III. CONCLUDING OBSERVATIONS

CERD

Australia, CERD, A/46/18 (1991) 58 at para. 245.

The situation of the Aboriginal and Torres Strait Islander people requires further affirmative action. Improvements are particularly needed in the area of education, employment, housing, land rights and health services.

• Canada, CERD, A/49/18 (1994) 47 at para. 329.

Measures should be undertaken to improve the employment and health situation of aboriginal people.

• Australia, CERD, A/49/18 (1994) 78 at paras. 545 and 548.

Paragraph 545

Aboriginals continue to suffer disadvantage in such areas as education, employment, housing and health services. It is, once again, noted with concern that, according to various social indicators, Aboriginals are more deeply affected by social problems such as alcoholism, drug abuse, delinquency and incarceration than any other social group in the country.

Paragraph 548

Measures to remedy any discrimination suffered by members of non-English-speaking minorities and Aboriginals in the fields of the administration of justice, education, employment, housing and health services should be strengthened.

• Denmark, CERD, A/51/18 (1996) 17 at paras. 71 and 76.

Paragraph 71

It is noted with concern that persons with non-Danish backgrounds face difficulties in the enjoyment of their economic and social rights, particularly in respect of access to the labour market and equality in the exercise of their rights to housing and to health.

Paragraph 76

Equal attention should be paid to the economic, social and cultural rights listed in article 5, notably the rights to work, housing, health, education, training and access to services for the general public,

including hotels, restaurants, cafés and places of entertainment such as discotheques.

• United Kingdom of Great Britain and Northern Ireland, CERD, A/51/18 (1996) 35 at para. 234.

Concern is expressed at the lack of positive efforts to bridge the cultural gaps in Northern Ireland between mainstream society and minority groups, particularly the Chinese and Irish Traveller communities. This has resulted in a disturbing reluctance by many members of these groups to make use of health and other social services.

• Brazil, CERD, A/51/18 (1996) 45 at para. 299.

Discriminatory attitudes towards the indigenous, black and mestizo populations persist within Brazilian society and are apparent at a number of levels in the political, economic and social life of the country. These discriminatory attitudes concern, *inter alia*, the right to life and security of person, political participation, access to education and employment, access to basic public services, the right to health, the right to decent housing, land ownership, land use and law enforcement.

• Iraq, CERD, A/52/18 (1997) 37 at para. 258.

It is recognized that the economic and social hardships in Iraq following the international embargo since the Gulf war and the continuing situation in the Northern Governorates, which precludes Iraq from exercising its jurisdiction, makes the full implementation of the Convention more difficult. In particular, it is noted that the economic sanctions applied against Iraq have resulted in a significant lack of basic foods and medicine, and the population, especially children and elderly people, have suffered gravely from malnutrition and lack of medical care, with fatal consequences. The withholding of basic supplies of food and medicine in itself constitutes a grave violation of human rights. This, however, does not absolve the Government of Iraq from its responsibility to implement the Convention.

• Australia, CERD, A/55/18 (2000) 17 at para. 41.

Efforts being made to increase spending on health, housing, employment and education programmes for indigenous Australians are acknowledged. Serious concern remains about the extent of the continuing discrimination faced by indigenous Australians in the enjoyment of their economic, social and cultural rights. Serious concern remains about the extent of the dramatic inequality still experienced by an indigenous population that represents only 2.1 per cent of the total population of

a highly developed industrialized State. It is recommended that the State party ensure, within the shortest time possible, that sufficient resources are allocated to eradicate these disparities.

• Rwanda, CERD, A/55/18 (2000) 31 at para. 149.

While noting that the State party's measures to relocate large groups of the population to semi-urban locations are intended to improve access to water, health and other services, reports of forced relocations and that some relocated persons do not have access to adequate housing are of concern. The State party should ensure that all relocations are made on a non-discriminatory basis and that relocated persons enjoy, without discrimination, the rights listed in article 5 of the Convention.

• Slovakia, CERD, A/55/18 (2000) 47 at para. 265.

Concern is expressed that a disproportionately large number of Roma suffer higher mortality rates, have poorer nutrition levels, and low levels of awareness of maternal and child health. Moreover, poor access to clean drinking water, adequate sanitation, and high exposure to environmental pollution in Roma settlements are matters of concern. The State party should take all necessary measures to ensure that the Roma enjoy the full right to health and health care. It is recommended that the State party prioritize and target social services for persons belonging to the most vulnerable groups.

• United Kingdom of Great Britain and Northern Ireland, CERD, A/55/18 (2000) 60 at para. 364.

The State party should intensify its efforts to ensure full enjoyment by all of the rights provided in article 5 of the Convention, without discrimination, giving particular attention to the rights to employment, education, housing and health.

ICCPR

• Venezuela, ICCPR, A/48/40 vol. I (1993) 61 at para. 310.

The duration of custody should be reviewed, and an accused person should be allowed to undergo a medical examination upon request and to have access to his lawyer from the time of arrest.

Brazil, ICCPR, A/51/40 vol. I (1996) 44 at paras. 328 and 337.

Paragraph 328

The general level of infant mortality is still high. Measures must be strengthened to reduce that level.

Paragraph 337

Immediate steps should be taken to guarantee the rights of individuals belonging to racial minorities and indigenous communities, especially with regard to their access to quality health services and education.

• Senegal, ICCPR, A/53/40 vol. I (1998) 13 at para. 64.

The recurring problems of overcrowding and poor health and sanitary conditions in many prisons, which are incompatible with article 10, paragraph 1, of the Covenant, are of concern. Therefore, measures should be taken to reduce overcrowding and to upgrade prison facilities as quickly as possible.

• Kyrgyzstan, ICCPR, A/55/40 vol. I (2000) 57 at paras. 395 and 396.

Paragraph 395

The detention of persons on mental health grounds and the apparent lack of possibility of challenging such detention is of concern.

Paragraph 396

Persons detained on mental health grounds should have prompt access to judicial review.

• Ireland, ICCPR, A/55/40 vol. I (2000) 61 at para. 448.

With respect to the Travelling community, the generally lower living standards of members of this community, their low levels of participation in national political and social life and their high levels of maternal and infant mortality are of concern.

• Argentina, ICCPR, A/56/40 vol. I (2001) 38 at para. 74(14).

On the issue of reproductive health rights, the criminalization of abortion deters medical professionals from providing this procedure without judicial order, even when they are permitted to do so by law,

inter alia when there are clear health risks for the mother or when pregnancy results from rape of mentally disabled women. Discriminatory aspects of the laws and policies in force, which result in disproportionate resort to illegal, unsafe abortions by poor and rural women, are of concern. The State party should take measures to give effect to the Reproductive Health and Responsible Procreation Act of July 2000, by which family planning counselling and contraceptives are to be provided, in order to grant women real alternatives. The laws and policies with regard to family planning should be reviewed on a regular basis. Women should be given access to family planning methods and sterilization procedures; and in cases where abortion procedures may lawfully be performed, all obstacles to obtaining them should be removed. Argentine law should be amended to permit abortions in all cases of pregnancy resulting from rape.

• Peru, ICCPR, A/56/40 vol. I (2001) 45 at para. 76(15).

The continuing practice of one year's isolation for convicted and unconvicted prisoners, in accordance with the regulations on the living conditions and progressive treatment of prisoners who are difficult to rehabilitate, those awaiting trial or sentenced for ordinary offences or for terrorism or treason, is of concern. Such isolation may be extended when the person concerned breaks a rule, however minor. The State party is urged to review this practice, which affects the physical and mental health of persons deprived of their liberty and constitutes cruel, inhuman or degrading treatment or punishment, thus hampering full compliance with articles 7 and 10 of the Covenant.

• The Netherlands, ICCPR, A/56/40 vol. I (2001) 76 at para. 82(7).

While it is acknowledged that the State party's Medical Research (Human Subjects) Act 1999 attempts to find a generally acceptable standard and to establish a permanent control system through the Central Committee for Medical Research Involving Human Subjects and the corresponding local committees accredited by the Central Committee, aspects of this law are considered to be problematic (article 7 of the Covenant). The general criterion whereby proportionality is assessed by balancing the risks of the research to the subject against the probable value of the research is of concern. This rather subjective criterion must be qualified by a limitation beyond which the risks are so great to the individual that no measure of expected benefit can outweigh them. It is also of concern that minors and other persons unable to give genuine consent may be subject to medical research under certain circumstances. The State party should reconsider its Medical Research (Human Subjects) Act in light of these concerns in order to ensure that even high potential value of scientific research is not used to justify severe risks to the subjects of research. The State party should further remove minors and other persons unable to give genuine consent from any medical experiments which do not directly benefit these individuals (non-therapeutic medical research).

ICESCR

• Mauritius, ICESCR, E/1995/22 (1994) 37 at paras. 180 and 183.

Paragraph 180

With regard to article 12, note is taken of the deplorable state of mental health care in Mauritius. Concern is also expressed over the information according to which half the maternal deaths since 1982 have been due to complications following abortion, which is prohibited by law.

Paragraph 183

It is of concern that the population of the island of Rodrigues enjoys the right to health and the right to education to a markedly lesser degree than the people on the island of Mauritius itself.

• Mali, ICESCR, E/1995/22 (1994) 64 at para. 350.

It is of concern that child, infant and maternal mortality rates in Mali are still among the highest in the world. Thus, almost one in five children under the age of five dies each year. Approximately 1,000 deliveries per 100,000 births result in the death of the mother. Diarrhoea, malaria and acute respiratory infections, aggravated by malnutrition, alone account for more than 40 per cent of deaths. Acquired immune deficiency syndrome (AIDS) is spreading rapidly. With regard to water and sanitation, the average rate of access to water country-wide is about 50 per cent, but as low as 4 per cent in the difficult terrain of the north of the country. The overall rate of access to sanitation facilities is estimated at approximately 15 per cent. The geographical distribution of health services and personnel continues to show a heavy urban bias.

• Philippines, ICESCR, E/1996/22 (1995) 30 at para. 123.

Consideration should be given to increasing the proportion of the national budget devoted to slum-upgrading programmes, to community mortgage programmes and to programmes in the field of health and agriculture designed, in particular, to benefit the poorer groups in society.

• Paraguay, ICESCR, E/1997/22 (1996) 22 at para. 78.

The inequitable distribution of health services between urban and rural areas is of concern. The very small number of medical and paramedical personnel in the country is also noted. The high rates of infant mortality and infant morbidity are also matters of concern, as are the high maternal mortality rate and the inadequacy of guidance and family-planning services.

• El Salvador, ICESCR, E/1997/22 (1996) 34 at para. 158.

The high level of poverty which is affecting most of the country's inhabitants is of deep concern. The food and nutritional situation is a major problem, reflected among other things in a high level of infant mortality, since a very high proportion of children are suffering from malnutrition. Although it is recognized that considerable efforts have been made by the authorities to improve the situation, it is emphasized that the continued existence of such a level of poverty in a country experiencing constant economic growth is unjustifiable.

• Guinea, ICESCR, E/1997/22 (1996) 39 at paras. 206 and 207.

Paragraph 206

Regarding the right to health proclaimed in article 12, the information provided by The Economist Intelligence Unit in 1994-1995, indicates that only 13 per cent of the population have access to medical services. Furthermore, only 55 per cent have access to drinking-water, a situation that is made even worse by onchocerciasis, or "river blindness". The Guinean life expectancy of 45 years is one of the lowest in Africa. Women and children are particularly affected by the precarious health situation.

Paragraph 207

The persistent practice of female genital mutilation, which has serious consequences for the physical, psychological and social health of women, is of concern. Women are also among the first victims of the HIV/AIDS virus. Concerning children, it is noted that the mortality rate remains high.

• Russian Federation, ICESCR, E/1998/22 (1997) 27 at paras. 112 and 113.

Paragraph 112

Concern is expressed over the re-emergence of tuberculosis in the State party, particularly in prisons, where the health and social conditions of detention are unacceptable.

Paragraph 113

Serious concern is expressed over the fact that in 1996 there was an eightfold increase in the rate of HIV-infection, which was largely due to increased drug use. It is also a source of concern that drug addiction is a major and growing problem among the young.

• Peru, ICESCR, E/1998/22 (1997) 33 at paras. 141 and 145.

Paragraph 141

The greatest obstacles to the fulfilment of economic, social and cultural rights are, *inter alia*, the failure to address the persistent and serious problems of poverty, and that 60 per cent of Peruvians live beneath the poverty line and do not enjoy proper health and educational facilities.

Paragraph 145

Poor women with no education have a maternal mortality rate 10 times higher than that of educated women.

• Iraq, ICESCR, E/1998/22 (1997) 50 at para. 266.

With respect to article 12 of the Covenant, it is noted with concern that, with the destruction of parts of the infrastructure in the State party, the non-availability of safe drinking water has led to widespread contaminated water and related health problems, such as waternborne and diarrhoeal diseases and cholera. Due to food shortages and the resulting restrictions on its distribution, and to the non-availability of certain medicines, medical equipment and other articles of personal hygiene, the standard of physical health of the population is declining at a rapid pace. In particular, certain diseases previously eradicated from the State party have reappeared, such as typhoid, infantile paralysis, tetanus, viral hepatitis, Giardia, German measles, kala-azar, undulant fever, haemorrhagic fever, croup, whooping cough, rickets, scabies, hydrocysts and rabies.

• Uruguay, ICESCR, E/1998/22 (1997) 67 at para. 368.

The resources devoted to public health and education are considered inadequate. Alarm is expressed at the fact that the very low wages paid to nurses has led to a low ratio of nurses to doctors (lower than 1:5), which tends to diminish the quality and accessibility of medical care available to the community.

• Luxembourg, ICESCR, E/1998/22 (1997) 69 at paras. 396 and 397.

Paragraph 396

The occurrence in the State party of adolescent health problems, due in particular to drug abuse, is of concern. Alarm is expressed about the high incidence of suicide among young people.

Paragraph 397

Concern is expressed about the absence of specialized geriatric doctors and facilities to address the problems of the large ageing population in the State party.

• Saint Vincent and The Grenadines, ICESCR, E/1998/22 (1997) 72 at para. 434.

With respect to the right to health, the high incidence of pregnancies among females of school age (between 1988 and 1991, 24 per cent of all births were to teenage mothers) is of concern. It is underlined that such pregnancies often have adverse consequences for the health of the child and of the mother and for the latter's ability to continue her studies.

• Sri Lanka, ICESCR, E/1999/22 (1998) 22 at para. 78.

It is noted that Sri Lanka not only has the second highest rate of suicide among youth in the world, but a rising incidence of drug and alcohol dependence, adolescent crime, child abuse, sexual disorders and domestic violence against women. It is deeply regretted that the Government has failed to comply with its obligation under article 10 (concerning protection of the family) and article 12 of the Covenant.

• Nigeria, ICESCR, E/1999/22 (1998) 27 at paras. 114, 123 and 124.

Paragraph 114

The failure of the Government of Nigeria to abolish female genital mutilation, a practice which is incompatible with the human rights of women and, particularly with the right to health, is deplored. According to UNICEF, the prevalence of female genital mutilation in Nigeria is estimated to be 50 per cent of the female population.

Paragraph 123

The extent of the devastation that oil exploration has caused to the environment and the quality of life in those areas, including Ogoniland where oil has been discovered and extracted without due regard for the health and well-being of the people and their environment, is noted with alarm.

Paragraph 124

The fact that the Government's social and health allocations are consistently diminishing and that the authorities have reintroduced primary school fees in certain States and imposed hospital charges where they did not exist before is regretted.

• Poland, ICESCR, E/1999/22 (1998) 32 at paras. 155 and 158.

Paragraph 155

The deteriorating health indicators that have been recorded during the last five years are of concern. Attention is also drawn to several areas of particular concern identified during the dialogue, namely, declining levels of nutrition, rising alcoholism, and increasing cardiovascular disease and cancers.

Paragraph 158

Every effort should be made to ensure women's right to health, particularly reproductive health. Family planning services should be made available to all persons, including counselling on safe alternatives to contraception and reliable and informative sex education for school-age children.

• Israel, ICESCR, E/1999/22 (1998) 43 at paras. 256, 257 and 270.

Paragraph 256

It is noted with concern that the recently adopted Arrangements Law has the effect of eroding the principles of universality and equality set out in the National Health Insurance Law. The Arrangements Law imposes payments for medical services in addition to the health tax; a periodic health tax links the amount of tax required to the amount of health services needed, thereby increasing inequality in health care. It is of concern that this provision does not conform to the Government's avowed commitment to an equitable health-care system.

Paragraph 257

The situation of non-Jewish women who are reportedly worse off in terms of living conditions, health and education is noted. Concern is expressed over persistent reports that the Dimona nuclear plant could pose a serious threat to the right to health and to the environment unless urgent preventive measures are undertaken.

Paragraph 270

Effective measures should be adopted to promote equal treatment of women in the field of employment, including in the Government and in education and health.

• Cyprus, ICESCR, E/1999/22 (1998) 50 at para. 296.

The State party should thoroughly review its health policy towards mentally ill patients in order to best address all their needs and protect all their human rights.

• Germany, ICESCR, E/1999/22 (1998) 54 at para. 322.

The alarming number of persons affected by HIV/AIDS in the territory of the State party causes concern.

• Iceland, ICESCR, E/2000/22 (1999) 26 at para. 86.

The State party should increase its social welfare expenditures so as to strengthen its health and social welfare centres around the country. The development of a social indicator model of drug and alcohol abuse and its treatment is recommended. In addition, there should be an elaboration of educational and social programmes to deal with problems of the victims of alcohol and drug abuse on a long-term basis.

• Ireland, ICESCR, E/2000/22 (1999) 33 at paras. 139 and 143.

Paragraph 139

The increase in tobacco use is the single most important contributing factor to the disease burden facing Ireland and the State party's responses have been inadequate to deal with this problem. The alcohol-related problems in the State party, which have not yet been addressed, are also of concern.

Paragraph 143

The relatively high rate of teenage suicide and the long waiting lists for medical services at public hospitals are of concern.

• Tunisia, ICESCR, E/2000/22 (1999) 36 at para. 168.

The disparities of living standards, especially with regard to education, health, life expectancy, child mortality, access to piped water and electricity and employment, to be found between the prosperous north-east coast of Tunisia and the underdeveloped north-west, between the interior of the country and the south, and between the towns and rural areas is of concern.

• Solomon Islands, ICESCR, E/2000/22 (1999) 40 at para. 205.

Infant mortality remains a major cause of concern, in spite of the commendable health policies of the Government which have drastically decreased the mortality rate of children under the age of 5. According to WHO, in 1996, the infant mortality rate was estimated at 26.8 deaths per 1,000 live births, while, according to the first country cooperation framework for the Solomon Islands (1997-2001), the maternal mortality rate is as high as 550 deaths per 100,000 live births. The low

percentage of the population with access to adequate sanitation (only 9 per cent of the rural population) and to safe drinking water available in the home or within reasonable access (63 per cent of the entire population), is of concern. The lack of adequate sanitation facilities directly adds to the severe malaria problem affecting more than one third of the population.

• Argentina, ICESCR, E/2000/22 (1999) 49 at paras. 272 and 286.

Paragraph 272

Concern is expressed about the health of pregnant women, particularly the relatively high maternal mortality rate, and the high adolescent pregnancy figures.

Paragraph 286

The State party is urged to review its policies on health, and particularly it should pay attention to the issues of mental health, maternal mortality, adolescent pregnancies and HIV/AIDS.

• Cameroon, ICESCR, E/2000/22 (1999) 56 at para. 359.

The State party is urged to review its policies on health in order to address, in particular, maternal mortality, adolescent pregnancies and the HIV/AIDS epidemic. In this respect, the Government is urged to review its family planning policies with a view to increasing access to information concerning contraceptives through educational programmes.

• Mexico, ICESCR, E/2000/22 (1999) 62 at paras. 390, 391 and 405.

Paragraph 390

Persisting malnutrition, especially in rural areas and among children under five years of age, is of concern. Alarm was expressed that malnutrition-related illnesses are among the chief causes of mortality in the State party.

Paragraph 391

Concern is expressed at the fact that the fourth highest cause of death among women in the State party is illegal abortion.

Paragraph 405

The State party is called upon to closely monitor the female mortality rate and to take steps to reduce the incidence of death caused by illegal abortion. In particular, the State party should intensify its educational campaign regarding women's sexual and reproductive health, and include such subjects in school curricula.

• Egypt, ICESCR, E/2001/22 (2000) 38 at para. 149.

It is noted with satisfaction that the State party has undertaken new and effective measures to introduce environment- and health-friendly fuel, beginning with the public transportation systems in major cities where pollution is a grave threat to life and health.

• Congo, ICESCR, E/2001/22 (2000) 43 at paras. 206 and 213.

Paragraph 206

Grave concern is expressed regarding the decline of the standard of health in the Congo. The AIDS epidemic is taking a heavy toll on the country, while the ongoing financial crisis has resulted in a serious shortage of funds for public health services, and for improving the water and sanitation infrastructure in urban areas. The war has caused serious damage to health facilities in Brazzaville. According to a joint study by WHO and UNAIDS, some 100,000 Congolese, including over 5,000 children, were affected by HIV at the beginning of 1997. More than 80,000 people are thought to have died from AIDS, with 11,000 deaths reported in 1997 alone. Some 45,000 children are said to have lost either their mother or both parents as a result of the epidemic.

Paragraph 213

The State party is strongly urged to pay immediate attention to and take action with respect to the grave health situation in its territory, with a view to restoring the basic health services, in both urban and rural areas, and to preventing and combating HIV/AIDS and other communicable diseases such as cholera and diarrhoea. The Government is encouraged to work closely with WHO and UNAIDS in its efforts to cope with these problems.

Mongolia, ICESCR, E/2001/22 (2000) 53 at paras. 265 and 273.

Paragraph 265

The Committee notes with appreciation that the State party is developing international cooperation with a view to resolving the social and economic problems of its population. In particular the "Poverty Partnership Agreement" signed by the State party with the Asian Development Bank is noted. This agreement allows Mongolia to draw US\$ 40 million per year for poverty reduction, the achievement of full primary education and the reduction of infant mortality rates by 50 per cent by 2005.

Paragraph 273

The Committee is disturbed to learn about the deteriorating health situation for Mongolians since

1990 and regrets that government expenditure on health has decreased in recent years (according to the Government submission, public expenditure on health fell from 5.8 per cent of GDP in 1991 to 3.6 per cent in 1998). The challenges faced by the State party include improving access to health-care services in rural areas and for the poor, the relatively low life expectancy, the increase in non-communicable and degenerative diseases, as well as sexually transmitted diseases, substance abuse, child suicide, high maternal mortality, especially in rural areas, and limited access to contraceptives. Concern is expressed that there is no policy response to address increasing substance abuse and child and adolescent suicide.

• Sudan, ICESCR, E/2001/22 (2000) 57 at para. 314.

The persisting problem of malaria, often a cause of death in the State party, as well as the increasing incidence of HIV/AIDS are matters of concern. A lack of medicines at affordable prices compounds these difficulties.

• Kyrgyzstan, ICESCR, E/2001/22 (2000) 62 at paras. 350 and 361.

Paragraph 350

It is noted with concern that, although the general state of health of the population is satisfactory, new health threats such as increasing alcoholism and drug abuse, the growing incidence of sexually transmitted diseases and the re-emergence of communicable and vaccine-preventable diseases such as tuberculosis, and above all the decreasing resources allocated to the health sector demand the State party's urgent response.

Paragraph 361

The State party is urged to continue its efforts to address the prevailing health threats, and to target progressively resources to health services.

• Australia, ICESCR, E/2001/22 (2000) 66 at para. 375.

The partnership between the State party and indigenous communities in initiatives aimed at providing greater access for indigenous peoples to culturally appropriate health services is welcomed, as is the allocation of significant resources for the improvement of indigenous health in general.

• Portugal, ICESCR, E/2001/22 (2000) 70 at para. 416.

The increase in paedophilia and child pornography is noted with concern. These phenomena are

associated with the increase in drug trafficking and consumption and other criminal activities which endanger the security and health of the population of the State party.

• Yugoslavia (preliminary), ICESCR, E/2001/22 (2000) 80 at para. 508.

In the context of article 12 of the Covenant, the State party is referred to paragraph 43 (f) of General Comment No. 14 (2000) on the right to the highest attainable standard of health. The State party is urged to prepare a national public health strategy and plan of action addressing the health concerns of the whole population.

• Morocco, ICESCR, E/2001/22 (2000) 82 at paras. 539 and 563.

Paragraph 539

It is regretted that the State party has not adopted a national strategy and action plan on health, and that health coverage provided by the State party does not cover more than 20 per cent of the population. Moreover, the Committee is concerned that access to primary health care in rural areas is even more limited, in comparison to the urban areas.

Paragraph 563

A national strategy and action plan on health should be adopted, which will increase the health coverage provided by the State party, in particular with regard to the rural areas.

• Venezuela, ICESCR, E/2002/22 (2001) 29 at paras. 84 and 85.

Paragraph 84

The Committee is concerned that the non-issue of personal documentation to refugees and asylum-seekers by the State authorities seriously hinders their enjoyment of economic, social and cultural rights, including the rights to work, health and education. This situation prompted a decision by the Inter-American Commission on Human Rights in March 2001 ordering protective measures for 287 Colombian refugees.

Paragraph 85

The discrimination against indigenous people is deplored, particularly with regard to access to landownership, housing, health services and sanitation, education, work and adequate nutrition. Particular concern is expressed about the adverse effects of the economic activities connected with the exploitation of natural resources, such as mining in the Imataca Forest Reserve and coal-working in the Sierra de Perijá, on the health, living environment and way of life of the indigenous populations living in these regions.

• Honduras, ICESCR, E/2002/22 (2001) 33 at paras. 131, 140, 143 and 152.

Paragraph 131

Particular concern is expressed about the extremely negative effects of the use of pollutants and toxic substances in specific agricultural and industrial sectors, such as banana growing and gold-mining, on the environment, thereby putting at risk the health and lives of workers and those living in the vicinity of the affected areas. In this regard, the Committee is also concerned that Environmental Impact Studies are conducted by or on behalf of those sectors without effective review by independent bodies.

Paragraph 140

The economic, social and cultural rights of indigenous populations as a distinct minority group should be recognised and more effective protection against discrimination, especially in the field of employment, health and education should be ensured.

Paragraph 143

It is strongly recommended that the State party implement existing legislative and administrative measures to avoid violations of environmental and labour laws by transnational companies.

Paragraph 152

Given that mining concessions may have a significant impact on the enjoyment of article 12 and other provisions of the Covenant, the Committee recommends that applications for mining concessions be advertised in all the localities where, if granted, they will take place, and that opposition to such applications be allowed within three months (not 15 days) of their publication in the relevant locality, in accordance with principles of procedural fairness.

• Hong Kong Special Administrative Region (China), ICESCR, E/2002/22 (2001) 39 at paras. 185, 187 and 204.

Paragraph 185

Concern is expressed about the reported increase in the incidence of child abuse and suicide among youth.

Paragraph 187

While acknowledging that progress has been made in relation to housing, deep concern remains that the right to housing of many people remains unfulfilled. Bed-space apartments, or cage homes are an affront to human dignity and roof-top structures constitute a grave risk to the life and health of their inhabitants.

Paragraph 204

Urgent measures should be adopted to address the problems leading to youth suicide and all forms of child abuse.

• Republic of Korea, ICESCR, E/2002/22 (2001) 45 at para. 236.

It is disturbing to note that the portion of the Government budget allocated to health, which is under 1%, is low and declining. Concern is expressed at the predominance of privately operated health care facilities - estimated to exceed 90% of all health care facilities, a trend that accelerated in the wake of the financial crisis; and the consequent negative implications for access to health care by the most marginalized sectors of society.

• Togo, ICESCR, E/2002/22 (2001) 57 at para. 324.

The State party is urged to take action with respect to the current health situation in the country, which still remains inadequate to address the basic health needs of the population, such as the improvement of basic health services and providing the necessary preventive and remedial steps in combating the HIV/AIDS pandemic and other communicable diseases. It is recommended that the State party take into account the General Comment No. 14 on the right to an adequate standard of health.

• Senegal, ICESCR, E/2002/22 (2001) 61 at paras. 354 and 381.

Paragraph 354

The high incidence of infant mortality, especially in rural areas, is a concern. There is also concern that many children in the rural areas suffer from serious malnutrition and retarded growth.

Paragraph 381

The State party is called upon to make safe drinking water accessible to the entire population and to combat the problems of malnutrition, especially among children, hygiene and water-related diseases.

• Syrian Arab Republic, ICESCR, E/2002/22 (2001) 67 at para. 395.

It is noted with appreciation that the State party is cooperating with international organizations and relevant specialized agencies to reduce poverty and work towards further realization of the right to food and the right to health.

Panama, ICESCR, E/2002/22 (2001) 73 at paras. 443, 450, 458, 466 and 475.

Paragraph 443

The significant reductions in levels of child mortality and malnutrition, and steady improvement in other indicators of human development are noted with satisfaction.

Paragraph 450

Notwithstanding the absence of legal discrimination and the rights granted to indigenous communities by the Constitution, there is deep concern about the persisting disadvantage faced in practice by members of indigenous communities and, in particular, about the marked disparities in the levels of poverty, literacy, access to water, employment, health, education and other basic social services.

Paragraph 458

The significant progress achieved in reducing child mortality has not been accompanied by a similar reduction in the rate of maternal mortality, which remained stable between 1980 and 1997 and this is of concern. There is concern about respect for the rights of women with regard to reproductive and sexual health and, in particular, the high rates of illegal abortion and early pregnancy.

Paragraph 466

The State party should consider ratifying the ILO Convention No. 169 (1989) concerning indigenous and tribal peoples in independent countries. Particular attention should be paid to improving poverty and literacy rates and access to water, employment, health, education and other basic social services for indigenous peoples.

Paragraph 475

Urgent measures should be taken that are aimed at reducing the excessively high maternal mortality rate. The availability and accessibility of reproductive and sexual health information and services should be expanding, so as to encourage a reduction in the rates of illegal abortion and early pregnancy.

• Ukraine, ICESCR, E/2002/22 (2001) 78 at paras. 487, 499 and 512.

Paragraph 487

The State party's willingness to cooperate with specialized agencies and other international organizations in such areas as poverty reduction, gender equality, integration of the Crimean Tartars, women and children's health, the review of human rights legislation, support for the Authorized Human Rights Representative of the Parliament, and the fight against trafficking of persons, is

welcomed.

Paragraph 499

The deterioration in the health of the most vulnerable groups, especially women and children, and in the quality of health services is of concern. The rise in the incidence of sexually transmitted diseases (STD) and the spread of HIV/AIDS is noted with concern. There is also concern about the high incidence of alcohol abuse and tobacco use, especially among persons under 18 years.

Paragraph 512

The State party should ensure that its commitment to primary health care is met by adequate allocation of resources and that all persons, especially from the most vulnerable groups, have access to health care. It is suggested that the State party establish comprehensive reproductive health programmes, as well as measures to ensure that abortion is not perceived as a method of contraception. It is further recommended that adolescents have access to and are provided with reproductive health education, as well as with STD and HIV/AIDS prevention programmes. Children should be provided with accurate and objective information about alcohol and tobacco use, and activities by the public mass media promoting their consumption should be discouraged.

• Nepal, ICESCR, E/2002/22 (2001) 83 at paras. 545 and 550.

Paragraph 545

It is noted with concern that only Tibetans who arrived in Nepal before 1990 and the Bhutanese are recognized as refugees by the authorities. It is further noted that while the Tibetan refugees benefit from appropriate treatment, the Bhutanese refugees are not allowed to work, are not allowed freedom of movement outside their refugee camps, and do not have access to the same health and educational facilities as Nepalese citizens.

Paragraph 550

The Committee is concerned that under the current national health plan for 1997-2017, the role of the State in the development of a national health care system, consistent with the structural adjustment programmes, is minimized. It is further noted that the mental health service is insufficient and that there is no community mental health programme available.

• Japan, ICESCR, E/2002/22 (2001) 90 at paras. 610 and 637.

Paragraph 610

Concern is expressed about the frequently excessively competitive and stressful nature of all levels of education, which results in school absence, illness, and even suicide by students.

Paragraph 637

A comprehensive review of the educational system be undertaken, taking into consideration General Comments No. 11 (1999) on plans of education for primary education (art. 14 of the Covenant), and No. 13 (1999) on the right to education (art. 13 of the Covenant), as well as General Comment No. 1 (2001) on the aims of education (art. 29, para. 1, of the Convention on the Rights of the Child). In particular, the review should focus on the frequent excessively competitive and stressful nature of all levels of education, which results in school absence, illness, and even suicide by students.

• Germany, ICESCR, E/2002/22 (2001) 97 at para. 674.

Institutional arrangements within the public administration should be reviewed to ensure that its obligations under the Covenant are taken into account at an early stage in the formulation of legislation and policy on issues relating to social welfare and assistance, housing, health and education. The introduction of "human rights impact assessments", comparable to environmental impact assessments, is further encouraged to ensure that the provisions of the Covenant are given due attention in all legislative and administrative policy and decision-making processes.

CEDAW

• Madagascar, CEDAW, A/49/38 (1994) 45 at para. 242.

The Government of Madagascar needs to improve health services in general and particularly for women because improved health status of women invariably improved the overall development of any country.

• Senegal, CEDAW, A/49/38 (1994) 120 at paras. 722 and 725.

Paragraph 722

It is noted with concern that the situation of women was still precarious in the fields of health and education, especially in rural areas.

Paragraph 725

The State party should step up its public information campaigns on behalf of women and expand its programmes to combat traditional practices, which affect women's health and advancement, in order to eliminate persistent forms of discrimination against women.

• Russian Federation, CEDAW, A/50/38 (1995) 99 at paras. 545 and 547.

Paragraph 545

Concern was expressed about the transition's negative impact on the health of the population, especially women and children, particularly as regards tuberculosis, and the decline in the birth rate, being in fact exceeded by the death rate, which affected the growth of the population. Of equal concern is the quality of the population's diet and the subsequent increase in maternal mortality.

Paragraph 547

Concern is also expressed over the inadequate public health financing which led to a reduction in guaranteed state medical aid to women and children, while state expenditure for education in general was being curtailed.

• Ukraine, CEDAW, A/51/38 (1996) 32 at paras. 286 and 290.

Paragraph 286

Concern is expressed over sexual stereotyping and overprotective labour legislation. Protective labour laws had the sole effect of restricting women's economic opportunities and were neither legitimate nor effective as a measure for promoting women's reproductive health. Women should have a right to free choice as to their employment, and the high rates of infant mortality and fetal abnormality resulting from the ecological disaster should be addressed as a matter of public health.

Paragraph 290

The health of the Ukrainian people in general, and of women in particular, is of serious concern. The problems of sustaining normal pregnancy, of birth defects and of infertility due to nuclear radiation poisoning and stress-related difficulties weighed heavily on women.

• Israel, CEDAW, A/52/38/Rev.1 part II (1997) 87 at paras. 162 and 176.

Paragraph 162

Concern is expressed over the fact that non-Jewish women enjoyed poorer health, resulting in very high maternal and infant mortality rates.

Paragraph 176

Measures should be taken to guarantee the exercise of human rights of non-Jewish women, including those living in the rural areas, and measures regarding health, education and employment, should be intensified.

• Luxembourg, CEDAW, A/52/38/Rev.1 part II (1997) 92 at para. 222.

An analysis of women's health needs should be undertaken and awareness-raising campaigns on mammography should continue so as to ensure that more women made use of that service.

• Australia, CEDAW, A/52/38/Rev.1 part II (1997) 111 at para. 397.

The continuing adverse situation of Aboriginal and Torres Strait Islander women is of concern. Major causes of concern included a higher incidence of maternal mortality, lower life expectancy, reduced access to the full range of health services, a high incidence of violence, including domestic violence, and high unemployment rates. Their situation, as well as that of migrant women, was further compromised by an apparent rise in racism and xenophobia.

• Bangladesh, CEDAW, A/52/38/Rev.1 part II (1997) 117 at para. 438.

Concern is expressed over the fact that maternal mortality and infant mortality rates remained high and that available primary health and reproductive health services were still inadequate and often inaccessible to poor, rural and marginalized women. Moreover, family planning services still mainly targeted women, and not enough education on male responsibility in reproduction had been introduced.

• Azerbaijan, CEDAW, A/53/38/Rev.1 part I (1998) 7 at paras. 63 and 66.

Paragraph 63

The Committee is particularly worried about the high level of maternal, as well as infant, mortality rates and the fact that there are insufficient resources for international emergency aid in that field.

Paragraph 66

The general health situation of women, particularly in view of the spread of tuberculosis and other contagious diseases, is a concern.

• Dominican Republic, CEDAW, A/53/38/Rev.1 part I (1998) 28 at para. 344.

The Government should improve the collection and use of data disaggregated by sex, so that the strong factual basis for the picture of the *de facto* situation of women in all areas covered by the Convention may be maintained and measures targeted more carefully to specific groups. Areas related to women's health, work, employment, wages and benefits, to the types and incidence of violence

against women and the impact of measures against violence against women should receive particular emphasis. Data should also be disaggregated by age and by other criteria such as urban/rural.

• United Republic of Tanzania, CEDAW, A/53/38/Rev.1 part II (1998) 66 at paras. 235-237.

Paragraph 235

Food taboos, which are more prevalent in rural areas, are a serious concern as they are not only harmful to the health of women, including mothers, but also impact on the health of future generations.

Paragraph 236

A programme should be introduced to educate rural women about their rights and steps should be taken to remove all traditional practices, including food taboos, which are harmful to the health of women.

Paragraph 237

Concern is expressed over the high infant and maternal mortality rate.

• Peru, CEDAW, A/53/38/Rev.1 part II (1998) 72 at paras. 337 and 338.

Paragraph 337

The Committee notes with concern that maternal and infant mortality and teenage pregnancy rates are high and that preventable diseases are common, all of which contributed to serious flaws in the Peruvian health system. It is noted that the main factor which affected women primarily in the most disadvantaged sectors is lack of resources to avail themselves of medical care when needed and with the necessary speed.

Paragraph 338

All efforts should be made so that such women may exercise their right to health and receive proper care and the necessary information from medical and paramedical personnel as part of basic respect for their human rights.

• Kyrgyzstan, CEDAW, A/54/38/Rev.1 part I (1999) 15 at para. 136.

The situation of women's health, particularly the increase in the incidence of maternal mortality and morbidity, as well as the high rates of infant mortality and the use of abortion as a method of contraception, is of concern.

• Greece, CEDAW, A/54/38/Rev.1 part I (1999) 20 at para. 206.

Governmental health policies, research and resources should be adjusted so as to respond adequately to the rights of women and men to a high standard of health care and to the gender factors associated with health.

• Thailand, CEDAW, A/54/38/Rev.1 part I (1999) 24 at para. 241.

The high suicide rate, as well as the prevalence of mental illness, among women is a concern.

• China, CEDAW, A/54/38/Rev.1 part I (1999) 26 at para. 303.

Urgent attention should be given to addressing women's suicide rates through measures such as the provision of mental health services and a better understanding of the causes of these suicides. Women's studies centres could be encouraged to undertake the necessary research.

• Ireland, CEDAW, A/54/38/Rev.1 part II (1999) 60 at para. 180.

It is noted that women's right to health, including reproductive health, is compromised by the influence of the Church not only in attitudes and stereotypes but also in official State policy.

• United Kingdom of Great Britain and Northern Ireland, CEDAW, A/54/38/Rev.1 part II (1999) 71 at para. 315.

The situation of older women should be addressed in a cross-cutting and cross-sectoral manner, with a view to ensuring adequate provision for their physical, mental, economic and social well-being.

• India, CEDAW, A/55/38 part I (2000) 7 at paras. 75, 78and- 79.

Paragraph 75

The Government is urged to enforce laws preventing discrimination against Dalit women and prohibiting the *devadasi* system, and to introduce affirmative action programmes in such areas as education, employment and health so as to provide life chances to Dalit women and girls and create an environment conducive to their progress. The Government is called upon to set a time-frame for

those interventions.

Paragraph 78

Maternal mortality rates and infant mortality rates are among the highest in the world. The adverse sex ratio and the incidence of sex-selective abortions despite the law banning that practice are noted. Family planning is only targeted at women.

Paragraph 79

A holistic approach to women's health throughout the life cycle should be adopted in the country's health programme. The Government is urged to allocate resources from a "women's right to health" perspective, following the guidelines of the Committee's general recommendation 24. The Government is called upon to elicit the support of medical associations in enforcing professional ethics and preventing sex-selective abortions. The Government should also obtain the support of the medical profession in creating awareness of the urgent need to eliminate practices associated with son preference.

• Jordan, CEDAW, A/55/38 part I (2000) 16 at para. 162.

The progress made in improving women's health situation, including the provision of reproductive health services and the prevalence of contraceptive use among married women, is commended.

• Democratic Republic of the Congo, CEDAW, A/55/38 part I (2000) 21 at para. 232.

Concern is expressed over food taboos, which are not only detrimental to the health of women, especially mothers, but also have serious consequences for the health of future generations. The Government should address the issue of eliminating food taboos by raising awareness about their detrimental effects on the health of women.

• Burkina Faso, CEDAW, A/55/38 part I (2000) 25 at paras. 274-276.

Paragraph 274

The precarious state of women's health, especially in rural areas, is of particular concern. The high rates of maternal and infant mortality caused by infectious diseases and malnutrition result from the lack of local health-care centres and adequate health-care providers.

Paragraph 275

The Government should pay particular attention to this problem, in order to improve the indicators of women's health. National reproductive health programmes should be drawn up both for women and for girls in order to prevent early pregnancy and induced abortion.

Paragraph 276

The access of women to primary health services and drinking water should be facilitated. The Government is encouraged to integrate family planning services in primary health care so that women can have easier access to them. The State party should organize awareness-raising and information activities for women about contraceptive measures and should involve men in these activities. The State party should review its legislation on abortion and provide for coverage by social security. Furthermore, the female population should be made aware of the risks and consequences of sexually transmitted diseases, including HIV/AIDS.

• Cameroon, CEDAW, A/55/38 part II (2000) 53 at paras. 43, 44, 59 and 60.

Paragraph 43

The Government is commended for its measures aimed at eliminating the practice of genital mutilation, which is a violation of human rights and is injurious to the physical and psychological well-being of girls, and poses a threat to their lives and health.

Paragraph 44

It is recognized that implementation of the structural adjustment programme, coupled with privatization, especially in the health and education sectors, poses serious challenges to the full implementation of the Convention.

Paragraph 59

The high rate of fertility and repeated pregnancy, the high mortality rate among mothers and children, and the HIV/AIDS pandemic in Cameroon, are noted with concern.

Paragraph 60

The Government is urged to review the abortion laws, undertake to increase the use of contraceptives, and develop programmes to protect mothers and children. Furthermore, the Government should strengthen its awareness campaigns to make women aware of the risks and effects of sexually transmitted diseases, including HIV/AIDS.

• Lithuania, CEDAW, A/55/38 part II (2000) 61 at paras. 158 and 159.

Paragraph 158

It is of concern that the Government has not addressed the health needs of Lithuanian women by taking into account the life-cycle approach recommended by the Beijing Platform for Action and as stated in general recommendation 24 on article 12, relating to women and health. The high rate of abortion among women and a lack of access to various methods of family planning, including contraceptives, especially among women in rural areas, are also noted with concern. Concern is also expressed over the increase of tuberculosis and mental diseases among women, as well as the high rate of anaemia among pregnant women.

Paragraph 159

The Government should fully implement a life-cycle approach to women's health. Comprehensive research into the specific health needs of women, the financial and organizational strengthening of family planning programmes and the provision of wide access to contraceptives for all women, including rural women, are further recommended. Programmes of sexual and reproductive education for both girls and boys should be introduced as a regular part of the school curriculum.

• Iraq, CEDAW, A/55/38 part II (2000) 66 at paras. 189, 203 and 204.

Paragraph 189

While noting the existence of certain legislative provisions on violence against women, concern is expressed at the lack of a comprehensive approach to that issue. Particular concern is expressed about the lack of data and information on the incidence and types of violence perpetrated against women in the home and in society; socialand medical and psychological support available to women subjected to violence.

Paragraph 203

The overall health situation of women is of concern. The high incidence of maternal mortality and the lack of basic health services, medicines and reproductive health services, including qualified birth attendants, are noted. It is of particular concern that, given the socio-economic difficulties, no measures have been put in place to address the mental and psychological health of women. That no steps have been taken to determine the prevalence of HIV/AIDS in the country, and that no relevant preventive education and information campaigns aimed at women exist, are also matters of concern.

Paragraph 204

The Government is urged to put in place mechanisms to provide the greatest possible protection of women's health rights. Women and children should be targeted effectively so that they benefit from available resources and such resources should not be diverted to other purposes. The Government should take a holistic view of women's health, in line with general recommendation

24 relating to article 12 of the Convention, and should put in place measures to ensure women's mental and psychological well-being.

• Austria, CEDAW, A/55/38 part II (2000) 70 at para. 237.

The State party should replicate, at the federal level, the Vienna programme on women's health and intensify efforts to apply a gender perspective in health care by initiating and sponsoring relevant research, taking into account General Recommendation 24 on article 12, relating to women and health.

• Cuba, CEDAW, A/55/38 part II (2000) 73 at para. 271.

While recognizing the Government's sustained efforts to ensure women's right to health, the necessity of continued efforts to address HIV/AIDS, and in particular its potential impact on high-risk groups, such as prostitutes and young adults, is emphasized. The occurrence of suicide among older women is of concern. The Government should study the cause of women's suicide with a view to adopting preventive measures.

• Romania, CEDAW, A/55/38 part II (2000) 77 at paras. 314 and 315.

Paragraph 314

Concern is expressed over the health situation of women, especially women's reproductive health. While appreciating recent declines in maternal and child mortality rates, these indicators are still high compared to other countries in the region. The abortion rates and the use of abortion as a means of fertility control, are of particular concern. The increase in HIV/AIDS infection rates and in sexually transmitted diseases, are also matters of concern. Concern is further expressed over the situation of the environment, including industrial accidents and their impact on women's health.

Paragraph 315

While commending the State party for maintaining a system of universal free health care, it is recommended that increased efforts be placed on improving women's reproductive health. In particular, the availability, acceptability and use of modern means of birth control to avoid the use of abortion as a method of family planning should be improved. The Government is further encouraged to include sex education systematically in schools, including vocational training schools. High risk groups should be targeted for HIV/AIDS prevention strategies and strategies to prevent the spread of other sexually transmitted diseases. The Government is encouraged to

increase its cooperation with non-governmental organizations and international organizations in order to improve the general health situation of Romanian women and girls.

• Kazakhstan, CEDAW, A/56/38 part I (2001) 10 at paras. 105 and 106.

Paragraph 105

While noting a decline in the mortality rate of women, the status of women's health, especially their reproductive health, is of concern. That free access to health care appears to be no longer available to all women is alarming. It is also of concern that abortion continues to be used as a means of birth control. The large number of women suffering from anaemia and the incidence of infectious diseases are alarming. Concern is also expressed over the degree of environmental degradation in the country and its extremely negative impact on the health of the whole population, in particular on women and children.

Paragraph 106

The State party is urged to maintain free access to adequate health care and to improve its family planning and reproductive health policy, including availability of and accessibility to modern contraceptive means. The Government is encouraged to promote sex education for both girls and boys, as well as educational programmes to combat alcohol and drug abuse among women. The Government should design and implement a sound environmental policy aimed at protecting the health of women and children.

• Maldives, CEDAW, A/56/38 part I (2001) 15 at paras. 125, 142 and 143.

Paragraph 125

The improved indicators on life expectancy for women are commended.

Paragraph 142

The health and nutrition of girls suffer after puberty and maternal mortality and morbidity rates and the mortality rate of girls under the age of 5 years remain at unsatisfactory levels. Patriarchal and stereotypical attitudes also have a negative impact on women's health and nutrition.

Paragraph 143

The Government should obtain information on the causes of maternal mortality, malnutrition and morbidity and the mortality rate of girls under the age of 5 years, and develop programmes to address those problems.

• Uzbekistan, CEDAW, A/56/38 part I (2001) 18 at paras. 185-188.

Paragraph 185

While noting a decline in the maternal mortality rate, concern is expressed over the status of women's health, especially their reproductive health, and the high birth rate. It is also of concern that abortion remains a primary means of birth control, and that the use of tobacco by women is increasing. The degree of environmental degradation in the country and its extremely negative impact on the health of the whole population, in particular women and children, is also a matter of concern.

Paragraph 186

Free access to basic health care should be maintained and the family planning and reproductive health policy, including the availability and accessibility of modern contraceptive means should be improved. The State party is encouraged to promote sex education during the compulsory school years. A sound environmental policy aimed at protecting the health of women and children should be designed and implemented.

Paragraph 187

The high rates of suicide among women and the cases of polygamy are matters of concern.

Paragraph 188

Structures aimed at addressing mental health problems faced by women should be established, and measures to eliminate polygamy and early marriage should be undertaken.

• Mongolia, CEDAW, A/56/38 part I (2001) 26 at paras. 249, 250, 273 and 274.

Paragraph 249

The deteriorating situation of women in Mongolia in a period of economic transformation is noted with deep concern. The fact that the Government has failed to prevent the erosion of women's rights to economic advancement, health, education, political participation and personal security is of particular concern.

Paragraph 250

The Government should protect and promote women's human rights and utilize the development and technical resources available as well as the human resources of the country, including civil society and women's groups, so as to reverse this trend.

Paragraph 273

Concern is expressed with regard to women's health throughout their life cycle. The fact that economic hardship impacts negatively on women's reproductive and mental health is also a matter of concern. In particular, the acute problem of maternal mortality is noted with concern, owing in part to abortions performed under unsafe conditions and the non-availability of family planning services.

Paragraph 274

The Government should maintain adequate safe, affordable and accessible physical and mental health services for women throughout their life cycle. The Government is urged to increase access, particularly in the rural areas, to affordable contraceptives for women and men, and to provide sex education to girls and boys.

• Egypt, CEDAW, A/56/38 part I (2001) 33 at paras. 336 and 337.

Paragraph 336

It is of concern that the Government has addressed HIV/AIDS only as a health issue.

Paragraph 337

The multi-dimensional and cross-cutting nature of HIV/AIDS should be addressed, including its human rights, economic, social, development and security dimensions.

• Singapore, CEDAW, A/56/38 part II (2001) 51 at para. 69.

The achievements of low rates of maternity and infant mortality, long life expectancy and high literacy rates for women and the provision of access to all levels of education are commended.

• Guinea, CEDAW, A/56/38 part II (2001) 55 at paras. 128, 129, 136 and 137.

Paragraph 128

While the Government has made progress in addressing the basic health needs of the population, concern is expressed about the prevalence of maternal and infant mortality, the persistent practice and high rate of female genital mutilation, women's lack of access to health-care facilities and the lack of access to family-planning services.

Paragraph 129

Policies and resources should be focused on improving the status of women's health, in particular with regard to maternal and infant mortality. Women's access to health-care and family-planning services should be increased.

Paragraph 136

It is noted with concern that despite legislative prohibition, prostitution is growing at an alarming rate and that the prevalence of HIV and other sexually transmitted diseases among prostitutes is increasing.

Paragraph 137

Laws that prohibit the exploitation of prostitution should be strictly enforced without penalizing women who provide sexual services and full attention should be paid to the provision of health services for prostitutes so as to curb the rise in the number of HIV/AIDS cases.

• Guyana, CEDAW, A/56/38 part II (2001) 60 at para. 175.

The Government is encouraged to give full attention to the needs of rural women and Amerindian women and to ensure that they benefit from policies and programmes in all areas, in particular access to decision-making, health, education and social services.

• The Netherlands, CEDAW, A/56/38 part II (2001) 63 at para. 215.

Elderly women may be marginalized within, as well as insufficiently covered by, the health insurance and pension systems. Special attention should be paid to the needs of elderly women in "Daily routine" programmes.

• Nicaragua, CEDAW, A/56/38 part II (2001) 72 at paras. 300 and 301.

Paragraph 300

The high infant and maternal mortality rates in Nicaragua are of concern. It is also of concern that the leading causes of mortality among women are cervical and breast cancer, and pregnancy-related problems, including post-partum haemorrhage and toxaemia. The lack of information on abortions and on the incidence of related death or illness is noted with concern.

Paragraph 301

Every effort should be made to increase access to health-care facilities and medical assistance by trained personnel in all areas, including rural areas. The implementation of programmes to prevent cervical and breast cancer, and to ensure the availability of pregnancy-related medical care are also recommended.

CAT

• Czechoslovakia, CAT, A/47/44 (1992) 27 at para. 147.

It is hoped that the participation of doctors in decisions to place detainees in solitary confinement will be fully implemented so that no one is so detained without prior medical examination.

• Jordan, CAT, A/50/44 (1995) 23 at para. 174.

The State party should strengthen measures to protect the rights of detainees, especially their access to judges, lawyers and doctors of their choice.

• China, CAT, A/51/44 (1996) 22 at para. 150.

A Rehabilitation Centre for Torture Victims should be established. The State party should also continue to train law enforcement personnel, procurators, judges and medical doctors to become professionals of the highest standing.

• Ukraine, CAT, A/52/44 (1997) 23 at para. 137.

The conditions prevailing in premises used for holding persons in custody and in prisons may be described as inhuman and degrading, causing suffering and the impairment of health.

• Switzerland, CAT, A/53/44 (1998) 11 at paras. 96 and 100.

Paragraph 96

The need to allow suspects to contact a lawyer or family member or friend and to be examined by an independent doctor immediately upon their arrest, or after each session of questioning, and before they are brought before an examining magistrate or released is emphasized.

Paragraph 100

The authorities should investigate the allegations of medical treatment carried out on persons who are being expelled, without their consent.

• New Zealand, CAT, A/53/44 (1998) 19 at para. 172.

The periodic review of the clinical status of mental patients committed to mental hospitals ensures that such compulsory treatment will not violate the mental patients' right to freedom.

• Libyan Arab Jamahiriya, CAT, A/54/44 (1999) 20 at para. 187.

Authorities should guarantee the free access of a person deprived of his liberty to a lawyer and to a doctor of his choice and to his relatives at all stages of detention.

CRC

• Bolivia, CRC, CRC/C/16 (1993) 13 at para. 36.

Vulnerable groups of children, including girl children, indigenous children and children living in poverty, are particularly disadvantaged in their access to adequate health and educational facilities and are the primary victims of such abuses as sale and trafficking, child labour and sexual and other forms of exploitation.

• Egypt, CRC, CRC/C/16 (1993) 24 at para. 103.

The need for measures to improve the health of children, particularly those in the school-age group, is of concern.

• Sudan, CRC, CRC/C/20 (1993) 22 at para. 117.

Attention should be given to extending the provision of primary health care and primary education in order to improve the general health and nutritional and educational status of children. In addition, future development plans should accord priority to the situation of disabled children.

• Belarus, CRC, CRC/C/24 (1994) 24 at para. 114.

The health status of children, particularly in the aftermath of the Chernobyl nuclear disaster, the apparent priority given to curative health care rather than decentralized preventive health care, the low prevalence of breast-feeding and the high number of abortions are matters of concern.

• Pakistan, CRC, CRC/C/29 (1994) 10 at para. 43.

It is noted with concern that national health plans appear to emphasize the training of doctors rather than nurses and other health personnel, including paramedics. Attention is drawn to the apparent lack of a clear division of responsibilities between the provincial and federal levels for the development of a strong primary health-care system.

• Burkina Faso, CRC, CRC/C/29 (1994) 15 at para. 66.

The negative effects of poverty and structural adjustments on the situation of children, as illustrated by the high rate of infant mortality, malnutrition, as well as the low level of health services and school attendance, are of concern.

• Chile, CRC, CRC/C/29 (1994) 25 at para. 147.

The fact that the decentralization process might lead to a deterioration in the quality of and effective access to health services and education, particularly for the most vulnerable groups of children, is of concern.

• Honduras, CRC, CRC/C/34 (1994) 11 at para. 39.

Concern is expressed over the persisting difficulties in providing the necessary registration certificates and the absence of such basic documentation detailing the child's age and family affiliations that may hamper the implementation of a child's other rights, including his/her access to public health services and to the necessary protection that a child should be accorded under the system of the administration of juvenile justice.

• Ukraine, CRC, CRC/C/46 (1995) 11 at para. 69.

A stronger emphasis should be placed on primary health care activities, especially in rural areas, which would include the development of educational programmes to cover such matters as family education, family planning, sex education and the benefits of breast-feeding.

• Germany, CRC, CRC/C/46 (1995) 15 at para. 110.

More comprehensive research should be undertaken on the possible effects of environmental pollution on the health of children.

• Yugoslavia (Serbia and Montenegro), CRC, CRC/C/50 (1996) 17 at para. 84.

The consequences of the war on the territory of the former Yugoslavia, combined with the realities of sanctions, seem to have led to a worsening of the indicators of the health and education situation of the children of the Federal Republic, including lower immunization coverage, more nutrition-related disorders and illnesses, and an increase in the number of children suffering from mild and serious mental disorders. The sanctions against the Federal Republic may have led to the isolation of professionals dealing with the rights of the child.

• Lebanon, CRC, CRC/C/54 (1996) 7 at para. 58.

The ban of the commercial marketing of infant formula should be implemented and breast-feeding should be promoted among mothers in health facilities. It is further suggested that a health insurance card be issued for children whose parents are not entitled to social security benefits.

• Guatemala, CRC, CRC/C/54 (1996) 31 at paras. 212 and 225.

Paragraph 212

The relatively high maternal, infant and under-five mortality rates are of concern. Some factors contributing to high maternal deaths may be related to the inadequacies of the training given to birth attendants and of home deliveries. Many problems remain with respect to the reproductive health of women, the low birth weight of children being a possible manifestation of this fact.

Paragraph 225

The State party is encouraged to strengthen its support to families in carrying out their child-rearing responsibilities, such as by providing nutritious food and conducting vaccination programmes. As a means of addressing the problems of maternal death and poor antenatal care and delivery services, the State party should consider introducing a more effective system for training medical personnel and birth attendants. The State party should also consider requesting

international cooperation from relevant international organizations to address issues relating to the reproductive health of women.

• Nigeria, CRC, CRC/C/57 (1996) 12 at paras. 69, 90 and 94.

Paragraph 69

The access to quality health-care services is unsatisfactory. Equally, the effectiveness of measures undertaken to avoid regional variations in the provision of health-care services and medical supplies remains a cause of concern. The problems encountered in providing access to safe water is also of concern.

Paragraph 90

Improvement of access to and the quality of primary health-care services should be urgently undertaken. Major efforts to ensure the equal distribution of health services and medical supplies between and within regions are required immediately.

Paragraph 94

The importance of all children having access to health care, and the need for further measures to be undertaken to combat exploitation such as that of child domestic workers, including legislative measures to ensure the effective protection of the child against the performance of any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or full and harmonious development, are highlighted.

• United Kingdom of Great Britain and Northern Ireland (Hong Kong), CRC, CRC/C/57 (1996) 23 at para. 155.

A review should be undertaken of the possible links between school pressures and adolescent health problems in view of the concerns raised on these issues during the discussion of the report. It is also suggested that the reasons for suicide among youth and the effectiveness of programmes for the prevention of suicide among children deserve further study.

• Bulgaria, CRC, CRC/C/62 (1997) 7 at para. 40.

The insufficient measures taken to tackle the issues of child malnutrition, disability, mental health and early pregnancies, as well as cases of early marriage, are worrisome. The problem of youth suicide is also of concern.

• Panama, CRC, CRC/C/62 (1997) 19 at para. 116.

The insufficient legal protection and the lack of adequate procedures for refugee children, especially unaccompanied minors, are of concern. The difficulties encountered by those children in securing access to education, health and social services is also of concern.

• Myanmar, CRC, CRC/C/62 (1997) 25 at para. 152.

The high rates of infant mortality and malnutrition, as well as the low level of health services, which are partly due to poverty, deep disparities between urban and rural communities and the impact of the internal conflict, are of concern. The insufficient measures taken to offer appropriate and accessible social, rehabilitation and educational services to disabled children are also worrisome.

• Ghana, CRC, CRC/C/66 (1997) 15 at para. 114.

All appropriate measures, including through international cooperation, should be taken to prevent and combat malnutrition.

• Bangladesh, CRC, CRC/C/66 (1997) 22 at paras. 143 and 165.

Paragraph 143

The high maternal mortality rates, lack of access to prenatal care and, more generally, limited access to public health-care facilities are matters of concern. The absence of programmes addressing the mental health of children and their families is also of concern.

Paragraph 165

Efforts are required for the treatment of children with disabilities and their prevention, and to raise awareness about the need to facilitate the active participation of such children in the community. Efforts should be pursed to ensure the implementation of integrated mental health programmes and approaches and to make available the necessary resources and assistance for these activities.

• Paraguay, CRC, CRC/C/66 (1997) 29 at para. 193.

The high rates of infant and child mortality, malnutrition and infectious diseases, as well as the unresolved difficulties in providing country-wide maternal and child health services, are of concern.

• Azerbaijan, CRC, CRC/C/66 (1997) 41 at paras. 286 and 307.

Paragraph 286

The general health situation of children, particularly with regard to the rise in the infant, child and maternal mortality rates, the decline of breastfeeding, the increase in the number of unwanted pregnancies, nutrition and iodine deficiencies, substance abuse, and the negative impact of environmental pollution, is of grave concern.

Paragraph 307

A comprehensive national policy to promote and advance the health of children and mothers should be developed. Particular attention should be given to the impact of environmental pollution and a study be undertaken on this subject. International cooperation in this field should be a priority.

• Lao People's Democratic Republic, CRC, CRC/C/69 (1997) 8 at paras. 50, 52, 74 and 76.

Paragraph 50

Concern is expressed over the high maternal mortality rate, the high mortality and morbidity rates among children, the lack of access to prenatal and maternity care, the generally limited access to public health care and to medicines, and particularly the very high level of malnutrition in rural areas. The high incidence of traffic accidents involving children and the inadequacy of the efforts to raise awareness about HIV/AIDS in the communities and at school, particularly in the rural areas, are also of concern.

Paragraph 52

The shortage of physical and psychological rehabilitation programmes and services for unexploded ordnance victims is of concern. The problem of the toxic chemical contamination of soil and water, particularly in the six southern provinces, is also a matter of concern.

Paragraph 74

Further technical assistance should be considered to continue to strengthen efforts to make primary health care accessible to all children, particularly at the district level. Concerted efforts are needed to combat malnutrition. Adolescent health should be promoted by strengthening

reproductive health education and services to prevent and combat HIV/AIDS. All appropriate measures should be taken to prevent traffic accidents, such as teaching traffic rules at school.

Paragraph 76

Long-term external financial assistance should be sought in order to build national capacity with regard to Unexploded Ordnance (UXO), to establish a sustainable clearing process in each area, to provide continual community awareness programmes through schools, pagodas and local organizations, and to develop rehabilitation programmes. A study should be undertaken on the effects on children of toxic chemical contamination of soils and water as a result of the armed conflict, and studies on this matter undertaken in neighbouring countries should be consulted.

• Uganda, CRC, CRC/C/69 (1997) 21 at paras. 134 and 149.

Paragraph 134

The high infant and child mortality rates, due to the poor water supply, hygiene and sanitation practices and endemic malnutrition, are of concern.

Paragraph 149

All appropriate measures, including through international cooperation, should be taken to prevent and combat infant and child mortality and malnutrition.

• Czech Republic, CRC, CRC/C/69 (1997) 28 at paras. 176, 177 and 195.

Paragraph 176

The increasing problems of environmental degradation, which have a harmful impact on the health of children, are of concern.

Paragraph 177

The insufficient measures taken to ensure effective access of children with disabilities to health, education and social services, and to facilitate their full inclusion into society, are of concern. The small number of well-trained professionals dealing with disabled children is also a matter of concern.

Paragraph 195

Comprehensive research should be undertaken on the possible effects of environmental pollution on the health of children.

• Togo, CRC, CRC/C/69 (1997) 39 at para. 262.

The difficult health situations faced by a majority of children, *inter alia*, high under-five child mortality rate, weak nutritional status, high incidence of malaria and iodine deficiency, and limited access to clean water and safe sanitation, are matters of concern. The spread of HIV/AIDS throughout the population of the country, which bears a direct impact on the lives of children, is also worrisome. The incidence of early pregnancies is also a matter of concern.

• Libyan Arab Jamahiriya, CRC, CRC/C/73 (1998) 9 at para. 54.

Further studies should be conducted in relation to the widespread chronic malnutrition or stunting and diarrhoea. Such research would help guide policies and programmes to reduce the occurrence of stunting. In this regard, technical assistance should be considered from UNICEF and WHO.

• Ireland, CRC, CRC/C/73 (1998) 14 at para. 100.

Programmes should be developed to facilitate the active participation in the community of children with disabilities. Efforts should be further pursued to ensure the implementation of integrated mental health programmes and approaches and to make available the necessary resources and assistance for these activities.

• Micronesia, CRC, CRC/C/73 (1998) 20 at para. 140.

Efforts to combat malnutrition and vitamin A deficiency should be continued. Adolescent health policies should be promoted by strengthening reproductive health education and services. A comprehensive and multidisciplinary study should be undertaken to understand the scope of the phenomenon of adolescent health problems, such as early pregnancies and suicide. Further efforts, both financial and human, such as the development of counselling services for both the adolescents and their families, should be undertaken for the prevention and care of adolescents' health problems and for the rehabilitation of victims.

• Hungary, CRC, CRC/C/79 (1998) 7 at para. 60.

Breastfeeding should be promoted in health facilities.

• Democratic People's Republic of Korea, CRC, CRC/C/79 (1998) 13 at paras. 95 and 96.

Paragraph 95

Particular attention should be given to the impact of environmental pollution on children and a study should be undertaken on this subject. International cooperation in this field should be considered.

Paragraph 96

A comprehensive study on the issues of reproductive health, youth suicides and early pregnancies should be undertaken so as to identify the scope of the problems and to devote adequate resources to preventing and combating these phenomena.

• Fiji, CRC, CRC/C/79 (1998) 18 at para. 124.

The insufficient rehabilitation measures for ill-treated, sexually abused and economically exploited children, as well as their limited access to the justice system, are of concern.

• Maldives, CRC, CRC/C/79 (1998) 31 at para. 214.

The prevalence of malnutrition (stunting and iron deficiency) and the high maternal mortality rate, as well as the limited access to safe water and adequate sanitation, are of concern. The problems of adolescent health, particularly the high and increasing rate of early pregnancies, the lack of access by teenagers to reproductive-health education and services, the insufficient preventive measures taken against HIV/AIDS and the insufficient measures taken to promote breastfeeding of children, especially in health facilities, are also of concern.

• Luxembourg, CRC, CRC/C/79 (1998) 38 at para. 277.

A comprehensive study should be undertaken in order to identify reasons for the drop in breastfeeding after the first month. The time period of maternity leave should be extended and serious efforts should be made to educate the public - especially new parents - on the benefits of breastfeeding and the adoption of other measures, as necessary, to counteract any negative impact on employment of women who wish to continue breastfeeding their children for a longer period of time. Finally, efforts should be increased to promote compliance with the International Code for Marketing of Breast Milk Substitutes.

• Kuwait, CRC, CRC/C/80 (1998) 28 at para. 144.

All appropriate measures, such as awareness-raising campaigns in and outside schools and counselling, should be taken to sensitize adults, especially parents and domestic servants, and children alike to the importance of quality nutrition.

• Vanuatu, CRC, CRC/C/90 (1999) 29 at para. 153.

The survival and development of children continues to be threatened by malaria, acute respiratory infections and diarrhoeal diseases. The insufficient number of trained health workers, the wide discrepancies in the distribution of health professionals between communities, the limited access to health services in some island communities, and the poor sanitation and limited access to safe drinking water, particularly in remote areas, are also matters of concern. Appropriate resources should be allocated and comprehensive policies and programmes should be developed to improve the health situation of children and facilitate greater access to primary health services. Efforts to reduce the incidence of maternal, child and infant mortality, to improve breastfeeding practices; and to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children should be continued. Additional measures should be taken to increase access to safe drinking water and to improve sanitation. Additionally, technical cooperation programmes with UNICEF, WHO and others to improve primary health care should be continued.

See also:

- South Africa, CRC, CRC/C/94 (2000) 81 at para. 442.
- Suriname, CRC, CRC/C/97 (2000) 84 at paras. 491 and 492.
- India, CRC, CRC/C/94 (2000) 10 at paras. 80 and 82.

Paragraph 80

In light of article 24 of the Convention, it is noted that the State party has already focused and placed priority on the main health issues by establishing several national programmes. Nevertheless, concern is expressed about the high maternal mortality, and very high levels of low birth weight and malnutrition among children, including micronutrient deficiencies, linked to the lack of access to prenatal care and, more generally, limited access to quality public health care facilities, insufficient numbers of qualified health workers, poor health education, inadequate access to safe drinking water and poor environmental sanitation. This situation is exacerbated by the extreme disparities faced by women and girls, especially in rural areas.

Paragraph 82

The health of adolescents, particularly girls, is neglected. For instance, early marriages can have a negative impact on health. Adolescent suicides, especially among girls, and HIV/AIDS affected children are of serious concern.

• Sierra Leone, CRC, CRC/C/94 (2000) 24 at paras. 169, 170, 174 and 175.

Paragraph 169

Taking note of the very high child and maternal mortality rates, rates of malnutrition and various preventable diseases and the probability of widespread psychological trauma, the Committee is concerned at the very low coverage of basic health services across the country and at the absence of mental health facilities.

Paragraph 170

The State party is urged to make every effort to rebuild national health infrastructures and to ensure the access of the whole population to basic health services, including in rural areas. The Committee recommends, in addition, the establishment of a comprehensive mental health service. Further, the State party is urged to seek international cooperation in implementing this recommendation.

Paragraph 174

That the incidence of HIV/AIDS in the State party is likely to have risen significantly during the period of armed conflict and population displacement is of deep concern.

Paragraph 175

Mechanisms should be developed to effectively monitor the incidence and spread of HIV/AIDS. The State party should rapidly develop and implement a strategy for prevention, including through the use of information campaigns, and for care of people who are victims of HIV/AIDS, including for alternative care of their children. The State party is urged to seek assistance from the World Health Organization.

• Armenia, CRC, CRC/C/94 (2000) 53 at paras. 330, 334 and 335.

Paragraph 330

The Committee wishes to reiterate the concerns expressed by the Committee on Economic, Social and Cultural Rights (E/C.12/1/Add.39) with regard to the deterioration in the health of

the Armenian people, especially women and children, and decreasing budgetary allocations in this sector. Concerns include the deterioration in the quality of care; inadequate prenatal and neonatal care; poor nutrition; that the cost of care is a barrier to access to health care for poor households; and that abortion is the most commonly used means of family planning.

Paragraph 334

Concern is expressed about the high incidence of environmental threats, including contamination of water supplies, which have a negative impact on the health of children.

Paragraph 335

In the light of article 24 (c) of the Convention, it is recommended that the State party take all appropriate measures, including international cooperation, to prevent and combat the damaging effects of environmental degradation on children, including pollution and contamination of water supplies.

See also:

- Comoros, CRC, CRC/C/100 (2000) 110 at paras. 638 and 639.
- Peru, CRC, CRC/C/94 (2000) 64 at para. 377.

While acknowledging the measures taken to improve the health of children, in particular initiatives related to the reduction of infant mortality, concern is expressed about the persistence of regional disparities in access to health care and about high rates of malnutrition of children, especially in rural and remote areas and in particular among children belonging to indigenous groups. The high maternal mortality and teenage pregnancies rates are a concern as is the insufficient access by teenagers to reproductive health education and counselling services. The increasing rates of substance abuse and of HIV/AIDS among children and adolescents and the constant discrimination they are exposed to are also matters of concern. It is recommended that the State party continue taking effective measures to ensure access to basic health care and services for all children. More concerted efforts need to be taken to guarantee equal access to health care and to combat malnutrition, with special emphasis on children belonging to indigenous groups and children living in rural and remote areas. The State party should continue with its efforts to prevent HIV/AIDS. Further efforts should be undertaken for the development of child-friendly counselling services as well as care and rehabilitation facilities for adolescents.

See also:

• Colombia, CRC, CRC/C/100 (2000) 64 at paras. 370 and 371.

• Grenada, CRC, CRC/C/94 (2000) 72 at paras. 405 and 407.

Paragraph 405

The limited availability of programmes and services and the lack of adequate data in the area of adolescent health are a concern, including accidents, violence, suicide, mental health, abortion, HIV/AIDS and STDs. The high incidence of teenage pregnancy and the situation of teenaged mothers, especially in relation to their late attendance at antenatal clinics, as well as their generally poor breast-feeding practices are a concern. Most of the current cases of infant and maternal mortality are related to teenaged mothers. The State party should increase its efforts in promoting adolescent health policies and counselling services, as well as strengthening reproductive health education, including the promotion of male acceptance of the use of A comprehensive and multi-disciplinary study should be undertaken to understand the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Additionally, it is recommended that the State party undertake further measures, including the allocation of adequate human and financial resources, and making efforts to increase the number of social workers and psychologists, to develop youth-friendly care, counselling and rehabilitation facilities for adolescents. The State party is encouraged to develop comprehensive policies and programmes to reduce the incidence of infant and maternal mortality and promote proper breastfeeding and weaning practices among teenaged mothers.

Paragraph 407

The State party's intentions to improve the situation of environmental health services through, *inter alia*, the establishment of a Solid Waste Management Authority and the expansion of the collection areas from 55 per cent to approximately 95 per cent are noted. Concerns remain about the poor environmental health conditions. In this connection, note is taken of the continued widespread use of pit-latrines, increasing sea pollution, and the inadequate solid waste disposal programme. It is recommended that the State party intensify its efforts to address environmental health concerns, particularly as regards solid waste management.

• South Africa, CRC, CRC/C/94 (2000) 81 at paras. 443 and 446.

Paragraph 443

Concern is expressed at the increase in environmental degradation, especially as regards air pollution. The State party should increase its efforts to facilitate the implementation of

sustainable development programmes to prevent environmental degradation, especially as regards air pollution.

Paragraph 446

Concern is expressed that male circumcision is carried out, in some instances, in unsafe medical conditions. Concern is also expressed about the traditional practice of virginity testing which threatens the health, affects the self-esteem, and violates the privacy of girls. The practice of female genital mutilation (FGM) and its harmful effects on the health of girls is also an issue of concern. Effective measures should be taken, including training for practitioners and awareness raising, to ensure the health of boys and protect against unsafe medical conditions during the practice of male circumcision. A study should be undertake on virginity testing to assess its physical and psychological impact on girls. In this connection, it is recommended that the State party introduce sensitization and awareness-raising programmes for practitioners and the general public to change traditional attitudes and discourage the practice of virginity testing in light of articles 16 and 24 (3) of the Convention. The State party should strengthen its efforts to combat and eradicate the practice of FGM and should carry out sensitization programmes for practitioners and the general public to change traditional attitudes and discourage harmful practices.

• Islamic Republic of Iran, CRC, CRC/C/97 (2000) 8 at para. 65.

The State party should undertake a comprehensive study to determine the nature and extent of adolescent health problems, with the full participation of adolescents, and use this as a basis to formulate adolescent health policies and programmes. In light of article 24, it is recommended that adolescents have access to and be provided with reproductive health education and child-friendly counselling and rehabilitation services.

See also:

• Jordan, CRC, CRC/C/97 (2000) 31 at para. 194.

• Georgia, CRC, CRC/C/97 (2000) 18 at paras. 120-123.

Paragraph 120

Concern is expressed about the health situation of children which continues to be affected by the poor economic situation within the State party. In particular, note is taken of the limited access

to and quality of health services, particularly among children living in conflict zones as well as in the mountainous regions; the increasing cost of basic health care of which the State party covers only 15-20 per cent; the inadequate allocation of funding for health; the high maternal, child and infant mortality rates; the increasing malnutrition rate; and the deteriorating situation of sanitation and safe drinking water. While it is noted that the State party is receiving technical assistance for the immunization campaign, vaccines continue to be unavailable. Negative social attitudes towards vaccinations have resulted in a resurgence of preventable diseases such as diphtheria.

Paragraph 121

Appropriate resources should be allocated for the implementation of the National Health Policy and, where appropriate, additional policies and programmes should be developed to improve the health situation of children, especially those living in mountainous regions and conflict zones; facilitate greater access to and quality of primary health services; ensure the availability of vaccines; reduce the incidence of maternal, child and infant mortality; prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children; and increase access to safe drinking water and sanitation. The State party is encouraged to continue its cooperation with respect to the Integrated Management of Childhood Illnesses initiative.

Paragraph 122

Concern is expressed with respect to the limited availability of programmes and services and the lack of adequate disaggregated data in the area of adolescent health, including teenage pregnancy, abortion, HIV/AIDS and STDs, alcohol, drug and substance abuse, including tobacco use, violence and mental health.

Paragraph 123

Efforts to promote adolescent health policies and child-friendly counselling services should be increased and reproductive health education should be strengthened, including the promotion of acceptance by men of the use of contraceptives. A comprehensive and multidisciplinary study should be undertaken to ascertain the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. Additionally, it is recommended that the State party take further measures, including the allocation of adequate human and financial resources, to increase the number of social workers and psychologists, and to develop youth-friendly care and rehabilitation facilities for adolescents.

• Jordan, CRC, CRC/C/97 (2000) 31 at paras. 195 and 196.

Paragraph 195

In light of article 24 of the Convention, concern is expressed about problems involving waste treatment and poor access to safe drinking water and adequate sanitation, particularly in rural areas, which negatively impact upon the health of children.

Paragraph 196

In light of article 24 (c) of the Convention, all appropriate measures should be taken, including through international cooperation, to prevent and combat the damaging effects of environmental pollution and contamination of water supplies on children, and to strengthen procedures for inspection. Collection of data on access to clean water and sanitation is encouraged.

• Norway, CRC, CRC/C/97 (2000) 43 at paras. 245, 246 and 250.

Paragraph 245

Concern is expressed about the high incidence of anorexia nervosa and bulimia and by the prevalence of alcohol consumption among adolescents. Concern is also expressed about the continuing incidence of suicide by children, especially boys.

Paragraph 246

Efforts should be continued to address cases of anorexia nervosa and bulimia which are both medical and psychological problems. In addition, note is taken of the efforts made to reduce the level of alcohol consumption among adolescents. The State party should continue to promote a healthy life style among adolescents. Further, recognizing that it can be difficult to identify all cases of suicide by children, research into the incidence and causes of child suicide, including by children under the age of 10, should be continued, and the results of this research should be used to inform and further develop the State party's 1994 suicide prevention programme.

Paragraph 250

The State party is encouraged to explore ways of providing children with more timely access to mental health services, and to address in particular the shortage of psychiatrists and psychologists.

• Kyrgyzstan, CRC, CRC/C/97 (2000) 51 at paras. 310 and 311.

Paragraph 310

The deterioration in the health of the most vulnerable groups, especially women and children, is a concern. In particular, note is taken of the increase in the incidence of communicable diseases, including vaccine-preventable diseases, and in childhood malnutrition. Moreover, concern is expressed that because of distant facilities and insufficient numbers of personnel and medication, children in rural regions suffer most.

Paragraph 311

It should be ensured that the commitment to primary health care, including implementation of the Integrated Management of Childhood Illnesses strategy, is met by adequate allocation of

resources, both human and financial, and that all children, especially from the most vulnerable groups, have access to health care. The State party should undertake awareness-raising campaigns to ensure that families, especially refugee families, are adequately informed of the need to be registered in polyclinics. Comprehensive family planning programmes, as well as measures to ensure that abortion is not perceived as a method of contraception should be established. The State party is encouraged to continue cooperation with and seek assistance from, among others, UNICEF and WHO.

See also:

- Tajikistan, CRC, CRC/C/100 (2000) 53 at paras. 305 and 306.
- Cambodia, CRC, CRC/C/97 (2000) 64 at paras. 376 and 377.

Paragraph 376

The measures taken for the prevention of HIV/AIDS and the care of infected persons are noted. Deep concern is expressed about the fact that the State party has the fastest growing rate of HIV/AIDS infection in the region and that children are among the most affected groups, in particular due to mother-to-child transmission.

Paragraph 377

The State party should continue to take effective measures for the prevention of HIV/AIDS, including awareness-raising and educational campaigns. The State party should take into consideration the Committee's recommendations adopted on its day of general discussion on children living in a world with HIV/AIDS (CRC/C/80). International technical assistance from UNICEF, WHO and UNAIDS, among others, should continue to be requested in this regard.

• Suriname, CRC, CRC/C/97 (2000) 84 at paras. 493 and 494.

Paragraph 493

Concern is expressed with respect to the limited availability of programmes and services and the lack of adequate data in the area of adolescent health, including on accidents, violence, suicides, mental health, teenage pregnancy, abortion, HIV/AIDS and STDs.

Paragraph 494

The State party should increase its efforts in promoting adolescent health policies and counselling services and in strengthening reproductive health education, including the promotion of contraceptive use by men. A comprehensive multidisciplinary study should be undertaken to improve understanding of the scope of adolescent health problems, including the special situation of children infected with, affected by or vulnerable to HIV/AIDS and STDs. The State party is encouraged to reinforce its efforts in implementing the Caribbean Regional Health and Family Life Education Programme for adolescents by allocating adequate financial and human resources.

• Djibouti, CRC, CRC/C/97 (2000) 96 at paras. 550 and 551.

Paragraph 550

The poor health status of children in Djibouti is of concern. In particular, concern is expressed the high rates of infant and under-five mortality, maternal mortality, child malnutrition and smoking. While welcoming the adoption of baby-friendly hospital initiatives, the Committee is also concerned about the risk of mother-to-child transmission of HIV, given the high rates of HIV infection. The decline in spending on the health sector and the reduction in vaccination coverage is regretted.

Paragraph 551

The State party is encouraged to increase its efforts in the health sector, including through the strengthening of data collection and disease surveillance mechanisms, the allocation of adequate resources and the reinforcement of training and support for health sector staff. The State party should ensure equitable access to existing health-care services, make every effort to increase vaccination coverage, including by ensuring the maintenance of a cold chain, and undertake effective collection and recording of data in this respect. Effective measures should be taken to provide information and support to HIV-infected mothers to prevent HIV transmission, in particular by providing safe alternatives to breastfeeding. It is recommended that the State party address the social factors preventing vulnerable groups (including women and children) from seeking health care, and that particular efforts be made to reach refugee and displaced children and those living on the streets. The State party is urged to develop effective partnerships with NGOs and civil society groups, and to seek the technical assistance of United Nations agencies such as WHO and UNICEF in this respect.

Paragraph 564

Concern is expressed about the high and increasing involvement of children in the production, trafficking and consumption of psychotropic drugs (and especially of *khat*), and about the impact on children of widespread *khat* consumption in the State party which affects families and the entire society.

Paragraph 565

In view of articles 33 and 39 of the Convention, the State party is urged to take all appropriate measures to prevent the involvement of children in the production, trafficking and consumption of *khat* and other psychotropic drugs as well as to provide care and rehabilitation, and to pay particular attention in this regard to vulnerable groups, including children who drop out of school, live on the streets, or work in the port area. The State party is encouraged to seek technical assistance from UNICEF and WHO, among others, and to involve children in the design, implementation and evaluation of relevant strategies, and to continue its cooperation with the United Nations Drug Control Programme in this regard.

• Burundi, CRC, CRC/C/100 (2000) 17 at paras. 139-142.

Paragraph 139

The low immunization rate, the high levels of malnutrition and micro-nutrition deficiencies and the extremely poor health conditions among children in general, and particularly in camps, are matters of deep concern. Further, the Committee is concerned at high mortality rates among children, high maternal mortality rates, at low investment in health care, the limited number of hospitals and health centres that are operational, the limited drug supply and relatively high cost of medicines, including generic drugs, and the concentration of medical professionals in Bujumbura city.

Paragraph 140

The State party is urged to make significant increases in the health budget, to make every effort to improve public health, including primary health care, and to ensure adequate access for all children to health services, with particular regard to those living in rural communities and in camps. It is recommended that the State party implement integrated policies and programmes for the management of childhood illnesses and measures to improve child and maternal health. The State party should seek the assistance of UNICEF and WHO in this regard.

Paragraph 141

The lack of a comprehensive policy regarding the protection of social welfare, and that such protection is not equally accessible to the children of parents who are not employed in the civil service, are matters of concern.

Paragraph 142

In light of article 26 of the Convention, efforts should be strengthened to extend the protection of social welfare to all sectors of the population, including through systems such as the health insurance card.

• Marshall Islands, CRC, CRC/C/100 (2000) 89 at paras. 527-530.

Paragraph 527

The survival and development of children within the State party continues to be threatened by illnesses caused by inadequate sanitation, hygiene and diet, and vitamin A and iodine deficiencies are widespread. Concern is also expressed about the insufficient number of local trained health workers; wide discrepancies in the distribution of health professionals between communities; limited access to health services in the outer island communities; and poor sanitation and limited access to safe drinking water, particularly in recently developed urban areas and the outer islands communities.

Paragraph 528

The State party should allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of children and facilitate greater access to primary health services. The State party is encouraged to continue its efforts to reduce the incidence of child and infant mortality and to undertake additional measures to increase access to safe drinking water and to improve sanitation. Further, with reference to the lack of trained local health workers and the tendency for these workers to emigrate, the State party should reinforce its efforts to recruit and train more health workers and take appropriate measures to encourage those trained abroad to return after their training and practice in the Marshall Islands, in particular in the outer islands.

Paragraph 529

Concern is expressed at the increasing number of cases of malnutrition, due to overcrowding in urban areas and the importation of food having high levels of sugar and fat, and at the low levels of breastfeeding.

Paragraph 530

It is recommended that the State party strengthen its nutrition programme in order to prevent and combat malnutrition and assess the impact of the programme on those affected with a view eventually to improving its effectiveness, in particular by encouraging healthier nutritional habits. The National Nutrition and Children's Council is encouraged to continue its work on a national breastfeeding policy.

• Comoros, CRC, CRC/C/100 (2000) 110 at para. 633.

The State party should study and effectively address the health problems of adolescents, in particular in the area of reproductive health education and the prevention of teenage pregnancies.

• Latvia, CRC, CRC/C/103 (2001) 9 at paras. 62, 63, 66 and 67.

Paragraph 62

While noting that the State party started a process focusing on preventive health care, the situation of maternal, child and reproductive health is poor. In particular, it is noted with concern that infant mortality rates are high. Child morbidity, in particular the high incidence of tick-induced encephalitis and diphtheria is a concern. It is noted that the immunization programme has been delayed because sufficient funds were not available and that it is no longer available in schools.

Paragraph 63

Appropriate resources should be allocated and comprehensive policies and programmes developed to improve the health situation of all children, without discrimination. With reference to the immunization programme, the State party should look to international cooperation for support in the manufacture and procurement of vaccines.

Paragraph 66

The rise in the number of children and youths using drugs, alcohol and tobacco is of concern. The increase in cases of sexually transmitted diseases (STDs) and HIV/AIDS among youth, and the growing use of abortion as a method of birth control is also of concern. The limited availability of programmes and services in the area of adolescent health, including mental health, is noted. The lack of sufficient prevention and rehabilitation information, especially on reproductive health in the schools, is also noted.

Paragraph 67

Efforts to promote adolescent health should be increased, including mental health policies, particularly with respect to alcohol consumption, substance abuse and reproductive health, and a programme for health education in schools developed. A comprehensive and multidisciplinary study should be undertaken to understand the scope of adolescent health problems, including the negative impact of STDs and HIV/AIDS, in order to be able to develop adequate policies and programmes. It is also recommended that the State party undertake further measures, including the allocation of adequate human and financial resources, to evaluate the effectiveness of training programmes in health education, in particular as regards reproductive health, and to develop youth-friendly counselling, care and rehabilitation facilities that are accessible, without parental consent when this is in the best interests of the child.

• Ethiopia, CRC, CRC/C/103 (2001) 24 at paras. 168, 169, 178 and 179.

Paragraph 168

Deep concern is expressed at the extremely high infant mortality rates and low life expectancy in the State party. In particular, concern is expressed at the high incidence of malaria and tuberculosis and their effects upon children, at the fragile health infrastructure, limited health awareness among the public and the limited implementation of the 1993 Health Policy and the 1994 Social Policy. The implementation of health policies has been slow and only limited progress has been achieved in this area.

Paragraph 169

The State party is urged to ensure that access to primary health care services is increased, that the national health infrastructure is strengthened and that public health education programmes are used to lower infant mortality rates and raise life expectancy in the State party. Assistance should be sought from the World Health Organization, UNICEF and the United Nations Development Programme in this regard.

Paragraph 178

It is of concern that there is inadequate information on mental health related problems, and insufficient mental health care facilities, in the State party.

Paragraph 179

The State party should make further efforts to gather information on the mental health situation in Ethiopia, to improve mental health services and to increase the numbers of mental health personnel.

• Egypt, CRC, CRC/C/103 (2001) 36 at paras. 236 and 237.

Paragraph 236

The high incidence of anaemia and parasitic infections among children, particularly in rural areas is of concern.

Paragraph 237

The State party should improve its health infrastructure and continue to cooperate and seek assistance from UNICEF and WHO, among others.

• Lithuania, CRC, CRC/C/103 (2001) 47 at paras. 286 and 287.

Paragraph 286

The high rates of child morbidity, in particular the increase in cases of tuberculosis, and the low rates of breastfeeding are matters of concern. Further, it is noted that there is a high rate of child deaths due to traumas and accidents, in particular motor vehicle accidents, and that children are

particularly vulnerable to the ill effects of contaminants in the soil and air. The growing rates of suicide among children and youth are noted with concern.

Paragraph 287

The State party should allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of all children, including measures aiming at a safe and healthy environment. Further, measures to raise awareness about and prevent deaths from accidents and suicide among children and youth should be taken and enforced.

• Lesotho, CRC, CRC/C/103 (2001) 57 at paras. 353 and 354.

Paragraph 353

The poor health situation of children in the State party is noted with concern, particularly the limited access to basic health care for children (especially in rural and mountainous areas), high maternal, child and infant mortality rates, low and decreasing immunization levels, high rates of malnutrition, poor sanitation and limited access to safe drinking water, especially in rural communities. The health risk linked to male circumcision is also a matter of concern. Concern is also expressed about the low and decreasing number of trained health personnel, including mental health and social welfare professionals, which is contributing to the insufficient provision of essential services.

Paragraph 354

It is noted that the State party is currently reviewing its Social Welfare Policy. The State party is urged to pursue its efforts to ensure that the new policy covers all groups of vulnerable children. The State party should ensure that the policy provides an effective basis for addressing the challenges of poverty and HIV/AIDS. Appropriate resources should be allocated and comprehensive policies and programmes should be developed to improve health infrastructure, to increase the number of trained health and welfare, including mental health, professionals, to improve the health situation of children, to facilitate greater access to primary health services, to reduce the incidence of maternal, child and infant mortality, to prevent and combat malnutrition, especially in vulnerable and disadvantaged groups of children, and to improve access to safe drinking water and sanitation. Health risks associated with male circumcision should also be addressed.

• Palau, CRC, CRC/C/103 (2001) 79 at paras. 464 and 465.

Paragraph 464

The decline in breastfeeding, especially among working mothers, is of concern. Increasingly poor nutrition practices and food choices are noted with concern, including within the school

lunch programme, as well as the high incidence of overweight and obesity among children, especially those living in urban areas. It is noted that abortion is illegal except on medical grounds and concern is expressed regarding the best interests of child victims of rape and/or incest in this regard. Concern is also expressed about the inadequate environmental health conditions in the State party, particularly as regards solid waste management.

Paragraph 465

The State party should reinforce its efforts to promote proper breastfeeding practices, especially among working mothers and in the work environment. All appropriate measures to promote and encourage healthy nutritional practices should be taken in order to prevent and address overweight and obesity among children. Legislation concerning abortion should be reviewed with a view to guaranteeing the best interests of child victims of rape and incest. Solid waste management should be improved.

• Dominican Republic, CRC, CRC/C/103 (2001) 91 at paras. 516 and 517.

Paragraph 516

While taking note of achievements in the area of basic health and welfare, the very high infant and under-five mortality rates and the prevalence of malnutrition among children remain of concern. Concern is also expressed at the limited access to health centres, in particular in rural areas. The persistence of health problems related to insufficient access to safe water and sanitation are also matters of concern.

Paragraph 517

All appropriate measures should continue to be taken to improve the health infrastructure, including through international cooperation, to ensure access to basic health care and services for all children and to increase access to safe drinking water and sanitation. More concerted efforts need to be taken to combat malnutrition and to ensure the adoption and implementation of a national nutritional policy and action plan for children.

• Denmark, CRC, CRC/C/108 (2001) 10 at paras. 68 and 69.

Paragraph 68

While noting efforts already made by the State party, concern remains about the health problems faced by adolescents, particularly the high incidence of eating disorders, especially among teenage girls; drug, alcohol and tobacco abuse; and suicide.

Paragraph 69

The State party should reinforce its efforts to address these adolescent physical and mental health concerns, through preventive education, counselling and rehabilitative programmes to strengthen self-confidence among you people and prevent behaviour that could negatively affect their health.

• Turkey, CRC, CRC/C/108 (2001) 18 at para. 108.

The general principles of the Convention, in particular the provisions of articles 2, 3, and 12, should be appropriately integrated into all relevant legislation concerning children and applied in all political, judicial and administrative decision, as well as in projects, programmes and services which have an impact on children. These principles should guide planning and policy-making at every level, as well as actions taken by social and heath welfare institutions, courts of law and administrative authorities.

• Democratic Republic of the Congo, CRC, CRC/C/108 (2001) 31 at paras. 205 and 206.

Paragraph 205

The practice of female genital mutilation and the existence of food taboos, such as that which forbids children and mothers from eating certain essential food items, are matters of concern.

Paragraph 206

In light of article 24 of the Convention, the State party should prohibit and take action to end the practice of female genital mutilation, and raise awareness of its harmful effects. The State party should eliminate harmful food taboos by promoting awareness about their detrimental effects on the health of children and women. Assistance should be sought from WHO and UNICEF in this regard.

• Guatemala, CRC, CRC/C/108 (2001) 47 at paras. 269 and 270.

Paragraph 269

It is noted that the State party has implemented a number of food and nutrition programmes for children in schools, such as the "Happy Heart" programme. However, by noting the high rates of both chronic and severe malnutrition still affecting, in particular, children under five in rural areas, especially those belonging to indigenous groups, deep concern is expressed that there are no governmental policies to reduce and combat malnutrition among babies and children under five.

Paragraph 270

The Committee reiterates its prior recommendation that the State party develop a comprehensive nutritional programme in order to prevent and combat malnutrition, particularly among children under five, and assess the impact of the programme on those affected, with a view eventually to improving its effectiveness. It is recommended that the State party seek international cooperation from, among others, UNICEF and WHO.

• Côte d'Ivoire, CRC, CRC/C/108 (2001) 59 at paras. 327 and 328.

Paragraph 327

Insufficient attention has been given to adolescent health issues, including developmental, mental and reproductive health concerns, and substance abuse. Also of concern is the particular situation of girls, for instance the very high rate of early marriage, which can have a negative impact on their health.

Paragraph 328

A comprehensive study should be undertaken in order to understand the nature and extent of adolescent health problems, with the full participation of adolescents, and it should be used as a basis for the formulation of adolescent health policies and programmes, with particular attention to female adolescents.

• United Republic of Tanzania, CRC, CRC/C/108 (2001) 71 at paras. 398 and 399.

Paragraph 398

While noting the reforms under way in health care, including the introduction of the integrated management of childhood diseases (IMCI), concerns remain about the limited access to basic health care, related largely to the introduction of user fees in health; the insufficient number of trained medical personnel; the high incidence of malaria; high maternal, child and infant mortality rates; a high rate of malnutrition; poor sanitation and limited access to safe drinking water, especially in rural areas.

Paragraph 399

The State party should allocate appropriate resources and develop comprehensive policies and programmes to improve the health situation of children. Additionally, all effective measures should be taken to: facilitate greater access to health services by abolishing or rationalizing user fees in primary health to reduce the burden on poor families; increase the number of trained medical and other health personnel, including traditional healers; facilitate cooperation between trained medical personnel and traditional healers, especially midwives; reduce the rates of maternal, child and infant mortality; prevent and combat malnutrition, especially in vulnerable

and disadvantaged groups of children; increase access to safe drinking water; improve sanitation; and reduce the incidence of malaria. The State party is encouraged to continue its cooperation through the IMCI and other measures for child health improvement with, among others, WHO and UNICEF.