Committee on the Rights of the Child

Consideration of reports submitted by States parties under article 44 of the Convention

Third and fourth periodic reports of States parties due in 2010

Kyrgyzstan* **

[16 August 2010]

* In accordance with the information transmitted to States parties regarding the processing of their reports, the present document was not formally edited before being sent to the United Nations translation services.

** The annexes can be consulted in the files of the secretariat.
Combined third and fourth report of the Kyrgyz Republic, submitted under article 44 of the Convention on the Rights of the Child, due in 2010
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<tr>
<td>ADB</td>
<td>Asian Development Bank</td>
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<tr>
<td>DFID</td>
<td>Department for International Development (United Kingdom)</td>
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<td>GFATM</td>
<td>Global Fund to Fight AIDS, Tuberculosis and Malaria</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>NGO</td>
<td>non-governmental organization</td>
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<td>OSCE</td>
<td>Organization for Security and Cooperation in Europe</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNHCR</td>
<td>Office of the United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>UNIFEM</td>
<td>United Nations Development Fund for Women</td>
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<td>USAID</td>
<td>United States Agency for International Development</td>
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<td>WHO</td>
<td>World Health Organization</td>
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I. Introduction


2. On 23 September 2004 the Committee on the Rights of the Child (hereinafter, the Committee) considered the second periodic report of Kyrgyzstan on implementation of the Convention on the Rights of the Child (CRC/104/Add.4) and on 1 October 2004 adopted its concluding observations. Kyrgyzstan received the concluding observations of the Committee following consideration of the country’s initial report on the implementation of the Optional Protocols (CRC/C/15/Add.127).

3. Since October 2004 the country has done much to improve legislation and law-enforcement procedures aimed at strengthening national measures to implement the Convention and the recommendations of the Committee by the time of the second national report.

4. Pursuant to article 44 of the Convention, Kyrgyzstan presents for the Committee’s consideration the third and fourth reports on the measures taken to implement the provisions of the Convention.

5. The present report contains information covering the period 2002-2009. It was prepared under the auspices of the Child Protection Department affiliated to the Ministry of Labour, Employment and Migration of Kyrgyzstan (MLEM) and with the active participation of government structures, NGOs and international organizations. Technical support in the preparation of the report was provided by UNICEF.

6. Pursuant to the requirements of the Committee, the report includes additional information regarding the implementation of the Optional Protocols on the involvement of children in armed conflict and the sale of children, child prostitution and child pornography.

7. This document has been prepared with due regard for the concluding observations of the Committee on the second periodic report submitted by Kyrgyzstan on implementation of the norms specified in the Optional Protocols.

8. The report draws on data received from the ministries and departments responsible for matters pertaining to the situation of children and the safeguarding of their rights, as well as from NGOs and international organizations working with children. It provides information on the measures taken in the reporting period to fulfill the country’s obligations under the Convention, the progress made, the difficulties encountered and plans for further work.

9. The baseline information used in this report has been provided by the Ombudsman, the Procurator-General’s Office, the National Statistical Committee (NSC), the Supreme Court, the National Security Service, the Ministry of Justice, Ministry of Internal Affairs (MIA), Ministry of Defence, Ministry of Finance, Ministry of Economic Regulation, Ministry of Labour, Employment and Migration, Ministry of Health, Ministry of Education and Science, and the Government-affiliated State Agency for Social Welfare, State Agency for Environment Protection and Forestry and State Agency for Cultural Affairs.

10. The report complies with the compilation of guidelines governing the form and content of reports to be submitted by States parties to international human rights treaties and with the additional requirements of the Convention.
11. The report also analyses the principal legislation that has been adopted in Kyrgyzstan during the period under review to give effect to the provisions of the Convention and the Optional Protocols thereto.

12. The annexes to the report contain statistical tables, a list of laws and regulations, and other relevant information.

13. The report has been the subject of an extensive UNICEF-sponsored nationwide debate among State agencies, local authorities, civil society and international organizations, featuring six round tables with 172 participants, whose suggestions and observations have been included in the final version of the report.


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

A. Improvement of legislation

15. Pursuant to the recommendations of the Committee (CRC/C/15/Add.127, para. 38), Kyrgyzstan has amended legislation and adopted enactments regulating children’s issues. The adoption of the Children’s Code (hereinafter, the Code) on 7 August 2006 marked a major step towards incorporating into domestic legislation the norms of the Convention on the Rights of the Child and the recommendations of the Committee (248, 249, 250). As a result, all the provisions of the Convention on the Rights of the Child (hereinafter, the Convention) and both Optional Protocols were included in domestic legislation without reservation or exception. The Code establishes the fundamental guarantees of children’s rights, freedoms and lawful interests as enshrined in the Constitution, the Convention and international treaties to which Kyrgyzstan is party that have duly entered into force. By adopting the Code, the Government undertakes to review existing procedures for working with children, as well as the services provided for them, and is required for the first time to establish the basic quality standards essential for child protection and welfare. In accordance with the Code, the Ombudsman’s Office is called upon to set up a subsidiary body tasked with ensuring that children enjoy legal protection. The Code also provides for the setting up of a government agency responsible for implementing the Code, whose objectives are to protect the civil, political, economic, social and cultural rights of children, as well as their lawful interests and freedoms. The Code is designed to regulate the rights and interests of children and to specify the child protection principles and procedures safeguarding their rights, to establish the rights of the child guaranteed by the State, to facilitate the activities of the appropriate agencies and organizations responsible for protecting the rights and lawful interests of the child, to determine the areas of competence of State and municipal bodies charged with safeguarding and protecting children’s rights, as well as the procedures for their interaction. The Code is founded on the following principles:

• Recognising the precedence of children’s rights and interests as enshrined in law;
• Ensuring non-discrimination based on a child’s, his/her parent’s or legal guardian’s race, colour, sex, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status;
• Affording precedence to the protection and care of children with a view to ensuring their optimum welfare;
Respecting and safeguarding the rights and freedoms of the child as an equal member of society;

Upholding the child’s right to be consulted and his/her views to be taken into account in matters concerning the child;

Protecting the child from all forms of physical and psychological violence, humiliation or abuse, neglect or negligent treatment and all forms of exploitation;

Respecting the rights and duties of parents and persons acting in their stead who are responsible for the child’s education in accordance with his/her evolving capacities;

Providing State support for the family in order to guarantee children a full education, protect their rights and interests and prepare them to be productive members of society;

Raising the awareness and sensitivity of parents, persons acting in their stead and society with regard to children’s rights and special needs;

Decentralising child protection services and promoting partnerships between State and NGOs concerned with protecting children’s rights and interests;

Calling to account national and local government officials and citizens who harm children and violate his/her rights, freedoms and legitimate interests;

Ensuring that the care, upbringing and education of the child is stable and consistent and that protective measures take into account his/her ethnic, religious and cultural origin;

Safeguarding and protecting the rights and freedoms of the child on the part of the State, society and the family;

Ensuring that parents and persons acting in their stead fulfill their duty to ensure the proper development of the child, according special emphasis to his/her best interests.

Pursuant to the recommendations of the Committee (248, 249, 250), the Code also sets out guidelines to regulate adoption and the raising of children by foster parents (art. 29), the protection of street children (art. 28), compliance with child employment legislation (art. 4), the protection of children from sexual exploitation (art. 25), the safeguarding of reproductive health (art. 38) and juvenile justice (art. 48). After the Code was adopted, amendments and additions were made to the Family Code of the Kyrgyz Republic concerning adoption (art. 172) and other laws and regulations. Details of these legislative acts are provided in the appropriate sections of this report.

16. The Code defines the term “juvenile justice” as the set of procedures applicable to children aged 14 to 18 who are in conflict with the law, including issues such as the administration of justice and social rehabilitation (art. 47). These procedures are regulated by the appropriate criminal and criminal procedure legislation. Juvenile justice in Kyrgyzstan is based on the following principles:

- That measures restricting the rights and freedoms of children in conflict with the law be applied only in exceptional circumstances;
- That children be helped to develop feelings of self-esteem and self-worth;
- That the child be reintegrated into society;
- That the needs of the child be addressed when encouraging him/her to assume a constructive role in society.

Given that Kyrgyzstan recognises the norms of international law, and specifically those of the Convention, children are to be placed in pre-trial detention facilities and imprisoned...
only as a measure of last resort and for the shortest possible duration commensurate with
the punishment. Pursuant to the Code, the creation of mechanisms for implementing
legislation applicable to children in conflict with the law has been made the responsibility
of a working group set up by presidential order No. 313 issued on 19 September 2006. The
group has prepared draft juvenile justice bills with the aim of amending the Children’s
Code, as well as the Criminal Code, the Criminal Procedure Code and Criminal
Correctional Code. In 2008 this draft legislation was examined by international experts to
determine compliance with the international standards spelled out in the Convention on the
Rights of the Child, the United Nations Guidelines for the Prevention of Juvenile
Delinquency (the Riyadh Guidelines), the United Nations Rules for the Protection of
Juveniles Deprived of Their Liberty, the United Nations Standard Minimum Rules for the
Administration of Juvenile Justice (the Beijing Rules) and the Havana Rules. The working
group proposed that a national coordinating council on juvenile justice be set up to promote
coopération between courts, government agencies, local authorities, law-enforcement
agencies, correctional organizations and institutions and those operating within the child
neglect and juvenile delinquency prevention system and NGOs concerned with introducing
and developing juvenile justice in Kyrgyzstan, improving juvenile court procedure,
developing restorative justice and establishing a national model of probation and permanent
social support procedures for minors in conflict with the law. The primary tasks of the
council are:

- To implement measures to protect and restore the rights and lawful interests of
  minors in conflict with the law;
- To interact with public associations and other relevant bodies working to prevent
  minors from committing offences and engaging in antisocial activities;
- To implement measures to coordinate the activities of courts, law-enforcement
  agencies, correctional organizations and institutions and those operating within the
  child neglect prevention system, as well as other relevant organizations and
  associations concerned with introducing juvenile justice; to reduce recidivism
  among young offenders;
- To enhance the capacity of judges specializing in juvenile justice, of law-
  enforcement agencies, State and municipal authorities and other organizations
  working with children and adolescents at risk;
- To introduce probation as part of the municipal system involving work with young
  people at risk. During the initial phase there are plans to create a coordinating
  council on juvenile justice under the auspices of the Supreme Court.

With UNICEF support a juvenile justice guidance manual has been prepared for judges and
employees of the Ministry of Internal Affairs, the prosecutor’s office and the legal
profession specializing in this field. In 2009 the manual was used to train instructors at the
Judges Study Centre, the Prosecutors Career Development Centre, the Academy of the
Ministry of Internal Affairs, the Law Academy, and the Advocates Training Centre. In
2010 the instructors launched individual study programmes and permanent courses on
juvenile justice for students. A juvenile justice resource centre was set up, for example, at
the Academy of the Ministry of Internal Affairs, enabling trainees to acquire a basic
knowledge of the subject.

17. In line with the recommendations of the Committee (255), under the Children’s
Code the powers of the Ombudsman have been expanded in order to address individual
complaints from children. An independent national human rights institution, the
Akyikatchy (Ombudsman), is authorised by law to investigate violations of civil rights and to demand that State and municipal officials take action to enforce them. The Ombudsman submits an annual report to Parliament specifying violations of civil rights and freedoms that have occurred, which, by making them public, encourages critical analysis of the applicable legislation and furthers its alignment with international law. In accordance with article 12 of the Code, the Ombudsman is authorized to take action to safeguard the rights and freedoms of children, monitors enforcement by State and local authorities of the rights and lawful interests of children, works to prevent violations of their rights and freedoms, including discrimination of any kind, and assists in restoring their rights and freedoms and in raising awareness of their enshrinement in law. As specified in the Code, the Ombudsman’s powers also include:

- Investigating petitions and complaints submitted by children or other persons concerning violations of children’s rights and informing the petitioner (petitioners) of the results of the investigation;
- Informing the appropriate government agencies, including the procurator’s office, of violations of children’s rights and lawful interests, with the demand that they be investigated forthwith;
- Visiting at any time juvenile detention facilities, juvenile pre-trial detention centres and similar institutions where children are serving time, juvenile compulsory treatment and rehabilitation centres, obtaining information on the conditions of their confinement and verifying documentation regarding the legality of their detention;
- Attending courts of all instances in session with the prior agreement of the defendant and with due regard for the applicable procedural laws;
- Petitioning a court with respect to the rights and freedoms of children who, due to disability or for another valid reason, are unable to speak on their own behalf, and participating directly or through a representative at a trial in accordance with the cases and procedures provided by law;
- Sending to the relevant bodies response action reports detailing the measures to be taken by them in cases where children’s rights and freedoms have been violated;
- Verifying the enforcement of children’s rights and freedoms by the relevant State agencies, including those conducting investigations.

18. With a view to regulating child protection issues, prioritising child welfare and reducing child poverty, government order No. 613-R of 19 October 2009 provides for an inter-agency action plan for reforming the child protection system and improving social services in the period 2009-2011. The Government has tasked all ministries, State committees, administrative agencies, other executive authorities, local central-government agencies and local authorities with ensuring that national and local budgets covering the period in question contain sufficient funds to implement the initiatives stipulated in the plan and are able to finance them as scheduled.

19. Even though a conspicuous effort has been made to improve legislation in compliance with the Convention, procedures for implementing the regulations adopted have yet to be put in place. Thus, while draft legislation on juvenile justice has been prepared, assessed by international experts and submitted by sponsors, it has not been reviewed and approved by Parliament. Specialists believe that this is because bodies operating within the child protection system, including law-enforcement agencies, require significant procedural changes and institutional reform, which necessarily entails considerable expenditure. The

establishment and operation of a child protection system is impeded by the fact that there are no special regulations governing the structure, functions and standards of juvenile justice as components of a unified system. Moreover, the country’s child protection system is still in its formative stage. Sporadic reorganisation, attempts to organise it under the auspices of different ministries and departments, limited powers, lack of local infrastructure and a dearth of funding and human resources have proved obstacles to achieving significant results in the area of child protection. The short interval between the time the Code was adopted and the setting up of a special child protection service should also be cited as a factor.

B. Coordination of child protection policies and procedures

20. Pursuant to the recommendations of the Committee (252), the Children’s Code establishes a mechanism and infrastructure for coordinating the policies and actions of government agencies and non-governmental and international organizations in respect of children’s rights. In compliance with the Code, the Child Protection Department was set up within the State Agency for Physical Culture and Sport, Youth Affairs and Child Protection, which reports to the Government. As the designated agency for the protection of the rights and interests of children, the Department implemented the service provision tasks prescribed by the Code. At government level it was coordinated by the Child Protection Sector, a unit of the Government Executive Office’s education, culture and sport department that was created in 2008. Pursuant to the presidential decree of 26 October 2009, the Department was transferred to the Ministry of Labour, Employment and Migration as a policy implementation body, while the functions performed by the Child Protection Sector in the areas of policymaking and the drafting of laws and regulations were assigned to the MLEM unit responsible for youth affairs, child protection and gender issues. As of 1 April 2010, the structure of State child protection agencies consisted of the following organizations (departments):

(a) At the national level, overall coordination of child protection issues is carried out by MLEM. The main government agency responsible for implementing child protection policies is the Child Protection Department, which is attached to MLEM.

(b) A number of ministries and departments formulate State and departmental policies within their areas of competence and also ensure that their own subdivisions comply with the principal provisions of the Code pertaining to the functions of these organizational units at the national and regional level (oblast, municipal, district and village): the Ministry of Education and Science, the Ministry of Health, the Ministry of Internal Affairs, the State Agency for Social Welfare, the MLEM-affiliated State Agency for Vocational Education, and other organizations.

(c) At the oblast level, social issues, including child protection, are the responsibility of the deputy heads of government agencies. At the district and local government level (in towns and cities of national and oblast status), the task of coordinating and implementing the Convention is carried out by the regional government agencies and executive and administrative bodies of local authorities or town councils, which operate the departments for family and child support (FCSDs) and have also set up commissions on children’s affairs (CCAs).

Rural districts are served by a senior social protection specialist.

21. Pursuant to the Code (art. 17), in 2008 local departments for family and child support were set up within district and town council administrations in accordance with government decision No. 285 of 10 June 2008 on safeguarding the rights and interests of children. These departments are tasked with developing the system of services and
coordinating the activities of government institutions and organizations dealing with family and child issues at the district or municipal level. FCSDs are government units and report to the akim (mayor). Thus, the situation of children and the provision of appropriate services were made the responsibility of local government agencies. All FCSD decisions are submitted for approval to a commission on children’s affairs and ratified by a resolution passed by a government agency, thus allowing for a collective decision on each individual case concerning a child. There is still a need for FCSD and CCA staff to be provided with systematic training, however.

22. Coordination issues involving children’s rights fall within the competence of commissions on children’s affairs (art. 13 of the Code). Pursuant to government decision No. 285 of 10 June 2008, CCAs were established:

- Within local government executive and administrative bodies (town councils, municipal administrative boards) in towns not divided into districts;
- Within local government executive and administrative bodies divided into districts.

CCAs carry out their activities periodically and on a pro bono basis. They are chaired by the deputy head of a district government agency or a town’s vice-mayor. The work of these commissions is organized by a full-time secretariat and their status and composition, as well as the composition of the secretariat, is approved by the local government’s corresponding executive and administrative body or by the local government authority under whose auspices the commission was established. Their staff include representatives of the local organizations of departmental bodies responsible for safeguarding children’s rights and interests. They include:

- A representative of the internal affairs authority;
- A representative of the education and science authority;
- A representative of the health authority;
- A representative of the social security authority;
- A representative of the district government agency or local government executive and administrative body;
- Four representatives of civil society.

Representatives of civil society working for the commission are enlisted on the basis of their experience in child welfare and on the recommendation of at least two child welfare organizations.

23. A number of NGOs are involved in drafting and implementing national policy in compliance with the Convention. These include the following human rights NGOs: the Promotion of Children’s Rights Network, the Youth Human Rights Group, Children in Danger, the Law Centre, the Child Protection Centre and Adilet Legal Clinic. They also include service NGOs: the Alliance for Reproductive Health, the National Red Crescent Society, Ulgu, White Crane, Healthy Generation and so forth.

24. The findings of the Committee on the second periodic report of Kyrgyzstan (para. 252) regarding the system of coordination, as well as the limited resources available for these objectives under the “New Generation” programme, have not been fully implemented. It is probable that this has also impeded coordinated action on behalf of children between departments. A coordinating authority entitled the Sector for Family and Child Affairs was set up with UNICEF support within the Government Executive Office, as was an inter-agency commission for implementing the “New Generation” programme in the period up to 2010. This resulted in the development and adoption of the Code and the formation of local departments for family and child support and commissions on children’s
affairs following consideration of the results of a pilot project. Other outcomes included steps to create alternative forms of care for children in crisis situations, also based on a pilot scheme, the development and adoption of the Act on State Procurement of Public Goods and the initiation of quarterly reviews by ministerial and local government boards in order to assess progress. As a result of reforms to the government structure, the Sector’s functions have now been transferred to the Ministry of Labour, Employment and Migration. Given that existing legislation regulating the rights and lawful interests of children fails adequately to apportion and delineate the responsibilities of different government agencies both horizontally and vertically, MLEM is working to improve government organization of child protection with a view to coordinating more systematically the activities of the government agencies involved and those of non-governmental and international organizations.

C. Dissemination of information on the Convention and the Committee’s observations

25. Efforts to raise adult and child awareness of the principles and provisions of the Convention were described in detail in the second periodic report of Kyrgyzstan on the implementation of the Convention (para. 21) and these efforts continued during the reporting period. The second periodic report and the Committee’s observations, as well as information regarding the measures taken and the plan of action, are available (see art. 44, para. 6) to all implementing parties representing government and social organizations, as well as to donors. This information has been published in the mass media and on the Child Protection Department’s website in the official State languages. The report is based on the observations made by the Committee in respect of the previous report.

D. Allocation of budget and other resources

26. Data compiled by the National Statistical Committee show that in 2008 the poverty rate in rural and urban areas was 36.8 per cent and 22.6 per cent, respectively. In the period 2006-2008 the extreme poverty rate declined by almost 30 per cent, so that in 2008 it stood at 6.1 per cent. According to the Joint Country Support Strategy (JCSS), a combined initiative of five partners (Asian Development Bank, Swiss Cooperation Office, United Kingdom Department of International Development, the World Bank Group and United Nations agencies), 11 per cent of the population lived in extreme poverty and 43 per cent below the poverty line in 2007. Around half of the rural population lives in poverty, while the poor account for about 30 per cent of urban dwellers. Poverty in the regions, particularly rural areas, is attributable to the lack of infrastructure and employment opportunities. The switch to a market economy marked the end of a number of social safeguards such as full employment and access to free education and health care. The greater part of the population was negatively affected by the economic crisis, and most families with dependent children found themselves below the poverty line. Educational opportunities for economically disadvantaged families declined, as did access to health care and social services. In 2008, expressed in nominal terms as a percentage of GDP, funding allocated to key social sectors totalled:

- Social security: 2.8 per cent;
- Health care: 2 per cent;

• Education: 6.1 per cent.

The socio-economic situation has had a considerable impact on the country’s child protection system. Government financing of child protection schemes consists of the “New Generation” programme, as well as allocations to educational organizations and other branches of government assisting and supporting children in correctional facilities, in areas such as social protection and health care, and in matters involving the Ministry of Internal Affairs. Funding for these purposes is allocated from national and local government budgets and from other sources, including benefactors, donations, humanitarian assistance, and parent contributions. The Ministry of Finance reports that 14,038,000 soms were allocated from the national budget to the “New Generation” programme in the period 2005-2009, breaking down as follows:

• 2005: 4,523,500 soms;
• 2006: 183,700 soms;
• 2007: 4,201,600 soms;
• 2008: 568,200 soms;
• 2009: 4,561,000 soms.

27. As regards the funding of education, the period 2001-2008 witnessed a marked uptrend in State spending on supporting and developing the educational system, rising from 2,847,600 soms to 11,116,200 soms in 2008. Moreover, education spending makes up a quarter of the State budget, its share of GDP increasing 1.5 times during the period in question to total 6 per cent of GDP in 2008. The bulk of expenditure, 5,378,100 soms, or 58.2 per cent, is allocated to general education schools. Local authorities commit 5,336,100 soms, or 81.7 per cent of their budgets, to general education schools, spending a total 6,761,800 soms on all areas of education, of which 6,529,600 soms derive from budget funds. In addition, local spending on teachers’ wages is funded entirely with national government grants. As a result of changes in the way educational establishments are funded, budgeting for education is programme-based and dependent upon mid-term priorities. Furthermore, an experiment has been launched in per-capita funding of educational establishments. To ensure that education is affordable and of a high standard and that national budget allocations are made in full and on time, funding for children’s homes and special residential facilities has been maintained, with money from the Education Fund used to support students from economically disadvantaged families. Pursuant to presidential decree No. 372 of 12 July 2006 concerning the provision of meals to general education school pupils in grades 1-4 and government regulation No. 673 of 18 September 2006 ratifying regulations governing the provision of meals to pupils at general education schools, since 1 September 2006 all State and municipal schools have provided free meals to pupils in grades 1-4, allocating 5 soms per pupil (increased in 2008 to 7 soms and 14 soms in Bishkek). In order to overcome the shortfall of teaching staff and to encourage young teachers to work in rural areas, the State finances the Young Teacher Deposit programme, under which 3,000 soms are paid each month into individual deposit accounts and the accumulated funds may be withdrawn only after a teacher has worked at a school for three years. At the same time, educational grants are made available for students at higher teaching training institutes, with spending in this area accounting for 46 per cent of all educational grants. Since 2006 the Centralised Fund for Poverty Reduction has provided additional financing for the routine maintenance of general education schools, their computerisation, the publication of textbooks and the acquisition of equipment. In addition to budget funds for reforming the education sector, the country receives financial

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support from international financial institutions. The period 2001-2008, for example, saw the implementation of projects sponsored by the Asian Development Bank (Social Services Delivery and Finance, Education Sector Development, Improving Access to Quality Basic Education for Children with Special Needs, Vocational Education and Skills Training); and by the World Bank (Rural Education and Education for All). In 2001-2009 a total of 1,918,900 soms was committed to the aforementioned projects, 1,844,400 of this amount deriving from foreign sources under co-financing agreements.

28. United Nations agencies (UNFPA, UNDP, UNESCO, WHO) provide financial and technical support aimed at improving the reproductive health of the mother and child, aligning the practice of registering live births with WHO criteria (UNDP, WHO), developing HIV programmes (UNFPA, UNDP, UNESCO, WHO, the World Bank, USAID, GFATM), supporting child refugees (UNHCR, UNFPA), eradicating the worst forms of child labour (ILO), protecting and promoting children’s rights (OSCE) and improving sanitation (DFID). A number of international NGOs render support to children in difficult circumstances (Save the Children Denmark, Save the Children UK, EveryChild). The country receives assistance from the Government of the Russian Federation and the Aga Khan Fund to develop education, as well as humanitarian assistance from international organizations and national businesses for promoting sustainable diets and improving housing conditions. In accordance with its mandate, UNICEF is the principal organization concerned with child protection issues.

29. Interaction between the Government and UNICEF is underpinned by the Agreement on Co-operation signed on 26 October 1994. A third country programme of co-operation with UNICEF, scheduled to run from 2005 to 2010, is already underway. The priority task of the UNICEF mission to Kyrgyzstan is to ensure that children’s rights are implemented in compliance with the Convention and to support government efforts to establish a constructive environment conducive to improving the life of every child. A key component of UNICEF work involves providing technical support for the setting-up of a sector for family and child affairs within the Government Executive Office and for creating pilot projects designed to refine legislation and State policies in this area. UNICEF played an important role in formulating the Code and was instrumental in establishing the juvenile justice system and creating an infrastructure for protecting children at the local level. The second and third co-operation programmes operated by the Government and UNICEF in the periods 2000-2004 and 2005-2010 were aimed at safeguarding the health of mothers and children, affording access to quality education, protecting children and enhancing the well-being of young people, realising the rights of every child and achieving the Millennium Development Goals, including guaranteeing access to resources and quality social services. $10,576,000 and $8,562,000, respectively, were allocated for these programmes. Funding for the third programme is expected to reach $11 million. In the period 2005-2009 the third programme involved the following projects:

- Rendering the Government technical support in developing its programme of health-care reforms for 2006-2010. UNICEF helped to formulate the sections on maternal and child protection and reproductive health.

- Conducting nationwide multiple indicator cluster survey III (MICS III).

- Assisting in the procurement of vitamin A and improving the health of children aged 6 months to 5 years by vitamin fortification.

- Certificating half the country’s maternity homes, maternity wards and health clinics as “baby friendly”.

- Continuing work on universal salt iodization. Over 76 per cent of the population now uses salt enriched in compliance with international standards.
• Opening three early child development resource centres and producing reading materials in the Kyrgyz language for preschool children and their parents.

• Partnering the Government and NGOs on piloting alternative forms of child care at five of the country’s twelve children’s homes.

• Organizing regular workshops for teachers, school administrators, local government officials and representatives of civil society.

• Running an information campaign named “Every Child has the Right to Live in a Family”.

• Implementing awareness-raising initiatives in Talas District. The Ministry of Health and the Swiss Red Cross operated a joint UNICEF-sponsored project to change the dietary habits of pregnant and lactating women and of children under 2 years old.

• Rendering technical and financial support to economically disadvantaged families in partnership with the Ministry of Labour and Social Security.

• Rendering financial assistance to the Ministry of Health with a view to refining mechanisms for registering newborn children. Ministry personnel received training in this area.

• Preparing the Magic Journey project in partnership with the Aga Khan Fund, Asian Development Bank and National Television. Totalling over 250 episodes, the series is broadcast nationwide on public television, 60 minutes a week.

• Conducting various surveys, including raising HIV awareness among children and young people and disseminating information on violence against children in the home and family.

• Caring for children living with HIV and supporting measures to prevent mother-to-child transmission of HIV.

30. Programmes aimed at protecting children’s rights remain underfunded, particularly initiatives to help children with special needs (orphans, children from disadvantaged backgrounds, street and working children). Funding operates on an ad hoc basis, rather than through formally structured programmes. Owing to limited resources and a multitude of problems, the actions taken by the Government and other partners are fragmentary, inconsistent and targeted at isolated initiatives rather than at achieving an integrated, gradual solution to child protection issues based on meeting the immediate needs of the most vulnerable children. The country requires assistance to address these problems.

III. Definition of the child (art. 1)

31. Owing to its high birth and fertility rates, Kyrgyzstan has a predominately young population. According to data compiled by the National Statistical Committee, as of 1 January 2009 the country had a population of 5,276,000, an increase of 3.7 per cent since 2004. The number of children under 18 was 1,938,524, or 38.1 per cent of the population, while the labour force was 52 per cent. In 2008 there were 127,300 births (24.1 per 1,000 population) and 37,700 deaths (7.1 per 1,000 population). Thus, net population growth was 89,600, or 17 births per 1,000.5 Since 2005 there has been a steady increase in birth rates among women aged 15-17, from 4.5 children per 1,000 women in 2005 to 4.7 children in 2008. The highest rates occur in Chuy Oblast (9.4 children per 1,000, or double the national

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rate) due to inter-district migration, the mass influx of poorly organised rural youth, the absence of proper health-care facilities for teenagers and young people and the lack of sex education. Birth rates among women aged 18-19 also increased, rising from 53.5 in 2005 to 68.8 per mil in 2008. In 2008 30.5 per cent of children were born outside legal marriages; 60 per cent of these were registered jointly by both parents.6,7

32. The term “child” was first defined in Kyrgyzstan by the Family Code of the Kyrgyz Republic of 30 August 2003, in which a child is designated as someone who has not attained the age of 18 (the age of majority). Pursuant to the recommendations of the Committee (265), the Children’s Code defines “child” more precisely: a child (children) is a physical person (persons) that has not attained the age of 18. The definition “minor” or a person who has not attained the age of 18 is given in the Civil Code, the Criminal Code and the Code on Administrative Responsibility. After the Code was adopted, changes were made to a number of the country’s laws and regulations, resulting, for instance, in changes to benefit payments for disabled children and children living with HIV. Previously available only to children under 16, as of 2008 they were extended to those under 18.8

33. Notwithstanding the adoption of the term “child” as defined by the Children’s Code, the country does not produce disaggregated statistics on children of different ages and official statistics include all population age groups. However, statistical records and documents prepared by the National Statistical Committee employ the following age brackets: 0-4, 5-9, 10-14, and 15-19. In other words, the published statistics do not itemise children separately, the number of children under 18 is not specified, nor can it be calculated, given that the upper age bracket includes children aged 15-19. Moreover, indicators for children, such as those specifying morbidity, continue to cover the population as a whole and children only under the age of 14. Pursuant to the second periodic report under the Convention on the Rights of the Child (2002, items 5, 6, 7), the Constitution and other legislative and regulatory instruments, the equality of all citizens is guaranteed irrespective of age and sex. The country’s legislation thus makes no provision for differences between boys and girls even though in daily life such differences exist.9 According to the Procurator-General’s Office, girl children in rural areas are particularly prone to discrimination caused by re-emerging trends such as abduction and forced marriage. Official records show that 27 cases were investigated during the period 2003-2008 that resulted in criminal prosecution, and although evidence suggests that incidence of such crimes is in fact higher, they are not reported by children or their parents. Two cases have been documented of girls compelled to give up school and enter into forced marriages (para. 294) in Jeti-Oguz District, Issyk-Kul Oblast. During the 2003/2004 school year a girl (born 1988) studying in the tenth grade at M. Tynaev Secondary School married and failed to complete her education. Likewise, during the 2007/2008 school year a girl (born 1989) studying in the tenth grade at secondary school in the village of Chong Jargylchak married and failed to complete her education.

6 The children were born to couples cohabitating in civil unions (i.e. the parents live together, run a joint household but have not officially registered their relationship), including marriages contracted in accordance with religious traditions.
8 State Benefits Act.
IV. General principles (arts. 2, 3, 6 and 12)

A. Non-Discrimination (art. 2)

34. Kyrgyzstan has established fundamental legal principles governing non-discrimination, the best interests of the child (arts. 2, 3), the right to life, survival and development (art. 6) and respect for the views of the child (art. 12) applied equally to boys and girls. Under the Constitution, every person is entitled to fundamental freedoms and human rights from birth. Freedoms and human rights have legal force, are deemed absolute and inalienable and determine the purpose and content of the activities of the legislature, the executive and local government agencies and are protected by law and the judicature. All Kyrgyz citizens are equal before the law and the judicature. No one shall be subject to any discrimination or denied freedoms and rights on grounds of origin, sex, race, nationality, language, belief, political and religious views or for any other personal or social circumstances. In accordance with the Constitution and other legal and regulatory instruments, priority is given to the interests of the child and to enforcing his/her rights in matters relating to ownership, inheritance, access to free education and health care, etc. A number of special laws and regulations guarantee the rights of children in difficult circumstances (refugee children, disabled children, children deprived of parental care). The Education Act No. 92 of 30 April 2003 established the child’s constitutional right to education regardless of social and property status, nationality and religion and guarantees free primary and secondary schooling and vocational training, as well free education in institutions of higher education on a competitive basis. Adopting the Code has helped to strengthen and systematise the legal norms applied in protecting children’s rights and best interests. In compliance with the Convention, the Code (art. 3) stipulates the fundamental principles for implementing the rights of the child, including non-discrimination on grounds of the child’s or his/her parent’s or legal guardian’s race, colour, sex, language, religion, political and other opinions, national, ethnic or social origin, property, disability, birth or other status. Article 12 of the Convention defines the tasks and powers of the Ombudsman with regard to protecting children’s rights and freedoms and preventing discrimination of any kind against children exercising them. Pursuant to the Code, departments for family and child support and commissions on children’s affairs attached to government agencies and town councils are responsible for ensuring that the rights of the child are enforced should the need arise to protect him/her in an abusive or neglectful family environment. They are tasked with carrying out comprehensive reviews to gauge compliance with children’s rights and with assessing the child’s family, drafting childcare initiatives and, where appropriate, placing the child with tutors, foster or adoptive parents. The commissions coordinate the activities of the departments, collaborating with them in taking decisions affecting the child’s life (see para. 1(b) above). Commission decisions are governed by the following principles:

- Acknowledgement that the rights and interests of the child are to be afforded priority;
- Non-discrimination on grounds of the child’s or his/her parent’s or legal guardian’s race, colour, sex, language, religion, political and other opinions, national, ethnic or social origin, property, disability, birth or any other status;
- Respect for and protection of the rights and freedoms of the child as an equal member of society;

Foster parents: persons granted legal custody or care of the child until he/she reaches maturity.
• Protection of the child from all forms of physical and psychological violence, humiliation or abuse, as well as from neglect or negligent treatment and all forms of exploitation;

• Respect for the rights and duties of parents and persons acting in their stead;

• Support for families with a view to ensuring children a full education, protection of their rights and interests and their preparation for leading a life as productive members of society;

• Raising the awareness and the sensitivity of parents, guardians and society with regard to children’s rights and special needs.

35. In accordance with the national strategy for protecting the reproductive health of the country’s population until 2015, a series of measures has been put in place that is designed to safeguard the reproductive rights of girls and women and prevent sexual violence resulting from forced marriages (by agreement between parents or by bride kidnapping) that seriously violate young people’s right to choose a spouse and to marry with free and full consent. Other initiatives have been launched as part of the annual Global Campaign to End Violence (“Let’s End Violence. For the Sake of Women’s Health, for the Sake of World Health”). These include round tables, lectures, discussions, workshop conferences in schools, vocational and higher educational institutions and communities on eliminating violence against women, bride kidnapping, domestic violence, the trafficking of women, and so forth. A national report on implementing the principles and goals of the International Conference on Population and Development was approved by government order No. 595-r of 1 October 2003. Unofficial sources indicate that a large number of rural marriages were the result of discriminatory traditions and customs such as bride kidnapping or polygamy. The Government acknowledges that this is indeed the case. Even though forced marriage is a criminal offence, society continues to take a fairly liberal view of bride kidnapping and it is only rarely that victims take legal action (see para. 2 above). With support from UNDP and UNIFEM, State and NGOs are attempting to teach school children and the public that discrimination against girls and women, including early and forced marriages, cannot be tolerated. In 2009-2010 the issue was the subject of government and parliamentary debate and there are plans to introduce legislation reinforcing the ban on registering marriages with religious organizations without possessing an official marriage certificate.

36. Work is underway to implement the recommendations of the Committee (paras. 267-268). Much has been done to refine the regulatory framework and mechanisms adopted to give effect to the provisions of the Convention covering non-discrimination towards children irrespective of sex, social origin, disability, nationality, religion and citizenship. Under Kyrgyz law no restrictions are placed on the rights of the child, agencies have been set up promoting children’s rights (Ombudsman, departments for family and child support, commissions on children’s affairs) and the country is in receipt of assistance from international organizations. Nevertheless, social and economic problems are impeding the comprehensive application of children’s legal rights in everyday life, particularly with regard to forced marriages (see para. 2 above), restricted access to education, health care and social support for specific categories of children, notably those who are very poor and vulnerable or living in rural areas, as well as with regard to child neglect and abuse in

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families\textsuperscript{14} and children’s institutions.\textsuperscript{15} Moreover, children prefer to live on the street rather than seek the help of State organizations.\textsuperscript{16} Owing to the commonplace and frequently traditional nature of domestic violence, child neglect, bride kidnapping and other violations, the public is generally inclined to tolerate discrimination. Also significant is adults’ and children’s inability to assert their rights in court and elsewhere. Poverty, poor education, personal experience and public opinion create behavioural stereotypes that will require much time and effort to overcome. Kyrgyzstan needs further financial assistance and technical support to put the provisions of the Convention into practice.

B. The best interests of the child (art. 3)

37. Pursuant to the recommendations of the Committee (paras. 270-271), legislation affecting children has been updated with a view to incorporating into the country’s laws and regulations the principle of the best interests of the child formulated in article 3 of the Convention. Ensuring children’s right to life and development depends on the economic stability of the State and the quality of the social security system. The country’s Constitution establishes children’s right to maintenance and education and spells out parents’ rights regarding the upbringing of their children, as well as their responsibilities and civic duties. The objectives of the Children’s Code are to protect the civil, political, economic, social and cultural rights, lawful interests and freedoms of children. The tasks of the Code are to regulate children’s rights and interests and to establish the principles and measures for protecting children and ensuring that their rights are upheld, to create a legal basis for guaranteeing the rights of the child, to ensure the smooth functioning of the appropriate bodies and organizations responsible for protecting the child’s rights and lawful interests, to define the areas of competence of State and municipal agencies charged with safeguarding and protecting children’s rights, as well as the procedures governing their interaction. Pursuant to the Code, the work of the departments for family and child support (FCSDs) encompasses the following stages:

- Assessing all aspects of the situation;
- Planning child protection initiatives;
- Submitting a draft decision and conclusions to commissions on children’s affairs.

In planning childcare initiatives, consideration must be given to:

- Whether the child requires FCSD assistance;
- Whether the child should return to his/her family or be placed in care;
- Whether the child should, as a matter of priority, be placed with a legal guardian, foster parents or adopted.

Care for children is based on the following principles:

- That the views of the child should be taken into account commensurate with his/her age and maturity;
- That the child’s placement be permanent if circumstances dictate that he/she remain with parents, tutors or guardians;

\textsuperscript{14} Ibid., p. 10.
\textsuperscript{15} The Untold Stories of the Silent Walls. UNICEF, 2004, pp. 79-80.
\textsuperscript{16} Rapid Assessment Survey on the Condition of Street Children in Osh and Kara-Suu, EveryChild, Bishkek, 2008, p. 32.
• That placement with a family take precedence over placement in a children’s institution;
• That brothers and sisters be separated only in the best interests of the children;
• That due regard be paid to the child’s national, religious, cultural and language origin;
• That any decisions taken with regard to the child be explained to him/her in accordance with the child’s age and maturity;
• That decisions be taken as quickly as possible and without detriment to the child’s interests and well-being.

38. Although the legislation provides for measures guaranteeing the best interests of the child, court adjudications, as well as the increasing number of children being sent to special children’s institutions, accord with neither the child’s interests nor the provisions of the Convention. The vast majority of children living in formal care and children’s homes are social orphans, i.e. children with one or both parents still alive. No information is available describing the actions that have been taken with regard to their parents and to retaining the child within the family setting. Fostering is rare and there are few children’s homes run along family lines. The State has yet to decide on international adoption of physical and mentally disabled children with limited chances of finding foster parents in Kyrgyzstan. The views of children placed in care homes are often ignored, which, combined with the poor economic condition of these institutions, can prompt them to run away and live on the street.

C. **Right to life, survival and development (art. 6)**

39. Under the Constitution, every citizen has an inalienable right to life and to the free development of his/her personality. No one can be deprived of life. Everyone has the right to protect his/her own life and health and the life and health of others from unlawful acts. Act No. 6 of 9 January 2005 defines the legal, economic and social principles of health protection with which central-government and local authorities, natural and legal persons are required to comply.

40. **The death penalty is prohibited in the Kyrgyz Republic**. However, children suffer from crimes committed against them. In recent years, for example, crimes against children increased from 505 cases in 2005 to 868 cases in 2008. At the same time, offences against the person rose from 107 to 150, including murders, which increased from 7 to 17, causing grievous bodily harm with intent from 4 to 10, and rape from 41 to 56. According to figures compiled by the Ministry of Internal Affairs, eight children died as a result of criminal actions in 2006, 22 in 2008 and eight in 2009. Seventy-two children committed suicide in 2008 and 76 in 2009. One hundred and twenty children died from road-traffic injuries in 2009 (table 1).

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17 See also chapter VI hereunder.
Table 1
Child road-traffic injuries, 2002-2009

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
<th>Deaths</th>
<th>Injured</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>688</td>
<td>112</td>
<td>643</td>
</tr>
<tr>
<td>2003</td>
<td>749</td>
<td>109</td>
<td>720</td>
</tr>
<tr>
<td>2004</td>
<td>711</td>
<td>129</td>
<td>676</td>
</tr>
<tr>
<td>2005</td>
<td>771</td>
<td>135</td>
<td>702</td>
</tr>
<tr>
<td>2006</td>
<td>811</td>
<td>123</td>
<td>778</td>
</tr>
<tr>
<td>2007</td>
<td>1,021</td>
<td>147</td>
<td>999</td>
</tr>
<tr>
<td>2008</td>
<td>899</td>
<td>150</td>
<td>865</td>
</tr>
<tr>
<td>2009</td>
<td>862</td>
<td>120</td>
<td>874</td>
</tr>
</tbody>
</table>

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

41. The Family Code (art. 62) and the Children’s Code (art. 21) establish the child’s right to express his/her opinion and this right can be restricted only in cases provided for by law in order to ensure respect for the rights and reputation of others and in the interests of national security, public order, public health and morals. In certain cases the departments for family and child support or the court may take a decision only with the consent of the child concerned, provided he/she has reached the age of ten. Under article 22 of the Code, every child has the right to be heard. Every child capable of formulating his or her views is entitled to be heard in all matters affecting his /her interests. The right to be heard includes the child’s right to request and receive any information and advice, to express an opinion and to be informed of the consequences that could ensue if the child’s opinion is acted upon. Every child is entitled to be heard directly or to be spoken for by a representative in accordance with the established legal procedure.

42. Pursuant to the recommendations of the Committee, legislative measures have been put in place to ensure respect for the views of the child (art. 12). As yet, however, the country has few non-governmental children’s organizations and not all schools have pupil parliaments. The views of children are not addressed in issues concerning their placement in care homes (children’s homes, foster homes, shelter care facilities), nor in the preparation of healthy lifestyle and sex education programmes.

V. Civil rights and freedoms (arts. 7, 8, 13-17 and 37)

A. Name and nationality (art. 7)

43. Pursuant to the recommendations of the Committee (paras. 276, 277), Kyrgyzstan has refined birth registration legislation and procedures, also providing guarantees for, inter alia, asylum-seekers, persons seeking protection but not granted refugee status and residents of rural districts. The past ten years have seen a small but steady increase in the birth rate, which in 2009 equalled 25 per 1,000 population, or 137,680 in absolute terms. Kyrgyz law requires that births be registered with the civil registration authorities at the child’s place of birth or the place of residence of one or both parents. Notification of the birth is provided in writing or orally by one or both parents, or, in the event of the sickness or death of the parents, or if for any other reason they are unable to provide the notification themselves, details of the birth are provided by relatives or neighbours, or by the administration of the
medical establishment where the child was born, or by other persons. Under the rules approved by decree of the Ministry of Justice No. 91 of 13 June 2001, Kyrgyz citizens outside the country are required to register civil status acts at the diplomatic missions or consular offices of the Kyrgyz Republic. In compliance with Ministry of Justice decree No. 50 of 31 March 2003 and article 13 of the Refugees Act, civil registration offices (except local authorities and rural administrations) register the birth of refugee children born in Kyrgyzstan on receiving documents certifying refugee status. Act No. 60 of 12 April 2005 on Civil Status Acts defines the procedures for registering births with the State.19 In cases where the necessary documentation is not available, births are registered on the basis of a court ruling confirming that the woman in question is the child’s biological mother. In accordance with Act No. 70 of 21 May 2007 on Citizenship of the Kyrgyz Republic, every person in the country is entitled to citizenship. The Act regulates the citizenship of children and the procedures for acquiring and changing citizenship with due regard for the child’s opinion. Where parents are of different nationalities at the time of the child’s birth, i.e. one a Kyrgyz citizen, the other a foreign national, the child’s citizenship is determined on the basis of a notarised agreement signed by the parents recognising the infant as a citizen of the Kyrgyz Republic.20 The Children’s Code also establishes the constitutional right of every child to citizenship, requires that every child be registered immediately after birth and specifies procedures for registering his/her birth (art. 19). Where children are born in medical institutions, to register the birth two copies of the birth certificate are issued, one to the mother or father, the other forwarded to the civil registration office nearest to the child’s place of residence within five days of the birth. A copy of the birth certificate is retained by the maternity hospital, which keeps a record of the birth for 20 years. Once a year, no later than one month after the end of the current year, the maternity hospital and the district civil registration office each send their birth registers to the central civil registry office for archiving. If parents reject their child, a copy of the certificate must be forwarded at the time of registering the birth to the children’s institution to which the infant is sent. Parents, doctors or other authorised health-care professionals and practitioners who fail to comply with this section of the Code are held liable under the laws of the Kyrgyz Republic. Procedures for registering a birth, ascertaining the child’s origin, establishing paternity and changing birth certificates are regulated by legislation.

44. The Family Code (art. 63) and the Children’s Code stipulate the child’s right to name, patronymic and surname. The child’s name is one that the parents (persons acting in their stead) have agreed upon, while the patronymic derives from the name of the father or is in keeping with national traditions. If the father changes his name, the patronymic of minors changes accordingly, while that of adult children may be altered by their submitting a petition. The child’s surname is determined by that of the parents. If the parents have different surnames, the child is assigned the surname of either the mother or father by agreement between the parents. Should the parents so wish, a child’s surname may be derived from the first name of the father or grandfather in accordance with national traditions. The first names and surnames of persons of other nationalities may, if desired, be spelt in keeping with their traditions. Disagreements between parents over the child’s name and/or surname are resolved by legal process. If paternity has not been determined, the child is named in accordance with the mother’s instructions, while the patronymic derives from the first name of the person recorded as the child’s father and the surname is that of the mother. If both parents are unknown, the child is assigned a surname, first name and patronymic by the department for family and child support. Notwithstanding improvements to the country’s birth registration system made in compliance with the recommendations of the Committee, surveys show that children in difficult circumstances, namely those

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20 Act No. 60 of 12 April 2005 on Civil Status Acts.
deprived of parental care, street children and children from poor and vulnerable sections of society, are frequently without registration and/or identity documents. Restoring documents is often a priority concern for child rehabilitation centres and for officials working with specific social groups (sex workers, drug users, and so on). A major obstacle in birth registration is the mandatory possession of a residence permit. Owing to ignorance of laws, bureaucratic red tape, non-institutional births, parents without documents, the need to seek legal recourse to confirm the birth of a child and lack of access to legal support, children in difficult circumstances are not being registered.

B. Freedom of expression (art. 13)

45. The Children’s Code (art. 21) establishes the child’s right to freedom of expression. Every child has the right to freely express his/her opinion. This right includes the freedom to seek, receive and impart information and ideas of all kinds contributing to the child’s social, spiritual and moral well-being and physical and mental health orally and in writing. Exercise of the child’s right to express his/her opinion may be subject to certain restrictions in cases provided for by law with a view to:

- Respecting the rights and reputation of others;
- Safeguarding national security, public order or public health and morals.

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

46. The right of citizens to freely express and disseminate their thoughts, ideas and opinions and to exercise spiritual freedom and freedom of religion is set out in the Constitution and the Freedom of Religion and Religious Organizations Act. Article 23 of the Children’s Code establishes the right to freedom of conscience and religion. Every child has the right freely to profess any religion or none. No one is entitled to compel a child to adhere to or recant a particular religion without his/her consent or the consent of his/her parents or persons acting in their stead. Freedom of conscience and religion may be restricted only in accordance with law or on the basis of a court ruling when it is necessary to protect national security, public order and the fundamental rights and freedoms of other persons. The Freedom of Religion and Religious Organizations Act No. 282 of 31 December 2008 provides for the constitutional right to religious belief, to the protection of rights and interests irrespective of religious identity and to diverse forms of education regardless of views on religion. The Criminal Code prescribes punishment for offences against human dignity and the infringement of citizens’ rights committed under the guise of performing religious rites, for obstructing the performance of religious rites and compelling other persons to perform them. This issue has been considered by Parliament and requires a final resolution. Although the State and religion are separate and schools separate from religious organizations, there is no legislation regulating the secular education of children attending religious educational institutions. For example, the prosecutor’s office in Bishkek’s Pervomaisk District instigated three administrative actions with regard to religious instruction given to minors at the Ikhlas mosque (S, born 1995, did not attend school for a year, leaving after the fifth grade; G, born 1992, did not attend school for a

21 Rapid Assessment Survey on the Condition of Street Children in Osh and Kara-Suu, EveryChild, Bishkek, 2008, p. 27.
year, leaving after the seventh grade; H, born 1994, did not attend school for three years, leaving after the seventh grade). The registration of a marriage concluded in accordance with Muslim traditions obviates the need for official marriage registration, which can result in legalised marriages with persons below the marriage age, endorse polygamy and deprive women and children in such families of their legal rights.

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

47. The Public Associations Act stipulates that “the State renders material and financial support to youth and children’s organizations, operates a preferential tax policy for them, confers on children’s organizations the right to use the facilities of schools and out-of-school institutions, clubs, community and neighbourhood cultural centres, sports and other buildings for free or on favourable terms”. In reality this right is little exercised owing to lack of initiative and support for such organizations. The country has a scout movement and some NGOs have children’s sections, for example, the children’s centre sponsored by the Ulgu NGO in the village of Kerben Arsyisk in Jalal-Abad Oblast.

E. Access to appropriate information (art. 17)

48. Notwithstanding the complex epidemiological situation of HIV and the especially high infection rates among the young, the country continues to debate the right of children to be informed about the virus and about ways of preventing HIV transmission. In 2003 the teaching of healthy lifestyle classes in schools was discontinued. In spite of legislation (Act on HIV/AIDS in the Kyrgyz Republic, 2005, art. 3) and the efforts of the Ministry of Education and Science to raise awareness among young people, the issue is by no means resolved and is often used as a disruptive tactic in politics. Children’s views meanwhile are not taken into account.

F. The right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment (art. 37 (a))

49. The Constitution provides that no one may be subjected to torture, ill-treatment or degrading inhuman punishment. In 2003 amendments were made to article 305-1 of the Criminal Code regarding torture and penalties introduced for crimes of this kind committed by public officials or by another person acting with their knowledge or at their behest. Cruelty towards children (beating and torture) is prosecutable and punishable under the country’s criminal law. Other forms of cruelty towards children entail disciplinary liability for those responsible.

50. According to the procurator’s office, there is no evidence to show that street children (para. 304) are abused by the police. However, the National Statistical Committee neither keeps nor submits records with regard to this matter. That having been said, over a nine-month period in 2009 public prosecution offices carried out 698 reviews (compared with 601 in 2008) of law-enforcement oversight agencies to verify compliance with laws pertaining to minors. Based on their findings, 33 (46) actions were challenged as being unlawful, 337 (402) orders were issued to rectify violations, 304 (257) directives prepared, 337 (236) officers cautioned for infringing the law and 253 (106) disciplinary and administrative actions instigated. As a result of the procurators’ investigations, 384 (197)

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officers were subject to disciplinary and 187 (86) to administrative proceedings, 58 (35) criminal actions were instituted and 23 (20) claims filed with the court.

VI. Family environment and alternative care (arts. 5, 9-11, 18, paras. 1-2, 19-21, 25, 27, para. 4, and 39)

A. Parental guidance (art. 5)

51. Under the Constitution, parents have a natural right and civil duty to care and raise their children and are responsible for protecting their rights and interests in accordance with the Family Code. Parents are the legal guardians of their minor children and act in defence of their rights and interest in all institutions, including courts of law. The Family Code (art. 59) establishes the child’s right to live and be raised in a family and to know and be cared for by both parents, and the right to live with them except in cases where separation from one or both parents is necessary in the child’s interests. A child has the right to parental upbringing, the protection of his/her interests, full development and respect for his/her human dignity. Parents living apart are entitled to interact with their children and to participate in their upbringing. Parents or persons acting in their stead are mutually responsible for creating an environment conducive to the child’s full development and for providing him/her with a place to live, giving due consideration to the child’s interests and opinion. Parents or persons acting in their stead with conflicting views in this regard are entitled to refer the matter to a department for family and child support or court for resolution. Grandfathers, grandmothers, brothers, sisters and other relatives have the right to interact with the child (Family Code art. 72). Article 67 of the Family Code provides for the right of underage parents to exercise their parental rights themselves, to live with their child and to participate in his/her upbringing. In cases where underage parents have not reached 16 years of age a guardian may be appointed to undertake the child’s upbringing together with the parents. Disputes arising between the guardian and the parents are to be resolved by a department for family and child support. Underage parents are equally entitled to acknowledge and contest a child’s paternity and maternity and, on reaching the age of 16, to request that parentage be established in a court of law. Article 70 of the Family Code provides for the exercise of parental rights. The implementation of these rights must not conflict with the children’s interests, which are the parents’ primary concern. In exercising their rights, parents are not entitled to prejudice the physical and psychological health of their children or their moral development. Negligent, cruel, brutal or degrading treatment, abuse or exploitation must not form any part of children’s upbringing. Parents exercising parental rights to the detriment of the rights and interests of their children are liable to prosecution in accordance with the established legal procedure.

B. Parental responsibilities (art. 18, paras. 1-2)

52. Pursuant to the Constitution, laws on the family, and administrative, criminal and other enactments, parents are responsible for the upbringing of their children. The Family Code (art. 66) establishes that parents enjoy equality of rights and responsibilities and have equal rights and responsibilities towards their children (parental rights). The parental rights provided for under this article cease once children reach 18 years old (maturity), when minor children marry, as well as in other cases stipulated by law where children acquire full active legal capacity before attaining the age of majority. Parents’ alimony obligations to children are also defined. Article 68 of the Family Code spells out the rights and

26 Family Code of the Kyrgyz Republic as amended on 30 August 2003 No. 231, arts. 70, 71.
responsibilities towards children of parents and persons acting in their stead. Parents and persons acting in their stead have a right and responsibility to raise their children, care for them properly, ensure their upkeep, provide them with a place to live, take care to see that they receive an education and guide their actions commensurate with their age and abilities. Legal guardians and persons able to protect a child’s rights by virtue of their employment are required to provide the child with information, explanations and advice, taking into account his/her age. Article 69 stipulates the rights and responsibilities of parents and persons acting in their stead with regard to protecting children’s rights and interests. Parents and persons acting in their stead are the legal guardians of their children and act in defence of their rights and interests in respect of natural and legal persons of any kind, including in courts of law, without special powers. Parents and persons acting in their stead are not entitled to represent their children’s interests if a department for family and child support finds there is a conflict of interest between the parents and the children, in which case the department is required to appoint a guardian to protect the children’s rights and interests. The Civil Code provides that parents bear liability for damage caused by a minor unless there is evidence to show that their child was not to blame. Parents, adoptive parents or tutors bear material liability for transactions performed by a minor under 14 years of age. Under the Criminal Code, parents are not liable for crimes committed by minors.

53. A survey on neglect and abuse of children in the home carried out with UNICEF support in 2009 showed that most of the 2,132 respondents in the 10-17 age group had suffered various forms of neglect:

- Inadequate nutrition: 7.8 per cent of children sometimes were not given enough to eat or went hungry even when there was enough food to go round. 5.7 per cent of children had not eaten enough or gone hungry during the past month.

- Inadequate clothing: 44.7 per cent suffered from this form of neglect and 37 per cent said this had been during the past month. 31.4 per cent wore dirty or ragged clothes, 30.3 per cent were compelled to wear clothes too small or too big for them and 27 per cent wore clothing too cold for winter or too hot for summer.

- Inadequate health care: 18.7 per cent suffered from this form of neglect, 13.2 per cent during the past month. 13.6 per cent indicated lack of care when ill (for example, they were not taken to the doctor or hospital or given any medicine). 12.2 per cent were made to work despite being sick.

- Inadequate supervision: 28 per cent said they had been left at home unattended or without adult supervision for two days or more. 21.6 per cent had been left at home alone for two days or more without adult supervision during the past month (as of when the survey was conducted).

- Labour abuse: 72.7 per cent of the children canvassed encountered this form of abuse, 48.3 per cent during the past month. 5.9 per cent had been sent out to work in order to help the family. 40.7 per cent said parents or adult members of the family had made them do housework or another kind of work, leaving the children with no time to attend school. For this very reason the same number of children canvassed had not had time to do their homework or free time for games.

54. Parents’ fulfilment of their childcare responsibilities is monitored by the Internal Affairs authorities, which take joint action with local government agencies to enforce children’s rights if they encounter the forms of neglect referred to above. In the event that the action taken fails to rectify the situation, a petition is filed to deprive the individuals responsible of their parental rights. As shown in the table below, in the period 2005-2009

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the number of cases identified and forwarded to commissions on children’s affairs and the number of persons deprived of the parental rights rose by 40 per cent, totalling 49 and 28, respectively (table 2). On the one hand, this could suggest that the Internal Affairs authorities have adopted a more vigilant stance on upholding children’s rights. On the other, such procedures run counter to the recommendations made by the Committee for Strengthening Work with Families and Preventing Child Institutionalisation.

Table 2
Number of parents deprived of parental rights for neglecting minors, 2005-2009

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<tr>
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<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
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</thead>
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<tr>
<td>Sent materials on deprivation of parental rights</td>
<td>35</td>
<td>37</td>
<td>36</td>
<td>38</td>
<td>49</td>
</tr>
<tr>
<td>Deprived of parental rights</td>
<td>20</td>
<td>14</td>
<td>18</td>
<td>19</td>
<td>28</td>
</tr>
</tbody>
</table>

55. Legislation provides for the right of children to seek the protection of tutorship and guardianship agencies if parents abuse their rights. Be that as it may, neither children nor the relevant agencies have provided any information confirming whether this right is exercised in practice. According to a UNICEF survey, 18.7 per cent of children have experienced one form of neglect, 18.4 per cent two forms, 14.5 per cent three forms, 9.4 per cent four forms, and 3.4 per cent every one of the five forms of neglect. 69.9 per cent of children who suffered from neglect in the family were also subject to crude verbal abuse, 55.3 per cent also experienced psychological abuse and 53 per cent also physical violence.28 This indicates that parents are failing to meet their responsibilities towards their children. The significant proportion of social orphans living in childcare institutions, as well as the number of abandoned, street and working children, underlines the seriousness of the situation. However, the procurator’s office reports only two cases of criminal charges being brought for non-payment of child maintenance (Uzgen District, Osh Oblast).

C. Separation from parents (art. 9)

56. Domestic law provides for measures preventing children from being separated from their parents except under special circumstances. This stipulation is reinforced first and foremost by the priority right of parents to raise their children even in cases where the parents’ marriage has been dissolved. The Children’s Code establishes the right of children, if possible, to know their parents. Parental rights may be restricted only by legal process or following a decision taken by tutorship and guardianship agencies on the grounds strictly defined by law. Pursuant to the recommendations of the Committee, the Family Code (art. 74) specifies that deprivation of parental rights be used only as an extreme measure resorted to for non-fulfilment of duties, abuse of rights or immoral, anti-social behaviour. When it would be dangerous to leave a child with its parents, a court may decide to remove the child and place him/her in the care of the tutorship and guardianship agencies regardless of whether the parents have or have not been deprived of their parental rights. In exceptional cases, when there is a direct threat to a child’s life or health, a tutorship and guardianship agency is entitled to have the child immediately removed temporarily from his/her parents or other persons acting in their stead. Under Kyrgyz law, the competent authorities are required to examine all issues of this kind strictly in accordance with the child’s interests. When it is not possible for children to remain permanently with their parents, criminal law and sector-specific regulations provide for the creation of conditions facilitating parent-child contact and the preservation of family ties. Contact, however, must

not have a harmful effect on children. Pregnant women prisoners and those with children under three years old serve their sentences in correctional labour institutions that have facilities for children. In situations where a child has no parents, where parents have been deprived of their parental rights and in other cases where parental care has been forfeited, the child’s right to family life is upheld by a department for family and child support as prescribed by chapter 19 of the Family Code and the Children’s Code.

57. The country’s residential children’s homes operate under the authority of the Ministry of Education and Science, the Ministry of Health and the State Agency for Social Welfare. A number of new residential homes report to the local administrative authority. Thirty-five are Government-funded and nine are financed from local budgets. Twenty-six centres, i.e., the majority, are subordinate to the Ministry of Education and Science:

- Five children’s homes;
- Four boarding schools for orphans and children left without parental care;
- Seventeen auxiliary and special residential schools for children with special educational needs (mentally handicapped children, children with hearing, visual and speech impairments).

Three homes for children aged 0-4 are overseen by the Ministry of Health: one is for healthy children, the others special institutions for mentally and physically disabled children aged 4-5. Two foster-care homes for children aged 4-18 with multiple mental and physical disabilities operate under the auspices of the State Agency for Social Welfare. In recent years NGOs have started to provide residential services for children. Such institutions are independent in every respect, including admission procedures which allow placement of children without the involvement of tutorship and guardianship agencies. The quality of the services provided for children in private establishments is not monitored by the State. Residential homes cater for:

- Orphans;
- Children separated from their parents by court order;
- Children left without parental care, whose parents are in prison, have been legally deprived of parental rights, are receiving long-term medical care, are declared legally incompetent, are wanted by the police, cannot be traced, and so forth;
- Children with mental and physical defects, regardless of whether both parents are alive, requiring constant personal care due to an inability to care for themselves;
- Children who have been officially rejected by their parents (parents who have consented to their adoption).

58. According to a UNICEF survey, the total number of children living in residential homes rose 20.4 per cent from 17,230 in 2004 to 20,750 in 2007 and made up 0.4 per cent of the population or around 0.8 per cent of the country’s children. Around 90 per cent of children in residential educational institutions have families, whereas half of those in children’s homes are orphans (54.7 per cent are healthy children, 49.2 per cent are children with mental and physical disabilities). Although the single monthly benefit for children under 18 is 121.7 soms and for those in State care is 200 soms, the State spends 4,007 soms each month on the upkeep of a child living in a residential educational institution. The number of children in residential educational institutions for orphans is fixed by the Government at between 10 and 200 (200 in residential educational institutions for orphans; 150 in children’s homes and 10-12 in family-type children’s homes). However, the total number of children in these institutions (20,750) shows that they are overcrowded, given that, excluding children’s homes, they house on average up to 640 children. The country’s considerable economic difficulties have substantially constrained the provision of social
services in support of families and social services, such as foster care, that are substitutes for family life, are practically non-existent.

59. Under the Family Code, an adoptive family is either a family that has entered into a family childcare agreement or one that has legally adopted a child. The Family Code regulates the procedures involved in creating an adoptive family on the basis of a family childcare agreement, which is concluded between a department for family and child support and the adoptive parents (spouses or individuals wishing to bring up children as part of a family). Adult Kyrgyz citizens of either sex are eligible to be adoptive parents, except for:

- Persons declared legally incapable or of limited legal capacity;
- Persons deprived of their parental rights by a court of law or whose parental rights have been restricted by a court;
- Persons relieved of their duties as tutors or guardians for improper performance of the obligations imposed on them by law;
- Former adoptive parents in cases where adoption was terminated by a court through the parents’ fault;
- Persons whose disability (art. 133, para. 1, subpara. 7 of the Family Code) renders them unable to perform the duties required in raising a child.

Children placed with families include those deprived of family care, including children in formal care, health-care facilities, social welfare or similar institutions. Brothers and sisters are not separated unless it is in their interests and placements are made with due regard to the child’s opinion. A child who has reached 10 years old may be placed with a family only with his/her consent. Children in such families retain the right to the maintenance, pension, welfare and other social security benefits due to them, as well as the right of home ownership, the right to use housing or, in the absence of housing, the right to be provided with accommodation in accordance with housing legislation. Each month families receive payment for the child’s upkeep in accordance with the procedures and amount specified by the Government. Departments for family and child support are required to provide families with all necessary assistance, facilitate the creation of a normal environment for the child’s life and education and are entitled to monitor the placement to ensure that the new parents fulfil their obligations to support, nurture and educate the child.

60. Pursuant to the Children’s Code, all children’s homes overseen by the Ministry of Health are at an initial stage of transformation and are developing alternative services for families and children. As part of a project launched by Save the Children Denmark, family resource centres have been set up to provide support services that include:

- Psychological counselling for mothers in high-risk situations to prevent them from abandoning their children (provided by family resource centre specialists in maternity homes and children’s hospitals, as well as directly in children’s homes);
- State-funded kindergartens for children who have been reintegrated into the family and to prevent the placement of children in institutions.

With help from the NGO “My Family” a foster family centre was set up under the auspices of the Belovodsk Children’s Home, which comes under the authority of the Ministry of Education and Science. Other initiatives included child reintegration services and a 24-hour nursery that looks after children on weekdays. The nursery, while not dissimilar to a residential institution, enables mothers to work throughout the week and spend the weekends with their children. The models developed during the project stage were subsequently accorded legal status, pursuant to:
61. Supported by UNICEF, Save the Children Denmark developed a new child protection framework as part of a pilot project spanning two districts. Within the new framework model action plans were prepared and adopted for dealing with children and families at risk, as well as mechanisms to prevent the placement of children in institutions and to improve support services for birth and substitute families (fig. 1).

- At local-government level 18 social workers were trained and recruited; reporting to family and child protection units, they worked in villages not far from the families and community.

- A family and children social issues committee was set up in all rural districts. Each committee included a social worker, school principal, family doctor, community beat police officer and community representatives; in towns this function was fulfilled by a neighbourhood police office and in villages by a senior representative. Committee members examined all cases involving children at risk, identified the child’s and family’s problems and assisted in their resolution. A separate plan was drawn up for each case, of which the social worker was usually appointed manager.

- Orphans and children left without parental care were sent to the departments for family and child support for their cases to be decided at the district level. Some were placed under the care of an extended family. The caretakers’ documents were prepared by village councils then forwarded with the child’s documents to the district department.

- Departments for family and child support were reorganized as independent entities attached to district government agencies reporting to the local mayor. Each FCSD comprised five specialists: one department head, one responsible for custody and guardianship, one responsible for monitoring and maintaining a child database, one responsible for supporting families and children at risk and one secretary. FCSD staff were paid travelling expenses.

- The child’s future (whether to leave them with their families, place them in a foster family or transfer them to an open or closed institution) was decided by the district commission on children’s affairs acting on FCSD recommendations.
The international development charity EveryChild (United Kingdom) produced a virtually identical model with the single difference that FCSDs formed an integral part of the district social security department. The advantage of this model is that social security departments are fully operative, full-time social workers have undergone additional training and the number of services provided has been increased. Furthermore, the Ministry of Employment, Labour and Migration, the Child Protection Department and the State Agency for Social Welfare are partnering UNICEF and the European Commission on a project to expand family and child services under the “Sector Policy Support Programme, Social Protection and PFM – Kyrgyzstan 2007-2009 – Second Allocation” (government order No. 404-r of 23 July 2009). According to NGOs, the country lacks an effective and transparent system for managing institutions for children deprived of a family environment. Figures for 2008 on the number of different types of institutions for children in this category vary considerably depending on the government department in question: the Ministry of Education cites 50, whereas the National Statistical Committee reports that there are 82. Based on aggregated data compiled by these two departments and information produced in a survey, Kyrgyzstan has 134 residential institutions catering for children left without parental care, four of which are family-type children’s homes (foster families) operating in compliance with the regulation on children’s homes. This shows the miniscule number of alternative, as opposed to State, family-type forms of care for orphaned children. Ensuring

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29 Youth Rights Protection Group, NGO Network for Child Rights, Children of Tien-Shan, Children in Danger, the Child Protection Centre, the Association of Parents of Children with Disabilities, the Children’s Rights Protection League.

30 Replies of the Ministry of Education and Science No. 03-2/22 of 5 March, 2009 to inquiries from the Youth Rights Protection Group.

31 Reply of the National Statistical Committee No. 18-1/186 of 20 March 2009 to inquiry from the Youth Rights Protection Group.

32 2009 survey by the Youth Rights Protection Group.

33 Regulation No. 159 Of 30 March 1998.
a child’s right to family life is not the Government’s top priority when it comes to orphans, and children are often to be found in care institutions who have parents or relatives (hereinafter, social orphans). Government agencies, particularly the departments for family and children support, are failing to prevent social orphans from being placed in State institutions, are working ineffectively with families and are not doing enough to enable social orphans to return to their families. Institutions for children left without parental care look after orphans with no surviving parents (12 per cent) and social orphans (88 per cent). Living conditions and the treatment of children in State institutions fall short of national legal requirements: children suffer from hunger because the funds allocated for food are either insufficient or spent inefficiently. There is also a severe shortage of health-care and hygiene resources, clothes and footwear. When they leave an institution, children are sent to vocational training colleges where they receive a basic vocational education and live for the duration of their course. On finishing college, children are not provided with accommodation and often have no option but to live on the street, given that State guarantees ensuring them somewhere to live do not work in practice.

D. Family reunification (art. 10)

62. Pursuant to the Family Code and the Children’s Code, parents are entitled to demand the return of children from any person keeping them unlawfully or not on the basis of a court ruling. Domestic law imposes no restrictions on opportunities for the reunification of family members living within the country or in different States. The Family Code provides for the restoration of parental rights where doing so is in the child’s interests and if the child has not been adopted. Parental rights may be restored in cases where the parents’ behaviour and way of life has changed and they are in a position to raise and maintain their child. Parental rights are reinstated only by a court of law. On release from places of confinement minors are sent to live with their parents or to persons acting in their stead.

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

63. Pursuant to the Children’s Code, a child’s right to a pension for loss of breadwinner has been extended to include children up to 18 years old.

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

64. When a child’s parents die, have had their parental rights withheld or restricted, are declared legally incapable, are ill or absent for long periods, fail to raise their children or protect their rights and interests, including refusing to remove their children from foster-care, health-care, social welfare and similar institutions, or in other circumstances where parental care is non-existent, responsibility for protecting the child’s rights and interests passes to departments for family and child support and commissions for child affairs acting in compliance with legislation safeguarding children’s interests.36

36 Family Code of the Kyrgyz Republic No. 201, art. 126, of 30 August 2003 (as amended by Act No. 117 of 12 June 2008).
65. Pursuant to the Family Code, officials of State organizations (educational, health-care and social welfare institutions and temporary care facilities) and other citizens possessing information concerning children left without parental care are required to pass this on to the FCSD nearest to where the children are living. Persons in charge of foster-care, health-care, social welfare and similar institutions where children left without parental care are resident are obligated within seven days of learning that a child may be placed with a family to bring this to the attention of the FCSD closest to the institution in question. Within thirty days of receiving this information or recognizing the need to protect a child, the FCSD analyses the extent to which the child’s rights have been upheld, assesses his/her family and, as required by the Children’s Code, draws up an action plan to provide the child with care, also indicating the nature of the placement. With a view to safeguarding children’s rights and interests, the Child Protection Department, whose legal status and areas of competence are regulated by the Code, maintains a State database of children left without parental care. The procedures for compiling and using the database are defined by the Government. Failure to identify and keep records of children left without parental care is punishable under the Family Code and persons found at fault are subject to prosecution in accordance with the established procedure.

66. Children left without parental care, 37 are placed with a family (for the purpose of adoption), with a tutor (guardian) or foster family or, if this proves impossible, with an institution for orphans or children left without parental care, which may be a foster-care, health-care, social welfare or similar institution. Domestic law may provide for other care facilities to be included for children in this category. When placing a child, due consideration must be given to his/her ethnic, religious and cultural background and native language, as well as to ensuring, whenever possible, continuity in upbringing and education. Until a family or institution is found for a child left without parental care, the duties of tutor (guardian) are assumed by an FCSD.

67. The rise in the number of children deprived of a family environment indicates that the institution of the family is in crisis, while poverty is resulting in social maladjustment and the loss of life guidelines. These trends are accompanied by alcoholism, labour migration and increasing drug abuse from which women and children are the first to suffer. The sheer scale of these trends and the on-going economic crisis is greatly impeding the State’s efforts to strengthen and support the family, with the placement of children in residential institutions still regarded as the only solution. At the same time the country has virtually no alternative forms of permanent child care such as adoptive and foster families and family-type children’s homes and, moreover, such children cannot be adopted because over 80 per cent of them are categorized as social orphans. Meanwhile residential institutions are overcrowded and the State finds paying for the upkeep of children living in them costly even though the funds allocated for this purpose are meagre. In addition, children in such institutions suffer from inadequate clothing, nourishment, violence and abuse.

G. Adoption (art. 21)

68. The Family Code stipulates that adoption is a procedure for protecting the rights and lawful interests of a child that has been deprived of parental care within his/her family environment. Adoption is recognised to be best placement option for a child left without parental care and is permitted only in the best interests of children falling into this category. The placement of brothers and sisters with different adoptive parents is prohibited except

37 Family Code of the Kyrgyz Republic No. 201, art. 128, of 30 August 2003 (as amended by Act No. 117 of 12 June 2008).
when doing so is in the interests of the children concerned. The Code regulates all adoption issues and procedures, specifying, inter alia, the categories of children who may be adopted, as well as persons entitled to adopt, records of which are kept. The Code also sets forth procedures for preventing mediation activities designed to extract commercial benefit from child adoption. Mechanisms for registering adoptions have been created to ensure that they are kept secret and the legal consequences of adoption clearly defined, together with those concerning its revocation. Pursuant to the Children’s Code, specially designated bodies protecting children’s rights and interests, i.e. commissions on children’s affairs and departments for family and child support, are responsible for adoption issues and accrediting adoption services. Be that as it may, as of 1 January 2010 no legislation had been passed regulating adoption. An Act on amendments to the Family Code was adopted in February 2005 and local central-government agencies and town councils began to debate the issue of national adoption. In line with changes made to article 172 of the Family Code, the adoption of children with Kyrgyz citizenship by foreign nationals or stateless persons became a matter to be decided by a civil court attended by one of the potential adoptive parents or an authorised representative. Under government decision No. 121 of 22 February 2006 a new provision was ratified in compliance with the Family Code regarding the adoption of children left without parental care by Kyrgyz citizens and foreign nationals. The courts mainly responsible for resolving the issue of inter-country adoption were the Oktyabr District Court in Bishkek and the Tokmok City Court, given that the institutions in which the majority of adopted children resided came within their jurisdiction, namely, two specialized children’s homes, in Bishkek and Tokmok, respectively. The court ruled that adoption was to be based on the opinion of the Ministry of Education and Science, which was appointed the competent authority for inter-country adoption. Under the same government decision, children may be adopted by Kyrgyz citizens permanently domiciled outside Kyrgyzstan and by foreign nationals or stateless persons who are not the children’s relatives three months after information on the children concerned has been entered into the State database on children left without parental care in compliance with article 127, paragraph 4 of the Family Code. Government order No. 613-r of 19 October 2009 and Ministry of Health order No. 751 of 5 November 2009, which ratified the ministry’s action plan for reforming the child protection system and developing social services in the period 2009-2011, regulated issues relating to child protection, prioritising children’s well-being and reducing child poverty. The Ministry also drafted a government decision, due to be ratified in 2010, listing the illnesses that prohibited people from becoming tutors (guardians) or from fostering or adopting a child. Procedures governing the adoption of rejected and abandoned new-born babies have already been drafted yet are still to be approved. According to data compiled by the Republican Medical Information Centre, affiliated to the Ministry of Health, as of 1 January 2010 the country’s children homes accommodated 262 children, including 49 in Osh, 117 in Bishkek and 96 in Tokmok (table 3).
Table 3
Number of places and children cared for by children’s homes (RMIC data)

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<th>Kyrgyz Republic</th>
<th></th>
<th>Bishkek</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2006</td>
<td>2007</td>
<td>2008</td>
<td>2009</td>
</tr>
<tr>
<td>Number of organizations</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Number of places</td>
<td>260</td>
<td>260</td>
<td>260</td>
<td>270</td>
</tr>
<tr>
<td>Number of children, persons (as of end of reporting year)</td>
<td>247</td>
<td>237</td>
<td>260</td>
<td>262</td>
</tr>
<tr>
<td>Incl. orphans, people</td>
<td>96</td>
<td>89</td>
<td>142</td>
<td>129</td>
</tr>
<tr>
<td>Number of organizations</td>
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<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Number of places</td>
<td>50</td>
<td>50</td>
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<td>50</td>
</tr>
<tr>
<td>Number of children, persons (as of end of reporting year)</td>
<td>39</td>
<td>34</td>
<td>35</td>
<td>49</td>
</tr>
<tr>
<td>Incl. orphans, people</td>
<td>16</td>
<td>10</td>
<td>11</td>
<td>22</td>
</tr>
</tbody>
</table>

69. Foreign citizens and stateless persons may adopt children only if it is impossible to place them with Kyrgyz families permanently domiciled in Kyrgyzstan or to have them adopted by the children’s relatives regardless of their citizenship and place of residence. Nonetheless, the inclusion in the Family Code of new procedures for inter-country adoption, adoptions were in effect organised under section 3, adopted by government decision No. 121 of 22 February 2006, of a regulation specifying the rules governing the adoption of children left without parental care by Kyrgyz and foreign citizens. As far as inter-country adoption was concerned, this regulation contradicted article 130, paragraph 2 of the Family Code, which stipulates that procedures governing adoption by foreign citizens are defined by the Family Code. To align them with the Convention on the Rights of the Child and domestic law, pursuant to government decision No. 117 of 11 February 2009 on child adoption, all procedures covering intra-country adoption organised through the Ministry of Education and Science were suspended pending the elaboration of new legislation regulating adoption that is consistent with the Family Code and Children’s Code.

70. In the period 2005-2008 foreign citizens adopted 236 Kyrgyz children. US citizens adopted 179 children, Israelis 21, Swiss 2, Italians 3, South Africans 5, French 5, Germans 3, and Swedes 21. Following the suspension of inter-country adoption, children’s homes overseen by the Ministry of Health have 51 children whose inter-country placements were halted, although NGOs put the number at 65, including 11 children in the Republican Specialized Children’s Home in Tokmok and 40 in the Specialized Children’s Home in Bishkek. Furthermore, the adoption of children with a damaged central nervous system and who are mentally disturbed halved, declining from 43 in 2008 to 21 in 2009 (table 4).

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38 Family Code of the Kyrgyz Republic No. 201, art. 129, of 30 August 2003 (as amended by Act No. 117 of 12 June 2008).

39 Ministry of Foreign Affairs figures No. 075-14/1931 of 4 December, 2009.

Table 4
Comparative data on adoption from children’s homes (RMIC figures)

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Inter-country adoptions</td>
<td>111</td>
<td>80</td>
<td>86</td>
<td>73</td>
</tr>
<tr>
<td>Republic Specialized Children’s Home for children with damaged CNS and mental disorders (Tokmok)</td>
<td>42</td>
<td>37</td>
<td>43</td>
<td>21</td>
</tr>
<tr>
<td>Osh Children’s Home (Osh)</td>
<td>50</td>
<td>43</td>
<td>27</td>
<td>30</td>
</tr>
<tr>
<td>Specialized Children’s Home (Bishkek)</td>
<td>86</td>
<td>48</td>
<td>80</td>
<td>48</td>
</tr>
</tbody>
</table>

71. In the opinion of Natalia Utesheva, coordinator of the NGO Youth Rights Protection Group, “the consequences of placing healthy children in formal care are very sad. Children brought up without family traditions lose one month of growth for every three months’ stay in an institution. Their development is clearly retarded, bordering on mental disability. At the same time, children over 2 years old placed with a family show a small improvement in their intellectual ability and a significant decline in their sensitivity to other people’s emotions, sometimes inclining even to aggression, which altogether has a negative impact on the lives of children from children’s homes”. Utesheva also says that the moratorium on inter-country adoption resulted in one child being denied timely treatment for hydrocephalus, causing irreversible brain damage. The operation was performed 11 months late and was unable to rectify the problem and, in consequence, the potential adoptive parents decided against adopting the child. Another child missed out on an operation to correct a hare lip for a whole year, impeding his speech development and causing his teeth to grow wrongly and make eating difficult. Other children of the 65 whose inter-country adoption placements were suspended also lost out in various ways. These cases indicate the need for State agencies to take prompter action on adoption issues. A monitoring exercise conducted by the procurator’s office found that CCA and FCSD staff were unfamiliar with basic regulations designed to safeguard and protect Kyrgyz children’s rights and interests in domestic adoption cases and also discovered that adoption laws had been infringed in inter-country placements mediated by foreign States, including by Kyrgyz citizens. On the basis of Criminal Code article 315 (forgery in public service) and article 350 (forgery, manufacture, sale or use of counterfeit documents, State awards, stamps, seals and forms), investigation agencies instigated 51 criminal proceedings for cases of official forgery, falsification and use of counterfeit documents relating to inter-country adoption, which are currently being investigated by the Procurator-General’s Office.

H. Abuse and neglect (art. 19), including physical and psychological recovery and social reintegration (art. 39)

72. Act No. 62 of 25 March 2003 on social and legal protection against domestic violence makes no specific mention of violence committed against children, nor stipulates

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any special norms of responsibility. According to NGOs,\footnote{Youth Rights Protection Group, NGO Network for Child Rights, Children of Tien-Shan, Children in Danger, the Child Protection Centre, the Association of Parents of Children with Disabilities, the Children’s Rights Protection League.} in most institutions\footnote{Youth Rights Protection Group survey for 2006, 2007, 2009.} for children deprived of a family environment ill-treatment and punishment are common and many children suffer from neglect and a lack of medical care. Of particular concern is the prevalence of arbitrary punishment, many forms of which are cruel and degrading (punching, stick-beating, cleaning toilets for long periods, cleaning floors for a week, standing on one leg in the corner with arms raised, spending nights in rooms occupied by older children, food deprivation, unjustifiable institutionalization in psychiatric hospitals or deprivation of freedom for bad behaviour). A child may be punished by a care worker, the director or other staff members. Collective punishment is also used. An entire class may be punished for a misdemeanour committed by a single child. Children in formal care say that punishment is often occasioned by not agreeing with a care worker’s opinion or actions. A child has no real opportunity to complain about unjust and degrading punishment. There are no practical or legal procedures for challenging the actions of institution employees. Neglect for the health of children deprived of a family environment is also classifiable as a form of cruelty, whose consequences are the prolonged suffering of children, a change in the quality of their lives and even death. Child neglect is widespread; children’s dental care, for example, is virtually non-existent. A child with an aching tooth is given painkillers for a protracted period until the toothache stops. Children requiring surgery or hospital treatment rarely receive it, and, if they do, it is only when a child is in imminent danger of dying. Institutions have no child rehabilitation programmes and children suffering from urinary incontinence, for example, do not receive the medical and psychological care they require, alienating them from both other children and staff.

73. Pursuant to the recommendations of the Committee with regard to the ill-treatment of children and the lack of care (para. 284), including corporal punishment in the family, schools and childcare institutions, (para. 286), public prosecution offices carry out checks and also take preventive and corrective action. Thus, over a ten-month period in 2009 17 cases of violence against children were uncovered that lead to seven corrective action orders, two cautions and the instigation of two administrative actions, as a result of which ten people were subject to disciplinary proceedings and one person held administratively liable, eight criminal actions were instigated and three petitions filed to terminate the parental rights of parents accused of violence against their children. Teacher-pupil violence recently came under the public spotlight after the procurator’s office in the town of Mailuu-Suu launched criminal proceedings under article 161 (“failure to perform one’s educational duties to minors”) and 234 (“hooliganism”) of the Criminal Code against a teacher at Secondary School No. 5 for beating a pupil in the ninth grade. The teacher was convicted by Mailuu-Suu municipal court.

74. A 2009 UNICEF survey on domestic violence against children showed that a large number of children are subjected to emotional, psychological and physical abuse from parents, brothers, sisters and other relatives. Also, children in rural areas and large families are more likely to suffer violence and there is a strong tendency not to speak out against domestic violence. Often adults and children alike do not associate abuse with violence and hush up instances of cruel treatment. It is noteworthy that society too takes an inappropriate view of domestic abuse, while parental violence is regarded as a matter for the family alone and/or a means of education. Parents and children canvassed in the survey considered violence against children to be a way of educating them. Out of 2,132 children aged 10-17, 72.7 per cent said they had suffered domestic abuse and/or neglect. In particular, 51 per cent noted that they had been subjected to crude verbal abuse, 38.7 per cent had
experienced psychological abuse, 36.6 per cent physical violence and 1.6 per cent sexual abuse.\textsuperscript{44} The country has no mechanisms for uncovering cases of violence or for preventing them. The considerable difficulties in this area are due to the shortage of care agency staff, as well as to stereotypical attitudes in society towards violence against children, which is viewed as an important part of education and committed solely with the child’s interests in mind.

I. Periodic assessment of childcare practices (art. 25)

75. Tutorship and guardianship of children is regulated by the Family Code (chap. 21, arts. 151-157).

76. Children for whom tutorship or guardianship is established (art. 151):

- Tutorship or guardianship is established for children left without parental care (art. 126, para. 1 of the Family Code) for purposes of their maintenance, upbringing and education and to protect their rights and interests;
- Tutorship is established for children who have not reached the aged of 14;
- Guardianship is established for children aged 14-18;
- A person performing the duties of tutor to a ward who has reached the age of 14 becomes the minor’s general guardian and assumes all the rights and duties of a guardian;
- The establishment and termination of tutorship or guardianship of children is defined by the Civil Code.

77. Tutors (guardians) of children (art. 153):\textsuperscript{45}

- Only competent adults may be appointed tutors (guardians). Persons deprived of their parental rights may not be appointed tutors (guardians);
- When appointing a tutor for a child, due consideration must be given to the tutor’s (guardian’s) moral and other personal qualities, his/her capacity to fulfil the duties of a tutor (guardian), the relationship between the tutor (guardian) and the child, the attitude to the child of the tutor’s (guardian’s) family and also, where possible, the personal wishes of the child;
- Persons cannot be appointed tutors (guardians) who are pathologic gamblers, chronic alcoholics, drug addicts, are barred from becoming tutors or guardians, have restricted parental rights, are former adoptive parents in cases where adoption was cancelled through their own fault, as well as persons with disabilities unable to carry out the duties required in raising a child;
- A foster family may be named a child’s tutors (guardians) which in accordance with the established procedure is granted tutorship or guardianship of the child until he/she reaches the age of majority.

78. Tutorship (guardianship) of children resident in foster, health-care and social welfare institutions (art. 154): tutors (guardians) are not appointed for children fully cared for by the State in foster, health-care, social welfare and similar institutions. Their duties are undertaken by the administration of these institutions. A tutor’s (guardian’s) rights and


\textsuperscript{45} Family Code of the Kyrgyz Republic No. 201, art. 129, of 30 August 2003 (as amended by Act No. 117 of 12 June 2008), No. 233 of 17 July 2009).
duties towards a child do not cease if the tutor (guardian) places the child in such an institution for a temporary period. Departments for family and child support are tasked with monitoring the maintenance, upbringing and education of children living in children’s institutions and with protecting the rights of those who have left the institutions specified in paragraph 1 of this article.

79. The rights of children under tutorship (guardianship) (art. 155): children under tutorship (guardianship) have the right to:

- Be brought up in the tutor’s (guardian’s) family, be cared for by the tutor (guardian), live with him/her, except as provided for by article 71 of the Criminal Code;
- Be provided with the conditions necessary for their maintenance, upbringing, education, full development and respect for their human dignity;
- Receive the maintenance, pensions, allowances and other social payments due to them;
- Retain the right to own housing or the right to use and enjoy housing and, in the absence of housing be entitled to be provided with accommodation in accordance with housing legislation;
- Be protected from being abused by the tutor (guardian).

80. Rights of children left without parental care and living in foster, health-care or social welfare institutions (art. 156): children left without parental care and living in foster, health-care, social welfare or similar institutions have the right to:

- Be provided with the conditions necessary for their maintenance, upbringing, education, full development and respect for their human dignity;
- Receive the maintenance, pensions, allowances and other social payments due to them;
- Retain the right to own housing or the right to use and enjoy housing and, in the absence of housing, are entitled to be provided with accommodation in accordance with housing legislation;
- Receive job placement benefits provided under labour legislation on leaving the aforementioned institutions.

81. The rights and duties of a child’s tutor (guardian) (art. 157): the child’s tutor (guardian) is entitled and required to bring up the child under his/her tutorship (guardianship) and care for the child’s health and physical, psychological, spiritual and moral development. The tutor (guardian) is entitled to independently determine the methods for raising the child under his/her tutorship (guardianship), giving due consideration to the child’s opinion and the recommendations of the department for family and child support and in compliance with the requirements stipulated by article 70, paragraph 1 of the Family Code. The tutor (guardian) is entitled, with due regard to the child’s opinion, to choose the educational institution and form of the child’s education until he/she has completed basic general education, and is obliged to ensure that the child receives a basic general education. The tutor (guardian) is entitled to request, via legal action, the return of a child under his/her tutorship (guardianship) from any persons holding the child unlawfully, including the child’s close relatives. The tutor (guardian) is not entitled to prevent the child from interacting with his/her parents and other close relatives, except for when such interaction is not in the child’s interests. The civil rights and duties of the tutor (guardian) are defined under articles 71-73 of the Civil Code. The tutor (guardian) discharges his/her tutorship (guardianship) duties towards the child free of charge. Every month the tutor (guardian)
receives payment for the child’s upkeep in accordance with the procedures and amount specified by the Government.

VII. Basic health-care services and social security (arts. 6, 18, para. 3, 23, 24, 26 and 27, paras. 1-3)

A. Child survival and development (art. 6, para. 2)

82. The country’s development strategy until 2011 is geared towards achieving the Millennium Development Goals. Surveys show that since the mid-1990s there has been a steady decline in infant mortality rates and those of children under five years old. Official figures prepared by the Ministry of Health suggest that birth and death-rate data are becoming more accurate, as is indicated by figures showing a rise in mortality rates that are more in line with survey estimates.

83. By 2003 mortality rates among children under five had declined compared with the 1990 benchmark, caused, among other factors, by internal and external labour migration, fewer new marriages and lower birth rates.\[46\] The period 2004-2007, however, saw a rise in the under-five child mortality rate, which, while partly due to the increased birth and migration rates, was also impacted by the adoption of the new national criteria recommended by WHO (2004) for recording live births and stillbirths. Based on these criteria, for the purpose of defining a live birth, the gestation period was reduced from 28 to 22 weeks and the child’s birth weight from 1,000 g. to 500 g. Besides breathing, other evidence of life specified included a beating heart, pulsation of the umbilical cord and muscular contraction. Combined with the moratorium on administrative penalties for health-care providers whenever infant mortality rates\[47\] increase, this initiative reduced discrepancies between official and survey results. Thus, in 1997 the official child mortality rate was 33 per 1,000 compared with a survey result of 120 per 1,000; in 2003 the official and survey figures were 21 per 1,000 and 61 per 1,000, respectively; in 2008 the official figure was 27.1 per 1,000, while a 2007 survey showed 38 per 1,000. The child mortality rate in rural areas is twice that of towns (in 2007 27.7 per 1,000 and 54.5 per 1,000, respectively). Since 2007 there has been a small decline in infant and child mortality. In 2008, for instance, it was 27.1 per cent and 31.5 per cent, respectively, compared with 29.2 per cent and 34.6 per cent in 2006, i.e. a 7.2 per cent and 9 per cent respective decrease. One of the main causes of infant and child mortality is the baby’s poor health during the postnatal period. In 2008 63.5 per cent of all deaths among infants under 1 year old were due for this reason, as were 55.2 per cent of deaths among children aged 0-4 years.\[48\] Other causes are respiratory diseases (14 per cent and 16.7 per cent, respectively), congenital disorders (11.1 per cent and 10.8 per cent), infectious and parasitic diseases (5.8 per cent and 6.7 per cent), injuries and poisoning and other external causes.\[49\] Mortality in this period is due to late recourse to prenatal care services, undiagnosed problems during pregnancy, insufficient specialized pre- and postnatal services, poorly trained birth care staff and the

\[47\] See government decision No. 748 of 3 December 2003 “On Amending the System of Statistical Data Gathering Further to the Switch to WHO Live Birth Criteria”, Ministry of Health order No. 562 of 19 December 2003 on adopting WHO live birth criteria, para. 25: “With a view to producing true and objective data, administrative penalties for submitting complete and accurate data are discontinued at all levels”.
\[49\] Compendium of Medical Indicators. Republican Medical Information Centre, 2010.
limited neonatal resuscitation resources. That access to high-quality children’s health-care services in the regions is a problem is shown by the high incidence of infant and child mortality in Osh and Bishkek, where critically sick children from remote areas are sent with their condition often at an advanced stage, resulting in death. Another reason for the rise in mortality rates in urban areas is the large numbers of internal migrants living in difficult economic and social conditions. Data prepared by the Republican Medical Information Centre show that the oblasts with the highest rates are Batken and Talas (fig. 2, 3). Every child’s death is investigated by the health authorities and health-care organizations. If a doctor and/or others are to blame for the child’s death, the case is passed to the public prosecution office.

Throughout the country public prosecution offices monitor compliance with mother and child protection legislation. Following the rise in child and mother mortality rates, the procurator’s central administration in Osh Oblast has verified compliance with laws ensuring citizens’ reproductive rights and public health protection. Some hospitals were found to lack sufficient medicines, elementary infection control procedures, while staff ignored basic medical safety standards. Patients complained about the low quality of service, as well as about the abusive and disrespectful attitude shown towards patients. After the inspection, a corrective action order was issued and the Ministry of Health launched administrative and disciplinary proceedings against a number of public officials and doctors at sub-district hospitals. In 2008 31 of 56 maternity hospitals were certified “baby-friendly” and accounted for 47.3 per cent of all births. Official data show in this respect that oblasts which are being helped to upgrade their perinatal care services have a significantly lower incidence of new-born deaths, whereas those not receiving support in this area show either no improvement in perinatal care or declining standards. Effective interventions, such as integrated management of childhood illnesses (IMCI), have been deployed nationwide. Since 2006 an IMCI centre has been operating and the primary health care programme extended to all parts of the country. The same year the list of medicines was widely expanded as part of the Mandatory Health Insurance Fund’s Additional Drug Package Programme to include all necessary pharmaceuticals under the IMCI programme, including those for micronutrient inadequacy. Mother and child protection programmes were incorporated into advanced training courses at the Kyrgyz State Medical Institute. Thus, declining infant mortality rates are being achieved by focusing on the immediate causes of death among mothers and new-born children, specifically by: (a) introducing improved perinatal care and baby-friendly services in 47.3 per cent of maternity homes; (b) deploying the IMCI programme nationwide and (c) maximising the promotion of immunisation and breastfeeding and providing reproductive health services and resources.
84. Infant and child mortality rates remain unreasonably high, necessitating immediate
and coordinated efforts, as well as investments in appropriate programmes to reduce them.
The high mortality rate among infants is due not only to changes in registration criteria, but
also to the country’s social and economic situation as a whole, as is evidenced by the higher
death rates among children at home or immediately after admission to hospital, indicating,
in turn, that parents and health-care facilities are materially incapable of rendering timely
and skilled assistance. The high mortality rates are a consequence of child poverty.
According to an integrated household sample survey conducted in 2006, 48.5 per cent of
children under 17 live in poverty, 12 per cent of them in absolute poverty.\(^50\) Analysis of
infant and child mortality has long been accompanied by an entrenched tendency to seek
the causes in maternal and child health problems and to devise new health-sector policy
solutions. However, they cannot be solved without looking at the causes in a wider context
and formulating policies in other sectors. A study on safe pregnancy indicates that health
problems account for around 10 per cent of all infant and child deaths,\(^51\) which partly result
from the general state of children’s health: around 70 per cent of children have iodine
deficiency, 32.9 per cent low levels of vitamin A and 27.2 per cent suffer from anemia. The
problem is exacerbated by the fact that 95 per cent of rural children lack access to preschool
facilities and that small children are left in the care of their older brothers and sisters, if not
entirely on their own, which adversely affects their physical and psychological
development and increases the likelihood of children injuring themselves. Furthermore, a
recent study has shown that parents fail to recognise dangerous signs of illness and do not
seek medical help early enough.\(^52\)

B. Disabled children (art. 23)

85. Disability is defined in legislation as a health disorder resulting from the persistent
impairment of body functions leading to the full or significant loss of earning capacity or to
serious limitations in the performance of daily activities. Disabilities are broken down into
three categories, graded in accordance with their severity. Kyrgyzstan has registered
children with disabilities since 2003, categorising them as “disabled” when confirmed as
such by a social security medical assessment board, then, once they reach maturity,
re-categorising them as “disabled since childhood”. The system of dividing the disabled
into different categories includes separate provisions for minors, whose names are placed
on record up until the age of 18. The system operates under State regulation No. 915 of 30
December 2002 on social and medical examination which establishes unified standards and
procedures for assessing the sick and disabled, the rules for defining different disability
types and categories, as well as benefit payment amounts and timescales. Act No. 38 of 2
April 2008 “On the Rights and Guarantees of Persons with Disabilities” is the basic law
setting out State policy with regard to people with special needs, including children, and the
State guarantees and benefits due to them under the Constitution and the country’s
international obligations. The Act is designed to ensure that the disabled enjoy the same
opportunities as other citizens in exercising their rights and freedoms, to eliminate any
limitations in their daily activities, to establish an environment conducive to enabling
people with disabilities to lead full lives and take an active part in the economic, political
and cultural life of society, as well as to ensure that steps are taken to prevent disabilities
occurring. The new Act on Guaranteed State Minimum Social Standards will enable

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51 http://www.24.kg/community/2008/06/19/87895.html “Beyond the figures?” materials from
a workshop held by the Ministry of Health, WHO, and UNFPA, 19 June, 2008
http://www.24.kg/community/2008/06/19/87895.html.
52 Summary report on the results of the activities of health-care organizations in 2007 and
tasks for 2008.
children with special needs to exercise their social rights, including access to education. The ground-breaking Act on State Procurement of Public Goods is geared towards developing and improving the quality of social services by involving government authorities, non-profit organizations in operating social programmes. Central Asia’s first International Conference on Empowering Disabled Persons’ Organizations held in Bishkek in October 2008 agreed to set up a regional network, strengthen information sharing between disabled persons’ organizations, headquartered in Bishkek, and to encourage co-operation on disabled persons’ issues between the countries in the region and United Nations organizations. Meanwhile, the State is taking steps to protect the rights and interests of children with special needs under the “New Generation” State Program for Implementation of Child Rights in Kyrgyzstan until 2010, which is underpinned by the recognition that the priority objective of State policy in this area is to ensure that children grow up without infringement of their rights on any grounds. At present, the Ministry of Health, the Ministry of Education and Science and the State Agency for Social Welfare are implementing policies that focus on the education, health and social-welfare needs of disabled children. The State Agency for Social Welfare is responsible for registering children for benefits and privileges and oversees the work of rehabilitation centres and specialized institutions for children with severe disabilities. The country has two State rehabilitation centres, Maksat in Alamudun District and Rostok in Sokuluk District, both in Chuy Oblast. Children receive outpatient and residential care at the Republican Mental Health Centre, a specialized psychiatric facility.

86. Incidence of disability among children and orphans is rising. In the past five years primary disabilities among children have increased 50 per cent and 22-28 per cent of children with permanent health problems are diagnosed as disabled. Disability is more prevalent among boys than girls and in rural areas twice as common as in towns.

87. As regards the different types of children’s health problems, primary disability caused by injuries has risen from seventh to fourth position, with children aged 0-13 (71 per cent) particularly vulnerable. In Kyrgyzstan child injuries are a priority social and economic problem. Viewed in terms of their prevalence, household injuries account for 57.6 per cent, outdoor injuries 26.2 per cent, traffic accidents 2.1 per cent, school injuries 4.5 per cent, sports injuries 1.9 per cent, and all others 7.7 per cent. 60 per cent of injuries are sustained by children aged 7-16, 28.5 per cent by children aged 3-7, 10.1 per cent by children 1-3 and 1.2 per cent by infants less than 1 year old. Analysis of road traffic accidents in the period 2006-2008 shows that most child victims were injured in Naryn, Batken, Osh and Jalal-Abad oblasts. According to the General Directorate for Road Traffic Safety, the rise in the number of road accidents is due to the shortage of road traffic facilities (crossings, traffic lights, pedestrian barriers, road signs, street lighting), the increased number of vehicles, the bad state of roads, pavements and the aqueduct network, ignorance and wilful violation of the highway code and deficiencies in administrative legislation. With a view to preventing and reducing child disabilities resulting from accidents and injuries and to improve their physical development, the Ministry of Internal Affairs, the Ministry of Education and Science, and Bishkek Mayor’s Office are conducting a series of initiatives (training programmes, competitions) aimed at averting road accidents and enhancing children’s physical fitness.

88. Over 5,000 children are under the care of psychiatrists (table 5).
Table 5  
Number of children under 15 under psychiatric supervision as of year-end 2006, 2007 and 2008

<table>
<thead>
<tr>
<th>Year</th>
<th>Registered Consultations</th>
<th>Registered Consultations</th>
<th>Registered Consultations</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>4,607</td>
<td>1,087</td>
<td>4,419</td>
</tr>
<tr>
<td>2007</td>
<td>4,149</td>
<td>987</td>
<td>3,836</td>
</tr>
<tr>
<td>2008</td>
<td>4,369</td>
<td>836</td>
<td></td>
</tr>
</tbody>
</table>

Although registered incidence of child psychiatric disorders has declined, the number of children diagnosed as disabled has increased. Thus, out of 4,369 children registered in 2008, 1,928 (44 per cent) were certified disabled (tables 5, 6). Furthermore, the overwhelming majority are mentally retarded (table 6).

Table 6  
Incidence of disability among children with psychiatric disorders by type, 2006-2008

<table>
<thead>
<tr>
<th>Type of disorder</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
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<tbody>
<tr>
<td>Organic disorders</td>
<td>232</td>
<td>328</td>
<td>321</td>
</tr>
<tr>
<td>Schizophrenia</td>
<td>3</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Mental retardation</td>
<td>1,794</td>
<td>1,627</td>
<td>1,574</td>
</tr>
<tr>
<td>Total</td>
<td>2,191</td>
<td>2,032</td>
<td>1,944</td>
</tr>
</tbody>
</table>

Children’s psychiatric care is regulated by the Health Protection Act and the Act on Psychiatric Treatment and Rights Guaranteed When it is Administered. Children receive outpatient and residential psychiatric care at specialized psychiatric facilities at the Republic Mental Health Centre, Osh Regional Mental Health Centre, the Republican Children’s Psychiatric Hospital in the village of Ivanovka, as well as from psychiatrists at primary health-care organizations. The country has 120 psychiatric beds for children. Inpatient departments cater for children aged 6-15 diagnosed as mentally retarded and with behavioural disorders, who make up over 50 per cent. Next come children with organic psychiatric disorders, including epilepsy, children with behavioural disturbances and psychological development disorders. During 2008 265 children were examined and treated at inpatient facilities. Speech therapy departments have been allocated budget funds covering 7.5 monthly salaries for employees working in Bishkek’s outpatient network and four monthly salaries for inpatient facilities (three at the Republican Mental Health Centre, one at the National Hospital Ear, Nose and Throat unit), six for the Bishkek Children’s Home, and three for the regions (Naryn, Osh and Tokmok). Speech therapists also work in schools and kindergartens.

With regard to inclusive education: “Inclusive education is a dynamic process whereby national educational systems address and respond to the diverse needs and requirements of all learners by creating an environment for successful academic performance and socialization excluding all forms of segregation among children”. The recognition by Kyrgyzstan of the international conceptual reports and Standard Rules on the Equalization of Opportunities for Persons with Disabilities adopted in resolutions 48/96 adopted by the General Assembly in 1993, the Statement on Principles, Policy and Practice in Special Needs Education adopted by the World Conference on Special Needs Education in 1994, the Dakar Framework for Action “Education for All: Meeting Our Collective

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53 Declaration of Meeting of Ministers of CIS Countries, “Communities of Practice”, Minsk, 2007.
Commitments” adopted by the World Education Forum (2000), the Plan of Action of “A World Fit For Children” (2002) and other international documents guarantees greater access to quality basic education for children with special needs. With a view to extending and improving universal education for especially vulnerable children, the following programmes are now operating:

• The Zhetkinchek Access to Education programme;
• The State Educational Doctrine;
• The National Action Plan on Education.

The Ministry of Education and Science is responsible for 15 special boarding schools with a total 2,425 pupils, four special general education schools catering for 482 children and 14 special preschool facilities with 1,256 children. To establish guidelines and standards for inclusive educational institutions, the Republican Inclusive Education Resource Centre was set up under the aegis of the Ministry. Social workers train at Bishkek Humanities University’s Institute of Continuing Education, Arbaev State University Further Teacher Training Institute and at Jalal-Abad, Osh and Batken State universities. They can also attend courses at the Institute of Social Development and Enterprise affiliated to the Ministry of Labour and Social Development. There exists a State further teacher training network that includes the Kyrgyz Academy of Education, Arbaev State University, the Kyrgyz-Russian Slavic University, as well as regional further teacher training institutes and universities. International organizations and NGOs sponsor courses, special workshops and round tables on important inclusive education issues. Inclusive education is supported mainly by international donors (Save the Children UK, the Step by Step Foundation, UNICEF, EveryChild) whose goal is to break away from ideas of segregated schooling and, by doing so, promote children’s educational rights. These objectives are being put into practice by pilot projects that employ new teaching methods and approaches to classroom management that enhance teachers’ career development and professional skills while simultaneously expanding their and parents’ capacity to meet the interests and special needs of children with disabilities (PEAKS, UNICEF). The donors have also facilitated the inclusion of children in community life by working with local communities to promote the rights of disabled children (EveryChild), by providing training for community members or by involving them in addressing their special needs (Save the Children Denmark). Separate projects supported by the Ministry of Education and Science have made it easier for children unable to attend school to receive an education by training and improving the skills of mental-health, health and school counsellors. Parental adaptation programmes have been started by the Public Association of Parents of Children with Disabilities in the village of Kokoy (NGO Benkur, Talas Oblast) where social services and district NGOs are training doctors, social workers and parents in rehabilitation skills. In 2003 the Ministry of Health helped the NGO Infanti open a remedial gymnastics room at the National Centre of Paediatrics and Child Surgery. The aims of the room are to improve consultation services for parents by enabling them to confer with different specialists (occupational therapists, speech therapists, psychologists, remedial gymnastics specialists) on care issues and choosing auxiliary equipment such as wheelchairs, walking frames, crutches and other orthopaedic aids, for children from all over the country with infantile cerebral paralysis, Down syndrome, epilepsy and other disorders. Over 40 NGOs have become involved in working with children with special needs, including the Obereg, Juventis and Triumfator rehabilitation centres. In Isfan the NGO Tonus has opened a physical therapy room where more than 300 disabled children can improve their fitness through physical exercise. Opened by the Mayor’s Office, Bishkek Municipal Rehabilitation Centre for people with special needs provides training and guidance for social workers in social rehabilitation and occupational therapy, as well as practical learning facilities for social worker students. Nevertheless, access to these different initiatives requires children to be assigned specific
categories that are dependent on assessments made of their condition and registration by a social security medical assessment board, which comes under the authority of the Department of Social Services, while the mental health education commissions are overseen by the Ministry of Education and Science.

90. Medical and social examinations are carried out by social security medical assessment boards in accordance with the Regulation on Medical and Social Examination approved by government decision No. 915 of 30 December 2002. Social security medical assessment departments are subdivisions of the Social Security Medical Assessment Centre for the Disabled, a subsidiary of the Government-affiliated State Agency for Social Welfare. The priority tasks and functions of the social security medical assessment boards are:

- To assess temporary and permanent loss of earning capacity, determine disability, the disability category, the cause (the circumstances and conditions), the duration and onset date of disability and the social-welfare needs of the disabled person;
- To identify the disabled person’s need for additional care (persons with work-related injuries), rehabilitation equipment, medical and professional rehabilitation services;
- To specify the conditions and types of work, occupation and profession available to disabled persons, as well as the conditions and methods that could help restore or improve their earning capacity;
- To establish the extent to which professional earning capacity (as a percentage) has been lost for persons who have sustained injuries or other health impairments in the performance of their employment duties and the necessity for additional social-welfare measures;
- To establish whether the disabled person needs mobility aids, such as wheelchairs and rollators.

When requested by social security agencies:

- To carry out post mortem examinations;
- To backdate disability claims;
- To verify the correct employment of disabled persons in the workplace pursuant to the guidelines of the social security assessment board;
- To help disabled persons obtain equal opportunities in daily life, education and employment within the limits of their functional responsibilities;
- To advise doctors at preventive health-care centres on medical and social assessment issues, including consultation with regard to the assessment of sick and disabled persons.

Social security medical assessment boards perform an assessment at the request of preventive health-care centres, an individual (the person claiming disability or his/her representative), the State Labour Inspectorate or a court, and on the submission of medical documents, an accident or occupational illness report or other documentation confirming injuries sustained in the performance of employment duties. In accordance with established procedure, the person is sent by a health-care facility for medical assessment after a full and thorough medical check-up in hospital conditions involving a mandatory diagnostic and pathological examination and remedial treatment in cases where comprehensive data show evidence of severe impairment of body functions caused by disease, injuries or defects. The health-care facility referral contains details of the individual’s disability indicating the extent to which his/her body functions and systems are impaired, the condition of compensation abilities, as well as the results of any treatment. The board considers the
submitted documents (clinical and functional, social, professional, psychological and other data), examines the individual in question, assesses the limitations placed on his/her daily activities, then discusses its findings. Grounds for assigning disability status are:

- Health impairment with persistent damage to body functions caused by disease, injuries or defects;
- Limitations precluding daily living activities (full or partial loss of ability or capacity to care for oneself, move about freely and independently, make decisions, interact, control one’s behaviour, undergo training or work);
- The need to afford the claimant social protection.

Having only one of the listed symptoms is not considered sufficient cause to assign the claimant disability status. The entire board takes the decision to grant or reject disability status by majority vote. If the chairperson or other board members do not agree with the decision, their views on the case are noted in the evaluation certificate. The head of the institution informs the claimant or his/her lawful representative of the decision in the presence of the board members, who explain their reasons to the claimant or lawful representative.

91. Government decision of 21 June 1999 establishes the role and functions of the psychological, medical and educational guidance centres, which include one at the national level overseen by the Ministry of Education and Science, as well as six regional, nine municipal and district centres. Their task is to evaluate children’s learning difficulties, place them in special preschool facilities and specialized boarding schools, to advise parents and make recommendations regarding the children’s health-care and social-security needs. They also identify disabled children who may require additional care, register them, and monitor the development and social adaptation of care leavers from specialized educational institutions. The centres work closely with education departments, health-care facilities, social-security agencies and the relevant NGOs. In addition to its general duties, the national psychological, medical and educational guidance centre performs a coordinating, regulatory and oversight function that includes considering complex and contentious cases on the basis of documents submitted by its regional, district or municipal counterparts. It also prepares teaching programmes for specialized boarding schools, preschool facilities, schools and special groups at teacher training colleges, develops speech-therapy methods, provides medical services for mentally or physically disabled children and acts as an intermediary between the Ministry of Health, the State Agency for Social Welfare and NGOs. Its oversight duties include periodic examination of orphans and other children brought up in children’s homes and orphan residential schools and maintaining a national register of disabled children.

92. The growing number of disabled children in Kyrgyzstan is attributable to development defects and external factors. In the former instance the cause would appear to be inadequate access to medico-genetic care and the weaknesses of family-planning provision. Injuries resulting in disability are, once again, due to neglect, negligence and shortcomings in child education. The country has set up a network of organizations that care for disabled children and their families. Although steps are being taken to integrate these children into society, such initiatives require determined efforts and substantial funding on the part of the State, civil society, international organizations and parents themselves. With the support of international organizations, services providing disabled children with greater opportunities have been piloted that, while already worked out in detail and officially endorsed, still require a substantial amount of time before they can be applied in practice. The development of inclusive education, for instance, is being impeded by the shortfall in teaching staff, limited access to speech therapy services and the shortage of suitable educational materials and equipment. A major barrier to co-education is the lack
of individualised education programmes: at present all children are taught a common
syllabus that ignores the special educational needs of disabled children. 63 per cent of
parents canvassed in a poll believe that school programmes that use inclusive education
teaching methods are either of a low or very low standard, an opinion shared by 45 per cent
of head and deputy-head teachers. Forty-six per cent of heads and deputy-heads at pilot
schools noted that the education provided at these institutions was mediocre, while 54 per
cent of parents simply did not answer the question. Thirty-seven per cent of parents and 54
per cent of teachers said that educators spent little time on additional work with children
with special needs. Fifty per cent of teachers rated the use of progressive methods for
teaching special-needs children as less than successful. Fifty-four per cent of head and
deputy-head teachers and 63 per cent of parents consider that special-needs education
facilities were of a very low standard.

C. Health and health-care services (art. 24)

93. Kyrgyzstan regards infant, child and maternal health as priority issues. Funding is
primarily targeted at training and mentoring health-care providers, establishing an
infrastructure and equipping health-care organizations. High political commitment is
reflected in the inclusion of children under five, pregnant and lactating women and women
using contraceptives in the State’s guarantee benefit package, a move facilitated by the
creation of the National Centre for Maternal and Child Health and the Maternal and Child
Health Unit, State financing of vaccines, the adoption of a perinatal programme and the
incorporation of updated maternal and child health courses into continuing education
programmes at the Kyrgyz State Medical Institute. In the period 2000-2004 people without
access to health services fell from 11.4 per cent to 7.8 per cent.54 Even though much of the
population is able to afford medical services, some communities, particularly those in rural
areas, find their cost and the distant location of health-care facilities a serious obstacle.
Under the State guaranteed benefit package, the list of citizen categories entitled to free
inpatient and outpatient health care now includes:

- Persons disabled since childhood;
- Disabled children under 18;
- Children under five (4 years, 11 months and 29 days);
- Orphaned children living in State children’s homes, foster homes (foster families),
orphanages, and children left without parental care;
- Children under 16 from large families with four or more minor children (available
  on submission of a certificate from social-security agencies or local government
  social worker).

In the list children aged 5-16 (pupils attending general education institutions until leaving
school but not those over 18) are placed in the same category as persons entitled to claim up
to 75 per cent off the official average price of hospital treatment and also 50 per cent off
outpatient services Nonetheless, the general public, including children from large families
and disabled children, continue to pay for health care, which is very much a problem for
economically disadvantaged sections of the population. Since 2006 the number of free
health care services has been substantially extended under the State guaranteed benefit
package for children under five and for women during pregnancy and childbirth, thereby

55 Programme of State Guarantees on Free and Preferential Terms approved by Government
Decision No. 192 of April 29, 2008.
making medical treatment more available for children and pregnant women. To finance these objectives, in 2006 an additional 136.2 million soms were allocated from SWAP funds, followed in 2007 by another 149.9 million soms. 2006 also witnessed a significant extension of the Mandatory health insurance fund (MHIF) Additional Drug Package Programme, which now included medicines recommended under the IMCI programme, as well as those essential in the treatment of children with micronutrient inadequacy. To reduce the number of congenital anomalies, folic acid and iron were included in the MHIF programme for all pregnant women and, with a view to sustaining and improving maternal and child health, a series of enactments were adopted, including:

- Act No. 263 of 17 December 2008 on Protecting the Breast-Feeding of Children and Regulating the Marketing of Milk Substitutes and Government Decision No. 703 of 13 November 2009 on Protecting the Breast-Feeding of Children and Regulating the Marketing of Milk Substitutes;
- The Perinatal Care Improvement Programme in Kyrgyzstan for 2008-2017 (Ministry of Health order No. 315 of 20 June 2008);
- Ministry of Health order No. 92 of 5 March 2009 on Organizing the work of maternity hospitals (departments) and further quality improvement of obstetric-gynaecologic care in Kyrgyzstan;
- Ministry of Health order No. 345/24/12 of 3 June 2009 on Implementing Decision No. 460 of 19 June 2009 of the Government and the Council of the Federation of Trade Unions on Measures to Organise Summer Holidays for Children and Adolescents in 200;
- Ministry of Health order No. 751 of 5 November 2009 on Approval of the Ministry of Health Action Plan to Reform the Child Protection System and Develop Public Services in Kyrgyzstan for 2009-2011.

Standards regulating youth-friendly health services (YFHS) have been formulated and three pilot organizations chosen as vehicles for testing YFHS standards (a student health centre in Bishkek, the Jalalabad Reproductive Health Centre and the Karakol branch of the NGO ARZ). Once the quality of YFHS has been tested, the pilot health-care organizations will be trained and equipped and the YFHS standards then approved by the Ministry of Health. The Ministry is currently reviewing order No. 202 of 20 June 2000 concerning the delivery of primary health care to the population with a view to addressing public health protection issues, including the reproductive health of teenagers and children.

94. Some 500,000 new cases of child illness are registered every year. Outpatient monitoring covers some 300,000 children with chronic disorders a year. Overall, the commonest disorders among children are respiratory diseases (43.7 per cent), infectious and parasitic diseases (11.2 per cent), digestive diseases (9.1 per cent) and diseases of the blood and blood-forming organs (7.3 per cent). Preventive medical examinations of school children carried out in 2008 revealed that 10.3 per cent of them suffered from some form of somatic dysfunction: 16,857 children were discovered to have postural disorders, 15,997 had vision problems and 3,611 had hearing difficulties, while 8,789 were physically underdeveloped for their age. By the time they leave school every third or fourth teenager suffers from a chronic form of illness.

95. Timely immunisation plays a vital role in improving children’s health and reducing child mortality. Pursuant to Act No. 800 of 21 December 2001 on immunoprophylaxis of infectious diseases, children under 2 years old are immunised free of charge. A national immunisation programme covering the period 2006-2010 was ratified by government decision No. 369 of 22 May 2006. Since 2005 the State has financed the purchase of vaccines for children and by 2008 60 per cent of immunisations were State-funded. Levels
of vaccination coverage among children remain high. In 2008 measles vaccination coverage was 99.1 per cent and in recent years no new poliomyelitis cases have been reported and incidence of diphtheria, measles and hepatitis B has fallen dramatically. European Immunisation Weeks have proved instrumental in extending vaccination coverage among infants under 1 year old. Nonetheless, funding for immunisation programmes still depends on international humanitarian assistance.

96. A wholesome and balanced diet is essential for children’s growth and development, preventing disease and functional abnormalities and enhancing their general fitness and academic performance. According to the State Infectious Disease Control Department, 7.4 per cent of food samples subjected to chemical analysis in a 2008 test study contained elevated levels of nitrates (1.9 per cent), mycotoxins (1.3 per cent) and pesticides (0.2 per cent), while 8.4 per cent did not meet microbiological standards. Poor nutrition in children is due to improper consumption of essential nutrients, irregular eating habits and an imbalance between caloric intake and energy expenditure. Children’s diets are high in animal fats, increasing the risk of metabolic disorders. Inadequate consumption of protein, vitamins and other vital macro and micronutrients during childhood and youth negatively impacts morbidity rates and academic performance, weakens resistance to disease, stress and environmental pollution and ultimately impedes the development of a healthy generation. With a view to realising the goals of its national healthy eating programme to maintain and strengthen the population’s health and to prevent diseases caused by adults’ and children’s poor diet, the Government is taking steps to avert the negative effects of iodine and iron deficiency. Measures for overcoming iodine and iron deficiency disorders feature in the Government’s policy papers, including, among others, the “Integrated Basis of Development of the Kyrgyz Republic”, the “Country Development Strategy until 2011” and “Public Health Strengthening 2004-2010”. An important part of improving children’s health lies in the provision of school meals, to which end presidential decree No. 372 “On Providing Meals for Pupils at General Education Schools” was issued on 12 July 2006. By 2008 over 400,000 school children in grades 1-4 were receiving hot meals. Improvements in providing food to schools and children’s organizations, as well as increased local budget funding in this area, is helping to lower child morbidity rates and strengthen children’s health.

97. Kyrgyzstan is regarded as an endemic region whose soil and water, and, hence, foodstuffs, are naturally low in iodine, resulting in a high prevalence of iodine deficiency disorders (IDD) that UNICEF experts classify as a moderate endemic. Retrospective analysis of morbidity data has revealed the high incidence of thyroid disease in children and adolescents, with the prevalence of hypothyroidism ranging from 30-87 per cent, depending on the region. Sixty per cent of newborns in Bishkek and Osh were found to have low level of thyroid hormone, which may retard mental development. Act No. 40 of 18 February 2000 on the Prevention of Iodine Deficiency Disorders and bylaws for its implementation have been adopted to ensure that urgent action is taken to reduce IDD levels. In addition, 12 enterprises have begun producing iodised salt, thus meeting 60 per cent of the population’s needs. The saturation of the market with iodised salt and heightened public awareness of the problems caused by iodine deficiency has helped to reduce the incidence of iodine deficiency disorders. Despite these positive trends, the State Infectious Disease Control Department reports that in 2008 26.5 per cent of table salt samples were found to be low in iodine content, resulting in 35,194 kg of poor-quality salt being discarded. The largest number of irregularities regarding iodised salt content was in Chuy, Naryn, Batken and Issyk-Kul oblasts. According to a multiple indicator cluster survey, 76.1 per cent of households use high-quality iodised salt. In line with a UNICEF-backed Ministry of Health initiative, as a way of consolidating progress to date a programme has been drafted to reduce the incidence of iodine deficiency disorders in the period 2010-2014.
98. Iron-deficiency anaemia is another serious problem for the country’s children and accounts for 94.6 per cent of all blood disorders. Data compiled by the National Centre of Paediatrics and Child Surgery show that 27.2 per cent of children aged 0-16 suffer from anaemia of varying degrees of severity, most noticeably in Osh Oblast (41.1 per cent). In rural areas the incidence rate is 34.2 per cent and in towns 19.7 per cent. Anaemia affects 62.8 per cent of infants, 41.6 per cent of young children, 25.5 per cent of preschool children and 20.9 per cent of school children. To reduce iron-deficiency anaemia among the population and to provide it with food products enriched with iron, zinc and vitamins (B1, B2, B3 and folic acid) an act on baking flour enrichment has been passed and a national policy adopted on healthy functional nutrition. Likewise, a national food certification council has been set up and a programme devised for lowering iron-deficiency anaemia levels and improving vitamin A consumption. Production of iron- and vitamin-enriched flour has begun. In response to the deteriorating nutritional status of children in Talas Oblast, where 27 per cent of young children have stunted growth, steps are being taken to teach mothers sensible child nutrition by enlisting the help of rural health committees and retraining health providers. Children aged 6-59 months and mothers during the first eight months after giving birth receive vitamin A in large-scale supplement distributions sponsored by UNICEF.

99. Maternal mortality remains high. According to the Ministry of Health, in 2009 the maternal death rate was 75.3 per 100,000 live births, or 27.8 per cent higher than the prior-year figure of 58.9 per 100,000 and 65.5 per cent higher than in the year 2000 (45.5 per 100,000). The maternal mortality rate rose in Naryn, Osh and Chuy oblasts, as well as in the city of Osh (43.2 in the city and 61.2 in rural areas). By comparison, the rate in Europe is 15.05. It is considered that official statistics are underreported. For example, studies indicate that in 2006 there were 104 maternal deaths per 100,000 live births. According to the Republican Medical Information Centre, in 2009 the maternal mortality rate was 69.1 per 100,000. Rates are rising in Naryn, Osh and Chuy oblasts, as well as in the city of Osh, where, in 2009, 81 women died in childbirth and the postnatal period. Analysis shows that in nearly one of three cases of maternal death the women in question had not registered their pregnancies and 44 per cent belonged to at-risk groups by virtue of their age. The available evidence suggests that before becoming pregnant the women suffered from underlying extra-genital diseases (cardiovascular decompensation, various types of nephritis, leukaemia, tuberculosis, etc.) that became aggravated during pregnancy and caused their death. Cases of maternal death are investigated by the procurator’s office. Thus, following the death of O. in childbirth criminal charges were brought by the Alay district procurator’s office in Osh Oblast under article 119, part 2 (improper performance of professional duties by a health provider) and under article 121, part 2 (Omissions causing danger) of the Criminal Code. Experts cite the sizeable increase in births with various complications as one of the causes of the high mortality rate. Although longer compared with 1990, inter-birth intervals remain too short where 11 per cent of women are concerned. Other causes become clear when the data are considered in the light of the Millennium Development Goal 5 indicator for “the proportion of births attended by skilled health personnel”. In 2008 this indicator stood at 98.5 per cent, or lower than the target benchmark. Also, research data is greatly at variance with official figures: a cluster survey indicates that only 76 per cent of women were assisted by trained staff during labour and delivery. However, these figures are not reflective of on-going problems concerning the quality and availability of health care, particularly for women living in rural and remote

58 In the poorest and richest quintiles 60.1 per cent and 96.3 per cent of women, respectively, received this type of assistance. Multiple cluster survey, NSC, UNICEF, 2006, p. 15.
areas. Access to health care is limited due to the rise in unauthorised charges for childbirth services. One result of increased internal migration is the emergence of a new category of woman who, because she has no permanent place of abode, is consequently unable to register with the health-care authority. Although the State-guaranteed Benefits Package Act adopted under the Manas Taalimi health-care reform programme stipulates that pregnant women must be registered whether they have a permanent address or not, public awareness of this initiative remains very low. Also, increased external labour migration means that women returning home to give birth are not monitored. There is an acute shortage of trained specialists and some areas do not have enough neonatologists or obstetrician-gynaecologists. Batken Oblast, for instance, has only two obstetrician-gynaecologists. Since 1990 the number of people with diseases of the blood and blood-forming organs has doubled, 96 per cent of them cases of iron-deficiency anaemia. Some 60 per cent of women of reproductive age suffer from anaemia, primarily in Jalal-Abad Oblast. There is insufficient public awareness, particularly in rural areas, of family planning, ways to maintain reproductive health and safe birth-control methods. This accounts for the continued prevalence of abortion, which is the cause of ten per cent of all registered maternal deaths. The decline in the number of registered abortions\(^{59}\) is attributable to the increase in private clinics that carry out but do not register abortions with the statistical authorities. Since 2002 in rural areas village health committees have been set up that are tasked with raising public awareness of health-care issues, including reproductive health. There also a number of non-medical factors affecting maternal mortality such as early marriages, statistics on which have become available only in the past three years. This practice inevitably takes a toll on women’s health and limits not just their own but also their children’s access to education and vocational training, given the proven connection between a mother’s standard of education and the health and learning ability of her offspring. Also, the number of marriages between close relatives is increasing, resulting in complicated pregnancies and fatal outcomes. The heavy workloads borne by pregnant women are adversely affecting maternal death rates and reproductive health. Women continue to combine housework and caring for other members of the family with informal employment. State support for working mothers during and after pregnancy is ineffective. Notwithstanding article 307 of the Labour Code, the start date and duration of maternity leave depend more on an employer’s attitude to motherhood in general and to the mother-to-be than on the applicable legislation. Maternity allowance, part of the social benefits package, is calculated on the basis of a 7-point index (700 soms). Difficult economic conditions and the fear of losing their jobs are forcing women to effectively forgo maternity leave.

100. Women in Kyrgyzstan have access to a well-run system of antenatal services and delivery care: 96.6 per cent of pregnant women receive antenatal care and 97 per cent give birth in hospitals attended by a qualified health-care provider. In addition, 48 per cent of maternity centres are improving their perinatal care services. Monitoring exercises carried out at these facilities show a decline in postpartum haemorrhage rates and an increase in active management of the third stage of labour. Around 55 per cent of obstetric care services have adopted WHO strategies for “Making Pregnancy Safer/Promoting Effective Perinatal Care”, which could tangibly reduce the maternal mortality rate. After the programme was introduced, use of medications, blood and blood components dropped from 20 per cent to three per cent, accompanied by a significant improvement in maternal and newborn health indicators. The National Centre for Mother and Child Health and a mother and child health department were set up under the authority of the Ministry of Health, and a Perinatal Programme for 2008-2017 adopted, together with projected measures for its

\(^{59}\) In 2004 the ratio was 14.2 cases per 1,000 women, in 2007 11.9 per 1,000. Women and Men of the Kyrgyz Republic, 2005-2008: a Collection of Gender-Disaggregated Statistics, Bishkek, 2009, pp. 62-63.
implementation (Ministry of Health order No. 315 of 20 June 2008). Over the short term, the programme will help stabilise the situation and reduce infant and maternal mortality in the years that follow. In 2008 18 antenatal care, labour and delivery guidelines were approved by an expert committee. Also ratified were a number of clinical protocols, including measures to combat the mother-to-child transmission of HIV and AIDS in children and counselling before and after HIV testing. A UNICEF-led cluster survey showed the contraceptive prevalence rate to be 47.8 per cent.\(^{60}\) According to the Ministry of Health, however, contraceptive use by women aged 15-49 declined 6 per cent in the period 2000-2008, totalling 35.9 per cent and 33.1 per cent in 2007 and 2008, respectively.\(^{61}\) Effective birth-control is reducing the number of unintended pregnancies, abortions, and births, while also lowering the pregnancy-related mortality rate. Inter-birth intervals have increased, the number of early marriages has fallen from 12.3 per cent to 7.7 per cent\(^{62}\) and the total fertility rate has decreased from 3.4 per cent (1997) to 2.8 per cent (2006), primarily owing to fewer births in the 15-19 age group.\(^{63}\)

101. Most maternal deaths have preventable causes,\(^{64}\) which are due, in turn, to pregnant women’s poor education and general ignorance of prenatal risk factors, inadequate access to health-care services, the poor training of primary prenatal health professionals, badly integrated primary and secondary care services, late diagnosis of complications and obstetrician-gynaecologists insufficiently skilled in labour and delivery safety and reanimation. Reducing maternal mortality is dependent on three key factors: (a) further extending the effective perinatal care programme and training and mentoring in all settings adopting the programme; (b) mentoring and training in emergency obstetric care, including haemorrhaging and eclampsia; (c) providing greater access to reproductive health services, especially for women living in remote and rural areas.

102. Expert opinion holds that on average children first engage in sexual activity before the age of 14.\(^{65}\) Since 2005 the birth rate among girls under marriageable age (15-17) has climbed steadily from 4.5 children per 1,000 in this age group in 2005 to 4.7 per 1,000 in 2008 (over 1,600 births a year) and is particularly high in Chuy Oblast (9.4 per 1,000). In 2008 there were 1,812 registered abortions or 4 per 1,000 among girls aged 12-19. Each year 11-12 marriages are registered involving girls under 16 and around 300 where the bride is under 17. Also, as mentioned elsewhere in this report, in a number of cases marriages are contracted in accordance with Muslim traditions and not registered with the authorities. Unsafe sexual practices can result in sexually transmitted diseases (STD) in children and adolescents. In 2006, for instance, 57 cases of STD were reported, not including congenital syphilis, annual incidence of which in the reporting period ranged from 22 in 2007 to 56 in 2005. Most pregnant women with syphilis were not under medical supervision or registered with a clinic only during the final stages of pregnancy. In 2005 90 per cent of 45 mothers carrying congenitally syphilitic children were not registered with prenatal health care services. Parents rejected 35 per cent of congenitally syphilitic infants in 2005 (20 per cent in 2004).\(^{66}\) Since 2003 prevalence of sexually transmitted HIV has increased each year, fluctuating between 26 per cent and 32 per cent in the past three years.

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64 These include gestational toxicosis (23 per cent) and obstetrical haemorrhage (20 per cent).
Taboos surrounding the discussion of reproductive and sexual health, as well as sexual relations, preclude any assessment of trends in adolescent sexual behaviour. Consequently, the type of data on unsafe practices and sexual activity needed in order to plan and implement prevention programmes either does not exist or is drawn from small unrepresentative surveys, expert opinion and theories. Nevertheless, the available information on early marriages, births, abortions and STD prevalence among children confirms that such a problem exists. Furthermore, it appears to be more widespread than official statistics suggest. There are, however, 21 pilot “health schools” (1.1 per cent of the country’s total number of schools), mainly in the capital, which have special lessons where reproductive health issues are discussed. Such initiatives are particularly important in a society that has traditionally eschewed any mention of these matters within the family. There is shortage of specialized literature on healthy life styles, raising families and family planning. The first school programme to concern itself with HIV and STD prevention and healthy living was developed in 1999. Although other programmes were subsequently prepared, none of them has so far been included in the core curriculum, nor any learning standards formulated. Classes on these issues have been designated as extracurricular activities, which makes it impossible to teach them systematically, holistically and in full. Ultimately, they are taught either by motivated teachers or as part of pilot projects. Outreach work among parents and communities is non-existent, which is frustrating sex education efforts. At the same time, teachers, doctors and the general public continue to engage in bitter debate over the need to teach school children about preventing sexual transmission of HIV and STD and maintaining sexual and reproductive health.

103. Epidemiological studies show a two-fold increase in the number of smokers, particularly among young people. According to the Global Youth Tobacco Survey (2008), 26 per cent of boys and 11 per cent of girls aged 13-15 at school in Kyrgyzstan have already experimented with smoking. At the time of the survey 7.2 per cent smoked, 6.8 per cent of boys and 2.2 per cent of girls “regularly”. Fifty-six per cent of young men and 28 per cent of young women studying at medical colleges in Bishkek admitted to being regular smokers. Realising the importance of this problem, in 2006 Kyrgyzstan ratified the WHO Framework Convention on Tobacco Control and passed the Act on Protecting the Health of the Citizens of the Kyrgyz Republic from the Harmful Effects of Tobacco. On 4 April 2008 the Government adopted the State anti-tobacco programme for the period 2008-2012 together with a short-term plan for its implementation and also set up under its auspices an inter-sectoral coordinating committee tasked with protecting public health.

104. According to official data, as of January 1, 2010 Kyrgyzstan had 8,784 registered drug users, or 38 per cent more than in 2003. Official data also indicated that 64 per cent were injecting drug users, although estimates put the figure at 96 per cent. The commonest drug used is heroin. While drug abuse is a nationwide phenomenon, it is particularly prevalent in Bishkek and Chuy Oblast, and least in Naryn Oblast (fig. 4).
However, UNODC's estimates for 2006 indicate that the number of problem drug users in the country is 3.4 times higher and totals 26,000, 25,000 of whom are injecting users. Experimenting with drugs begins young: according to UNODC estimates (2006), the average age of first-time injectors is 22. Nevertheless, in a 2006 survey of tenth-grade school children over 5 per cent of respondents said they had experimented with drugs at least once, 2.4 per cent with marihuana, while 0.5 per cent said they used marihuana regularly (more than 40 times). 3.7 per cent reported having tried inhalants. Drug addiction is more common in urban than in rural areas (up to 75 per cent of all registered users live in towns).

105. The country’s development strategy until 2011 is geared towards achieving the Millennium Development Goals, specifically Goal 6: to reverse the incidence of AIDS, malaria and tuberculosis. In addition, reducing tuberculosis mortality and morbidity and checking the spread of HIV and drug addiction are the avowed priorities of the Manas Taalimi National Health Care Reform Programme. 2004 saw the adoption of the national programme “Public Health Strengthening 2004-2010”. It is noteworthy that although national indicators remain far below the target level, those for tuberculosis and malaria show definite progress.

106. The threat of an HIV endemic continues to grow, accompanied by a rise in the number of new cases among young people, as well as women and children. As of January 1, 2010, 2,718 HIV cases had been reported, including, in 2009, a record number (687) of HIV diagnoses since the endemic began (fig. 5). Moreover, in the period 2006-2007 the number of HIV cases almost doubled, while in the period 2006-2009 it rose 3.2 times compared with the previous epidemic of 1987-2005. The Ministry of Health, however, calculates that the real number of people living with HIV in Kyrgyzstan is between 4,200 and 5,000, while the estimated number of HIV-positive children is 820. HIV cases have been registered in all parts of the country, although the hardest hit are the city of Osh and Osh and Chuy oblasts, which together account for two thirds, or 66.8 per cent, of all registered people living with HIV (PLWHIV). HIV infection is most common among adults in their productive prime and mainly affects people aged 20-39, who make up 72.7 per cent of all registered PLWHIV. Whereas in 2005 children under 14 accounted for 1.5 per cent of

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registered PLWHIV, as of January 1, 2010 the number had grown to 8.2 per cent. A significant proportion (seven per cent of the 8.2 per cent) are children under four who were registered in 2007 and 2008 following the registration of nosocomial transmission of HIV.

Figure 5
Registration of new HIV cases among men and women, 1987-2009

Meanwhile, HIV rates are increasing among women, accounting for 9.5 per cent of HIV incidence in 2001 and 26 per cent in 2009 (33.6 per cent in 2008). In the past nine years the number of women living with HIV has grown 218 times and it is precisely for this reason that the number of mother-to-child transmissions has risen from 0 per cent in 2005 to 2.1 per cent of registered PLWHIV in 2009. Thus, nationwide a total of 216 pregnant women have been registered, 99 of them (45.8 per cent) in 2009. The Government is engaged in a major effort to defeat HIV and is following the guidelines set out by the United Nations General Assembly Special Session (UNGASS) on HIV/AIDS in developing State HIV policy and remains committed to achieving the Millennium Development Goal. Now in its final stages is the third State programme, approved by Government Decision No. 498 of 6 June 2006, to prevent the spread of HIV/AIDS and related social and economic consequences in the period 2006-2010. This follows two HIV/AIDS programmes that have already been implemented. The country has established stronger ties with State, non-governmental and international organizations, including UNAIDS, UNDP, WHO, UNFPA, USAID and UNODC, as well as with the POTENTIAL, CAAP, CARHAP and other programmes. A project has recently been launched with the assistance of the German Government (GTZ). A major donor is the Global Fund to Fight AIDS, Tuberculosis and Malaria. More than 80 NGOs, including religious leaders and local communities, have become involved in the State programme. With a view to forestalling the transmission of HIV from mother to child, all registered pregnant women are required to undergo mandatory (with their informed consent) HIV testing. However, just how effective these measures are is questionable, given that in 2009 only 0.003 per cent of women were diagnosed as HIV-positive, which makes testing unjustified in the light of the on-going economic crisis and the lack of resources. All the more so since pregnant women in high-risk groups are not monitored by health-care institutions. Since 2005 antiretroviral therapy has been used to help people who are HIV-positive or AIDS patients. By the end of 2009, 313 PLWHIV were receiving treatment, including 112 children, 17 of whom are the offspring of HIV-infected mothers. Children given antiretroviral therapy (AVRT) show good treatment compliance compared with adult PLWHIV. Nonetheless, there have been
cases where parents have refused their children AVR medication prescribed for either as a prophylactic or as treatment for HIV infection. Educational programmes for children in schools and vocational educational institutions and teacher training programmes are an important part of HIV prevention, details of which are provided below.

107. Notwithstanding considerable efforts to combat tuberculosis, incidence of the disease remains high. Based on WHO evaluation criteria, a TB morbidity rate exceeding 100 cases per 100,000 of the population signifies an epidemic.\textsuperscript{69} Since 2003 the TB morbidity rate has decreased and stabilised, and in 2009 was 103.7 per 100,000 people (106.3 in 2008). Incidence of tuberculosis among children halved in 2008 compared with 2001 and equalled 39.6 per 100,000 population. Kyrgyzstan is currently moving ahead with the National Tuberculosis-III Programme for 2006-2010, whose priority goals are to reduce TB morbidity and mortality rates, stabilise the epidemic and gain complete control over the disease in all parts of the country.

108. In recent years epidemics and outbreaks of malaria have been reported in the country’s northern and southern regions. In 2002 a malaria epidemic became a serious problem in the south, where up to 2,700 people contracted the disease. Since 2003, morbidity rates have been declining and in 2007 there were only 96 reported cases of malaria infection. At present around 97 per cent of pregnant woman and 60 per cent of children have mosquito nets and all people living in malaria-affected areas have anti-malarial medicines. As a result, only one child and one woman were registered as having malaria in 2007.\textsuperscript{70} In line with the Regional Strategy: From Malaria Control to Elimination in the WHO European Region 2006-2015,\textsuperscript{71} Kyrgyzstan is implementing measures to contain the malaria epidemic and is moving forward with the National Strategic Plan to Fight Malaria for 2006-2010, which is designed to improve malaria control processes by organising systematic and sustainable public initiatives and caring for people infected with malaria. The plan’s overriding goals are to prevent any resurgence in the local transmission and spread of plasmodium falciparum malaria, to further reduce the morbidity rate and high incidence of malaria (to below 5 per 100,000), to prevent malaria-induced deaths and to switch from controlling to eliminating malaria throughout the country by 2013.

109. Initiatives to involve the public in addressing health issues have been operating since 2003 in connection with various international projects and programmes: UNFPA – sexual and reproductive health issues, DFID – sanitation and hygiene, and Hope – maternal and child health. In the period 2003-2008 high priority was given to the adoption of the “Jumgal Model”, a system promoting Community Action for Health (CAH) in Naryn, Talas, Issyk-Kul, Batken, Chuy and Jalal-Abad oblasts that has shown local communities to be capable of addressing health-related problems and identifying their health priorities for themselves. Since 2004 efforts have been made to improve the lives of mountain communities, including their health, under a programme sponsored by the Aga Khan Foundation. The programme targets the health needs of the most vulnerable members of the community, i.e. children under five and women of reproductive age, by, inter alia, improving their nutrition (the “Kitchen Garden” and “Safe Water” projects), promoting health in schools by providing personal hygiene facilities and building toilets. Work is underway in 76 villages in the south of the country (18 in Chong-Alay District and 58 in Alay District, Osh Oblast. In 2005 the general public and local communities were invited to play an active part in health protection and improvement as part of the the National Health Care Reform Program “Manas Taalimi”. Specifically, this has involved extending the CAH concept by setting up village health committees (VHCs) throughout the country. As their

\textsuperscript{69} National Tuberculosis-III Programme for 2006-2010.

\textsuperscript{70} Overcoming Global Health Problems: the National Response to HIV, TB and Malaria in the Kyrgyz Republic, Bishkek, 2009, p. 234.

\textsuperscript{71} Source: http://www.euro.who.int/document/e88840r.
potential increases, VHCs are better placed to form partnerships with the Ministry of Health, donors and health promotion services. The Republican Centre for Health Promotion is developing health strategies collectively entitled “Action for Health”, which are adopted by VHCs with the assistance of health-care professionals (Groups of Family Doctors (GFD), feldsher-midwifery points (FAP)) in villages, thus creating opportunities for integrated action with primary health-care facilities on health promotion issues. In 2008 780 villages, or 50 per cent of the national total, were covered by health programmes. 824 village health committees were set up in these settlements (107 in Batken Oblast, 172 in Issyk-Kul Oblast, 125 in Chuy Oblast, 124 in Naryn Oblast, 107 in Jalal-Abad Oblast, 95 in Talas Oblast) staffed by a combined total of 25,000 volunteers. VHCs cover around 1,500,000 rural residents and provide preventive assistance with eight different diseases, which are targeted as a matter of priority concern. With a view to stimulating local community involvement, different surveys are conducted to identify residents’ needs and initiatives undertaken to establish how familiar they are with issues such as preventive health, micronutrient inadequacy, brucellosis, parasitic diseases, mother and child nutrition, malaria, etc. Emphasis is also given to teaching interpersonal skills and working practices to diverse sections of the population (local government and NGO officials, teachers, school children, etc.). VHC volunteers make door-to-door house calls, survey resident’s opinions and conduct public awareness campaigns. The Ministry of Health and local authorities assist VHCs in matters of administration and organization. The support of State agencies, local government and donors is essential if VHCs are to extend their activities in these areas. Training given to village health committees and primary health-care providers (GFD, FAP and health improvement specialists) covers subjects such as disease prevention, cultivation of healthy life skills, the medical and legal aspects of health care, reducing health risks, management and funding of village problems. Assisted by international organizations and foundations, village health committees are implementing measures to prevent malaria (GFATM), encourage breastfeeding (Hope project), improve mother and child nutrition (UNICEF), promote pulmonary health (Kyrgyzstan-Finland Lung Project) and eradicate parasitic diseases (Rostropovich-Vishnevskaya Foundation). Thanks to the work of VHCs, iodised salt is now used by 98 per cent of households and in 90 per cent of cases business entities make a conscious effort to buy and sell iodised salt. Personal protection measures are being employed against malaria vectors and the public is increasingly concerned to prevent and, hence, reduce incidence of the disease. Overall, public awareness of many health-related issues is growing. Media outlets carry reports of initiatives to heighten awareness of health improvement issues. Particularly active in this regard is the Ministry of Health press office, which works closely with the mass media, maintaining ties with over 200 journalists to whom its sends news updates by e-mail, including via the presidential administration and the Government’s executive office, ministries, departments, oblast-level government agencies, NGOs and so on. The Ministry of Health is granted free air time by the television stations El TR, Zamana, OTR and the radio channel Manas FM, which it uses to address public health improvement issues.

110. Maternal and child health is a priority concern of the national development strategy. Recent years, however, have seen a deterioration in children’s health due to biological, economic and social factors. The main cause of declining health is poverty, which makes for a diet that is wanting in quality and quantity, as well as for inadequate childcare and education. Owing to underfunding and insufficient resources in the health-care sector, children are at risk of contracting HIV in children’s hospitals. Social problems, lack of concern and poor education have produced high-risk behaviours among young people, such as early sexual activity, smoking and alcohol and drug use. Kyrgyzstan is setting in place WHO guidelines designed to ensure guaranteed health care, prevent disease and promote active hygiene education by a process of social inclusion, by raising the quality of health services and creating a patient-friendly environment. That these efforts are already yielding results is evidenced by the growing concern shown for personal health, sustained
immunisation levels, and improvements in young children’s diets. Tuberculosis and malaria morbidity rates are declining. At the same time, however, undernourishment is sapping the health of future generations, while social exclusion is engendering diseases associated with high-risk behaviours such as drug addiction, alcoholism, and HIV infection. Lack of sex education poses a threat to sexual and reproductive health and prefigures an increase in unintended pregnancies, abortions and maternal death. Thanks to support from donors, significant headway has been made in health maintenance. The State still lacks the money required to guarantee health-care services for mothers and children. This factor also accounts for the precariousness of health programmes and, were foreign funding to cease, could significantly damage the country’s health sector and, consequently, undermine the progress that has been made.

D. Childcare services and facilities (arts. 26 and 18, para. 3)

111. The social security system includes social security payments and benefits, guarantees and monetary compensation for specific population groups and services for vulnerable population categories. In 2005 over 11 per cent of the population were receiving State benefits. According to the National Statistical Committee, in 2006 there were 19,931 disabled children under 18 receiving benefits, 10,540 receiving allowances for loss of breadwinner, of whom 243 were orphans with no surviving parents. 45,365 under 1.5 years and 412,144 aged 1.5 to 18 were in receipt of single monthly benefit. The large number of social benefit recipients and limited State resources mean that the degree of assistance and its effect on improving the lives of those receiving it are negligible. Payment allocations for the different types of social security benefits are as follows:

- Single monthly benefit for children under 18 from economically disadvantaged families: 121.7 soms (151,200 families);
- Social benefit: 504.40 soms (58,984 people);
- Benefit for adults disabled since childhood: 715.40 soms;
- Benefit for disabled children under 18: 763.20 soms;
- Benefit for loss of breadwinner: 445 soms;\(^{72}\)
- Children in foster care: 200 soms.

Since 1 January 2010 the State has provided ten types of social guarantees and monetary compensations for 25 population categories covering about one fourth of the population. The recipients of social services are primarily people living in special facilities and residential care homes, as well as elderly people with no family receiving home care visits (around 11,000 people). All local authorities have introduced low-income family certificates, which is a special form with details of the family members, their education and occupation, accommodation and assets. These are mainly issued to families whose monthly income per household member is below the poverty line. They also make it possible to assess public service provision, including for children with special needs, as regards living conditions, access to water and clean drinking water, and keep records of educational levels and occupations. However, processing and utilising data on low-income families is greatly impeded by the fact that they are stored in hard-copy files. To overcome this problem, 70 rural districts employ an automated system called “Burkut” that enables them to coordinate their management, monitoring, assessment and enhancement activities in this area. Deploying this system countrywide will require major funding. To implement the social rights of the child, in the period 2002-2008 the relevant amendments and additions were

\(^{72}\) www.stat.kg.
made to the State Benefits Act, which provides for maximum protection of children’s social rights, in particular:

- Monthly social security benefit for children under 18 months born to mothers living with HIV/AIDS;
- Monthly social security benefit for children with health disabilities has been extended to children under 18 (rather than under 16, as before);
- Monthly social security benefit for children under 18 with health disabilities commences from the day they are issued a certificate by a social security medical assessment board, provided that the benefit claim is made no later than six months after the certificate is issued (previously the stipulation was no later than three months);
- Monthly social security benefit for children who have lost their breadwinner and have no right to pension provision (students attending full-time courses at initial, secondary and higher vocational schools) have been extended until either the student graduates or reaches 23 years of age (previously benefits were paid until he/she reached 21 years of age).

Pursuant to the presidential decree of 13 November 2009 setting State benefit rates, since 1 January 2010 social security payments have been raised on average by 50 per cent, including benefits for children with health disabilities. As part of the European Commission’s Sector Policy Support Programme for 2007-2009 and with a view to improving the equity of single monthly benefit distributions, in 2007 families living in districts were means tested using new criteria in order to establish whether they qualified for single monthly benefit for low-income families and individuals. The results were used to draft a new version of the State Benefits Act and legislative and regulatory instruments for its implementation, which came into effect in January 2010. The Act is designed to improve social protection for economically disadvantaged families with children and for disability groups not entitled to pensions, such as children and adults with health disabilities, the elderly and orphans who have lost one or both parents. The Act stipulates that benefits are to be allocated only to low-income families with children under 18 or, if they are in education, until they either graduate or reach the age of 23. This regulation will help systematise payments and increase the amount of child benefit, thereby affording parents greater opportunities in raising their children. In order to align social security legislation with the Labour Code, the Act also extends benefit payments to children of up to three years old, instead of 1.5 years old as was previously the case. This provision is to support families with children of pre-nursery age, while the age criterion is an optimum payment timeframe and protects both parent and child. Likewise, provision is made for enhancing the role and responsibility of local authorities through the creation of rural commissions tasked with identifying families’ priority needs for targeted social assistance and with defining and implementing appropriate measures to help rural families gradually become less reliant on benefit payments. Local authorities’ heightened awareness of the needs and requirements of rural communities will ensure that State allocations reach families that are most in need. In cases where a commission decides that a family is eligible for benefit but the children concerned have no birth certificates, the commission can recommend that the social security agencies allocate benefit for a period of three months. In such circumstances claimants are required, within three months of applying for benefit, to provide the local authorities with the children’s birth certificates, which must be forwarded to the social security agencies. If the parent (tutor) cannot afford to pay for the child’s upkeep, the family in question is assigned a monthly allowance in accordance with its status as a low-income household with children.
VIII. Education, leisure and cultural activities (arts. 28, 29 and 31)

A. Education, including vocational training and guidance (art. 28)

112. A child’s right to education is one of a number of fundamental rights designed to ensure a dignified existence in adulthood. Education is also an essential tool for realising a child’s other rights and plays a vital role in protecting children from all forms of exploitation, in strengthening human rights, encouraging their assertion and the development of democracy. Kyrgyzstan has always had a high literacy rate. The possession of knowledge is regarded not only as a prerequisite for a successful career, but also as a value in itself. Even though in the past 15 years the problem of finding a job after graduating is forcing some young people to rethink such values, the importance of acquiring an education is still generally accepted. Achieving the Millennium Development Goals and ensuring access to basic secondary, primary and vocational education and improving its quality are core priorities of the Country Development Strategy (CDS). Indicators gauging the progress made in meeting this goal have been incorporated into the matrix of indicators monitoring and assessing the implementation of the strategy in the period 2007-2010. Under CDS, the list of indicators measuring the provision of universal basic secondary education has been expanded to include indicators for tracking State spending on basic education, the number of schools restored in rural areas and the proportion of primary school children reaching the fifth grade.

113. Literacy rates among young people aged 15-24 are relatively high at 99.5 per cent and show virtually no evidence of a gender gap.73 However, a PISA worldwide study conducted in 57 countries in 2006 indicates that the functional literacy rate remains low. On average over 88 per cent of 15-year-old school children fail to attain the minimum reading standard, while 89 per cent underperform in mathematics. In the opinion of the study’s authors, poor school attendance is impairing academic performance.74 When the country became independent its education system suffered accordingly from the restructuring of economic and social institutions. Nonetheless, education reform brought with it a wide variety of educational programmes, multi-channel financing and opportunities to review and improve education methods. Even so, sustained progress in the quality of education has yet to be achieved.

114. The right to education is predicated first and foremost on its accessibility, as envisaged in article 13, part 2 of the International Covenant on Economic, Social and Cultural Rights. Article 32 of the Kyrgyz Constitution and article 32 of the Children’s Code stipulate that every child is entitled to a school education in State and municipal educational institutions and that the State guarantees access to primary general and basic general education. Moreover, under article 4 of the Education Act, the consistency and continuity of the educative process are key principles governing the organization of education.

115. Pursuant to the Preschool Education Act, which came into effect on 29 June 2009, and the Education Act, the State guarantees all sections of the population access to the educational services of preschool excellence initiative (PEI). On 23 January 2008 the Parliamentary Committee for Education, Science, Culture and Information Policy met to discuss the Education Act with regard to developing a network of preschool excellence initiative, their funding, sanitary conditions and physical operations, as well as the

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accessibility of preschool education. PEIs are regulated by the government standard set for preschool education and childcare ratified by government decision No. 17 of 2007 which systemises the preschool system, provides for alternative kindergartens and governs their activities. Teaching and education are based on programmes approved by the Ministry of Education and Science: “Standard Education Programme, Preschool Child Teaching and Development”; “Кыргыз тилинин программасы” for Kyrgyz-language teachers; “General Development (Basic) School Preparation Programme for Children Aged 6-7” and the “Mother School” programme. A guide is currently in preparation that sets out State requirements for early childhood teaching and development. Since gaining independence the number of preschool educational facilities has fallen more than three-fold, declining from 1,692 in 1992 to 410 in 2000. In 2009 the number increased to 503 (fig.6) following the emergence of alternative forms such as community kindergartens, seasonal facilities, etc., 477 of which are State-run and 26 private preschool excellence initiative licensed by the Ministry of Education and Science. However, only 3-5 per cent of children in rural areas and fewer than 25 per cent in towns have access to preschool services. Thanks to the efforts of the State, international organizations and communities, in recent years early childhood education coverage has more than doubled. Whereas in 2000 early childhood coverage was 6.2 per cent of all children, in 2009 11.5 per cent, or 63,875 children, were attending preschool institutions, including 1,700 children with disabilities. Nevertheless, the Ministry of Education and Science reports that rural children account for only 27 per cent of those covered by preschool education. This problem particularly affects children from disadvantaged backgrounds, since at present preschool education is partly paid for by parents and costs 800 soms per child.

Figure 6
Number of preschool institutions, 1992-2009

All the country’s preschool excellence initiative have 1.5-2 times more children than the established norm. The problem of overcrowded kindergartens is especially acute in urban areas. Thus, 76 kindergartens in Bishkek are capable of catering for a total of 12,174 children, whereas in fact they accommodate 17,328; in Osh standard capacity is 4,585 as opposed to the actual figure of 6,923, whilst in Talas the figures are 683 and 983, respectively. In Karakol overcrowding has increased 50 per cent. The shortage of preschool facilities could, to a certain extent, be solved by repossessing illegally privatised buildings that previously housed kindergartens, a move that should have been prompted by an inventory taken of the country’s preschool institutions by government agencies, local authorities, the State Committee for Administration of State Property, the Procurator-General’s Office and the Ministry of Education and Science in compliance with paragraph 5, sub-paragraph 10 of presidential decree No. 390 of August 30 2007 on Protecting and Supporting Children. The inventory revealed that 464 former preschool institution buildings had been assigned a new function. One hundred and twenty-four of them had been turned into education, cultural and sports establishments, 16 accommodated NGOs, 42 health-care facilities, and another 50 housing and utilities, social security, tax, district internal affairs and prosecutor’s offices, courts, and so on. Twenty-six buildings had been converted, for
instance, into residential premises or warehouses and six into mosques, 18 had been pulled
down or dismantled, and 152 sold into private hands, including to businesses and
manufacturers. Thirty buildings have either no designated function or are being overhauled.

116. Two hundred and forty-four alternative (community) preschool excellence initiative
were set up catering for 11,090 children, or 1.9 per cent of children of preschool age under
the auspices of international organizations. These included Asian Development Bank’s
“Community-Based Early Childhood Development” project (executing agency: the
President’s Office): as of the start of 2009 226 community PEI had been created in remote
districts (Naryn, Osh and Jalal-Abad oblasts). UNICEF projects in Batken Oblast led to the
opening of seven (nine are planned) preschool excellence initiative. Eleven PEIs were set
up Alay and Chon-Alay districts of Osh Oblast by the Aga Khan Foundation. Once the
projects are completed, these alternative forms of preschool facilities will be funded by
local authorities. UNICEF allocated 19.5 million soms, ADB 37.9 million soms, and the
Aga Kahn Foundation 23.6 million soms to the commissioning of the PEI, physical plant
and educational resources. An FTI Catalytic Fund grant was used to improve teaching and
education facilities for 11,000 children in 99 preschool excellence initiative in Batken,
Naryn and Chuy oblasts, providing them with beds, tables, desks, dishwasher, development
games, reading books and teaching methodology literature to a total of 236,874.3 soms.
Donor organizations have provided preschool excellence initiative with 22 children’s
literature titles. Teaching and education at PEI are conducted in groups: in Kyrgyz (23.2 per
cent), Russian (74 per cent) and Uzbek (2.4 per cent). At parents’ request children may also
receive extra lessons in English and German, as well as in their mother tongues (Dungan,
German, etc.). In order to improve children’s access to preschool education, the Ministry of
Education and Science has devised a “100-hour programme” that helps preschool children
prepare for primary school and gives children not attending in preparing for school. In the
2008/2009 school year around 60,000 future first-grade pupils (64.5 per cent of the total
number) were included in the programme. Preparation timeframes are set by general
education schools and approved by district (municipal) education departments. Preparatory
courses during the holiday period are conducted by primary school teachers, who are paid
at the same standard rate for duties undertaken in term time. In addition, 98 general
education schools are looking to start groups for preschool children aged 3-6. At present,
there are around 35 schools of this type.

117. Fifty-two per cent of all teachers working at preschool institutions have higher
education, over 33 per cent have secondary vocational education and 5 per cent secondary
education. In recent years the number of directors with higher education has grown from 79
per cent in 2003 to 83 per cent in 2008. The number of directors and teachers with higher
education is proportionately higher in Bishkek, Osh and Naryn Oblast, while those with the
lowest qualifications are in Jalal-Abad Oblast. Vacancy rates for preschool teaching staff
range from 5 per cent to 8 per cent each year.

118. Early childhood education specialists train at either the Arabaev Kyrgyz State
University or the Osh State Pedagogical Institute. In the current (2009-2010) academic year
the Jusup Balasagyn Kyrgyz State University has opened two colleges for training
preschool and primary-school teachers in response to a special request from local
authorities in Chuy Oblast. The intake of preschool teacher training students has been
increased at regional higher educational institutions (Naryn State University, Issyk-Kul
State University, Osh State Pedagogical Institute). The Ministry of Education and Science
has amended an order issued in 2009, reducing teacher training fees from 15,000 to 12,000
soms for full-time courses and to 10,000 soms for those that are part-time. Opportunities to
improve teaching standards are constrained by the fact that local authorities do not pay
for travelling and living expenses for further training courses. Every year around 10 per
cent of teachers attend a variety of advanced preschool education programmes, including
workshops run by international organizations.
Pursuant to the Acts on education, preschool education, status of teachers, local
government and local State administration (arts. 9, 15 and 20) and the Act on the Basic
Principles of Budget Law, local authorities are responsible for broadening access to
preschool education, its content, provision and financing. Preschool institutions are funded
from the national and local budget, parental contributions and grants. In 2008 preschool
institutions received 719.3 million soms, or 7.5 per cent of total national spending on
education, from the State budget. Preschool institution funding comes primarily from local
budgets. Thirty-four per cent of these budget funds are spent on food, 37 per cent on staff
wages, while the remainder is allocated to public utilities, major maintenance work and
taxes. In compliance with Ministry of Education and Science order No. 69/1 of 11 February
2008, 36 soms are allotted daily to feeding a single child, one half of which comes from the
budget, the other from parental contributions. Pursuant to Bishkek City Council decision
No. 388 of 25 January 2008, school food spending for a single child has been raised from
25 soms to 48-50 soms a day (half funded by the budget, half by parents). However, high
food prices preclude the inclusion of fish, cheese or fermented milk products in daily
menus. In line with presidential decree No. 519 of 30 October 2006, since 1 January 2008
the minimum wage has been set at 340 soms. In accordance with government decision
No. 227 of 6 May 2009 on changes to decision No. 775 of 10 December 2001 concerning
parental funding of equipment and teaching aids at preschool and out-of-school institutions,
annual voluntary parental contributions to preschool facilities have been fixed at 544 soms
for urban areas and 340 soms for rural areas. In accordance with paragraph 3 of the decision
passed by the Parliamentary Committee for Education, Science, Culture and Information
Policy on education and developing the network of preschool institutions, a review has
been conducted of tendering practices and the quality of food products procured for
preschool facilities. Likewise, pursuant to committee decision No. 15447 of 23 December
2008 on implementation of the Education Act provision concerning the development of
preschool excellence initiative, regional branches of the Government-affiliated State
Agency for Public Procurement and Material Reserves analysed procedures for purchasing
food products for preschool institutions. The Bishkek branch carried out an inspection of
schools within its jurisdiction to verify compliance with State procurement requirements. In
2008 local budgets financed the procurement of food products for preschool facilities to a
total of 106,275,500 soms, 64,604,800 soms of which were allocated to tenders held by
schools in Bishkek and 45,340,400 soms in tender offers initiated by the Bishkek City
Mayor’s Procurement and Logistics Department. The department is the only section of the
Bishkek Mayor’s Office conducting tenders in all areas of expenditure, including food
products. Schools are not permitted to initiate tenders independently.

Overall, some 26.6 per cent of preschool excellence initiative are located in
appropriately outfitted buildings. The figure is significantly higher in Issyk-Kul Oblast
(50 per cent), Batken Oblast (45 per cent) and Naryn Oblast (30 per cent). PEI in virtually
all southern oblasts, as well as Issyk-Kul and Naryn oblasts, continue to face considerable
procurement and supply difficulties. Thirty-one per cent of institutions lack sanitation
facilities, 11 per cent have no central water supply, and 40 per cent no central heating. Prior
to the start of the new school year all preschool institutions carry out routine maintenance
and partial renovation work. Although in 2008 more budget funds were allocated to the
upkeep of preschool institutions than in the previous year (13,350,000 soms compared with
3,386,000 soms), PEI buildings are still in a poor state of repair owing to the fact that most
functioning buildings were constructed in the 1960s and 1970s. To maintain temperatures at
the required level, school facilities use central, electric, gas and stove heating. Given that
most of them were built before 1990, their heating systems need to be overhauled.

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75 Bishkek City Mayor’s Office decision No. 337 of 30 July 2008.
Kindergartens in regions using electric heating have been closed during rolling blackouts, reemphasizing the need for them to switch to solid fuel.

121. Children’s health is intrinsically linked with the organization of their health-care services. The decrease in nurse’s offices at preschool institutions is affecting the quality of medical examinations and the detection of diseases in pupils. Only 374 out a total 407 nurse’s offices currently function, while 129 PEIs have none at all. 56,335 children have been given thorough medical check-ups, leaving 2,060 children unexamined. Child health indicators are marginally deteriorating, while morbidity rates are rising, with increasing incidence of hearing, eyesight and postural disorders. Violation of infection control procedures and poor housing are adversely affecting the infectious disease rates among children in organized settings. In 2008 645 cases of hepatitis A were reported (versus 639 in 2007) and 649 cases of acute intestinal infection. Droplet infections are also increasing, including 1,034 cases of chicken pox. In 2008 violations of sanitary standards set by the State Sanitary Epidemiological Supervision Centre at preschool institutions resulted in 182 fines, 155 dismissals of kitchen staff for failing to submit to medical examinations on time and 125 preschool facilities were temporarily closed pending corrective actions.

122. Notwithstanding the measures taken, around 647,000 children stand in need of preschool education and nurturing. In addition, data compiled by the National Statistical Committee indicate that the birth rate is rising. Meanwhile, the shortage of kindergarten teachers continues to create problems. 63.9 per cent of the 4,054 teachers working in kindergartens are aged 45 or older and over 28 per cent of teachers are of retirement age (over 60). The reduction in the number of kindergartens has been accompanied by a loss of qualified staff. Preschool teachers’ wages are below the subsistence level and range from 916 soms for new entrants to the profession to 966.3 soms for highly qualified educators. Given the critical importance of preschooling in developing basic skills and learning abilities, when it comes to opportunities for obtaining a good education in later years, a veritable gulf can be said to exist between children attending kindergartens and those who do not. Children who have had no preparation absorb information poorly in primary school, thereby diminishing their chances of achieving good grades as they grow older. Children from low-income homes are less well prepared for school than those with access to preschool facilities. For this reason, and also because of the complexity and rigidity of the school syllabus and the lack of parental support in education, by the end of their first year in primary school many children from economically disadvantaged families end up being lumped together with children who are sent for assessment by psychological, medical and educational commissions and then on to auxiliary schools. The creation of a free service on school premises for children from low-income families by way of an after-school club (day-care centres) to help them with homework and provide them with free meals could reduce the number of children sent to be taught at residential schools, often in the form of auxiliary schools for mentally retarded children. Lack of access to preschool facilities limits women’s ability to work in the formal economy. The removal of women from the job market because they have assumed the role of unpaid service providers raising and caring for children has increased the poverty rate among women with children, which in the period 1991-2008 stood at 23 per cent (rising from 47 per cent to 78 per cent).

123. At present, the general secondary education system comprises 2,188 general educational institutions, including 2,108 State schools, 55 State-subsidised private and fully independent schools and 25 centrally administered educational institutions with a combined total of 1,041,564 pupils. In the 2009/2010 school year 96,075 children aged 6-7 entered the first grade. In the period 2004-2010 the basic education coverage rate (grades 1-9) grew by 0.7 per cent to 98.3 per cent, indicating almost total coverage of all children aged 7-15. However, when viewed in terms of regional and age breakdown this indicator reveals a number of anomalies. Firstly, there is an increasingly evident imbalance in regional education coverage patterns (fig. 5). The regions with the worst indicators are Osh, Batken
and Naryn oblasts. Secondly, some areas show evidence of “flight from poor education”. In a bid to give their children better schooling, some parents transfer them from village to urban schools (this is partly the effect of internal labour migration from rural communities to cities). For example, the enrolment ratio\textsuperscript{76} for children in Osh Oblast is 88.7 per cent, while in the city of Osh, the regional centre of this oblast, the ratio is 105.9 per cent.\textsuperscript{77}

Figure 7
Basic education coverage, grades 1-9, by region (average percentage for 2006-2007)

It is noteworthy that some children are not taught with pupils of their own age. One study\textsuperscript{78} shows that almost 17.1 per cent of children aged 11 attend primary school when in fact they should be in secondary school.\textsuperscript{79} Moreover, this percentage changes little from region to region. The fact that higher education in Kyrgyzstan is a financially self-sufficient segment of the education system (in 2007 only 12 per cent of students were State-funded) has prompted public discussion regarding the advantages to be gained from channelling budget funds away from higher learning and into secondary and preschool education. The multi-channel financing of educational institutions is contributing to the problem of strongly differentiated educational settings. The discrepancies are most apparent between urban and rural schools and between State and private educational institutions. In other words, given the high degree of social stratification, the State has been unable to provide relatively equal education opportunities for children. Its efforts to enhance the quality of education, financially motivate teaching staff and improve school facilities are underpinned by the financial and technical support provided by the donor community. A number of

\textsuperscript{76} Gross enrollment ratio: the ratio of the number of children enrolled in school at different grade levels, regardless of age, to the total number of children in an age group who qualify for the particular grade level.

\textsuperscript{77} An enrollment ratio above 100 per cent indicates that more children attend a town’s schools than the number of children registered in the town.


\textsuperscript{79} Based on net enrolment ratio, which, unlike gross enrolment ratio, does not take into account all children of a particular grade level, but only those whose age qualifies them for that level.
donor-financed projects are currently underway. One of these is the “Second Education Project”, funded by the Asian Development Bank since 2005, which comprises three components: improving the curriculum and learning assessment systems, strengthening the teaching profession and rehabilitating priority schools in rural districts. Another is the “Rural Education” project financed by the World Bank since 2005, whose five components are: enhancing the incentive scheme for teachers, school subgrants to improve learning outcomes, textbooks and learning materials, student performance evaluation, and budgeting and strategic planning in education. Both projects are funded by international organizations, address specific problems and bode well for positive results in the target areas.

124. Access to all forms of education is guaranteed under the Constitution and is a priority State policy, as evidenced by State funding of the education system. Kyrgyzstan has assumed the full range of obligations to uphold and protect the rights of the child, without stipulating any conditions if the country, for whatever economic, cultural or social reasons, is not fully able to discharge its obligations under the Convention. The key instrument regulating legal relations in the field of education is the Education Act of 30 April 2003. With a view to gender mainstreaming and improving the status of girls, various programmes and projects are operating that incorporate a gender-equality component: the concept of developing a preschool education system, “Early Childhood Development”, “Village School”, the Education for All National Action Plan and the Higher Vocational Education Strategy geared towards broadening access to education for girls and boys. The Ministry of Education and Science is the main administrative authority responsible for defining policy and coordinating activities in education. Further efforts to improve school education were made in 2008 by the collegium of the Ministry of Education and Science, which approved the National Curriculum Framework (hereinafter, the curriculum). The curriculum is to be a fundamental legislative and regulatory instrument for improving school education and facilitating a transition to a system orientated toward outcomes that accord with the public’s wishes. It will also expedite the switch to a competency-based approach to education, thereby encouraging personal success in social and professional life. Curricula for grades 1-4 were devised on the basis of the National Curriculum Framework in line with the Asian Development Bank’s Second Education Project, then approved by Ministry of Education and Science order No. 747/1 of 7 June 2009. They will be gradually integrated into the syllabus for general education schools in 2010-2011, starting with the first grade. In 2008-2009 training seminars were held for specialists responsible for developing curricula, textbooks and learning materials for grades 5-9 and 10-11, respectively. In 2009-2010 the final revisions will be made to curricula for these grades. The Senior Grade Specialized Education Concept, developed pursuant to article 16 of the Education Act, was approved by Ministry of Education and Science order No. 713 of 22 July 2009. In accordance with the Concept, curricula for the tenth and eleventh grades are to include both core and specialized subjects.

125. Pursuant to the Jogorku Kenesh decision of 19 June 1995, Kyrgyzstan acceded to the Convention against Discrimination in Education, thereby committing itself to formulating, developing and implementing a national policy that uses methods appropriate to the country’s conditions and customs to create equal opportunities and relations in the field of education, including the commitment to making primary education free and compulsory, to making all forms of secondary education universal and available to all and to ensuring compliance with compulsory schooling laws. To prevent student attrition, special emphasis is given to maintaining accessibility to education and to the enrolment of school-aged children. As part of measures to implement the Education Act (art. 16) with regard to ensuring access to school education and government decision No. 667 of 14 November 1997, which outlines procedures for education authorities and general education institutions registering school-aged children and adolescents, three times a year a record is
taken of school-aged children and adolescents (January, May and August). Irrespective of their status, every school covers a micro-district, whose parameters are confirmed by the local district State administration. Records are maintained in collaboration with local government agencies, rural authorities and village councils and, with a view to timely implementation, coordinated by neighbourhood committees, local community boards and residents committees. In spite of such measures, there are still some children who are not attending school. Whereas records for August 2008 revealed 1,184 non-attenders, those for January and May showed 1,114 and 722, respectively, i.e. 410 fewer children attending school, or a 22.6 per cent increase in non-attendance. Educational establishments work actively with international charities. Issyk-Kul Oblast, for example, has six alternative children’s institutions covering 235 children, providing access to education for children from vulnerable families. Records are now rigorously maintained and school attendance monitored and assessed daily. Careful checks are kept on low-income and disadvantaged families, disabled children, as well as on families where parents have moved to another country in search of work.

126. For several years now efforts to improve the education system have been impeded by the shortage of qualified teachers. In the 2007/2008 school year the teacher coverage ratio was 95 per cent. In the regions, coverage is highest in Naryn Oblast (103.2 per cent) and lowest in Talas Oblast (90 per cent). Although the country has more than 72,000 school teachers, every year the shortfall in teaching staff exceeds 3,000. Around 57 per cent of schools suffer from a shortage of teachers in specific subject areas, particularly in mathematics (13 per cent), Russian language and literature (12 per cent), foreign languages (12 per cent) and physics (9 per cent). At the start of the 2009/2010 school year there were 3,130 teacher vacancies. The average national student-teacher ratio is 15 to 1. In an attempt to overcome teacher shortages at rural schools, the Ministry of Education and Science has for the past six years operated the “Young Teacher Deposit” programme. Two hundred young teachers were sent to schools in remote mountain regions in 2004, 300 in 2005, 700 in 2006, 700 in 2007, 600 in 2008 and 500 in 2009. To some extent this initiative helped to increase the number of teachers settling among rural communities, but by and large the problem remains unresolved. Another measure implemented by the Ministry aimed at supplying provincial communities with permanent teaching staff is a targeted program to increase the number of school leavers enrolling on teacher training courses by providing them with State-funded education grants. The Ministry has earmarked 544 places at higher education institutions for this purpose.

127. Teacher development programmes and training in new teaching methods are conducted by departments of the Kyrgyz Academy of Education, the Osh and Issyk-Kul regional institutes of teacher training, and the Talas, Jalal-Abad and Batken regional educational training centres. Since 2003 the Academy has had under its authority the Teacher Development, Training and Retraining Centre, which includes a special innovative educational technologies laboratory for updating the content, forms and methods of further training courses. Each year around 2,000 teachers, including 150-200 school heads, upgrade their skills. Over 900 teachers attend retraining courses on a part-time basis. Also, twice a year, in January and August, the Teacher Development Centre holds ten-day teacher training workshops in the regions. Annually over 10,000 teachers and educators enhance their professional skills by attending short-term courses. Since 2008 national lectures on teacher-related issues have been resumed. In addition, international organizations sponsor seminars, conferences and round-tables.

128. At present, 49.6 per cent of boys and 50.4 per cent of girls pursue secondary education. On average around 10-15 per cent of school-aged children drop out of the
system: in the north mostly boys and in the south mostly girls. The highest drop-out rates were recorded in the period 2002-2005 (over 12 times higher than in 1990). Boys are twice more likely to leave than girls. The main cause of non-attendance is financial hardship, with children going out to work in order to feed the family (5.3 per cent of boys and 4.4 per cent of girls) (fig. 8). In the country’s southern regions girls drop out due to the problem of early marriages and the higher “value” placed on female labour in traditional southern farming practices (growing and processing tobacco). In the north, where livestock farming dominates, there is a greater call for male labour. If no special measures are taken, the result will be a conspicuous increase in the number of uneducated people, particularly among women. The proportion of men with general and higher education will diminish and that of women increase, which could have unfortunate social consequences.

Figure 8
Number of children leaving school to start work

129. Despite its economic problems, the country still has accessible school education. Nevertheless, access to education for children in difficult circumstances is not without its restrictions. The procurator’s office notes that one of the main reasons why children fail to attend school is that their families live in poverty and do not have enough money to buy clothes. Many non-attenders come from low-income and broken homes (their parents are divorced or have moved away). Also noted is the low standard of education among pupils caused by the shortage of textbooks and the lack of training materials for teachers on educating and nurturing children. Even though all Kyrgyz children are provided with textbooks in schools and free meals in the lower grades (five soms a day per child), low-income families struggle to buy school uniforms and school paraphernalia. Furthermore, schools impose additional payments on families by way of “voluntary contributions to the school fund”, for maintenance work, the class fund, etc., thus causing more problems for economically disadvantaged families, particularly those with a lot of children. In other words, although school education is free and universal, low-income families find it hard to obtain an education for their children and often solve the problem by placing them in residential schools. This being the case, better social support services for low-income families and families in crisis (day-care centres, targeted material assistance, etc.) would help to prevent the institutionalization of children. The problems associated with child education coverage are still the result of irresponsible parenting, lack of action to support disadvantaged and at-risk families, big staff turnover rates, the shortage of youth-liaison officers and the lack of psychologists and youth counsellors in general education schools. At the same time, meagre teacher salaries and the absence of other work incentives are fuelling the shortage of teaching staff, primarily in rural areas.

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81 Presidential decree No. 372 of 12 July 2006 on the provision of meals at general education schools; presidential decree No. 673 of 18 September 2006 on the provision of meals at State and municipal general education schools.
130. Pursuant to Education Act No. 92 of 30 April 2003, a number of general and vocational education programmes have been put into effect. The latter include:

- Initial vocational training;
- Intermediate vocational training;
- Higher vocational training;
- Postgraduate vocational training;
- Further vocational training (art. 11).

The first two programmes cater primarily for children under 18.

131. Initial vocational training involves preparing skilled personnel (manual and non-manual workers) in the main areas of socially useful activity after basic or secondary general education.\(^{82}\) In accordance with Act No. 129 of 26 November on Initial Vocational Education, students at initial vocational training schools undergo work experience at different types of legal entities under bipartite agreements (art. 5). Students are entitled to remuneration for work undertaken during occupational training in accordance with established procedure (art. 20) and are also during this time required to comply with enactments regulating the work of the relevant organizations. Government decision No. 245 of 25 April 2003 stipulates the model provisions for initial vocational training schools that establish procedures whereby students in occupational training are to be paid at least 50 per cent of what they earn in the form of monetary remuneration for the work they have done. The remainder is retained by initial vocational training schools. Government decision No. 96 of 15 February 2006 approved regulations governing material support for students at initial vocational training schools, whereby students (including those under tutorship or guardianship) are provided with free meals commensurate with their specified allowance. While undergoing work experience instead of meals they receive monetary remuneration or packed lunches in accordance with the approved norms.

132. Intermediate vocational training enables students to gain the knowledge, proficiency and skills required for a particular profession (specialisation) after acquiring a basic intermediate or initial vocational education. It is regulated by a regulation governing the organization of intermediate vocational training schools adopted under government decision No. 53 of 3 February 2004. Pursuant to this regulation, students at intermediate vocational training schools usually undergo occupational (vocational) training (technical) in a particular area of specialization and undergraduate occupational (vocational) training in companies, institutions and other organizations under agreements concluded between the schools and such entities. Ministry of Education and Science order No. 138/1 of 10 March 2006 (registered with the Ministry of Justice on 4 April 2006; registration No. 31-06) brought into force the regulation on the occupational (vocational) training of student apprentices from intermediate vocational training schools that regulates the procedures for such training, which comprises an integral part of the basic intermediate vocational training programme. Students assigned work placements are immediately subject to occupational safety and health regulations, as well as to the code of conduct applied at the respective organization. Placement students must also comply with employment laws and pay national health insurance on a par with all employees. Students undergoing occupational training are required to study and strictly abide by health and fire safety regulations. The regulation also stipulates that students on work placements are to be paid in accordance with the rates established by the legislation applicable to organizations in the respective sector and in compliance with the agreements concluded between intermediate vocational training schools and said organizations, regardless of their form of ownership.

\(^{82}\) Education Act No. 92 of 30 April 2003, art. 1.
133. Pursuant to the regulation governing the occupational (vocational) training of student apprentices from intermediate vocational training schools, work experience may be undertaken as part of specialized seasonal or student work teams. Government decision No. 621 of 25 August 2006 concerning State support for student work teams and No. 839 of 13 November regarding their organization both include a number of initiatives geared towards establishing a system whereby the State assists in identifying suitable ways to employ them. Student work teams are voluntary non-political associations of students attending initial, intermediate and higher vocational schools who come together to work as a collective in their spare time. Their activities are coordinated by the Department of Youth Affairs and the Republican Youth Labour Exchange, which reports to the Ministry of Labour, Employment and Migration.

134. Occupational Safety and Health Act No. 167 of 1 August 2003 also applies to students attending initial, intermediate and higher vocational schools and general secondary and basic general education institutions who are undergoing occupational training or engaged in construction, farming and other types of work (art. 2). Pursuant to the regulation governing procedures for teaching occupational safety and health and testing the knowledge of employees on this subject (government decision No. 225 of 5 April 2004), student apprentices from educational institutions undergoing occupational (practical) training are, prior to working independently, first taught occupational safety and health at their assigned workplace. Under the Labour Code, employers are liable for injuries sustained by employees that cause disfigurement, occupational diseases or other damage to health in the performance of their duties, including injuries sustained by student apprentices. This matter is covered in greater detail by regulations dealing with compensation for injuries sustained by employees that cause disfigurement, occupational diseases or other damage to health in the performance of their duties (government decision No. 175 of 23 March 1993) and the directive on procedures for applying the regulations (decision of the Ministry of Labour and Social Protection No. 10 of 11 February 1994 and the Council of the Federation of Trade Unions No. 27-2g of 10 March 1994). A regulation (government decision No. 64 of 27 February 2001) setting out the mandatory procedures for regulating the investigation and reporting of work accidents also applies to the investigation and reporting of accidents sustained by students from initial, intermediate and higher vocational training schools and basic general education institutions undergoing occupational training. A regulation on procedures governing the provision of temporary incapacity benefits, maternity benefits (government decision No. 576 of 14 August 2006) stipulates that equal benefits for temporary incapacity are to be paid to students from initial, intermediate and higher vocational training and general education schools in remunerated work placements until the placement period ends. Some sectors have additional safety and health measures, as well as other procedures governing occupational (vocational) training. Thus, pursuant to the unified safety regulations for crushing, sorting and processing mineral resources and for lumping ores and concentrates (order No. 71 of 16 May 2000 issued by the Ministry for Emergency Situations and Civil Defence), before undertaking their first work placement, students from intermediate and higher mining colleges and vocational training colleges must attend a two-day training course and take examinations in occupational safety set by the factory committee. Prior to their placement commencing, they are also taught occupational safety then tested on their knowledge by the factory committee. To comply with the infection control standards imposed on trading companies and their alimentary raw materials and food products (decision of the Chief Medical Officer No. 45 of 29 November 2003), prior to their placement commencing, students from secondary general education schools, vocational training colleges, special educational institutions and technical colleges are required, in accordance with the established procedures, to undergo a medical and personal hygiene examination before starting work experience with trading companies. Improving the competitive viability of graduates from vocational training colleges is one of the Government’s core employment policy priorities. To this end, its programme for national
employment policy up to 2010 includes measures for establishing business links between intermediate vocational training schools, employers and employment agencies with a view to providing a service that can react promptly to changes in the market and field suitably qualified personnel as and when required. Efforts to develop the country’s intermediate vocational education sector will accord particular emphasis to training and finding employment for young people from vulnerable sections of society, including orphans, the disabled and refugees. So far the procurator’s office reports one instance of child labour in State institutions and State educational establishments (para. 300). On 8 September 2008 pupils in grade seven at the K. Mambetaliev School in At-Bashy village, Naryn Oblast, were made to dig a pit in lesson time. Following the submission of a report on 25 September 2008 by the procurator’s office of At-Bashy district, the school’s head teacher, his deputies and the class tutor were reprimanded.

135. Kyrgyzstan is part of the European Network of Health Promoting Schools and has set up a national network of schools (21 in total) encouraging healthy lifestyles. With this in mind, an educational programme called “Cultivating Health” for children in grades 1-8 has been adopted that is spread over 34 lessons. Teachers and pupils in grades 5-11 have been instructed in the principles of hygiene and social mobilisation using peer-to-peer and step-by-step methods. The number of classes covered by the programme continues to rise and there is a possibility that it could be expanded and form part of the national curriculum. With support from UNESCO, UNDP, GFATM and other donors, a handbook entitled “Adolescent Health” has been produced for students in grades 9-11 as part of the Ministry of Education and Science’s “Healthy Generation” project. Information packs have also been prepared for school heads and teaching staff and a manual published for trainee teachers. School and higher education teachers have been instructed in issues relating to HIV, gender, drug addiction and sexual and reproductive health. Healthy lifestyle lessons are taught either in school hours or as an extracurricular option with topic-specific titles such as “Safety Route”, “Drug Killer” and “Step by Step”. These lessons employ peer-to-peer and interactive teaching methods with active involvement by young people and school children. In 2007 lessons on these issues were taught to over 15,000 students. In 2006 all of the country’s 118 vocational training schools began teaching a 24-hour course on health promotion. A programme entitled “Healthy Lifestyle” has been devised that also addresses sexual and reproductive health, family planning, sexually transmitted diseases, HIV, AIDS and gender issues. In 2008 the Ministry of Health and the Government-affiliated State Agency for Vocational Education signed an agreement officially incorporating the programme into further training courses for vocational training college teachers. “Healthy Lifestyle” handbooks have been produced for vocational college teachers, as well as a teaching manual entitled “Teaching Sexual and Reproductive Health: Principles and Methods”. The “Step by Step” guide for strategic planning in sexual and reproductive health has been specially adapted. As part of the Community Action for Health project, children join in implementing health initiatives through school parliaments and youth clubs. With support from the Global Fund to Fight AIDS, Tuberculosis and Malaria, 184,000 pamphlets, booklets and leaflets aimed at different population groups have been published and republished in Kyrgyz and Russian dealing with HIV, sexually transmitted diseases and drug addiction. These have been distributed by health-care organizations and NGOs at seminars and targeted youth initiatives. Targeted informative materials on sexual and reproductive health for different youth groups, parents, local community representatives and religious leaders have been produced and approved under the PSI-backed State Programme to Prevent an HIV/AIDS Epidemic and its Socio and Economic Consequence in the Kyrgyz Republic for 2006-2010.
B. Eradicating payment of “voluntary” and other informal fees in child education

136. According to the Procurator-General’s Office, local public prosecution offices have received no reports of parents being charged informal monthly and/or one-time fees to enrol their children at school or to pay for textbooks or school repairs (para. 294). The Ministry of Education and Science has prepared a series of orders and checks are carried out to prevent such cases occurring. Be that as it may, informal sources suggest that these practices are still encountered.

C. Working to reduce high drop-out rates by improving conditions in schools (e.g. heating and power supply systems) and creating a more convivial atmosphere

137. Only 70 per cent of schools are provided with textbooks and in the 2007/2008 school year 25.1 per cent of a total 14,344 computers did not work. In addition, schools that have textbooks do not replace them with new ones for more than five years (69.7 per cent). Rural schools are worse supplied. Pursuant to presidential decree No. 309 of 24 October 1996 on measures to further improve local government, and government decision No. 531 of 11 November 1996 establishing procedures for transferring assets to community ownership, general education schools, kindergartens and other educational facilities are now owned by rural communities (aiyl okmoty), although still maintained and financed by the State, which also provides furniture and equipment. With a view to updating and enlarging the stock of library books and other educational materials in general education schools, in line with protocol resolution No. 21 of 28 April 2009 the commission of the Centralised Fund for Poverty Reduction (CFPR) elected to allocate the Ministry of Education and Science 85 million soms to publish 26 textbook titles (20 for Kyrgyz-language schools and 6 for schools conducting lessons in Uzbek), some 1,333,000 copies in all. After the submission of bids, an agreement was concluded with the contractor, who, by the decision of the CFPR commission, received 9,160 million soms to publish a wide range of reference books and works of fiction for school libraries. These items were duly delivered and shipped to district and municipal education authorities in July 2009. As part of the World Bank’s Rural Education project, all schools received seven textbooks and teacher handbook titles to a total of $1,174,571. In addition, 320 computers and seven printers costing 8,928,000 soms were purchased for schools in Talas and Issyk-Kul oblasts. 503 preschool facilities and 325 primary schools in Batken, Naryn and Cuy oblasts were given teaching and learning materials and works of fiction totalling 11,465,645 soms. By 2010 schools will have received 90,000 reading books worth $285,000 for grades 1-4. Current plans include supplying schools with a further ten Russian and Kyrgyz-language textbooks for learning mathematics, English and other subjects to a total $800,000. Under inter-governmental agreements signed between Kyrgyzstan and the Russian Federation, a modern printing works has been set up under the aegis of Kyrgyz-Russian Slavic University. Steps are being taken to adapt Russian-language textbooks produced in Russia in order to align them with Kyrgyz specifications. In late 2009 a number of these books, published with help from the Russkiy Mir Foundation, were delivered to schools. The German Society for Technical Cooperation supports 40 pilot schools as part of the Basic Education in Central Asia programme, under which a total 57,000 euros have so far been spent on textbooks and fiction. A textbook preparation and publishing department and the Republican Scientific and Teaching Council have been established under the authority of the Ministry of Education and Science in order to consolidate textbook publishing efforts

138. Kyrgyzstan currently has 2,111 preschool canteens catering for 378,293 students in grades 1-4, 868 of which are standard school dining halls, 508 snack-bars and 735 adapted
School meals are regulated by the Act on the Provision of Meals at General Education Schools. Pursuant to government decision No. 673 of 18 September 2006, the Ministry of Health issued order No. 81/1 of 20 February 2008, which makes the heads of education departments and authorities and general education institutions personally responsible for school meal programmes. In compliance with Ministry of Education and Science order No. 300/1 of 23 May 2008, a series of initiatives have been launched to improve food programmes for students at general education institutions, tasking the heads of regional education authorities and education establishments with ensuring that school canteens comply with school catering regulations and hygiene standards. Workshops, training seminars and courses are now running that provide instruction in effective documentation management, quality nutrition and service enhancement and also enable catering staff to upgrade their skills. Most school meal programmes are based on a weekly menu cycle and offer a varied range of food products. Virtually all schools provide students in lower grades with a bun and a mug of tea, which is later replaced with other breadstuffs and drinks (biscuits, gingerbread, wafers, shortcake, muffins, hot milk, cocoa, coffee, etc.). There are also special “food corners” for 1-4 grade students where the regulations and other catering-related documentation are displayed, including the head teacher’s instructions regarding the appointment of a catering commission, the canteen rules, the school lunch programme and the menu. Daily and longer-term menu plans are decided by cooks and health-care providers and are submitted for approval to the school’s head teacher. Expenditure on food products is calculated on a daily basis and itemized using cost cards. Each menu allows for an expenditure rate of seven soms per day. Menu production records are retained and once a month passed to the local central accounting department, which keeps them on file and also monitors the school’s catering accounts. For ordering purposes, all schools keep a daily record of student meals and their nutritional quality. From time to time Ministry of Health and Science agencies and public prosecution offices inspect school catering facilities, focusing on food procurement, storage and preparation practices. The results of such inspections were, for example, considered at ministerial board meeting No. 2/2 held on 8 April, 2008. If it is discovered that food service rules and regulations have been contravened, the matter is forwarded to special commissions for consideration. Thus, on 19 February 2009 a suspected case of food poisoning among students at the Kyrgyz-Turkish Vocational Training School in Jalal-Abad, Jalal-Abad Oblast, was examined by the presidium of the Government-affiliated Country Multi-Sectoral Coordination Committee on Socially Significant and Particularly Dangerous Infectious Diseases. In accordance with decision No. 151 of 9 April 2009 adopted by the Chief Medical Officer and Ministry of Education and Science order No. 58/2 of 17 April 2009, an inspection was carried out into the provision of food services to pupils in grades 1-4 at general education institutions in Osh and Jalal-Abad oblasts.

School-meal provision still suffers primarily from the substandard physical facilities of student canteens. The 7 soms allocated to catering is not enough to ensure a varied diet. In regions where local authorities provide an extra 2-5 soms menus are more diverse and the food fortified with vitamins. Most school canteens have no hot water and many lack cold running water. In some rural schools water supply problems are due to aging and broken plumbing systems. There are also schools where the potable water supply is erratic because they stock up on water for a few days at a time.

The Ministry of Education and Science coordinates and monitors how educational institutions prepare for winter. Responsibility for these preparations is borne by head teachers, who oversee the repair and maintenance of boilers, heating systems, roofs, electric lighting and classrooms and are also charged with making timely fuel purchases. To ensure the rational and economical use of State funds allocated for paying utility charges and in pursuance of government decision No. 127 of 16 February, heat, electricity and natural gas consumption limits for State-funded organizations in 2009 have been established by a
Ministry of Education and Science order for each institution under its authority. In order to obviate the effects of power cuts, the Ministry is gradually converting 28 electrically heated educational facilities to alternative fuel systems. In 2008 three residential institutions were converted, although in 2009 plans to convert another 14 had to be abandoned due to a shortfall of 169,900,000 soms that had not been factored into budget expenditure for these objectives. Pursuant to enactments regulating local authorities and local State administration and basic areas of local government spending, the funding of general educational schools and preschool institutions falls within the competence of the local authorities, making them responsible for supplying educational institutions with solid fuel. Over the 2009/2010 school year the country’s general educational schools require 75,300 tonnes of solid fuel during the heating season, funded from local budgets. National budget funds are used to pay for heating at 14 educational facilities, which require a total of 3,300 tonnes. The Ministry of Education and Science monitors educational institutions throughout the entire heating season.

141. The Ministry of Finance has allocated schools 100 million soms from the Centralized Fund for Poverty Reduction to routine maintenance work. The distribution of the funds was based on the average ratio of a school building’s volume to the number of students at the school (the relevant figures were submitted to the Ministry of Education and Science’s economic unit by local government district education departments). The funds were transferred to local authorities and the building materials bought and distributed by local authorities commensurate with the orders submitted by schools. 4.14 soms were allotted for every 1m³ of the interior volume of the school and 95 soms for every student.

142. In 2009 various funding sources (allocations from local budgets, sponsors and an Asian Development Bank grant) were used for major maintenance work at 183 schools, 19 of which carried out repairs with an ADB grant provided under the auspices of the Second Education Project. A total of 160.2 million soms were set aside for these objectives, including 55 million soms from local budgets, 56.4 million soms from ADB, 7.2 million soms from ARIS and 7.3 million soms from Mersico, as well as 25.9 million soms in stimulus grants from the national budget and 8.4 million soms from other sponsors.

143. In 2009 various funding sources are being used to build 151 schools and school annexes catering for 37,000 students, including capital investments totalling 389.3 million soms from the national budget. 92 schools for 23,100 students are also under construction. Local budgets, a stimulus grant and sponsorship money are financing the building of 59 schools and annexes for 13,900 students using the ashar method. Fifteen schools (eight furnished, seven unfurnished), annexes and two gymnasiums for 2,400 students are already completed. Of these, nine schools were constructed using national budget resources and six schools and annexes with local budget funds allocated under co-financing agreements with international projects sponsored by ARIS and Mersico and other organizations (five in Jalal-Abad Oblast, five in Issyk-Kul Oblast, one in Talas Oblast, three in Chuy Oblast, one in Batken Oblast and two in Naryn Oblast).

D. The development of special educational programmes meeting the needs of working and street children, migrants without a residence permit and children deprived of their liberty

144. In August the Ministry of Education and Science enlisted the assistance of local authorities in conducting a census of school-aged children. The results showed that 1,116 children, primarily in the south of the country, did not attend school (240 in Jalal-Abad Oblast, 121 in Batken Oblast and 308 in Osh Oblast). Of the total number 340 had not attended since the start of the school year and 968 were temporarily absent. The Ministry,
education authorities and general education institutions are taking steps to ensure that the children return to school:

- In conjunction with the Ministry of Internal Affairs an action plan has been devised to enrol children from internal migrant families in schools.
- In order to identify children not attending school, the Ministry of Education and Science and the Ministry of Internal Affairs have adopted a joint order stipulating measures to improve interaction between Internal Affairs agencies and education authorities in coordinating preventive work with students at educational institutions. The result has been an extensive strategic prevention operation called “Back to School” involving 1,641 Internal Affairs officers, 101 CCA and FCSD personnel, 585 education authorities, 71 social security agencies, 63 health authorities and 276 community health centres.

With a view to getting children back into the classroom, education management authorities are pursuing the following initiatives:

- Providing clothing, shoes and stationery to children experiencing material hardship;
- Conducting outreach work and individual interviews with parents reluctant to send their children to school;
- Registering children from disadvantaged backgrounds as requiring special attention with either a school or the district (municipal) commission on children’s affairs prior to assigning them to an educational institution;
- Organising (part-time) evening classes for working children, subject to agreement with district (municipal) commissions on children’s affairs;
- Setting up remedial classes and preliminary language courses for children not speaking the State or official languages (refugees).

In 2009 the Ministry of Education and Science and the international charity EveryChild ran an ILO-backed short-term project in Osh Oblast aimed at finding ways of getting children back to school. Working children in the towns of Osh and Kara-Suu not fully covered by the formal education system were taught in informal settings. Courses were held at day centres in these towns with the direct involvement and supervision of the Osh and Kara-Suu district education departments and constituted an addition to the formal school system in that they provided supplementary classes for working children of different ages and literacy levels. In cases where children’s education had been retarded for no more than one year, such children were able, on completing non-formal education, to return to school if this was the decision adopted by the teachers at the day centre and the towns’ education departments. Where gaps in education were one year or more, the decision to send a child to school was taken on an individual case basis and involved issues such as whether he/she should attend part-time courses, be placed in a class of the same age group, whether the child had absorbed the programme material, etc. The teachers participating in the scheme devised individual learning programmes and testing methods for children with gaps in their school education. As a result of the project, twenty children who had received non-formal tuition at day centres subsequently attended schools where they were placed in classes with children of their own age, the teachers gained experience in the non-formal education of working children and social workers at the day centres learned how to establish and build ties with schools and education departments and to provide working children with access to education. In compliance with the Education Act and to make education readily accessible to vulnerable sections of society, part-time evening courses have been organised for working children in four regions, Bishkek and Osh, with a total coverage of 2,736 students in 157 classrooms. Most children do not attend school due to material hardship and for domestic reasons (table 7).
Table 7
Number of children not attending school and reasons for non-attendance, 2001-2009

<table>
<thead>
<tr>
<th>Reasons for non-attendance</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of non-attenders</td>
<td>3,516</td>
<td>2,512</td>
<td>1,717</td>
<td>1,344</td>
<td>2,559</td>
<td>2,556</td>
<td>2,000</td>
<td>1,186</td>
<td>1,116</td>
</tr>
<tr>
<td>Material hardship</td>
<td>201</td>
<td>820</td>
<td>677</td>
<td>350</td>
<td>721</td>
<td>800</td>
<td>450</td>
<td>320</td>
<td>290</td>
</tr>
<tr>
<td>Domestic reasons</td>
<td>49</td>
<td>331</td>
<td>239</td>
<td>222</td>
<td>657</td>
<td>506</td>
<td>420</td>
<td>330</td>
<td>285</td>
</tr>
<tr>
<td>Parental objections</td>
<td>1,477</td>
<td>294</td>
<td>169</td>
<td>152</td>
<td>217</td>
<td>219</td>
<td>226</td>
<td>126</td>
<td>118</td>
</tr>
<tr>
<td>Unwillingness to learn</td>
<td>43</td>
<td>337</td>
<td>250</td>
<td>242</td>
<td>336</td>
<td>403</td>
<td>248</td>
<td>110</td>
<td>109</td>
</tr>
<tr>
<td>Disadvantaged family</td>
<td>25</td>
<td>269</td>
<td>152</td>
<td>211</td>
<td>209</td>
<td>300</td>
<td>324</td>
<td>100</td>
<td>88</td>
</tr>
<tr>
<td>Work</td>
<td>28</td>
<td>305</td>
<td>144</td>
<td>53</td>
<td>156</td>
<td>228</td>
<td>225</td>
<td>98</td>
<td>97</td>
</tr>
<tr>
<td>Ignorance of language(refugees)</td>
<td>7</td>
<td>58</td>
<td>13</td>
<td>10</td>
<td>5</td>
<td>3</td>
<td>16</td>
<td>2</td>
<td>24</td>
</tr>
<tr>
<td>Other reasons</td>
<td>1,686</td>
<td>98</td>
<td>73</td>
<td>104</td>
<td>258</td>
<td>87</td>
<td>91</td>
<td>100</td>
<td>105</td>
</tr>
</tbody>
</table>

Working children are to varying degrees losing contact with school and missing out on a full secondary education with the result that a large number of children end up joining the market for unskilled labour. To better enable parents and teachers to protect the rights and interests of children, the Ministry of Education and Science has approved model regulations empowering parent committees at general education schools that stipulate the standards that must be met in respect of the quality and accessibility of education, as well as student health care. A series of coordinated preventive measures have been adopted so that parents and persons acting in their stead are made aware that they are liable for prosecution if they infringe a child’s legal right to education (under article 65 of the Code on Administrative Responsibility, article 149 of the Criminal Code and part 3, article 27 of the Education Act):

- Nationwide parent conferences and meetings attended by law-enforcement officers, health-care providers, social workers, psychologists and local communities;
- Regular joint swoops by law-enforcement officers, local government officials and school administrators to uncover the worst cases of child labour;
- To combat non-attendance among students at general educational schools, 1,413 prevention boards have been set up; members include school administrators, teaching staff, youth liaison officers, child counsellors, community representatives, regional community health centre personnel and parents of senior pupils.

IX. Special protection measures. Refugee children (art. 22)

145. According to various estimates, Kyrgyzstan has more than 10,000 street children, over 23,000 working children and some 20,000 children out of school.

A. Children in emergency situations

146. Domestic legislation\(^{83}\) establishes the rights of refugee children, i.e. children who have been granted refugee status, and this status is enshrined in law. “The Kyrgyz Republic guarantees to provide for a child seeking refugee status or who is deemed a refugee under

\(^{83}\) Children’s Code, art. 2.
international and national law, whether accompanied or not accompanied by parents or any other person, and to afford appropriate protection and assistance in the exercise of the rights specified in the Code and other international human rights treaties and agreements to which Kyrgyzstan is party. If the head of a family has been accorded refugee status in Kyrgyzstan on the grounds specified in the Refugees Act, refugee status also extends to his/her children provided they live together. Children are entitled to be reunited with their parents in Kyrgyzstan and to be granted refugee status. A child with refugee status in Kyrgyzstan enjoys the same rights and bears the same responsibilities as Kyrgyz citizens. If a child refugee has no parents or persons acting in their stead, the designated State agencies nearest to the child’s place of abode are required to implement measures to find his/her parents or relations and to render material, medical and other assistance.\textsuperscript{84} Refugee-related problems are addressed under integration programmes operated in conjunction with UNHCR that ensure access to education, health care, employment, judicial protection, suitable housing and land plots for rental. As of 1 November 2009 there were 245 refugees, including 39 children. As part of long-term measures employed under a UNHCR voluntary repatriation programme, more than 5,000 people returned home, 9,000 acquired Kyrgyz citizenship and over 700 were resettled in third countries. 2008 saw the opening of a refugee reception centre catering for 40-45 persons as part of a UNHCR-backed European Commission project to improve reception facilities for asylum seekers. Further to the Committee’s recommendations, a special stipulation has been included in the country’s laws and regulations that ensures the rights of refugee children to registration, citizenship, education and health care (see paras. 1-VII of this report). A regulation concerning a unified State emergency prevention and response system approved by government decision No. 746 of 23 October 2006 provides for measures to protect children in emergency situations.

B. Children in conflict with the law

147. Assisted by the relevant agencies and institutions, the country’s Internal Affairs authorities are conducting a continuous campaign aimed at preventing juvenile delinquency, crime and other breaches of the law. In 2009 the adolescent crime rate declined 5.1 per cent (from 892 to 846), accounting for 3.4 per cent of total crime statistics (fig. 9).

Figure 9
Youth crime trends

According to statistical data, between 2003 and 2009 adolescent crime dropped 42 per cent. There was no decrease, however, in the number of juvenile delinquents on file with police

\textsuperscript{84} Children’s Code, art. 30.
youth liaison services. Each year the number fluctuates between 3,000 and 3,500, 2,000-2,500 of which are new offenders (fig. 10). Figures for the first nine months of 2009 show 2,277 schoolchildren registered with the police youth liaison service.

Figure 10
Number of minors on file with the police youth liaison service

Figure 11
Number of juvenile offenders, 2009

All minors in temporary detention facilities are held in cells separate from adults at all stages of police investigations commencing with their arrest. The conditions in which they are kept are monitored by the senior staff of the corresponding Internal Affairs authorities, supervised, in turn, by the procurator’s office.

Table 8
Number of juveniles held in temporary detention facilities

<table>
<thead>
<tr>
<th>Year</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of children</td>
<td>582</td>
<td>603</td>
<td>724</td>
<td>709</td>
<td>768</td>
<td>715</td>
<td>623</td>
<td>567</td>
</tr>
</tbody>
</table>

Investigations of cases involving minors are conducted in the presence of a lawyer and a legal guardian. Senior Internal Affairs officers and public prosecution offices are responsible for ensuring that such investigations are carried out in compliance with criminal procedure law. To safeguard the rights and interests of minors, a pilot project is now
underway to integrate the principles of juvenile justice into the activities of the Internal Affairs authorities, specifically with the aim of systematising the protection of minors in conflict with the law. With support from the United Nations Children’s Fund, the Internal Affairs departments of Bishkek’s Sverdlovsk and Oktyabr districts have installed special rooms for questioning juveniles (arrested, under suspicion or accused) during which process the presence of FCSD officials, lawyers and legal guardians is mandatory.

Table 9
Number of juveniles taken to police stations for alleged offences

<table>
<thead>
<tr>
<th>Year</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of juveniles taken to police stations</td>
<td>10 159</td>
<td>8 830</td>
<td>8 575</td>
<td>10 417</td>
<td>12 094</td>
</tr>
</tbody>
</table>

Table 10
Number of juveniles held in MIA centres for the adaptation and rehabilitation of minors and subject to rehabilitation

<table>
<thead>
<tr>
<th>Year</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of juveniles held</td>
<td>2 302</td>
<td>2 002</td>
<td>2 124</td>
<td>1 849</td>
<td>1 959</td>
<td>1 896</td>
<td>2 273</td>
<td>1 950</td>
</tr>
</tbody>
</table>

148. The Academy of the Ministry of Internal Affairs has devised a number of training programmes which form the basis of lectures for MIA cadets and students studying the Convention on the Rights of the Child and related issues. Every year the Academy runs a series of lectures by MIA youth liaison officers for MIA personnel attending further training courses. The Academy has also produced a guidance manual entitled “Safeguarding Children’s Rights in the Work of Internal Affairs Authorities”, which has been disseminated among regional MIA branches for use in their day-to-day activities. As part of the “New Generation” State Programme for the Implementation of Child Rights in Kyrgyzstan until 2010, efforts are continuing to realise the State Programme of Action of Social Partners to Eliminate the Worst Forms of Child Labour in the Kyrgyz Republic for 2008-2011, approved by Government Decision No. 20 of 22 January 2008, and the 2009-2011 Inter-Agency Action Plan for the Reform of the Child Protection System and the Promotion of Social Services for the Population adopted by government order No. 613 of 19 October 2009.

Table 11
Number of crimes against minors involving unlawful use of child labour and commercial sexual exploitation

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Art. 123. Abduction</td>
<td>3</td>
<td>5</td>
<td>6</td>
<td>9</td>
</tr>
<tr>
<td>Art. 124. Trafficking in persons</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Art. 125. Illegal deprivation of liberty</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Art. 156. Involving minors in criminal activity</td>
<td>2</td>
<td>5</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Art. 157. Involving minors in anti-social behaviour (prostitution, sexual acts, pornography)</td>
<td>1</td>
<td>6</td>
<td>6</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 12
Number of crimes against minors, 2002-2009

<table>
<thead>
<tr>
<th>Type of offence</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of recorded offences</td>
<td>259</td>
<td>368</td>
<td>392</td>
<td>506</td>
<td>600</td>
<td>759</td>
<td>868</td>
<td>898</td>
</tr>
<tr>
<td>of which</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Offences against life and health (arts. 97-122)</td>
<td>43</td>
<td>59</td>
<td>62</td>
<td>43</td>
<td>72</td>
<td>51</td>
<td>62</td>
<td>41</td>
</tr>
<tr>
<td>Offences against liberty, honour and dignity (arts. 123-128)</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>9</td>
<td>6</td>
<td>9</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Offences against the sexual integrity and the sexual freedom of the individual (arts. 129-133)</td>
<td>47</td>
<td>56</td>
<td>60</td>
<td>55</td>
<td>44</td>
<td>59</td>
<td>76</td>
<td>79</td>
</tr>
<tr>
<td>Offences against the family and minors (arts. 153-163)</td>
<td>28</td>
<td>31</td>
<td>46</td>
<td>35</td>
<td>31</td>
<td>48</td>
<td>21</td>
<td>17</td>
</tr>
<tr>
<td>Offences against public safety (arts. 226-245)</td>
<td>33</td>
<td>49</td>
<td>63</td>
<td>83</td>
<td>107</td>
<td>120</td>
<td>106</td>
<td>94</td>
</tr>
<tr>
<td>Offences against public health and morals (arts. 246-264)</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Offences against traffic safety and operation of transport vehicles (arts. 280-288)</td>
<td>16</td>
<td>18</td>
<td>23</td>
<td>20</td>
<td>23</td>
<td>16</td>
<td>35</td>
<td>14</td>
</tr>
</tbody>
</table>

149. Monitoring exercises conducted by public prosecution offices to gauge the success of juvenile crime prevention initiatives have shown that the measures taken by youth liaison services, commissions on children’s affairs and local government departments for family and child support to check adolescent delinquency are unsatisfactory. The poor performance of youth liaison services in this area is partly due to the widespread tendency of local MIA chiefs to use youth liaison officers to perform duties other than their designated responsibilities. An inspection carried out by the Karakol procurator’s office into the work of the local police youth liaison service revealed a number of violations that, together with the submission of a report by the chief of the city’s Internal Affairs authority, resulted in severe reprimands for the head of the service and five officers. Similarly, following checks carried out by the procurator’s office in Tash-Kymyr into the operations of the local youth liaison service, a report was submitted to the Department of Internal Affairs of Jalal-Abad Oblast that led to disciplinary charges being filed against the head, deputy and three officers of the respective police authority. In order to improve juvenile delinquency prevention, a draft law has been prepared with the purpose of amending specific legislative acts, limiting the amount of time that minors are permitted to stay in public spaces and out of doors in the evening and at night when not accompanied by their parents, and making parents more accountable for neglecting their children’s upbringing or raising them incorrectly. Given that out-of-school children are more likely to break the law, universal basic education plays a positive role in youth crime prevention. In point of fact, 62.9 per cent of minors arrested for committing crimes over a ten-month period last year did not attend school. Rehabilitating and educating these children is, therefore, a priority task.

1. Administration of juvenile justice (art. 40)

150. Decision No. 6 of 2 April 2003 adopted at a plenary session of the Supreme Court on judicial practice in cases involving offences committed by minors seeks to address issues that courts are likely to face when ruling on acts of juvenile delinquency. A UNICEF
project backed by the NGO Legal Centre entitled “Legal Support for Children in Conflict with the Law (Juvenile Justice)” aims to provide young offenders with legal and social assistance. The Sverdlovsk and Oktyabr districts of Bishkek have piloted a scheme that makes free legal aid available to children in conflict with the law. Lawyers and social workers from the Insan Generation Foundation provide legal and social support free of charge to minors from the time of their arrest through to the judicial decision. A number of beneficiaries have received and continue to receive legal aid by way of representation in dealings with investigation agencies and in court, as well as legal advice in juvenile justice cases. Bishkek’s Sverdlovsk and Oktyabr district internal affairs authorities and courts have considered 15 juvenile delinquency cases under the scheme. Particularly noteworthy is that improving juvenile justice was one of the issues discussed at the fourth meeting of the heads of the supreme courts of the member States of the Shanghai Cooperation Organization, hosted by Kyrgyzstan’s Supreme Court in Cholpon-Ata in September 2009. At present, the National Department of Correctional Services is working towards the implementation of the Inter-Agency Plan. The number of minors in correctional institutions fell dramatically following the implementation of Amnesty Act No. 19 of 22 February 2007, introduced to mark the sixteenth anniversary of the country’s independence and the adoption of a revised Constitution, Act No. 91 of 25 June 2007, whose purpose was to make criminal justice policy more humane, and Act No. 190 of 4 August 2008 on Amnesty for Women and Minors. By 2010 the number of juvenile convicts serving sentences in juvenile correctional facility No. 14 overseen by the Department of Corrections, affiliated to the National Department of Correctional Services, fell four-fold compared with 2003 (table 13).

Table 13
Number of juvenile offenders serving sentences in correctional facilities at the start of the year, 2002-2010

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>137</td>
</tr>
<tr>
<td>2003</td>
<td>198</td>
</tr>
<tr>
<td>2004</td>
<td>178</td>
</tr>
<tr>
<td>2005</td>
<td>82</td>
</tr>
<tr>
<td>2006</td>
<td>99</td>
</tr>
<tr>
<td>2007</td>
<td>55</td>
</tr>
<tr>
<td>2008</td>
<td>51</td>
</tr>
<tr>
<td>2009</td>
<td>48</td>
</tr>
<tr>
<td>2010</td>
<td>48</td>
</tr>
</tbody>
</table>

As of 1 April 2010, 156 minors, 18 of them girls, had been found guilty of breaking the law and received suspended sentences.

• Bishkek city: 22, including 8 girls;
• Chuy Oblast: 29, including 2 girls;
• Issyk-Kul Oblast: 34;
• Naryn Oblast: 14, including 1 girl;
• Osh Oblast: 26, including 4 girls;
• Osh city: 1;
• Jalal-Abad Oblast: 23, including 3 girls;
• Batken Oblast: 5;
• Talas Oblast: 2.

2. Children deprived of their liberty, including any form of detention, imprisonment or placement in custodial settings (art. 37 (b), (c), (d))

151. International rules concerning the treatment of prisoners and the United Nations standard minimum rules for the administration of juvenile justice (the Beijing Rules) cannot practically be fully implemented due to the lack of financial resources needed for the upkeep of convicted juveniles or those remanded in custody. The country has adopted a number of laws and regulations in this regard: the State programme to fight crime for 2006-2007 (government decision No. 132 of 28 February 2006); the Concept for reforming the penal system until 2010 (government decision No. 833 of 9 December 2002); Ministry of Education and Science order No. 619/1 of 14 September 2005 on preventing juvenile delinquency and child neglect among school pupils. Practical steps have been taken to improve the upkeep of young offenders and the use of alternative measures. These include the segregation of girls (around 20 in number) from women in women’s penal colony No. 2 and the creation of separate zones for boys incarcerated for the first time. Educational initiatives are being developed, as are release preparation programmes and social assistance schemes for juvenile offenders. Much work is being done to obtain off-budget and grant funds from international and other organizations with a view to moving ahead with programmes and projects geared towards improving the living conditions, health care and education of minors.

152. Juvenile correctional facility No. 14, a detention centre for boys in the village of Voznesenovka, has implemented the following projects:

• “Re-socialization of convicted juveniles in places of confinement” (2007-2008), supported by the Public Foundation Legal Clinic Adilet: library refurbished, five different types of clubs set up, stationery, two computers and sports equipment (table-tennis table, footballs and kit) procured. Club activities were conducted once a week; educational and sports components implemented in accordance with a fixed timetable.

• “Support for basic human rights in juvenile correctional facility No. 14 in the village of Voznesenovka (Kyrgyzstan)”, 20 December 2006-2 December 2007, implemented under a co-operation agreement, dated 24 April 2007, between OSCE and the Ministry of Justice: inmates and institution provided with clothing and material resources, including 150 winter jackets, boiler suits, winter boots and training shoes, 300 t-shirts, underpants, socks and vests, hygiene agents and instruments (soap, shampoo, washing powder, toothbrushes, washing-up liquid), 150 bed linen sets, one washing machine, one industrial refrigerator, one second-hand computer. Inmates were examined by a dermatovenerologist and urologist and treated for sexually transmitted diseases (96 consultations, 295 cases of illness). OSCE also proposed taking facility No. 14 under its patronage.

• “Promotion of justice and the rule of law for juveniles deprived of their liberty”, 2007-2009, implemented under a co-operation agreement between the Ministry of Justice, OSCE and the Public Foundation Egalitee: institution inmates and staff were given regular access to legal aid and counseling, psychological and social support, and the services of a dermatovenerologist. Personnel underwent training and guidance manuals were produced. Materials were regularly acquired and given to inmates for independent work in their spare time; the electrical wiring of juvenile correctional facility No. 14’s pre-trail detention ward was repaired and medicines
and bedding items (matresses) acquired; all inmates and some staff members underwent ultrasound scanning; two computers and a printer were donated in the form of humanitarian assistance.

- “Preventing the spread of HIV/AIDS among prisoners by creating social support services in correctional facilities and pre-trail detention centres of the Ministry of Justice”, 2007-2010, implemented under a memorandum of co-operation between GRM International Ltd/Soros Foundation-Kyrgyzstan and the Ministry of Justice, signed on 19 June 2006, as part of harm reduction programmes operated within the penal system. The project is being conducted in collaboration with the Harm Reduction Network NGO Association and supports the Social Bureau for psychological, legal and social assistance to young offenders re-entering the community.

- “Children in conflict with the law”, launched in January 2007 as part of a project run by the Generation Support Centre: in addition to juvenile correctional facility No. 14, work was carried out at penal colony No. 2 (from time to time work with girls was omitted if none were being held there). A programme entitled “Leaver” was introduced at facility No. 14 for young offenders re-entering the community; a football match was held between inmates and Turbaza, a professional team; 160 footballs were provided for the facility; inmates were examined by a dermatovenerologist; a parent conference was held; building materials were provided to repair living quarters; a kickboxing master class was organized to coincide with Children’s Day with the participation of the Hermes-Profi sports club and children received souvenirs and sweets; a meeting was held with the board of guardians, which is tasked with solving problems faced by the facility and its inmates and coordinating the work of local/international organizations assisting the facility; applications were filed with the Passport and Visa Department for passports to be issued to inmates.

- Under a co-operation agreement between international charity EveryChild Kyrgyzstan and the Ministry of Justice (2 February 2009) for humanitarian assistance to be provided to facility No. 14, EveryChild supplied the institution with winter clothing and underwear, and 120 items of headwear and gloves, as well as hygiene accessories and basic necessities for 120 inmates and 55 tonnes of coal.

- Under an agreement between the Ministry of Justice, the Ministry of Health and the International Committee of the Red Cross approved by Government Order No. 136 of 28 March 2006 and signed on 3 April 2006, maintenance and repair work was carried out at a number of facilities, including No. 14; medicines were provided; office and medical furniture acquired and humanitarian assistance rendered.

- Under a protocol of mutual understanding and co-operation concluded on 1 June 2008 between the Ministry of Justice, the Supreme Court and the Government-affiliated State Agency for Physical Culture and Sport, Youth Affairs and Child Protection and UNICEF aimed at refocusing the country’s juvenile justice system on rehabilitation based on social security, rather than punishment, in 2008-2009 at facility No. 2, a women’s penal colony with young offenders, a segregated area was created for girls, repair and construction work was carried out and necessary equipment acquired.

153. According to NGOs, however, most young offenders aged 14 and over are given custodial sentences, while other, alternative, forms of punishment are virtually non-existent.

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85 Youth Human Rights Group, the Child Protection Centre, Youth Rights Protection Group, NGO Network for Child Rights, Children of Tien-Shan, Children in Danger, the Child
Data compiled by the Justice Department of the Ministry of Justice show that in 2004 65.2 per cent of young offenders were sentenced to imprisonment, and most of these to terms ranging from three to five years. In addition, this figure does not include children under 14, given that under Kyrgyz law minors under this age are not held criminally responsible. Be that as it may, a child placed in the Belovodskoye school for children with special educational needs is effectively deprived of his liberty. In Kyrgyzstan boys (aged 11-14) who break the law are sent to the Belovodskoye special school, an institution that bears all the hallmarks of a prison, since children there are not permitted to leave of their own free will and re-join their families, and their lives and movements are strictly regimented by the administration and supervised by personnel. Boys are sent there by commissions on children’s affairs, which are government agencies. The procedures applied by CCA when considering cases do not meet fair-trial standards and are not prescribed by law but determined by a statutory instrument which does not stipulate the presence of a lawyer, the right to be presumed innocent, the right to be informed of charges and the right against self-incrimination.

3. The sentencing of juveniles, in particular the prohibition of capital punishment and life imprisonment (art. 37 (a))

154. Pursuant to domestic legislation on juvenile offenders, minors deprived of liberty may not be subjected to a prison regime. Persons under 18 years of age may not be sentenced to more than ten years’ deprivation of liberty and are subject to special rules regarding parole. With a view to making penal sanctions more humane, plans are underway to use alternative forms of punishment. The death penalty is not applied to minors and the penalty of life imprisonment does not exist in Kyrgyz criminal law.

4. Physical and psychological recovery and social reintegration (art. 39)

155. Various forms and methods of social, medical and other work to promote physical and psychological recovery and social reintegration as independent areas of social protection for children have acquired special significance in recent years because of the country’s difficult social and economic circumstances and other problems. Legislation with regard to, above all, refugees, as well as that concerning the social protection of categories of children including orphans, children left without parental care and disabled children, reflects a comprehensive approach to those difficulties and problems.

C. Children in situations of exploitation, including their physical and psychological recovery and social reintegration

1. Economic exploitation, including child labour (art. 32)

156. Government decision No. 20 of 22 January 2008 approved a Programme of Action of Social Partners to Eliminate the Worst Forms of Child Labour in the Kyrgyz Republic for 2008-2011, as well as a matrix of actions (hereinafter, the programme) for committing

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88 No. 285, 10 June 2008.
funds to these objectives. The programme specifies the legislative and administrative measures to be applied in preventing and eradicating child labour, the main forms of which, under the programme, are trafficking, transportation, loading and unloading cargo, waste scavenging, menial work, begging, shoe shining and repairing, car washing, farm labour and prostitution. The programme ignores the compulsory and hazardous work carried out by children in schools, care homes and vocational institutions with the knowledge of State agencies and on the instructions of the local authorities throughout the entire country. The programme indicates that child labour is essentially the product of the positive view taken of it by the population and the prevalent conviction that child labour is a normal phenomenon. A survey conducted by the International Labour Organization in 2007 revealed that 592,000 out of 672,000 children were engaged in work incommensurate with their age and development: in other words, 88.1 per cent of the total number of working children and 40.3 per cent of all children aged 5-17; 57.9 per cent of working children are boys. With a view to establishing international figures, the child labour rate is also based on ILO definition criteria, according to which the percentage of children engaged in work is 30.7 per cent, or 450,000 children aged 5-17. Regardless of whether this figure was arrived at on the basis of national or international criteria, child labour in Kyrgyzstan is fairly high. The vast majority of children (95 per cent) carry out unpaid domestic work, with most (76.4 per cent) of them engaged in household production, including farming (19.7 per cent).

Table 14
Proportion of child workers by form of economic activity (%)

<table>
<thead>
<tr>
<th>Economic Activity</th>
<th>Total</th>
<th>Boys</th>
<th>Girls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farming, hunting and forestry</td>
<td>19.65</td>
<td>25.72</td>
<td>11.31</td>
</tr>
<tr>
<td>Housekeeping</td>
<td>76.38</td>
<td>69.99</td>
<td>85.17</td>
</tr>
<tr>
<td>Trade</td>
<td>1.92</td>
<td>2.07</td>
<td>1.72</td>
</tr>
<tr>
<td>Other</td>
<td>2.05</td>
<td>2.22</td>
<td>1.80</td>
</tr>
<tr>
<td><strong>Total, 1 000s</strong></td>
<td>592</td>
<td>343</td>
<td>249</td>
</tr>
</tbody>
</table>

Since 2005 efforts to eliminate the worse forms of child labour have been underpinned by ILO’s International Programme on the Elimination of Child Labour, which is implemented at the national level by local agencies with a view to boosting the potential of the country’s organizations and institutions. Under the programme a series of measures have been put in place geared towards enhancing the technical skills and organizational resources of State bodies, the organization of workers and employers, NGOs and other partners involved in developing and operating programmes and initiatives designed to prevent exploitation and protect children engaged in the worst forms of child labour, free them from exploitation and rehabilitate and integrate them into society. Notable achievements and progress in implementing this article of the Convention include:

- A review of existing legislation and mechanisms for enforcing the law regarding the worst forms of child labour in accordance with ILO conventions 138 and 182 (2008). Pursuant to the recommendations proposed as a result of the survey, the Ministry of Labour, Employment and Migration, in partnership with ILO, is preparing a list of dangerous jobs in which children under 18 may not be engaged (further to government decision No. 314).

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89 Working Children in Kyrgyzstan: Results of the 2007 Labour Survey, National Statistical Committee, ILO.

• Enhancement of the performance potential and awareness of over 650 specialists regarding the problem of child labour.

• Coordinated interaction with employer and worker organizations involving united efforts to implement measures aimed at preventing and eradicating child labour.

• As a result of joint efforts by national partners and ILO, 2,478 children and 191 families received direct assistance in the form of medical, educational and legal services, food and school paraphernalia and 425 children were rescued or prevented from engagement in the worst forms of child labour through providing them with education or upgrading their professional skills.

• The Ministry of Labour, Employment and Migration and the International Labour Organization are working together to implement a national child labour monitoring system.

• The period under review saw the testing of a model for rescuing, preventing and rehabilitating children involved in the worst forms of child labour by providing alternative forms of education, including vocational training for children and adults alike.

• To rehabilitate children working at the Kara-Suu market in Osh Oblast, Kara-Suu District’s governmental administration, assisted by ILO and EveryChild, opened the Kelechek Day Centre with the aim of preventing children from working on the street and rehabilitating those already engaged in this activity. The centre comes under the authority of the district education department and is located at the Babur Secondary School; it has a separate entrance and was thoroughly renovated and provided with the necessary equipped. The centre is currently listed on the balance sheet of the district administration and funded from the local budget. Centre staff conduct outreach activities among working children, distribute informative materials on children’s rights, child labour and the rights of working children. The centre also provides medical, legal and educational services to working children and is the main organization in Kara-Suu engaged in their rehabilitation.

• The Coordination Council on Child Labour Issues, which is tasked with coordinating the State programme to eliminate the worst forms of child labour, has scaled up its activities considerably. Throughout 2008 and 2009, the Council met regularly and closely monitored the implementation of protocol commitments.

• In 2009 the Ministry of Labour, Employment and Migration reviewed the results of a competition for social projects geared towards preventing the worst forms of child labour and the social adaptation of special-needs children. Out of the 42 projects submitted, the competition commission proposed funding for 24, six of which related to child labour.

• The Central Committee of Agro-Industrial Complex Trade Unions continues to move ahead with a project to eradicate child labour in the tobacco sector in the
Ala-Bukin District of Jalal-Abad Oblast and the Nookat District of Osh Oblast with funding from the Swiss Eliminating Child Labour in Tobacco-Growing (ECLT) Foundation. In 2009 280 farming families were granted microcredit totalling 3,360,000 soms (12,000 soms per family at an annualized interest rate of 10 per cent) and 36 mutual-support groups were set up. As a result of the project, 3,500 children in two districts were released from employment in the tobacco sector.

157. The main enactments regulating labour issues, including child labour and the minimum employment age, are:

- Act No. 167 of 1 August 2003 on Labour Protection;
- Act No. 46 of 26 February 2000 on State Youth Policy;

Labour relations are regulated primarily by the Labour Code, which stipulates the earliest age at which a person may enter into employment, forbids the use of probationary periods for persons under 18, prescribes mandatory medical examinations for minor employees, shorter working hours, specific limitations and prohibitions in the use of child labour (the length of a daily shift, night work, overtime, restrictions on heavy work and in with harmful or dangerous conditions, etc.). Chapter 23 of the Labour Code covers the specifics involved in regulating work undertaken by individuals under the age of 18. The Labour Protection Act is the cornerstone of the State’s labour protection policies and affirms the right of workers to employment in conditions commensurate with occupational safety and health standards and prohibits the hiring of persons under 18 for heavy work and work in harmful and dangerous conditions (arts. 6 and 8). The Children’s Code emphasizes children’s right to vocational training, employment appropriate to their age, health, general and professional education, as well as stipulating the minimum age at which a child may be employed. The Code bans the worse forms of child labour and lists the types of work for which children may not be hired. That having been said, unlike ILO Convention No. 182, the Code does not define the worst forms of child labour. The Act on the Foundations of State Youth Policy applies to citizens aged 14-28. Pursuant to the Act, the State’s youth policy guarantees young people vocational guidance and training, help with finding employment and career development, health and healthy life styles among young people, health care and the promotion of healthy living, as well as access to youth social services. Under the Act, the State’s efforts to help young people find employment are focused primarily on first-time job seekers over the age of 16 who have left educational institutions, as well as on minors over 14 wishing to work during periods away from their studies.

158. Pursuant to article 32 of the Constitution (2007), every Kyrgyz citizen has a right to education. Under paragraph 2 of the same article, basic education is compulsory and free of charge. Article 32 also stipulates that the State acknowledges that secondary education, unlike basic education is not mandatory. Citizens are, however, entitled to receive free general secondary education at State and municipal educational institutions. Furthermore, the State guarantees access to vocational, secondary vocational and higher education for all in accordance with their ability. The Education Act, No. 92 of 30 April 2003, emphasises that compulsory and free primary and basic education are central principles of the State’s education policy, as well as free general secondary education in State and municipal schools (art. 4 of the Act). The Labour Code limits working hours:
• For workers aged 14-16 to a maximum 24 hours a week;
• For workers aged 16-18 to a maximum 36 hours a week (art. 91).

In addition, pursuant to article 95 of the Labour Code, the working day (shift) may not exceed:

• 5 hours for workers aged 14-16;
• 7 hours for workers aged 16-18;
• 2.5 hours for workers aged 14-16 and 3.5 hours for workers aged 16-18 who are pupils at general education institutions (schools) or initial and intermediate vocational training establishments and combine work with study during the school year.

159. Pursuant to article 218 of the Labour Code, it is illegal to employ persons under the age of 18 for heavy work and work in harmful and dangerous conditions. The list of sectors, professions and forms of employment with difficult and harmful work conditions in which it is illegal to hire persons under 18 is appended to government decision No. 314 of 2 July 2001. This document contains a long list of sectors, professions and forms of employment where it is illegal to hire persons under 18 (heavy and light industry, farming, the food industry). In accordance with the decision, graduates of initial and intermediate vocational training institutions who have spent at least three years learning professions included in the list and are still under 18 are permitted to work in these professions no more than four hours a day under the guidance of experienced work mentors on condition that occupational safety and health standards are rigorously adhered to in the workplace. Pursuant to government decision No. 239 of 17 June 2005, amendments were made to decision No. 314 of 2 July 2001 in order to include in the list jobs that involve handling drug and toxic preparations, trading and storing wines, spirits, distilled beverages and beer, trading and transportation of tobacco products, gambling and betting. The Children’s Code also prohibits the use of child labour in harmful or dangerous conditions and underground, as well as in forms of employment that could damage a child’s health and moral development (the gambling industry, work in nightclubs and cabarets, the production, transportation and trade of alcoholic beverages, tobacco goods, drug and toxic preparations). The Government has produced a report on the measures taken to implement the provisions of ILO Convention No. 138 in the period 1 January-31 December 2005. The report does not, however, specify the forms of employment or other types of work that prove particularly problematic when it comes to implementing the provisions and which could, therefore, be regarded as not falling within the scope of Convention No. 138. As part of efforts to implement the State programme to eliminate the worst forms of child labour, the Ministry of Internal Affairs, working in collaboration with the relevant ministries, departments and NGOs, uncovered 855 cases of minor employment in 2008 and 983 in 2009. Child labour is driven primarily by material hardship in families and by the population’s relative ignorance of its consequences. During the spring and summer, children in rural areas are required to work in fields and on allotments owned by their families or are engaged as hired labourers on land belonging to other people. A major cause for concern is the employment of children in abandoned quarries and mines and at markets where they have to carry heavy loads and sell alcohol and tobacco. In addition, employers and parents fail to observe the basic principles of labour law and the abuse of child labour is rampant in private and commercial organizations. During a ten-month period in 2009 public prosecution offices uncovered 184 cases of unlawful use of child labour. Following inquiries, one legislative act was contested as illegal, 16 corrective action reports and 28 corrective action orders were initiated, 161 people were cautioned, 13 administrative actions and one disciplinary action were instigated, ten people were subject to disciplinary action, five to administrative action, and two criminal cases were instigated. In April 2009 a
minor, born 1992, named S. Kolosov, working without an employment contract, protective clothing or safety training in a polyethylene granule production facility (17, Pamir Tolyatti Street, Kara-Balta) owned by B. Shamuzov and L. Lo, caught his hand in a granulator machine, resulting in the amputation of four fingers from his right hand and serious disablement. Consequently, on 16 May 2009 Chuy Oblast procurator’s office instigated criminal proceedings under article 142, part 2 of the Criminal Code (violation of occupational safety and health regulations). However, on 31 July 2009 these proceedings were dropped by decision of Jaiyl district court pursuant to article 28, part 1, paragraph 12 of the code of criminal procedure after the case was settled by conciliation between the parties.

2. Drug abuse (art. 33)

   160. In 2008 147 adolescent drug users and 173 adolescent alcoholics were registered. Although the actual number of such children is considerably higher, particularly in the south of the country, no official figures exist. Where children are concerned, preventive and awareness activities are absolutely crucial. Media outlets and the independent children’s newspaper Aidanek are running a campaign aimed at preventing drug abuse and alcoholism, while youth and student associations have teamed up with international organizations to conduct a major anti-drug and alcohol campaign. Nevertheless, the country has no proper monitoring and registration system, nor is there a modern network of treatment and rehabilitation facilities for children suffering from alcohol and drug addiction. In the provinces social workers are attempting, on a one-to-one basis, to prevent minors engaging in the worst forms of child labour. 1,419 seminaries and round tables have been conducted with the participation of parents, children and local communities on eliminating the worse forms of child labour. As part of monitoring exercises to combat child drug abuse, public prosecution offices have carried out 19 checks, resulting in 22 reports and four directives. With support from ILO, in July and August of 2007 the Positive Help NGO assessed the involvement of children in the illegal drug trade in Kyrgyzstan’s main drug trafficking regions (Batken, Osh, Jalal-Abad and Chuy oblasts and Bishkek).90 While the resulting report does not convey the full scale of children’s involvement in drug trafficking, it nevertheless helps to pinpoint the function and character of their participation in this form of child exploitation. According to the report, children are being increasingly employed in drug-related crime on account of the substantial earnings to be made and the absence of heavy physical activity (unlike, for example, in farming). In the regions covered by the study alone, 500 children are involved in drug-related crime, 350 of whom are themselves drug addicts and solvent abusers. Children from poor families who are drawn into this type of activity are even more vulnerable, given that dealing and/or transporting drugs tends to result in their becoming users (the study indicates that 70 per cent of children are also substance abusers). This fact heightens the risk of children contracting HIV/AIDS and other infectious diseases. The exploitation of children in this way enables drug traffickers to reap huge profits and greatly damages the psychological and physical health of the country’s young, thus jeopardizing the country’s gene pool. Following the publication of the report a working group was set up composed of relevant organizations and proposals made for amendments and additions to the Criminal Code, the Code on Administrative Responsibility, the Family Code and the Children’s Code.

3. Sexual exploitation and sexual abuse (art. 34)

   161. The Children’s Code (art. 25) prohibits child trafficking, child prostitution and child pornography. Persons guilty of involving children in human trafficking, child prostitution and child pornography, as well as persons using children for sexual purposes and

GEOGRAPHICAL INFORMATION SYSTEMS 

The phenomenon and growing number of children living and working in the street is a serious problem for the country, particularly in the city of Osh.91 Deprived of parental care and authority and roaming the streets in search of food and entertainment, they are a source of emotive public concern. The State sees its role as supporting the family and strengthening it as a social institution and has adopted a number of laws and regulations to safeguard the rights of children in difficult circumstances. “The priority objective of State policy in this area is to ensure that children live, grow and develop without discrimination on any grounds. In this regard, the institutional framework must address children’s needs.” Programmes targeting “children at risk must accord special priority to implementing prevention and rehabilitation measures among children, parents and persons acting in their stead”. Various institutions are being set up to develop alternative forms of child care (adoptive families, foster families, family-style children’s homes, family education groups, etc.) and accommodation facilities are being improved at special State establishments (children’s homes, residential care homes).

163. As part of a DFID-funded project to prevent and rehabilitate children living and working on the street in Osh Oblast, the international charity EveryChild is implementing an intervention to help child street workers. Even timelier is the organization of programmes for children living on the street who have lost contact with their relatives and are alienated, isolated, stigmatised and discriminated against. A study examining the plight of children living on the street in the cities of Osh and Kara-Suu has been conducted with a view to submitting recommendations to local State authorities on the organization of appropriate and effective action.

91 Laura Boone, Study of the Condition of Street Children in the City of Osh and Osh Oblast, EveryChild, 2004, p. 5.
164. The problem of children living and working on the street is a relatively new one for Kyrgyzstan and is the result of social and economic difficulties created during the transition period and the related problems of labour migration, as well as parental drug and alcohol abuse. According to informed sources, the problem is particularly acute in the country’s southern regions. Parents who move away to earn a livelihood or who work for days at a time leave their children unattended and often children are the family’s sole breadwinner, meeting parents’ needs not only for food, but also for alcohol. Children reconcile themselves to such circumstances and see themselves as responsible for the family’s upkeep. The sad stories of these children have been compiled and described by UNICEF and EveryChild. Kyrgyzstan’s street children are a marginalised group because they lack the fundamental components of childhood, such as family, education and health. They are defenceless in a cruel environment and the peculiarities of their way of life render them vulnerable and threaten their psychological, physical and social well-being. Most live in circumstances where their rights are not protected and encounter difficulties in accessing social services. Although street children show self-reliance in many difficult situations, they nevertheless need adult care and the voluntary services provided by State and NGOs (Laura Boone, Study of the Condition of Street Children in the City of Osh and Osh Oblast, EveryChild, 2004, p. 6).

165. According to UNICEF data, the number of children living and working on the street is rising. However, no clear picture exists as to their actual number since there is no official organization responsible for registering them. EveryChild reports that in Osh, a city with a population of 250,000, around 600 children responding to a survey said they had spent time at the regional centre for the adaptation and rehabilitation of minors more than once in 2003. Categories of children living and working on the street include:

- Homeless children: those who spend 24 hours a day on the street unattended;
- Working children: those who spend most of their time working on the street;
- Orphanage children: those who live in orphanages due to (family) problems;
- Children renting accommodation: those who rent space (a bed, room or flat) with relatives, friends or on their own.

In the study conducted by EveryChild referred to above, the first three categories fully coincide, although one group singled out is that of children of internal and external (from Tajikistan and Uzbekistan) migrants, as well as people constituting a group of national minorities of Asian origin who live and beg on the street.

166. Work targeting these types of children consists primarily of heavy-handed and coercive measures (police swoops; placement in children’s institutions; return to the family without attempting to discover why the child ran away or considering changes in his/her status in the household). In the opinion of an international expert (Selina Girinks) who took

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92 Every Child has the Right to a Childhood, UNICEF, Bishkek, 2004.
97 Laura Boone, Study of the Condition of Street Children in the City of Osh and Osh Oblast, EveryChild, 2002, p. 15.
part in some of these swoops, “Swoops are highly ineffective and constitute a crude violation of children’s rights. The children are taken to a centre for the adaptation and rehabilitation of minors where there can be held for an unlimited number of days until the situation is clarified. Children can often come from well-to-do families and come under stress while their identity is being established”. The use of enforcement measures to place children in State children’s institutions creates the image that they are “unfriendly”. It is only in winter that children seek refuge from the cold, even if they find living conditions there unacceptable and intolerable at other times of the year. If children are not given a clear and understandable explanation of these actions, their opinion not taken into account and no attempt is made to encourage them to change their behaviour, such measures inevitably have no effect. Children run away from their home or orphanage again and end up back on the street. According to a study, one boy had run away from care institutions 17 times.

167. Children who live on the street are secretive about the places they stay and cannot reveal the whereabouts of other children. This makes gaining access to a group very difficult and explains why NGOs working with street children are unable to make contact with a specific group. By hiding from the police, children cannot be targeted for preventive measures and do not attend the day centres specially created for them. The chances are that extensive work needs to be done with street children before their trust can be gained and more detailed information gathered. Peer-to-peer training programmes could play an important part in enabling them to acquire life skills.

168. Having no official documents prevents children from obtaining an education and health care. Children’s property rights are not taken into consideration if parents die or a disadvantaged family loses its property. There is no system in place, and children lack the skills required to apply for social and legal support if they suffer domestic violence or if they are denied their right to housing. Little attention is paid to preventing homelessness. NGOs, rural councils, aksakal councils, women’s councils and religious leaders play virtually no part in work to detect and prevent violence against children or in programmes providing care and support for them. There are no centres (facilities) where children can come for child-friendly health care.

169. Children living on the street lag behind their peers in education. Be that as it may, there are no special schools and classes specially adapted for teaching children whose education standards are below those of their peers or for children who have never attended school. There are only part-time schools and no evening schools. Orphanage staff are not required to teach children how to read and write and instead send them to normal schools and vocational training institutions. Indeed, if a child is found to be lagging in his/her standard of education, shows signs of retarded intellectual development resulting from psychological and pedagogical neglect, he/she has next to no chance not only of continuing a course of study, but also of acquiring basic reading and writing skills. It would seem that schools have absolutely no interest in helping such children and reject them, citing formal reasons such as not having any documents. No special programmes have been set up and no effort made to create ways to encourage teachers to help children to gain rudimentary knowledge or to progress to their own age group (this applies to those still attending school). The impression is that children living in dire poverty and suffering social exclusion inevitably experience physical and psychological pressure from all sides: from parents, peers, teachers, the police, employers and the population as a whole. This explains why such children are left with no option but to shun contact with society in favour of terrible conditions, living on the edge of survival but among similar outcasts, where they are not bullied or stigmatised, are permitted to simply hang around, share food, help earn money and be taught how to survive.
170. All assertions on child vagrancy are marked by children’s unanimous desire for a home that is “peaceful and happy”. In other words, what we are able to offer them and what, according to social workers, researchers and children themselves, is considered to be a good environment for them to live in, nevertheless does not suit them. It could well be that such an environment is not “peaceful and happy”. Children who have not been taught the right way of doing things are made to learn in a single day how to “keep in line”, not to wet the bed and to practise proper hygiene, something which they have never previously been taught. It is worth remembering that the nurturing of such skills within a family setting begins at an early age, that they take years to master, require a long period of encouragement and guidance from parents and treatment (frequently unsuccessful) of enuresis and so forth.

171. Meetings with orphanage staff and other specialists working with children have made it clear that the people working in this field are professionals, care about what they do and are concerned for the future of their charges. A number of international organizations are holding training courses for people employed in orphanages, youth liaison services and child adaptation and rehabilitation centres. However, low wages and poor motivation are not conducive to retaining skilled personnel. This is particularly true where youth liaison service personnel are concerned. The people responsible for bringing up children lack the skills and knowledge to communicate successfully with children in the target group and are unable to encourage and care for them properly, which indicates that staff at children institutions are inadequately trained. As part of a project run by the international charity EveryChild, some social workers from the State Agency for Social Welfare have been trained to interact with working children. They could continue their work with street children as well.
Annexes