COMMITTEE ON THE RIGHTS OF THE CHILD

Thirty-third session

SUMMARY RECORD OF THE 870th MEETING

Held at the Palais Wilson, Geneva, on Thursday, 22 May 2003, at 3 p.m.

Chairperson: Mr. DOEK

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

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 6) (continued)

Initial report of Zambia (continued) (CRC/C/11/Add.25; CRC/C/Q/ZMB/1; CRC/C/RESP/33)

1. At the invitation of the Chairperson, Mr. Banda, Ms. Chanda, Mr. Chirwa, Ms. Daka, Ms. Fundafunda, Ms. Haandile, Mr. Kabwe, Ms. Kasaro, Mr. Mutesa, Ms. Nkole, Mr. Nkonde, Ms. Sinjela, Ms. Sinkala and Mr. Zulu (Zambia) took places at the Committee table.

2. The CHAIRPERSON invited the delegation to answer the questions raised by the Committee members concerning general principles, civil rights and freedoms, family environment and alternative care.

3. Mr. ZULU (Zambia) said that the Zambian authorities were doing all they could to publicize the Convention on the Rights of the Child. They were also assisting their partners, including non-governmental organizations (NGOs), to improve their capacity to disseminate information about the Convention. Specific activities included workshops and regular meetings, including an important annual meeting of advocates of children’s rights. The Convention had been translated into the seven main languages spoken in Zambia and disseminated, including in easy-read form. With the help of NGOs and United Nations agencies, government ministries had produced written materials, including posters, with a view to publicizing the Convention. Efforts were taken to include references to children’s rights in political speeches. The media also played a major role. In addition, hundreds of children’s rights clubs had been established in recent years in urban and rural areas. Special days, such as the International Children’s Day of Broadcasting and the Day of the African Child, had become annual events in Zambia. Such events focused nationwide attention on children, who were given an opportunity to express their views.

4. Ms. HAANDILE (Zambia) said that civic clubs had been set up in schools to give children an opportunity to discuss their rights. Special AIDS-prevention clubs had also been set up to alert children and adolescents both in and out of school to the danger of HIV/AIDS. Many children had difficulty in discussing matters of sexuality with their parents and found that school was a better environment.

5. Mr. CHIRWA (Zambia) said that the Termination of Pregnancy Act provided for abortion in specific circumstances. Statistics indicated that illegal abortions, most of which involved teenage mothers, were on the rise. A special post-abortion care programme had been introduced, in order to save mothers’ lives. As a result, about half of the country’s districts had specialized medical facilities for handling abortion-related medical problems. Special programmes were aimed at informing young people, both in and out of school, of ways of preventing unwanted pregnancy. In the past, contraceptives had been supplied to adolescents only if their parents or guardian gave their consent. That rule had been relaxed and young people currently had relatively easy access to contraceptives and related information.
6. While he could not provide any statistics on teenage suicides, he confirmed that most cases seemed to be related to stress at school or at home. Many suicide attempts were related to unwanted pregnancy. Although attempted suicide was an offence in Zambia, medical staff tended to counsel pregnant women who had attempted suicide rather than report them to the authorities. Health services were faced with a major challenge, increasing drug abuse and alcoholism among young people. Those problems were the subject of special programmes and studies. Figures on the extent of drug and alcohol abuse in Zambia would be sent to the Committee as soon as they were available.

7. The CHAIRPERSON asked how the post-abortion care programme addressed the problem of illegal abortions.

8. Mr. CHIRWA (Zambia) said that the programme was primarily intended to save women’s lives. Medical staff treated all women suffering from abortion-related problems, regardless of the cause of the abortion.

9. The CHAIRPERSON said that the Convention was neutral on the issue of abortion. However, in view of the many cases of abortion among young girls, the Committee could not help expressing its concern.

10. Mr. NKONDE (Zambia) said that, although the Zambian Constitution offered protection against torture, torture had not been criminalized. In its concluding observations, the Committee against Torture had recommended in 2001 that Zambia should criminalize torture, and the Government had taken some steps in that direction. He acknowledged that treating cases of torture as cases of assault was not an adequate solution. Ill-treatment of minors by police officers was of major concern and efforts to halt it were being made by the Victim Support Unit, the Police Complaint Authority and the Permanent Human Rights Commission, with the backing of the media, NGOs and civil society.

11. Owing to media pressure, a person who had been found guilty of sexually abusing a minor had been given a 25-year prison sentence. In the past, customary law had allowed parents or guardians to obtain financial compensation from those who had sexually abused their minor children or wards. The Chief Justice had recently ordered that cases involving pregnant minors must be referred to the criminal courts. Although that measure had led to more frequent pleas of not guilty, it at least ensured that those accused of having had sexual relations with minors, particularly when the victim became pregnant, were dealt with under the criminal justice system. The measure also ensured that the rights of victims were taken into account.

12. Mr. KOTRANE said that, according to paragraph 172 of the initial report, children were entitled to Zambian citizenship without discrimination. However, paragraph 173 indicated that the citizenship of a child born in Zambia before 1 April 1986 depended on whether or not the father was an established resident of Zambia at the time of the child’s birth: that suggested gender-based discrimination. He was dissatisfied with the legal provisions on sexual consent set out in paragraph 92 of the report. The age limit of 16 years was too low and the definition of sexual relations as “defilement” was too restrictive. Referring to paragraph 97 of the report, he said that it would be preferable to require courts to hear the testimony of children in administrative and judicial procedures involving minors. He requested an answer to his earlier
question about International Labour Organization (ILO) Convention on Maternity Protection, (No. 183). If Zambia did not intend to ratify the ILO Night Work of Young Persons (Industry) Convention, 1919 (No. 6), he wished to know whether Zambian legislation prohibited the night work of young persons.

13. **Mr. LIWSKI** enquired whether the Government had introduced, or intended to introduce, measures to break the silence that usually surrounded acts of torture or sexual abuse involving minors. Criminalizing torture, for example, would serve little purpose if victims were not encouraged to speak out about the crimes to which they had been subjected.

14. **Mr. NKONDE** (Zambia) said that ILO Convention No. 6 had been ratified by Zambia and incorporated into its law. Zambian legislation prohibited night work of young persons unless it involved family members or was unavoidable owing to emergencies.

15. **Ms. CHANDA** (Zambia) said that the notion of illegitimacy did not exist in Zambia. All children enjoyed the same rights and either parent could register the birth of their child. In view of the many cases of sexual abuse of minors reported and in recognition of the vulnerability of children as witnesses, most cases were now handled by the new juvenile courts. Cases dealt with by local juvenile courts involving serious accusations, such as the defilement of minors especially when the perpetrator was infected with HIV/AIDS, were automatically referred to higher courts that could hand down harsher sentences, including life imprisonment. Whereas, in the past, most cases resulted in acquittal, currently most cases resulted in conviction and severe penalties. The new juvenile court in Lusaka, where she was a magistrate, had a very high level of jurisdiction.

16. **The CHAIRPERSON** asked whether the testimony of child witnesses was videotaped.

17. **Ms. CHANDA** (Zambia) said that, while existing facilities precluded the use of video tapes, the courts that were currently being built would have modern equipment. Cases involving juveniles were always held in camera.

18. **The CHAIRPERSON** said that it was often difficult for a victim to face the perpetrator, and he wondered whether written testimony was admissible. If that was not the case, did a child have to face the perpetrator, and did the perpetrator have the right to insist on such a confrontation?

19. **Ms. CHANDA** (Zambia) said that children were adequately prepared for court proceedings by the probation officer. In most cases, children were considered mature enough to face the perpetrator of the crime for identification purposes. Evidence was not required in the cases where the victims were very young children who did not understand the issue.

20. **Mr. FILALI** asked whether the composition of juvenile courts varied depending on whether the offender was a child or an adult. He wished to know whether criminal records were kept for children and, if so, what was being done to ensure that a child’s criminal record did not hinder his or her reintegration into society.
21. **Mr. CITARELLA** wished to know how many juvenile courts had been established and whether such courts existed in both rural and urban areas. Did magistrates receive proper training and were persons other than judges allowed to take part in decisions in court cases?

22. **Ms. ALUOCH** said that, no matter how well prepared they were, children would always be frightened when confronted with the perpetrator. If costly modern equipment was not available, local material should be used to safeguard the child. For example, in Kenya a wooden box and a mirror were used to enable the child to see the perpetrator but not vice versa.

23. **Ms. CHANDA** (Zambia) said that juvenile courts were composed of a magistrate, prosecutors, probation officers and representatives of an NGO that provided assistance to first-time child offenders charged with minor crimes. Regardless of whether defilement had been committed by an adult or a juvenile, the case would be brought before a juvenile court, which protected not only the rights of offenders but also those of the victims, all of whom were children.

24. The juvenile justice system had been launched as a pilot project in 2001. The Child Justice Forum, composed of human rights and child affairs committees, the Department of Social Welfare and the Ministry of Home Affairs, had been set up under the project. The new system had proved to be efficient, and the Government was currently taking steps to extend it to other parts of the country. Despite the lack of technology needed to ensure the proper implementation of victims’ rights, the Government was taking measures to improve the justice system and to ensure that children were treated appropriately.

25. Children born out of wedlock were protected under the Affiliation and Maintenance Act. Judges could issue affiliation orders, which proved that a person was the father of the child in question, and maintenance orders, after paternity had been proven. However, such orders were not easy to enforce, often because the police did not have the capacity required to follow them up.

26. **Mr. KOTRANE** asked whether a child who had been found and whose parents were not known was entitled to Zambian citizenship and a name.

27. **Mr. NKONDE** (Zambia) said that, in such cases, the child would be presumed to be Zambian and would be given a name.

28. **Ms. NKOLE** (Zambia) said that the Government of Zambia attached great importance to gender issues and had ratified the Convention on the Elimination of All Forms of Discrimination against Women.

29. **Ms. SINKALA** (Zambia) said that the Government had introduced a policy designed to ensure equal school enrolment for boys and girls. For grades 1 to 4, girls’ enrolment was very high. However, it was difficult to keep girls in school after the fourth grade. Some girls who had lost both parents were forced to work and care for their siblings, while others became teenage mothers or married at an early age. The Ministry of Education had launched a number of programmes, such as the Programme for the Advancement of Girls’ Education, in order to
raise public awareness of the importance of girls’ education. Schools taught life skills and provided counselling on HIV/AIDS and other issues. As a result, the HIV/AIDS rate among the 15-19 age group had been falling.

30. Ms. KASARO (Zambia) said that the Government encouraged the community to assume responsibility for orphans. Institutional care was resorted to only when all other options had failed. The Child Care Upgrading Programme had been put in place to monitor childcare institutions and to ensure that children received quality care. Data had been collected on the number of childcare institutions in Zambia and the skills of childcare staff. Minimum standards had been established in agreement with childcare providers. Adoption was another option for orphans. Although, traditionally, orphans were “informally” adopted by the extended family, formal adoption was becoming more popular, particularly because it enabled children to benefit from various allowances. International adoptions were monitored by international social services. A number of drop-in centres, run by NGOs, provided day and residential care for street children. Through their counselling services, NGOs promoted the reintegration of children into families and the community.

31. Ms. SARDENBERG asked whether adoption involved payment.

32. Ms. KASARO (Zambia) said that court fees were the only form of payment involved in the adoption of orphans, unless lawyers were used. The adoption certificate, which was issued after the adoption had been completed, also required payment.

33. The CHAIRPERSON wished to know whether the Government provided any financial support to an extended family that adopted a child and whether the adoptive parents were fully responsible for the adopted child.

34. Ms. KASARO (Zambia) said that the adoptive parents assumed responsibility for the child.

35. Ms. ORTIZ wished to know how effective the integration of street children and institutionalized children into families had been. She wondered whether the Government or NGOs had any information on the number of attempts that had been made to restore family ties as well as on the results of such attempts.

36. Ms. KASARO (Zambia) said that the problems related to street children were aggravated by poverty and HIV/AIDS. As a result, the number of orphans and street children was on the rise. In order to evaluate the environment into which a child was being reintegrated, the receiving family was given counselling and its ability to maintain the child was assessed. The Government and NGOs were taking steps to strengthen the family’s capacity to care for the children and to ensure that street children would be able to return to a normal life.

37. Ms. KHATTAB wondered what steps the Government was taking to help refugees who could not afford to pay school fees.

38. Ms. NKOLE (Zambia) said that, in Zambia, refugees were under the jurisdiction of the Office of the United Nations High Commissioner for Refugees (UNHCR). UNHCR set up refugee camps and the Government provided schools and clinics. To her knowledge, the schools
in the camps were free of charge and camp facilities could even be used by communities living nearby. However, refugees who were not supported by UNHCR could encounter problems. Education was free for all children from the first to the seventh grade.

39. **Mr. CHIRWA** (Zambia) said that the Government had become aware of the increasing risk of domestic and international trafficking of Zambian children. The State party was doing everything it could to raise public awareness in order to prevent that phenomenon.

40. **Ms. NKOLE** (Zambia) said that the birth registration system was defective, especially in rural areas. Parents did not consider registering their child as an obligation, and the capacity of the registration authorities was very limited. The Government was planning to decentralize the registration system in order to make registration offices as accessible as possible.

41. **Mr. NKONDE** (Zambia) said that, in the week preceding 16 June 2003, which was the Day of the African Child, the Government intended to launch a campaign designed to encourage birth registration. To his knowledge, the only fees involved in registration procedures were those for the application forms.

42. **Ms. SARDENBERG** wondered whether the Government had considered setting up mobile registration units.

43. **The CHAIRPERSON** invited the Committee members to ask questions concerning basic health and welfare; education, leisure and cultural activities; and special protection measures.

44. **Ms. Ouedraogo** wondered if any progress had been made since the submission of the initial report in increasing the percentage of mothers who breastfed exclusively for the first six months. Had the Government adopted the International Code of Marketing of Breastmilk Substitutes prepared by the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF)?

45. Given the possibility of mother-to-child transmission of HIV/AIDS, she asked what kind of assistance the Government was providing to mothers who had to choose between breastfeeding or using breast milk substitutes, particularly since such substitutes were costly and mothers might not be able to afford them up to the recommended age.

46. The delegation should provide more information on the activities of the National HIV/AIDS Council. She commended the Government for its success in obtaining young people’s participation in its awareness-raising campaigns and for the results it had obtained.

47. She enquired what kinds of programmes the Government had developed to provide clean drinking water, sanitation and housing, particularly in the light of the large numbers of orphans and refugees. She wished to know what the Government was doing to respect children’s right to an adequate standard of living.

48. According to the report, a large number of children between the ages of 7 and 13 were not enrolled in school, and she wondered what they were doing instead. She was concerned about the high dropout rate and the risk that such children would begin working. She requested details concerning the implementation of the elaborate programme that Zambia had developed with the ILO.
49. She asked whether the expulsions from school mentioned in paragraph 442 of the initial report referred to temporary or permanent expulsions. Such measures failed to deal with the underlying causes of children’s problems at school and did nothing to further the goal of universal education. It would be more constructive to examine the cause of expulsion with the child’s family in order to prevent its recurrence.

50. **Mr. LIWSKI** said that there was a large disparity in health-care coverage between the urban and rural populations, since 99 per cent of the urban and only 50 per cent of the rural population lived less than 5 kilometres from a health centre. He asked whether the Government had any plans to achieve a greater balance in accessibility to health-care services.

51. He wished to know why the infant mortality rate had declined significantly between 2000 and 2002, while the under-5 mortality rate had increased during the same period.

52. He asked for a fuller explanation of the situation of AIDS orphans, which numbered some 600,000 according to a government report. If those figures were correct, they represented a large percentage of the child population and had enormous implications on customs and cultural practices, since they weakened the extended family. He wondered whether the Government had developed a strategy or programme of action to address this particular aspect of the AIDS issue.

53. **Mr. KOTRANE** said that the initial report indicated that the employment of children under the age of 14 was prohibited. That contradicted the ILO Minimum Age Convention, 1973 (No. 138), which Zambia had ratified. The delegation should confirm what the minimum age was for employment. The fact that Zambian legislation allowed children to work in family enterprises when they were below the minimum age was worrying because, even in such situations, there was always the possibility that children could be exploited. She enquired whether the Government had taken any measures, in accordance with ILO Convention No. 138, to monitor children’s work, even within family enterprises.

54. **Mr. AL SHEDDI** said he wished to know how many disabled children there were in Zambia and what services and facilities were available to them. It was difficult to understand why there had been a decrease in expenditure on education over the past 10 years, since the number of pupils had increased. He would welcome additional information on the Government’s plans to provide early education, since it appeared that such education was currently offered only by private schools.

55. The Government should strengthen efforts to impose and enforce compulsory education, given the number of school dropouts. Schoolchildren might benefit from regulations designed to encourage them to stay in school as long as possible. According to the initial report, apart from grades 1 to 4, where local languages were used, the language of instruction in schools was English. He enquired about the level of competence of teachers who taught in English.

56. **Mr. KRAPPmann** wished to know more about school enrolment rates, and how many students actually finished their primary and secondary education. It appeared that there were more teachers dying each year than there were new teachers, and he requested an explanation of how the Government was dealing with that problem.
57. **Ms. Yanghee LEE** requested more information about the way in which the right to education and to special education were reflected in Zambian legislation. She would welcome data concerning the types of disabilities affecting children in Zambia and the efforts that had been made to integrate disabled children into the school system. She was concerned that disabled schoolchildren were required to use the same facilities as other children and that academic performance was being tested on the basis of a national examination devised for mainstream pupils, and not for children with learning difficulties.

58. **Ms. SARDENBERG** asked what measures the Government was taking to provide access to schools for children living in remote areas. She would also like to know what recreational facilities were available to children in Zambia. What was being done to address the problem of children who regressed to illiteracy after having learned to read? She wondered how the problem of teenage pregnancies was being handled by schools. The delegation should clarify whether or not children were required to pay school fees. Lastly, it was important to bear in mind that school was a place to learn as well as to develop. She wondered whether school curricula in Zambia included the teaching of democratic values, human rights and tolerance, as specified by article 29 of the Convention.

59. **Mr. FILALI** said that the media often failed to respect the provisions on reporting proceedings concerning juveniles. The State party should take measures to ensure that the media respected such provisions. It should also establish a code of ethics for journalists and institute disciplinary proceedings for those who contravened it.

60. He wondered whether the importance that the courts attached to parents’ presence at court proceedings involving their children was because parents were responsible for the damages caused by their minor children or because they acted as legal advisers for their children. The Government should enact legislation providing for the compulsory appointment of an attorney to assist children in all cases in which they were charged with an offence, regardless of their parents’ financial situation.

61. He was concerned that children in Zambia could be sentenced to life imprisonment. In his opinion, the Government should reduce the maximum sentence for minors. The delegation should provide more information about children’s right of appeal in Zambian courts, about the protection afforded children in the prison environment. He wished to know whether incarcerated minors were aware of their rights and whether any abuses had been reported.

62. **Ms. TAYLOR** said that the low age of criminal responsibility needed to be reviewed and possibly raised. With regard to pre-trial detention, she wondered how long children could be lawfully detained and how quickly their cases were brought to court. Separate facilities were needed to hold juveniles awaiting trial. She asked whether or not sentencing imposed at the President’s pleasure was constitutional. She wished to know what sort of coordination existed between the prison authorities and the Ministry of Community Development and Social Services regarding reform schools and who monitored the treatment of children in such establishments. Lastly, she asked what kind of rehabilitation programmes existed for juvenile offenders. Zambia should consider requesting technical assistance from the United Kingdom’s Department for International Development or UNICEF, both of which offered very good programmes for children in conflict with the law.
63. Mr. CITARELLA said that he was concerned about a report that street children in Zambia were being sent to national service centres for training. He understood that there was a rule that entitled minors to obtain legal representation and assistance but that it was not enforced owing to a lack of human and financial resources. The delegation should confirm the existence of such a rule and, if there was one, should make efforts to enforce it.

64. Ms. ALUOCH asked whether the Government’s public health campaign posters existed only in English or whether they had been translated into other national languages. Were the posters distributed widely or were they only to be found in Lusaka?

65. Ms. OUEDRAOGO wished to know what measures existed to protect children, particularly girls, from commercial sexual exploitation and child prostitution.

66. Ms. KHATTAB asked whether there was any mechanism to enforce the payment of child maintenance, especially when parents were unemployed or self-employed. She also wished to know whether there were mechanisms to monitor the extent of sexual abuse in Zambia. In view of the feminization of poverty in Zambia, she asked what the Government was doing to assist female heads of household. She wished to know why Zambia had made a reservation to article 13 of the Covenant on Economic, Social and Cultural Rights regarding basic education on the grounds that it would be difficult to implement that article but had not made a reservation to article 28 of the Convention on the Rights of the Child. Lastly, she requested information on any improvements in the provision of basic education, particularly in terms of equity, accessibility and equality.

The meeting was suspended at 5.05 p.m. and resumed at 5.20 p.m.

67. Mr. CHIRWA (Zambia) said that infant mortality and under-five mortality were one of the most important indicators in the health sector. The recent improvements in both indicators, even in the face of HIV/AIDS and natural disasters, could perhaps be explained by the growing number of immunization and vitamin supplementation programmes, which had contributed to the overall immunity and survival of children. The Government had set up a task force to evaluate the programmes and would soon be able to provide up-to-date statistics on the situation.

68. Before the advent of HIV/AIDS, the Government had promoted the exclusive use of breast milk. However, studies had revealed that there was an extremely high risk of transmission of the disease through breastfeeding, and the Government had reconsidered its strategy and had adopted a programme to prevent mother-to-child transmission. All mothers participating in the programme were provided with alternatives to breast milk and given the option to undergo antiretroviral therapy. Most of the provisions of the International Code of Marketing of Breastmilk Substitutes were being implemented in Zambia, even though the Code had not yet been officially adopted. Steps were being taken by the Government to achieve full compliance.

69. Zambia was highly urbanized and health centres had traditionally been clustered in urban areas. Although efforts had been made to extend health facilities to rural areas, the existing infrastructure was unable to meet the needs of Zambia’s sparse and scattered population. In order to address that problem, measures had been taken to guarantee equal access to cost-effective health services as close to the family as possible. Since 1998, approximately 100 rural health posts had been established, refurbished or extended.
70. One of the Government’s priorities in the field of health was to improve the water supply, primarily because most of the diseases affecting the population were water-borne. Special efforts had been made to introduce water points in rural areas and to repair broken pipes in urban areas. A dual approach had been adopted to address the shortcomings in the field of domestic sanitation. The approach involved raising awareness of the need for adequate facilities, and increased efforts to enforce public health laws in all districts. It had already produced some positive results.

71. There were approximately 60,000 orphans in Zambia. However, that figure included what were referred to as “single” and “double” orphans, street children and children being raised by members of their extended family. Further research would, most likely, reveal that the actual number of orphans was much lower.

72. Ms. SINKALA (Zambia) said that she was unable to provide all the statistical information that had been requested. For example, the Ministry of Education had begun to collect data on school completion rates only in 2002. However, she hoped that the information would be included in Zambia’s second periodic report.

73. The school dropout rate in Zambia was high and could be attributed to various factors, particularly endemic poverty, which made it difficult for many families to pay school fees. Most secondary education was provided in boarding schools, which made costs even more prohibitive. Other factors included high levels of teenage pregnancy and the prevalence of malaria and HIV/AIDS among pupils. Furthermore, in order to proceed to the ninth and tenth grades of secondary school, it was necessary to pass an examination. There were fewer places in the upper grades than in the lower ones, and many children who passed the examination still could not continue their education.

74. Children were generally given 14 days to appeal a decision to suspend them from school. If they failed to appear, they risked losing their place in school. While most children who had been suspended were allowed to return to school, they were, as a disciplinary measure, usually accepted only as day pupils.

75. The main language of instruction was English, which was why all teachers had to have a good knowledge of English. Since many children reached seventh grade without knowing how to read or write, the Government had introduced a nationwide “Breakthrough to Literacy” programme at the first-grade level in order to teach children to read and write in a local language. English was introduced gradually at a later stage. So far, the programme had met with great success.

76. Regrettably, between 2000 and 2001, the number of teachers who had died had exceeded the number of newly trained teachers. However, the situation had improved. A new teacher-training course had been introduced, and some 5,000 new teachers had graduated in 2002.

77. A number of programmes had been implemented for children with special educational needs, including a programme to develop a set of diagnostic and screening tools to assess the development of children at the local level. In certain districts, an inclusive approach to schooling had been adopted. Programmes had also been adopted to reduce the distances that children had
to go to get to school. For example, an interactive radio system had been introduced that enabled children in very remote areas to study at home. Almost every community had a school. A programme had also been introduced to encourage school dropouts to continue their education. Since many teenage mothers were unable to find someone to care for their children or were too embarrassed to return to school, a special programme had been introduced to encourage young mothers to return to school.

78. **Mr. KABWE** (Zambia) said that the Government of Zambia had signed a memorandum of understanding with the ILO on the elimination of child labour. Following Zambia’s ratification of the ILO Worst Forms of Child Labour Convention, 1999 (No. 182), steps were being taken to incorporate the provisions of that Convention into national legislation. The provisions of the ILO Minimum Age Convention, 1973 (No. 138) had already been incorporated into national legislation.

79. A number of NGOs had been working with the Government in an effort to reintegrate street children into schools, institutions or society. So far, approximately 1,500 children had benefited from the project. In order to address the problem of child domestic workers, the Government had joined the International Programme on the Elimination of Child Labour and had adopted a national plan of action, one of the aims of which was to withdraw at least 2,400 children from domestic work. A National Steering Committee on Child Labour had been established to monitor the situation. Furthermore, a database on child workers had been created within the Ministry of Labour and Social Security. Other measures included a far-reaching awareness-raising campaign and the organization of workshops. NGOs had been advised on how to handle donor funds. In addition, Zambia had conducted a study in close cooperation with neighbouring countries on the best ways of eliminating the commercial sexual exploitation of children.

80. Zambian legislation did not provide any protection for the large number of children employed in commercial agriculture or domestic work. Efforts were being made to extend labour legislation to cover those sectors. It was hoped that the new legislation would provide all child workers in Zambia with adequate protection.

81. **Ms. CHANDA** (Zambia) said that parents were legally obliged to accompany their children to court and assist them during cross-examinations. All children were informed of their rights and had the right either to give sworn evidence or to remain silent. A legal aid scheme had been created in order to provide legal representation for all juveniles charged with a serious offence. So far, the scheme had met with some success. There were currently no juvenile detention centres in Zambia and all child detainees were held in adult prisons. Although they were always given their own cell, children mixed with adults during the day and at meal times. That situation could prove damaging to the physical and mental development of a child. In order to remedy the situation in the short term, a number of cells for children had been refurbished in three police stations.

82. There was no statutory limit on the length of time a child could be held in pre-trial detention. While the law stipulated that matters should be disposed of within a reasonable time, that length of time was not defined. However, the Penal Code provided that, in cases where the prosecution was not ready to proceed, the child could be released until the hearing. Magistrates could also decide to dismiss a case if witnesses failed to appear without good reason.
83. A number of child rehabilitation programmes existed. Group counselling was provided for juveniles who had committed a first minor offence.

84. **Mr. CHIRWA** (Zambia) said that the contentious issue of sentencing at the President’s pleasure had been brought to the attention of the Constitutional Review Commission for consideration. He welcomed the suggestion to create a code of ethics in order to ensure that the media did not reflect the provisions of the Convention in a negative light. The existence of many political parties had led to a plethora of newspapers representing competing views, and in some cases journalists forgot their responsibilities.

85. **Ms. NKOLE** (Zambia) said that, since the abolition of compulsory national service in Zambia in the late 1980s, the national service centres had been idle. The Government was debating whether or not to send street children to those centres for skills training. There was no question of such children being forced to undergo military training.

86. Investment in recreation had decreased owing partly to the privatization of that sector. However, efforts were being made by the Government to take over certain leisure centres to provide recreational facilities for children.

87. **Ms. OUEDRAOGO** thanked the delegation of Zambia for the highly informative discussion, which had highlighted the positive developments that had taken place since the preparation of the initial report. Most of Zambia’s problems were clearly related to the lack of financial resources. Nevertheless, the Government seemed determined to implement the provisions of the Convention and it had received much support from abroad. She welcomed the efforts to ensure that statutory law took precedence over customary law. The steps taken in the field of health and education were particularly commendable. She welcomed the measures that had been taken to encourage the registration of births and to combat the exploitation of children.

88. Nevertheless, there was a need to harmonize the corpus of laws relating to the rights of the child. Further attention should be given to creating a child rights monitoring mechanism and improving the data collection system. She hoped that the Government would have the financial resources to implement its plans to address the problems of HIV/AIDS and the growing number of orphans. Efforts were also needed to strengthen advisory services for young people in order to reduce the high teenage pregnancy rate. Although some progress had been made in the field of juvenile justice, further improvements were needed.

89. **Ms. NKOLE** (Zambia) said that her Government had drafted a plan for the implementation of the Convention. She was sure that the Committee’s recommendations would prove helpful in that regard.

**The meeting rose at 6.10 p.m.**