



Convention on the Rights of the Child

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Committee on the Rights of the Child

Combined sixth and seventh reports submitted by Ethiopia under article 44 of the Convention, due in 2020* **

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** The annex to the present report may be accessed from the web page of the Committee.



Contents

	<i>Page</i>
I. General information	3
II. General measures of implementation (arts. 4, 42 and 44, para. 6)	4
III. Definition of a child (art. 1)	8
IV. General principles (arts. 2, 3, 6 and 12)	8
V. Civil rights and freedoms (arts. 7, 8 and 13–17)	11
VI. Violence against children (arts. 19, 24, para. 3, 28, para. 2, 34, 37 (a) and 39)	14
VII. Family environment and alternative care (arts. 5, 9–11, 18, paras. 1 and 2, 20, 21, 25 and 27, para. 4).....	17
VIII. Disability, basic health and welfare (art. 6, 18, para. 3, 23, 24, 26, 27, paras. 1–3, and 33).....	20
IX. Education, leisure and cultural activities (arts. 28–31).....	26
X. Special protection measures (arts. 22, 30, 32–33, 35–36, 37 (b)–(d), 38, 39 and 40)	32

I. General information

A. Background

1. Ethiopia has the second largest population in Africa with a projected population of 100,827,000 (50,572,000 male and 50,255,000 female) in 2020. (CSA Population Projection for Ethiopia (2007–2037)) The country's annual population growth rate is estimated at 2.85%. Total fertility rates are much higher in rural areas than in urban areas (on average, 5.2 and 2.3 children per woman, respectively), and they are twice as high among the poorest than the richest women (on average, 5.6 and 2.6 children per woman, respectively) (CSA, EDHS 2016). Children under the age of 15 make up 39% of the population.
2. In recent years, Ethiopia has undergone through socio-political changes following unrest and conflict in many parts of the country. Parallel to the socio-economic changes, emerging challenges such as recurrent violence and displacement has been recorded in some parts of the country. In July 2020, there were about 1,820,811 IDPs (329,084 households), of which 1,233,557 were displaced due to conflict. (IOM DTM Round 22) Ethiopia is also one of the largest refugees and asylum seekers hosting countries in Africa.
3. Ethiopia's economic growth has outperformed many countries. Between 1999/2000 and 2016/2017, Ethiopia's Gross Domestic Product (GDP) per capital increased from US\$ 129 to US\$ 863. Ethiopia's real GDP growth is projected at 9.7% for 2019 and 9.9% for 2020. Ethiopia's economic growth depends largely on agriculture, which accounted for 31% of GDP in 2018.
4. Despite Ethiopia's fast economic growth, poverty is one of the main challenges of the country. Although the share of the population living below the national poverty line halved between 1995/1996 (45.5%) and 2015/2016 (23.5%), still one out of every four individuals (24 million people), can be classified as absolute poor. (FDRE National Planning Commission 2017) Children bear a greater poverty burden, at a rate of 32.4% poverty headcount. (MoF and UNICEF National Situational Analysis of Children and Women (2019)). The GoE continues to dedicate increased amounts of resources for the development of its people and children as demonstrated by its allocation of progressive budget over the past years.

B. Methods used in the preparation of the report

5. This report is prepared in accordance with the treaty-specific guidelines regarding the form and content of periodic reports to be submitted by State parties pursuant to Article 44(1) (b) of the CRC.
6. It builds on the combined fourth and fifth report and presents progresses and challenges in promoting and protecting children's rights guaranteed under the CRC with emphasis on the measures taken to implement the concluding recommendations of the Committee on the Rights of the Child (hereafter the CRC Committee).
7. In preparation of this report, the MoWCY led a taskforce of experts drawn Ministry of Labour and Social Affairs (MoLSA), Ministry of Education (MoE), Office of the Federal Attorney General (OFAG), Ministry of Foreign Affairs (MoFA), Ministry of Health (MOH), Ministry of Agriculture (MoA), Federal Supreme Court.
8. Child Justice Project Office (FSCCJPO), the Ethiopian Human Rights Commission (EHRC), Immigration, Nationality and Vital Events Agency (INVEA) and Agency for Refugees and Returnee Affairs (ARRA).
9. The MoWCY organized a series of consultation with line ministries to solicit pertinent information on the implementation of the CRC. The draft report was presented to and validated by federal line ministries. Children's parliament members across the country were consulted via zoom.

II. General measures of implementation (arts. 4, 42 and 44, para. 6)

10. Ethiopia has made extensive efforts to implement the 2015 concluding recommendations of the CRC Committee on the combined fourth and fifth periodic reports (CRC/C/ETH/CO/4-5) as well as other important additional measures not referred to in the observations.

A. Legislative and policy measures

Ratification of international instruments

11. Ethiopia has ratified the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa in February 2018 and the African Union Convention for the Protection and Assistance of Internally Displaced Persons in February 2020.

Domestic law and policy measures

12. Ethiopia's approach to harmonization of national laws with international and regional child rights standards has been through revising the existing laws, and while adopting new thematic specific laws incorporate provisions to ensure the protection of child rights and interests.

13. During this reporting period, several laws, policies and sectoral strategies that have pertinence to the effective protection of children have been adopted. Most of the revisions address the concerns expressed in the concluding recommendations of the CRC Committee. The way these laws improve the protection of child rights and interests are discussed under each thematic section related to the body of laws and policies listed under annex 1 and 2.

14. Assessments (Child Justice Legal Research Institute, 2015) and consultations (MOWCY, FAG & FSCCJPO, 2019) conducted during the reporting period have revealed that there are legislative gaps that remain to be addressed which include lack of common definition for a child, uniform minimum marriageable age, minimum age of criminal responsibility, condition of detention of juvenile offenders, corporal punishment, and compulsory education.

B. Coordination

15. The Ministry of Women and Children Affairs was restructured, and became the Ministry of Women, Children and Youth (MoWCY) in accordance with Proclamation No. 1097/2018.

16. The human resource of the MoWCY increased from 175 (96 female, 79 male) in 2015/16 to 268 (134 male, female) in 2019/20. The budget of the Ministry has also increased from 34,506,344.39 ETB in 2015/16 to 81,837,000 in 2019/20. (Annex: Table 3&4) Similarly, its down structure's budget and human resources have increased. In the past five years, 7,000 experts were trained on child rights frameworks and child protection. In addition, a total of 159,047 government experts have been trained on child rights and protection issues across all ministries and government organs.

17. The MoWCY put in place various monitoring and evaluation mechanism at all levels to improve the capacity of institutions to effectively implement laws and policies on children. The Ministry and regional bureaus have established joint planning, monitoring and evaluation platform. They also hold a quarterly meeting to evaluate the implementation of planned activities. Parallel quarterly, evaluation meetings are held with line ministries to assess their progress with regarding children related activities. The MoWCY together with MoE, MoH and Federal Urban Job Creation and Food Security Agency has also been undertaking integrated supportive supervision twice a year to enhance implementation

capacity of the regional bureaus, Woreda and Kebele level offices. (MoWCY, Child Rights and Wellbeing Department, January 2020)

18. The MoWCY has been reporting quarterly and yearly to the Women, Youth and Social Affairs Standing Committee of the House of People Representatives (HoPR) and to the HoPR respectively. Regional bureaus report to Regional Standing Committees and Regional Councils in a similar fashion. Members of the Standing Committee have been undertaking at least one supervision visits on selected thematic areas and provide feedback to the MoWCY on ways to improve implementation. In the current reporting period, the Standing Committee has undertaken supervision visits to childcare institutions, day-care centers, child-friendly courts and Ghandi one-stop-center and gave directions on how to improve the services.

19. Partners' High-Level -Forum, which is chaired by the Minister of the MoWCY and consisting of ten members from UN agencies and INGO's country representatives has also been established. Within this structure, there is the National Child Advisory Group (NCAG), comprising of senior thematic area experts that provide technical advice, chaired by the State Minister (UNICEF is the Co-chair and the Save the Children is the Secretary).

20. The Ministry in collaboration with Young Lives has been conducting Child Research and Practice Forum (CRPF) every month to promote research and learning on children's issues. The participants of CRPF are drawn from academia, government institutions, and CSOs. The Ministry has also established sector specific interface platforms with health, education, justice, and social protection sectors on major thematic areas such as nutrition, early childhood development (ECD), child abuse, trafficking and children in street situations. Within each federal ministries, agencies, commissions, authorities and other government organs, Women, Children and Youth Directorates have been established to integrate child rights and protection issues in their plans and programs. Within these Directorates, child rights and protection experts are assigned, and budget is allocated to execute their planned activities on mainstreaming child rights and protection.

21. There are also multi-sectoral coordination structures that are aimed at ensuring the provision of appropriate services to children as well as extend protection to special groups of children that are susceptible to serious rights violations. The high level thematic specific coordination mechanisms are:

- National Committee on Children in Street Situations – to undertake prevention, reunification and reintegration (since 2017) chaired by the Deputy Prime Minister;
- Seqota Declaration Committees – established to give a multi-sectoral response on nutrition and incorporates seven line-ministries (Since 2016) chaired by the Deputy Prime Minister;
- National Committee for better coordination of activities to prevent and protect persons from trafficking and smuggling, strengthen law enforcement and effectively rehabilitate victims (Since 2016) chaired by the Deputy Prime Minister;
- Urban Job Creation and Food Security Committee to support disadvantaged community in urban settings including children in street situation (Since 2017/18);
- Emergency Committees to provide integrated support to victims of natural disasters and conflict (since 2015);
- Board on Special Support for Emerging Regions which is currently coordinated by the Ministry of Peace; to improve social and economic infrastructures (education, health, WASH, and agriculture, civil service capacity building) in emerging and pastoralist regions.

C. Allocation of resources for children

22. The GoE continues to dedicate increased amounts of resources for the development of its people and children as can be observed from its allocation of the budget over the past years. The annual budget of the Government has increased from ETB 154.9 Billion in 2013/14 to ETB 346.9 Billion in 2018/19 and reached up 386.9 Billion in 2019/20. The GoE

has approved 476 Billion ETB for 2020/21 annual budget. The total federal budget for 2019/20 represents 11.6% increment compared with 2018/19 fiscal year and 29.7% from the 2018/17 fiscal year. The federal budget allocation continues to prioritise social services with 21% allotted for education, 7.3% for water resources and energy and 5.3% for health in 2018/19. In 2018/19 more than 58% of the federal budget was allocated to social services and growth-enhancing sectors. (Annex: Table 5&6)

23. In line with its poverty reduction goals, the GoE has spent huge resources on health, education, water, energy, roads as well as agriculture and food security which are termed as pro-poor sectors. An average of 64% of the total national expenditure over the past five years is spent on these sectors.

24. During the reporting period, children through child parliament have actively engaged in budget hearing. The Women, Youth and Social Affairs Standing Committee oversees budget expenditure to make sure that the budget for pro-poor polices and social infrastructures that also benefit children is properly spent. Further, the Proclamation No. 970/2016 to amend FDRE Financial Administration Proclamation integrates a gender perspective into the preparation of the budget program. These prove GoE's attention to addressing the needs of poor and vulnerable groups, including access to services.

D. Data collection

25. The data management system on children has improved since the last reporting period. The Central Statistics Authority (CSA) has been working to employ the Washington group checklist to collect disaggregated data on children with disabilities. Further, additional indicators are included by the EDHS to collect disaggregated data on Harmful Traditional Practices (HTPs) particularly child marriage and FGM, child nutrition, violence and abuse and women empowerment. Accordingly, the EDHS 2016 has improved in capturing data on children disaggregated by age, sex, socio-economic status, and by geographic location.

26. The vital events registration system has been put in place at the national level since August 2016 which has been providing national information on vital events which include birth, marriage, divorce, death, adoption, and the acknowledgement and judicial declaration of paternity.

27. Further, different line ministries have improved their child data management systems. The MoWCY operationalized child wellbeing management information system (MIS) across six regional states. Further, MoWCY has just launched a web based National Gender Information System (NGIS) which covers several domains and indicators disaggregated by age and other characters. The MoH and MoE has health and education MIS, which has been annually providing information to the health and education sectors as well as have been informing national plans and measures. The other sectoral data management platforms which have been established include road traffic MIS, refugee and returnees' MIS, justice MIS, and disaster prevention and risk reduction MIS. Regional sector bureaus and local level offices have the responsibility to collect data at regional and local level.

E. Independent monitoring

The Ethiopian Human Rights Commission

28. The Ethiopian Human Rights Commission (EHRC) is currently undergoing a reform process. The Proclamation which established EHRC was recently revised (Amendment to the Establishment Proclamation No.1224/2020), to ensure compliance with the Paris Principles.

29. EHRC has improved its accessibility to the public by opening eight regional branch offices. From 2013–2019, the GoE allocated 29,633,530 Birr to the EHRC to promote and protect the rights of women and children. During the reporting period, EHRC conducted human rights monitoring visits to detention centers, health centers, primary schools in some regional states, selected industries, child friendly justice system at the federal and regional

levels. The findings and recommendations were forwarded to the relevant authorities and made public on the occasion of the 2020 Day of the African Child. (EHRC Report 2019).

30. During the reporting period, the EHRC has dealt with 1906 cases, among which 38 complaints related to rights of children. The child right cases pertain to rights of education, maintenance, access to justice, property, and health. EHRC gives priority and special attention to cases related to children's rights. EHRC in collaboration with UNICEF has developed independent monitoring tool to systematize child rights monitoring in the country. EHRC established a toll-free hotline in 2015, in order to receive complaints from children who are subjected to right violations and offered them redress. EHRC has received 20,443 calls which it has taken action on over the last five years.

31. The MoWCY and EHRC collaborate on technical areas. The MoWCY in collaboration with EHRC has been providing awareness training on child rights and the CRC to heads and experts from regional bureaus. Further, the MoWCY and EHRC have been collaborating on the translation and popularization of the CRC concluding observations with the support of UNICEF.

The Ethiopian Institute of the Ombudsman

32. The Ethiopian Institute of the Ombudsman (EIO) is going through a reform based on its elaborated mandate under the Ethiopian EIO Establishment (Amendment) Proclamation No. 1142/2019. The EIO has opened eight regional branch offices in Oromia, Amhara, Dire Dawa, Afar, Benshangul Gumuz, Gambela, Tigray and SNNPR with Directorates of children, women, PWDs and elders.

33. The EIO undertakes supervisions to ensure that the executive carries out its functions in accordance with the law and respects the rights of persons with special focus on children. During the reporting period, EIO inspected different sectors such as education, health, justice sectors, labour and social, and women and children sectors as well as thematic areas such as child protection, children in street situations, trafficking, juvenile delinquency and child development in schools. During the quarterly monitoring meeting of the line ministries and other government organs, the EIO also presents its supervision reports regarding children.

34. EIO and MoWCY has been undertaking joint initiatives to strengthen and standardize children's parliament. Since 2018, the MoWCY and EIO has been jointly organizing annual awareness raising trainings and experience sharing platforms to representatives of regional councils and HoPR.

F. Dissemination, training and awareness-raising

35. Information about children rights have been made available during the reporting period. The UNCRC was translated by EHRC in six local languages and a child friendly version of the CRC is developed and translated in four local languages. 50,000 copies of the UNCRC were disseminated in all parts of the country. Further, the National Child Policy, which is informed by the norms and principles of the CRC was translated into three local languages. 27,000 copies of the policy were disseminated in all regions.

36. In the past five years, an average of about 33 million people per-year have been informed about child rights by using different medium such as community mobilization programs, community sensitization and the media from 2015/16–2019/20. (MoWCY GTP II Implementation Report (2018/19), Child Sector 10 Years Strategic Plan (2020–2030)).

37. EHRC has conducted different trainings and awareness raising activities for more than 3,126,645 persons (1,723,205 male, 1,403,440 female) targeting various stakeholders including teachers, prison officials, police officers, media professionals, military personnel, women, children, community representatives, as well as federal and regional members of parliament on human rights, including children's rights. Further, awareness raising trainings were organized for 7,887 children (6000 male, 1887 female) on topics related to human rights and children's rights.

38. EHRC has established more than 361 human right clubs (an average of 100 members per club) in primary and secondary schools across the country in the last five years. Furthermore, EHRC has prepared and distributed across the country supplementary human rights teaching materials for primary and secondary school students, enhancing their human rights knowledge.

G. Cooperation with civil society

39. Ethiopia has enacted a new law on Organization of Civil Societies' Proclamation No.1113/2018. The new law has made a fundamental shift from its predecessor (Proclamation No.621/2009) by giving operational freedom for CSOs to be engaged in any lawful activity which include child and human right advocacy, protection, policy formulation, implementation and monitoring activities. The law does not restrict the operation of a CSO based on source of funding. The new law provides that administrative cost of a CSO may not exceed 20% of its total income which means that the 80% of its income should directly benefit the general public.

40. The MoWCY's strategic partnership and collaboration initiatives such as NCAG, CRPF and sector specific thematic interface engagements are contributing to enhancing partnership between state and non-state actors on child rights and interests.

H. Children's rights and the business sector

41. The MOWCY has also been actively working with the private sector to instil child rights in the business environment and to engage businesses in child rights promotion. Particularly, the MoWCY has been collaborating with the Ethiopian Chamber of Commerce to advocate for and sensitize businesses to adopt child friendly standards. In 2018/19, a draft MoU was prepared to formalize the overall collaboration with Chamber of Commerce on mainstreaming child rights issues in business. During the reporting period, a total of 12 awareness raising trainings were delivered to representatives of the private sector on child rights and business principles (CRBP). Further, the MoWCY is actively working with the Chamber of Commerce and Sectoral Associations to enable the private sector to develop child protection policies.

III. Definition of a child (art. 1)

42. During the reporting period, several laws have been revised introducing changes that will bestow better protection to children. The new Labour Proclamation No.1156/2019 has increased the minimum employment age from 14 years to 15 years to harmonize it with international law. The Food and Medicine Administration Proclamation No. 1112/2019 increased the alcohol consumption age to 21 years. The Proclamation to Provide for the Prevention and Suppression of Trafficking in Person and Smuggling of Migrants No. 1178/2020, which gives specific protection to children from trafficking, adopts a definition for a child in line with child rights standards.

IV. General principles (arts. 2, 3, 6 and 12)

A. Non-discrimination (art. 2)

43. The National Child Policy framework has taken non-discrimination as the basic principle of the policy, which also guides all measures and services to children. The GoE has also put in place sectoral strategies and frameworks to promote gender equity in education, to eradicate child marriage and FGM, to improve access to health and to take affirmative action to emerging regions in accessing education and health services to ensure that all children enjoy their full spectrum of rights without discrimination (Annex: Table 1 & 2).

44. The National Action Plan on Person with Disability (2012–21) aims to mainstream disability issues in all sectors, to eradicate discrimination against persons with disabilities and improve social services and infrastructure to accommodate the needs of persons with disabilities. The child parliament guideline further obliges that 10% of children’s parliament members should be children with special needs. The GoE also put in place laws and policies that ensure the enjoyment of refugee children’s rights including right to birth registration and documentation, education, and health care services.
45. According to the 2018/19 data, education enrolment rate of children with disabilities has been increasing and some of the facilities in schools can be accessed by children with special needs. (Sections 9(a) & (Annex Table 23& 24) Further, encouraging improvements have been made to close the gap in gender parity in schools especially in rural areas. (Annex: Chart 4& 7).
46. In order to address challenges relating to distance between residence and schools, the GoE has developed guidelines on the provision of hostel services for female students. Similarly, through United Nations Flagship Program (UNJP) on Gender Equality and Women’s Empowerment (2011–2017), the MoE had provided financial assistance to girls from underprivileged families to attend school.
47. Despite such improvements, ensuring access to quality primary education to all children especially in rural areas continues to be a challenge especially in pastoralist and semi-pastoralist communities. Given the prevalence of child marriage and FGM, girls continue to face discrimination. There are also limitations to ensure that infrastructures and facilities are acceptable to the needs of persons with disabilities (including children) especially in education and health care facilities.
48. Since the last reporting period, in rural areas the general trend of health care services in both health facilities and community health care systems have improved. The number of hospitals has also significantly increased. The number of rural women and children receiving health care services such as antenatal care (ANC), delivery care, postnatal care, child immunization and child health care and paediatrics have steadily increased. (See Section 8(b).)
49. Although there is a gap between urban and rural areas in terms of equity and quality of health services, the progress made in maternal and child health are attributed to improvements in access and quality of healthcare services in rural areas.

B. Best interests of the child (art. 3)

50. The GoE revised the Family Law (Revised Family Code Amendment Proclamation No. 1070/18) to prohibit inter-country adoption due to the reported multifaceted rights violation on adopted children, which are against their best interests.
51. Currently, local adoption is being promoted as it gives an opportunity for children to grow up in an environment that is conducive to their psychological and moral development in a country and culture familiar to them. Further, local adoption can be effectively, and adequately monitored, and appropriate measures could be rendered. In accordance with article 194 of the Family Code adoption cases have been guided by utmost consideration of the best interest of the child. Further, custody, and assignment of guardians and tutors have been decided by giving utmost consideration to the principle of the best interest of the child.
52. To ensure that children actively participate in judicial hearings a Social Work Unit has been expanded to regions within courts and this has promoted the best interest of the child through effective child participation in court proceedings involving children. To sustain the Social Work Unit, curricula have been developed and approved for commencing tailored social work training with technical and vocational education and training (TVET) level 4.
53. With a view to promoting the best interest of the child, all executive organs are required to mainstream issues of children, women, and persons with disabilities in their plans and programs in accordance with Proclamation No. 1097/18.

54. The new Refugee Proclamation No. 1110/19 particularly stipulates that when dealing with a child's case, primary consideration should be given to his/her best interest. The law also guarantees refugee children the right to family reunification.

55. The MOWCY established an inspection department to ensure that the best interest of the child is considered during placement and care of children in foster care, reunification and institutions programs.

C. The right to life, survival and development (art. 6)

56. The ever-increasing budget on social services has brought encouraging results in the education, health and other social sectors across the country, particularly in rural areas. As shown in subsequent sections of this report, under-five, infant and neonatal mortality rates have steadily decreased. The child immunization rates have also shown increase in the reporting period.

57. The GoE has been exerting maximum effort to improve the nutrition of children to ensure their proper growth and development. A high-level multi-sectoral committee has been put in place to implement the Seqota Declaration to eradicate stunting by 2030, which contributed to the decline of the national stunting and underweight rates.

58. The rural and urban social safety net programs (PSNP 4-PSNP 5 is now operational and UPSNP) have also contributed to providing the means for parents to care for their children. The UPSNP has also incorporated a component that benefits children in street situations. The non-PSNP social protection programs specific to health and education such as Community Based Health Insurance (CBHI), Indigent Health Fee Waiver System, Education Fee Waiver scheme and a National School Feeding Programme (2016–2020) proved to be successful in ensuring that children including those in street situations have access to nutrition, health care, and education.

D. Respect for the views of the child (art. 12)

59. To ensure the active and meaningful participation of children in decision-making, the National Child Parliament Establishment Guideline was revised and endorsed in 2017 and disseminated to all regions. The child friendly version of the guideline is being prepared. Further, the MOWCY has planned to develop a national child participation strategy. The establishment of child parliaments under the new guideline in regional states of Afar, Amhara, Benshangul Gumuz, Gambella, Oromia, Tigray and Somali were undertaken jointly by the EIO, the MoWCY and the Regional Councils. So far 8, 428 child parliaments have been established in all regional states. More than 308,000 children have been actively participating in matters affecting their rights.

60. MoWCY organizes an annual capacity building training and experience sharing programs to all child parliament members during school semester break so that it does not interfere with their education as well as rest and leisure activities. The capacity building trainings have been given at all levels of the children's parliament structures from the federal level up to the local Kebele level.

61. There have been efforts to involve girls and boys in the development and implementation of child-focused policies and programs, and budget hearings. For instance, there have been encouraging efforts to invite members of children's parliament to parliamentary discussions and budget hearings and children provided inputs during the development of national child policy and education roadmap. The development of playgrounds for children in government led housing construction (condominium) is also the product of children's expression of their views on the matter. SNNPR has also allocated budget as part of the regional government's formal activity to ensure the proper operation of children's parliament. Children's parliament in the SNNPR has taken the issue of children in street situations, one of the most pressing problems in the region, to the regional decision-making bodies. (EIO, Inspection Report, February 2019.)

62. School-based child participation platforms have been established and strengthened such as CRC clubs, girls 'clubs, human rights clubs, anti-HIV/AIDS club and environmental club. So far, 55, 511 functional schools clubs have been established across the nation. Students are represented in Parent-Teachers Associations and they have engaged in promoting their rights and advocate for their views are incorporated in school governance.

63. During the Day of the African Child (DAC) and Universal Child Day (UCD) celebrations held in the reporting period, more than 625,000 children participated and expressed their views. In general, during events and festivals organized to strengthen child participation platforms, a total of 5,206,293 children participated and were informed about their rights. Sensitizing the community about the duty to respect and protect child rights has been part of these events. Further, capacity building trainings, experience sharing, and material assistance were given to 63,939 child participation structures. (MoWCY GTP II Implementation Report 2018/19.)

64. Awareness raising programs were organized targeting the community at large on meaningful child participation using national and community radios. Child parliament representatives have been engaged in dialogue with government representatives on issues of their concern such as on education, play and leisure and health on Walta TV Live transmission. Children are also encouraged to participate at the community level, through Community Care Coalitions (CCCs).

65. Most television transmissions have a special program for children that are led by children themselves. Particularly, 'Ye Ethiopia Lijoch' television (Ethiopian Kids TV), a special television program entirely dedicated to children has been operational in the reporting period. All these efforts are gradually changing the deeply entrenched societal perceptions and practices that give very limited space to the opinions and views of children.

66. Care options for children deprived of family environment such as foster care and domestic adoption give due consideration for the views of the child. The foster care and domestic adoption directive gives specific guidance on child participation. Further, several Sops on child case management have been designed, to ensure the participation of children in refugee determination process.

67. During a webinar held to solicit information for the current periodic report, members of children's parliament from all regions and Addis Ababa and Dire Dawa city administrations, stated that despite progress children face multifaceted challenges including limited quality of education, limited school facilities, corporal punishment, children in street situations, FGM and child marriage in rural areas, inadequate rehabilitation for children in conflict with the law, lack of adequate facilities for children with disabilities, and persistent violence against girls.

V. Civil rights and freedoms (arts. 7, 8 and 13–17)

A. Birth registration (art. 7)

68. The Proclamation No. 760/2012 was amended in 2017 by Proclamation No. 1049/2017, which accords the right to birth registration to Ethiopian citizens residing abroad, births occurred in Ethiopian ships as well as refugees. The amendment also gives responsibility to health institutions at all levels to prepare notification paper and facilitate birth registration. The National Child Policy provides that the establishment of vital events for children should be ensured and strengthened in the country.

69. To ensure the registration of children born out of health centers, especially in rural areas, health extension workers trace and notify births to the nearest administrative office within 90 days. Extensive awareness-raising programs have been carried out through mass media (radio, TV, magazines, and brochures). Moreover, women development army (WDA), health extension workers (HEW), traditional birth attendants (TBA) have been delivering sensitization programs in rural areas that generally have very low birth registration records.

70. The Vital Event Registration Agency (recently the Immigration, Nationality and Vital Events Agency (INVEA) was established to implement vital events registration and documentation in the country. INVEA has structures at the federal level and in all regions with offices at district (Woreda) and Kebele levels. Currently, the birth registration system has been established and functional in all regions including Addis Ababa and Dire Dawa. The INVEA has been conducting regular bi-annual implementation assessment, supportive supervision and follow up at all levels of the registration cycle. It also collaborates with different non-governmental partners, to strengthen the human and technical capacity of the vital events registration system in the country. At the beginning of 2020, the INVEA has embarked on a comprehensive assessment of Civil Registration and Vital Statistics (CRVS) in collaboration with partners to improve efficiencies to the system and ensure systematic incorporation of refugee registration system.

71. Despite these initiatives and efforts, the rate of birth registration is low mostly due to lack of awareness on the duty to register a child immediately after birth or within the mandatory 90 day timeline provided under the law. The registration fee of 50 ETB and the requirement of both parents to be present are also challenges. Although, GTP II targeted 50% of newborn children to be registered from 2016–2020, only a fraction of the target has been achieved during the GTP II period. In 2016, the rate of children under the age of five who had their birth registered by civil authorities was 3% (12% urban, 2% rural). Of these, 2% have a birth certificate. The urban-rural variations are very high with – 24% of births in Addis Ababa and 19% of births in Dire Dawa registered. In contrast, the rate of birth registration was only 2% in rural areas. (EDHS 2016). The very low rate of birth registration recorded under the 2016 EDHS was because the birth registration system was only established after the survey in August 2016.

72. According to administrative data from the INVEA, (2016/17–2018/19) 922,715 (63% of the plan) births were registered within 90 days and 521,909 (36% of the plan) were late birth registration (within 91–365 days). (Annex: Table 25& 26) This shows substantial progression of the rate of birth registration in the country compared with previous years. Further, from 2017/18–2018/19, in eight refugee birth registration centers, a total of 10,379 births (36% of the plan) were registered. (Annex: Table 27.)

B. Freedom of expression (art. 13)

73. The 2009 Anti-Terrorism Proclamation, which infringed on the rights of the child to freedom of expression was repealed and replaced by the Anti-terrorism Proclamation (1176/2020) which introduced a number of changes based on human rights norms and principles.

74. Children have been freely expressing their views without discrimination through school and out of school platforms such as children’s parliament, and child schools’ clubs. Children were involved in the development of child policy, the education roadmap, and national and regional budget hearings. They have participated during national and regional parliamentary sessions.

75. Accessing appropriate information is fundamental to the proper mental development of children. In this regard, the Ethiopian Broadcasting Services Proclamation No. 533/2007 prohibits Radio or TV transmission programs that may corrupt the outlook of children or harm their feelings and thinking or encourage undesirable behaviour, during hours which children normally watch or listen to such programs. The recently adopted Hate Speech and Disinformation Prevention and Suppression Proclamation No. 1185/2020 further protects children from receiving hate, false and misleading information.

76. Further, one of the requirements to issue a broadcasting license for television and radio (public, private and community) is having programs that address social needs which includes a specific program dedicated to children. In accordance with the requirements of the law, the Ethiopian Broadcasting Corporate (EBC) and other TV broadcasters have airtime dedicated specifically to child wellbeing, development and ethics. In view of this, there are 55 community radio programs, which transmit information on child rights and protection issues

to the society. On average, 55 community radio programs are expected to reach about 70,000 community members in one program.

C. Freedom of thought, conscience and religion (art. 14)

77. The FDRE Constitution promotes freedom of thought, conscience and religion for every person. The GoE has made encouraging efforts to reconcile the two Ethiopia Orthodox Synodos and different sects of Muslim religious followers. Government facilitated different peace and reconciliation workshops involving members from Christian and Muslim religion followers at all levels.

78. The MOE adopts a common standard for curriculum development to be followed by all schools across the country. The ECDE guidelines adopted jointly by the MoWCY, MoH, and MoE, which should be used as a guideline for early childhood care and education, also promotes freedom of thought and conscience of children from an early age throughout their growth and development.

D. Freedom of association and peaceful assembly (art. 15)

79. Children of all ages practice and demonstrate talents, and exercise freedom of expression through participation in different associations in schools and out of schools. As reported above, children's parliaments have been established in all regions up to local/district level. Further, children of all ages, from primary school up to high school participate in different school clubs. These structures are free of State interference except for the allocation of resources and technical assistance when required.

80. According to the Ethiopian Youth Policy, youth age group starts from 15 years. During the reporting period, the existing youth association forums have been expanded and strengthened. The National scouts' association composed of regional representatives currently have more than 70,000 youth members. The National Ethiopian Youth Federation which comprises of regional youth federations and youth associations have been strengthened to facilitate adolescent's and youth's active and free engagement in social, political and economic matters and to influence measures impacting their lives. Moreover, adolescent and youth centers have been expanded to provide life skill training, recreational facilities, information on reproductive health, and other services. Currently, 2,854 youth centers have been constructed, among which 1,545 are operational. (MoWCY, Youth Directorate 2019.)

E. Protection of privacy and protection of image (art. 16)

81. Various guidelines were adopted to ensure that children's privacy is protected in all sectors. The medical ethics guideline provides that children's privacy should be protected in health care services. More than 100 child friendly courts were established across the country, which allows for close circuit court proceedings. Moreover, one of the major guiding principles for rehabilitation centers and childcare institutions is the protection of the privacy of a child.

82. Food, Medicine and Health Care Administration and Control Proclamation No. 661/2009 protects nursing and pregnant mothers and children of all ages from being subjects of a clinical trial.

83. The National Research Ethics Review Guideline issued by the Ministry of Science and Technology in September 2014, obligates ensuring informed consent from research participants and in the case of children who cannot give informed consent due to their age, parents or legal guardians may give consent on the child's behalf by taking into account the child's best interest.

VI. Violence against children (arts. 19, 24, para. 3, 28, para. 2, 34, 37 (a) and 39)

A. Abuse and neglect (art. 19)

84. A National Coordinating Body on Comprehensive Prevention and Response to Violence against Women and Children, has been established under the leadership of OFAG to give holistic response to all forms of violence through the collaboration of pertinent sectoral ministries and non-governmental partners. Through such initiative, the OFAG in partnership with five regional state justice sector institutions set up referral systems for cases of violence against women and children. Further, OFAG has recently established a new directorate responsible to handle cases of violence against children (VAC) and women.

85. Special courts dealing with rape and other sexual crimes against women and children have been established through the FSCCJPO. Currently, there are more than 120 of such courts operating in different parts of the country. Further, several capacity building trainings have been rendered for the judiciary and police across the country by the MoWCY, OFAG and EHRC. (FDRE, Fifth National Report Beijing +25, May 2019) The expansion and strengthening of structures such as one-stop-centers and child friendly courts across the country have also been contributing to providing appropriate response to VAC. Further, there have been measures to address sexual harassment especially in schools through directives and establishing committees in schools.

86. Since 2019, the MoH and CSA have begun an initiative to undertake a national survey on VAC and youth in collaboration with government ministries and organs (MoWCY, MoLSA, Ethiopian Public Health Institute (EPHI)) and non-governmental partners (Center for Disease Control and Prevention (CDC), UNICEF and ACPF). The study is expected to provide a thorough understanding about the extent of violence against children in the Country.

B. Harmful traditional practices (art. 24, para. 3)

87. The GoE has been taking concrete steps to combat the prevalence of child marriage and FGM, following Ethiopia's commitment to end FGM and child marriage by 2025 at the London Global Girls' Summit. The GoE adopted a National Roadmap to End Child Marriage and FGM (2019–2025) which provides an overarching framework to eliminate child marriage and FGM by 2025 in Ethiopia. The Road map is a multisectoral five years costed plan, clearly articulating the key role of major ministries and regional bureaus. It employs socio-ecological framework which gives comprehensive response to the drivers of child marriage and FGM by targeting girls, families and communities, service providers, law enforcement and policy makers. It further provides budget and expenditure tracking, and data and evidence building which inform policy level and programming efforts. The Road map is a continuation of the GoE's commitment to eradicate HTP, particularly child marriage and FGM that has been underway through the National Strategy and Action Plan on HTPs against Women and Children in Ethiopia (2013–2014) and GTP II.

Female Genital Mutilation

88. According to EDHS 2016, 65% of Ethiopian women aged 15–49 are victims of FGM. Somali and Afar regional states have the highest FGM rates with 99% and 91% of women aged 15–49 having been circumcised respectively. Tigray and Gambella have the lowest prevalence rates with 24% and 33% respectively. The FGM prevalence has decreased from 74% (aged 15–49) in 2005 to 65% in 2016. Similarly, for the age group 15–19 years the prevalence of 62% in 2005 has decreased to 47% in 2016. In general, FGM prevalence rate has a notable decline among younger women, showing a 24% decline over ten years. The prevalence of FGM among girls aged 0–14 is 16% (EDHS 2016).

89. The level of awareness of FGM among women aged 15–49 years has remained about the same over the past decade (92% in 2005 to 93% in 2016). (EDHS 2016) The knowledge level increased to 100% in high prevalence areas such as (Afar, Somali), 99% in Harar and

Addis Ababa, and 97% in Dire Dawa. The lowest level of awareness is recorded in Gambella with 71%.

90. In January 2017, the MoH issued a circular banning medicalization of FGM in all public and private medical facilities and any form of FGM in medical facilities will be subjected to legal actions. This goes hand in hand with the criminalization of FGM under the Criminal Code of 2005.

91. Between 2016 and 2018, around 10 million people were reached through awareness creation and mobilization campaigns on GBV, HTPs and trafficking in women and children. These sensitization programs were organized by closely working with religious and tribal leaders, community elders and women's and other grassroots associations to influence community attitudes and foster actions against HTPs. MoWCY and EHRC demonstrated their active engagement in organizing targeted consultative forums, capacity building trainings and awareness events.

Child Marriage

92. According to the 2011 EDHS, the median age at which women marry in Ethiopia is 16.5 years and 63% of all women married before they attain 18 years. In the same period, 8% of girls married before they attained 15 years.

93. According to the 2016 EDHS, for the age group 15–49 those married before reaching 18 years were 40.3% which was 41.2% as per EDHS 2005. For age group 45–49 years, those married before reaching 18 years were 64%. (EDHS 2016) These figures show that the overall pattern of child marriage has reduced by a third within 10 years. Further, the figures at which women marry show improvement in 2016, with an average age of 17.1 years. Similarly, the percentage of women who married before reaching 15 years has also decreased to 6% in 2016. (EDHS 2016) Despite such improvements, the practice of child marriage is still prevalent in most rural areas across the country.

94. The MoWCY has been implementing a programme to end FGM and child marriage in hotspot localities, and between 2016/17–2019/20 more than 4,450 kebeles were confirmed to have stopped the practices of child marriage and FGM. As a result of EHRC's work with its partners in regional states, more than 5,000 arranged child marriages were cancelled in one year.

95. Within the MoWCY, a Secretariat for National Alliance on Ending Child Marriage and FGM/C was established at the federal and regional levels to coordinate the efforts of state and non-state actors. The community-based and faith-based organizations play a key role in mobilizing communities against HTPs, including FGM and child marriage. In this regard, the Inter Religious Council of Ethiopia joined the initiative in abolishing FGM in the country.

96. The existence of a legal and policy framework, and a high level of political support to end FGM and child marriage have contributed to the decline of such practices. The GoE is intensifying efforts towards the adoption of revised family laws in Afar and Somali that will raise the minimum age of marriage for girls from the current 15 to 18. However, FGM and child marriage are still practiced in many localities.

C. Sexual exploitation and abuse (art 34)

97. According to the 2016 EDHS, more than one out of every four females aged 15–49 years (26%) reported repeatedly experiencing physical or sexual violence. Among these age groups, 12% of adolescents aged between 15 to 17 years and 17% of 18 to 19 year-olds have experienced violence.

98. The GTP II unlike its predecessor included ending violence against women as a priority and envisaged the establishment of structures to protect and rehabilitate victims of violence, abuse and exploitation. During the reporting period, more than 100 child friendly courts, eight hotline services, 34 one-stops-centers and 16 safe houses were established throughout the country, that provides services to children by giving due consideration to their rights and interests. The hotline services through which children are able to report incidents

of child abuse, violence and exploitation have been set up and currently five of them are operational (in Addis Ababa, Dire Dawa, Benshangul Gumuz, Harari and Oromia). (MoWCY 2019.)

99. Among the 34 one-stop centers across the country, as of November 2018 four are operational in Addis Ababa at Gandhi Hospital, Tirunesh Beijing Hospital, Menelik Hospital, St. Paul Hospital. Joint action plan to address challenges and improve the delivery of the service have been adopted by Addis Ababa Police Commission, Addis Ababa Health Bureau and Administration of the Hospitals. (OFAG, Annual Activity Report (2018/19).)

100. From July 2018–July 2019, a total of 1,726 (1,665 female, 61 male) victims had received services at one-stop centers across Addis Ababa. Among the cases referred to the police, 770 of the victims pursued their cases, with 156 pending cases and 30 cases have got final decisions. (Annex: Table 10&11.)

101. The MoE adopted Gender Equality and Girls Education Strategy that provides for detailed approaches to address sexual harassment and other forms of violence in educational institutions. Further, anti-sexual harassment code of conduct has been prepared and rolled out for implementation at all levels of schools. School clubs particularly girls' clubs are established to promote safe school environment. Further, SOPs on Elimination of all forms of Gender Based Violence (GBV) has been developed with the objective to standardize and integrate national preventive, protective and provision services and to ensure multi-sectoral coordination in support of women and children.

D. The right not to be subjected to torture or other cruel, degrading treatment or punishment including corporal punishment (art. 37(a) and 28, para. 2)

102. The GoE has been exerting efforts to eliminate corporal punishment in family settings as well as schools and institutions by taking both legal and non-legal measures. There have been efforts to use the community policing structure to protect children from corporal punishment. When children are at risk or experiencing corporal punishment, the children or any other concerned person can report such cases to the community police because it is easily accessible to children at schools and community settings.

103. The MoE has issued a directive that prohibits corporal punishment in schools. The MoE has put in place follow-up mechanisms such as parent-teacher associations. There have been disciplinary measures against teachers who administer corporal punishment. However, there is a lot to be done to protect children from corporal punishment at schools and care institutions in the country.

104. To prevent the practice of corporal punishment as a method of disciplining in family and other settings, different awareness raising programs and campaigns on positive parenting practices were conducted targeting families, schools and communities. The draft ECDE (2019) has also incorporated approaches to equip teachers and parents with skills on better disciplinary techniques. The MoWCY in collaboration with the MoE and SoS Children's Village is preparing a module on better parenting skills. These frameworks and modules will complement the existing Manual on Positive Child Disciplining (2009) and the Standard Service Delivery Guidelines, which promote various types of behaviour modifying techniques.

105. Despite such efforts to instil positive disciplinary methods targeting parents, communities, schools and care institutions, the practice of corporal punishment is widespread in all settings especially in the home setting and progress is generally slow in this regard.

VII. Family environment and alternative care (arts. 5, 9–11, 18, paras. 1 and 2, 20, 21, 25 and 27, para. 4)

A. Family environment and parental guidance (art. 5)

106. The MoWCY was granted an additional mandate to work on family empowerment programs including empowering parents on positive parenting practices. Various capacity building trainings targeting families and communities have been conducted based on the positive parenting module which also incorporates the roles and responsibilities of parents. Up to district levels, social workers were trained to provide community-based education to parents on positive parenting.

107. One of the major challenges to ensure common responsibilities especially for working parents is lack of childcare facilities around the work areas. The Civil Servant Proclamation No. 1064/2018 enforces the establishment of the Day Care Center in each government offices to ensure babies are breastfed and get appropriate care from their mothers. The MoWCY has been mandated to oversee the establishment of day cares. Accordingly, 17 day cares at the federal level and 16 day cares at regional levels, have been established. The Civil Servant Proclamation No. 1064/2017 as well as the Labour Proclamation No. 1196/2019, has raised maternity leave days from 90 to 120 days; paternity leave from five days to 10 days.

B. Parents common responsibilities, assistance to parents and provision of child care services (art 18)

108. The current social protection schemes of Ethiopia are the Rural Productive Safety Net Programme (2015–2020) (PSNP 4) and the Urban Productive Safety Net Programme (UPSNP), which was launched in 2016. The PSNP 4 is operational in Afar, Amhara, Dire Dawa, Harar, Oromia, SNNP, Somali and Tigray regions. This programme provides regular cash and food transfers in exchange for services in public projects to approximately eight million chronically food-insecure people across 350 Woredas. Approximately 10% of beneficiaries receive direct cash transfer without the requirement to do public work. Moreover, pregnant and lactating women are exempted from public work until two years after birth. The PSNP facilitates linkage of beneficiaries to various social services to improve the health and nutritional status of mothers and children.

109. The UPSNP on the other hand, benefits 11 cities and approximately 600,000 households. The programme incorporates safety net transfers, livelihood services and institutional strengthening.

110. There are non-PSNP social protection programs specific to health and education. In the health sector, the government introduced Community Based Health Insurance (CBHI) covering 15% of all households in 2017/18, with an 80% target for 2019/2020. CBHI was initially piloted in 743 Woredas and now it reaches 827 Woredas across the country. (MoH, September 2020) In non-CBHI Woredas, the government is implementing an Indigent Health Fee Waiver System that waives user fees at public-sector facilities for the very poor and for people with medical emergencies who cannot pay medical expenses. In 2017/2018, regional and Woreda governments financed the coverage of 7.7% of households through this mechanism, however there is a need to improve the linkage between the fee-waiver system and PSNP to extend the benefits to more people (MoH, HSTP 2015/16–2019/20).

111. The social protection programs specific to education includes Education Fee Waiver scheme and a National School Feeding Programme (2016–2020) that focuses on primary school children. There are also education programs that aim at ensuring enrolment of children from disadvantaged, pastoralist or semi-pastoralist communities through boarding schools, mobile schools/alternative basic education and scholarship for poor and disadvantaged children to support their promotion to the second cycle of primary education.

112. The child sponsorship programme has been strengthened with the active engagement of government institutions, private sector, community-based organizations, and religious institutions. Such program provides direct support (in kind and in cash) to destitute

households so that they will be able to fulfil the basic needs of their family members including children.

C. Separation from parents (art. 9)

113. In cases where parents or legal guardians are not discharging their obligations of care, the task of carrying out preventive, protective and rehabilitative work is assigned to pertinent government institutions. Within the justice system, social workers assess the situation of children's families, take the views of children, and provide recommendations for alternative placement of vulnerable children. Based on the recommendations of the social workers, children who are sexually abused by their parents, would be separated from their parents to live with their relatives in accordance with court decisions. The court ensures that the relationship of the child victim with his/her family is maintained unless there is suspicion of further abuse by the perpetrator.

D. Family reunification (art. 10)

114. In 2016, the MOWCY in collaboration with International Organization for Migration (IOM) and UNICEF developed SOPs on the reunification of children with their families which ensures the consideration of the best interest of the child in the reunification processes.

115. In January 2019, Ethiopia adopted a new Refugee Proclamation (Refugees Proclamation No. 1110/2019) which provides a wide range of rights to refugees. (see Section 10(a)) The new law ensures for family unity by allowing a family member of an asylum seeker to enter the country and enjoy all the rights and privileges provided under the law.

116. As of 31 August 2020, there were about 471,378 refugee children, among whom 41,159 are unaccompanied and separated refugee children. (ARRA, September 2020) The ARRA has already started family tracing for unaccompanied children. Within the ARRA, a Women and Children desk has been established to handle unaccompanied and separated refugee children's family tracing, reunification and reintegration in collaboration with different CSOs. Sops were developed to guide the ARRA in the reunification and reintegration of unaccompanied children. ARRA together with other partners is also facilitating local adoption for unaccompanied refugee children.

E. Recovery of maintenance for the child (art. 27, para. 4)

117. The FSCCJPO has drafted a child maintenance guideline to direct courts to make maintenance orders in the best interest of the child. The guideline is currently being reviewed by all concerned government organs. Depending on the urgency of the case, child maintenance orders are given in accelerated court proceedings. Continuous capacity building programs on child maintenance have been given to judges so that child maintenance orders will be guided by child rights principles, particularly the best interest of the child. Since 2015, 500 federal judges were trained on child maintenance.

118. The OFAG has been providing free legal aid services for those children who are in need of maintenance support from their parents. From 2015–2019/2020, the FSCCJPO under its four children legal protection centers in Addis Ababa, handled 32,120 (17,015 male, 15,105 female) maintenance cases. The pro bono services on maintenance recovery taken to federal court have increased from 20 cases in 2013/14 to 57 cases in 2018/19. (Annex: Table 12 & 13) This number doesn't include the maintenance cases negotiated by public prosecutors and police officer as well as those handled by EHRC and public university legal aid centers.

F. Children deprived of a family environment (art. 20)

119. One out of 10 children in Ethiopia do not live with their biological parents, and 7% of these children are orphans, with one or both parents dead. Adolescents are most likely to be

orphans (10% among 10- to 14-year-olds and 17% among 15 to 17-year-olds, compared with 2% to 6% of children under age 9 (EDHS 2016).

120. The MoWCY has endorsed a national directive to facilitate the implementation of foster care and domestic adoption programs at all levels. There are encouraging efforts by the government to expand community based alternative care, foster care, and domestic adoptions; and to strengthen reunification and reintegration programs. There is a structure within the MoWCY at federal and regional levels, engaged in monitoring the proper implementation of the alternative childcare programmes. The alternative care guideline is being revised to expand the existing care options to reach more children and to mainstream non-institutional option for children deprived of family environment.

121. As of May 2019, the number of CCCs has reached 13, 403 with 77% of kebele coverage. The number of children in community-based care increased from 669,800 in 2014/15 to 713,812 in 2018/19 and reached a total of 3,597,615 during 2014/15–2018/19. The number of children in the foster care families has increased from 3,099 in 2014/15 to 7,990 in the year 2018/19 and a total of 23,535 from 2014/15–2018/19. Children in domestic adoption was 1,314 in the year 2014/15 and reached 8,311 children in 2018/19. In 2018/19 alone, a total of 17,833 children were reunified and reintegrated. From the 2014/15–2018/19 a total of 57,833 children have been reunified and reintegrated across the country. (Annex: Table 14) The trend in alternative care shows that institutional care is declining whereas community, kinship and other forms of care within the family and community are increasing.

122. In 2017, the MoLSA and the MoWCY in line with their mandates have conducted an assessment on the effectiveness of the alternative childcare programs and the CCCs respectively. The MoLSA's assessment found out that CCCs have strong community support and have been contributing to improving the socio-economic wellbeing of communities. To improve the services of the CCCs, it was recommended to improve management systems, infrastructures, and upscale the service delivery. Accordingly, the MoLSA has developed a strategy, implementation guideline and an action plan for the implementation of the CCCs to support OVCs in Ethiopia. Further, four Regional States (Amhara, Harrar, Tigray, and SNNPR) have endorsed a Proclamation on the establishment and strengthening of CCCs.

G. Adoptions (art. 21)

123. Ethiopia has recently amended the adoption law putting an indefinite moratorium on inter-country adoption through Proclamation No. 1070/2018. To ensure that children deprived of the care of their parents are raised in a family environment, the MoWCY has developed and endorsed a national directive to facilitate the implementation of foster care and domestic adoption programs at all levels.

124. The government encourages local adoption to create a conducive environment for the upbringing of the child in his/her social context. Several measures have been taken by the Government to ensure compliance with the CRC and to make sure that adoption procedures are conducted in the best interests of children. These include comprehensive assessment of adopting families by social workers, ensuring the involvement of the community in the assessment procedures, and final decision by the court.

H. Protection of children with incarcerated parents and children living in prison with their mothers

125. According to the EHRC monitoring report of 160 detention centers (2016–2020), there were 700 children staying with their imprisoned mothers. The provision of nutritious food and education is not uniform which leaves several such children without protection of their rights to health and education. In some places pregnant detainees are not accorded health care services (Annex: Table 9).

126. In 2017/18, the OFAG in collaboration with Women Affairs Section at the Federal Prison Administration, have undertaken follow up activities on children imprisoned with their mothers, and until the children attain two years of age their food expenses are fully

covered. Further, the Prison Administration Commission in collaboration with the Addis Ababa Women and Children Bureau, has signed an agreement with Hana Orphans and Abebech Gobena to provide shelter, as well as the basic needs and school of the children until their parents are released. (OFAG, Annual Activity Report (2017/18)). The FSCCJPO has also signed MoU with all relevant partners to explore and implement different mechanisms for children of imprisoned mothers.

VIII. Disability, basic health and welfare (art. 6, 18, para. 3, 23, 24, 26, 27, paras. 1–3, and 33)

A. Children with disability (art. 23)

127. The GoE recognizes and commits to take special measures to ensure that children with disabilities enjoy their full spectrum of rights. To this end, a National Action Plan on Disability (2012–2021) was developed by MoLSA and is being implemented. The Physical Rehabilitation Strategy was revised in 2019, which guides the implementation of programs for persons with disabilities.

128. To effectively coordinate and implement programs and actions for persons with disabilities including children, a separate directorate within MoLSA was established in 2018 and a similar structure is being replicated at the regional level. The responsibility of managing the physical rehabilitation centers was transferred from MoLSA to MoH in order to increase accessibility of the rehabilitation centers to persons with disabilities in health institutions.

129. MoLSA and MoE have developed a teaching guide for children with intellectual disabilities, and it is currently being used by primary and secondary schools. In 2018, a National Road Map on Special Needs Education was developed and is being reviewed. The Road map sets out the strategic direction for government and all partners in planning, implementing and monitoring programs for persons (including children) with disabilities. MoLSA in collaboration with MoH has developed a Disability Inclusion Manual for the health sector and disseminated the same to all relevant federal, regional, and local government organs and stakeholders. Sectoral ministries have started mainstreaming issues of persons with disabilities in their plans and programs.

130. According to the MoLSA and the MoE 2015 annual report, a total of 4,129 kindergarten children, 70,477 primary school children, and 7,268 secondary school level children with disabilities have received education, health and other rehabilitation services. In 2018/19 a total of 316,271 (178,535 male, 137,736 female) children with disabilities were enrolled in primary schools. At the secondary level, a total of 37,468 students (42.5% females) with special education needs were attending secondary school in 2018/19. However, the enrolment at both levels is much lower than the target that stated in ESDP V (Section (9) (a) & (Annex Table 23&24).

131. Higher educational institutions have started special needs education (SNE) focused program at the undergraduate and graduate levels. Since 2015/16, additional ten College of Teacher Education (CTE) and three Universities have launched SNE programs. Currently, 18 CTE and 8 Universities have education programs related to SNE. (MoE, CRPD Implementation Report, 2020) Between 2014/15- 2018/19, a total of 4,828 (2,590 male & 2,238 female) experts were trained acquiring diplomas and even Ph.Ds. in SNE related fields of study. (See Annex Table 29) Further, short term SNE training programs have been given to teachers. In 2018/19, a total of 290 prospective teachers with SNE were enrolled nationally, from which the majority (45.9%) are persons with physical disability.

132. Between 2014–2019, a total of 238,618 persons (including children) with disabilities received physical rehabilitation services in the 26 governmental and non-governmental rehabilitation centers. In addition, 731,631 children in difficult circumstances and their families (including children with disabilities) were provided with direct support (material and financial) to fulfil their basic needs and access to social services. Children with disabilities are given special opportunities to have access to basic services in rural and urban safety nets and CCCs which is implemented in all regions (MoLSA December 2019).

133. Public awareness programs using different mediums were organized to change society's wrong perceptions about persons with disabilities including children. Six media forums have been established and are being led by persons with disabilities (five in the regions and one in Addis Ababa) undertaking different public awareness raising programs on the rights and wellbeing of persons with disabilities. Further, community awareness raising and sensitization programs on the rights and protection of persons with disabilities has been undertaken (OFAG, Annual Activity Report (2018/19)).

134. The International Convention on the Rights of Persons with Disabilities (CRPD) has been translated into five local languages and distributed to the public. Further, educational and other printed information and promotional materials on the rights and needs of persons with disabilities were produced and disseminated. There is also progress in documenting national data on persons with disabilities for instance the Education Statistics Annual Abstract (ESAA) captures data on the enrolment of children with disabilities in the education program.

135. MoLSA allocated 1,000,000 (ETB) for Disability Federation to enhance the implementation capacity of the federation and associations. Moreover, in 2019, 7,100,000 ETB was allocated for nine national disability associations and one elders association to address their financial and capacity gaps.

136. Despite all the efforts, accessibility of social services to children with disabilities is still a challenge. Further, negative perception among families and the society, hinders children with disabilities from fully enjoying their rights.

B. Health and health services (art. 24)

137. After successfully implementing the 20-years Health Sector Development Program (HSDP), the GoE has launched the five years Health Sector Transformation Plan (HSTP) (2016–2020), which is part of the country's GTP-II. The highest priority areas in the HSTP are maternal and newborn care, child health, and the halting and reversing of the spread of major communicable diseases such as HIV/AIDS, Tuberculosis and Malaria.

138. The GoE has developed Child Survival Strategy (2016–2020) and Roadmap for Child Health, Growth and Development Envisioning (2030) (final draft) and the Early Childhood Development Health Sector Strategic Plan to foster coordinated services to new born and child health care service.

139. The GoE has also developed the National Reproductive Health Strategy (2016–2020) in order to reduce maternal mortality and morbidity and promote reproductive health. Facilities that provide family planning services have expanded both in terms of number and outreach. Currently, 97% of government health institutions across the country provide family planning services five days a week.

140. The GoE has strengthened the implementation of the Health Extension Program (HEP), which deploys 38,000 (98% female) HEW in rural and urban areas who provide door-to-door health care services. The program gives special attention to mothers and children in rural areas. At the community level, in the past four years, considerable progress has been made in the provision of health services through community-level volunteers who were trained by the HEW on local behaviour changes.

141. To improve health care services in rural areas and in emerging regions, the MoH strengthened the Special Support Directorate by establishing the Equity Case Team in 2015/16. The Strategy for Optimization of Health Extension Programs in Pastoralist Areas is under implementation since 2018 in order to improve health extension services in pastoralist areas especially in Afar and Somali regions.

142. There has been a linear increase in Health Posts (HP) and Health Centers (HC). The total number of HPs rose from 16,048 in 2012/13 to 18,816 in 2017/18. The expansion of HCs also plays a pivotal role for the achievement of universal primary health coverage. Through the joint effort of the federal Government and the regional states, the total number

of HCs increased from 3,100 in 2012/13 to 3956 in 2017/18. Progress has also been made in increasing the number of hospitals from 127 in 2012/13 to 402 in 2017/18.

Health sector expenditure

143. National health care expenditure had a nominal increase of 14% between 2015/16 and 2016/17, while in real terms it grew by 4%. Allocation of budget for health care remained flat or declined during the period 2012/13 to 2016/17. Per capita health spending increased nominally by 10% between 2015/16 and 2016/17 and reached ETB274 in 2016/17. Per capita health spending declined in real terms from ETB 216 in 2015/16 to ETB 212 in 2016/17, which emphasizes the need to increase the share of the budget allocated to the health sector (Annex Table 5).

Early childhood mortality

144. Ethiopia has made notable improvement in the overall child survival, with a reduction in the under-five mortality rate, from 88 per 1,000 live births in 2011 to 48 per 1,000 live births in 2016 and to 59 per 1,000 live births in 2019. Similarly, infant mortality rate reduced from 59 deaths per 1,000 live births in 2011 to 48 deaths per 1,000 live births in 2016 up to 47 deaths per 1,000 live births in 2019. Neonatal mortality rate declined from 37 deaths per 1,000 live births in 2011 to 29 deaths per 1,000 live births in 2016. However, there has been no significant improvement in neonatal survival in recent years, with 33 deaths per 1,000 live births in 2019 (MEDHS 2019) (Annex Table: 15).

Maternal health services

Antenatal care (ANC)

145. Access to ANC increased during the reporting period with 74% of women received antenatal care from a skilled provider at least once for their last pregnancy in 2019. Such increase is achieved from 62% and 34% women accessing ANC in 2016 and 2011 respectively. Although urban women (85%) were more likely than rural women to have received ANC from a skilled provider, the number of rural women accessing ANC has increased with 70%. In 2019, nationally four in 10 women (43%) had four or more ANC visits for their most recent live birth; with 59% urban women and 37% rural women had at least four ANC visits (EDHS 2016 & MEDHS 2019).

Delivery care

146. In 2019, the number of women who delivered with the assistance of a skilled healthcare provider reached 50%, a significant increase from 19% in 2011. The percentage of women who delivered in health facilities reached 48% in 2019.

147. The percentage of live births delivered by skilled healthcare providers increased from 11% in the 2011 EDHS, to 28% in the 2016 EDHS, and up to 50% in the 2019 MEDHS. In 2019, 72% of urban births were assisted by a skilled healthcare provider, whereas 43% of births in rural areas, which also shows a significant steady increase over the years. Similarly, 70% of urban births took place in a health facility, compared with 40% in rural areas. The Somali region has the lowest percentage of births delivered by a skilled healthcare provider or delivery in a health facility (26% and 23% respectively), while Addis Ababa has the highest percentage for both indicators (96% and 95% respectively) (EDHS 2016 & MEDHS 2019).

Postnatal care

148. According to the 2019 MEDHS, 34% of women reported receiving a PNC check-up in the first two days after birth. The proportion of women receiving a postnatal check-up within 2 days of delivery is higher in urban areas (48%) than in rural areas (29%). According to the 2019 MoH report, in the year 2018/19, 2,596,425 (78%) women received PNC within seven days after delivery. The MoH has developed a 24hours stay guideline, and implementation is underway to increase early PNC uptake.

Child immunization

149. In addition to the six common universal vaccinations, other childhood vaccines are given in Ethiopia to protect children against Hepatitis B, and Haemophilus influenzae type b (Hib). The GoE introduced the pneumococcal conjugate vaccine (PCV 13) and monovalent human rotavirus vaccine (RV1) into the nation's infant immunization programme in November 2011 and October 2012, respectively. Further, two vaccines (HPV and MCV2) were introduced into the routine immunization system in December 2018 and February 2019, respectively. MCV2 vaccination targets children aged 15 months and is provided in two doses (i.e. MCV 1 and 2) (MEDHS 2019 & FDRE, MoH Annual Health Sector Performance Report (2018/19)).

150. The percentage of children aged 12–23 months who received all basic vaccinations increased from 24% in 2011, to 39% in 2016 reached up to 44% in 2019. The proportion of children aged 12–23 months with no vaccination decreased from 24% in 2005 to 16% in 2016. Close to 2 in 10 children (19%) in this age group have not received any vaccinations at all. (2019 MEDHS and 2016 EDHS) In general, 57% of children living in urban areas have received all basic vaccinations compared with 37% of children in rural areas (2019 MEDHS).

151. In 2017/18, several capacity building training and sensitization programs were rendered to health professionals to introduce the new HPV and MCV2 vaccination, including through multimedia and with printed materials translated into three local languages (FDRE, MoH (2018/19)).

152. The general trend in the rate of immunization since the last reporting period, shows slight improvements in ensuring that children receive the standard vaccinations. (2019 MEDHS & 2016 EDHS) Despite such improvement, there are a significant number of unimmunized children in the country (Annex: Table 28).

153. Low immunization coverage is the result of limitations in the main components of Expanded Program on Immunisation (EPI) including vaccine related challenges along the cold chain system, inadequate service delivery with high dropouts, data inconsistency among different reports, behavioural change communication, and sub optimal EPI program management such as planning, forecasting, quantification and monitoring and evaluation.

Poliomyelitis and neonatal tetanus

154. There has been remarkable progress in reducing morbidity and mortality from vaccine preventable diseases. Ethiopia has maintained wild polio virus free status following the African Regional Certification Commission (ARCC) approval in 2017. The country had also achieved national Elimination of Maternal and Neonatal Tetanus (MNTE) in the same year.

Nutritional status of children

155. The second National Nutrition Programme (NNP II 2016–2020) is the current five-year roadmap for nutrition improvement in the country. Ethiopia has also designed a National Food and Nutrition Policy (2019).

156. The 2019 MEDHS shows that 37% (a decline from 44% in 2011) of children under five are stunted and 12% are severely stunted. The prevalence of stunting generally increases steadily with age, from 22% among children 6–8 months up to 44% of children 48–59 months (4–5 years). Notably, the highest proportion of stunting of children (45%) was observed at age 24–35 months (2–3 years), and it is also slightly higher among boys than girls (40% vs. 33%). In addition, stunting among children is greater in rural areas (41%) than in urban areas (26%).

157. In 2019, 7% of children in Ethiopia are wasted, and 1% are severely wasted. The prevalence of wasting was 10% in 2011 and 2016.

158. According to the 2019 MEDHS, 21% of children are underweight and 6% are severely underweight. Children in rural areas are more likely than those in urban areas to be underweight (23% compared to 14%). There is a general reduction of underweight children from 29% in 2011 to 24% in 2016 (EDHS 2011 & 2016) (Annex: Table 16).

159. Since 2016, the GoE has been implementing the Seqota Declaration, which is a high-level commitment to end stunting. The 15 years' commitment is to be implemented in three phases, each consisting of 5 years: Innovation, Expansion and scale-up phases. Currently, the "Innovation Phase" (2016–2020) is being implemented through the establishment of Agricultural Innovation and Technology Centers (AITEC). These are government owned 20-hectare demonstration farms which have been established in Tanqua Abergele and West Belesa Woredas. The farms include modern pressurized micro-irrigation (drip and sprinklers), water storage technologies, modern nurseries, protected agriculture, postharvest plant, fruit tree cultivation, research and development sites, goats for milk production, and an egg production unit. Currently, the localities selected for the implementation of the Seqota Declaration have increased from 29 to 41 Woredas.

Breastfeeding practice

160. In Ethiopia, 59% of infants under six months are exclusively breastfed as recommended by the WHO. On the other hand, 14% of infants 0–5 months also consume plain water, 1% of them consume non-milk liquids, 8% consume other milk, and 13% consume complementary foods in addition to breast milk. Notably, 6% of infants under 6 months are not breastfed at all. The percentage of breastfeeding practice for exclusive and combination with other liquids and solid foods in general decreases sharply with age. During the reporting period, exclusive breastfeeding of infants under six months has increased from 52% in 2011 to 58% in 2016 and up to 59% in MEDHS 2019.

Prevention of mother to child transmission of HIV

161. Identification of a pregnant woman's HIV status is the key entry point to PMTCT and other HIV care and treatment services. According to the 2016, EDHS 20% of women had tested for HIV in the 12 months before the survey and received the last test results. According to MoH administrative data (2018/19) a total of 2,760,809 (84%) pregnant women were tested for HIV and knew their status.

162. One in five women (23%) received counselling on HIV during an ANC visit (EDHS 2016). One in three women (34%) had an HIV test during an ANC visit or labour and received the test results. 22% of women were tested for HIV during an ANC visit and received the test results and post-test counselling, 11% were tested and received the results but no post-test counselling, and 3% were tested but did not receive the test results. Overall, 19% of women received counselling on HIV, an HIV test during an antenatal care (ANC) visit, and the test results (EDHS 2016).

163. According to the recent HIV Related Estimates and Projections for Ethiopia, there are an estimated 21,561 HIV positive pregnant and lactating women. In 2018/19, a total of 17,516 (81%) pregnant and lactating women received ART for the PMCTC of HIV, which indicates 21% increment than the 2017/18 performance. In addition, there is a huge disparity among regions, with a performance as low as 16% in Somali region and as high as 100% in Tigray, Afar and Addis Ababa regions.

164. In 2018/19, four awareness raising workshops were conducted. Further, training of trainers (ToTs) on comprehensive PMTCT including PMTCT cohort monitoring was given to 54 health professionals as well as a total of 608 mentors. Further, advocacy initiatives have been undertaken in Dire Dawa, Somali, Oromia and SNNPR to popularize the PMTCT strategic plan (2017–2020) among the four regional health bureaus (FDRE, MoH (2018/19)).

165. Major challenges and gaps in Ethiopia's response to the HIV epidemic include suboptimal HIV case finding especially in pediatric and adolescent age groups as well as in key and priority populations; and gaps on overall quality of services for prevention, diagnosis, care and treatment.

Access to child health services at the community level

166. The health policy and health sector strategy of Ethiopia have given substantial emphasis on essential health services availability, accessibility, acceptability, and affordability. The essential health services package (EHSP) (2005) was revised in 2019 and

expanded to incorporate 1,019 interventions to be delivered at different levels of the health service system through different healthcare financing mechanisms (MOH, EHSP, 2019).

167. Nationally, the proportion of health posts providing Community Based New-Born Care (CBNC) and Integrated Community Case Management of New-born and Childhood Illness (ICMNCI) services reached 87% and 95% respectively. The proportion of CBNC providing health posts increased from 86% in 2017/18 to 87% in 2018/19. Similarly, ICMNCI providing health posts has increased from 94% in 2017/18 to 95% 2018/19.

168. In 2018/19, CBNC was scaled up in 20 woredas of Benishangul Gumuz, 13 Woredas of Afar and 6 Woredas of Gambella regions. In these regions, a total of 646 health posts have started CBNC service. Further, 1,872 health workers (1,307 HEW and 565 other health professionals) were trained using their local languages.

169. Similarly, in 2018/19, a total of 15,400 ICMNCI training materials were printed and distributed to all regions. Further, contextualized ICMNCI implementation guide for pastoralist areas were distributed and 62 health workers were trained in the Somali region. Moreover, pre-service ICMNCI training to 721 Hews, Tot on the revised ICMNCI to 44 health workers, and rollout training to 240 health workers in the four agrarian regions, were provided (FDRE, MoH (2018/19).

Adolescent health services

170. The MoH developed a national strategy with a minimum service package for scaling up adolescent and youth reproductive health services. Further, within the MoH, Adolescent Health Case Team was established in 2020. The first National Adolescent and Youth Health Forum was conducted on 20 August 2020 through webinar with the theme “connect for youth health.”

171. In Ethiopia, generally the coverage and quality of adolescent-friendly health services is extremely limited. The use of modern contraceptive among sexually active 15 to 19-year-old women is 7.4% in 2016. (EDHS 2016) Among currently married 15 to 19-year-olds, modern family planning use increased from 31.8% in 2016 to 36.5% in 2019 (MEDHS 2019 & EDHS 2016).

172. The 2016 EDHS highlighted that there is still a knowledge gap among adolescents around HIV prevention. Only 25% of females aged 15–19 and slightly about 34% males aged 15–19 have comprehensive knowledge about HIV. Vulnerable girls such as rural girls, and domestic workers are least knowledgeable (EDHS 2016).

Measures to protect children from substance abuse (art 33)

173. The National Child Policy provides direction on the protection of children from the production and use of poisonous drugs.

174. Data on substance abuse among children and adolescents is limited. However, according to the 2016 EDHS, tobacco smoking and use of alcohol are practiced among adolescents. For instance, nationally, 3 out of 10 females aged 15–19 and almost 4 out of 10 males aged 15–19 reported usually drinking alcohol.

175. Due to the prevalence of adolescents’ use of alcohol and tobacco, the GoE through the Food and Medicine Administration Proclamation No. 1112/2019 bans any advertisement of alcohol in public areas and through broadcasting medias. Further, the permissible alcohol consumption age was increased from 18 years to 21 years. The GoE has also adopted a new Excise Tax Proclamation No. 1186/2020, which imposes substantial additional tax on cigarettes and alcohols to discourage children and others from consuming these products.

176. The police in Addis Ababa have undertaken several operations to close premises where substances such as *Khat and Shisha* are distributed and used. Although such measures contribute to the reduction of use of illicit substances by children, serious challenges exist especially due to the opening of new private spaces to chew *Khat* and use other controlled substances around schools, and the use of controlled substances by children in street situations.

Impact of COVID-19 on health services

177. The health sector has been overwhelmed and challenged by COVID-19. The fear, misinformation and limitation of movement of persons especially after the state of emergency and stay home declarations, disrupted delivery of frontline health care for children. Although the overall impact has not been thoroughly assessed and may not be ascertained at this point, generally the pandemic is expected to have a negative impact on mortality of new-borns and childhood preventable and treatable conditions. Demand for newborn and child health services may have been reduced due to perceived fear of families that they may acquire COVID-19 at health facilities. Health care workers might be shifted or repurposed to and overburdened with COVID-19 response which can negatively impact services for new-borns and children. The other expected impact is on the provision of adequate nutrition and diversified diet for children that may have been affected due to the overall impact of the COVID-19 on household food security. Limitation of screening tools, shortage of oxygen and other diagnostic materials may also pose a challenge to provide services to children especially in rural areas.

178. To mitigate the impacts, guided by the WHO guidelines, national level mitigation plan and several SoPs have been adopted. For instance, national mitigation plan was developed to ensure resilient health service delivery system for reproductive, maternal, newborn, child health and nutrition (RMNCH-N) services to guarantee the continuity of the service through the pandemic. MoH has been working to enhance infection prevention and control practice including appropriate use of personal protective equipment (PPE), regular handwashing with soap and water or sanitizers and maintain physical distancing during the RMNCH-N service delivers. It has been providing timely information and update on COVID-19 using online platforms, TVs, radios, hotlines, WDA, HEW and youth volunteers. Considering the changing circumstances, MoH has been designing plans and guidelines for health workers, different sectors and for the public. In all interventions, MoH has been closely working with the national and regional COVID-19 response structures.

IX. Education, leisure and cultural activities (arts. 28–31)

A. The right to education

179. The Fifth Education Sector Development Program (ESDP V) (2015/16–2019/2020) was issued in August 2015. While the main educational goals of the country remain access, equity and relevance in education; other key areas of focus under the ESDP V include attention to disadvantaged groups, delivery of quality education, upbringing competent citizens by creating and transferring knowledge and technology, and excelling in educational planning and management.

180. The MoE is in the process of finalizing the Ethiopian Education Development Roadmap (Education Roadmap) (2019–30). The Education Roadmap focuses on improving access, equity and quality in six thematic areas, namely pre-primary and primary education, secondary and preparatory education, teacher’s education and development, higher education, TVET, and policy, governance and leadership. Further, the draft ECDE and the draft Education and Training Policies are also being finalized. The GoE is also drafting a General Education Proclamation that will provide a comprehensive standard for education in Ethiopia.

Early childhood development and education

181. GoE has started multisectoral collaboration in order to implement the ECDE interventions which incorporates all components of nurturing care, namely health, nutrition, safety and security, responsive caregiving, and opportunity for early learning. In order to achieve the ECDE objectives, the GoE has developed a curriculum, trained teachers and provided supervisory support. As a result, pre-primary enrolment is increasing every year.

182. In 2018/19, the national GER of pre-primary, which combines the data of Kindergarten, Child to Child and “O” Class enrolments, has reached 40.7% (39.7 female, 41.8 male). Compared with the 2017/18GER of 44.2% the current figure shows a 3.5%

decrease. On the other hand, the Net Enrolment Ratio (NER), is 23.3% (female) and 24.5% (male). Nationally the difference between NER and GER at pre-primary level is much higher than the year 2017/18. This implies that there is significant number of over aged children enrolled at pre-primary level. (Annex: Table 17 & Chart 1). Gender parity at pre-primary level stood at 0.95 in 2017/18.

Primary education

183. Primary education is free for all citizens. Further, the GoE is exerting efforts to eliminate indirect costs, for instance with the provision of free school uniforms. Although not compulsory yet, all children of school age are strongly encouraged to attend school. As of 2017/18, primary education has been provided in more than 51 mother tongue languages compared to 49 reported in 2014/2015. In 2017/18, 628 primary schools were built across the country. In 2018/19, the total number of primary schools reached 37,039, with an increase from 36,466 schools reported in 2017/18, 35,838 in 2016/17 and 30,495 schools reported in 2012/13. Across the country, 93% of primary schools are government owned. There are also cluster schools which share facilities. Schools are usually grouped into clusters of five or more in Woredas. In 2018/19, there were 9,601 clusters, showing an increase from 7,532 in 2017/18. In general, access to primary education has seen considerable improvements through the construction of new schools in many localities and remote areas ((FDRE, MoE, ESAA (2018/19) & (2017/18) & Annex Chart 2).

184. The Net Intake Rate (NIR), is 92.4% in 2018/19 (female 88.2, male 96.5%). The NIR target of 100% for males and 99% for females that was set by ESPD V has not been met. The gap between male and female NIR has also started to decrease, with the gap closing by 8.3 percentage points in 2018/19.

185. The GER in grades 1–8, both in Alternative Basic Education (ABE) centers and formal primary schools is 104.6% (female 99.2, male 109.9 male). Nationally, the GER for the first cycle is 127.5% compared to 79.8% for the second cycle, indicating that many students are not progressing to the second cycle of primary education, either because they are repeating grades, or dropping out completely. The GER trend for grades 1–8 shows a slight incremental pattern. However, the gender gap has increased from 5 in 2005 to 10.7 percentage points in 2018/19 (Annex: Table 18).

186. The NER is a measure of student enrolment of those who are of the official age group for the given level of education, i.e. in Ethiopia's context; it only looks at the 7 to 14 years old that are enrolled in primary education. The national NER is 94.7% (female 90.5%, male 98.9%) in 2018/19, which shows a decrease from the 2017/18 NER of 100.05% but a significant increase from 85.9% reported in 2012/13. There is a wide regional variation, with Afar and Somali having a much lower NER than other regions (Annex: Table 19 & Chart 3).

187. In 2018/19, the national GPI for primary education was 0.90. It missed the ESDP V target of 0.98 and showed a decrease compared to the ESDP V baseline of 0.93. The GoE acknowledges that more work is needed in all regions if ambitions of gender parity are to be achieved by the end of ESDP V. The current figures are influenced by the high result in Addis Ababa of 1.15, which shows that more females are attending school than males. The lowest regional GPI is Somali at 0.77 (Annex: Chart 4).

Alternative basic education

188. The National Alternative Basic Education (ABE) strategy which was developed in 2006 aimed to establish new ABE centers, and transform existing centers into regular schools. Alternative education provision responds to differing needs and contexts, improving the enrolment of disadvantaged and under-served ethnic groups (ESDP V, 2015). A Manual to Upgrade Alternative Basic Education Centers (ABE Level (1–4)–Level (1–6) was adopted in 2018. In Somali, Afar, and Benishangul-Gumuz this program was well implemented and brought positive results. The data presented under primary education is a combination of the ABE and formal education.

Secondary education

189. Secondary school enrolment has expanded rapidly, with an average annual growth rate of 7.6% in the last five consecutive years. The national GER of secondary grades (Grade 9–12) is 32.0% in 2018/19, which shows a 1.5 percentage points from 2017/18. The low percentage GRE indicates that transition from primary to secondary education is low. Regional differences are notable, with Addis Ababa having the highest GER at 87.6% followed by Gambella and Tigray with 65.0% and 42.9% respectively. Nationally the GER for males is higher compared to females, however in Amhara and Addis Ababa more females are attending secondary education than males. Afar and Somali regions have the lowest enrolment rate in secondary education (Annex: Table 20).

190. In 2018/19, the national NER for Grades 9–12 is 25.3%, a 9% increase from 2017/18. In general, the NER indicates a small increase over the last 5 years from 2012/13 for both grades 9–10 and grades 11–12. Addis Ababa has the highest NER at 69.8%, showing that most students in this region enrolled at the official school age, and Afar with the lowest NER at 7.2%. Nationally, the gap between GER and NER is smaller compared to the primary level, indicating that if a student has enrolled in secondary level, they are more likely to be the correct age (Annex: Table 21& Chart 6).

191. The gender gap in secondary schools (Grades 9–12) has been significantly reduced (0.87 nationally) and even some regions such as Addis Ababa and Amhara exceeded the target set by the ESDP V (0.98) and the Tigray region missing it by just 0.1% (0.97). Since the year 2011/12, female NER for grades 9–10 became higher than male NER and it has remained high ever since. GPI is higher for Grades 11–12 in Addis Ababa, followed by Harari, Amhara and Dire Dawa, showing that more females than males in these regions proceed to the second cycle of secondary education compared to other regions (Annex: Chart 7).

Technical and vocational educational training

192. To develop and promote high-quality vocational training programmes for all children and adolescents, the instructors of TVET have been promoted to PHD level education. The new Education Roadmap has given much attention to vocational education and put in place modalities to improve its quality.

193. According to the 2017/18 Educational Statistical Abstract, about 80% of students from the first cycle secondary school are expected to join TVET, CTE and other training centers. The number of students enrolled in TVET in 2018/19 was 292,378 (50.8% women), a decrease from 302,083 reported in 2016/17. In 2017/18, it was reported that there were 19,236 trainers. (20% women). The general trend in TVET shows a decrease from 2013/14, which is attributed to underreporting in several regions.

Public expenditure on education

194. National education expenditure has increased by more than two-fold between 2012/13 and 2016/17. Overall spending grew from ETB 36.1 billion in 2012/13 to about ETB 88.6 billion in 2016/17, which amounts to an annual average growth rate of 25.5% and 14.4% in nominal and real terms, respectively. This is mainly due to growing recurrent costs resulting from system expansion in general and higher and secondary education expansion in particular. Besides the recent growth, the education sector receives the highest priority in the national budget. In 2016/17, education accounted for 27% of total expenditure, which is significantly higher than the government's commitment to internationally agreed targets set out by the Education for All (EFA) (i.e. 20% of the national budget for education). (UNICEF Budget Brief Education, (2017/18) & (Annex: Table 5–7) Among the general budget allocation for children, emerging regions have 5% from the school grant for general education. In 2017/18, 344 million ETB was allocated for the school feeding programme which contributes to high-quality education among the poorest and most vulnerable individuals and households (Annex: Table 8).

Teacher distribution and capacity of teachers

195. There is a total of 688,536 teachers across all levels. Out of this, 42,225 teachers are deployed in kindergarten, 27,228 in O-Class, 502,738 in primary schools and 116,345 in

secondary schools. Across primary and secondary levels, the majority of teachers are male, accounting for 63.4% whereas in kindergarten schools 79.5% of teachers are female. In 2018/19, the total number of teachers has increased by 8.7 percentage points from 2017/18.

196. The national Pupil-Teacher Ratio (PTR) in 2018/19 is 39 for grades 1–8 (47 for first cycle and 31 for the second cycle), which indicates a decrease from 43 in 2017/18. PTR is highest in Somali with 104 for Grade 1–8. Except for Somali, all regions achieved a primary PTR of below 50 (Annex: Chart 8).

197. The PTR in secondary grades is 22.5 in 2018/19. Similar to the previous year's result; the PTR in the first cycle of secondary school is higher compared to the PTR in the second cycle. The trend in PTR shows that it has been decreasing since 2009/2010, which shows better distribution of teachers with respect to students in secondary schools (Annex: Table 22& Chart 9).

198. The qualification level of teachers is an important aspect of improving the quality of education in a country. Nationally, all teachers who are teaching in primary 1–8 are appropriately qualified for the level as per the standard. For secondary schools, out of the total number of teachers teaching Grades 9–12, those who fulfil the standard qualification for the level are 94% in the first cycle and 96.2% in the second cycle.

Schools and facilities

199. Among the 37,039 primary schools reported in 2018/19, 93% are owned by the government. More than 10,090 (27%) primary schools have electricity. The 2018/19 data shows that nationally 27% of primary schools have access to water supply. Water access is highest in Addis Ababa followed by Dire Dawa and Harari with 87%, 77% and 64% respectively. Somali has the lowest access at 7%. Moreover, in the same year, 79% of primary schools have toilets. 36% of schools have toilets accessible to children with special needs, whereas 49% are accessible to young children. At the regional level, Gambella has the lowest proportion of toilets accessible to students with special needs, and accessible for young children, both standing at 14%.

200. Among 3,739 secondary schools reported in 2018/19, 89.6% are government owned. Nationally, 73% of secondary schools have electricity available. Dire Dawa, Addis Ababa and Harari have higher proportions of schools with electricity. Concerning the availability of multimedia teaching, about 78.7% of schools have computers available, but around 23% of the computers are not functional. Secondary schools in Addis Ababa are the most connected to internet (76%), followed by Harari and Dire Dawa. Internet availability nationally covers 21.5% of the total secondary schools.

201. Nationally, 84% of schools reported having access to water supply, and 66% of schools reported that their water supply is easily accessible by students with special needs. On the other hand, 96% of secondary schools have access to toilets, with the majority being improved toilets.

202. Nationally Pupil to Section Ration (PSR) is at 53 for grades 1–8 and it is higher in the second cycle compared to the first cycle. Somali has the highest PSR at 92 for primary and 109 for first cycles. The PSR in secondary grades (9–12) has reached 56.8 nationally in 2018/19 (0.8-point decrement from last year). PSR is lowest in Addis Ababa, followed by Afar and Benishangul-Gumuz, indicating that students in these regions have better access to classroom facilities.

203. The total number of textbooks in primary schools is over 80 million, with 32% of these textbooks being classed as language textbooks. Nationally, the pupil/textbook ratio (PTxR) for primary schools is four, i.e. on average children have access to four textbooks when they go to school. There is wide regional variation with Tigray having the highest PTxR at nine. Somali has the lowest PTxR where there is less than one textbook per child.

204. The total number of textbooks for secondary schools 2018/19 is 30.8 million, which is less by 1.1 million in 2017/18. The national PTxR in 2018/19 is 10.9, i.e. on average children have accesses to about 11 textbooks in school. Compared with the 2017/18, the PTxR has decreased by 1.1 points. However, there is wide regional variation with Dire Dawa

having the highest PTxR at 14.5, followed by Addis Ababa and Harari. Gambella has the lowest ratio with 6 textbooks per student (FDRE, MoE, ESAA (2018/19)).

205. Despite improvements in the provision of gender and disability friendly school facilities, a huge gap remains. The Government commits to allocate increasing funds to provide better school facilities as well as safe and friendly sanitary amenities.

Improving quality of education

206. Ensuring quality education is one of the key objectives of the Education Roadmap. Moreover, the MoE is implementing the Second Phase of General Education Quality Improvement Program for Equity (GEQIP-E), which aims to improve learning conditions in primary and secondary schools and strengthen institutions at different levels of educational administration. The improvements of PSR, PTxR and qualification of teachers directly contributes to improving the quality of education.

207. The MoE has a performance-based award mechanism to provide incentives to highly performing schools in all regions. The program has allocated 40,000 ETB for each award. Among the existing primary and secondary schools including pre-primary education, 10% were awarded to encourage quality education.

Addressing school dropping out

208. At the national level, the female and male students in Grades 1–8 dropout rate (DR) in 2018/19 is 17.3% and 17.7% respectively. The dropout rates have increased over the 2017/18 period but remain much lower than ten years ago. SNNPR has the highest DR followed by Somali, Oromia and Afar. DR is highest in grade 1, at 25%. This means that many children join in grade 1 and then leave the education system within the next year. Dropout in the rest of the grades is around 10% (Annex: Chart 10& 11).

209. The survival rate to Grade 5 /passing to the second cycle/ in2018/19 for females and males were 42 and 41% respectively. The trend in survival rate to Grade 5 shows a very slight increase in the last three years since 2016/17. Moreover, the completion rate for Grade 5 has increased from 76.1% in 2012/13 to 88.6% in 2018/19 and the completion rate for Grade 8 has increased from 52.5% to 62.1% (Annex: Chart 10–12).

210. In order to address the challenges related to distance between residence and schools, the GoE developed guidelines on the provision of hostel services for female students. The MoE has a directive on sexual harassment in schools which applies to secondary and tertiary education institutions, also contributing to reducing school drop-out as a result of sexual harassment and violence.

211. The GoE has adopted a Menstrual Hygiene Management (MHM) Policy and Implementation Guideline (2016) to enable girls and women lead dignified, productive and healthy lives by creating awareness, improving the provision of sanitary materials and other facilities, and foster cross-sectoral collaboration to create a system of MHM. Through the implementation of MHM policy, encouraging results have been recorded, including decreasing adolescent girls' school drop-out associated with menstrual hygiene.

212. WDA has been working to identify children out of school and support families to send their children to school. Moe in collaboration with local CSOs has been supporting families in all regions to engage in income generating activities to support their children for them to continue their education.

Special needs and inclusive education

213. Nationally, in 2018/19, the GER of children with disabilities for pre-primary was 1.3% (1.5 male, 1.2 female) of the total population of children with special needs, which is more than double compared to 2017/18 (0.6%). The national figure of 1.3% shows that thousands of children with disabilities are not yet attending pre-primary education. The total number of students with special education needs who are attending their primary school in 2017/18 is 316,271, showing an increase of 14 percentage points from 2016/17 (Annex: Table 23).

214. The GER of students with SNE in primary schools increased from 8% in 2015/16 to 11.01% in 2018/19. (MOE, ESAA, 2015/16 & 2017/2018). However, this is a much lower rate from the 61% target that was set in ESDP V. At the secondary level, a total of 37,468 students (42.5% females) with SNE were attending secondary school in 2018/19 (GER 2.84% of the total children with special need), showing an increment from 1.5% (1.7% male, 1.3% female) in 2015/16 and further showing a 4.4% increment from 2017/18. However, this is also a much lower rate than the 37% target stated in ESDP V (Annex: Table 24).

215. Currently, there are 628 inclusive education resource centers (IERC) established in the country to facilitate the education of children with special needs. In 2013/14 the total number of IERCs were 113, and Afar, Somali, Gambella regions did not have any IERCs. However, IERCs establishment steadily increased over the years and is now available in all regions (SNE Directorate, February 2020).

Education for refugee children

216. The customization of EMIS for refugee education, with the collaboration of ARRA, MoE and UNHCR began in 2016, and resulted in the first publication that comprises refugee data in the Annual Education Abstract for 2016/2017 and following in 2018/19. Further, the MoE has been supporting the refugee education program through administration of placement examination and assessment of core learning competency for those without education certificates. The Regional Education Bureaus in refugee-hosting regions have extended key quality enhancing initiatives to refugee schools including national standard assessments, supportive inspection and supervision, and capacity development of refugee schools to develop school improvement plans. CTEs have included refugee teachers into accelerated training and upgrading programs.

217. As of June 2019, the number of school-age refugee children in Ethiopia was 383,653. Among them, 208,525 (54.3%) were enrolled in 169 schools in or around 27 refugee camps. (FDRE, MoE, ESAA (2018/19) Currently, in 80 pre-primary schools, 67,870 children are enrolled and in 63 primary schools 139,400 children are attending their education. Further, 13,923 children are attending their secondary education in 12 secondary schools. (ARRA, September 2020&Annex: Table 30) Despite increasing the share of students enrolled, a significant number of school-age children are still out of school; classrooms and teachers as well as education materials are in short supply, and the majority of refugee schools still do not fulfil the minimum standards of a safe learning environment.

Impact of COVID-19 on education

218. Following the announcement of COVID-19 as a Global Pandemic by WHO on March 16, 2020, the GoE ordered the closure of all schools and subsequent cancellation of national exams to ensure the safety and protection of all students and the school community.

219. Education is one of the major sectors highly affected by the spread of COVID-19 in Ethiopia. Over 26 million students from more than 47,000 schools have been out of school. The closure of schools has also denied children from accessing school feeding programs, recreational programmes, co-curricular activities, and pedagogical support by teachers (MoE, September 2020).

220. During the COVID-19 closure, MoE was striving to sustain critical support to the functionalities of schools, and students and parents have been encouraged to utilize media lesson broadcasts through radio and TV, including MoE's TV education. Further, regions were supported and encouraged to use regional FM stations, and regional TV education platforms. Generally, there were efforts to promote volunteerism of teachers and students' in awareness raising, psychological support and continuation of learning through social and mainstream media. Currently, the GoE is preparing a safe school operation guideline and preparing to reopen schools after November 2020.

B. Leisure, recreation and cultural activities (art. 31)

221. The National Child Policy clearly stipulates children's right to play, leisure, recreation, cultural and artistic activities as a major policy direction. The draft ECDE policy (2019) also promotes children's right to leisure and cultural activities. The Child Friendly Cities Guideline (2019) aims to create a conducive environment for children to learn, play and entertain themselves with sports, artistic and cultural activities, among other activities. The guideline further promotes the establishment of a conducive space for children with special needs and vulnerable children.

222. Different activities and festivals such as celebration of culture day, Ethiopian nations and nationalities day, and mass sport activities have been organized where children were active participants. Child personality building and recreational centers manual was developed to establish child centers to create a space for all children in selected cities in the country.

223. The Addis Ababa City Administration has been allocating budget to establish public parks with playgrounds for children. Moreover, playgrounds for children in government led housing construction (condominium) especially in Addis Ababa are being constructed. Children play, recreational and cultural center has also been established in the Unity Park, at the National Palace, which shows the GoE's commitment and priority to ensuring respect for children's rights and interests in Ethiopia.

X. Special protection measures (arts. 22, 30, 32–33, 35–36, 37 (b)–(d), 38, 39 and 40)

A. Children outside their country of origin seeking refugee protection children seeking asylum and internally displaced children and children affected by migration (art. 22)

224. Following the adoption of the New York Declaration for Refugees and Migrants in 2016, Ethiopia co-hosted a leader's summit where it made nine pledges to improve the lives of refugees. The Comprehensive Refugee Response Framework (CRRF) was officially launched in Ethiopia in November 2017.

225. Ethiopia has made progress in implementing the CRRF. First, civil registration of refugees, including birth, marriage, divorce and death, started in October 2017 in accordance with Vital Event Proclamation No 1049/2017 on the Amendment of the Registration of Vital Events and National Identity Card. From 2017/18–2018/19, in eight refugee birth registration centers, a total of 10,379 births (36% of the plan) were registered. (Annex: Table 27). Secondly, the Biometric MIS, a countrywide refugee registration infrastructure, was initiated in 2017. The system records information on refugees' education and professional skills as well as profiles of their family members. Both civil registration and the new biometric system will enable refugees to access CRRF opportunities. Thirdly, the Government has been working towards a mechanism to allow refugees to access work.

226. Ethiopia is host to the largest refugee population in Africa, the majority of whom come from South Sudan, Somalia and Eritrea. As of 31 August 2020, Ethiopia accommodates more than 945,000 refugees and asylum seekers mostly from neighbouring counties of South Sudan and Eritrea. (ARRA, September 2020). Further, there were about 471,378 refugee children, among whom 41,159 are unaccompanied and separated refugee children. (ARRA, September 2020) In January 2019, Ethiopia adopted a new Refugee Proclamation (Refugees Proclamation No. 1110/2019) which allows refugees to obtain work permits and freely choose their livelihood, access to primary education, health care facilities, obtain driver's licenses, legally register life events such as births and marriages and access national financial services such as banking. The new law has been recognized as one of the most progressive in Africa.

227. The rights provided under the Refugee Proclamation No. 1110/2019 ensure refugee or asylum-seeking children's rights to survival and development. The New Refugee Proclamation specifically stipulates that primary consideration should be given to his/her best

interest when dealing with a child's cases. The new law allows for family unity by allowing a family member of an asylum seeker to enter the country and enjoy all the rights and privileges provided under the law. Unaccompanied or separated children are allowed to submit asylum application by themselves or through a guardian. The new law further guarantees the enjoyment of all rights in relevant laws for refugee and asylum-seeking children. Further, the law extends explicit protection of child refugees from abuse, neglect, exploitation and trafficking.

228. There are child rights committees in all refugee camps to promote children's rights and protection. Awareness raising trainings on refugee rights and child rights have been regularly delivered to refugees, child refugees and camp officers and law enforcement officers.

B. Children belonging to minorities and an indigenous group (art. 30)

229. The GoE has been giving special support to emerging regions to improve social services particularly in education and health. The revised Pastoralist Education Strategy (2019) and the Strategy for Optimization of Health Extension Programs in Pastoralist Areas (2018), promote access to education and health services to children in emerging and pastoralist regions to ensure that all children receive social services and enjoy their full spectrum of rights without discrimination (Annex: Table 1&2).

C. Children in street situations

230. According to a study commissioned by MoLSA in 2017/18 targeting 11 cities across the country, about 88,690 persons in street situations were identified. Among these, 50,820 were found in Addis Ababa. Further, in major cities across the country, identification and registration of children in street situations have been conducted since 2014/15 with the view to provide appropriate services and to reunite them with their families. For instance, in 2016/17, in four major towns in Oromia region (Adama, Shashemene, Nekemt and Jimma), family tracing and reunification, and other appropriate services have been rendered to 826 children in street situations (813 boys, 13 girls), among them 614 children in street situations were below 15 years of age. Similarly, in SNNPR, between 2015/16–2017/18, 3,858 children in street situations (3760 boys and 98 girls) were identified, and 2,611 of them (19 girls) were reunited with their families. Further, in 2018/19, in the first six months of implementation, 667 children in street situations (19 girls) were reunited with their families (EIO, Inspection Report, February 2019).

231. In 2018/19, more than 4,495 children in street situation were reintegrated and supported to continue their education. Further, in 2018, special educational support was provided to 38, 476 children in street situations. (MoYCY 2018/19) In 2019, 966 children including adults on street situation took vocational trainings and will be integrated into the community in Addis Ababa. The Addis Ababa City Municipality initiated a project to provide holistic support to all children and adults in street situations in Addis Ababa by mobilizing the community and private sector. Between 2014/15–2018/19, the MoWCY reunited and reintegrated 57,833 vulnerable children, among which children in street situations were the majority (MoWCY (2018/19)).

232. There have been encouraging efforts to improve the social services provided to children in street situations by integrating it with the PSNP. The provision of social services and materials to children in street situations by the community through CCCs has also proven to be successful. A national taskforce comprised of the MoLSA, the MoWCY, and CSOs has been established at federal and regional levels to mobilize resources for reintegration of children in street situations. The Social Protection Trust Fund in Addis Ababa was established to mobilize resources and so far, 200 million ETB has been mobilized to benefit 25,000 children in street situations (MOLSA 2018/19).

233. The GoE has had limitations to provide comprehensive social and psychological services to children in street situations. To fill such gaps, the GoE has been collaborating with UNICEF to improve coordination efforts, community practices and to enhance

implementation capabilities. Moreover, CSOs such as Center of Concern, Family Health International, Mother Teresa, and Elshaday have been rendering social services to children in street situations in different parts of the country. Limitations of comprehensive and disaggregated data on children in street situations, lack of permanent address or location, unwillingness to provide correct personal information and limited availability and accessibility of facilities have been major challenges to provide appropriate services to children in street situations (EIO, Inspection Report, February 2019).

D. Children in situation of exploitation

234. According to the 2015 National Child Labour Survey, 24.2% of children aged 5–17 years (29.1% among males, 18.9% among females) are engaged in child labour. Further, 71% of children (79.3% girls, 63.5% boys) aged 5–17 years were engaged in household chores. One out of every two 5-17-year-olds (51%) engage in economic activities. Boys (67.8%) are more engaged in economic activities than girls (46.5%).

235. Different measures are being taken to prevent children from labour exploitation. The Labour Law Proclamation No. 1156/2019 has increased the minimum age of employment from 14 to 15 year to align it with international standards. The National Action Plan on the Worst Child Labour Prevention and Protection (2016–2020) is being implemented to prevent economic exploitation and child labour. MoLSA also adopted the National Action Plan on Child Labour (2011–2017) to prevent child labour. It also formulated a directive to implement the labour proclamation to protect the rights and welfare of the child.

236. The MoLSA's inspection manual clearly stipulates indicators and checklists for identifying child labour. For example, in 2019, inspection was undertaken in 45,104 private sectors and 4,394 organizations were given warning letters and legal action was taken on five organizations. Various organizations and worker's association have started including child labour issues in their internal policies and manuals. There is a separate department that is responsible for inspecting working conditions in the private sector. During the reporting period, 116 inspection experts and media experts were trained on child labour and related issues. Further, 77,596 people drawn from the private sector, government officers and community members were trained on child labour issues.

237. MoLSA is engaged in extensive sensitization of the public on child labour and trafficking. It works with grassroot associations and utilizes traditional gatherings to advocate for the education of children and prevention of child labour. Awareness raising programs were conducted through the media and local FM radios and a documentary on the negative impacts of child labour was produced and aired on national TV. Information and education materials were disseminated to 686 private sector institutions on child labour issues. More than 4,641 children who were exposed to child labour have received financial and material support to continue their education.

E. Sale, trafficking and abduction (art 35)

238. The GoE is committed to combat trafficking in persons (TIP). Measures that have been taken include enactment of a new law on human trafficking and smuggling of migrants, prosecution of perpetrators, setting out the conditions for legal migration, the conclusion of law enforcement cooperation agreements with neighbouring countries such as Djibouti and Sudan, continuous awareness creation efforts using several methods of communication, victim rehabilitation, and job creation which addresses root causes.

239. Ethiopia acceded to the Optional Protocol on Sale of Children and Child Pornography on 25 March 2014. Most importantly, the main content of the protocol is included in the National Child Policy. Recently, the Proclamation to Provide for the Prevention and Suppression of Trafficking in Person and Smuggling of Migrants No. 1178/2020 was adopted, repealing Proclamation No.909/2015. The new anti-trafficking law provides a comprehensive legal framework and a clear definition for the elements of exploitation including child labour, and trafficking in children.

240. Since the promulgation of the Proclamation No. 909/2015, 2,686 persons have been indicted at both federal and regional levels out of which 1178 have so far been convicted.

241. A high-level national committee consisting of OFAG, MoFA, Ministry of Peace (MoP), MoLSA, MoE, MoWCY, and Regional States was established to combat TIP. The Deputy Prime Minister leads the national committee as well as advises the government on TIP. At the technical level, a task force on anti-human trafficking and smuggling of migrants was established for prevention, control, and rehabilitation of victims, and is led by the Attorney General.

242. The Directive for victim's referral/reintegration was adopted in September 2018. The National Anti-Human Trafficking Taskforce in collaboration with IOM has also developed a National Referral Mechanism (NRM) and SOPs, which are instrumental to address the existing scattered approach in assisting Victims of Trafficking (VoTs). Although limited, there are encouraging efforts to establish school anti-human trafficking clubs in SNNPR, Dire Dawa City Administration and Harari regions. Specialized and need-based services for child victims of trafficking has been reported as a major challenge to extend adequate protection for children (Mid-Term Evaluation of the National Anti-Trafficking in Persons and Smuggling of Migrants Taskforce National Plan of Action, December 2018).

243. The MOLSA formulated a National Plan of Action for Elimination of Worst Forms of Child Labour (2016–2020). The Action Plan has been translated into local languages and disseminated to all regions. During the reporting period, MOLSA has undertaken awareness raising campaigns to combat human trafficking and worst forms of child labour. Moreover, 325 Community Conversation Centers have been set up in four regional states. More than 18 million people across the country have engaged in community conversations on human trafficking, smuggling and irregular migration and exploitation. Furthermore, the Anti-Human Trafficking Taskforce Secretariat at OFAG also works to raise public awareness on the dangers of human trafficking. Since its establishment in 2016, the Secretariat has provided awareness raising trainings to 41,635 persons by using different medium.

F. The administration of juvenile justice (art 40)

244. The Criminal Code gives recognition to the special situation of children in conflict with the law. While detention is used as a last resort and for the shortest period, the law puts stronger emphasis on separate detention facilities for such children. Moreover, a special section of the Criminal Procedure Code provides rules of procedure that are exclusively designed to deal with juvenile offenders.

245. Ethiopia has taken organizational measures to facilitate the effective implementation of the laws on children in conflict with the law. Special investigation units, prosecutors and child friendly benches have been established at different levels. In Addis Ababa, a separate child protection structure was established, providing psychological and legal counselling to children in conflict with the law and services related to their rehabilitation and reintegration. Under OFAG there is a special investigation unit consisting of the police, prosecutor, and social workers who are responsible for providing psychosocial support to young offenders. These special structures work towards giving primary consideration to the protection of child rights and have been advancing prompt and effective judicial procedure which minimizes arbitrary and prolonged detention of children. A committee composed of OFAG, MoWCY, FSCCJPO, United Nations Office on Drugs and Crime (UNODC), Action Aid and UNICEF was established to develop a national child justice strategy. The drafting of the strategy is underway, and it is expected to improve the child justice framework from investigation to rehabilitation by introducing new child-friendly mechanisms.

246. EHRC also works with all branches of the government to raise awareness on human rights. In 2017/18, EHRC provided human right awareness trainings and workshops to more than 32,088 members of police, prison officers, National Defense Forces, community elders, school children, women, persons with disabilities, and others. Similarly, the Federal Police Commission has also provided trainings on human rights to 6,500 recruits and police officers in 2017/18.

247. EHRC monitored the justice sector in light of frameworks relevant to access to child friendly justice system in June 2020 on a number of federal and regional courts. The rapid assessment identified concerns including child friendly benches were not fully functional for some time during the COVID-19 pandemic including not being able to hear witnesses; CCTV systems were found dysfunctional and lacked the services of social workers due to lack of resources to cover their salary; the lack of full-fledged services at one-stop centers which denies children timely response, exposes them to the risk of secondary victimization and increased chance of losing evidence.

Children deprived of their liberty

248. Currently, federal and regional correctional centers have a separate detention facility for juvenile offenders who are above the age of 15 years and rehabilitation center for children in conflict with the law aged between 9–15 years. The child rehabilitation centers also give services for drug addiction based on the free and full consent of the beneficiaries. Currently, there are four rehabilitation centers for children in conflict with the law across the country. Moreover, a large child rehabilitation center is being constructed in Addis Ababa that will provide a comprehensive program such as conventional education, skills training, sports, and psychosocial support.

249. Model community-based correction centers (CBCCs) have been established and are providing community-based child behavioural correction services for young offenders in their community settings. This helps parents and other community members shape children and adolescents to develop positive behaviours in a dignified and humane manner. The CBCCs manual is being developed by MoWCY to provide community correction and counselling service. Model Four Correction Centers have been established in Dire Dawa and there is a plan to expand this program to other regions and city administrations.

250. Between 2016–2020, EHRC conducted human rights monitoring visits to 160 detention centers, where it assessed the situation of child offenders in rehabilitation centers and children staying with their imprisoned mothers. During such monitoring period, there were 785 juvenile delinquents under 18 years of age. The visits revealed that in some detention centers child offenders are accommodated in separate rooms but in most cases child offenders are kept together with adults and this would have a negative impact on the correctional and educational process. In those places where child offenders have separate rooms, they still spend their daytime with adults. The EHRC's report to the relevant authorities therefore recommended that the issue be addressed (Annex: Table 9).

Impact of COVID-19 on the justice sector

251. Although the justice sector including OFAG and federal courts were partly closed following the COVID-19 emergency response, considering the urgent nature of children's cases, federal courts have been entertaining cases such as recovery of maintenance, sexual violence, or any case where children were a party. Similarly, the OFAG has prepared COVID-19 emergency response and action plan to provide accessible and adaptable services to clients and has been working to ensure the provision of PPE for all persons seeking legal services (OFAG, Assessment Report, May 2020).

252. As a precautionary measure and to curb the spreading of COVID-19 among young offenders, FSCCJPO and the federal first instance court in collaboration with UNICEF, reviewed the case of juvenile offenders in remand homes and 50 children were released and reintegrated with their families across all regions. Further, during the partial closure of courts, the FSCCJPO has continued the provision of free legal aid services to children through its children legal protection centers. Since 19 March 2020, in four children legal protection centers in Addis Ababa a total of 494 children (257 male, 237 female) have received free legal service (FSCCJPO, September 2020).

G. Children in armed conflict (art. 38)

253. Ethiopia has ratified the Optional Protocol on the Involvement of Children in Armed Conflict in 2014. This reinforced the existing laws that set 18 years as the minimum age of

recruitment to the armed forces. The armed forces have internal regulations that have clear criteria for recruitment in accordance with international standards. The recruitment processes in the National Defense Force, Federal Police, Regional and City Police forces are undertaken with a high sense of responsibility in order to avoid the recruitment of children even if they volunteer. Although the rate of registration is still low, the establishment of birth registration system in the country, and improvement of the society's awareness on the need to register birth contributes to ensuring that children will not be recruited into the armed force as well as the police forces by providing accurate age information.

254. Since 2016, the Ministry of National Defense, in collaboration with the International Committee of Red Cross (ICRC) has been providing a series of trainings to military court judges, prosecutors, public defence counsels and military police as well as members of the defence force on international humanitarian and human rights laws. Similarly, the Federal Police Commission has also provided trainings on human rights to 6,500 recruits and police officers in 2017/18.
