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Chairman: Mr. Anshor (Vice-Chairman)..... (Indonesia)

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05-55560 (E)

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In the absence of Mr. Butagira (Uganda), Mr. Anshor (Indonesia), Vice-Chairman, took the Chair.

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

Agenda item 107: International drug control
(continued) (A/C.3/60/L.9)

Draft resolution A/C.3/60/L.9: international cooperation against the world drug problem

1. **Ms. Feller** (Mexico) introduced the draft resolution, on behalf of the original sponsors and Afghanistan, Azerbaijan, Chile, Ecuador, Israel, Japan, Panama, Peru, the Philippines, Saint Vincent and the Grenadines, Tajikistan and Turkey. As in previous years, the fact that the sponsors came from various regions of the world demonstrated the international community's ongoing support. In line with efforts to revitalize the Organization, the current year's draft had been simplified and streamlined in an effort to update and consolidate it. Following discussions at the forty-eighth session of the Commission on Narcotic Drugs, new paragraphs had been added on the importance of strengthening communities, fighting HIV/AIDS in the context of counter-narcotics programmes, collecting reliable data and maintaining a gender perspective in programmes that targeted drug users. Delegations were on the verge of reaching agreement on the final text, which she was confident would be adopted by consensus.

2. **Ms. Sharma** (Assistant Secretary of the Committee) announced that Andorra, the Democratic Republic of the Congo, Djibouti, Indonesia, Iraq, Kazakhstan, the Libyan Arab Jamahiriya, Mali and Myanmar had also joined in sponsoring the draft resolution.

Agenda item 67: Promotion and protection of the rights of children (continued) (A/60/175 and Corr.1, 207, 282 and 335)

3. **Mrs. Asmady** (Indonesia) said that her Government fully shared the Secretary-General's view that most of the goals in the final document of the special session, entitled "A world fit for children", would be achieved only through a major intensification of action for disadvantaged children and families across the world (A/60/207, para. 89). In that regard, Indonesia was constantly making progress in implementing its child-related policies thanks to better

resource allocation and a strong commitment from its political leaders. The President had been exemplary in that regard, having emphasized on various occasions the critical role of human capital in national development.

4. Initiatives by her Government included the national programme for Indonesian children, which had been particularly successful in providing quality education and protecting children from abuse, exploitation and violence; the programme entitled "Creating Learning Communities for Children", introduced in close cooperation with the United Nations Children's Fund (UNICEF) and the United Nations Educational, Scientific and Cultural Organization (UNESCO); "Education for All" initiatives to track school attendance and strengthen mobile libraries; and a national action plan on combating trafficking in persons, especially women and children, and eliminating the commercial sexual exploitation of children. The latter plan had led to an increase in the number of policewomen investigating cases of trafficking in women and children and strengthened legal protection for trafficking victims, including mutual legal assistance.

5. Her Government was also doing more to ensure that the health needs of Indonesian children were met in a timely fashion, through its programmes on maternal and newborn mortality, micronutrient deficiency, child malnutrition and vaccine-preventable diseases, particularly polio and measles. Together with UNICEF and the World Health Organization (WHO), it had also implemented a series of national immunization weeks, while at the grass-roots level, it was revitalizing 15,000 village health posts across nine provinces. Moreover, on the occasion of National Children's Day, the President had drawn attention to the alarming impact of drugs and pornography on children's growth and development, calling on parents, schools and communities to work with the authorities concerned to protect children from such abuse.

6. Lastly, her Government had responded quickly to the needs of children affected by the December 2004 tsunami and prohibited children from leaving Aceh in order to protect them from trafficking and other forms of exploitation and because it was in their best interests to be with their families and native community. The recent signing of a final agreement in Helsinki would ensure the full implementation of "A world fit for children" for all Indonesian children.

7. **Mrs. Pi** (Uruguay) said that her delegation was pleased at the large number of countries that had ratified the Convention on the Rights of the Child and appealed to those States that had not yet done so to become parties to the Convention and its Optional Protocols. Respect for human rights involved relations between people, between people and institutions, and between people, institutions and the State. Consequently, the practical task of protecting human rights was first and foremost a national task and the prime responsibility of the State, even though it required the help of national organizations and the international community to ensure compliance with existing legislation and full respect for those rights.

8. Uruguay believed that every child and adolescent enjoyed rights that were inherent in the human person, such as the right to be heard and to obtain answers when decisions were taken that affected his or her life. The State had undertaken to protect the rights of all children and adolescents under its jurisdiction and to afford them special protection against, *inter alia*, abandonment, sexual abuse or exploitation, discrimination, harassment, segregation, economic exploitation and cruel, inhuman or degrading treatment. Even though poverty indicators showed that the economic crisis in the country from 2002 onwards had severely affected children, Uruguay continued to maintain a certain level regarding the enjoyment of certain important rights, for example the provision of universal primary education from the age of four.

9. The promotion of human rights called for awareness-raising and education, as the protection of such rights depended on people being aware of their rights and of the mechanisms that existed to ensure respect for them. At the same time, education must be considered a fundamental human right and as such must be not only compulsory, but also free, so that it could be enjoyed by all sectors of the population. As the Secretary-General had stated in his report on follow-up to the special session of the General Assembly on children (A/60/207, para. 56), while problems such as armed conflict, child labour, child trafficking and HIV/AIDS created serious impediments, investing in basic education was clearly a major preventive measure against HIV/AIDS and child labour and was central to winning the fight against poverty.

10. Drawing attention to the many worrying cases of violence, exploitation, abuse and worst forms of child

labour that still existed throughout the world, the devastating impact of HIV/AIDS and the particular vulnerability of children in situations of armed conflict and natural disasters, and noting her delegation's regret that violence, abuse and cruel, inhuman and degrading treatment still persisted in communities, schools, institutions and workplaces, she welcomed the work being done by UNICEF and the International Labour Organization (ILO) to revise laws and support child-rehabilitation programmes, as well as the tireless efforts of the other United Nations bodies and of civil society.

11. The fact that children and adolescents were among those most vulnerable to poverty reinforced the poverty cycle, as it affected human and social capital and the well-being of future generations. A lack of proper nutrition during the first few years of life affected children's intellectual development and ability to learn. It was therefore important to help poor families during pregnancy and the early years of life and to intensify efforts to provide universal early education in the poorest sectors and from an increasingly early age. Noting the high incidence of pregnancy, dropout, unemployment and demotivation among adolescents and the fact that children from poor households faced a high risk of repetition and dropout, she said that overcoming poverty among children and adolescents required the entire household to achieve that goal. Post-crisis policies to overcome poverty must therefore target the current generation of children, adolescents and young adults, so that an impact would be made on children born in the next decade.

12. As agreed by the General Assembly in paragraph 17 of its resolution 59/261 on the rights of the child, the international community should cooperate, support and participate in global efforts to eradicate poverty, in order to ensure that the internationally agreed development goals, including those set out in the Millennium Declaration, were realized, as investments in children and the realization of their rights were among the most effective ways to eradicate poverty.

13. Uruguay was convinced of the importance of implementing the rights of the child, in particular those enshrined in the Convention on the Rights of the Child and its Optional Protocols and other international human rights instruments, in particular the ILO Minimum Age Convention (No. 138) and the ILO Worst Forms of Child Labour Convention (No. 182).

14. **Mr. Abusif** (Libyan Arab Jamahiriya) highlighted the gross violations of the rights of the child that continued to occur, and emphasized that reuniting child refugees with their families was key to preventing the forcible conscription of child soldiers in areas of armed conflict. The international community's efforts had fallen short of its commitments in recent years, and grave violations of the rights of the child, including violence, prostitution and pornography, continued. Child labour remained a widespread phenomenon and many countries were not taking sufficient measures in that regard, notwithstanding that most countries had ratified ILO Convention No. 182. In Palestine, children were harassed by Israeli soldiers, and were deprived of adequate housing, regular schooling and sufficient health care, in violation of international instruments on the rights of the child. In Africa, children faced armed conflict, poverty, malnutrition, rape and AIDS.

15. The Libyan Arab Jamahiriya was a signatory to all instruments relating to the rights of the child. It had established maternal- and infant-care centres, while a Higher Committee for Childhood oversaw all matters related to the child, and was responsible for policies and programmes to ensure the well-being and health of children.

16. **Ms. Enkhsetseg** (Mongolia) said that her Government was encouraged that, three years after the special session on children, progress on its follow-up revealed a more promising picture, with many countries having adopted plans of action on children and taken action to implement the goals in the final document of the special session. However, her Government fully concurred with the Secretary-General's report (A/60/207) that current efforts needed to be reinforced in order to achieve those goals on time.

17. Immediately following the special session, her Government had adopted a national programme to promote and protect children. It reflected all aspects of children's development and protection and aimed to create an enabling environment to promote their self-development, education and health care. In addition, Mongolia had become the second country in the region to adopt a policy on integrated early-childhood development. The policy, which aimed not only to support children's rights but also to boost investment in human and socio-economic development, would enable the Government to address early-childhood issues in a

more holistic manner and make social services for children more effective.

18. The State policy on public health stressed the importance of improving client-oriented services, particularly access to reproductive health care for vulnerable groups and in remote regions, and of strengthening partnerships in providing health-care services in remote areas. A new system of family clinics provided primary health care close to the client. One of the main objectives of the Government's current plan of action was to further decrease infant and maternal mortality. In the past decade, infant and maternal mortality had been halved, while child-vaccination rates had almost doubled. Since 2002, in cooperation with UNICEF, a programme on basic social services had been implemented in rural areas to promote child and maternal health and nutrition and child development. As a result, access to basic services for children and mothers had improved considerably.

19. The national programme for improving disabled people's livelihood and certain laws and regulations were designed to create a favourable environment to improve access to basic services for children with disabilities. Under a programme on education for children with special needs, a unit had been established to develop a national policy and facilitate its implementation. Although considerable progress had been achieved in restructuring the public education system, equitable access to quality education still remained a challenge. In that regard, her Government was implementing programmes on education for all and informal education. A series of training courses for teachers had been organized and alternative programmes on basic education developed.

20. Recalling that Mongolia had recently submitted its combined second and third periodic reports to the Committee on the Rights of the Child, she said that her Government was keen to follow up on the Committee's recommendations, which were now being widely disseminated at local and national level. Mongolia was also taking action to implement the other child conventions to which it had acceded through gradual harmonization of its legislation. As a sign of the Government's commitment to protecting the rights of the child, one of the commissioners on the national human rights commission had been given responsibility for overseeing the rights of the child. A law against domestic violence had been adopted in 2004 and several thematic years in support of the child,

the family and youth had also been organized. Mongolia was firmly committed to sparing no effort in making a “world fit for children”.

21. **Mr. Win Mra** (Myanmar) said that Myanmar had joined over 100 other countries in making the outcome document of the United Nations special session on children operational by adopting a national programme of action for the promotion, protection and development of children. It had also taken part in regional initiatives, including those of the Association of Southeast Asian Nations and the East Asia and Pacific region.

22. Myanmar had tackled the serious problem of mortality rates for children under 5 through programmes for safe motherhood, safe delivery and early care for newborns, women’s and children’s health, greater immunization coverage, promotion of oral hydration therapy and improved nutrition. To avoid iodine deficiency — a common cause of mental retardation in children — Myanmar had greatly increased iodized-salt consumption to cover most households.

23. By implementing “Education for All” initiatives, Myanmar was aiming to reach the targets for primary education in the outcome document of the special session on children and the Millennium Development Goals. The restoration of peace and stability in border areas after a period of insurgency had enabled the number of schools to be increased.

24. In order to prevent children from falling victim to violence and exploitation, the Department for Social Welfare, as the focal point for children’s issues, trained social-welfare officers, probation officers and caregivers, and would begin training police officers, social workers, lawyers, judges and prison officers. It also used mobile teams to conduct training workshops on child protection throughout the country.

25. Myanmar had acceded to the Convention on the Rights of the Child in 1991 and had subsequently promulgated a law on children. Although the Secretary-General’s 2005 annual report on children and armed conflict (A/59/695) had included Myanmar among the situations of concern, Myanmar was clearly not a country in armed conflict, with 17 major insurgent groups having turned to active cooperation with the Government to develop their regions. Nobody under 18 could be recruited into the army in Myanmar, which had enacted legislation, established a high-level

committee and drawn up a plan of action to prevent and monitor recruitment of child soldiers. In a spirit of transparency, the Government was cooperating closely on that matter with the representatives of the United Nations Development Programme (UNDP) and UNICEF.

26. It was lack of resources, and not lack of political will, that prevented developing countries from implementing the goals of the United Nations special session on children. Children in the developing world were born with a burden of debt which must be reduced if they were to reach their full potential.

27. **Ms. Fatouma** (Niger) said that the Niger had resolutely pursued the objectives of the World Summit for Children through its programmes for the survival, protection and development of children and for nutrition, poverty reduction and combating HIV/AIDS, and also through its policies for social development, health and education. In the interests of improving children’s economic and social situation, the Niger had also ratified and implemented international treaties including the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child and ILO Convention No. 182 on the Worst Forms of Child Labour.

28. Despite its depressed economic situation and poor food security, the Niger had never lacked political commitment to fulfil the aims of the World Summit for Children. In partnership with donors and its subregional neighbours, it had focused on children suffering from malnutrition, street children, those who had undergone genital mutilation, and those with HIV/AIDS. It had had the Convention on the Rights of the Child translated into the national languages, harmonized legislation and set up children’s courts, provided centres to treat childhood diseases and organized vaccination campaigns.

29. However, serious obstacles such as rapid population growth and social, cultural and resource problems stood in the way of efforts to improve the situation of children. Intensified action was needed in order to mobilize resources for the implementation of the poverty-reduction strategy, coordinate partners’ actions to protect children, implement the 20/20 Initiative on resource mobilization for children, strengthen children’s rights monitoring, assess how to

cater for children with special needs, identify social and cultural impediments to implementation of the Convention on the Rights of the Child, improve primary health care and encourage communities to become involved.

30. **Ms. Laohaphan** (Thailand) said that the international community was still failing the world's children, with six million dying every year from preventable diseases, 29 million remaining un-immunized, increasing numbers living with HIV/AIDS, millions deprived of primary education and millions suffering violence, and the worst forms of child labour.

31. Following broad consultation with Government agencies, intergovernmental and non-governmental organizations, civil society and children themselves, Thailand had put in place a national strategy and plan of action to implement the goals of the special session on children. Although Thailand's Constitution specified that all children should receive 12 years of free basic education, the Government was aware of the gap between theory and practice and was working to address shortcomings. However, by eliminating gender disparities in primary and secondary education, it had fulfilled Millennium Development Goal 3. Furthermore, having already reduced infant mortality, Thailand was working to reduce it to 15 per 1,000 live births by 2015. As better health care and socio-economic conditions had helped to reduce the mortality rate for children under five, Thailand was on the way to meeting Millennium Development Goal 4.

32. Thailand had introduced new laws and strategies to counter violence against children and was finalizing arrangements to become a party to the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict and to the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography. It believed that violence against children could not be addressed without addressing violence against women. In June 2005, Thailand had hosted the East Asia and Pacific regional consultation on the United Nations Study on Violence against Children, focusing on children's vulnerability in cross-border migration, including migration involving exploitation for sex and labour.

33. The statistics in the report of the Special Representative of the Secretary-General for Children

and Armed Conflict (A/60/335) served as a reminder of the number of children killed, injured, permanently disabled or forcibly displaced and of the need to reform the Organization to ensure that it improved protection of children.

34. **Ms. Bethel** (Bahamas), recalling that, at the 2005 World Summit, the Member States had reaffirmed their commitment to facilitating social and economic development, eradicating poverty, preventing environmental degradation and preserving the world for future generations, said that the Millennium Development Goals remained a critical point of departure for collective efforts to meet those commitments.

35. Conscious that its future prosperity and development depended on its children, the Bahamas believed that it must safeguard the well-being of the one third of its population which was under 18. Despite the difficulty involved in providing social and other services in its many inhabited islands, the Bahamas had invested in its children, convinced that no child should go hungry, be without a home, remain illiterate or be abused or abandoned. Every child had a right to protection and respect from the family, the community and the State. The framework for the Government's efforts was the Convention on the Rights of the Child.

36. Recognizing that no progress could be achieved without a healthy population, the Government had devoted substantial resources to providing universal access to health care on every island. Ninety per cent of children under 5 were immunized against preventable diseases and infant mortality rates had fallen dramatically in the previous decade. The single largest share of the national budget was spent on providing universal access to education up to the age of 16, with free primary and secondary schooling available without discrimination to all children. Many public schools also provided free pre-school facilities.

37. The international community had not succeeded in preventing children from suffering abuse, violence and exploitation, but the Government was determined to eradicate practices which harmed children and deprived them of their human rights. A comprehensive act was designed to cover children in need of care and protection, children in care, and children detained or brought before a court.

38. The Caribbean region was the world's second most affected by HIV/AIDS. The Government had

waged an intensive campaign through care, treatment and prevention, awareness-raising and education. It was working to protect children, by pursuing equal access to anti-retroviral drugs, particularly for HIV-positive pregnant women. Mother-to-child transmission had been reduced to under 2 per cent. While it cherished traditional extended families, it recognized that they were sometimes unable to care for those orphaned by the disease, and intervened to provide care and support when required.

39. **Mr. Tesfu** (Ethiopia) said that his Government's National Plan of Action focused on the four major goals of the final document adopted at the special session on children.

40. First, the Government planned to increase health-care coverage to two thirds; reduce maternal and child mortality by one third; improve nutrition, sanitation and water facilities; control major fatal diseases such as HIV/AIDS; and reduce infectious diseases. To do so, the Government intended to increase the annual health share of the budget to more than 10 per cent and build up an electronic health-information system.

41. Second, the Government intended to expand quality pre-primary education to 90 per cent of Ethiopian children and increase secondary-education participation rates to 20 per cent. To ensure better-trained teachers, a lower student-teacher ratio and textbooks for all students, the education share of the budget would have to be increased to 20 per cent.

42. Third, the Government had designed specific programmes to protect children from all forms of exploitation, violence and other harmful traditional practices. It also planned to provide assistance, such as food, nutrition and shelter, to children in particularly difficult circumstances. The programmes included registration of the birth of every child, awareness-creation activities as well as reintegration programmes for street children, HIV/AIDS orphans, commercial sex workers and other vulnerable children. The Government planned to promulgate legislation banning female genital mutilation, abduction and other harmful traditional practices.

43. Fourth, through action to combat HIV/AIDS, the Government planned to reduce that disease among young people by 25 per cent.

44. Encouraging overall progress had been made over the past year. The objectives of the national plan of

action had been integrated into government policies and programmes. Aware that the previous plan of action had been over-ambitious and inadequately funded, the Government had made proper organizational arrangements for the implementation of the current plan. The existing child-rights committees had been strengthened and a national programme to assist orphans and vulnerable children had been formulated. Action plans to prevent the commercial exploitation of children and the development of a civil-registration and statistics system were in the final stages of preparation.

45. **Mr. Chimphamba** (Malawi) said that investing in children, as the future of the nation, was a priority for his Government. Believing that if children were properly nurtured they would contribute to development, the Government had put in place a number of child-specific policies, covering such issues as early-childhood development, orphans and other vulnerable children, gender and HIV/AIDS. Programmes being implemented also covered health promotion, quality education, protection against exploitation and violence, as well as action to combat HIV/AIDS.

46. In an attempt to reduce Ethiopia's very high infant and child mortality, his Government had adopted an integrated-management approach to deal with major children's illnesses. A national malaria policy had been approved and efforts to reduce child mortality linked to HIV/AIDS-prevention strategies. The Government's "essential health package" incorporated preventive, educational and clinical services delivered through the community, health centres and district hospitals.

47. The Government's recently launched national plan of action for orphans and other vulnerable children was a major milestone towards improving the lives of children made vulnerable by HIV/AIDS, poverty and other social and economic factors. The Government was grateful for the invaluable support from international agencies and hoped that it would continue.

48. The provision of quality education remained a serious challenge, and the current policy addressed such issues as poor school attendance, enrolment and dropout at all levels, as well as gender balance.

49. The Government continually assessed and revised laws pertaining to international human rights instruments. It had recently reviewed legislation on

child justice, care and protection and had stepped up advocacy and awareness-raising programmes targeting children at risk.

50. **Ms. Ciroma** (Nigeria) said that, following her Government's ratification of the Convention on the Rights of the Child in 1991, the National Assembly had enacted the Child Rights Act, under which it was an offence to discriminate against a child on grounds of gender, ethnic origin, religion and physical or mental ability. The Act also set out the rights and responsibilities of the Nigerian child and provided for a child-justice administration.

51. Federal and state legislation addressed issues of child protection and the prohibition of practices inimical to the welfare of the child such as trafficking, early marriages, street hawking, child labour and the withdrawal of girls from school.

52. Recognizing that education was a key element in the promotion of children's rights, the Government had introduced a universal basic-education programme which provided for compulsory and free education for all school-age children up to junior-secondary level. The Government had also initiated a programme that provided one balanced meal to every schoolchild each day, with a view to improving attendance.

53. Concerned by the increasing practice of trafficking in persons in the region, especially children, the Government had established the National Agency for the Prohibition of Trafficking in Persons to enforce current legislation. The agency brought to justice those engaged in child trafficking and operated nationwide a rehabilitation programme for child victims. Nigeria had entered into bilateral arrangements with Benin and Italy to eliminate trafficking in persons, especially women and children. In cooperation with several other countries in the region, Nigeria was also party to a multilateral agreement on trafficking in persons.

54. The Government had consistently supported efforts to put an end to the recruitment and use of children in armed conflict. It reiterated its support for the strengthening of the Office of the Special Representative of the Secretary-General for Children and Armed Conflict, especially by means of a substantial increase in its budget.

55. HIV/AIDS and other infectious diseases had had a disastrous effect on children, and the situation was exacerbated by the increase in the number of families

living in extreme poverty in developing countries. Consequently, Nigeria had adopted a poverty-alleviation strategy that offered credit to rural women and universal vaccination against polio, measles and meningitis, as well as the distribution of insecticide-treated mosquito nets to children in rural areas. In December 2005, a nationwide measles-immunization campaign would be launched.

56. Experience in Nigeria had shown that national efforts and resources were not enough to tackle poverty and maintain a high-quality health-care programme. The Government of Nigeria called upon the international community to assist developing countries in their fight against infectious diseases and extreme poverty, for the sake of the children.

57. **Ms. Blitt** (Canada), speaking also on behalf of Australia and New Zealand, said that the countries she represented had been among the most active co-sponsors and supporters of the annual omnibus resolution on the rights of the child of the United Nations Commission on Human Rights. For the past three years, however, they had called upon the sponsors to consider new approaches to the issue, as too much time was spent going over old ground and repeating the debate on agreed standards. Insufficient time was left to address new and critical issues.

58. She called upon Member States to consider ways to promote a more meaningful debate on the rights of the child in United Nations forums. Such a review was a natural part of the current process of reform and renewal of the United Nations and was necessary in advance of the establishment of the Human Rights Council. The status of the Convention on the Rights of the Child should be examined biennially by the General Assembly, as was the case with the Convention on the Elimination of All Forms of Discrimination against Women.

59. The adoption of Security Council resolution 1612 (2005) on children affected by armed conflict was a ground-breaking call for action. It established a comprehensive monitoring and reporting mechanism, containing a threat of measures against those who continued to commit violations. She called upon Member States to: undertake an active campaign urging the Security Council to implement the resolution through the prompt creation of a working group; ensure that the United Nations Children's Fund (UNICEF), civil society and those working at the field level had sufficient funding; continue close

coordination among United Nations agencies, including with the Programme of Action on Small Arms and Light Weapons; renew the mandate of the Special Representative of the Secretary-General for Children and Armed Conflict for a three-year term; and ratify the Optional Protocol to the Convention on the involvement of children in armed conflict and the Rome Statute of the International Criminal Court.

60. The Convention on the Rights of the Child had achieved near-universal ratification. The three countries called upon those Member States which had not done so to ratify the Convention in order to make it the first human rights treaty to achieve universal ratification.

61. **Mr. Sardenberg** (Brazil) said that his country had opted for a multisectoral approach to tackle the challenges of children's hunger and poverty. Its income-transference programmes had been united under the "Bolsa Familia" umbrella programme which linked income transference to action in the fields of health, nutrition and education, with emphasis on children's welfare. The Government had also established an action plan for children and adolescents that focused on the four major areas identified at the special session on children.

62. First, it was committed to reducing child-mortality rates, with a focus on family health, immunization and vaccination, and to reducing maternal mortality by expanding and improving sexual and reproductive health services. Second, promoting quality education was also a key area of action in the national plan, which was attempting to achieve full school attendance of children from 7 to 14 by 2007. To that end, the "Bolsa Familia" programme was transferring income to the families of children and adolescents provided they were attending the public-school system. Third, to protect children against abuse, exploitation and violence, Brazil had established a network to combat sexual violence against children and adolescents that provided assistance to children in situations of sexual violence, to promote awareness campaigns against the commercial and sexual exploitation of children and to strengthen an individual complaints system.

63. Fourth, combating HIV/AIDS was one of his Government's major priorities to ensure the protection of children's rights. It had established a programme for the human rights protection of people living with HIV/AIDS which distributed male condoms free-of-charge to adolescents. In an attempt to reduce the rates of mother-to-child transmission of HIV/AIDS, an

infantile lactose formula was supplied to the mothers of HIV/AIDS-infected babies.

64. Given the lack of information available on the impact of hunger and poverty on children, he welcomed research carried out by the Innocenti Research Centre and expressed his support for the report of the independent expert for the United Nations study on violence against children (A/60/282), which would most certainly be instrumental in raising awareness of that issue with a view to the promotion and protection of children's rights.

65. **Mr. Hamidon Ali** (Malaysia) welcomed the fact that in the past year more countries had taken action to incorporate the goals and commitments agreed during the special session on children into their national policy and planning instruments, but much remained to be done and most of the goals of "A world fit for children" would be achieved only through a substantial intensification of action on behalf of disadvantaged children and families across the world.

66. Malaysia had made significant progress since the World Summit for Children. Its first national plan of action for children had addressed the issues of survival and protection, and had achieved nearly all its objectives. The second national plan of action, covering the period 2001-2020, focused on the issues of development, protection and participation of all children in anticipation of the full-fledged process of globalization. It addressed all areas of concern affecting social and developmental needs as well as the protection of the rights of children. A number of programmes had already been carried out to strengthen the role of the parent and the family. Malaysia's social policy, adopted in 2003, had also helped to consolidate the Government's commitment towards promoting and protecting the rights of children. The Department of Social Welfare, under the Ministry of Women, Family and Social Development, had been restructured and given additional resources in 2005, and a dedicated unit for children had been established.

67. Malaysia commended the invaluable support and commitment of United Nations development agencies in assisting Member States in implementing policies, plans and programmes as proposed by the Plan of Action for "A world fit for children". Many of the issues faced by children were closely related to underdevelopment, poverty and conflict, and could not be solved unless the underlying developmental issues were addressed and the countries concerned were provided with the necessary resources and assistance.

Malaysia urged the relevant United Nations agencies to continue their efforts in assisting developing countries to establish and strengthen national capacities and institutions. The international community must take concrete actions to ensure that the rights of children were respected and protected.

68. **Ms. Adjalova** (Azerbaijan), noting that the Secretary-General's report (A/60/207) had acknowledged the progress made by Central and Eastern Europe and the Commonwealth of Independent States in the follow-up to the special session on children, said that her country had been actively involved in regional discussions on children's rights. Azerbaijan was currently adopting the DevInfo database system for compiling and presenting child-related data and data on Millennium Development Goals, with the assistance of UNICEF. It was also engaged in demographic and health surveys.

69. Azerbaijan, which had ratified the Convention and its Optional Protocols and had submitted combined second and third periodic reports to the Committee, had invited its chairperson to visit the country in early 2006. Azerbaijan was making efforts to mainstream the rights of the child in school curricula; in cooperation with the Organization for Security and Co-operation in Europe (OSCE), it was planning to launch a pilot project on human rights education based on the Convention for children 10-12 years old.

70. Azerbaijan was committed to halving infant and child mortality by 2015. The issue remained a cause of concern, with rates significantly higher in rural areas and areas of temporary refugee settlement. Another issue of concern was that of children living without parental care, and the Government was employing measures to de-institutionalize and return children to their families. A State programme on de-institutionalization and alternative care was in the process of being adopted.

71. Lasting and just resolution of armed conflicts on the basis of the norms and principles of international law remained a key factor in protecting the rights of children, and all children affected by armed conflicts should be given particular attention by the international community, which should redirect its efforts from elaborating standards to ensuring their application on the ground. In Azerbaijan, the situation of children affected by armed conflict remained a challenge. The country had a large number of internal displacements, and there was a need for continued international

assistance in improving the living standards of those affected.

72. **Mr. Bwiswmuthiary** (India) said that the fact that an estimated 1 billion of the world's 2.2 billion children under the age of 15 were living in poverty, with 29,000 children under the age of 5 dying every day, largely from preventable diseases, was a stark reminder for the international community to pay more attention to the development of children everywhere, with special focus on regions where they were most vulnerable, such as sub-Saharan Africa. Very little could be achieved without addressing the underlying causes: while the need to focus attention on children's rights was paramount, there should be commensurate attention and support for their developmental needs, chiefly adequate and nutritious food, civic amenities, basic health services and access to education. The interrelated aspects of poverty, development and children's rights were self-evident. India urged specialized funds and agencies to give particular attention to those aspects in their future studies, and particularly welcomed the Secretary-General's initiatives for an in-depth study of violence against children.

73. India, which had the largest child population in the world, had ratified the Optional Protocol on the sale of children, child prostitution and child pornography, and was in the process of ratifying the Optional Protocol on the involvement of children in armed conflict. Elementary education was a fundamental right in India, and the Government had resolved to increase public spending on education to at least 6 per cent of GDP, and at least half of that amount would be spent on primary and secondary education. There was a special emphasis on girls in the universal elementary-education scheme.

74. India was committed to eliminating child labour in all its forms, and was moving in that direction in a targeted manner. It had banned the employment of children under the age of 14 in factories, mines and other hazardous environments, and had regulated the working conditions of children in permitted occupations. The strategy recognized that child labour was inextricably linked with poverty and illiteracy and could not be solved by legislation alone. A holistic and concerted effort to tackle the problem was necessary.

75. At the beginning of 2005, India had adopted a policy of action for children, extending all rights to all children up to the age of 18 by encompassing child survival and development, child protection and child participation. The Government was in the process of

establishing a national commission for children for the better promotion and protection of their rights within the larger context of upholding values to strengthen the family, society and the nation.

76. India appreciated the work of the Special Representative of the Secretary-General for Children and Armed Conflict (A/60/335), and considered it essential that measures to improve the plight of such children should be developed through a consensual approach involving Member States and the relevant United Nations bodies. It welcomed the recommendations on reaching out to children involved in armed conflict, both combatants and victims, and reintegrating them, taking into account local values and traditions.

77. **Ms. Rasheed** (Observer for Palestine) said that every year millions of children were suffering the consequences of armed conflict. Palestinian children knew all too well the grave effects of armed conflict, and in particular of foreign occupation, since Israel's 38-year occupation had robbed them of their most basic human rights, including the right to life and personal security. The impact had been not only on their immediate physical integrity and mental health but also on their future well-being, safety and development. The intensification of the occupying Power's military aggression in the past five years had resulted in a dramatic deterioration in the situation of human rights in the Occupied Palestinian Territory, including East Jerusalem, causing even more harm and suffering for Palestinian children. In the past five years more than 800 children had been killed by the Israeli occupation forces and thousands had been injured, many of them suffering permanent disabilities. The overwhelming majority had been killed while sleeping in their homes, playing in the street or sitting in their classrooms. Others had been killed while protesting against the occupation or engaging in symbolic acts of resistance, such as stone-throwing. They had also been victims of crimes and abuses by armed illegal settlers, and on innumerable occasions had been brutally beaten, terrorized and even killed by Israeli settlers, whose crimes continued to go unpunished.

78. Palestinian children continued to be denied an adequate standard of living, basic health care and even access to food and education. They had been irreparably traumatized and scarred, forced to live in constant fear, insecurity and turmoil. While the most obvious form of violence was direct physical harm, indirect violence had also had a devastating social and psychological traumatic effect, resulting in fear, anger and depression stemming from the constant sound of

bullets and tank fire, the demolition and destruction of their homes and the death of their loved ones. The ideals enshrined in "A world fit for children" could not exist under a military occupation which infringed every aspect of their lives.

79. Urgent efforts must be undertaken to bring an end to that situation and to bring hope to their lives. Her delegation expressed its concern that the report of the Special Representative for children in armed conflict had continued to ignore their suffering, and called upon his Office to make every possible effort to give the situation of Palestinian children the attention it warranted. Her delegation would be resubmitting the draft resolution adopted at the previous session entitled "The situation of and assistance to Palestinian children", which it trusted would receive overwhelming support. The reality on the ground required that the Committee should send a clear, strong message of hope to Palestinian children by adopting it by consensus.

80. **Mr. Taranda** (Belarus) said that ensuring the rights and well-being of children was the key to sustainable development, peace and security. There were grounds for optimism, but it was necessary to continue to take active collective measures to resolve the many problems that remained. Belarus had established the institutional basis for promoting and defending the rights of children, and was bringing its legislation closer into line with the Convention. Its strategy was based on the current national plan of action to improve the situation of children and protect their rights. Belarus was a party to the Optional Protocol on the sale of children, child prostitution and child pornography, and was taking the necessary steps to accede to the Optional Protocol on the involvement of children in armed conflict.

81. The most flagrant violation of children's rights was the sale of children. The United Nations and Member States should ensure more systematic coordination of efforts and exchange of experience in that regard. Belarus proposed that those efforts should be brought together in the framework of a global partnership against slavery and human trafficking in the twenty-first century. In the context of defending the rights of the child, Belarus believed that particular emphasis should be placed on minimizing the harmful effects of environmental pollution on children's health and well-being.

The meeting rose at 5.20 p.m.