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COMMITTEE ON THE RIGHTS OF THE CHILD

Eighth session

SUMMARY RECORD OF THE 197th MEETING

Held at the Palais des Nations, Geneva,
on Wednesday, 18 January 1995, at 3 p.m.

Chairperson: Mrs. BADRAN

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The meeting was called to order at 3.05 p.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 4) (continued)

Jamaica (continued) (CRC/C/8/Add.12; CRC/C.8/WP.3)

1. The CHAIRPERSON invited the Jamaican delegation to reply to the questions put by members of the Committee at the previous meeting on the section of the list of issues (CRC/C.8/WP.3) entitled "Civil rights and freedoms".
2. Mrs. TAYLOR (Jamaica) said that the Jamaican delegation was puzzled by the distinction drawn between the well-being and the best interests of the child. Perhaps a member of the Committee could provide a definition.
3. In response to the question whether corporal punishment, especially in the home, constituted excessive behaviour, if a child suffered injury requiring hospital treatment, the hospital was required to report the matter. However, Jamaica needed to look more closely at the question of child abuse in the home. It was out of that concern that the Specialist Committee on Child Abuse had been established; a copy of its report would be sent to the Committee. The Specialist Committee had insisted on full reporting of cases of abuse and had recommended public information programmes to increase people's awareness of the problems of child pornography and abuse. As yet, Jamaica had no regulations governing the production and reproduction of videotapes, and therefore the authorities had no control over their content. Children did have the right to complain about sexual abuse and had recourse to child guidance clinics; the juvenile unit in the Ministry of National Security was responsible for investigating such complaints.
4. Mr. BOWEN (Jamaica) said that, with regard to issue No. 19, studies undertaken by the United Nations Children's Fund (UNICEF) and by the Jamaican authorities indicated that ill-treatment and sexual abuse were more common among girls than among boys and were usually inflicted by relatives or family friends at holiday times. Where possible, action was always taken by the juvenile courts to punish the offenders and help the children concerned. The Specialist Committee on Child Abuse and UNICEF were continuing to collect data and a further report on the ill-treatment of children would be produced shortly.
5. Mrs. SANTOS PAIS said the Committee always emphasized the principle of the best interests of the child because it had the impression that the principle was one to which many countries paid insufficient attention. The Convention did not provide a definition because no one definition could apply to all situations. For example, the best solution for different children in the same family might not be the same. The well-being of the child often meant guarantees of minimum living standards and not necessarily of the best possible development of the child.
6. As to the problem of videotapes, the Convention encouraged a balance between the freedom of the media and the need for the media to act in accordance with the spirit of the Convention, which stipulated that States should encourage the development of appropriate guidelines for the protection

of children against harmful media products. Some Governments had introduced a code of ethics to encourage the media to take into account such important matters as non-discrimination and the best interests of the child.

7. She was grateful for the promise that the Committee would receive a copy of the report of the Specialist Committee on Child Abuse. However, one of the functions of the Specialist Committee seemed to be to work for the adoption of a child abuse act, and perhaps more attention should be given to that function. It would also be useful if the word "excessive" could be removed from the term "excessive punishment" in the legislation on the ill-treatment of children.

8. The CHAIRPERSON invited the Committee to take up the section of the list of issues entitled "Family environment and alternate care" (CRC/C.8/WP.3), which read:

"Family environment and alternate care

(Arts. 5, 18 paras. 1 and 2, 9, 10, 27 para. 4,
20, 21, 11, 19, 39 and 25 of the Convention)

20. Are there any problems encountered in monitoring and implementing the Maintenance Act? What procedures exist to ensure that a child is not deprived of his or her maintenance?

21. In the light of the provisions of article 19 of the Convention, please indicate how cases of the neglect and abuse of children, including in the home, are investigated and the steps taken to prevent such abuses from occurring, as well as the procedures which children can use to complain about their ill-treatment. In addition, please provide further information on the measures taken to follow up on the recommendations forthcoming from the Task Force on Child Abuse, referred to in paragraphs 52 and 53 of the report.

22. Please provide further information on the kinds of institutions which exist to provide alternative care to children, the number of children under such care, the coverage they provide for children who are in need of care and the procedures in place for monitoring the conditions in the institutions. What difficulties, if any, are encountered in providing quality care in these institutions, including on account of economic constraints?

23. How and to what extent is parental education provided for? Does such parental education promote recognition of the principle that both parents have common responsibilities for the upbringing and development of the child and that the best interests of the child are taken as the primary consideration in all actions concerning the child? Are family counselling services widely available?

24. What safeguards are in place to ensure that the procedures relating to national and inter-country adoption are guided by the provisions of the Convention, in particular its articles 3, 12 and 21? Are any difficulties being encountered in the implementation of the provisions of the above-mentioned articles of the Convention?"

9. Miss MASON said that at the previous meeting the Jamaican delegation had stated that gender discrimination was reversed in Jamaican society. Were there any programmes in place to improve the situation by focusing on the problems of boys? With regard to the family in general, she could accept that Jamaican society was matriarchal but believed that it was also macho. Given that the family was the basic unit of society, she wondered to what extent the Jamaican authorities recognized the concept of "back to basics", which was inherent in the provisions of the Convention concerning the family's responsibilities for the well-being of its children.

10. Mrs. SANTOS PAIS said UNICEF had reported that sexual abuse was a persistent problem in Jamaican society. Once again the need was to change attitudes. It appeared that more information and education programmes aimed specifically at males should be undertaken. Frequently, boys made girls pregnant but did not take the pregnancies seriously. It was common for men living in de facto family situations to desert the family and they were often difficult to locate when maintenance orders were issued. She would like to know what preventive measures were being taken, whether Jamaica had signed any bilateral agreements with the countries to which absentee fathers commonly made their way, and whether Jamaica was considering acceding to any international conventions covering such matters as the recovery of maintenance payments.

11. Mrs. BELEMBAGO noted that in 1994, the International Year of the Family, the Committee had devoted a day of general discussion to the role of the family in promoting the rights of the child. She would like to know what had been done in Jamaica to mark the Year by way of special events or publications. Again, were there any arrangements for identifying the problems of families with a view to helping parents to play their proper role and children to exercise their rights?

12. Mr. HAMMARBERG said that it would not be helpful to try to determine priorities as between boys and girls since their problems were a reflection of a situation affecting all children. It was interesting that the Jamaican delegation had stressed the lack of role models for boys. Perhaps there were other male figures, for example teachers and sports club leaders, who could replace absentee fathers to some extent. He noted that, despite the allowances paid to foster families, such families were still in short supply and many children remained in institutional care. Would the allowances be increased still further to encourage poorer families to offer foster homes?

13. Many countries still found the detection of child abuse difficult even when their legislation was adequate. Since children were often reluctant to complain of abuse, some countries had made it a legal requirement for professionals, teachers and doctors for example, to report evidence of abuse.

What was Jamaica's approach to the problem of detection? On the question of maintenance payments, he assumed that, if they could not be recovered, the State compensated the mother in order to ensure that the children did not suffer.

14. Mrs. EUFEMIO said UNICEF had reported that families were generally more stable in rural areas than in the towns. She would like to know the rate of migration from the countryside to the towns and what action was taken to restrict the flow.

15. With regard to the problem of role models for boys, it was significant that 70 per cent of Jamaican children were born out of wedlock. Was there any provision for the sons of absentee fathers to attend day-care centres or other pre-school institutions where some role modelling could be offered? Since the effort to change attitudes should begin with very young children, were there any other arrangements in Jamaica for the socialization of children aimed at changing the image of the male in society?

16. Mrs. SARDENBERG said that she would like the Jamaican delegation to elaborate on the relationship between parents and children in the family. For example, how did the high rate of single-parent families affect the balance between parental authority and the rights of the child, especially with regard to decisions affecting the child's interests.

17. Miss MASON said that there was no reference in the report to the obligations of the State under article 11 of the Convention concerning the kidnapping of children. What was the incidence of inter-country marriage and did Jamaican legislation deal with the kidnapping of a child by the non-Jamaican parent?

18. Mrs. TAYLOR (Jamaica) said that a number of NGOs engaged in activities for the socialization of boys lacking a male role model, in an effort to give them an understanding of parental responsibilities and the need for stable family life. Membership of the Scouting and Boys Brigade movements was falling off because of concern about homosexuality. The Ministry of Education and NGOs also produced manuals and organized workshops and programmes to help young couples prepare for parenthood and to assist single mothers. It was quite common for absent fathers to visit their families, so that the boys did have some contact with a male figure. Grandmothers also made a big contribution to family life, especially when the mother played the father's role of breadwinner.

19. Jamaica had established a special committee to organize a full programme of events to mark the International Year of the Family. It was the intention to increase the fostering allowance further in order to attract more families. It was certainly a legal requirement for professionals to report evidence of child abuse, and full investigations were always carried out. Migration from the countryside to the towns was a major problem, especially since it often resulted in the break-up of the family. Many fathers also emigrated to seek a better life, often abandoning their Jamaican families.

20. Mr. BOWEN (Jamaica) said that the juvenile and family courts always took serious account of the views of children, who could be heard with or without their parents present. Jamaica's children's institutions were of a good standard, but the authorities agreed with the Committee that family life was the better alternative and they therefore promoted the foster-care programme very vigorously. The well-being of children in foster homes was also monitored.

21. If a father did not comply with a court order for maintenance, his wages could be attached at source. Court orders could be enforced throughout Jamaica and in the United Kingdom, Canada and five or six States of the United States of America with which Jamaica had enforcement agreements - provided that the father could be located. There had been very few instances of children being kidnapped by a parent, and such an act was, of course, punishable by law. Jamaica had had occasion to seek legal assistance from foreign Governments to secure the return of a child to Jamaica. He could confirm that it was a legal requirement to report evidence of child abuse.

22. Mr. HAMMARBERG asked what mechanism was in place to prevent the exploitation of foster-children as domestic workers. On the obligation for medical and other professionals to report instances of child abuse, to what extent could it be ascertained that the system was operating as it should? Might there be pressures within the local community not to report cases of abuse?

23. The CHAIRPERSON said that to undergo a physical examination could be a traumatic experience for a child already subjected to sexual abuse. Parents might thus be deterred from having a child examined. Were the doctors who conducted such examinations given any special training that would enable them to make the experience less traumatic for the child? On the question of the telephone hotline, how did the system function among the poorer sectors who did not have access to telephones?

24. Mr. BOWEN (Jamaica), responding to a question concerning the foster-care programme, said that when a child was matched with prospective foster-parents and placed in a home, a Children's Officer was systematically assigned to the case. That Officer was responsible for carrying out regular visits, and the frequency of the visits depended on the circumstances. A progress report was drawn up every six months. If difficulties associated with the child's normal growth and development had been identified, the parents were given appropriate advice. If maltreatment was detected, the child could be removed from the foster-home. Adequate supervisory mechanisms thus existed.

25. On the system of reporting by the medical profession, doctors or nurses detecting abuse would call the Juvenile Unit of the Police Force, the Children's Services Division or the Family Court in Kingston to report signs of abuse and suggest appropriate action to be taken. A social worker would then visit the home and take the matter further, counselling the parents or referring the matter to a court, as appropriate. The system was not yet mandatory, but would become so when new legislation came into force. As for

the hotline, there were public telephone boxes throughout the island. The Family Court hotline served Kingston and St. Andrew parish primarily, but an island-wide network set up under the auspices of the Jamaica Foundation for Children and the Children's Services Division should be in place by May 1995.

26. Mr. HAMMARBERG asked for more details as to how the system for monitoring foster-care worked in practice. In how many cases had fostering arrangements been terminated? How often were reports by medical professionals concerning abuses actually filed? Was there any way of interpreting the statistics on use of the hotline in order to establish its effectiveness as a system?

27. Mr. BOWEN (Jamaica), responding to concerns about a possible breakdown of foster-care arrangements, stressed that Children's Officers were required to visit foster-homes even where the placement appeared to be proceeding satisfactorily. No hard figures were available, but it was his impression that most breakdowns related to the inability of the parents to cope with normal growth and development problems such as bed-wetting, stealing and truancy, rather than to exploitation or abuse.

28. Reverting to the question of the system of reporting by medical professionals, he said that, following a report of abuse, a social worker would visit the hospital, collect data and interview the parents. In less serious cases, the parents would be counselled. If the abuse was more serious, the matter would go to court, and the child might have to be removed from the home pending completion of the investigation. On submission of a report, a judge would decide whether the child was to be removed permanently from the home, and what type of action should be taken against the abuser. There had been few such reports of abuse; he would be pleased to provide specific figures on the incidence of reporting in 1993, and on action taken in response to those reports.

29. Mrs. BELEMBAOGO asked whether there were enough social workers to monitor placement in foster-homes effectively. Did adequate special services exist throughout the island? She noted that social workers also had a role to play in the process of ensuring that account was taken of the child's opinion when making a court decision. Did the courts have their own special social services, or was the process one of collaboration between magistrates or ordinary social workers? Were there special children's courts or were cases involving children dealt with by the ordinary courts? If there were no special children's courts, were the ordinary courts able to deal expeditiously with cases involving children?

30. Mr. BOWEN (Jamaica) said that there were special courts to deal with children, comprising 2 Family Courts and 12 Juvenile Courts covering the island's 14 parishes. The presiding judges and chairmen of panels were specially trained to deal with cases involving children under 18 years of age. Social workers from the Children's Services Division were attached to each parish. The social worker was required to prepare a report on every case involving a child and to attend the court proceedings in order to answer any questions raised. The foster-care programme was also operational island-wide, but he would concede that there were not currently enough Children's Officers

to serve the entire population. It had been proposed to increase the number, and with the integration into the system of the agencies dealing with adoption and fostering, more resources would be available to deal with the specific concerns of children.

31. The CHAIRPERSON invited the Committee to take up the section of the list of issues entitled "Basic health and welfare" (CRC/C.8/WP.3) which read:

"Basic health and welfare
(Arts. 6 para. 2, 23, 24, 26 and 18 para. 3
and 27 paras. 1 to 3 of the Convention)

25. What proportion of the national and local level budgets is allocated to health and, of that, what percentage is devoted to the provision of primary health care?

26. Please provide information, with statistical data and indicators where possible, on:

- access to health care services in both urban and rural areas;
- level of malnutrition among children and any programmes to reduce it;
- family planning services;
- prenatal and postnatal services; and
- the occurrence and treatment of HIV infection among children and parents and measures to prevent the spread of the disease.

27. Please provide information on the situation of disabled children including their access to education, training, health care services, rehabilitation and integration into society, and preparation for employment and recreation facilities.

28. Are social security schemes available and, if so, how do they benefit children and are they adequate to meet the needs of the poorest children in society?"

32. Miss MASON asked whether, in the context of the legal reform being undertaken the Government was envisaging any legal measures with respect to persons, particularly children, affected by AIDS. What measures existed to ensure that such children had access to health care and medical treatment? Were there laws, policies or practices to protect the privacy of children of parents with AIDS, shielding them from mandatory testing and from stigmatization? What counselling programmes existed for HIV/AIDS-infected children and their families?

33. Mrs. BELEMBAGO said it appeared from the supplementary written replies submitted that the social welfare system covered only the children of working parents, but that the Ministry of Social Security provided some specific measures for children whose parents were unemployed. Was the social welfare system open to all children, regardless of the employment status of the parents? If not, what measures did the Government envisage to make its coverage universal?

34. Mr. HAMMARBERG noted that no national study had been carried out on child disabilities. It might be a good idea to conduct such a study as a basis on which to elaborate a policy to protect the rights of disabled children. One aspect of the problem that should be stressed was the importance of early detection, to enable remedial measures to be taken. What measures were envisaged to secure a more comprehensive policy in that field? Did public information campaigns also exist to combat prejudice against the disabled?

35. Miss MASON said that it was difficult to gain a precise idea of the adequacy of health services for children from the sparse information contained in the report. Was the level of health care services adequate to cover the entire population in both the urban and the rural areas? What were the main causes of child mortality? What problems, other than economic problems, were encountered in that regard? For instance, what was the attitude of mothers towards attendance at health centres?

36. Mrs. SANTOS PAIS said that, where recorded cases of AIDS were few, complacency on the part of the authorities might result in a spread of the disease. In view of the noticeable tendency to conceal cases of AIDS measures to combat discrimination were thus as important as preventive measures. On the question of budgetary allocations, it was essential to identify children's health care as a priority area. While Jamaica's spending on education was the highest in the Caribbean, its spending on health was the lowest. Some reallocation of budget resources was therefore needed, reaching out to those sectors of the population too poor to attend health centres.

37. The CHAIRPERSON noted that the social welfare system consisted of a contributory social security scheme and a non-contributory public assistance scheme. She asked for more information on the latter scheme. Who was covered? What was the monthly amount of benefits? Were benefits indexed to take account of inflation?

38. Mrs. TAYLOR (Jamaica) said that a specialist private unit had been established at the University Hospital offering support to children born with AIDS, who had contracted AIDS, or whose parents were suffering from the disease. As to child disability, since the information currently available was inadequate, consideration was being given to conducting a national study and it was hoped that funds for the study would become available in the next budget.

39. Health services in Jamaica were generally adequate, but efforts were hampered by cultural problems in rural areas, where obeah was still practised and parents had recourse to bush doctors. Public education campaigns, constantly reinforced, were the most effective means of eradicating such practices. It was also expected that the Community Health Aid Programme would have greater impact as more funds became available, since much could be gained from observing children in the home rather than in the artificial context of a clinic.

40. The public assistance scheme offered three types of benefits to assist children: first, a benefit (J\$30 - less than US\$ 1) was paid to pregnant and lactating mothers; second, benefits were available to children under the age of five; and third, benefits were paid to female-headed households, regardless

of the mother's employment status. The names of those eligible were collected by the Community Health Aid Programme, through the prenatal clinics, and through censuses and surveys. However, the amount of the benefits payable was severely limited by the international agencies, which placed restrictions on the allocation of budgetary resources for that purpose. The amount of the benefits, which was extremely inadequate, was determined on the basis of the highly practical criterion of the amount of money available for the purpose.

41. Mr. HAMMARBERG said he would have welcomed a fuller response to his question concerning early detection of disability. It was important not to rely too heavily on the work of NGOs in that regard. It was not a question of dispensing charity: disabled children had the right to attend an ordinary school in the same way as other children, and were entitled to enjoy that right even if the extra facilities needed entailed additional costs. More might also have been said on the community-based rehabilitation approach, which was an inexpensive and effective way of enabling disabled children to adjust to everyday life. The World Health Organization and other agencies operated community-based rehabilitation schemes, details of which might be of interest to the Jamaican delegation.

42. Mrs. SARDENBERG asked what follow-up there had been to the Pre-Nursing Programme in terms of support personnel.

43. Miss MASON, reverting to the question of teenage pregnancies, a phenomenon which seemed to be becoming socially acceptable in Jamaica, asked what sort of information was provided in the sex education component of the school curriculum. What role did the Big Brother and Fathers Incorporated programmes play in eliminating the belief, widespread among the boys in their care, that it was somehow reprehensible not to father large numbers of children at an early age? What thought had been given to ways of reducing the incidence of teenage pregnancies?

44. Mrs. TAYLOR (Jamaica), responding to questions on disabled children, said that hearing and vision disabilities were the only two areas where adequate assessment capacity existed. It was hoped that that problem would be tackled in the coming financial year. The first step, however, was to conduct a national study and use it to convince the Cabinet and Parliament of the need for additional funds. A pilot project on community-based rehabilitation was being carried out in St. Catherine parish, but no report on the outcome was yet available. The Pre-Nursing Programme had run for two years and had been very successful, but had been terminated for lack of funds. The new Minister of Health intended to restart the programme in the next financial year. There was a public education programme to reduce the incidence of teenage pregnancy, which used television advertisements and the slogan "Two is better than too many". There was also an empowerment programme, the philosophy of which was that young girls who felt they had control over their own lives were less likely to feel reliant on young men, and thus less likely to become pregnant at an early age. The Big Brother and Fathers Incorporated programmes, and also the National Council for Drug Abuse, ran seminars and workshops for young people aimed at deterring them from embarking on their sexual lives

prematurely. Those measures had proved very successful: only 20 per cent of the teenage mothers targeted had become pregnant for a second time, while the other 80 per cent had returned to secondary or tertiary education under the Teenage Mothers Programme.

45. Mrs. SANTOS PAIS stressed the importance of persuading Parliament that account must be taken of the best interests of the child, as well as of purely economic considerations, in determining the level of budgetary allocations.

46. Mrs. BELEMBAOGO stressed the importance of raising awareness among members of Parliament about children's real needs, since ultimately it was Parliament and not the Government which established priorities and decided on the budget. Far too often, social problems were given the least consideration. In her country, action had been taken in two ways: first, a UNICEF representative had been invited to address Parliament on children's issues; second, a visit to Parliament by a group of children had been organized. Both activities had proved useful.

47. Mr. KOLOSOV expressed concern about drug abuse in Jamaica and the measures adopted to combat it. In his view, campaigns targeted solely at schoolchildren would prove ineffective, particularly when adults did not set a good example and continued the tradition of smoking marijuana. He therefore recommended that any action taken should be aimed at society as a whole.

48. Mrs. TAYLOR (Jamaica) said that she was in fact a member of Parliament who often participated in parliamentary debates on the budget. In keeping with Mrs. Belembaogo's suggestion, she herself would give some thought to ways and means of raising awareness among members of Parliament on children's issues. As to drug abuse, the problem with marijuana was that until recently it had not been regarded as a drug, like cocaine for instance. Use of marijuana, even for medicinal purposes, was part of Jamaican culture and convincing people to change their attitudes would certainly prove a challenge.

49. Mrs. BELEMBAOGO, elaborating on her earlier comments regarding the need to approach Parliament on children's issues, said that in her country a surprise visit to Parliament with a group of children had been arranged on Christmas Eve. Since Christmas was traditionally the time for children and Parliament was in full session, the visit had had a great impact on Parliament. Perhaps a similar visit could be arranged in Jamaica around the time of national children's day mentioned earlier by the delegation.

50. The CHAIRPERSON invited members of the Committee to put additional questions to the delegation on the section of the list of issues entitled "Education, leisure and cultural activities", (CRC/C.8/WP.3), which read:

"Education, leisure and cultural activities
(Arts. 28, 29 and 31 of the Convention)

29. What portion of the budget is allocated to primary education?

30. What time-related goals has the Government set to progressively realize the right to education?

31. Please provide statistical and other information disaggregated, by gender, rural/urban areas, age and level of education (primary/secondary) in relation to the implementation of the right to education and the incidence of school drop-out.

32. Please provide clarification as to the meaning of compulsory school areas. In addition, please provide clarification as to the statement made in paragraph 17 of the report that the Minister (responsible for education) shall by order declare the compulsory school age in relation to compulsory education areas.

33. What measures are being taken to improve school attendance and to prevent children dropping out from school?

34. What measures are being taken presently to improve the quality of education, including through curriculum development and teacher training?

35. Please provide information on the integration of the subject of human rights into the curricula of formal and non-formal education.

36. Are there any programmes to promote recreational and cultural activities other than at school?"

51. Mr. KOLOSOV said that, according to the UNICEF situation analysis of the status of children and women in Jamaica, conditions in most primary schools in Jamaica were deplorable. Moreover, many teachers were leaving the profession because of the poor working conditions and very low salaries, while fewer students were entering teacher training colleges. He was concerned that the situation might adversely affect the literacy rate, which was currently very high, and inquired what steps, if any, the Government was taking to tackle the problem.

52. Mrs. SANTOS PAIS asked what vocational training was available to ensure that young people would not opt for low-paid employment upon completion of their schooling?

53. The CHAIRPERSON asked for clarification regarding the different types of secondary schools in Jamaica.

54. Mrs. TAYLOR (Jamaica) said that, following a review of the situation of teachers, salaries had been significantly increased, something which it was hoped would attract more people into the profession. Community assistance programmes had also been launched for the upgrading of schools, programmes under which the community would be responsible for repairs and maintenance. As to the different types of secondary schools, comprehensive high schools provided vocational training for less academic students so that they would leave school with a useful skill. Some secondary schools were currently being phased out so that in future only comprehensive and grammar high schools would remain.

55. Mr. BOWEN (Jamaica) said that, as far as possible, vocational training programmes were tailored to suit local job opportunities.

56. Mr. HAMMARBERG inquired as to the number of playgrounds in Jamaica and whether such facilities were generally attached to schools.
57. Mrs. TAYLOR (Jamaica) said that in the past every Jamaican school had had playground facilities. However, that was no longer possible due to overcrowding in schools and the need to use all available space for new school buildings. A community playground programme was being launched, in which two or three schools in a neighbourhood would share the same facilities. It would be funded by UNICEF.
58. The CHAIRPERSON asked whether Jamaica had undertaken or envisaged any reform of its education system. If so, was any technical assistance provided by UNESCO in that connection.
59. Mrs. SANTOS PAIS asked for detailed information on how pre-school and school curricula were established. Was there any effort to develop standard national curricula and did they prepare children properly for future employment?
60. Mrs. TAYLOR (Jamaica) said that two education programmes were currently being sponsored by UNESCO: ROSE (Reform of Secondary Education) and the Early Childhood Stimulation and Education Programme. With reference to school curricula, teachers attended monthly training courses at which they were shown how to develop curricula, prepare charts and kit out classrooms and also had the opportunity to exchange views on their teaching experiences. Similar training programmes were run for staff at pre-school day-care centres with material and financial resources provided by UNICEF and UNESCO. Primary school teachers had to complete teacher training college, while secondary school teachers required a university qualification. Other projects run with international assistance included a reading programme sponsored by UNICEF and a computer training course in some Jamaican high schools. Documentation on such projects could be provided in due course for the information of members of the Committee.
61. Miss MASON inquired how the replacement of the Common Entrance Examination by the National Assessment Programme Examination would guarantee more children access to secondary education, given the remarks in the initial report (CRC/C/8/Add.12, para. 69) to the effect that a shortage of funds made it impossible to comply with article 28 of the Convention.
62. Mr. HAMMARBERG said the existence of playgrounds was often a good indication of whether the best interests of children were really taken into account, for there was an enormous difference between organized playgrounds provided by society and children being allowed to play in the streets. While he appreciated the practical problems mentioned by the Jamaican delegation, it was none the less better policy for playgrounds to be attached to schools, making the latter a focal point for young people rather than mere learning centres.
63. Mrs. TAYLOR (Jamaica) said that in the past the secondary education of Jamaican children had depended entirely on the results of the Common Entrance Examination, irrespective of their past performance or potential. A further problem had been the limited number of places at secondary schools in some

districts, which meant that even if a child performed well in the examination he would not be guaranteed entrance to the school. In theory, under the new assessment system all children should have access to secondary education. The Government would therefore be obliged to provide adequate facilities for them, although that would not be possible in the short term owing to budgetary constraints.

64. The CHAIRPERSON invited the members of the Committee to put additional questions relating to the section entitled "Special protection measures" (CRC/C.8/WP.3, paras. 37-42).

65. Mr. KOLOSOV sought clarification regarding the term "employed" mentioned in the Jamaican Juveniles Act in connection with children working with their parents or guardians. In his view, employment implied some kind of recompense.

66. Mrs. SANTOS PAIS also expressed concern regarding the situation of working children, particularly in the light of information contained in the UNICEF situation analysis of the status of children and women in Jamaica. As in many other countries, children in Jamaica engaged in unskilled, tedious work were unlikely to find more interesting employment in the future. Moreover, Jamaica had ratified very few conventions on labour issues. Most Jamaican children seemed to help their families with farm work or find other casual employment. That meant not only that they were restricted in their choice of work, but also that it was difficult to monitor their working conditions. Inspections and penalties were only applicable to formal work situations. She would welcome more information on the situation and possible ways of improving it, particularly in the light of article 32 of the Convention.

67. Mrs. TAYLOR (Jamaica) said that the problem of child labour hinged on the definition of the child. In Jamaica, a 17-year-old was considered an adult and therefore worked. She admitted that children usually did unskilled work and the shortage of vocational training centres meant that it was difficult for them to enhance their prospects. Children often helped their families in farm work, for instance by taking produce to the market. The numerous street children in Jamaica were often itinerant vendors, of sweets or newspapers, and it was hard for them to acquire any vocational training.

68. Mrs. SANTOS PAIS observed that the ILO Minimum Age Convention (No. 138) of 1973 established the minimum age of employment as 15 years, which might explain Jamaica's failure to ratify it. However, the Committee's main concern was the situation of younger children; all too often, working to help the family was merely a way of concealing child labour. It was understandable that children in families with low incomes should feel responsible, but attitudes must be changed: there were other ways of helping the family in the long term and the nation as a whole, namely through better education. Furthermore, in Jamaican society where adult unemployment was extremely high, why should children have to bear the burden? A solution could be found by means of appropriate legislation, information campaigns and international assistance, at least so as to create the conditions for ratification of the relevant conventions at some stage in the future.

69. The situation of street children was also worrying, above all because of the likelihood of their eventual placement in institutions. Regrettably, in poor countries the conditions of children placed in care were far worse than those of society at large. More importantly, such children, even offenders, should only be subjected to detention as a last resort and for a brief period. As to the treatment of children in care, their age and needs must be taken into consideration and conditions properly monitored to ensure that they were not subjected to additional punishment. She would welcome more information on those questions.

70. Mr. HAMMARBERG asked whether any comprehensive study on street children was envisaged. The fact that 17-year-olds were regarded as adults in Jamaica did not mean that they were exempt from certain provisions of the Convention, which defined the age of majority as 18. However, it was children between the ages of 12 and 17 that were of greatest concern to the Committee. Human Rights Watch had reported that in one juvenile remand centre for boys in Jamaica there was overcrowding, inmates had alleged abuse by staff and there were no schooling facilities. Was that information correct and had any steps been taken to remedy the situation?

71. Mrs. SARDENBERG observed that there was no mention in the report of the effect of tourism on child prostitution. Had the Government undertaken any studies in that area? Was there any other information available on the situation?

72. Mrs. TAYLOR (Jamaica) said that no cases of child prostitution had been recorded in Jamaica. Street children, on the other hand, were a recent phenomenon and, although there were currently two small programmes under way to deal with that problem, further measures would have to be considered. Children in maximum security centres did not in fact go to school, but generally worked on the grounds. Since among those detained were some who had been found guilty of murder, even premeditated murder, any training programmes would have to be conducted within the walls of those institutions. A maximum security centre for girls was in the planning stage; there too, the provision of educational opportunities would have to be explored.

73. Mr. BOWEN (Jamaica) pointed out that the decision to place a child in a maximum security institution was always a last resort, after other choices had proved unworkable. The children placed in children's homes however, received formal schooling. Most private homes sent the children to community schools, while government homes had educational and training facilities within their walls. The aim was to return those children to their families and communities as soon as possible. Furthermore, a small unit within the Children's Services Division was responsible for reviewing, on a regular basis, the children's homes, both governmental and private, to ensure that standards were maintained, and for making recommendations to directors where improvements were required.

74. Mr. KOLOSOV noted that, while the report of Jamaica stated that the age of majority was 18 years, it also defined a juvenile as a person under the age of 17 years. What was the status of persons between the ages of 17 and 18?

75. Mr. BOWEN (Jamaica) said that a contradiction admittedly existed in Jamaican law. The age of majority had recently been lowered from 21 to 18 years; that was the age, for instance, at which a person gained the right to vote. While the case of a child over the age of 17 who had committed a criminal offence was heard by the Magistrates' Court, a juvenile in the custody of a Family Court would remain so until the age of 18.

76. Mr. HAMMARBERG observed that the provisions of the Convention did not allow children between the ages of 12 and 17 to be detained in maximum security institutions. Further information should in any event be provided on conditions in such institutions. Two major concerns arose: firstly, what regulations existed to prohibit the coercion of a child under interrogation, and to ensure his right to have a parent, guardian or person educated in the law present during that procedure? Secondly, what system existed for inspecting those institutions and for reporting irregularities? A mechanism should be established which would allow a child the right to register a complaint against a guard or caretaker, while at the same time protecting him from possible reprisals.

77. Miss MASON inquired whether a link had been established between sexual abuse and prostitution in Jamaica. UNICEF studies had shown that prostitution was most commonly practised at the lowest levels of society. Did a relationship exist between traditional Jamaican beliefs and sexual abuse within the family? How was such abuse dealt with? Although a child abuse hotline had been set up, residents of rural areas, who generally suffered from a lack of access to information, might be unable to use it. While the legislation providing for criminal sanctions against persons who sexually abused girls seemed adequate, it should be revised to include boys. Did Jamaica envisage undertaking such a reform? Finally, a definition of the term "fit person", which appeared in the report, would be welcome.

78. Mrs. SANTOS PAIS said that both preventive and remedial measures must be developed to protect street children: firstly, to prevent them from turning to the street, and secondly, to minimize their stigmatization by law enforcement officials and other members of society. The Jamaican delegation had mentioned a rising trend in delinquency by young girls. It was essential to find ways to prevent that phenomenon from developing further. Solutions to those problems could not, however, be identified without research and analysis.

79. There was no doubt that street children must be placed in protective shelters. The written reply supplied by Jamaica to question 22 on the list of issues cited economic constraints as the chief obstacle to the provision of proper care, including skills programmes and qualified staff, to those institutions. Their environment was consequently imperilled, compromising the well-being of those children. Jamaica had also stated that a team of officers regularly monitored the shelters; but when a child was abused or mistreated, a person employed by the institution where the irregularity had taken place was unlikely to be impartial. An independent mechanism must be developed whereby the complaints of children could be impartially reviewed, and the wrongdoers punished.

80. The Jamaican delegation had also stated that children were sometimes kept in detention because no transportation was available to remove them. Young people must be kept in contact with the outside world to allow their healthy

reintegration into society; locking them up was never a solution. But in any case, staff members should be qualified to care for children; to be effective, any juvenile justice system must address their best interests.

81. Mr. BOWEN (Jamaica) said that the Juvenile Unit within the police force was made up mostly of female officers trained to handle matters relating to young people. Although the Juvenile Unit was currently based in Kingston, one of its representatives would eventually be stationed in each chief town. It should be noted that the maximum security institutions constituted an exception: the children's homes and places of safety were open institutions. Children residing in those facilities attended schools and vocational programmes in the community. Furthermore, parents could make regular visits to their children, and the children were generally permitted to go home to their families three times a year; the aim was naturally to return them home as soon as possible. A Children's Officer, trained as a social worker, acted as a go-between between the children and their families.

82. If the court determined that a family was incapable of providing a child with proper care, he was made a ward of the State, which would then arrange for a suitable placement. Once efforts to locate the parents of an abandoned child had been exhausted, the court would empower the director of the Children's Services to act as his guardian and legal representative and accord him the ability to sign such documents as consent to adoption or permission for surgery. The court order would be revoked if it could be established that the family had regained the ability to care for the child.

83. An Inspectorate within the Children's Services administration was responsible for visiting all institutions licensed by the Minister to ensure the maintenance of standards and the proper implementation of programmes. Some skills training was offered within the institutions themselves: for girls, courses in cosmetics, dressmaking and home economics; for boys, tailoring and woodworking. The level of training could admittedly be improved. A course in mechanics should, for instance, be added to the boys' programme. Youngsters could also attend certain vocational training facilities operated by the Ministry of Education.

84. There was no doubt that children removed by the State should be cared for by qualified personnel; unfortunately, budget constraints limited the choices. Jamaica addressed the problem by hiring staff with lower competence levels and then offering them training to upgrade their skills.

85. Mrs. TAYLOR (Jamaica) said that residents of rural areas were often reluctant to report cases of sexual abuse. In some parishes, it was held that sex with a virgin cured venereal disease; that belief was sometimes responsible for the sexual abuse of very small children. Since the mother shared that belief, she would not report the abuse. Such notions, grounded in tradition, were difficult to eradicate. In any event, efforts were under way to revise sexual abuse laws, and the new legislation would in fact be gender-neutral.

86. Again, street children were a new phenomenon in Jamaica. Although research was currently being conducted to evaluate the causes that drove children into the street, it was too early to make an analysis. Educational and vocational training programmes for street children had largely failed; most returned to the streets because of abuse at home.

87. The CHAIRPERSON inquired whether certain Jamaican mothers permitted men with AIDS, for instance, to have sex with their children, and whether those men were sometimes family members.

88. Mrs. TAYLOR (Jamaica) said that the diseases in question were gonorrhoea and syphilis, not AIDS; the man was in fact usually a member of the family.

89. Mr. HAMMARBERG said that firstly, permitting only three home visits a year for children from the age of 12 to 17 was severely inadequate. Secondly, international cooperation could perhaps help to remedy the problem of street children; UNICEF, currently carrying out programmes for street children around the world, might be asked to conduct a related study in Jamaica. Thirdly, young offenders should be seen as both perpetrators and victims; the criminality of children was a measure of violence in the broader society. Were programmes under way to address that issue in Jamaican society?

90. Mrs. BELEMBAOGO said that it was difficult to combat sexual abuse when the causes were deeply rooted in the culture. In other countries, sexual acts of that kind, committed with children on the basis of traditional beliefs had caused fainting spells and even death. Strenuous efforts must be undertaken to remedy that grave problem. While education and information campaigns were useful, they could not eliminate sexual abuse within the family. Measures must be taken so that charges could be brought and offenders punished. It might be instructive to note that in some countries, when a person found guilty of sexually abusing a child was also a family member, the punishment imposed was more severe.

91. The CHAIRPERSON said that conducting thorough research and analysis of harmful practices based in tradition often contributed towards reforming the culture; people could change if they were made to understand that their practices were rooted in unsound concepts.

92. Miss MASON inquired whether any of Jamaica's programmes for children made use of child advocates, or in other words, children who assisted other children. Young people generally preferred to learn from one another rather than from adults. Such child-advocacy approaches had proved effective in programmes for the prevention of drug abuse, teenage pregnancy and sexual abuse.

93. Miss TAYLOR (Jamaica) said that child-advocates appeared on Jamaican television and radio programmes to discuss such child-related issues as the Convention. Jamaica was an unusually violent society, in which guns were a common means of coping with conflict. Concerned that a disproportionate amount of public resources was being spent on the needs of the police force, the Jamaican Government attached high priority to confronting the problem of social violence, and had developed such programmes as PULSE ("Live in peace, die in peace").

The meeting rose at 6.05 p.m.