **Ms. Khazova** (Coordinator, Country Task Force) said that she wished to know what plans had been developed to reduce the State party's reliance on coal-fired power plants, whose continued operation caused high levels of pollution, with adverse health impacts on children. Also, had specific measures been taken to ensure the full inclusion of children with disabilities in social life?
5. **Ms. Miguel Pérez** (Spain) said that the Ministry of Education, Culture and Sport was concerned about the increased number of diagnoses of attention deficit hyperactivity disorder. Children diagnosed with that disorder were classified as having special educational needs and were mainstreamed in the regular education system and supported by specialists. Although the effects of medication on students had not been studied in Spain, the Ministry had developed a plan on neuroscience applied to education, with advice from leading researchers in the field.
6. Corporal punishment in schools was strictly prohibited and had been practically eradicated in the country. Those who failed to observe the ban faced severe disciplinary measures such as suspension from work without pay.
7. Regarding measures to reduce the school dropout rate, the Government had allocated €20 million to the Territorial Cooperation Programme for Support and Advancement in Education and Retention in the Education System (PROEDUCAR), which aimed to bring the dropout rate below 10 per cent, and had trained some teachers to serve as mentors who specialized in dealing with students in situations of risk and vulnerability. The Government's flagship initiative was the opening of "second chance" schools, where young people who had left the education system without qualifications could combine their studies with vocational training and paid work experience.
8. The Ministry of Education, Culture and Sport addressed gender stereotypes under its strategic plan for harmony in schools, which included clearly defined action lines on education and gender, and had worked with partners to develop the Intercambia ("Exchange") programme that promoted respect for women and girls in schools.
9. Regarding measures to promote educational achievement among vulnerable and minority students, the Ministry had a programme to support the education of the itinerant population, under which, for example, it provided teachers, funding and computer equipment to 12 circuses, benefiting 100 students. Specific programmes were being implemented for the education and integration of Roma students, such as the development

of learning communities in which Roma adults were given training in basic education so as to enable them to support their children's studies. The Ministry provided annual subsidies for several programmes and projects that were implemented in conjunction with Roma associations, and it worked with non-governmental organizations (NGOs) to promote the integration of immigrant children in schools and training, notably in the autonomous cities of Ceuta and Melilla.

10. **Mr. Pedernera Reyna** (Country Task Force) said that he would welcome comments from the delegation on reports that in some autonomous communities classes were taught in temporary cabins. What measures did the State party envisage to ensure that children were taught in adequate conditions?

11. **Mr. Cabello Sáenz de Santa María** (Spain) said that the installation of prefabricated classrooms or cabins in schools was not part of a planned strategy. The problem was that the supply of schools could not keep up with changes in population; it was not possible to build schools overnight. Temporary cabins were only installed as a last resort and would be removed under the infrastructure plans that were submitted by the autonomous communities at regular intervals.

12. **Ms. Skelton** (Country Task Force) said that she was interested to know what measures the State party was taking to ensure inclusive education for children with disabilities.

13. **Ms. Miguel Pérez** (Spain) said that the Ministry of Education, Culture and Sport had made considerable progress in the inclusion of children with disabilities. To meet the obligations of Spain under the Convention on the Rights of Persons with Disabilities, the Ministry offered work experience placements to persons with Down syndrome and persons with intellectual disabilities under agreements concluded with associations representing such persons; it had also reached an agreement with the State Confederation of the Deaf on the needs of hard-of-hearing and deaf students. Spain was also developing inclusion policies through the Ibero-American Intergovernmental Cooperation Network for People with Special Educational Needs, with funding from the United Nations Educational, Scientific and Cultural Organization (UNESCO).

14. **Mr. Cabello Sáenz de Santa María** (Spain) said that the Government and various stakeholders were negotiating a national pact on education that would give continuity to education policies and provide a framework for efforts to reduce the school dropout rate. Other initiatives included the introduction of a new vocational education stream, the use of new technologies as a means of motivating students and the development of cooperation plans with the autonomous communities.

15. The coverage of education for children up to the age of 3 was uneven, since such education was governed by either autonomous communities or local authorities; moreover, the enrolment of children in that age group was not mandatory. However, since 2006 the Government had seen a significant increase in enrolment in kindergartens, to the point where more than 90 per cent of children aged 3 to 6 years now attended. Primary education was compulsory for all children aged 6 and above and enrolment at that level was subject to stricter oversight by the authorities.

16. Concerning disparities in access to education, the Government recognized that guaranteeing the right to education involved measures to address its hidden costs, including through the provision of books, transport and meals. The Ministry of Education, Culture and Sport and the autonomous communities had allocated €50 million to the purchase of educational materials in 2017/18; that figure was likely to increase. Education authorities in the autonomous communities were responsible for providing transport and meal services, either directly or through subsidies to local providers, while the Ministry contributed about €200,000 per year towards education-related activities carried out by parents' associations.

17. **Ms. Mateu** (Spain), noting the questions raised by the Committee in respect of lifestyles and risk factors, said that the Government had developed and adopted its health promotion and prevention strategy in the national health system under the "Health 2020" European health policy framework of the World Health Organization. The strategy was aimed at promoting healthy living through measures to address five factors that influenced

the onset of 80 per cent of preventable non-communicable chronic diseases, namely diet, tobacco consumption, alcohol consumption, physical activity and emotional well-being. Developed with the full participation of ministries, autonomous communities and municipalities, the strategy identified the under-15 and over-50 age groups as its target populations, with the goal of increasing the number of years lived in good health. To implement the strategy, between 2014 and 2017 the Ministry of Health, Social Services and Equality had invested over €200,000 in 28 training courses for professionals in the national health system, and had increased funding for courses in 2018. An online course on positive parenting would be delivered to health professionals, families and teachers, in the hope that it would yield positive outcomes in line with the authorities' firm stance against corporal punishment.

18. **Ms. Khazova** said that she would be grateful for confirmation concerning the age group targeted by the health promotion and prevention strategy, and for information on the results obtained, if any.

19. **Ms. Mateu** (Spain) said that while the strategy prioritized children up to the age of 15 years, some components were specific to certain age groups, such as an alcoholism prevention course for 12- to 15-year-olds. The Ministry of Health, Social Services and Equality was monitoring annual indicators but would not carry out a final evaluation of the strategy until 2020, when other European countries participating in the "Health 2020" framework would also report.

20. Concerning the consumption of cannabis, recent data reported under the National Plan on Drugs 2009–2016 suggested that cannabis use had decreased slightly between 2008 and 2015. A new strategy for the prevention of drug use and addiction, which would focus more on the causes of addiction and on opportunities for prevention, was due to be adopted in early 2018.

21. In response to the question on children's health care, she said that children under 14 years of age generally received such care from paediatricians. However, the autonomous communities differed in terms of the care provided to children between the ages of 14 and 18 years, with some health authorities referring them to paediatricians and others to general practitioners. There was an ongoing debate over the health-care models applied in Southern European countries, where paediatricians were more prevalent, and Northern European countries, where children were more likely to see a general practitioner. In any event, family doctors were always fully trained in the medical care of children.

22. There was a shortage of resources in the area of mental health, particularly with respect to hospital admissions. The conclusion of the national health system's mental health strategy for the period 2009–2013 had resulted in a commitment to develop a protocol on the mental health care of children and adolescents, with the establishment of minimum standards for the programmes implemented by the autonomous communities. While the autonomous communities were reporting different levels of success in the provision of primary care in the area of mental health, all remained committed to its improvement.

23. Intersex children were dealt with initially at the primary care level before they were referred for specialist care. Intersexuality was obviously a very complex issue, and extreme caution was exercised with regard to decisions to perform genital surgery; the general approach was to wait to see how the child developed during adolescence before proceeding to any medical intervention, in line with recommended practice. There were very few cases in which surgery had been carried out on children, although no specific data were available. There were sufficient resources to provide the appropriate services to the small number of intersex children in the country.

24. Statistics on breastfeeding were made available online. The breastfeeding rate had remained stable for many years: almost 87 per cent of mothers breastfed exclusively for the first month, and 23 per cent for the first six months. There were a number of factors behind the lower rates of breastfeeding beyond the first few months, including mastitis and other conditions and the end of maternity leave. The Government had made breastfeeding a priority; for example, it provided €70,000 annually to support the Baby-friendly Hospital Initiative.

25. With regard to early intervention and care, the Healthy Child programme was implemented by all primary care facilities, which detected any impairments that could lead to disabilities. Such cases were then referred to specialist care. Each autonomous community had its own care model, but a white paper on early care had been published some 15 years previously with the agreement of all the autonomous communities, and common protocols were also in place.

26. **Mr. Rodríguez Reyes** said that he would be interested to know whether there was a data collection system to identify the exact number of intersex children in the country, whether there were guidelines and procedures for training medical personnel on the issue, and whether there were any legal measures related to intersex persons.

27. **Ms. Mateu** (Spain) said that Spain did not have a national health-care register; each autonomous community collected its own statistics. There were guidelines on the management of intersex conditions, and the scientific community had worked on the issue. With regard to training, certain centres had developed particular expertise in that area because they had experienced greater demand for services. Overall, there was a good level of knowledge of intersex conditions among health-care personnel. Thanks to the health-care card system, children could obtain services in the autonomous community of their choice, and there was a great deal of flexibility in the health system.

28. **Ms. Khazova** said that the delegation should clarify whether adolescents up to the age of 18 were also included in the healthy lifestyle programme.

29. **Ms. Mateu** (Spain) said that, although the programme prioritized children under the age of 15, it did include activities aimed at adolescents between the ages of 15 and 18 in areas such as sexual and reproductive health. The National Public Health Commission, which included representatives of all the autonomous communities, identified health-care issues to be referred to the interregional council of the national health system for coordination.

30. **Ms. González Vicente** (Spain) said that the regulations on international adoption would be approved in the coming months, after which a national adoption register would be put in place with the aim of enhancing transparency. Prospective adoptive parents would be able to contact any of the accredited adoption agencies, safe in the knowledge that criteria and costs had been standardized. According to data for 2016, there were 14,104 children and adolescents in residential care across the country and a further 19,641 in family-based care, either with their extended family or with a foster family. The legislation passed in 2015 defined the criteria for foster families and provided that priority should be given to family-based care over residential care. Campaigns were being run to promote placement with relatives in order to ensure that children, especially those under the age of 6, were not placed in residential centres. The Government was working with NGOs on programmes to support adolescents in family-based care, and tax incentives for fostering had been introduced. However, there admittedly were differences in approaches and services from one autonomous community to another, and there was still a shortage of foster families. Administrative decisions on child protection issues were always subject to appeal.

31. **Ms. González Méndez** (Spain) said that the uniform application of administrative rules was guaranteed through the publication of basic State regulations that were implemented by the autonomous communities. With regard to alternative care, a working group had been set up with representatives of the autonomous communities and the central Government to create quality standards for residential care to ensure consistency throughout the country. Decisions on removing a child from his or her family were currently taken by multidisciplinary technical teams in the autonomous communities on the basis of a thorough analysis of the case, expert reports and the principle of the best interests of the child. Every effort was made to keep the child in his or her family and social environment. The preferred option was always to place the child in the extended family, or in a foster family if there was no suitable relative; residential care was a last resort, and efforts were made to work towards returning children in residential care to their families. The local authorities played an important role in identifying and following up situations of risk.

32. **Ms. González Vicente** (Spain) said that the courts always took into account the best interests of the child, in accordance with the Convention. That principle was also reflected in the flexible sentencing of offenders who were primary caregivers to young children. Some specialized judges who had trained for work in the juvenile justice system had voluntarily chosen to take work in other areas because of a lack of vacancies in their area of specialization during the financial crisis, and there was nothing to prevent them from doing so. There was no specialized training for judges in the area of child protection, and a recommendation from the Committee in that regard would therefore be welcome.

33. **Mr. Kotrane** said that the Committee had already made a recommendation on training for judges in its 2010 concluding observations on the State party's preceding periodic report (CRC/C/ESP/CO/3-4). He would like to know whether any action had been taken in response to the related recommendation that lighter penalties should be introduced for juvenile offenders.

34. **Mr. Rodríguez del Val** (Spain) said that the law on the criminal responsibility of minors had been amended to provide for the imposition of rehabilitation and social reintegration measures rather than penalties. Any measures imposed could be reviewed in the interests of the minor. It was true that Act No. 26/2015 introducing changes in the child protection system included a provision specifying that if a minor was voluntarily absent for six months from a protection centre entrusted with his or her care, the State's guardianship would cease. That change had been made in response to the finding, by the autonomous communities, that a large proportion of foreign children in the protection network saw their stay in Spain merely as a temporary stop en route to northern Europe and chose to leave the protection centres after several weeks once their immediate needs had been met. For practical and budgetary reasons, it was not possible to extend protection to minors who had left the country. If a minor who had disappeared from a protection centre was found anywhere in Spain, the police or Civil Guard immediately notified the provincial juvenile prosecution services and the child protection authority of the autonomous community, and the file was reopened and the appropriate protection measures were provided.

35. **Mr. León Caveró** (Spain) said that incommunicado detention was automatically reported to the competent judicial authority and prosecutor and the detainee was immediately provided with a lawyer with at least 10 years of experience in criminal matters. Such detention was ordered only in very specific cases and for a very limited period, for example to prevent the commission of new crimes, the aggravation of existing crimes or the concealment of evidence in the case of members of organized crime groups, especially in relation to terrorism. Persons subjected to that type of detention were examined by a forensic doctor every 6 to 12 hours and the judicial authority ensured that all safeguards were respected. The Criminal Procedure Act had been amended in 2015 to give the judicial authority wider discretion in relation to such detention.

36. **Mr. Rodríguez del Val** (Spain) said that the application of such detention to offenders aged 16 or over was in line with Act No. 5/2000 of 12 January 2000 governing the criminal responsibility of minors, which divided minors into two groups: 14- and 15-year-olds and 16- and 17-year-olds. As persons in the latter group were more likely to be involved in more serious crimes, they were subject to harsher penalties.

37. **Mr. Pedernera Reyna** said that he would welcome details on the maximum duration of such detention and on the crimes for which it could be imposed.

38. **Mr. Rodríguez del Val** (Spain) said that the delegation would provide the Committee with a copy of the Criminal Procedure Act, which detailed the crimes for which such detention could be ordered.

39. **Mr. García Navarro** (Spain) said that minors could be held in incommunicado detention for a maximum of 24 hours, during which time an extension of up to 48 hours could be requested.

40. **Ms. Fuentetaja Cobas** (Spain) said that, under the amended law on free legal assistance, minors who were victims of crime received such assistance regardless of their financial situation. Every effort was made to guarantee minors' privacy and avoid revictimization. Special training for lawyers addressed both the best interests of the child

and the provision of free legal assistance. The Act on the Status of Victims of Crime contained a catalogue of procedural and extraprocedural rights and individualized protection measures that must take account of the victims' characteristics and needs and the crimes committed against them. Victims had the right to information in simple, age-appropriate language and to translation and interpretation, if necessary. Measures were taken to avoid visual contact between the victim and the perpetrator, to avoid questions about the victim's private life that were not directly related to the crime, and to ensure that the victim could give testimony without having to be present in the courtroom. Victim support offices provided holistic assistance to minors. A working group had been set up in December 2017 to draft a specific protocol on assistance to minors who were victims of crime.

41. **Mr. Rodríguez del Val** (Spain) said that prosecutors in Spain were required to ensure that all child victims could exercise their rights to receive information on the proceedings to which they were parties, to be represented by counsel and to appeal against the dismissal of such proceedings. Child victims making statements in cases heard in the juvenile justice system had the right to be accompanied by an adult of their choosing. The protection of child victims was paramount. The right of expert witnesses such as psychologists to testify in support of child victims' statements had also been recognized.

42. **Mr. León Cervero** (Spain) said that the Constitutional Court had ruled that child victims should not be made to suffer unnecessarily in proceedings to clarify the circumstances of the crimes committed against them or to determine the guilt of the alleged perpetrators. That ruling was not simply an enunciation of an ideal; it was adhered to in practice, and its legitimacy had been upheld in international proceedings. In a 2014 decision, for example, the European Court of Human Rights had rejected an application submitted by a Spanish national who had been convicted of sexual abuse by the Spanish courts on the basis of recorded interviews with his young victims.

The meeting was suspended at 4.25 p.m. and resumed at 4.45 p.m.

43. **Mr. García Navarro** (Spain) said that in 2017 the Ministry of the Interior had adopted a protocol on the provision of statements by child victims. Such children were afforded protection by special law enforcement units. The best interests of the child were the guiding principle, and direct contact between child victims and alleged perpetrators was avoided. It was not necessary for minors to take oaths, and they could submit complaints to the police without the consent or knowledge of their parents or guardians. However, the police could decide that informing parents or guardians was in the best interests of a child who submitted a complaint.

44. Unless circumstances dictated otherwise, criminal investigation officers who took statements from child victims were required to inform the child's parents or guardians of the child's whereabouts and of the crimes committed against him or her. They were also required to collect as much information as possible about the child and the alleged crimes before taking his or her statement. The statements, which were given only when strictly necessary, were taken by officers with experience in working with minors. Law enforcement officials could also recommend that such minors should be represented by counsel.

45. As a Committee member had noted, children could remain with their imprisoned mothers up to the age of 3. There were three units for mothers in Spanish prisons that had facilities appropriate for young children, including nursery schools and playgrounds. One prison, Madrid VI, had a family unit that enabled parents who were both imprisoned to share the responsibility for raising their young children. Other facilities in which mothers convicted of crimes served their sentences accompanied by their young children included special apartments or other dwellings that were outwardly indistinguishable from ordinary dwellings. Children living in those facilities were entitled to the same public services as other neighbourhood children; in some facilities, they could also receive visits from their fathers.

46. In accordance with the Spanish Constitution, which enshrined the principle of equality before the law, and article 3 of the General Prisons Act, under which ethnic and racial distinctions were prohibited, the population of mothers in prison with their children

was not broken down by ethnicity. There were thus no statistics on the number of Roma mothers living in prisons with their children. The number of Spanish and non-Spanish mothers had been identified, however.

47. **Mr. León Caverro** (Spain) said he had noted that thus far the Committee had considered 1 of the 23 communications submitted to it in relation to Spain, all of which concerned the State's procedures for determining the age of unaccompanied foreign minors. The Spanish authorities were of the view that they had acted correctly in the case concerning the complainant whose communication had been considered, as it would have been irresponsible of them to place a person who they believed was an adult, and one who had a criminal record, in facilities that were meant for minors. They also believed that their system for determining the age of migrants was compatible with rulings handed down by the country's Supreme Court.

48. **Mr. Lafon Nicuesa** (Spain) said that when crimes were committed, the age of the alleged perpetrator was determined by a judge as part of the resulting criminal proceedings. In non-criminal cases, the Public Prosecutor's Office, acting as an autonomous guarantor of constitutional rights, ensured the integrity of the age-determination procedures that were conducted by the police, administrative agencies and other institutions. In that respect, the 2014 Framework Protocol on Procedures Applying to the Treatment of Unaccompanied Minors afforded the necessary legal, constitutional and humanitarian safeguards. A number of copies of the Protocol, which had been translated into English, had been provided to the Committee.

49. In determining a possible minor's age, the overriding principle was to act in the child's best interests. As a result, every effort was made to prevent adults from passing as minors and, as unaccompanied minors in Ceuta and Melilla were overseen by the local child protection authorities and could not be transferred to mainland Spain, to prevent minors from passing as adults. It was also in the best interests of the minors in child protection centres not to have to live with adults who were pretending to be children.

50. The Supreme Court had held that officials of the Public Prosecutor's Office could have reasonable doubts about the date of birth appearing in a possible minor's identity documents, even if the documents had been issued by a legitimate authority in the bearer's country of origin. However, such officials were required to include the reasons for their doubts in the case file. There were a number of possible reasons for such scepticism; for example, the date of birth might suggest that the bearer of the document had been born to a mother aged 9, or that siblings had been born three months apart. Persons claiming to be minors might be submitting a younger sibling's documents. In other cases, documents from a person's country of origin might have been issued without verification of the information provided by the person concerned.

51. Medical examinations, overseen by a forensic specialist, were conducted if the documentation submitted by a person claiming to be a minor was deemed unreliable. In one case, medical examinations had shown that 34 out of 35 persons who had arrived in Melilla with documentation showing that they were minors were in fact adults. In principle, however, officials of the Public Prosecutor's Office did not rely solely on either the documents submitted by claimants or the results of medical examinations. Cases were considered as a whole and on a case-by-case basis.

52. Claimants could refuse to undergo a medical examination. They were also entitled to apply for a review of the age determination made by the Public Prosecutor's Office, for which they could submit new evidence. Counsel could intervene at any time. In addition, there were four judicial remedies available to claimants who wished to contest, directly or indirectly, the results of age-determination procedures.

53. **Ms. Minguito Gil** (Spain) said that, unlike the migrant holding centres that were under the responsibility of the Ministry of the Interior, the temporary accommodation centres for immigrants in Ceuta and Melilla were overseen by the General Secretariat for Immigration and Emigration of the Ministry of Employment and Social Security. The immigrants staying in the latter facilities could come and go as they pleased. Those facilities were prohibited by law from taking in unaccompanied minors.

54. The Syrian conflict had led to a considerable increase in the number of persons seeking international protection in Spain, in particular along the country's southern borders, including in Melilla. In view of the growing number of arrivals, the Government had allocated funds to expand and improve the temporary accommodation centres in Melilla, including by providing green spaces and improving services for such vulnerable groups as pregnant women and single mothers with young children. Additional staff members had been hired, and a number of new protocols, including one on the detection of victims of human trafficking, had been developed. The maximum stay had been reduced in a bid to relieve overcrowding in the Melilla facility.

55. The unaccompanied minors of Moroccan origin in Melilla were the responsibility of the local child protection authorities. In 2017, Melilla, which was under more migratory pressure than Ceuta, had received a supplementary budget allocation from the national Government of more than €4.1 million, nearly twice as much as in 2016, to help city officials meet the needs of unaccompanied foreign minors. A budget had also been drawn up for an educational programme that would involve hiring 15 educators and reaching out to the unaccompanied foreign minors in Melilla, many of them in street situations, who were reluctant to turn to the city's child protection authorities.

56. **Mr. Pedernera Reyna** asked whether it was possible to appeal against a prosecutor's determination of age before an authority other than the Public Prosecutor's Office; what kinds of social, educational and leisure activities were organized for children and adolescents in the temporary accommodation centres in Ceuta and Melilla; and when the programme for children in street situations in Melilla had been launched.

57. **Mr. Madi** (Country Task Force) said that further efforts should be made to improve the situation in the temporary accommodation centres in Ceuta and Melilla. As he understood it, in some cases, the Spanish authorities went so far as to doubt the reliability of identity documents issued by competent foreign authorities. What kind of document was considered more reliable than official identity papers?

58. **Mr. Lafon Nicuesa** (Spain) said that a prosecutor's determination of age could be challenged by anyone with a legitimate interest in the case, including NGOs representing the rights of the individual concerned. Identity documents that had been issued by the competent authorities in the person's country of origin were rejected as proof of age if they were defective in some way, such as if they had been visibly altered, if the information they contained had not been verified by the issuing authority or if they were inconsistent with other relevant documents or with the results of thorough medical examinations. Such vigilance was warranted; for example, in some cases, minors as young as 14 years old had tried to pass themselves off as adults.

59. **The Chair** asked whether a genuine identity document without defects had ever been rejected as proof of age.

60. **Mr. Lafon Nicuesa** (Spain) said that no such document had ever been rejected.

61. **Ms. Minguito Gil** (Spain) said that, in the temporary accommodation centres, early learning activities were provided for children under 3 years old and extracurricular activities were organized for older children as part of a pilot project run by the NGO Save the Children. The Government was committed to further improving the conditions in those centres. The programme for children in street situations in Melilla had been piloted by the local government in 2017; following the success of the pilot, additional funding had been allocated to the programme for 2018.

62. **Mr. León Caveró** (Spain) said that the Public Prosecutor's Office determined a person's age provisionally, as part of emergency proceedings. Its determination could be reviewed if new information was provided. A definitive determination of age could be requested from the judicial authorities, for example in the context of asylum proceedings.

63. Migrants had access to free, specialized legal assistance from the moment they entered the country. All decisions regarding their status were properly reasoned and issued in writing. They were informed of all means of redress available to them.

64. The questions asked at the preceding meeting with regard to DNA testing concerned a case in which an abandoned child migrant had been taken into the care of the Spanish authorities. A woman claiming to be the child's mother had been requested by the authorities to undergo a DNA test before the child was returned to her, for the sake of child protection. The test had confirmed that she was the child's mother and the child had been returned to her within 24 hours.

65. The State party considered that individual communications concerning migrants who had been turned away at the border should be submitted to the Human Rights Committee, yet one such communication had been submitted to the Committee on the Rights of the Child. With regard to the allegations in that communication, it was not true that migrants had no way of entering Melilla without climbing the fence, for there was an office at the border where they could show their identity papers and request international protection.

66. **Mr. Kotrane**, drawing attention to the Committee's general comment No. 6 (2005) on the treatment of unaccompanied and separated children outside their country of origin and its general comments Nos. 22 and 23 (2017) on the rights of children in the context of international migration, drafted jointly with the Committee on the Protection of the Rights of All Migrant Workers and Members of Their Families, said that the Committee on the Rights of the Child was competent to consider individual communications concerning migrants who had been turned away at the border, if children were involved in the case.

67. **Ms. González Vicente** (Spain) said that the child poverty rate had fallen in recent years thanks to the Government's efforts to support poor families and promote social inclusion. Over €5.4 billion had been invested in a comprehensive family support plan, for example. In addition, a new strategy for preventing and reducing poverty and social exclusion, focusing on extreme poverty and child poverty, was being drawn up.

68. **Mr. García Labajo** (Spain) said that the Criminal Code had been amended to criminalize the recruitment of minors by armed groups in the context of international or non-international armed conflicts. The relevant provisions could be applied extraterritorially in cases where children had been recruited to fight abroad.

69. **Ms. Méndez Díaz** (Spain) said that the Government was fully committed to preventing the recruitment of child soldiers, including through cooperation with the Special Representative of the Secretary-General for Children and Armed Conflict. It had supported the "Children, Not Soldiers" campaign and had endorsed a number of relevant instruments and declarations, including the Principles and Guidelines on Children Associated with Armed Forces or Armed Groups.

70. **Ms. Skelton**, thanking the delegation for the constructive dialogue, said that the State party had clearly made good progress, despite the economic and social challenges it faced. The Committee was particularly concerned about the large number of children living in poverty and about the situation of vulnerable groups of children, such as migrant children. She hoped that the Government would take the Committee's concluding observations into account in developing public policies, in order to make a real difference to children.

71. **Mr. Garcés Sanagustín** (Spain) said that his Government would continue to engage in ongoing dialogue with the Committee and to take due account of its recommendations. Over the previous forty years, Spain had made tremendous progress with respect to the protection of civil and political rights, but there was still work to be done. Going forward, the Government would strive to place the protection and political participation of children and adolescents at the heart of its public policies.

The meeting rose at 5.55 p.m.