Written replies by the Government of Nigeria to the list of issues (CRC/C/NGA/Q/3-4) related to the consideration of the third periodic report of Nigeria (CRC/C/NGA/3-4):

PART 1

Reply to the issues raised in paragraph 1 of the list of issues (CRC/C/NGA/Q/3-4)

Legal measures

1. Section 277 of the Child’s Rights Act 2003 of Nigeria defines a child as “a person under the age of 18 years.” This definition is in total consonance with article 2 of the Convention. The Act is the basic law which governs all matters relating to the rights and welfare of Nigerian children. Section 274 further states as follows:

2. The provisions of this Act supersede the provisions of all enactments relating to:
   - Children;
   - Adoption, fostering, guardianship and ward-ship;
   - Approved institutions, remand centres and borstal institutions; and
   - Any other matter pertaining to children already provided for in this Act.

3. Accordingly, where any provision of this Act is inconsistent with that of any of the enactments specified in sub-section (1) of this section, the provision of this Act shall prevail, and that other provision shall, to the extent of its inconsistency, be void.”

* In accordance with the information transmitted to States parties regarding the processing of their reports, the present document was not edited before being sent to the United Nations translation services.
4. Equally, the provisions of the Child’s Rights Act are consistent with those of the United Nations Standard Minimum Rules for the Administration of Juvenile Justice (the Beijing Rules) which prohibits incarceration of children unless there is no other way of dealing with them satisfactorily.

5. The Act makes the following provisions:
   - Prohibition of corporal punishment (Section 221(1) (b) CRA 2003)
   - Abolition of the “age of criminal responsibility.” Instead, the Act gives the age of 18 years to be the age below which a child cannot be subjected to the adult criminal processes, but can only be subjected to the child justice administration process (Section 204 CRA, 2003)
   - Prohibition of joint trial of children with adults under any circumstance (Section 205 CRA)
   - The separation of children from adults in detention in all circumstances (Section 222 CRA)

Administrative measures

6. Since the ratification of the Convention, efforts have been made at the Federal, State and Local Government levels to translate the provisions of the Convention into reality and ensure its effective implementation through the setting up of various institutions and agencies and leveraging of resources for AID agencies and international organizations.

Steps taken to enact the child rights laws in all states

7. The FGN through the FMWA&SD reaches out to role players through advocacy visits by the Office of the Honourable Minister of Women Affairs and Social Development to State Executives, Royal fathers, Religious leaders and Ministers of relevant line ministries like the Ministries of Education, Health, Justice, Police Affairs, Immigration Department, Internal Affairs, Foreign Affairs, Finance and the Media to advocate for child rights and development issues.

8. Consequently, the Child’s Rights Laws have been passed in 24 States by the Legislators out of which 4 State governors are yet to assent to the Law: namely, Abia, Akwa Ibom, Anambra, Benue, Cross River, Delta, Edo, Ekiti, Imo, Jigawa, Kwara, Kogi, Lagos, Nassarawa, Niger, Ogun, Ondo, Osun, Oyo, Plateau, Rivers, and Taraba. States awaiting governors assent are: Bayelsa, Ebonyi, kogi and Niger, while 12 States (Adamawa, Bauchi, Borno, Enugu, Gombe, Kaduna, Kano, Katsina, Kebbi, Sokoto, Yobe and Zamfara) are yet to pass the law.

Obstacles posed by Shari’a and Customary Law

9. The obstacle posed by Shari’a law is mainly due to misconceptions about the Act. Some Imams (muslim scholars) and Sharia court judges does not yet have a comprehensive understanding of the provisions of the Act to be able to advocate for its adoption in the Northern states, or to adapt the Shari’a’s principles and objectives of justice, respect, compassion which the CRA upholds to today’s context. There is also an extensive ignorance and lack of knowledge of emerging development within the Shari’a framework and jurisdiction that favours and supports child rights issues.

10. Continuous advocacy to create the desirable change is ongoing by the Government through the Federal Ministry of Women Affairs and Social Development and other child right advocates in all the states of the country.
Reply to the issues raised in paragraph 2 of the list of issues

11. The Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography has been signed but not ratified. Engagement with the relevant agencies and Ministries has commenced to overcome the administrative bottlenecks and difficulties that have slowed down the process.

Reply to the issues raised in paragraph 3 of the list of issues

12. The FGN through the FMWA&SD reaches out to stakeholders’ through advocacy visits by the Office of the Honourable Minister of Women Affairs and Social Development to State Executives, Royal fathers, Religious leaders to advocate for and promote child rights issues.

13. In 2009, constructive engagements with traditional rulers and opinion leaders that will galvanize them to action and to create change are ongoing especially in the Northern States in collaboration with some development agencies. There are platforms for traditional rulers to restate their prominent and effective role in the resolution of disputes in their domain while adopting constitutionally approved guidelines that will enhance the process. This is to create a protective environment for the protection of children, especially the child victims of violence, abuse and exploitation at the local government area and in different communities.

14. In addition, according to the 2009 National Primary Health Care Development Agency (Revised Guidelines for the Implementation of Immunization Plus Day’s (IPDs)), given the Traditional and religious leaders ability to wield considerable social and political influence, there is currently the promotion of a close dialogue with leaders of the Islamic and Christian Faiths in the country and a more systematic engagement of Religious and traditional leaders to support immunization activities at the state and local government levels.

Reply to the issues raised in paragraph 4 of the list of issues

15. The Federal Ministry of Women Affairs and Social Development was established to provide leadership and coordinating role to deal with all matters relating to the total well being and development of the Nigerian child as well as the implementation of the Convention. This Ministry is replicated at the state level. The ministry is committed to providing an enabling environment that will ensure drawing out the potential of the Nigerian child through well-articulated programmes, to enhance the quality of life of the child towards national development and nation building. Some measures taken by the Ministry to ensure its coordinating role include:

- The establishment National Child Rights Implementation Committee at the National level and setting up of State Child Rights Implementation Committees in some States that have passed the Child Rights Laws is facilitating monitoring of the implementation of the Convention as domesticated in the CRA and CRLs both at the National, State and Local Government levels. Currently implementation structures and systems are being put in place to ensure efficient functionality of these committees in at least 16 states that have passed the CRL.

- The National Child Policy of 2007 and its Strategic Plan of Action/implementation framework 2007/2008; the National Plan of Action on CRC/CRA 2009-2015 and the National Plan of Action on OVC and its Guidelines and Standard of Practice, 2007 were developed to ensure established institutions and structures are providing and coordinating targeted services for the care and support to all children and importantly orphans and of OVC in line with the National Plan of Action.

- Development of an implementation Work Plan on the CRA/CRL.
• Implementation and provision of resources for a National Programme of Action for Children
• Encouraging children and young persons to know and to promote their own rights through establishment of Child Rights Clubs in Schools
• Advocacy, targeting policy makers, traditional rulers and religious leaders

16. NAPTIP also has continued to provide leadership and coordinating role in combating trafficking in persons including taking protective and preventing measures and prosecuting of offenders/traffickers. NAPTIP in collaboration with Law Enforcement Agencies, CSOs and Communities is facilitating rescue and reintegration of child victims of trafficking. As of 2010, over 4000 children have been rescued and 67 traffickers successfully prosecuted in different courts across the country Nigeria. Effective investigation and prosecution of criminal offences such as sexual assault, rape, defilement, and neglect, abandonment etc is ongoing.

17. Despite the progress made, Nigeria still faces major challenges in the protection of children from trafficking, abuse, violence and exploitation including increased vulnerability during emergencies and humanitarian situations. Childcare givers and child justice administrators in most states that have passed the child’s rights laws are ill-equipped and lack the capacities to provide recovery services for the thousands of vulnerable children living in the streets and in institutions including those in conflict with the law and those in need of special care and attention. There is also weak institutional capacity for effective implementation and monitoring of child rights issues and programmes.

Reply to the issues raised in paragraph 5 of the list of issues

18. A circular signed in 2010 by the Secretary to the Government of the Federal mandated all Ministries, Departments and Agencies to henceforth ensure that all data gathering, generation, etc are domiciled with the National Bureau of Statistics (NBS) being the institution with this mandate.

19. Several reform activities have taken place at the NBS, one of such is the introduction of digital technology into data collection and processing which translated into the reduction of incidence of error, reduction of processing time by 80 per cent and overall credibility of the process. In the reformed NBS, there is a fully fledged department that deals with child-related statistics.

20. Apart from the data collection processes conducted by the NBS, UNICEF entered into a Cooperation Agreement for the establishment of the Convention on the Rights of the Child Chair in the Department of Public Law, University of Lagos.

21. The priority of the Agreement is to generate a baseline data on various issues affecting the rights of children and youths in Nigeria through the conduct of a National Baseline Survey on child protection, indicators/thematic issues are particularly child trafficking, sexual exploitation, child labour, child / youth in conflict with the law, orphans and vulnerable children. Data generated through the baseline survey is being employed to formulate laws, policies and programmes for the effective implementation of the Convention.

Reply to the issues raised in paragraph 6 of the list of issues

NEEDS 1 and II

22. The Federal Government of Nigeria inaugurated a medium term reform and development agenda, being the National Economic Empowerment and Development Strategy (NEEDS). NEEDS I and II is Nigeria’s Poverty Reduction Strategy and blueprint for social justice, economic growth and value orientation. NEEDS II and the Seven Point
Agenda of the present Government are being harmonized to come up with a medium term plan 2008 – 2011 for Nigeria. The sectoral interventions indicated in the NEEDS document are child sensitive with broad focus to:

- Improve Primary Health Care Development Delivery.
- Universal Basic Education.
- Water Supply and Sanitation.
- Tackling HIV/AIDS.
- Generate wealth and the creation of employment for women which will in turn translate to the well being of the children.

23. The implementation of the strategy document would benefit children directly and indirectly. The State and Local Government Areas have inaugurated their State Economic Empowerment and Development Strategy (SEEDS) and Local Government Economic Empowerment and Development Strategy (LEEDS) respectively.

24. The Federal Government has now completed documentation on Nigeria Vision 20:2020 (NV20:2020), designed to make Nigeria one of the top 20 economies in the world by the year 2020. A Special Interest Group on NV 20:2020 was constituted and the Women Special Interest Group and implementation and funding of the Child’s Rights Act in Nigeria were included in the final version of the document. Currently, the 1st medium term implementation plan (2010-2013) of NV 20:2020 is being put in place and all the 36 states are also preparing their 1st medium term plan in line with the Federal Government document and directives.

Human Rights Action Plan

25. Since adoption in 2006, continuous efforts have been made to update the Human Rights National Action Plan (NAP) document and monitor its implementation by stakeholders.

26. A comprehensive, rights-based National Plan of Action with the time frame of 2009 - 2015, which extensively covers all areas of the Convention and which incorporates the objectives and goals of the outcome document entitled: “A World Fit for Children” (from the 2002 United Nations General Assembly Special Session for Children), as well as the Millennium Development Goals has been developed.

27. The major focus of the NPA are to “Put children first as a state policy, Fight poverty by investing in children, Care for every Nigerian child, Educate every child, Protect children from harm and exploitation, Protect children from war and conflict, Listen to children and ensure their participation in decision making process and Ensure a safe environment for children”.

28. The National Plan of Action (NPA) 2009-2015 imposes an obligation on all levels of government and all stakeholders to ensure a better standard of living for Nigerian Children and presents the modalities for implementing the policy framework of government on actualizing the desire to secure the well-being of children of the country. The NPA have been adopted and validated by broad stakeholders, but a result oriented, gender sensitive and evidence based costed plan for the operationalization of the National Plan of Action remains a challenge.

Reply to the issues raised in paragraph 7 of the list of issues

29. Budgetary allocations on children’s issues are embedded in the budgets of various Ministries at the Federal and State levels. It is, therefore, difficult to isolate such allocations, or fully to account for all expenditures in respect to the proportion of the budget
devoted to social expenditures for children in the areas of health, welfare, social services, recreation and leisure. The budget trends for the years 2004-2008 are given in table 1 below. This shows increased allocations to child rights issues.

Table 1: Budgetary allocation and trends of Federal Budgets in relevant MDAs 2004-2008 in Naira (N)

<table>
<thead>
<tr>
<th>Ministry/Department and Agency</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Ministry of Education</td>
<td>376,129,175</td>
<td>14,648,213,337</td>
<td>166,621,653,758</td>
<td>189,199,774,929</td>
<td>370,845,771,199</td>
</tr>
<tr>
<td>FGC, Unity Schools Colleges</td>
<td>39,994,246,509</td>
<td>15,278,149,876</td>
<td>18,188,656,002</td>
<td>19,032,813,542</td>
<td>92,493,865,929</td>
</tr>
<tr>
<td>Universities &amp; FST Colleges</td>
<td>12,283,338,699</td>
<td>*</td>
<td>78,771,112,001</td>
<td>87,600,179,082</td>
<td>178,654,629,782</td>
</tr>
<tr>
<td>UBE</td>
<td>343,766,001</td>
<td>*</td>
<td>6,749,414,750</td>
<td>8,415,300,000</td>
<td>15,508,480,751</td>
</tr>
<tr>
<td>Special Education for the Handicapped Studies in Secondary Schools</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>Federal Ministry of Health</td>
<td>26,410,000,000</td>
<td>20,000,000,000</td>
<td>106,940,000,000</td>
<td>*</td>
<td>153,350,000,000</td>
</tr>
<tr>
<td>National Programme on Immunisation (NPI)</td>
<td>6,000,000,000</td>
<td>10,288,195,030</td>
<td>7,903,552,523</td>
<td>3</td>
<td>48,383,495,106</td>
</tr>
<tr>
<td>Primary Health Care National Action Committee on Aids (NACA)</td>
<td>2,530,000,000</td>
<td>*</td>
<td>10,288,271,244</td>
<td>*</td>
<td>12,818,271,244</td>
</tr>
<tr>
<td>Federal Ministry of Women’s Affairs and Social Development(Child Development Department)</td>
<td>82,500,000</td>
<td>277,500,000</td>
<td>415,780,000</td>
<td>576,980,000</td>
<td>1,352,760,000</td>
</tr>
<tr>
<td>Federal Ministry of Water Resources</td>
<td>37,497,754,831</td>
<td>73,074,011,548</td>
<td>80,103,630,703</td>
<td>190,675,397,082</td>
<td>21,235,532,796</td>
</tr>
</tbody>
</table>


*Note: The figures in table 1, above excludes the Millennium Development Goals – Debt Relief Gains (MDGs-DRGs) funding for the Federal Ministry of Women Affairs and Social Development which from 2006 to 2009 is in excess of N4.2bn thus:

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>N1bn</td>
<td>N1bn</td>
<td>N500m</td>
<td>N1.72bn</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

Fighting corruption

30. The Government is implementing a comprehensive economic and anti-corruption reform programme that emphasized fiscal, structural, and institutional and governance
reform. The programme also sought to enhance transparency by adopting the Extractive Industries Transparency Initiative (EITI); and prosecuting corrupt officials.

31. To improve transparency and tackle corruption, the Government adopted a two-pronged approach, embedding anticorruption measures in a comprehensive economic reform programme, and conducting analytical studies to identify specific areas in which corruption was undermining public sector performance and growth. To fight corruption, the Government reviewed the public procurement process and instituted a “due process mechanism” in public contracts.

32. The country in its effort has a long list of anti-corruption agencies and establishments with anti-corruption mandates, including: Technical Unit on Governance & Anti-Corruption Reforms, Economic and Financial Crimes Commission (EFCC), Bureau of Public Procurement, Independent Corrupt Practices and Other Related Offences Commission, Nigeria Financial Intelligence Unit, National Drug Law Enforcement Agency, and the Bureau for Public Service Reforms

**Inter-Agency Task Team**

33. To foster coordination of these agencies, an interagency task team of anti-corruption agencies was set up by the current Nigerian Government, in collaboration with the United Nations Development Programme (UNDP) and United Nations Office on Drugs and Crime (UNODC), to ensure collaboration and cooperation amongst the various agencies with the mandate to fight corruption and ensure transparency and accountability in Nigeria. This team shares information, experiences, and best practices, builds capacity and aims to enhance the pursuits of their various mandates which include prosecution, investigation, research, and prevention.

**International conventions**

34. In addition, Nigeria is signatory to several international conventions including the United Nations Convention against Corruption (UNCAC), African Union Convention on Prevention and Combating Corruption (AU Convention) and ECOWAS Protocol on the Fight against Corruption. Nigeria also works with several development partners including DFiD, UNODC, UNDP, the World Bank, the European Union and several others in the fight against corruption.

**Legislation**

35. Nigeria has embarked on several legislative agenda to bridge the gaps in implementation. The Freedom of Information Bill, the Non-Conviction Based Asset Forfeiture Bill and the Anti-Terrorism Bill are pending before the National Assembly waiting for passage into law, and a working group has been set up by the Ministry of Justice to draft a Witness Protection Bill in collaboration with other relevant agencies, to ensure protection for witnesses and Whistle-Blowers.

36. The large number of anti-corruption agencies has resulted in a substantial increase of awareness of the problem. However, this increase in the awareness of the general public is not accompanied by adequate and visible enforcement. Despite the many policy interventions, corruption remains an endemic phenomenon in Nigeria, with anti-corruption measures failing to have noticeable effects.

**Reply to the issues raised in paragraph 8 of the list of issues**

37. A backlog of nearly 10 Million vital/birth registration forms were processed in 2007 and additional 8 Million forms were processed in 2009. The NPopC have documented characteristics of births in Nigeria, current birth registration status and other lessons learned in the ‘First Comprehensive Report on Vital Registration of Live Births, Deaths and Still Births in Nigeria’ for the period 1994-2007. In spite of these concerted efforts, large
proportion of under-five children remain unregistered. Multi-sectoral strategies including fostering strong linkages with the Health Systems will be employed. Strategies to boost the current low level of under-five birth registration process between 2010 and 2012. This will focus on integrating birth registration process into Routine Immunization (RI), expanded programme on immunization-IPDs and into Maternal Newborn and Child Health Weeks. The strategy will include focused intervention on non-functional birth registration centres, targeted advocacy and communication for birth registration process and routine birth registration coverage. Monitoring bodies like the Osun state committee for birth registration exists in all the remaining 35 states in the country and the FCT.

Reply to the issues raised in paragraph 9 of the list of issues

38. The Government of Nigeria recognises children deprived of the family environment which have been segmented into 18 categories under Orphans and Vulnerable Children (OVC) including children who have lost one or both parents, child beggars/destitute children (including exploited almajiris), children in street situation, children in institutions, child victims of trafficking, child domestic servants, internally displaced or separated children and abandoned children. As a national response, a costed five year National Plan of Action on OVC has been developed. Situation Assessment and Analysis (SAA) of OVC in Nigeria was conducted in 2008 to generate data and relevant information to determine planned and coordinated interventions in the context of the National Plan of Action (2006 – 2010) for OVC. The survey indicated the magnitude of OVC in Nigeria, the factors responsible for orphanhood, the vulnerability among children aged 0-17 and the socio-economic wellbeing and living conditions of OVC in Nigeria. National Guidelines and Standards of Practice on Orphans and Vulnerable Children were also developed as Nigeria’s efforts to accelerate and scale up the implementation of the National Plan of Action (2006-2010). The Guidelines and Standards of practice was developed to ensure that improved and qualitative programmes and services are implemented for the protection, care and support for children considered most vulnerable in Nigeria based on guiding principles of the CRA and the Convention on the Rights of the Child.

39. Essential Service and Monitoring Checklist for OVC programmes have been developed to track interventions and programming for OVCs. Basic services include education, health and nutrition, protection and social care.

40. The main goal of the NPA is that by 2010, mechanisms for the protection, care and support for orphans and vulnerable children are in place and that provision of basic services is facilitated within a supportive environment. The plan includes strategies to strengthen the capacity of care givers and the vulnerable children themselves as well as support to community-based responses. The plan also aims at ensuring that government at all levels protects the most vulnerable children through improved policy and legislation.

41. The budget included in the NPA comes to a total amount of $1.6 billion for the five-year period (2006-2010), which gives the extent of the investment needed to provide adequate support to vulnerable children in Nigeria. Insufficient budgetary allocation in this area remains a challenge and government leadership is essential to ensure that national responses are properly resourced, coordinated, implemented and monitored.

42. NAPTIP has further developed the National Policy on Protection and Assistance for victims which has become a Regional Policy for ECOWAS Region, 2009. Based on the Policy a Guideline for Protection of Children in Formal Institutions was developed to help practitioners and service providers perform appropriate care giving services to vulnerable children and child trafficking survivors. The Guidelines outline the appropriate steps to take at each stage of child care and succinctly allocate responsibilities to officers at every stage of care giving.
Reply to the issues raised in paragraph 10 of the list of issues

Measures taken to increase Immunization of children below the age of one

43. The factors that have affected the coverage level of immunization for children under the age of one, include irregular supply of vaccines at service delivery points due to logistical problems, high number of un-immunized children, lack of involvement and ownership at the community levels, inadequate and untrained manpower and poor funding by government at all levels. To increase the current low level, the country made a bold effort to introduce new vaccines against some other childhood diseases of public health importance between 2007-2009.

44. This is made possible with funding support from Global Alliance on Vaccine for Immunization (GAVI) fund. The country’s National Immunization Policy has been revised while the Nigeria EPI Comprehensive Mid Year Plan 2009 – 2014 has been developed to accommodate the New Vaccine Initiative (NVI) process. In addition, the GAVI application for NVI has received provisional approval for support in introducing the pentavalent (DPT-HBV-Hib) and pneumococcal conjugate vaccine (PCV). The guideline for fund disbursement to states was revised in 2009 to facilitate effective use of the Global Alliance on Vaccine for Immunization (GAVI) fund. Currently this has facilitated the disbursement of Injection Safety Support funds to 24 States. In addition, targets were set for States and LGAs to reduce number of the un-immunized by 50 per cent. As a result of the above measures, there has been remarkable increase in the coverage level of immunization for children under one year as shown below.

![Figure 1: Percentage increase in the uptake of the vaccines through routine immunization 2008-2009](image)
Figure 2: Shows the DPT coverage by states between 2007 and 2009

**DPT3 Coverage by States 2007 - 09**

2007 (National DPT3 = 70%)

2008 (National DPT3 = 71%)

Source: Administrative Reports from States to National Level

2009 Coverage by States DT3 vs. OPV3

2009 National DPT3 Coverage 79%

2009 National OPV3 Coverage 70%

Figure 3: Shows DPT versus OPV3 coverage by states in 2009


Table 2: EPI Schedule with the Introduction of New Vaccines

<table>
<thead>
<tr>
<th>PART 1</th>
<th>1. Please provide information on measures taken by the State party to ensure the compatibility of National Legislation with the Convention (CRC/C/15/Add.257, para. 12), especially with respect to the definition of the child, the prohibition of corporal punishment and the minimum age of criminal responsibility. What steps have been taken by the State party to enact the Child Rights Act in all states and what are the obstacles posed by Sharia and customary law to ensure its full application?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Measures</td>
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</tr>
<tr>
<td>Administrative Measures</td>
<td>Proclamation of the separation of children from adults in detention in all circumstances (Section 222 CRA)</td>
</tr>
</tbody>
</table>

Source: National Primary Health Care Development Agency Report 2009
Reducing the increase in HIV/AIDS infections among children

45. Major challenges posed to the country’s reduction of HIV/AIDS infections among children include the unwillingness of mothers to go for ante-natal clinics which provides opportunity for HIV-positive women to get on the PMTCT programme early and increase the chances of having HIV-negative babies and the poor attitude of the health workers. The fact that the bulk of the PMTCT programme presently takes place only in health facilities makes the problems facility based excluding a large percentage of pregnant women who could not access the services provided in the health facilities.

46. To reduce the increase in HIV/AIDS infections among children, the Prevention of Mother-to-child Transmission (PMTCT) programme, which began in six tertiary sites, has expanded to 230 sites, and about 400,000 pregnant women have benefited from it. PMTCT interventions have been effectively integrated into other interventions in 2007 (ANC, nutrition programmes, IMCI and other reproductive health services, including the management of sexually transmitted infections) in order to enhance coverage. National guidelines on the prevention of mother-to-child transmission of HIV was developed in 2007 to provide a comprehensive guidelines and information to assist health care providers in optimum and holistic care to HIV-infected pregnant women, their infants and families. Further, in 2007, a training manual on interpersonal communication skills in dealing with People Living with HIV/AIDS (PLWH) with emphasis on the youth and pregnant women was developed and is being used in the training of health workers and other stakeholders to provide the required skills in their regular interaction with pregnant women of child bearing age as well as young people. A strategy was further adopted in 2007, for effective community – based PMTCT program. This programme promotes:

- The formation of facility based support groups for HIV positive pregnant women (Mother-to – Mother care Model);
- Partnership with community based HIV and AIDS Caregivers for palliative care, OVC programmes (CBOs, FBOs, support groups of PLWHAs etc); and
- Training of basic midwives, traditional birth attendants and village health workers.

47. In addition, the national response to young people’s sexual and reproductive health is premised on the following strategic frameworks:

- Advocacy and Social Mobilization.
- Equitable Access to quality.
- Adolescent Friendly Health Services.
- Capacity Building.
- Research, and
- Monitoring and Evaluation.

48. The framework recognises the pivotal role of young people’s participation as major stakeholders and ensures the need for effective and sustainable implementation based on the following:

- Integrated approach to programme planning and implementation.
- Effective coordination especially at the community level.
- Young people’s participation.
• Partnership and resource mobilization including budgetary allocation by government at all levels.

49. Further to the national response, the National Education Policy recommends the establishment of Guidance and Counselling Units in primary and secondary schools. This is to ensure that children receive adequate counselling and guidance including education on HIV/AIDS and reproductive health. Government and NGO’s collaborate to advocate for and create awareness on safe reproductive health practices including treatment of HIV/AIDS.

50. Peer Educators Initiative involving training of teachers and pupils on environmental health, sexual health and HIV/AIDS have been introduced in schools with the aim of involving children in the counselling of fellow children under the supervision of teachers.

Addressing the low level of pre- and post-natal care - policy issues

51. The National Council on Health in 2008 endorsed acceleration of the implementation of the Integrated Maternal, Newborn and Child Health Strategy (IMNCH). The country adopted the IMNCH Strategy in 2007 which aims at delivering integrated high-impact, cost-effective and evidence-based maternal, newborn and child health interventions at high population coverage which promotes a continuum of care through a life cycle approach. The strategy is being fully implemented in all the states.

Enhancing performance of the health system

52. The National and State governments have updated all their plans to include antenatal and postnatal care in the essential package of care to be provided especially at primary level of care. This is to ensure that available resources would be mobilized by all stakeholders to ensure universal access to the essential package of care.

Community participation and ownership

53. Community education on MNCH issues including birth preparedness plans (ANC), newborn care and Integrated Management of Childhood Illnesses as well as post natal care at the household and community level is being instituted and supported through the following means:

• Promoting counselling services at the household level to increase utilization and timely access of IMNCH services.

• Building capacity of community resource persons and care-givers for early recognition of warning signs of obstetric and neonatal complications especially during the post natal period, and childhood illnesses.

• Training other resource persons (ambulance drivers, road transport workers, gatemen, etc) for emergency response and preparedness for MNCH conditions.

• Promoting male involvement as part of shared responsibility and collective action to improve household healthcare seeking behaviour and other key household practices (KHHP).

• Scaling up behavioural change communication activities to promote key household practices in the communities.

Reducing the distance to the health-care centres

54. The federal government affirms that primary health care is the corner stone of its health policy. This is exemplified by the current Government effort to reduce the distance health consumers’ travel in order to access the health centres. The National Primary Health Care Development Agency built, equipped and staffed an additional 200 PHC centres across the country between 2007 and 2008 to improve consumer access and provide quality
health care. Further, there is an ongoing implementation of the Midwives Service Scheme and the signing of a MOU by most states of the federation to implement the scheme. This is being spearheaded by the National Primary Health Care Development Agency. Midwives have been posted to primary health care centres all over the federation to increase the coverage of skilled birth attendance as well as antenatal and post-natal care services.

**Improving financial access**

55. Currently, 18 Northern states in the Federation are providing free maternal and child health services to increase access to maternal, newborn and child health interventions including antenatal and postnatal care. In-addition the Government’s answer to financing health care is the National Health Insurance Scheme (NHIS). The implementation of NHIS started in 2005, focusing initially on public sector employees. It is gradually being scaled down to the poor and the informal sector through the Community Based Health Insurance scheme. Currently implementation of this scheme is ongoing in 12 states.

**Addressing the human resource for health gap**

56. The National Midwifery and Nursing Council has also increased admission space into schools of nursing and midwifery with aim to increase the number of skilled manpower especially in the states with high disease burden.

**Improving quality of service provision**

57. Since 2007, local governments have increased training of service providers on expanded life saving skills (ELSS) for doctors, Life saving skills (LSS) for nurses and midwives and Modified life saving skills (MLSS) for community health extension workers in which ANC and PNC are an integral component, this is to ensure that clients get the right services in accordance with international standards.

58. The institution of bi-annual Maternal, Newborn and Child Health Week in 2009, which is celebrated in all the states of the federation, creates an excellent opportunity for awareness creation on key interventions of maternal and child health including pre and post-natal care. The mass media is actively engaged. Radio and TV programmes and jingles are aired while grass root enlightenment campaigns are carried out to reach those who may not have access to radio and or TV. Table 3 and figure 4 below, indicates the level of improvement and score card by the country.
Table 3: Impact Analysis on Maternal and Child Health Indices (Score Card)

<table>
<thead>
<tr>
<th>S/No</th>
<th>Indices</th>
<th>2003 NDHS</th>
<th>2008 NDHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>MMR</td>
<td>-</td>
<td>545</td>
</tr>
<tr>
<td>2</td>
<td>NMR</td>
<td>48</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>IMR</td>
<td>100</td>
<td>75</td>
</tr>
<tr>
<td>4</td>
<td>U5MR</td>
<td>201</td>
<td>157</td>
</tr>
<tr>
<td>5</td>
<td>Contraceptive Prevalence</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>6</td>
<td>ANC</td>
<td>47</td>
<td>56</td>
</tr>
<tr>
<td>7</td>
<td>Skilled Birth Attendance</td>
<td>35</td>
<td>38</td>
</tr>
<tr>
<td>8</td>
<td>PNC</td>
<td>26</td>
<td>38</td>
</tr>
<tr>
<td>9</td>
<td>EBF</td>
<td>17</td>
<td>13</td>
</tr>
<tr>
<td>10</td>
<td>Measles</td>
<td>31</td>
<td>-</td>
</tr>
<tr>
<td>11</td>
<td>Complementary Feeding</td>
<td>63.7</td>
<td>76</td>
</tr>
<tr>
<td>12</td>
<td>SBA</td>
<td>35</td>
<td>-</td>
</tr>
<tr>
<td>13</td>
<td>LBW</td>
<td>12.1%</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Fully Immunized</td>
<td>12.9</td>
<td>22.7%</td>
</tr>
<tr>
<td>15</td>
<td>ITN Use By Under 5</td>
<td>1</td>
<td>6%</td>
</tr>
<tr>
<td>16</td>
<td>Children receiving Vit A</td>
<td>33.7</td>
<td>26%</td>
</tr>
<tr>
<td>17</td>
<td>Underweight Prevalence</td>
<td>28.7%</td>
<td>23%</td>
</tr>
<tr>
<td>18</td>
<td>Wasting Prevalence</td>
<td>9.2%</td>
<td>14%</td>
</tr>
</tbody>
</table>

Source: IMNCH Annual Review Report 2009

Figure 4: States with increase in un-immunized children in 2009 compared with 2008
Reply to the issues raised in paragraph 11 of the list of issues

59. To eradicate FGM in Nigeria, a multi-disciplinary approach by the Government and outreach efforts by civil society and governments aimed at changing perceptions and attitudes regarding FGM have been pursued in the reporting period. These activities are reaching a wider public with government actors, religious and traditional leaders, health providers, teachers, youth, social workers and involvement of the media. In particular, men are being targeted as well as family members and prevalent communities. Current initiative by government and the CSOs are promoting a culture of opposition to all forms of harmful traditional practices against women and girls, using the media and involving men in addressing gender stereotypes and discriminatory values and norms which increase the risks faced by both women and girls. Associations of nurses, midwives and doctors have actively campaigned against FGM and notable CSOs within the country are active in the field of IEC, advocacy and services has a shelter/safe home for victims of domestic violence including adult women who would like to avoid circumcision. It also offers legal advice/assistance, counseling, and documentation of cases of abuse.

60. Specific measures taken by the Government to combat harmful cultural practices affecting children are articulated in Sections 21 and 22 of the CRA prohibiting child marriage and child betrothal and Section 24 prohibits tattoos and skin marks. Most of the States that have passed the CRLs have specific provisions prohibiting child marriage and tattoos and skin marks. In the Northern states, while kebbi and Niger states have prohibited child marriage, Borno, Gombe and Bauchi states have prohibited withdrawal of girls from schools for marriage purposes.

61. Part IV (Sections 41-49) of the Act provides for additional protection through civil and welfare proceedings. Thus, it makes provisions for securing assessment orders in relation to ascertaining the state of health or development of, or the way in which the child has been treated, with a view to enabling a determination as to whether the child is suffering or is likely to suffer significant harm or exploitation. To this end, the appropriate authority may secure an order from the Family Court for emergency protection of children where and when necessary. The Act additionally imposes duties on State Governments to safeguard or promote the welfare of any child in danger or suspected to be in danger of suffering significant harm within their jurisdiction.

62. Part V (Sections 50-52) of the Act empowers a Child Development or Police Officer or any other authorized person to bring a child in need of care and protection before a court for a protective or corrective order; if he has reasonable grounds for believing that the child may be physically harmed or sexually exploited.

63. In addition, Sections 31 and 32 of the Child’s Rights Act prohibits unlawful sexual intercourse with a child, and an offender under this provision is liable on conviction to life imprisonment. In support of the proposed Federal Law, some State Houses of Assembly have recently made legislation to prohibit violation of girls/women’s rights and punish perpetrators of violence especially in the states. The Houses of Assembly of Benue, Delta, Edo, Jigawa, Kaduna, Lagos, Abia, Anambra, Ebonyi, and Katsina States are already at different stages of passing Domestic Violence Prohibition Bills.

64. Child marriage is still prevalent in the northern part of the country. International Agencies and NGOs are working in the Northern part of the country where the practice is endemic to keep children in school since a correlation exists between girls’ education and age at marriage. This initiative is succeeding as there has been 10 to 15 per cent increase in girls’ primary school enrolment in some Northern states while withdrawal rates have dropped.
Reply to the issues raised in paragraph 12 of the list of issues

65. The measures taken to address the high percentage of non-enrolment in primary schools are as follows:

- Campaigns at National, State and Local government levels targeted at states with low enrolment such as Gombe, Kaduna, Sokoto, etc.
- Promotion of gender parity through the establishment of additional special and child-friendly schools for girls and boys.
- Sensitization and modelling of successful women in eight GEP States with 45 per cent gender parity in Jigawa, Katsina, Kebbi, Yobe, Borno, Sokoto, Niger and Bauchi States; and five Basic Education Project States.
- Enforcement of the free basic education policy for all children – early childhood care, basic and secondary education to ensure enrolment, retention and completion.
- Sanctioning of parents who refuse to enrol their children in schools and schools that charge fees as stipulated in the UBEC Act. Parents and schools are mandated to ensure that children are not only enrolled but remain in school for the stipulated number of hours (per day) and years at both primary and secondary levels.
- More classrooms are built and boarding schools are being renovated to provide for the excess number of school aged children. Also additional hostels built to accommodate the increase in number.
- Most State governments also have incentive packages for students who pass internally moderated examinations from SS 2 to SSS 3 through scholarship (SSCE examination fee etc) to ensure completion.
- Government policy has also ensured the separation of premises of basic and secondary schools through the separation of administrative heads and teachers of schools to ensure effective and proper monitoring of children’s enrolment, retention, transition and completion from primary to secondary schools under the UBE Act, 2004
- Provision of instructional materials, ensuring a conducive learning environment for schools.
- State policies stipulate the registration, standard of environmental and learning facilities and location of premises useable for early childhood centres.
- Encouragement of Private Partnership Initiative (PPI) to adopt public schools – to renovate, provide classroom infrastructure, and train teachers.
- The provision of classrooms and other basic infrastructure such as hygienic source of water (Bore holes and wells), desks and chairs, writing materials, text books especially in core subjects like Primary Science, Mathematics and English; as well as teaching materials for the teachers.
- In 2008, the National Commission for Colleges of Education (NCCE) in conjunction with UNICEF developed a curriculum for Nigerian Colleges of Education for the training of National Certificate of Education (NCE) graduates in Early childhood education. This has greatly impacted the enrolment of early childhood education in most states of the federation as shown in tables 4 and 5.
Table 4: Community empowerment activities

<table>
<thead>
<tr>
<th>2005 activities</th>
<th>2006 Activities</th>
<th>Level of improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>3111 New classrooms</td>
<td>8,673 New classrooms</td>
<td>5,562</td>
</tr>
<tr>
<td>3,999 Classrooms renovated/ rehabilitated</td>
<td>6,840 Classrooms renovated/ rehabilitated</td>
<td>2,841</td>
</tr>
<tr>
<td>69,098 sets of furniture</td>
<td>126,150 sets of furniture</td>
<td>57,052</td>
</tr>
<tr>
<td>79 boreholes.</td>
<td>122 boreholes</td>
<td>43</td>
</tr>
<tr>
<td>Provision of electricity, culverts, fencing etc of</td>
<td>Provision of electricity, culverts, fencing etc</td>
<td></td>
</tr>
<tr>
<td>164 schools / communities</td>
<td>to at least 578 schools / communities</td>
<td>414</td>
</tr>
<tr>
<td>-</td>
<td>714 VIP toilets</td>
<td></td>
</tr>
</tbody>
</table>

Source: Retreat for the Honourable Commissioners of State Ministries of Education Board, Chairman’s Report. June 2008

- Establishment of School Based Management Committee (SBMC)
- School mapping leading to the establishment of schools in locations with low numbers of schools; reduction of distance between communities and schools. With particular reference to girls to reduce the incidences of probable risks outside the home that could prevent them from regular attendance of school.
- Every primary school by law has an Early Childhood Centre linkage. This has tremendously increased enrolment as it is the most noticeable strategy.

Table 5: Deliverables from special Education Fund 2005 - 2008

<table>
<thead>
<tr>
<th>Deliverables</th>
<th>Achievements / No. Acquired</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of schools / Centre that have benefitted</td>
<td>363</td>
</tr>
<tr>
<td>Enrolment</td>
<td>20,617</td>
</tr>
<tr>
<td>Classrooms</td>
<td>698</td>
</tr>
<tr>
<td>Resource Rooms</td>
<td>326</td>
</tr>
<tr>
<td>Bore Holes / Hand pump</td>
<td>25</td>
</tr>
<tr>
<td>Toilet and bathrooms</td>
<td>225</td>
</tr>
<tr>
<td>Pupils’ furniture</td>
<td>3,523</td>
</tr>
<tr>
<td>Teachers’ Furniture</td>
<td>919</td>
</tr>
<tr>
<td>Bedding</td>
<td>1,854</td>
</tr>
<tr>
<td>Instructional materials</td>
<td>68,560</td>
</tr>
<tr>
<td>Provision of equipment (computers Wheelchairs, Brail machines, Television sets, Radio sets, etc)</td>
<td>12,946</td>
</tr>
<tr>
<td>Training (Teachers)</td>
<td>5,576</td>
</tr>
</tbody>
</table>

66. The measures taken to address low primary school enrolment and completion rates are as follows:

- Government’s policy on free and compulsory basic education for all Nigerian children of school going age.
- Promulgating laws and edicts that prohibit street trading by school aged children.
- Sanctioning of parents who refuse to enrol their children in school or who withdraw them from school hawk wares or beg and for early marriage.
- Penalizing schools that charge fees.
- Recruitment of FTS teachers by the Commission to make sure the pupils are properly taught by qualified teachers.
• Promoting and supporting inclusive education through special intervention for children with special needs. 2 per cent (Consolidated revenue Fund) CRF is dedicated to these needs

Situation of the Almajiri children

• Formation of Madrasah Committee (Madrasah is the Arabic word for school) to look into the issue of the Almajirai by developing guidelines for the establishment and implementation of Madrasah Education programme in Nigeria.

• Organization of symposium and study tour of the Madrasah system in Indonesia with the aim of adopting operational system and sharing experience on best practice of the E-9 countries i.e. Egypt, Bangladesh, China, Brazil, India, Indonesia, Mexico, Pakistan and Nigeria.

• Establishment of structures at State level in each of the fifteen pilot States.

• Mobilization of States to ensure the establishment of functional mechanism and wholesome drive and own the process of actualizing the approach outline in UBE strategies. For example in Kano State where the Almajiri system is endemic, the State government has renovated Almajiri schools, provided sleeping mats and built shades for the Almajiri children during qura'nic reading lessons taken outside the classroom.

The Mallam’s who run such Almajiri schools are being empowered:-

• To become self reliant in order to forestall the Almajiri begging syndrome;
• To obtain diploma and or degree qualifications in Islamic studies; and
• To acquire vocational skills such as carpentry, block making/moulding and laying, welding, Cell Phone repairs etc. Successful candidates are given enough capital (rent for their shop for one year) and equipment to start their own business outfit by the State Directorate of Youth Development

67. Some non-governmental organizations have set up learning centres and are sponsoring willing Almajiri in formal schools/western education, either in the evening after their normal qura’nic school period or in the mornings during normal school period. These NGOs provide food, training on simple personal hygiene and basic reading and writing skills for the Almajiri children (and their adult ‘guide’)

68. In Lagos State for example the Government has outlawed street begging and hawking and mandated every child to be enrolled and registered in neighbouring schools. The Government has also provided guidelines for effective partnership between critical stakeholders in Madrasah Education and plans to integrate the Madrasah Education into the UBE programme. In addition, the 56th National Council on Education (NCE) has recently approved extension of ECC/P services to nomadic and migrant fishermen children.

Reply to the issues raised in paragraph 13 of the list of issues

Children with disability

Status of the mentally and physically challenged child

69. The Nigerian Constitution, under Sections 16 (2) (d) and 17 (3), recognizes physically and emotionally challenged children as a vulnerable group that needs to be supported financially, materially, technically and be protected against all forms of exploitation and abuse. Types of disability for children aged 0-14, and for females of all ages, as reported by the 2006 census are as follows:

• Deafness
70. Special education facilities are the most comprehensive services provided by the States to meet the peculiar needs of children with severe disabilities. The National Policy on Education (2004) makes provision for such education, stating that it is intended to equalise educational opportunities for all children, irrespective of their physical, mental or emotional challenges. Alongside the Federal and State Governments, NGOs and Religious Organisations have been active in the provision of education, welfare and rehabilitation services for the physically challenged children. The various governmental and non-governmental organizations also operate vocational training centres, special schools and homes for physically challenged children in different parts of the country.

Table 6: Percentage breakdowns of types of disability of children 0 - 14 years

<table>
<thead>
<tr>
<th>Age group</th>
<th>Any challenge</th>
<th>Crippled or Lame</th>
<th>Dumb</th>
<th>Deaf</th>
<th>Blind</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>0.3</td>
<td>42.2</td>
<td>7.4</td>
<td>9.9</td>
<td>3.1</td>
<td>39.4</td>
</tr>
<tr>
<td>5-9</td>
<td>0.4</td>
<td>36.1</td>
<td>21.3</td>
<td>18.0</td>
<td>2.7</td>
<td>29.8</td>
</tr>
<tr>
<td>10 - 14</td>
<td>0.5</td>
<td>30.7</td>
<td>15.4</td>
<td>18.7</td>
<td>12.4</td>
<td>31.6</td>
</tr>
</tbody>
</table>

Source: 2006 CWIQ (NBS)

71. There are several institutions providing special education for physically challenged children. Although schools for those with visual impairments are prominent, there is a marked zonal disparity in the distribution of these schools. The South West has the largest number of schools (38) for physically challenged children as shown in figure 5 below. Overall, the number of institutions is still insufficient to meet the educational needs of physically and emotionally challenged children.
72. Table 8 below shows the population distribution of physically and emotionally challenged children by literacy status. The rate of literacy of children varied with age and sex. About half of the physically and emotionally challenged children were not literate. The female population were less literate than male children.

<table>
<thead>
<tr>
<th>Age</th>
<th>Total Disability</th>
<th>%</th>
<th>Literate</th>
<th>%</th>
<th>Not Literate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-9</td>
<td>161,631</td>
<td>100</td>
<td>91,942</td>
<td>56.9</td>
<td>69,689</td>
<td>43.1</td>
</tr>
<tr>
<td>10-11</td>
<td>47,510</td>
<td>100</td>
<td>23,526</td>
<td>49.5</td>
<td>23,984</td>
<td>50.5</td>
</tr>
<tr>
<td>12-17</td>
<td>50,302</td>
<td>100</td>
<td>32,686</td>
<td>65</td>
<td>17,617</td>
<td>35</td>
</tr>
</tbody>
</table>

Male

<table>
<thead>
<tr>
<th>Age</th>
<th>Total Disability</th>
<th>%</th>
<th>Literate</th>
<th>%</th>
<th>Not Literate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-9</td>
<td>76,292</td>
<td>100</td>
<td>47,564</td>
<td>62.3</td>
<td>28,728</td>
<td>37.7</td>
</tr>
<tr>
<td>10-11</td>
<td>24,446</td>
<td>100</td>
<td>12,517</td>
<td>51.2</td>
<td>11,929</td>
<td>48.8</td>
</tr>
<tr>
<td>12-17</td>
<td>27,605</td>
<td>100</td>
<td>18,890</td>
<td>68.4</td>
<td>8,715</td>
<td>31.6</td>
</tr>
</tbody>
</table>

Female

<table>
<thead>
<tr>
<th>Age</th>
<th>Total Disability</th>
<th>%</th>
<th>Literate</th>
<th>%</th>
<th>Not Literate</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-9</td>
<td>85,339</td>
<td>100</td>
<td>44,379</td>
<td>52</td>
<td>40,961</td>
<td>48</td>
</tr>
<tr>
<td>10-11</td>
<td>23,064</td>
<td>100</td>
<td>11,009</td>
<td>47.7</td>
<td>12,055</td>
<td>52.3</td>
</tr>
<tr>
<td>12-17</td>
<td>22,698</td>
<td>100</td>
<td>13,795</td>
<td>60.8</td>
<td>8,902</td>
<td>39.2</td>
</tr>
</tbody>
</table>

Source: Nigeria 1991 Population Census-Post Enumeration Survey (PES) by NPopC/UNFPA 2002

73. The rate of disability of children per 1000 is 3.1 and 3.0 for ages 0-5 and 6-11 respectively. But the rate of disability in these age groups does not vary greatly by sex. For ages 12-17 the rate of disability increases from that in childhood, to 4.2 disabled persons per 1000. The rate is higher among male than female. (See tables 9 and 10).
Table 9: Number and percentage distribution of persons 6-24 with disability by educational attainment

<table>
<thead>
<tr>
<th>Total Population 6-24 with Disability</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literacy Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pop. 6-24 with disability</td>
<td>2947</td>
<td>100</td>
</tr>
<tr>
<td>Illiterate</td>
<td>1381</td>
<td>46.9</td>
</tr>
<tr>
<td>Literate</td>
<td>1566</td>
<td>53.1</td>
</tr>
<tr>
<td>Educational Attainment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td>689</td>
<td>44</td>
</tr>
<tr>
<td>JSS/Modern</td>
<td>212</td>
<td>13.5</td>
</tr>
<tr>
<td>SSS/Tech</td>
<td>211</td>
<td>13.5</td>
</tr>
<tr>
<td>Poly/University</td>
<td>33</td>
<td>2.1</td>
</tr>
<tr>
<td>Others</td>
<td>409</td>
<td>26.1</td>
</tr>
<tr>
<td>NR</td>
<td>12</td>
<td>0.8</td>
</tr>
<tr>
<td>Total</td>
<td>1566</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Nigeria 1991 Population Census-Post Enumeration Survey (PES) by NPopC/UNFPA 2002

Table 10: Level of disability among population 0-17 by age and sex

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Population Male</th>
<th>Population Female</th>
<th>Total Male</th>
<th>Total Female</th>
<th>Total Disability Rate /1000</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5</td>
<td>8,911,055</td>
<td>8,524,344</td>
<td>17,435,399</td>
<td>25,017</td>
<td>3.2 2.9 3.1 110</td>
</tr>
<tr>
<td>6-11</td>
<td>8,356,153</td>
<td>7,937,909</td>
<td>16,294,062</td>
<td>23,495</td>
<td>3.0 3.0 3.0 100</td>
</tr>
<tr>
<td>12-17</td>
<td>6,125,750</td>
<td>5,869,711</td>
<td>11,995,461</td>
<td>22,842</td>
<td>4.5 3.9 4.2 115</td>
</tr>
</tbody>
</table>

Source: Nigeria 1991 Population Census-Post Enumeration Survey (PES) by NPopC/UNFPA 2002

Measures to protect the rights of physically and emotionally challenged children:

- Most states have special education and/or rehabilitation centres.
- In some states, physically and emotionally challenged children have access to scholarship as well as, free medical care, school bus, recreation facilities and book subsidies.
- They are provided with support gadgets like crutches, wheel chairs, tricycles, hearing aids, and Braille machines to facilitate their development.
- Special sports are designed for their convenience and active participation.
- In some states some of the physically challenged children are mainstreamed into normal school system

Special measures and policies that relate to care of physically and emotionally challenged children

- Establishment of schools, homes, and rehabilitation centres in most states for the physically and emotionally challenged children and others in difficult circumstances, is ongoing by government, non-governmental organizations and Faith Based Organisations. The rehabilitation centres provide care and emotional stability for these children.
- Physically and emotionally challenged children are being trained in crafts and other occupational jobs like carpentry, tailoring and weaving amongst others in the centres mentioned above.
The National Policy on Education and the Blue Print on Special Education prescribe the welfare and care of physically and emotionally challenged children.

The National Reproductive Health Policy and Strategy serves as an effective national platform for strengthening reproductive health activities in Nigeria and facilitates the achievement of improved health, well being, and overall quality of lives of all children and people of Nigeria including the physically and emotionally challenged children.

The Government, through the Immunization programme and Food Fortification Programmes, effectively puts in place annual plans to detect, control and eliminate the outbreaks of diseases affecting child health, growth and development. Disease that cause impairments and disabilities of all sorts in children, usually receives more attention.

The cumulative effect of the Child’s Rights Act, 2003 (Sections 11, 13 and 16) guarantees the rights of physically and emotionally challenged children to dignity, self-reliance, active participation in community as well as access to training, health care and rehabilitation services.

Strategies for more effective intervention in favour of physically and emotionally challenged children

- Capacity building for caregivers and teachers, with a view to ensuring self-actualization for the physically and emotionally challenged children is ongoing.
- Intensification of advocacy activities by Government and non-governmental organisations, to enlighten the general public on the plight of physically and emotionally challenged children.
- Provision of adequate budgetary allocations for programmes for the physically and emotionally challenged children.
- Monitoring and evaluation of progress achieved in the care for the physically and emotionally challenged children.
- Timely data collection on issues relating to physically and emotionally challenged children.
- Early detection of disabilities where feasible to be carried out in utero.
- Setting up more schools for the physically and emotionally challenged children.
- Creation of more specialized teacher - training colleges to handle children with special needs.
- Equipping public schools with modern facilities to meet the demands of children with special needs.

Programmes and services available to physically and emotionally challenged children

Special educational facilities are the most comprehensive and well-focused services provided by Government to meet the special needs of physically and emotionally challenged children. The National Policy on Education provides for equal educational opportunities for all children, irrespective of their physical, mental or emotional challenges. Alongside the Federal and State Governments, United Nations Agencies like UNICEF, UNDP, WHO and UNFPA and CSOs have been especially active in the provision of education, welfare and rehabilitation services for physically and emotionally challenged children.
Children in street situations

76. Street children found in the country struggles for their existence, living in dilapidated shelters, such as abandoned buildings and broken down vehicles. In the baseline survey undertaken by the UNICEF CRC Chair with the University of Lagos, some 317 children in street situation were interviewed. The distribution of children by states is shown in figure 6 below, indicating that, the percentage of street children from Akwa Ibom is highest (9.8 per cent) followed by Taraba 6.0 per cent and Bauchi 5.7 per cent. The lowest percentages (0.3 per cent) were found in Zamfara, Bayelsa, Kebbi and Niger due to the mobile nature of the children and their adaptive ways of fencing off intruders.

Figure 6: Percentage distribution of street children by State


77. The distribution of street children by age and sex depicts that most children found in the streets -93.1 per cent were males while only 6.9 per cent were females. About half (48.6 per cent) of street children were between 15 to 17 years, while 40.7 per cent were between 10 to 14 years. The percentages of street children between ages 5 to 9 years and over 18 years were 5.7 per cent and 5.0 per cent respectively.
78. The report recommended to the Government a transformative social protection framework that encompasses protective, preventative, promotive and transformative social protection measures, in view of the severe, multiple and intersecting deprivations, vulnerabilities and risks faced by the children in street situation as reported and enumerated in the survey.

**Refugee children**

79. In line with the principle of family unity and the protection of children, 2,280 children were granted refugee status from 2006-2009. The refugee child enjoys all the rights, benefits and protection enshrined in various instruments on the protection of the child.

80. Refugee children have the privilege of benefiting from the various programme of the National Commission for Refugees (NCFR). In collaboration with the UNHCR, 282 Children of Liberia and Sierra-Leone origin whose parents opted for various durable solutions, following the return of peace to their countries are adequately catered for under the programme. 44 children from Liberia and 18 from Sierra-Leone were repatriated to their home country while 113 Liberians and 122 Sierra-Leoneans were integrated into the Nigeria community within the frame work of the ECOWAS Protocol on free movement. Four other refugee children that opted for exemption had their request granted. Other refugee children were resettled to a third country of Asylum alongside their parents for various reasons including the children’s health.

**Education**

81. In line with the NCFR mandate and with support from UNHCR, 145 children were given elementary educational scholarship and 68 children at secondary level from Lagos, Ijebu Ode and Taraba areas between 2007 and 2009. To facilitate the absorption of refugee children into the educational system, UNHCR, through the NCFR, renovated some school buildings that have refugee pupils in attendance, as well as provided instructional materials to these schools.

- 141 number of students had their school fees paid at the secondary school level in Lagos and Ogun States
- 257 number of pupils had their school fees paid for them at the primary school level in Lagos and Ogun states
- 12 numbers of secondary schools and 10 numbers of primary schools benefited from the provision of educational and writing materials distributed in schools where refugee and asylum seeking children are schooling along with their host communities.
- A large number of class room blocks and buildings were renovated in most of these schools which are situated in the areas where refugee/asylum-seeking children are schooling along with their host communities.
- Refugee children are also being trained in skills acquisition programmes and vocational training is provided at various refugee centres/settlements in Nigeria.

**Registration and profiling**

82. Asylum-seekers and refugees are properly registered and profiled including registration at birth to determine the number of children that are involved. Out of the 1326 asylum-seekers, 349 of them were granted refugee status and 95 of those were children. 450 children were registered at birth as refugee children while 129 children were registered as asylum-seeking children.
Health and nutrition

83. All issues relating to children’s health are given top priority. 16 children are on medical subsistence allowance on monthly basis from 2006 – 2009 in the Lagos liaison office of NCFR alone. Preventive measures as enjoyed by Nigerian Nationals such as children immunization are equally in place for refugee children.

- Government hospitals are available and utilized by refugees thereby keeping the child mortality rate at the barest minimum.
- Sanitary facilities were constructed in Amana in Cross River State and Ityuave in Benue State for the benefit of refugees, their children and host communities. This helps in ensuring that children live and thrive in hygienic environments. In addition, specially prepared nutritional supplements for the malnourished and provision of sanitary pads to refugee female children are done on monthly basis.
- Provision of an attending physician who attends to refugees on a daily basis at the field offices and the continuous provision of medical facilities in hospitals where the refugees attend with their host communities in Ogun, Taraba, Benue, Cros-River and Lagos states.
- Periodic payment of medical bills for refugees at designated government hospitals around their settlements in Ogun, Taraba, Lagos, Benue, and Cross-River states, depending on the size of the settlement.
- Regular reimbursement of medical bills (once in every three months for urban refugees in Lagos and Ogun States).
- Access to good sanitary conditions:
  - Construction of 20 units of toilet facilities and digging of 8 water wells in their settlements for the refugees and host communities alike.
  - Construction of four units of spring water catchment in four villages for those returnees, their children and their host community.
  - construction of one water treatment plant for returnee settlement and their host community

Counselling services

- Child sensitive counselling services and programs are organized periodically for adolescents living in refugee settlements on HIV/AIDS, STDs, as well as on reproductive health issues in all the settlements.

Protection services

- Refugee Status Determination: 95 number of asylum seeking children were granted recognition through a proper refugee status determination during this period and particular attention is paid to these children to ensure that they are recognized along with their families bearing in mind the principle of preserving family unit.

Legal protection

84. Children are protected from all forms of sexual abuse and exploitation, through domestic laws and legislations as well as legal institution, where those that perpetrate these crimes against them are duly prosecuted. A case of child defilement of a refugee girl child is currently being prosecuted in court.
Special empowerment programmes

- Five units of community centres for skills acquisition were constructed in 5 villages where the returnees are settled, for returnee youths and their host community.
- Collaboration with UNHCR and other stake holders in the implementation of matters relating to refugee children and asylum seeking children

Birth registration

85. Refugees and asylum-seekers are well enlightened about the importance of birth registration and are encouraged to utilize the opportunity through the appropriate authorities’ i.e. National Population Commission, the Local Government Authorities, and hospitals.

Protection

86. Unaccompanied minors are put in the care of foster parents after a Best Interest Determination (BID) assessment has been conducted by the Community Service units of both the UNHCR and NCFR. There is also legal protection for refugee children by way of prosecution of people involved in the violation of the rights of refugee children to act as deterrence measures.

Reply to the issues raised in paragraph 14 of the list of issues

National response

87. To ensure protection of children in conflict with the Law, the Child’s Rights Act, 2003 was enacted to provide for a new system of child justice administration and for the care, support and protection of vulnerable children and those in conflict with the law. The child justice administration system in Nigeria as contained in the CRA provides for both non-custodial and custodial institutional measures for children in conflict with the law. It further provides for the protection of children in need of care and special attention.

88. Actions taken in implementing the provisions include:

(a) Free legal representation/aid for children: Mechanisms have been put in place to provide children free legal service delivery through the establishment of pro-bono services by the Nigerian Bar Association. Similar free legal service delivery is being rendered by various NGOs, the respective offices of the Public Defender and the various zonal offices of the Legal Aid Council;

(b) Family Courts are being established in Nigeria as the platform for effective implementation of the child justice administration. Family courts are already established and functioning in Abia, Lagos, Ondo, Anambra, Akwa-Ibom, Plateau, Kwara, Nasarawa States and the FCT. Efforts are in progress to establish same in all the states that have passed the Child’s Rights Laws;

(c) Diversion programmes are currently being introduced into the child justice system. Specifically Alternative Dispute Resolution mechanisms are being strengthened to ensure that all disputes/conflicts involving children are settled through victim-offender mediation and or family conferences. Magistrates handling children are also being encouraged to adopt diversion programmes;

(d) Advocacy strategies are being employed with legislators and policy makers to ensure the provisions of the Children and Young Persons Laws (CYPL), the Penal Code, the Criminal Procedure Code and the Sharia Penal Code are reviewed and brought in conformity with the provisions and standards of the AUCRWC and CRA;

(e) The CRA and CRLs have all excluded the application of death penalty to persons below 18 years;
Relevant professionals and child care givers are acquiring improved knowledge on appropriate National and International standards to ensure better care and support for children in conflict with the Law and other vulnerable children;

Both the Social Welfare and the Child Development Departments at the state and Federal levels have in place programmes on rehabilitation and re-integration of vulnerable children;

National plan of Action on Violence against Children has been developed, with well articulated training processes, to train parents, teachers, law enforcement officials, care givers, judges and health professionals in identification, reporting and management of violence against children;

FMWA&SD is collaborating with Community Based Organizations (CBOs) to sensitize parents, teachers, care givers, etc, on the provisions of the CRA and CRLs;

The development by the Nigerian Bar Association (NBA) and UNICEF of the assessment tool for the implementation of Child Justice Administration (CJA) in Nigeria in May 2008 helps State Governments in the implementation of Child’s Rights Laws.

**Children deprived of their liberty**

The provisions of the Child’s Rights Act are consistent with those of the United Nations Standard Minimum Rules for the Administration of Juvenile Justice (the Beijing Rules) which prohibits incarceration of children unless there is no other way of dealing with them satisfactorily.

The Act makes the following provisions:

(a) Prohibition of corporal punishment (Section 221(1) (b) CRA 2003);

(b) Abolition of the “age of criminal responsibility.” Instead, the Act gives the age of 18 years to be the age below which a child cannot be subjected to the adult criminal processes, but can only be subjected to the child justice administration process (Section 204 CRA, 2003);

(c) Prohibition of joint trial of children with adults under any circumstance (Section 205 CRA);

(d) The separation of children from adults in detention in all circumstances (Section 222 CRA).

**Measures taken to protect young children kept in prison with their mothers**

The Child’s Rights Act in Sections 221-225 states that ‘No child shall be ordered to be imprisoned, subjected to corporal punishment or death penalty or have death penalty recorded against him’...and a court shall on sentencing of an expectant or nursing mother consider a non- institutional sentence as an alternative measure to imprisonment. Where institutional sentence is mandatory, an expectant and nursing mother shall be detained at a Special Mother’s Centre for a period not longer than the time the child would have attained the age of 6 years. The Act has thus indicated that special treatment should be given to expectant or nursing mothers, and a mother must, under no circumstances, be imprisoned with the child.

- A bill is currently at the national assembly for the amendment of the Prison Act to give prison officials the authority or latitude to determine by age place of placement of children.
• The CRA/CRLs provisions stipulates that nursing mothers be kept in a separate place outside the prison because of the child.

• There is an ongoing training of judicial officers in Nassarawa, Ondo, Akwa-ibom, Lagos, Abia and Anambra states on the effective operation of family courts, while other states like the FCT, Kwara and Delta are on advanced stage of planning for the training of the judicial officers.

Measures taken to ensure that deprivation of liberty of children is only a measure of last resort and for the shortest period possible

• The Childs Rights Acts provides that detention of children is a measure of last report.

• In addition to above, continued training and sensitization of law enforcement agencies on the provisions of CRA and other conventions that detention of children is a matter of last resort. This is done in collaboration with the National Judicial Institute as well as state judiciaries.

• Training of desk officers and the establishment of Human Rights/Child Rights desk at police stations and other agencies with arresting powers for the treatment of cases of children found in conflict with the law is ongoing.

Reply to the issues raised in paragraph 15 of the list of issues

92. The Child’s Rights Act (2003), has made worthy and notable provisions for the protection of children from the sad effects associated with child-witchcraft. Aside from the provisions of Chapter IV of the 1999 Constitution of the Federal Republic of Nigeria, the CRA provides in Section 11 of CRA states that every child is entitled to respect for the dignity of his person, and accordingly, no child shall be:

• Subjected to physical, mental or emotional injury, abuse, neglect or maltreatment, including sexual abuse

• Subjected to torture, inhuman or degrading treatment or punishment

• Subjected to attacks upon his honour or reputation

93. In addition, Section 40 of the CRA provides for the application of the Criminal Law to the protection of children under the law. Accordingly, the accusation of people of witchcraft is prohibited and punishable under the respective Criminal Codes of the various southern states where this practice is prevalent.

Measure taken to eliminate stigmatization

94. There are a few recorded success stories of reunification with families and reintegration into communities, by the notable NGO creating interventions in Akwa Ibom State (CRARN). However, the vast majority of accused children continue to be stigmatized due to the negative mind set of the people. The recorded successes have occurred when the children have been taken in by their grandparents or other close family members who live in totally different communities. The best successes have been recorded in cases where the parents have kept the accusation secret from other community members. They have then taken the children for counselling at the child protection CSOs on a daily basis without having them live in.

95. Ongoing public enlightenment efforts/programmes and advocacy rallies are yielding positive results. The positive results include commitment of the Executive governor to leverage resources for the implementation of the CRL passed in the State. Advocacy efforts and Zonal workshop and chore by NAPTIP/UNICEF on child rejection in South-South States created an opportunity for the issue to be extensively discussed and for high level
commitments to be extracted from key players such as the Governors, wives of Governors and Commissioners of relevant ministries. Family reunion and follow up of over seventy rescued victims of child-witch stigmatization in Oron LGA in collaboration with the Akwa Ibom State Ministry of Women Affairs- July 2009. NAPTIP also organized a five-day workshop on Child Witch stigmatization in Oron LGAs in September 2009 to raise awareness and create behavioural change. The Akwa-Ibom state government has provided Centres to rehabilitate the accused children and to protect them from further stigmatization; they also receive formal education and vocational skills.

96. Other measures being taken to eliminate the belief and stigmatization of children accused of witchcraft in Akwa Ibom State of Nigeria are as follows:

- Passage of Akwa Ibom Childs Right Law 2008
  - Section 274 - Accusation of a child of witchcraft, punishment is 10 years imprisonment or N500,000.00 fine.
  - Section 275 (1)- Purported exorcism subjecting a child to torture etc
  - Punishment is 10 years, without an option of fine.
  - Section 275 (3) Premises, like church, etc used for the exorcism, torture, etc shall be forfeited to government
- Family courts are now established in Akwa Ibom state to prosecute offenders branding children as witches.
- Establishment of NAPTIP zonal office in (Uyo) Akwa Ibom state is a strong measure to investigate, rehabilitate, prosecute, and carry out advocacy campaign to the endemic communities and families.
- Organizing awareness programs for religious and opinion leaders.
- Establishment of a system of monitoring churches suspected of abusing children.

Investigation status

97. Government of Akwa Ibom state through the activities of the rescue agencies such as police, NGOs, good Samaritans, immigration, and SSS in collaboration with NAPTIP investigation department has investigated over 120 cases of all forms of abuse and violence against children in 2009.

Reply to the issues raised in paragraph 16 of the list of issues

National response

98. The challenge of internally displaced persons has been of grave concern to the Nigerian Government in recent times. This is attributable to the various religious, ethnic and sectarian crises that occurred in some parts of the country.

99. The security and welfare of the people are the primary responsibility of the Government and the Nigerian constitution stands to protect all groups and individuals including internally displaced persons, therefore the responsibility for policy formulation and implementation of projects relating to internally displaced persons vests on the president. To achieve this, some relevant agencies, including the National Commission For Refugees (NCFR) were brought under the authority and supervision of the president to implement programs relating to internal displacement, while the Federal, State and Local governments are to commit substantial resources to achieve the objectives contained in the national policy. In addition, the United Nations, humanitarian organizations, donor
agencies and non-governmental organizations are encouraged by the Government to support this policy.

100. However, the NCFR was further given a presidential mandate (a detailed administrative policy) to take charge of matters relating to migration and internal displacement and to this effect it represented Nigeria at the signing of the AU Convention for the Protection and Assistance of Internally Displaced Persons in Africa (Kampala Convention). Currently the instrument of ratification of the said convention has been prepared and is awaiting the president’s signature for ratification. Presently, the NCFR Act is being amended to give wider legal powers to NCFR to fully actualize the mandate. To this end, a draft amendment bill with adequate provisions on Internally Displaced Persons is before the National Assembly.

Registration and verification of IDPs

101. Nigeria has approximately 12,940 internally displaced children, including unaccompanied children. The system of registration is by way of distribution of needs and camp assessment forms, collation and analysis of the forms and obtaining of statistical data according to gender, age, house hold type, marital status and physical ability. Table 11 and 12 below indicates percentage distribution of IDPs in the most prominent states (Plateau and Bauchi) where the country had experience communal clashes and conflicts.

Table 11: Profiling and Genders Issues Classification in IDPs -Plateau State

<table>
<thead>
<tr>
<th>S/N</th>
<th>CLASSIFICATION</th>
<th>NUMBER</th>
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<tbody>
<tr>
<td>1</td>
<td>Women</td>
<td>13,662</td>
<td>41.8</td>
</tr>
<tr>
<td>2</td>
<td>Men</td>
<td>7,961</td>
<td>24.4</td>
</tr>
<tr>
<td>3</td>
<td>Accompanied Children</td>
<td>8960</td>
<td>27.4</td>
</tr>
<tr>
<td>4</td>
<td>Elderly</td>
<td>1372</td>
<td>4.2</td>
</tr>
<tr>
<td>5</td>
<td>Unaccompanied Children</td>
<td>700</td>
<td>2.1</td>
</tr>
<tr>
<td>6</td>
<td>Disabled</td>
<td>34</td>
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</tr>
<tr>
<td></td>
<td>Total</td>
<td>32,689</td>
<td>100</td>
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</table>


Table 12: Profiling and Genders Issues Classification in IDPs -Bauchi State

<table>
<thead>
<tr>
<th>S/N</th>
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<th>NUMBER</th>
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</tr>
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<td>1</td>
<td>Women</td>
<td>4332</td>
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<td>2</td>
<td>Men</td>
<td>2532</td>
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<td>Accompanied Children</td>
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<td>4</td>
<td>Elderly</td>
<td>163</td>
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<td>5</td>
<td>Unaccompanied Children</td>
<td>409</td>
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<tr>
<td>6</td>
<td>Disabled</td>
<td>35</td>
<td>0.3</td>
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<tr>
<td></td>
<td>Total</td>
<td>10,345</td>
<td>100</td>
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</table>


Measures taken to prevent the involvement of children in conflict and communal violence

- The CRA prohibits the use of children during conflicts and for communal violence.
- The free and compulsory universal basic education program which incorporates the teaching of civic education in schools with special emphasis on the dangers of involvement of children in communal violence/clashes.
The Institute for Peace and Conflict Resolution have a comprehensive peace education programmes including programmes to protect children during conflicts and emergency situations.

Establishment of skill acquisition and vocational training centres to train children on skills for self reliance and positive engagement. These children are thereafter empowered by agencies like National Directorate of Employment, National Agency for Poverty Eradication Program (NAPEP) funds and materials for effective utilization of skills so acquired.

**Reply to the issues raised in paragraph 17 of the list of issues**

**International cooperation measures**

102. International treaties and protocols on women and children ratified by the Government as at December 2009 include:

- ILO Convention 138 (1973) concerning Minimum Age for Admission to Employment.
- Optional Protocol to the Convention on Elimination of All Forms of Discrimination against Women.
- Convention against Torture and other Cruel, Inhuman and Degrading Treatment or Punishment.
- Convention against Transnational Organized Crime.
- Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children.
- Optional Protocol on the Civil Aspects of International Child Adoption.
- International Convention for the Protection of All Persons from Enforced Disappearance
- Optional Protocol to the Convention Against Torture; and

**Measures taken to prevent and protect children from child labour, in particular those involved in forced labour in agriculture, construction, mining and quarrying, and the use of girls used as domestic workers**

**Legislative measures**

103. The country has put in place the following legislative measures to protect children in the passage of the Child’s Rights Act and Childs Rights Laws at the state level.

**Administrative measures**

- Establishment of functional child labour units in all the states of the federation and the headquarters.
- Training of 120 labour inspectors as critical mass to handle child labour issues
- Formulation of a draft policy on child labour.
• Establishment of a pilot child labour monitoring system in 6 communities in Ondo state with emphasis on agriculture-commercial cocoa farming.

• Review of existing labour laws to capture issues of child labour and HIV/AIDS Bill awaiting passage by the National Assembly.

**Measures taken to harmonize and raise the minimum age for employment.**

• Age for entry into public service has been reviewed and raised to 15 in line with the ILO convention 138 (minimum age for employment convention).

• Conducting of regular labour inspection by the Federal ministry of Labour to ensure that children are protected from exploitative and hazardous forced and labour.

**Reply to the issues raised in paragraph 18 of the list of issues.**

104. The issues affecting children and requiring the most urgent attention are as follows:

• Conduct massive advocacy, sensitization and public education on issues that will ensure popular understanding and acceptance of the CRA in the Northern States.

• Ensure passage of the CRA in the remaining states of the federation and setting up functional structures and systems including setting up of Family Court in all the States that have passed the Law and Specialized Police Units.

• Ratify and domesticate the optional protocols on the rights of the child.

• Involve the civil society particularly traditional rulers, religious and community leaders.

• Empower the National, State and Local Government Child Rights Implementation Committee to effectively monitor the implementation of the United Nations Convention on the Rights of the Child.

• Ensure that children’s issues are fully incorporated and mainstreamed into Vision 2020.

• Ensure integration of birth registration into the existing public health campaigns to reach the under-five population.

• Establish an efficient, coordinated communication and chain of command between the three tiers of government to address children’s health issues on a continuous basis and prevention of mother to child transmission of HIV/AIDS.

• Promote, protect and ensure the equal rights and fundamental freedoms of all children with disabilities. Promote and ensure enrolment and completion of children in primary schools and junior secondary schools and mainstreaming the Almajiri children into the social and educational system in the country.

• Build capacities of child care givers and child justice administrators in most states that have passed the Child’s Rights Laws to provide recovery services for the thousands of vulnerable children living in the streets and in institutions including those in conflict with the law and those in need of special care and attention.

• Strengthen national protective systems for children and institutional capacity of government for effective implementation and monitoring of child rights issues and programmes.

• Ensure that national responses to Orphans and Vulnerable Children are properly resourced, coordinated, implemented and monitored.
• Ensure provision of essential care and services for children including community mobilization for social change:
  – Increase knowledge and data collection on violence against children, child witches, early marriages, child labour etc.
  – Strengthen the protective roles of families and communities
  – Promote meaningful participation of children as agents of change
  – Support public education, social dialogue and media involvement in communication for children
  – Strengthen CSO Networks and partnerships for child protection and participation.

PART II

Reply to the issues raised in part II of the list of issues

1. Pending Bills before the National Assembly
   • Physical Disability Bill;
   • A Bill on Abolition of All Forms of Discrimination Against Women in Nigeria And other Related Matters;
   • Elimination of Violence Bill;
   • Anti – Discrimination and Stigmatization Bill, Enugu State;
   • A Bill for the Establishment of Persons with Disabilities;
   • A Bill to amend the Prisons Act to give Prison officials the authority or Latitude to determine by age before placement of children;
   • A Bill to amend the NCFR Act

2. State Houses of Assembly
   • Draft Child’s Right Bill of Kano State
   • Girl Child Education Bill – Ebonyi State
   • Gender Bill, Kaduna State;
   • Gender and Equal Opportunity Bill, Imo State;
   • Equal Opportunity Bill, Ebonyi State;
   • Gender Mainstreaming Bill, Ogun State;

3. New Institutions and their mandate
   • Family Courts established in 8 States to ensure speedy child justice systems
   • Orphans and Vulnerable Children’s Unit (OVC) was established in 2004 and have been upgraded into a division in the Federal Ministry of Women Affairs and Social Development.

4. Newly implemented policies and programmes
   • The Nigerian Police Force has introduced pilot child friendly spaces at the juvenile welfare desks in twelve police zonal commands across the country;
• The Nigeria Police, Nigerian Immigration Services and Nigeria Custom Services has established special units to handle cases relating to violence against children;

• National Policy on Integrated Disease Surveillance and Response, 2008;

• The Ministry of Women Affairs Social Development embarked on advocacy and Resource Mobilization visits to States to solicit for support and increased budgetary allocation for Women, Children and other Vulnerable Groups;

5. **Recent ratifications of International Human Rights, or related to human rights instruments**


• Optional Protocol to the Convention Against torture and other Cruel Inhuman or Degrading Treatment or Punishment; 19 January 2009

• Convention for the Protection of all Persons from enforced disappearance; 19/1/09

• International Convention for the Protection of migrant workers And Members of Their Families; 19 January 2009;

• Convention on Persons with Disabilities.

**Part III**

**Reply to the issues raised in part III, paragraph 1 of the list of issues**

<table>
<thead>
<tr>
<th>Nationality</th>
<th>SEX</th>
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<td>M</td>
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<td>Cameroun</td>
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<tr>
<td>Democratic republic of Congo</td>
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<tr>
<td>Liberia</td>
<td>22</td>
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<td>Sudan</td>
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<tr>
<td>Sierra-Leone</td>
<td>-</td>
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<tr>
<td>Guinea</td>
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</tr>
<tr>
<td>Total</td>
<td>39</td>
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</tbody>
</table>


**Reply to the issues raised in part III, paragraph 2 of the list of issues**

105. Under the Borstal Institutions and Remand Centres Act Cap 38 LFN 2004, remand homes are to be managed by States and have been established for four main purposes, namely - for children beyond parental control, lost but found children in need of shelter, children in conflict with the law, or juvenile delinquents and children in need of care and protection. There are only three Borstal homes situated in Kaduna, Abeokuta and Ilorin being correctional centres to provide educational and vocational services to children resident in the institutions.
Table 14: Number of children in Borstal Remand Centre, as at February 2010

<table>
<thead>
<tr>
<th>Type of Offence</th>
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<tr>
<td></td>
<td>kaduna</td>
<td>Abesokuta</td>
</tr>
<tr>
<td>Stealing/Theft</td>
<td>65</td>
<td>35</td>
</tr>
<tr>
<td>Beyond parental control</td>
<td>53</td>
<td>36</td>
</tr>
<tr>
<td>Armed Robbery</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Sex Offences</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Assault</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Murder</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Drug abuse</td>
<td>26</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>148</strong></td>
<td><strong>78</strong></td>
</tr>
</tbody>
</table>


Figure 8: Percentage distribution of children found in detention in 12 remand centres

106. There are about 40 remand homes situated in most states of the country established as remand centres to cater for all the four categories of children stated above. Data from the Borstal institutions are shown in table 14 with no female child resident. In 2009, the National Human Rights Commission in collaboration with the National Bar Association and Federal/State Ministries of Women Affairs and UNICEF conducted an assessment of remand centres only 12 remand centres in 12 pilot states (the assessment of the remaining states and remand centres is yet to be conducted) with findings reported in table 15. Some 282 children were found in the remand centres at the time of survey with 77 per cent male and 23 percent female.
Table 15: Number of children found in remand centres in 12 States as at December 2009

<table>
<thead>
<tr>
<th>S/No</th>
<th>Type of Offences</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Rescued</td>
<td>86</td>
</tr>
<tr>
<td>2</td>
<td>Stealing/Theft</td>
<td>84</td>
</tr>
<tr>
<td>3</td>
<td>Murder</td>
<td>32</td>
</tr>
<tr>
<td>4</td>
<td>Raided</td>
<td>26</td>
</tr>
<tr>
<td>5</td>
<td>Public Disorder Offences</td>
<td>17</td>
</tr>
<tr>
<td>6</td>
<td>Political Offences</td>
<td>11</td>
</tr>
<tr>
<td>7</td>
<td>Lost and found</td>
<td>8</td>
</tr>
<tr>
<td>8</td>
<td>Beyond Parental Control</td>
<td>5</td>
</tr>
<tr>
<td>9</td>
<td>Robbery</td>
<td>4</td>
</tr>
<tr>
<td>10</td>
<td>Kidnapping</td>
<td>3</td>
</tr>
<tr>
<td>11</td>
<td>Others</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>282</strong></td>
</tr>
</tbody>
</table>

107. Out of the 86 children ‘rescued’ from the streets, 77 children were ‘rescued’ from the streets of Lagos. The rescued children were found by the Police or brought to Police Stations and were eventually taken to the remand centres for protective custody prior to tracing their families and eventual reintegration or reinsertion into their families. These were mainly children from other states within the country, trying to escape from harsh treatments in their family environment, children without parental care and guidance and orphans without any primary caregiver. It can be inferred from the survey that child mobility is prevalent in most cosmopolitan states especially Lagos with the main push factor being poverty and a drive for improved socio-economic status. The survey recommended amongst others the development and implementation of non-custodial measures and the improvement of care and rehabilitation interventions and reintegration support for orphans and vulnerable children. This will include increasing coordination between line ministries and other role players, the allocation of realistic resources and the development of improved management systems to ensure effective implementation of the child justice systems within the country. There is insufficient data to ascertain the number of complaints received on any form of ill-treatment experienced by children deprived of their liberty. Information on the number of prosecutions and punishment of perpetrator undertaken with respect to such complaints are not immediately available as at the time of developing this response.

Reply to the issues raised in part III, paragraph 3 of the list of issues

108. The National Human Rights Commission established under the National Human Rights Commission Act, No. 22 of 1995 is responsible for Human Rights promotion, and monitoring as well as the investigation of violations of the rights of children, as provided under the Constitution, the CRA and International Human Rights Instruments. About 76 complaints on abuse, neglect or violence against children were reported to the Commission in 2009.

109. NAPTIP is the government agency responsible for combating trafficking and prosecuting offenders/traffickers. Complaints on abuse or violence against trafficked children are lodged with the agency. As of December 2009/April 2010, some 268 cases of child trafficking and abuse were reported to NAPTIP, 156 were investigated, 108 traffickers/offenders/perpetrators have been arrested and 67 prosecuted and convictions secured in the Law courts across the country, as shown in figure 9 below.
Figure 9: NAPTIP Investigation Report

Source NAPTIP Records: December 2009