COMMITTEE ON THE RIGHTS OF THE CHILD
Forty-third session

SUMMARY RECORD OF THE 1176th MEETING (Room B)
Held at the Palais Wilson, Geneva,
on Monday, 18 September 2006, at 3 p.m.

Chairperson: Ms. ALUOCH

SUMMARY
CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES
(continued)

Second periodic report of Senegal (continued)
The meeting was called to order at 3 p.m.

CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES (agenda item 4) (continued)

Second periodic report of Senegal ((CRC/C/SEN/2); list of issues to be taken up (CRC/C/SEN/Q/2); State party’s written replies to the list of issues to be taken up (CRC/C/SEN/Q/2/Add.1)) (continued)

1.  At the invitation of the Chairperson, the delegation of Senegal resumed their places at the Committee table.

2.  Mr. ZERMATTEN, noting that the adoption statistics provided in the written replies were concerned only with international adoptions, would like additional information on domestic adoptions. In addition, he asked the Senegalese delegation to clarify the meaning of the French term *confiage*, specifying whether the corresponding practice was subject to some legal framework and equivalent to placement in a foster family. In that connection, he would like to know why no data had been provided on the fostering of children.

3.  As regards youth justice, were the examining magistrates appointed to regional youth courts specialized magistrates or were they on a rota? Again, under the planned strengthening of the legal protection of juveniles, did the professionals concerned (social workers, judges, law enforcement personnel, etc.) take common training courses? Finally, noting that of the 574 juveniles held at Fort B in 2004, only 130 had been sentenced to a term of imprisonment without the possibility of parole; he asked whether the figures provided included juveniles placed in provisional detention.

4.  Ms. KHATTAB asked the Senegalese delegation to describe the impact of the conference on education held in 1990 in Dakar on initiatives to improve the quality of the education in the country. In addition, she wanted to know what measures were being taken by the State party to guarantee access to education for vulnerable children and girls.

5.  Noting with satisfaction that 1,700 Senegalese villages had claimed to have eradicated female genital mutilation, Ms. Khattab was concerned to find that in certain villages, the operation was still being practised on all girls without exception. What were the reasons for this failure, and what measures were being taken to encourage those villages to give up the practice?

6.  Ms. SMITH would like to know more about teacher training, teaching methods, curriculum contents and the objectives of education. She would also like to know whether pre-school educational institutions were private or public.

7.  Were orphans cared for by the extended family or a public institution? What became of children whose parents were unable to play their role? Could the Senegalese delegation provide a definition of the concept of a “situation of moral danger” (para. 310 of the report)? She was pleased at the large amount of information on sporting activities, and would like to know whether such activities were likewise organized in rural areas. She asked whether there were children’s libraries and, if so, whether they remained open after school. Finally, she would like to know whether children seeking asylum in Senegal enjoyed the same rights as other children as regards access to health and education.
8. **Mr. PARFITT** asked the Senegalese delegation to give particulars on children lacking parental protection, indicating in particular what resources were currently devoted to them, what the role of the extended family was, and whether Senegal had a *kafala*-type system. What training was given to the personnel of the institutions in which the children were placed? Was corporal punishment prohibited there? And were complaint and inspection mechanisms in place?

9. **Ms. DIOP** (Senegal) said that improvement of the quality of education was one of the priority objectives of the ten-year education and training plan for 2000-2010, which, in particular, emphasized the teaching of national languages, the promotion of trilingualism and vocational training in the *daaras*, the evaluation of learning, science and technology teaching, literacy campaigns and basic education, religious and Franco-Arabic teaching, the reduction of the number of repeating students and dropouts, as well as initial and continuing teacher training. Under that plan, 2.3 million textbooks had been distributed free of charge in schools.

10. With respect to the fact that only 46% of teachers held a teaching diploma, Ms. Diop explained that beginning in 2000, the Government had chosen to recruit 3,500 persons to meet teaching staff requirements as quickly as possible, so that the greatest possible number of children would have access to school. The recruits, who were required to hold a certificate of competence or an elementary certificate of competence in order to teach at the elementary level, were for the most part students that had not completed their university studies. Thus, they had a good basic level and, after six months’ teacher training and a few years of practice, they earned their education degrees and were able to enter the public service.

11. The rate of child registration at birth had clearly improved, from 60.9% in 2000 to 78.5% in 2005. In June 2005, a study had identified the zones with the lowest registration rates. A national technical committee regularly organized campaigns to promote newborn registration and departmental birth registration committees. Further, under a child registration initiative launched by the office of the President of the Republic, a joint mission with UNICEF had been organized in the Mauritanian refugee camps in the north of the country, to have local authorities register all children born within Senegal and ensure that they had the same rights as Senegalese children. Finally, each child was assigned a godmother whose responsibility it was to have the child vaccinated and enrolled in school and, if a girl, to see that she did not drop out.

12. **Mr. FILALI** would like to know whether teachers’ certificates of competence or elementary certificates of competence were obtained before or after the bachelor’s degree and whether persons lacking a bachelor’s degree could be recruited as teachers and certified permanent. He asked also whether teachers already on the job had access to retraining programmes. Finally, perhaps the Senegalese delegation could indicate whether children born out of wedlock were registered at birth.

13. **Ms. KHATTAB** would like to know what measures were being taken to encourage students to take an active role in courses and to promote girls’ school enrolment.

14. **The CHAIRPERSON**, referring to paragraph 124 of the report, asked for particulars on the programmes intended to enhance children’s enrolment rate.
15. Ms. DIOP (Senegal) said that to obtain the elementary certificate of competence the candidate must hold a certificate of secondary education (BEPC); to obtain the certificate of competence he or she must hold a bachelor’s degree. Though not all volunteers recruited to make up the shortfall in teaching staff had a bachelor’s degree, they followed a strict training programme and were closely monitored by qualified trainers, so that at the end of their training they did have the required qualifications.

16. Mr. BOYE (Senegal) noted, with respect to teacher training, that the authorities’ determination to provide all children with access to education in no way detracted from their obligation to provide quality teaching. Indeed, because he himself had taken teacher training, he was in a position to state that the degree was not easily obtained and that students were under the supervision of instructors and inspectors holding master’s degrees. As regards children’s participation, teachers endeavoured to ensure that students were the artisans of their own education.

17. Mr. LO (Senegal) said that the Conference on Education held in Dakar in 1990 had resulted in the development of the ten-year education and training plan, whose execution was regularly evaluated by the development partners. That plan, among other measures, had been responsible for the increase in the enrolment rate. With regard to active participation in courses, a healthy spirit of emulation was growing up among students, as prizes and scholarships were awarded every year to the most deserving.

18. There were both private and public pre-school educational institutions. Among public establishments, one project that deserved mention was the one launched by the President of the Republic, the Case des tout petits [kindergarten], which was devoted to all aspects of child development and had been hailed by UNESCO. Moreover, there were children’s libraries in various places, including schools, the Cases des tout petits, and town halls.

19. As regards children not attending school, the Ministry of Technical Education and Vocational Training had implemented a training and job integration program as well as a literacy program for school dropouts.

20. Ms. DIOP (Senegal) explained that a Children’s Parliament had been established in line with the Committee’s recommendation, with representation at the departmental, regional and national levels. Thus, children had had the opportunity to participate in three National Assembly sessions and to speak to members of the National Assembly about problems of concern to them.

21. In colleges and high schools there were socioeducational forums in which children could give their opinion on the establishment’s operations. Their concerns were then relayed to school officials.

22. Mr. FILALI asked whether children could participate in the development of school bylaws, to help enhance the life of the school, and whether they had the right to challenge any penalties they might incur.

23. Mr. LO (Senegal) explained that the socioeducational forums were structures that brought together all students and had a governing board whose members were elected by the children. That board took part, as a full member, in all decision making concerning the life of the school. It also had the responsibility of representing students who came up before the disciplinary committee.
24. Ms. DIOP (Senegal) said that the responsibility to publicize the Convention on the Rights of the Child was primarily the responsibility of the Department for the Protection and Promotion of Children’s Rights. Every year, Senegal celebrated National Children’s Week, whose goal was to sensitize the general public, as well as civil society organizations and development partners, to the various children’s issues. The theme of the Week was chosen each year by the National Committee for Children. The media had also been asked to help raise public awareness of the Convention. In addition, the Government had developed a guide for the media to help them deal with children’s issues more effectively.

25. During the period following its ratification of the Convention, Senegal had endeavoured to make it more widely known, in particular by translating it into several national languages. That had been followed by the implementation phase, first through a National Plan of Action, then by means of specific sectoral plans of action.

26. The Government, which could not go it alone in implementing the Convention, had enlisted the help of community partners for that purpose, and had networked them.

27. Mr. LO (Senegal) added that the networking had been made possible by the cooperation of members of the National Assembly, who had themselves set up a very dynamic network of parliamentarians that was contributing to the implementation of the Convention and the protection and promotion of the rights of the child. Each of the last two or three years, they had invited the Children’s Parliament and ministers with responsibility for children’s issues to discuss various problems in the National Assembly.

28. Mr. GUEYE (Senegal) explained that every month follow-up meetings were held at the Ministry of Health to discuss health problems and make recommendations. Various surveys, including a demographic and health survey (EDS), had been conducted to gather data. Further, a program had been launched by UNICEF in cooperation with the Senegalese Government to collect detailed data every five years. The Government was now striving to set up an integrated, centralized database and was cooperating with UNICEF on the creation of a national data gathering system and the development of a Web site to distribute the data.

29. There had formerly been an interministerial committee to follow up the overall objectives. That Committee, which used data from surveys, follow-ups and field reports to give direction to programmes, had monitored the situation up until 2001. Because of the ongoing reforms, that mechanism had been suspended, but the ministry responsible for children’s issues had been asked to take over its mandate with respect to children’s rights indicators.

30. Mr. LIWSKI thought that, even though efforts had been made to bring down the infant mortality rate, it remained high. He asked what the major causes of that mortality were, and whether the downward trend was seen all over the country or only in certain regions where health facilities were better.

31. Mr. GUEYE (Senegal) said that the rate of infant and juvenile mortality had fallen from 70% in 2001 to 61% in 2005 and that studies had been undertaken to try to understand the causes of infant mortality. There were many such causes: diseases, infections, diarrhoea, malaria, food taboos, lack of access to health services, etc.
Moreover, a study had been done in conjunction with UNICEF on unequal access to medical structures.

32. Today, the downward trend was continuing, even though there were still regional disparities, in particular between the capital and outlying areas, which were less well endowed with health facilities. Major programmes such as P 10—the ten-year health development programme, whose mandate it was, in particular, to reduce infant and juvenile mortality and maternal mortality—had been developed to smooth out such inequalities. New structures had been set up, staff recruited and budgets tightened up.

33. Mr. LO (Senegal) said that enormous efforts had been made to develop health infrastructure in the more remote regions, to assign staff and financial resources to them, and so to reduce inequalities. Just in the last few days, for example, the Minister of Health had recruited 120 nurses so as to reopen health stations that had closed for lack of personnel.

34. Mr. LIWSKI wanted to know whether the new strategies to reduce mortality in more disadvantaged areas were still getting local residents involved and whether programmes for oral rehydration therapy, water treatment and extension of the period of breastfeeding, which were very effective and inexpensive, were still being pursued.

35. Mr. GUEYE (Senegal) explained that the health development programme was still taking a community approach, which was producing good results. As for primary health care, the Government had developed a community model that was based on local people’s financial participation, the goal being to reduce health care costs.

36. There was also a community nutrition programme, based on local people’s participation, which sought to reduce malnutrition by encouraging the adoption of good food habits and of breastfeeding. The results achieved were very satisfactory.

37. In parallel with that, a survival project had been implemented by UNICEF in the remote regions in the south of the country to bring down the mortality rate. Finally, an anti-diarrhoea strategy based on community participation had been developed. Whether in terms of funding or local people’s acceptance of the initiatives, community participation was essential to the success of mortality reduction programmes.

38. Mr. LO (Senegal) added that all programmes—vaccination, vitamin A distribution, oral rehydration, or the anti-diarrhoea campaign—were being implemented at the community level through a door-to-door strategy that depended on volunteers. Moreover, communities had health committees through which they participated in the implementation of health policy. Those committees, made up of members elected by women’s and young people’s associations and by local authorities, were cooperating with physicians to manage services, grant subsidies for some treatments, and facilitate access to all types of health care.

39. Mr. GUEYE (Senegal) gave specifics on AIDS-related mortality indicators. He noted that women were being screened in greater numbers than men (86.6% against 82%) and that that difference was reflected in HIV status. In general, the incidence of HIV positivity was low (0.7%), though much higher rates were recorded in certain remote areas.
40. As regards prenatal care, 92.9% of the women concerned had access to qualified medical personnel, and regional disparities in that regard were slight.

41. Mr. LIWSKI wanted details on how the health system was funded by the local population.

42. Mr. GUEYE (Senegal) explained that the system was based on the Bamako initiative, which was a national strategy to cut the cost of medication to benefit the poorest. There was also a mutualization plan whereby the poorest were given access to health services. To receive care, people paid a modest user fee, the proceeds whereof helped finance the health structures. That financial contribution was managed by the community itself.

43. Mr. FILALI asked whether the user fee was only for the most disadvantaged and what conditions had to be met to receive aid.

44. Mr. LO (Senegal) explained that a financial contribution was required wherever possible. The Ministry of the Family, Social Work and Social Development had signed conventions with hospitals so that the poorest would receive care free of charge. Further, measures had been taken to facilitate the treatment of certain serious chronic diseases. Thus, AIDS sufferers were treated free of charge, and diabetics’ care was 90% subsidized. Pregnant women too had their childbirth costs fully subsidized and recently persons 60 years of age and over had begun to receive free care.

45. Mr. LIWSKI asked whether the care of infants (up to the age of 2) was also fully subsidized.

46. Mr. GUEYE (Senegal) said that in addition to the overall set of measures, other health services had been implemented, often at the community level: specific enhancement programmes that assisted disadvantaged groups by providing them with free services. Thus, a nutrition program for pregnant women and children had been set up, together with a program to monitor infants’ growth and, if necessary, to distribute food supplements.

47. The CHAIRPERSON would like to know whether the State party had, like many countries of sub-Saharan Africa, been faced with the problem of child heads of families, and if so, how it managed to assist these families.

48. Ms. DIOP (Senegal) replied that it was exceedingly rare for a child to be the head of a family. Children were considered persons to be protected. If the parents had died or were absent, the children were generally entrusted to neighbours or members of the extended family. Such “confiage” was distinctly more common than formal adoption; hence, the report contains no information on domestic adoption.

49. Mr. FILALI was under the impression that confiage was not subject to any administrative or judicial regularization and was wondering whether it was a viable practice in view of the changes now affecting Senegalese society.

50. Mr. LO (Senegal) confirmed that confiage was generally purely informal. It was an age-old custom, and one that remained firmly anchored and was considered positive by the Senegalese regardless of the change in mentalities. It was true that in a few cases children that had been entrusted to unscrupulous marabouts had been forced into beggary or even fallen victim to trafficking. The authorities would definitely be reflecting on how to administer confiage so as to avoid abuses.
Ms. NDIAYE DIAKHATE (Senegal) said that juvenile justice was based on the principle of the primacy of educational measures over repressive ones. As a result, judges focused more on juveniles’ personality than the seriousness of the offences committed, and the number of juveniles in detention was far lower than the number being monitored. Implementation of educational measures was the responsibility of the correctional education and social protection office, which had a number of social rehabilitation and re-education centres. Imposition of such measures, on the other hand, was the responsibility of the children’s courts. The judges on those courts were not specialized, that is, their duties were the same as in other courts. It was possible that the Government would, in future, opt for specialization.

Magistrates took courses on the rights of the child at the judicial training centre. Police officers and constables also received training on the rights of the child, but at their own training institutes. Only a small number of training seminars had been organized, in conjunction with international experts, bringing together all the above officials.

Mr. ZERMATTEN said that the youth justice system was a whole whose parts included not just magistrates, but also police officers and constables and social workers. Emphasizing that shared traineeships enabled the various stakeholders to get to know each other, he urged the authorities to decompartmentalize their training initiatives. He also noted that the corps of social workers was threatened with extinction (para. 129 of the report)? He feared that because there was insufficient personnel to follow up educational measures, imprisonment would become the rule.

Ms. NDIAYE DIAKHATE (Senegal) said that the number of childcare specialists was remaining stable. These, however, were the ones who attended trials and were the main contacts for juveniles in trouble with the law.

Mr. LO (Senegal) added that the statement in paragraph 129 should not be taken too literally. It could not be denied that the workforce available to the ministries of health, the family and justice had dropped very considerably, but a major recruitment effort had been made over the past three years, so that following its decline the number of social workers was once again on the increase.

Mr. FILALI asked whether the childcare specialists were officials of the Ministry of Justice. If not, their connection to judicial officials ought to be clarified.

Ms. NDIAYE DIAKHATE (Senegal) said that there was no coordination problem, as the childcare specialists were indeed Ministry of Justice officials. Their mission was to monitor educational measures in the centres as well as in open communities and to make regular reports to the President of the court that had imposed the measures.

Under the Family Code and the Criminal Procedure Code, a “child at risk” was any child whose health or education was highly compromised or inadequately safeguarded, or else any child victim of a criminal offence.

The CHAIRPERSON noted that girls that had been married as minors should also be considered children at risk and not, as now seemed to be the case, as delinquents.

Mr. FILALI added that in his view, children begging in the street ran a moral risk.
61. **Ms. NDIAYE DIAKHATE** (Senegal) said that children in conflict with the law, namely those that had committed an offence, as well as children at risk, could benefit from educational measures. The measures taken for street children were protective and were described in the legislation as “educational assistance” measures, whose goal was to make up for the deficiencies of family upbringing and to take the juveniles concerned out of a criminogenic community. Married female minors were not necessarily considered at risk insofar as marriage involved emancipation.

62. The penal reform commission was currently working to define sex tourism as a criminal offence. For the moment, therefore, there was not yet any specific provision against sex tourism in Senegalese law, but charges had before now been brought against tourists under provisions on paedophilia or indecent assault. Procuring and keeping a common bawdy house were subject to sections 423 and 425, respectively, of the Penal Code. Juvenile prostitutes were considered to be at risk, while for adults prostitution was legal provided those concerned kept an up-to-date health diary and attended the mandatory regular medical checkups. When prostitutes were arrested, it was for noncompliance with these health measures.

63. Any sexual act on the person of a juvenile under the age of 16 years was considered an act of paedophilia. It was considered an aggravating circumstance if the juvenile was under the age of 13 years, i.e., the age of understanding and of criminal responsibility.

64. Article 298 of the Penal Code outlawed corporal punishment, as well as deprivation of food or care, on the person of a juvenile under the age of 15 years. That was a general provision that applied both to schools and to families and institutions.

65. When a children’s court considered placing a juvenile, it kept in mind the need to maintain the bonds between the juveniles and his or her family. For that reason, it often called in the first instance for mandatory supervision within the family. Placement, when necessary, was generally combined with temporary absences to allow the child to visit his or her family.

66. The fact that the Family Code did not accord the same rights to children born out of wedlock as to legitimate children was certainly due to the influence of Islam. A child born out of wedlock could not be listed among the heirs, but, if recognized by the father, could inherit. In other words, the child was not automatically an heir but could inherit on the same basis as the heirs if the father drew up a testament to that effect.

67. **Mr. FILALI** would like to see Senegal eliminate all discrimination against children born out of wedlock, as other Muslim countries, such as Tunisia, had already done. Illegitimate legatees were still at risk of having their share of the inheritance reduced at the suit of the legitimate children.

68. **Ms. NDIAYE DIAKHATE** (Senegal) agreed that a court challenge was still possible.

69. **Ms. DIOP** (Senegal) said that the draft Children’s Code had finally been completed and sent to the Ministry of Justice for comment. Once the Ministry’s comments had been obtained, the code would only need to be officially validated,
then adopted by the National Assembly. There was no doubt that the National Assembly would support it unreservedly.

70. Ms. Smith thought the information supplied on the degree of priority given to pre-school teaching was contradictory and called for clarification. Could the delegation explain whether all child asylum seekers were assured of a free education, including those who had not obtained either refugee or permanent resident status.

71. Ms. Ndiaye Diakhate (Senegal) said that since 2000, pre-school teaching had become a priority for Senegal, in particular with the creation of the *Case des tout petits* [kindergarten] system, which extended to the country’s most remote villages. The President, unwilling to accept a two-tier system in early childhood care, had instituted pre-school teaching at the community level in order to provide broader, equal access to education.

72. Further, the *Agence nationale de la Case des tout petits* had been created to coordinate all pre-school teaching activities at the regional level, whether in private or public schools or in the *Cases des tout petits*. The Director of the *Agence* was conducting awareness campaigns, meeting with communities to persuade them to join in the project and to encourage mothers to register their children for the *Cases*, which also provided pregnant women with prenatal care and advice on how to successfully bring their pregnancies to term.

73. Mr. Filali asked whether the State party had actually adopted the Hague Convention on the Protection of Children and Cooperation in Respect of Inter-Country Adoption, and asked for details on the facilities available to the *Cases des tout petits*.

74. Ms. Ndiaye Diakhate (Senegal) said that in emphasizing early childhood care, the President wished, among other things, to ensure that all Senegalese children could benefit from technological innovation, and had therefore arranged for all *Cases* to be equipped with computers. Each had a multipurpose room for class teaching as well as a large yard with sports and recreation equipment. They were accessible to all thanks to access ramps specially built for persons with disabilities.

75. The Government was paying for the construction of the kindergartens and their facilities, but recipient communities were contributing to the project by supplying the necessary land free of charge.

76. Mr. Lo (Senegal) added that, even though the *Cases des tout petits* project was an initiative of, and was funded by, the Government, management of the Cases was the responsibility of the Management Committee, whose members were elected by the recipient communities. A number of community members had responsibility for supervising the children, acting as their “grandfather”, “father” or “mother”, and for instilling in them the fundamentals of their culture and traditions, in particular by means of storytelling. In Muslim areas, a representative of the Muslim community took responsibility for teaching the children the pillars of Islam, while in Christian areas a member of the clergy was in charge of religious teaching.

77. As regards sports and recreation, “youth spaces” had been created in each regional capital, and multipurpose rooms were provided for the organization of training workshops in various fields as well as information forums. There were also plans for 70,000-seat stadia to be built in each of the regional capitals.
78. Mr. Lo confirmed that the Hague Convention on the Protection of Children and Cooperation in Respect of Inter-Country Adoption had indeed been ratified by Senegal and assured Committee members that everything possible would be done to have the ratification instruments tabled with the competent United Nations agencies.

79. Persons with disabilities had access to three types of social centres: reintegration and rehabilitation centres for persons with physical handicaps, treatment centres for psychiatric patients, and centres for children with special educational needs.

80. An extensive rehabilitation program, whose budget was to be doubled in 2007, had been implemented for persons with disabilities. It was made up of several components, including the granting of microcredit to combat poverty within the target groups, monitoring of indicators through statistical surveys, capacity building, and provision of orthotic devices.

81. As Senegal was poor in natural resources, its development was dependent on its human resources. For that reason, it had decided to devote 40% of its national budget to education.

82. To achieve its purpose of making education accessible to all by 2015, the Government was to build 2,000 classrooms and recruit 1,500 teachers every year. It would also need to pay for teaching tools and schoolbooks. At the university level, it would be implementing a bursary system for the poorest students.

83. As part of the program to combat the worst forms of child labour, the competent authorities had targeted the regions that supplied most of the young girls employed as domestic labour in the cities so as to create departmental committees there to conduct awareness campaigns and combat poverty.

84. The CHAIRPERSON, supported by Mr. FILALI, asked what was being done so that, in accordance with the provisions of the African Charter on the Rights and Welfare of the Child, young girls could be encouraged to return to school after giving birth rather than prevented from doing so, as now seemed to be the case. Was there any plan to repeal the law under which school principals could order them expelled in such cases?

85. Mr. BOYE (Senegal) said that schoolgirls who had given birth were not subject to any systematic expulsion procedure, but generally left of their own accord because they felt the disapproval of their classmates and teachers. At the secondary level, in contrast, girls frequently continued their studies after giving birth and were not discriminated against. As regards the law that forbade young mothers to return to school after childbirth, it had certainly fallen into disuse, as it was never applied. Mr. Boye then cited a Ministry of Education circular that spoke of admitting married and pregnant students to secondary educational institutions.

86. Mr. FILALI pointed out that though a law might fall into disuse, it could be reinvoked at any time; he insisted on the need to repeal the law. He asked the delegation to verify the status of the law and to advise the Committee what it had learned before adoption of the concluding observations on the report under review.

87. Mr. Filali welcomed the constructive, frank and open dialogue that had been engaged in with the State party and the latter’s commitment to the promotion and protection of the rights of the child, evidenced particular by its integration of the Convention into the Constitution of 2001. He said that in its concluding
observations the Committee would urge the State party to adopt the Children’s Code as soon as possible, would regret the absence of any institution for the defence of human rights, and would express its concern at a number of issues, including *talibés*, young girls employed as domestics, the lack of data gathering, and rural education. Finally, the Committee would urge the State party to take steps to implement ILO Convention No. 182, on the prohibition of the worst forms of child labour, as quickly as possible.

88. Mr. LO (Senegal), in turn, welcomed the quality of the discussions with the Committee and said that the President of his country was firmly determined to further enhance the protection of the rights of the child, as among other things he planned to make it a criminal offence, equivalent to rape, to oblige a girl under the age of 13 years to marry.

*The meeting rose at 5:45 p.m.*