



Convention on the Rights of the Child

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Summary record of the 2387th meeting

Held at the Palais Wilson, Geneva, on Thursday, 23 May 2019, at 10 a.m.

Chair: Mr. Pedernera Reyna

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The meeting was called to order at 10 a.m.

Consideration of reports of States parties *(continued)*

Second periodic report of Cabo Verde (continued) (CRC/C/CPV/2;
CRC/C/CPV/Q/2 and CRC/C/CPV/Q/2/Add.1)

1. *At the invitation of the Chair, the delegation of Cabo Verde took places at the Committee table.*
2. **Ms. Rosabal Peña** (Cabo Verde) said that, as of mid-2016, there had been almost 200 children living in the four care institutions then operating in Cabo Verde. The children had been removed from their families as a precautionary measure to protect them from neglect and ill-treatment. Working with Aldeias Infantis SOS and other civil society organizations, the Government had since stepped up its efforts to return as many of the children as possible to their families. As a result, it had been able to close two of the four homes and reduce the number of children in institutional care to 45. That number included five children with severe physical disabilities. The two institutions still operating were close to the offices of the Institute for Children and Adolescents, which conducted both regular monthly inspections and unannounced visits and held yearly meetings with the children and staff. Children were given the opportunity to make complaints regarding ill-treatment but no such complaints had ever been received.
3. Responsibility for childcare services, including day-care centres that children could attend while their parents were at work, was being progressively transferred to the local authorities. In addition, more emphasis was being placed on alternative forms of care. There had been a demographic shift towards smaller families in recent years and extended family members were generally no longer available to take care of children while parents were at work. Given that, according to a recent survey, approximately half of all children in the country spent at least part of their day without adult supervision, measures had been introduced under the National Care Plan to ensure that children were able either to remain in school after hours and during holidays or to attend day-care centres. The Government had been able to invest heavily in such measures thanks to financial support from the World Bank and other international organizations. That support had also allowed for specialized training to be provided for 90 caregivers working with children, older people and persons with disabilities. Regulations on the operation of day-care centres catering for infants from birth to 3 years old had been adopted, and the Government was in the process of drawing up regulations on care centres for persons with disabilities and older persons. There were two centres able to accommodate children with severe psychomotor disabilities, one in the capital city and the other in Tarrafal.
4. The Commission for International Adoption was responsible for reassessing and monitoring international adoptions in line with the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption. Although international adoptions generally outnumbered national adoptions, the Commission endeavoured to give priority to national adoption; the aim was that international adoption should be a last resort only. In Cabo Verde, adoption and fostering were relatively new phenomena since children without parental care had historically been looked after by their extended family. Since arrangements of that kind were unofficial, measures had been taken to raise awareness of the adoption and fostering procedures whereby adoptive parents and guardians acquired legal parental rights. There were currently five national adoption cases pending approval before the courts.
5. Major investments had been made to create a public health network that covered the whole country and all municipalities now had health centres that provided specialized care for children, adolescents and older persons. At present, there was no formally established system for the early detection of child disability, but the four major hospitals all had staff specialized in early detection and, with support from the Government of Portugal, services were being extended to include remote care. Preschool teachers across the country received training to help them to identify children with special needs from an early age, and programmes catering for the needs of those children were being rolled out. All municipal

health centres provided treatment for the rehabilitation of persons with disabilities, including physiotherapy.

6. Between 2005 and 2018, the number of pregnant women who had attended at least four obstetric consultations, as recommended by health-care professionals, had risen significantly. Since 2018, investment had been increased in order to further improve prenatal care, in particular by deploying additional medical experts. Specialist staff now attended almost all births in the country's four main hospitals, all of which were fully equipped to deliver babies by caesarean section. Arrangements were in place to ensure that women from outlying islands could be transferred to any of those hospitals to undergo the procedure or receive other treatment when necessary. In addition, all four hospitals had breast-milk banks for women who were unable to breastfeed their babies. In antenatal classes, mothers were encouraged to breastfeed exclusively for the first six months after giving birth and, as a result, whereas in 2005 less than 30 per cent of mothers had exclusively breastfed their children for the first six months, by 2018 that proportion had risen to nearly 50 per cent.

7. Pregnant women were given supplements of iron and other vitamins in order to combat anaemia. Since mid-2018, children had been served protein-rich school meals, which included chicken, eggs and fish, and were given milk and iron-enriched snacks between meals. They also received iron supplements on a weekly basis. That initiative had reduced the proportion of children with anaemia from 55 per cent to around 45 per cent between 2005 and 2018. All salt sold in the country had to be enriched with iodine by law in order to tackle the issue of iodine deficiency among the population.

8. The National Institute of Public Health conducted epidemiological research and designed national campaigns to address various health issues, including HIV and mosquito-borne and diarrhoeal diseases. After around 20 children had been born with congenital defects, including microcephaly, following an outbreak of the Zika virus in 2016, a national campaign had been launched with the support of experts from the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO). Soon after giving birth, the mothers had been given allowances to cover the cost of travelling to one of the country's main hospitals to undergo treatment. Subsequently, they had been given training on how to care for and rehabilitate their children. Both mothers and children were receiving ongoing care and support. Checks were carried out at entry points to prevent the spread of disease-carrying mosquitoes from continental Africa and customs tariffs on insect repellent and mosquito nets had been eliminated as part of efforts to control the spread of disease. There had not been a single case of malaria in 2018 and there had been no further cases of Zika or dengue since the 2016 outbreak.

9. The prenatal care available to pregnant women now included free HIV/AIDS testing and, as a result, the rate of mother-to-child transmission, which the Government was aiming to eliminate, had fallen significantly. However, although the overall prevalence of HIV/AIDS had fallen between 2005 and 2018, the Government was concerned that the infection rate among women had actually risen slightly. For that reason, efforts to combat HIV/AIDS were focused on reducing the rate of infection among women by addressing issues of protection and bodily autonomy.

10. Abortions were legal until the twelfth week of pregnancy and were performed in hospitals. However, in 2012 and 2013 the health authorities had reported a number of women being admitted to hospital after attempting to terminate their pregnancy non-surgically using drugs not authorized for use in Cabo Verde. Since that time, the Ministry of Health had been carrying out border checks in conjunction with the General Inspectorate for Economic Activities in order to prevent the import and sale of such drugs. Those measures had proved highly successful and very few similar cases had been recorded in recent years.

11. The Government had invested heavily in securing the supply of water. The proportion of households with a mains water supply had increased from one quarter in the 1990s to three quarters at present. The Ministry of Education and Sport was working to ensure that all schools had access to drinking water and adequate sanitation, and, according to a recent survey, the vast majority of the population now had access to safe drinking

water. In recent years, urban areas had expanded rapidly, meaning that many streets were unpaved and many areas did not have adequate sanitation systems. A national programme had been set up for the period 2019–2021 to pave roads and streets, ensure access to basic sanitation and improve access to drinking water for the whole population. Legislation that provided for reduced water and electricity tariffs for low-income families, particularly single-parent families, had been adopted, with responsibility for implementing the new provisions being assigned to the local authorities, as the bodies best placed to identify families in need. The Government was also investing in renewable sources of energy, including solar and wind power, in order to reduce costs for consumers. Currently, over 90 per cent of the population had access to the national electricity grid, compared to 25 per cent in the 1990s.

12. The Ministry of Health ran specialized centres for adolescents offering various types of care, including mental health-care services and sex education, and had enhanced the training provided to the staff of those centres following an assessment conducted in 2016. In addition, in conjunction with the Ministry of Education, it organized talks, discussions and other events in schools, at which health-care professionals addressed particular areas of concern. The Government was developing an “adolescent-friendly” certification scheme for the specialized health centres as an incentive to improve the quality of care and was considering ways to involve families in the discussions and talks on young people’s health that took place in schools.

13. A commission chaired by the country’s President had recently launched a nationwide campaign to tackle the issue of excessive alcohol consumption, which was a major problem in the country, particularly among young people. While it was illegal to sell alcohol to minors, the law was poorly enforced. Signs displayed in shops and bars that warned against the sale of alcohol to minors were widely ignored and shopkeepers and bar staff often did not check the age of their customers. In parallel with the campaign, a new law had been enacted under which sellers would face substantial fines if they sold alcohol to minors. Municipal authorities had also taken steps to prevent the establishment of bars and shops that sold alcohol in areas close to schools.

14. About 32 per cent of the national budget was allocated to social welfare. There were various interlinked poverty-reduction programmes, including a drought mitigation programme; a social inclusion programme, under which direct cash transfers were distributed to women heads of household with children under the age of 15 years old; a productive inclusion programme, also aimed at supporting single mothers; and a comprehensive family support programme, designed to facilitate access to other social benefits. The national welfare system had a contributory scheme for persons in employment and a non-contributory scheme for older persons and for children and adults with disabilities. Efforts were being made to include domestic workers and other persons working in the informal economy in the contributory part of the system.

15. The regulations implementing the framework law on persons with disabilities, which was linked to all relevant international treaties, had been adopted by the Council of Ministers. The Government had also recently approved plans to train up special needs teachers and establish local teams to strengthen special needs education. In order to reduce the school dropout rate, it had made education compulsory for children up to the eighth grade and a free school meals programme had been introduced. In the current school year, a new computerized management system had been implemented that made it possible to identify children who failed to return to school at the beginning of each academic year. As a result of the measures taken, the number of enrolments in the eighth and ninth grades had increased, reversing the tendency for enrolment to decline as a result of the falling birth rate. The links between school education and vocational training had been strengthened to make it easier for children who had dropped out of school to enter vocational training. The pupil-to-teacher ratio was quite low for the country as a whole, but was higher in certain urban areas.

16. **Mr. Rodríguez Reyes** said that he would welcome information on the outcomes of measures taken to train teachers and school staff in the area of inclusive education and increase access to mainstream education, leisure activities, cultural activities, sports and public spaces for children with disabilities. It would be interesting to learn whether

awareness-raising activities were being conducted to combat discrimination against children with disabilities. In view of the fact that, according to the State party's replies to the list of issues (CRC/C/CPV/Q/2/Add.1, para. 21), there had been only one child with a disability attending a school for children with special needs in the 2017/18 academic year, he wondered whether a system for gathering data disaggregated by disability had been implemented. He also wondered whether steps were being taken to monitor the implementation of the International Code of Marketing of Breast-milk Substitutes and whether the Government would consider ratifying the International Labour Organization (ILO) Maternity Protection Convention, 2000 (No. 183). Lastly, he asked how many child-friendly hospitals there were in the State party and whether the Government planned to establish more such hospitals.

17. **Ms. Aho Assouma** (Country Rapporteur) said that she would like to know whether the children who had left the four shelters mentioned earlier had all been returned to their families, and, if so, what measures had been taken to ensure that they would be safely reintegrated into family life. She would welcome further information on tuberculosis/HIV co-infection rates and measures taken to treat prisoners with tuberculosis. In view of the fact that the State party was a producer of iodized salt, the Committee would be interested to hear why the number of persons suffering from goitre was so high and what was being done to treat children and adults with that illness. She wondered whether adolescent health-care facilities could be established in schools, where they would be more accessible to young persons. Lastly, she invited the Committee to provide further information on contraceptive use and access to the different forms of contraception.

18. **Ms. Khazova** said that she would welcome information about the situation of children who had been placed with their extended families. In particular, she wished to know who was responsible for supporting such children if they encountered difficulties; who was held responsible if members of extended families were found to have abused their parental rights; and whether any regulations were in place to protect children placed with extended families.

19. **Ms. Todorova**, noting that the Committee encouraged States parties to adopt the human rights model of disability, said that she would welcome information on measures taken to reduce barriers to inclusion for children with disabilities and increase their mobility and opportunities to participate in school life and leisure activities. Did the Government provide support to the parents of children with disabilities?

20. **Ms. Ayoubi Idrissi** said that it was not clear why so many abortions took place outside medical facilities, in unsafe conditions, when abortions could be performed lawfully within the first 12 weeks of pregnancy. The Committee would welcome information on any measures taken in schools to reduce the very high rate of teenage pregnancy. Noting that the Government had established two centres for children with severe psychomotor disabilities, she asked what measures were taken to identify such children; what the delegation understood to constitute "severe" psychomotor disabilities; and what forms of support were provided to enable children with disabilities to remain in the family home.

The meeting was suspended at 11:40 and resumed at 11:55

21. **Ms. Rosabal Peña** (Cabo Verde) said that the proportion of women who breastfed their children had increased significantly. The figures relating to the situation of children with disabilities cited in the replies to the list of issues primarily concerned children living in centres run by the Institute for Children and Adolescents. Only one child under the Institute's care, a 10-year old girl with cerebral palsy, had attended a school for children with special needs in the 2017/18 school year. The children living in the centres for children with severe psychomotor disabilities had generally been diagnosed with either cerebral palsy or microcephaly.

22. As a result of the Government's efforts to increase access to education, teachers had been trained in the use of sign language and a sign language dictionary had been published. In addition, five classes had been opened to provide blind children with education in Braille. As teachers were generally not trained to teach Braille, they were supported by blind classroom assistants recruited specifically for that purpose. Funding provided by the

organization World Education would primarily be allocated to training special needs teachers.

23. Action was being taken to raise awareness of disability and a campaign for the elimination of physical barriers had been launched. Architectural barriers were being addressed under a national programme that was partially funded by the European Union and, in Praia, steps were being taken to introduce a system of audible signals to make it easier for blind persons to move around the city. Under in-force legislation, all public infrastructure was required to be free from access barriers and, accordingly, the relevant implementing regulations stipulated that all newly constructed and newly refurbished school buildings should be accessible for persons with disabilities. All persons with disabilities, as well as all older persons, were entitled to various social benefits, and all parents received a minimum child allowance. In addition, families were given financial help to purchase wheelchairs for children who needed them. Specialized training was also available for the mothers of children with special needs and efforts were being made to include such children in leisure and sporting activities.

24. Five child-friendly hospitals had been established. The children who had left shelters had either been returned to their biological families or been placed with foster families. When children were withdrawn from their families, their placement and care was arranged and monitored by the children's ombudsman and the Institute for Children and Adolescents. When children were returned to their families, or placed with foster families, a document of commitment was established between the family, the Institute and the ombudsman. The children's welfare was monitored on a weekly basis for the first six months and less frequently thereafter. Financial and nutritional support were provided to poorer families. After the first six months, foster families could be granted guardianship of their foster children, subject to the approval of the children's ombudsman.

25. All prisons contained medical and nursing facilities. Inmates diagnosed with tuberculosis were separated from the rest of the prison population and monitored closely by doctors.

26. The sale and availability of iodized salt had been promoted in order to combat the problem of iodine deficiency, which was particularly prevalent in mountainous areas far from the coast.

27. Adolescent health-care programmes were run from health-care centres rather than hospitals, and the centres maintained close links with the country's schools. Condoms and other contraceptives were distributed free of charge to students. In consultation with UNICEF, the Ministry of Education was developing a cross-cutting sex education programme that prioritized issues relating to reproduction and intimacy and promoted girls' physical autonomy, decision-making capacity and ability to protect themselves.

28. Although abortion was not criminalized, some women still resorted to non-surgical abortion, for instance because they were unwilling to seek their partner's authorization or because they wished to keep their pregnancy and abortion secret. The Ministry of Health had undertaken a study of possible discriminatory attitudes that might impede women from seeking a surgical abortion. The Gender Research Centre of the University of Cabo Verde was also investigating the quality of care provided in hospitals, in cooperation with the Ministry of Health and the Ministry of Education.

29. **Mr. Gudbrandsson**, noting that, according to the State party's report (CRC/C/CPV/2, para. 157), a number of child offenders had been imprisoned, and that, given their small number, those children would be virtually isolated if they were segregated from adult inmates, said that he wished to know whether steps had been taken to find an alternative solution, such as allowing the children to serve their sentences in institutions that offered therapeutic services.

30. **Ms. Rosabal Peña** (Cabo Verde) said that the Ministry of Education planned to increase the number of crèches, which had hitherto been available for only 12 per cent of infants in the birth to 3-year age bracket. Private schools, of which there were fewer than 30 in Cabo Verde, could be opened only after obtaining an official licence. They were required to comply with the official curriculum and were monitored by the State authorities.

31. A total of 1,122 migrant children were currently enrolled in the education system. They enjoyed the same rights of access to education and health care as children who were citizens of Cabo Verde. Literacy education and Portuguese language programmes were organized for their parents with the assistance of migrant associations, and an agreement to implement special programmes whenever necessary had just been signed with an umbrella association.

32. The National Committee for the Elimination of Child Labour had been established in 2016 and a law listing the forms of work deemed hazardous for children had been adopted, which was based on the International Labour Organization (ILO) Worst Forms of Child Labour Convention, 1999 (No. 182). The law criminalized the sexual exploitation of children under 18 years of age for prostitution, in line with the National Plan to Combat Sexual Violence against Children and Adolescents.

33. As some children resorted to begging in the streets of the main towns, particularly during school holidays, the “Recreo” Leisure Programme had been launched in 2018 to enable schools to remain open and provide children with food and protection during holiday periods. In addition, a team of experts attached to the Institute for Children and Adolescents worked to identify and assist children who were begging in the streets.

34. A missing girl had been found dead by the police in 2017 and criminal investigations had been instituted. As other persons were still missing, international support in tracing them would be greatly appreciated. The National Plan against Trafficking in Persons had been adopted in that context and some people had recently been convicted of trafficking on the island of Sal. The Directorate General for Social Inclusion had established repatriation programmes for foreign victims of human trafficking.

35. Children were held criminally responsible from the age of 16 years. Prior to that age, they were deemed unfit to stand trial. It was important to note that, under the current judicial records system, the “young offenders” category included young adults aged between 18 and 21 years old as well as adolescents aged 16 and 17 years old. In the country as a whole, there were less than 40 cases involving minors of 16 or 17 years of age; in most cases, the young offenders involved were no longer legally minors.

36. Detainees in the main prisons on the islands of Praia, Sal and São Vicente were separated by age. Two 18-year-old adolescents were currently being detained in the prison in Fogo and one 18-year-old was being held in Santo Antão. In 2009 non-custodial sentences involving rehabilitation and community service had been adopted in order to reduce the number of adolescents in custody. In 2012 socio-educational measures had been adopted on behalf of children in the 12 to 15 age group. A total of 18 children had benefited from those measures and had been able to attend school. In just one case involving homicide, the judge had recommended that the offender should not attend school in order to protect him from reprisals, and a teacher therefore provided tuition in the Orlando Pantera Socio-Educational Centre.

37. In the 2010 population census, 115 persons had been registered as stateless and all those cases had been resolved pursuant to article 7 of the Nationality Act. The data would be updated when the next census was held in 2020. All children born in Cabo Verde to stateless persons were automatically granted citizenship pursuant to article 7 of the Act. Furthermore, in 2018 the Ministry of Justice had accepted a universal periodic review recommendation concerning ratification of the 1954 Convention relating to the Status of Stateless Persons.

38. **The Chair** (Country Rapporteur) said that the Committee had been informed that migratory flows focused on the areas of Santiago, Sal and Boa Vista. It would appreciate statistics concerning child migrants, procedures for identifying them and the policies applied.

39. He wished to know whether adolescents who were segregated from adult inmates were detained in the same building. He was also interested in hearing about the procedures for detaining children in the 12 to 16 age group, who would thus be separated from their families and communities, and for ensuring that they enjoyed the right to a fair trial.

40. **Ms. Rosabal Peña** (Cabo Verde) said that, as already noted, 1,122 migrant children had been identified under the new and highly effective registration system, and an agreement on literacy, Portuguese language and other programmes had been signed by the Ministry of Education some three weeks previously with migrant associations.

41. Juvenile court judges could sentence children in the 12 to 15 age group who entered into conflict with the law to an open, semi-open or closed regime. Eleven children were currently serving their sentence in the closed regime at the Orlando Pantera Socio-Educational Centre in Praia and all but one, as already mentioned, attended school. They received visits from their families and their situation was monitored by juvenile court judges, guardians and the Institute for Children and Adolescents to ensure that their rights were respected. Other children in the 12 to 15 age bracket were sentenced to community service.

42. The central prison in Praia had one wing for adults and another for adolescents. The smaller prisons in Sal and São Vicente had separate cells for adolescents in the same building.

43. **Ms. Aho Assouma** said that while the Committee welcomed the progress achieved in the State party in terms of new laws, strategies and policies, it remained concerned about the sufficiency of the budgetary funds allocated for the implementation of programmes. It also wished to highlight the importance of birth registration, support for single-parent families and children living with unmarried partners, and action to combat sexual violence and abuse and incest.

44. **Ms. Rosabal Peña** (Cabo Verde) said that the Government would accord priority to the implementation of the cross-cutting interministerial programme for the protection of children and adolescents. Special support would be provided to families in which the sole parent was a woman. In the 2019 budget more funds had been allocated to the social affairs sector than to any other sector and the funds allocated to the Institute for Children and Adolescents had been almost doubled.

45. **The Chair**, encouraging the State party to use the best interests of the child as its guiding principle and main point of reference when addressing the Committee's concluding observations, said that the recommendations should also be disseminated among children so that they themselves could become a driving force in their implementation.

The meeting rose at 12.55 p.m.