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| **UNITED**  **NATIONS** |  | **CRC** |
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## committee on the rights of the child

## consideration of reports submitted by states parties

## under article 44 of the convention

# Consolidated second, third and fourth periodic reports of States parties due in 2008

## ANGOLA[[1]](#footnote-1)\*

[9 July 2008]

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**Abbreviations and acronyms**

|  |  |  |
| --- | --- | --- |
| **CCI** | **−** | Inter-Agency Coordinating Committee |
| **CNAC** | **−** | National Council of Children |
| **DNIC** | **−** | National Criminal Investigations Department |
| **DRC** | **−** | Democratic Republic of the Congo |
| **EAC** | **−** | Espaço Amigo da Criança |
| **EIRP** | **−** | Interim Poverty Reduction Strategy |
| **EPI** | **−** | Expanded Program on Immunization |
| **ER** | **−** | Education Reform |
| **GDP** | **−** | Gross Domestic Product |
| **IDR** | **−** | Survey of Income and Spending |
| **ILO** | **−** | International Labour Organization |
| **INAC** | **−** | National Children’s Institute |
| **INE** | **−** | National Statistics Institute |
| **INEJ** | **−** | National Institute of Judicial Studies |
| **ITS** | **−** | Sexually Transmitted Infection |
| **LC** | **−** | Constitutional Law |
| **LJM** | **−** | Court for Minors Act |
| **MAC** | **−** | World Fit for Children |
| **MAPESS** | **−** | Ministry of Public Administration, Employment and Social Security |
| **MCS** | **−** | Ministry of Social Communication |
| **MDG** | **−** | Millennium Development Goal |
| **MED** | **−** | Ministry of Education |
| **MINADER** | **−** | Ministry of Agriculture and Rural Development |
| **MINARS** | **−** | Ministry of Assistance and Social Reintegration |
| **MINCULT** | **−** | Ministry of Culture |
| **MINEA** | **−** | Ministry of Energy and Water |
| **MINFAMU** | **−** | Ministry of Family Women’s Empowerment |
| **MINFIN** | **−** | Ministry of Finance |
| **MININT** | **−** | Ministry of the Interior |
| **MINJUD** | **−** | Ministry of Youth and Sports |
| **MINJUS** | − | Ministry of Justice |
| **MINSA** | **−** | Ministry of Health |
| **MINUA** | **−** | Ministry of Urban Development and the Environment |
| **MIPLAN** | **−** | Ministry of Planning |
| **MIREX** | **−** | Ministry of Foreign Relations |
| **NA** | **−** | National Assembly |
| **NGO** | **−** | Non-governmental organization |
| **NHP** | **−** | National Health Police |
| **NHS** | **−** | National Health Services |
| **NP** | **−** | National Police |
| **OAA** | **−** | Order of Attorneys of Angola |
| **OGE** | **−** | Government Budget |
| **OMA** | **−** | Organization of Angolan Women |
| **OVC** | **−** | Orphans and Vulnerable Children |
| **PA** | **−** | People’s Assembly |
| **PIC** | **−** | Community Children’s Program |
| **PLRF** | **−** | Family Tracing and Reunification Program |
| **PPMSSB** | **−** | Public Program to Improve Services |
| **RAAAP** | **−** | Rapid Action, Analysis and Assessment Program |
| **SADC** | **−** | Southern Africa Development Community |
| **SCM** | **−** | Secretary of the Council of Ministers |
| **SICA** | **−** | Angolan Child Indicator System |
| **SME** | **−** | Migration and Alien Services |
| **WFP** | **−** | World Food Programme |
| **WHO** | **−** | World Health Organization |

**I. INTRODUCTION**

1. In 2004, the State of Angola submitted to the Committee on the Rights of the Child, the initial report[[2]](#footnote-2) entitled “ Implementation of the Convention on the Rights of the Child in Angola”. The report addressed the progress the country has made and the difficulties it encountered, in accordance with article 44 of the Convention on the Rights of the Child, and the guidelines for presentation.
2. In accordance with the statements in the final observations, this report combines the second, third and fourth periodic reports on “The Status of the Rights of the Child and Implementation of the Convention in Angola for the 2004-2007 period.
3. In updating the obligations stemming from the signing of the Convention, the Government of Angola applauds the Committee’s recommendation No. 10, paragraph 75, on the opportunity for the State of Angola to submit a single report that combines information from the three periodic reports on the date when the fourth report is to be submitted, and accepts the commitment to submit subsequent reports as required, to ensure that it is possible to periodically review the progress made in implementing it.
4. The present report reflects the political, legislative and administrative measures that the Government has taken to implement the Convention and the recommendations of the Committee on the Rights of the Child, as well as the mechanisms used, the social impact, the resources used to implement the measures, and the limitations and difficulties that were experienced.
5. The second part presents the status quo in the country, characterized by many programmes to build and rebuild infrastructure necessary in the post-armed conflict context, as well as the methodology for doing so. The third part addresses aspects of the components identified in the guidelines as context for preparing the reports, namely:
   * General implementation measures;
   * Definition of child;
   * General principles;
   * Civil rights and liberties;
   * Family environment and alternative care;
   * Health, well-being and health services;
   * Education, leisure and cultural activities;
   * Special protection measures.
6. The information on the demographic, economic, social and cultural characteristics, is not included in this report, nor is information on the country’s political structure or the normative framework of human rights; rather, this information is found in the joint report on the implementation of the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, the Convention on the Elimination of All Forms of Discrimination against Women, and the Convention on the Rights of the Child, in accordance with the new joint report preparation methodology designed by the United Nations in the context of its reform.[[3]](#footnote-3)
7. The peace consolidation that began in 2002 made it possible to bring the country into a gradual development process, helping to promote initiatives to improve the well-being of all of society and, consequently, of the Angolan child, which is an enormous challenge for the country. The initial report[[4]](#footnote-4) indicated that Angola has a very young population, and roughly 50 per cent of the people are under the age of 15, 60 per cent under 18, and 93 per cent under 50. These data are quite realistic.
8. The present report was prepared at the Third National Forum on Children, held in 2007, and roughly 250 people attended, including deputies from the National Assembly, members of Government, officials from the United Nations System, the diplomatic corps, religious entities, international organizations, and representatives of civil society. Of these, 66 per cent expressed their belief that living conditions for children in the country are improving.

# Methodology used for preparing the report

1. The report preparation process was coordinated by the National Children’s Institute (Instituto Nacional da Criança - INAC), using a special methodology that focuses on a participatory process at every level, including meetings with representatives of the different government bodies, civil society and religious entities. It received support from the United Nations System agencies for the purpose of obtaining the necessary grants.
2. This process also involved raising awareness about children’s rights throughout the country, a well as compiling a bibliography of the information needed for use as a basis for preparing this report.
3. The phase that preceded the introduction of the final adjustments and the evaluation by the Council of Ministers was used by the National Council of Children to evaluate the project in plenary, ordinary and extraordinary meetings for the purpose of giving the government sectors and representatives of civil society who attended the opportunity to add information and to analyse the reliability of the information in the report.
4. In exercising their right of participation, children from the 18 provinces, in age groups (from 10 to 13 years and from 14 to 17 years), analysed topics pertaining to HIV/AIDS, education, violence against children, the birth registry, and freedom of speech and association; proposals were made that were incorporated into this report.

# II. GENERAL IMPLEMENTATION MEASURES

## A. National legislation and the Convention on the Rights of the Child

1. The Angolan legal system reveals a scattering of laws and decrees, with the Constitutional Law (CL) at the top, supported by the Civil, Penal and Family Codes and the General Labor Act.
2. According to article 30, No. 1 of the CL, “Children are the absolute priority and they enjoy special protection provided by the family, the State and society for their development.” The priority that the CL places on children takes inspiration from the conception of the child as the true person recognized by the law, according to No. 2 of article 30, which provides that “the government must promote and harmoniously develop the personalities of children and youth and create the conditions for integrating them and having them participate in working life.”
3. Article 4 of the Family Code (FC), approved by Law 1/88 of 20 February states: “Children deserve special attention in the family, and in cooperation with the government, it is the family’s responsibility to guarantee the utmost protection and equality for them, so that they achieve full physical and emotional development and, through their education, strengthen the bonds between family and society.”
4. The standards in the Convention and in other international legal instruments of which Angola is a Member State are enforced directly by the courts, although they are not relied on by the parties (No. 3 of article 21 of the CL)or the authorities. Thus, the national legislation is clearly being made consistent with the international legal instruments regarding children, and the discrepancies are being addressed in the current reform process.
5. In accordance with the international protection parameters and observance of the Committee’s recommendations, the Complete Protection System for children in justice in Angola was developed in the Juvenile Justice Administration System. The Angolan legal system contains some statutes that establish more favorable provisions for the rights of the child, with various types of responses to violations of rights provided for in the Convention, including the use of courts for minors, in general through their representatives or through the Office of the Prosecutor and, in some cases, they represent themselves directly.
6. In 2002, the Ministry of Justice began to coordinate the major institutional administrative reorganization processes, with the reform of the national justice system, including the harmonization of the juvenile justice legislation and the Penal Code, in order to safeguard the rights of the child, eliminate the gaps in the legislation, and promote harmonization with international standards, especially with the Convention.
7. The level of activities in the justice sector observed two fundamental policies, with a major focus on revising the statutes to be used in carrying out the assigned tasks and tasks related to children in particular.
8. Regarding the infrastructure policy, the civil construction projects in the provinces and the largest cities must be reformed and/or continued, so that the programmes planned in the sector are within the reach of the persons for whom they are intended. This pertains to infrastructure for the courts, including the Court for Minors and infrastructure for vital records and identification.
9. It is important here to accept the idea that these issues need to be addressed on an ongoing basis in order to gradually reach all of the provinces and communes in the country.
10. The other policy is the revision of the Unified Justice System, which includes juveniles. The purpose of the permanent reforms that were implemented is to return to the justice sector the credibility it needs to better carry out its institutional role, and an entire set of statutes are being prepared that are general and of special interest to children, namely:
    * The draft organic law on the courts;
    * The draft organic law on the Office of the Public Prosecutor and the Status of Magistrates in the Office of the Public Prosecutor;
    * The draft law to Amend the Law on Detention While Awaiting Trial;
    * The draft law to amend the Law on Review, Searches and Seizures;
    * The draft organic law on the status of Judicial Magistrates;
    * The draft law to amend military criminal justice;
    * The draft law on mediation and conciliation;
    * The draft law on amending judicial assistance;
    * The draft law on the Judicial Support Center;
    * The draft law on Societies of Attorneys;
    * The draft law on the Decree to Amend the Organization of Judicial Bureaus;
    * The revision of the Penal and Civil Code and the Codes of Civil Procedure and Criminal Procedure;
    * The revision of the Codes of Vital Records and the Notorial Office;
    * Preparation of the Labor Process Code;
    * Implementation of Law No. 9/96 of April 19 on the Court for Minors;
    * Implementation of Law No. 1/97 and the preparation of legislation for the Registry and Notorial Office and Identification;
    * Adjustment of the status of property that has been and can be confiscated;
    * Revision of Law No. 14/91 – Association Law and NGO Law;
    * Preparation of the Legislation on the Penitentiary System;
    * Enact the implementing regulations for Law No. 2/04 on the Exercise of the Freedom of Conscience, Worship and Religion.

## Reforming the legislation

1. The Third Forum on Children[[5]](#footnote-5) reaffirmed the need to accelerate the legislative reform process in the area of children so that it is consistent with international legislation.
2. With the enactment of the Court for Minors Act (LJM)[[6]](#footnote-6) and the Court for Minors, the first Court for Minors Code of Procedure was set up in 2004 in Luanda Province with the creation of the Court for Minors, a jurisdictional organ with specialized competency. It is part of the provincial court and enforces social protection and criminal prevention measures for children in social danger or in conflict with the law.
3. In the other provinces in the country, the courts have observed the implementation of Law No. 9/96, the Court for Minors Act. The regulations of the measures of probation, crime prevention and the provision of community service, whose approval is pending, aim to ensure that the decreed measures are enforced under the Court for Minors Act.
4. Decree No. 31/07[[7]](#footnote-7) establishes the free birth and death registry for children up to five years of age, as well as the free identification card for children up to 11 years of age.
5. The Ministry of Justice furthers infrastructure renovation to reconcile entities that administer justice, such as the courts, which include the family sections, the Court for Minors, and the Civil Registry and Identification Office,[[8]](#footnote-8) with a permanent action plan to gradually reach all the citizens at the community, municipal and provincial levels.

**B.** **Coordination mechanisms for implementing the Convention at the national, provincial, municipal and local levels**.

### *National Council of Children*

1. To coordinate policies on children in a manner consistent with the implementation of the recommendations of the Committee on the Rights of the Child, the commitments made by the Government during the first National Forum on the Child and reinforced by the second and third forums, the National Council of Children (CNAC) was created by Decree No. 20/07 of April 20, and the implementing regulations were adopted by Decree No. 21/07 of 20 April .[[9]](#footnote-9)

1. In accordance with article 1 of Decree No. 20/07 of 20 April, the CNAC is an organ for social dialogue, support and oversight of the implementation of the policies to promote and defend the rights of the child. It has legal status and is financially and administratively autonomous.
2. For its operations, the CNAC consists of members who represent the following ministries:

* Ministry of Assistance and Social Reintegration (MINARS);
* Ministry of Health (MINSA);
* Ministry of Education (MED);
* Ministry of Justice (MINJUS);
* Ministry of the Family and Women’s Empowerment (MINFAMU);
* Ministry of the Interior (MININT);
* Ministry of Territorial Administration (MAT);
* Ministry of Youth and Sports (MINJUD);
* Ministry of Culture (MINCULT);
* Ministry of Public Administration, Employment and Social Security (MAPESS);
* Ministry of Planning (MINPLAN);
* Ministry of Urban Development and the Environment (MINUA);
* Ministry of Social Communication (MCS);
* Ministry of Agriculture and Rural Development (MINADER);
* Ministry of Finance (MINFIN);
* Ministry of Energy and Water (MINEA);
* Director of the National Children’s Institute
* Four representatives from professional associations
* Four representatives from NGOs that work at the national level for children
* Four representatives from religious entities
* Two representatives from cultural and sports organizations
* Two representatives from student organizations
* Two representatives from social communication organizations



1. As governmental agencies created specifically to address matters involving children and adolescents, the MINARS and the INAC coordinate children’s policies in accordance with the Convention:
   * Among other things, the MINARS protects and promotes the rights of children and adolescents within the performance parameters in the area of social assistance, education and the development of the most vulnerable groups, the promotion of low-cost alternative services for young children, and cooperates with the Court for Minors or like entities to implement socio-educational measures in an open or closed environment for minors in conflict with the law;
   * The purpose of the INAC is to hold hearings on children at risk, to promote their development and improve their living conditions, and link policies among the different governmental and nongovernmental institutions that work for children. The INAC has primary responsibility for scientific research, awareness and social mobilization in support of children and their rights.
2. The CNAC has its own budget for its operations, approved by the Ministry of Finance, based on the rules and instructions for preparing the budget to be included in the government’s general budget.
3. The CNAC carries out its work for children throughout the country and can create representative offices in the provinces and municipalities. Its duties include but are not limited to:
4. Proposing measures to the government for the specific context of programmes to protect children and help them develop;
5. Stimulating growth and improvements in participation mechanisms and social control to strengthen services for children’s rights at the national level;
6. Harmonizing the sectoral proposals for child protection and development policies, taking into account the overall objectives of the national child protection and development policy;
7. Developing and promoting synergies among the governmental agencies and civil society organizations that work for children in an attempt to generate consensus, issuing opinions and making recommendations on the fundamental objectives that guarantee child survival, development and protection;
8. Assessing, monitoring and overseeing the execution of the national child protection and development policy, and the performance of local organizations responsible for implementing the policy;
9. Fostering continuing technical training, promoting and supporting events and studies in the area of the child;
10. Participating in identifying specific policies in accordance with the juvenile delinquency and risk factor indicators;
11. Holding hearings on the status of children rejected from the family environment.

### Independent entities and monitoring

*Ombudsman*

1. The Ombudsman is an independent public body that defends citizens’ rights, freedoms and guarantees. Using informal means, it ensures justice and the legality of the public administration.
2. Citizens submit complaints to the Ombudsman for acts or omissions of the authorities and they are evaluated with no decision-making authority. The recommendations necessary to prevent and repair injustices are forwarded to the bodies with competent jurisdiction.
3. The Ombudsman’s work is independent of the extrajudicial and judicial means provided for in the Constitutional Law and other statutes.
4. The other duties of the Ombudsman are established in Law No. 4/06 of 28 April.[[10]](#footnote-10) Article 30, No. 2 of this law includes the mandate to monitor the implementation of the Convention on the Rights of the Child, receive information to defend them, and serve as Ombudsman for minors.
5. The National Assembly appointed the Ombudsman to a four-year term that may be renewed for one more term equal in length. The Ombudsman took office before the President of the National Assembly.
6. The Ombudsman submits a report on its activity to the National Assembly twice a year. The report should contain the initiatives it has taken, the complaints it has received, the services it has provided and the results it has obtained. The annual report must include a rendering of the accounts.
7. To address the matter of its jurisdiction, the Ombudsman may participate in the work of the standing committees of the National Assembly whenever the latter requests the Ombudsman’s presence.
8. The Ombudsman has an autonomous annual budget, prepared according to the appropriate organic law. It must include the appropriations to be indicated in the National Assembly’s budget, managed directly by an Administrative Council, notwithstanding the legal stipulations on oversight by the Government Accounting Office.

## C. Budgetary resources and funding for children

### *Children in the Government Budget*

1. Now that peace has been won, the Republic of Angola is able to focus its attention on the rehabilitation and reconstruction process, not only on infrastructure, but fundamentally on human beings, who bear responsibilities for their development;

1. The country has benefited from lower military expenditures in its budget; this has opened up opportunities for more investment in children for institutional-response capacities in the social area for the steady and ongoing provision of basic social services for the family in general and for children in particular;
2. A State is defined by the population and the territory it controls and hence, it has a budget in which it makes projections of its financial revenue and establishes lawfully approved expenditures for the sovereign organizations. This is the Government Budget, which is the financial instrument approved by a special law that the Government uses to manage Government resources;
3. The efforts the Government makes to manage financial resources for children have the following priorities: meet all the needs of society in general, such as health and education, which are of benefit to children from 0 to 18 years old, including, for example, infant health, complete care, the programme to assist street children, the community education programme (PIC and PEC), support for children in difficulty, school meals, and providing temporary survival allowances to minor descendents under Decree 50/05 of 8 August .
4. In the General Government Program, the following projects are also being carried out for early childhood development:
5. Strengthening infrastructure construction and expansion with preschool teaching equipment; continuing the Family Tracing and Reunification Program, as well as the programme to support minors in conflict with the law;
6. Extending the 2006 General Government Program into 2007 – 2008, which will generally retain the same objectives and major reforms in the current programme.
7. However, whenever justified, changes, additions or adaptations will be introduced into the goals, policy measures and investments to increase the benefits to children.
8. Through the Public Program to Improve Basic Social Services, the government has stressed political and economic goals, improving the statutory provisions and the sectoral laws, and increasing budget allocations for social sector programmes, whose annual evaluation is considered positive, with priority on infant health, complete care, assistance for street children, community education (PIC and PEC), support for children in difficulty, school meals, etc.

|  |  |
| --- | --- |
| **Change in Expenditures for Children**  **(Government Budget Resources)** | |
| Year | Amount in kwanzas |
| 2004 | 3,342,922,835.40 |
| 2005 | 4,172,822,867.98 |
| 2006 | 4,948,779,336.00 |
| 2007 | 11,776,886,830.66 |
| *Source: Ministry of Finance* | |

1. The crude values budgeted for the Health and Education sectors, the MINARS/INAC and the provincial governments will increase significantly in the 2004 to 2007 period as the Government Budget is increased as shown in the table below.

***Monetary Unit: kwanzas (Ministry of Finance, Government Budget)***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sector** | **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| Education | 644,149,598.00 | 19.27 | 530,816,135.00 | 12.72 | 2,114,390,630.00 | 42.73 | 2,586,471,245.97 | 21.96 |
| Health | 393,856,082.40 | 11.78 | 668,009,628.00 | 16.01 | 1,248,367,389.70 | 25.22 | 1,737,917,258.74 | 14.76 |
| MINARS/INAC | 199,993,226.00 | 5.98 | 181,309,030.00 | 4.34 | 437,761,436.00 | 8.84 | 243,926,589.60 | 2.07 |
| Provincial governments | 2,104,923,929.00 | 0.62 | 2,792,688,075.96 | 0.66 | 1,148,259,880.30 | 0.53 | 7,179,380,416.36 | 0.61 |
| TOTAL | 3,342,922,835.40 |  | 4,172,822,868.96 |  | 4,948,779,336.00 |  | 11,747,695,510.67 |  |

*Note: The data are provisional*

1. Beginning in 2007 there was a substantial increase in the percentages of the government budget allocated to basic social services; this also improves the likelihood of achieving the Millennium Development Goals and consequently, the goals to create a World Fit for Children;
2. We also note a substantial rise in gross amounts for safety and social protection, with emphasis on the survival grant for orphans and vulnerable children (OVCs). There are plans to establish a grant for this group of children whose parents did not contribute to social security while working in the informal sector.
3. In implementing the social development programmes in the urban, semi-urban and rural areas, there has been a gradual increase in funding at the municipal level. For the 2007/2008 programme, this will benefit 68 municipalities that serve 60 per cent of the total population of the country, and it will turn them into budgetary units.
4. To ensure greater transparency and to promote the appropriate use of these public funds, the following measures were taken:
5. Annual publication[[11]](#footnote-11) of the Government Budget, as well as the legislation that approves it and the respective execution reports on the Ministry of Finance website;
6. Introduction into the national system of a programme to manage and audit public expenditures at the provincial and municipal levels;
7. The installation, in progress, of a multiyear planning system that shows the relationship between the budget and the goals for which it was approved;
8. Ratification of the United Nations Convention against Corruption.
9. Efforts have been made to have the social sector benefit from the increase in funding in order to lower the external debt which, over the last few years, reached a ratio of 40 per cent in 2005 and 20 per cent in 2006 compared to the Gross Domestic Product (GDP). The decrease in financing charges and expenditures to defend the country in the Government Budget will revert to the economic and social sectors.
10. In the 2005-2008 a cooperation programme between the Government and UNICEF, several activities have been identified and are now being carried out in the different sectors, including the INAC, and a budget has been provided to strengthen their capacities as the following table demonstrates.

|  |  |  |  |
| --- | --- | --- | --- |
| **Summary Budget** | | | |
| **Programme** | **Amounts in thousands of US dollars** | | |
| ***Regular resources*** | ***Other resources*** | ***Total*** |
| Health | 3,200 | 17,000 | 20,200 |
| Basic education | 2,544 | 16,000 | 18,544 |
| Water, environmental sanitation and hygiene | 1,920 | 7,000 | 8,920 |
| Child protection | 2,000 | 8,000 | 10,000 |
| Youth and HIV/AIDS | 2,000 | 6,000 | 8,000 |
| Social policies, advocacy and communication | 2,920 | 3,000 | 5,920 |
| Intersector costs | 8,000 | 11,000 | 19,000 |
| **Total** | **22,584** | **68,000** | **90,584** |

Source: UNICEF-LUANDA

1. The country does not have a financial fund specifically for supporting programmes and projects for children, but it does have other public and private funds that finance programmes and projects that assist children either directly or indirectly. For example, there is the Social Support Fund - Fundo de Apoio Social - FAS) that finances projects requested by the communities or the different governmental agencies in the sectors of education, health, water and sanitation, economics and productivity, with funding made available by the government of Angola and foreign institutions, the LWINI Fund, the Sports Development Fund (Fundo de Desenvolvimento Desportivo), etc.
2. More generally, there are plans to demonstrate that there are civil society organizations that have the status of institutions in the public interest; their social objectives are related to children, and they receive funds from the Government Budget (OGE) for the purpose of putting them to use to carry out their activities in the areas of social action, philanthropy, development, and education, health, assistance, protection, counselling, awareness, mobilization, civic education and others.
3. This potential, which is still lacking in some areas, may work in other scenarios, as soon as plans are implemented to establish a single fund for the purpose of supporting programmes planned in more varied areas for child survival, protection and development, based on the principles of the Convention.

## D. National Action Plan

1. With the creation of the National Council of Children, preparation of the National Action Plan in four areas is now in progress:

*For children from 0 to five years old:*

Health sector::

1. Plan programmes to accelerate the reduction in maternal-child mortality;
2. Strengthen the municipal health facilities;
3. Expand and strengthen health technical schools for the continuing education of managers;
4. Create living conditions and other incentives for retaining managers in semi-urban and rural areas.

Food security:

1. Plan a national food and nutrition security strategy;
2. Study vulnerability, food security and malnutrition, taking into account aspects related to HIV/AIDS, gender, the market, business, public health, water and sanitation;
3. Create and upgrade the information system for child survival for aspects related to HIV/AIDS, gender, the market, public health, water, sanitation and food security, to obtain a detailed understanding of the origin and causes of food insecurity, malnutrition and child health;
4. Expand and strengthen the school meal programme and make it consistent with environmental education by creating school and community vegetable gardens;
5. Create systems to inspect and check foods used in day care centres and children’s homes.

In the agricultural sector:

1. Improve the capacity for storing, keeping and processing harvests at the family level;
2. Perform vulnerability surveys;
3. Strengthen manager training in the area of rural extension and monitoring farm production;

Water sector

1. Strengthen programmes that seek to facilitate access to drinking water for the people;
2. Identify legal systems that require the construction and use of latrines.

Protection and social security.

1. Review and adjust grants to the country’s socioeconomic reality, namely as follows: family allowances, breastfeeding allowances, survival allowances, isolation allowances and hazardous duty allowances;
2. Create statutory mechanisms so that duly identified groups, such as people who are disabled, orphans, the elderly and widows, who are not included under the law on protection and social security, will be eligible for allowances to guarantee access to food, basic health care and dignified housing.

Preschool education:

1. Update and regularly analyse the database on children from 0 to 5 years old at the local level;
2. Upgrade methodologies to deal with awareness and social mobilization;
3. Review the PIC and PEC program in an effort to provide services to children in the family and community context;
4. Ensure the continuity of first grade operations in the schools, with priority for children who do not have access to preschool education alternatives;
5. Establish a coordination system in the planning, implementation, monitoring and assessment of early childhood development programmes;
6. Mobilize private sector resources to support innovative community early childhood projects;

Birth registry**:**

1. Continue to institutionalize the civil registry in the maternity centres and municipal and communal government agencies;
2. Implement the database system for the birth registry at the national level;
3. Improve the creation, strengthening and expansion of child protection networks.

*For children from 6 to 18 years old*

Universal primary schooling and children out of school**:**

1. Expand the school network, particularly in the communes and villages;
2. Expand the school meal programme to all children and upgrade meal quality;
3. Expand teaching programmes in national languages;
4. Expand the teaching of Portuguese as a second language;
5. Build residences to retain teachers in the villages;
6. In due time, produce, distribute and check school equipment for all children, with priority on the most vulnerable;
7. Ensure the observance of standards to eliminate architectural barriers for disabled persons;
8. Enforce the rule on general education schools to prevent acts of acts of violence in schools;
9. Set up psycho-social support bureaus in the primary and secondary schools;
10. Establish alternative education procedures in the communities to provide services for special cases, such as mobile schools, distance learning, etc.);
11. Socialize children by having them practice sports;
12. Train parents and education officials to better monitor their students;
13. Energize and expand participation in extracurricular activities;
14. Strengthen the implementation of the school meal distribution network throughout the country;
15. Prepare an advocacy programme for the education of girls and vulnerable children;
16. Implement the integrated statistical data collection and processing system;
17. Accelerate the implementation of the strategy to jump-start literacy and overcome problems with students who are left behind;
18. Improve information collection systems so that they can be grouped by geographic zone and region and systematically updated.

Juvenile justice**:**

1. Create and regulate the activity of the regional detention centres for adolescents in conflict with the law and alternatives to incarceration in all the jurisdictions with Courts for Minors (such as community service, probation and part-time detention);
2. Increase continuing education for journalists through public and private communication with regard to the protection of children’s rights.

*For all children*

Family capacities:

1. Expand family capacities in all the municipal seats;
2. Translate all child-related instruments and programmes into national languages;
3. Disseminate education and training programmes on hygiene, the environment, nutrition and families in national languages.

HIV/AIDS prevention:

1. Expand pediatric care policies, paying special attention to children from 0 to 18 months old, and incorporate the voluntary testing programme into antenatal services;
2. Expand the coverage of the voluntary testing programme and ensure that all HIV+ women about to give birth receive counselling;
3. Create mobile team services for the community approach to HIV/AIDS.

Violence control**:**

1. Foster the implementation of the National Strategy to Prevent and Mitigate Violence against Children;
2. Expand, strengthen and build the capacities of the child protection networks at the national level;
3. Discuss and disseminate the types of manifestations and consequences of violence in national languages using educational tools and advertising on the radio and television;
4. Promote the training of trainers on the rights of the child.

*Sustainability of successes*

Dissemination of information about the child

1. Strengthen the link between the institutions that deal with the problems of children and families in the process of developing integrated communication policies, and, for this purpose, create cooperation networks between these institutions and the social communication organizations;
2. In the social communication organizations, create more venues dedicated to children in order to ensure that they participate more;
3. Increase the number of venues to discuss child-related issues, improving content related to the sections that are part of the Convention on the Rights of the Child and other statutory instruments to protect the child;
4. Improve the databases, studies and research on information about children in order to plan intervention programmes;
5. Foster teaching, educational and didactic programmes covering the most diverse areas of knowledge;
6. Encourage the use of national languages among children and youth, promoting special programmes for child and youth audiences on culture, education and information in national languages;
7. Foster specialization and capacity-building for social communication specialists who deal with issues related to the child and the family;
8. Encourage advocacy and social mobilization strategies with the purpose of protecting children from violence and commercial exploitation through advertising and prohibiting the media from disclosing personal details and photographs of child victims or offenders;
9. Promote programmes for children and youth which, while they educate, also inform and entertain children;
10. Ensure that children’s festivals have young artists as their principal protagonists;
11. Call on the provincial governments and other entities to encourage the creation of public library networks and school libraries as well as other reading venues;

The child in the Government budget

1. Increase the total amount to be allocated to the sector and that the Government allocates in a significant percentage in this area to social protection programmes for children as part of the 11 commitments made during the Third Forum;
2. Allocate funds for the social protection of children in a decentralized manner to the organizations involved in carrying out the government’s commitments;
3. Adopt a special integrated programme that reflects each commitment made, which must be duly budgeted for the purpose of monitoring its execution;
4. Broadly disseminate Decree No. 50/05 of 8 August, which provides a temporary survival allowance for minor descendents so that they are able to enjoy this right;
5. Adopt mechanisms to create and implement the National Solidarity and Assistance Fund, provided for in article 31 No. 2 of Law No. 7/04 of 15 October (Social Protection Framework Act);
6. Increase the family allowance and other grants that assist vulnerable children and families.

## E. Data collection

1. A well-organized data collection, analysis and processing system can be used to monitor, check and assess the results of the programmes related to the 11 commitments made at the Third National Forum on Children and in the communities, the general framework for implementing the Convention, as well as the achievement of the Millennium Development Goals, in particular the goals set for creating a World Fit for Children.
2. The Angolan Child Indicator System (Sistema de Indicadores da Criança Angolana – SICA) was established because there were no consistent indicators from reliable sources to analyse the status of children in the country.
3. The information used to prepare the initial report on the implementation of the Convention in Angola was taken from the Reports of the General Government Comprehensive Program from 2004 to 2007. The Ministry of Planning was responsible for publishing this report.
4. Since that time, some governmental institutions have been collecting statistical data on children using surveys, studies, and administrative means.
5. There are training programmes in progress in the National Statistics Institute (INE) on statistics as part of Devinfo, the advanced database management computer programme, which is used to ensure that the 11 commitments related to the child development index are carried out.
6. The Angolan Child Indicator System (SICA), now being implemented with UNICEF and UNDP support, is of paramount importance to make the implementation of Devinfo operational through the concentration, processing and systematization of data available on children at the baseline level (schools, communal agencies, etc.), and at the provincial and national level, which will receive the summaries and the reports produced for the purpose of supporting the various levels of government administration to facilitate the monitoring and planning of policies and programmes, correcting and adapting them to the circumstances of the time.
7. For carrying out the programme, there are projects underway that assign responsibility for data collection and introduction, checking, ongoing updating and analysis, for identifying the links between the systems and databases by sector using the Joint National IBEP Survey to be started in May 2008 (coordinated by the Ministry of Planning through the National Statistics Institute – INE).
8. In addition, there are also information and awareness programmes being carried out by the specialists in each Ministry, the provincial governments and municipal governments, on the importance of using statistics and how they work, while at the same time there are programmes underway to strengthen the capacities of employees at all levels for the purpose of implementing the programme established by the Angolan Child Indicator System (SICA) through the administrative channel.

### Training in the rights of the child and dissemination of the Convention

1. With the ratification of the Convention, a process of disseminating this important international legal instrument was triggered and it promoted knowledge of the most sacred rights of the child, and many programmes have been developed in cooperation with international agencies, such as UNICEF in particular, as well as other social partners.
2. Pamphlets, posters, flyers, bumper stickers and other audiovisual graphics materials were produced with sayings and messages that facilitate understanding the Convention. Radio and television outdoors [sic] and spots were developed, and theatrical skits were developed for the purpose of disseminating messages about the Convention to the communities.
3. The following are ongoing programmes directed at several fringes of society:
   * Important events in which the children’s rights component was used as material for training, awareness-raising and enlightenment for social-professional associations.
   * Programmes to enlighten judges and the Public Prosecutor, policemen, the immigration and alien agencies, criminal investigation, prison agencies, military units, teachers and students, health and social communication professionals, civil servants, salespersons and all workers.
   * Programmes for children, in particular at school and in the community and in associations that attend meetings to discuss and share information on their experiences based on the interpretation of the content of the Convention on the Rights of the Child and its optional memoranda.
4. The Third National Forum on Children, which received widespread coverage in the international and domestic (government and private) social communication media, was also a vehicle for disseminating as a specific theme the content of the initial report on the implementation of the Convention (CRC/C/3/Add.66), as well as for evaluating the extent of the content’s compliance with the final observations of Committee on the Rights of the Child.

# II. DEFINITION OF THE CHILD

1. Angola’s initial report on the implementation of the Convention (CRC/C/3/Add.66) took a rather detailed approach to the aforementioned article 28 of the Constitutional Law, and well as articles 1 and 2 of Law No. 68/76.
2. Adulthood in Angola is reached at 18 years of age, unless it is reached earlier under the law applicable to children, the age when individuals acquire their full capacity to exercise their rights and are authorized to govern their person and dispose of their property, with the exception of those who are legally deprived of political rights. They are entitled to and are required to participate actively in public activities, vote and be elected or appointed to any governmental organization.
3. Other statutory provisions that deal with the understanding of the concept of a child are included in Law 9/96 on the Court for Minors, the Civil Code (arts. 66, 69, 123, 124, 125 and 127), the Family Code (art. 24), the Code of Civil Procedure (art. 617), and the Penal Code (arts. 68, 69, 108, 109 and 399).
4. The precepts of these laws that apply to children and others that stem from the legislative reform now underway are the result of the specific features of the country and the necessity to harmonize them with the provisions of the Convention on the Rights of the Child, its optional memoranda, and other international legal instruments.

# IV. GENERAL PRINCIPLES

## A. Non-discrimination

1. Article 18 of the CL, in harmony with article 2 of the Convention on the Rights of the Child, establishes the right to equality and non-discrimination as fundamental principles of the democratic State. It further establishes that the law severely punishes all acts that seek to undermine social harmony or create discrimination and privileges based on these factors.
2. This constitutional standard covers all children, including disabled children. Disability is not a condition that limits the rights of any child, whether the child belongs to a minority group or not.
3. There are special programmes to serve disabled children that are considered discriminatory because they are intended only for children with those disabilities that are important because they are instruments used to provide special attention based on educational and teaching needs, especially at the beginning levels. However, children that belong to the Khoi-San communities are normally integrated into society and are eligible for the current educational and teaching system in the country and other community and social activities, such as recreational, sporting, cultural and other activities.
4. The Durban Declaration and Action Programme adopted at the World Conference against Racism, Xenophobia and Related Intolerance, held in 2001, have not yet been adopted by Angola. They are on the list of international treaties to be approved by Parliament in the near future. In any event, their provisions are dealt with by national legislation.
5. As time goes by, the efforts made by the Government and society are increasingly obvious and are visible signs of the return of the framework that is gradually benefiting children from disadvantaged or vulnerable families in communities in semi-urban and rural areas, as well as minorities, providing access to basic social services.

## B. Best interests of the child

1. Article 30 of the CL establishes the principle of absolute priority for children. Such a principle has various constitutional implications for legislators and the institutions.
2. Therefore, the enjoyment of “special protection for the family, the State and society, for the purpose of their full development,” is provided for in articles 30, No. 1 of the CL, and 4 of the Family Code; both make reference to the fact that “children deserve special attention inside the family; in cooperation with the Government, it is incumbent on the family to provide them with greater protection.”
3. According to article 158, No. 1 of the Family Code, for matters related to the exercise of paternal authority, “the Court must take the necessary measures to protect the minor.” According to article 160, the Court must always keep the minor’s benefit and interest in mind” when it renders its decision.
4. Thus, the supreme interest of the child is reflected in the aforementioned rule of absolute priority of the child, combined with the other constitutional principles and norms that protect the rights and supreme interests of the child.
5. It is the responsibility of the family, guardians or persons who have custody or care of children to decide what is best for them and always keep their supreme interests at heart, since children are not mature and cannot decide on their own what is best for them. This specific right of the child merited considerable attention from the governmental bodies in the protection and assistance programmes developed by public institutions, namely the SOS At-Risk Children Program or activities that involve counselling, reconciliation and mediation that are carried out by the MINFAMU, INAC and the Organization of Angolan Women (Organização da Mulher Angolana).
6. The INAC checks children that are leaving the country in coordination with the Immigration and Alien Service (SME) in an effort to prevent trafficking and forced and illegal departures.

## C. The right to life, survival and development

1. There have been no changes in Angolan legislation on the most sacred right of survival and development. In this regard, the initial report (CRC/C/3/Add.66) provided substantial information on the establishment of the CL which, in article (22), provides that the law protects the life of each citizen, and that the State respects and protects the life of human beings and prohibits the death penalty.
2. Article 358 of the Penal Code prohibits abortion as a guarantee of survival and protection for a developing human being. However, the control mechanisms for this statutory provision are taken included in the new proposed Penal Code as part of the legislative reform underway in the country.
3. In various ways the State has promoted the harmonious development of the child’s personality and/or has created conditions to integrate children and have them participate in the activities of society and in cooperation with the family and society, which is in response to the aforementioned articles 30 and 31 of the CL.
4. To strengthen the right to survival and development, various measures have been taken that are of an essentially administrative nature; they are paradigmatic examples of the projects and programmes mentioned in the last part of Chapter II – General Measures for Implementing the Convention.

## D. Respect for the views of the child

1. The right to freedom of speech is guaranteed in article 32 of the CL. This right may be limited by law according to No. 2 of the aforementioned precept. In the specific case of minors, the law expressly establishes some rights.
2. According to No. 3 of article 158 of the Family Code, the Court is required to hear a minor who has reached age ten in cases related to them that pertain to the exercise of paternal authority:
3. Testify as a witness or declarant in civil or criminal matters upon reaching age seven;
4. File complaints for offenses against sexual self-determination (legally called offenses against honesty);
5. Consent to adoption upon reaching age ten;
6. Speak to express their opinion about processes of instituting guardanship upon reaching age ten;
7. Speak and express opinions on exercising the right to assemble and demonstrate, with the constitutional proviso on the exercise of political rights;
8. Be heard about social protection, criminal prevention and criminal proceedings;
9. Choose an attorney to defend their rights and interests upon reaching age 16.
10. In addition to this statutory framework of exercising the right to freedom of speech, children may freely express their opinions, not only in the family environment, but also in boarding and educational institutions and/or in social communication environments as well as their own venues that the government has dedicated to their right of participation. With the capacity-building of networks that address children’s rights, communities have worked with the networks on awareness-raising campaigns for adults through theatrical skits and lectures in national languages to change traditional attitudes to respect viewpoints on all issues to which they pertain.

## Venues for children’s participation

1. Article 12 of the Convention on the Rights of the Child states that “Member States shall ensure that children are able to make their own judgments and they are entitled to express their opinions freely about all issues related to childhood, taking these opinions into consideration based on the child’s age and maturity.” This statement is the source of inspiration for creating conditions so that Angolan children have a venue where they can participate in the family, school, institutions and the community.
2. The experience of the Children’s Parliament in 2000, which led to holding assemblies in schools, in the community and at the provincial level, made it possible to create provincial and national circles of child deputies. However, at one point there were problems, because the children reached legal age and it was not possible to continue the activities. However, efforts are being made to devise a solution.
3. In the absence of the Children’s Parliament, other venues have been encouraged on issues specific to children.
4. As in past years, Children’s Day was held during the period, preceded by a series of programmes, the highlight of which were children’s meetings in schools and in the communities, where they discussed issues related to violence against children. Their complaints and suggestions were incorporated into the set of themes discussed at length during the Third National Forum on the Child, which was the high point of the Day, resulting in important recommendations for a national strategy to prevent and mitigate violence against children.
5. The national awareness campaign for Sexually Transmitted Diseases (STDs), including the matter of HIV and AIDS, “Defending Life by Learning about AIDS,” was carried out by the MED in cooperation with UNICEF and other government agencies, namely the MINJUD and the INAC, in 2006, and became a genuine venue for children’s participation for the 16-to-18 age group.
6. Along those same lines, the Ministry of Youth and Sports created the Friends of Youth Services as part of the “Informed, Responsible and Organized Youth Project” (Juventude Informada Responsável e Organizada - JIRO), developed in a partnership between the government and the UNFPA. This programme, which deals with family orientation matters, reproductive health and hygiene, with child participation and with technical support from the National AIDS Institute, launched the HIV/AIDS awareness programme and youth in free time, and aims to raise the level of knowledge among children in the 15-to-18 age group.
7. There are other participation venues in the Social Communication organization, where children carry out child journalism activities, producing programmes by children for children and for adults, where they broadcast information and messages that promote the realization of their rights.
8. Based on the Convention version of “Friend of the Child,”published by UNICEF, the INAC prepared a guide to enable children to hold meetings, giving them venues for participation so they could contribute their opinions to the report preparation process and, consequently, to solving their problems, allowing them to exercise the right to express opinions and viewpoints.
9. The National Pioneers Meeting[[12]](#footnote-12) was held in Luanda from 29 November to 1 December 2007, before the Municipal and Provincial Meetings. This was an highly visible event with notable references, and its suggestions and opinions deserve to be treated appropriately by the respective governmental organizations.

# V. CIVIL RIGHTS AND FREEDOMS

**A. Name and nationality**

1. The composition of names is expressed in Point 1 of Law No. 10/85 of 19 October, by the People’s Assembly. Point 1 establishes that the complete name shall be composed of no more than five simple grammatical words, only two of which can be the first name and the remaining ones are the last name; Point 3 provides that the first names or at least one of the first names must be national; Point 4 states that first names in a foreign language are accepted in their original or adapted form; Point 5 provides that last names are mandatory and shall be selected by the family member – paternal, maternal – of the registrant’s progenitors. If the registrant’s progenitors do not have a last name, it will be chosen by the declarant, preferably with the civil servant before whom the declaration was made.
2. Upon registration a personal booklet is issued. This is the document that certifies that the registration occurred in an Office of the Civil Registrar. At the time of registration, this document provides access to acquire the Identification Card which is issued by an identification office that identifies the registrant as a national citizen and contains the necessary references about the registrant’s name (chosen by the parents because of the minor’s incapacity) and those of their ascendants, and the place and date of birth. Through this set of procedures the identity of the citizens is preserved, and in particular the identity of children.
3. The Family Code establishes that a relationship is proven by an instrument recorded by the office of the civil registry (art. 162). In any case, the establishment of maternity is based on the birth certificate (art. 167). The right to establish relationship is recognized for all citizens, and paternal authority will be exercised by the progenitors that are to contribute to raising, instructing, training, and educatiing the children.
4. Law 1/05 of 1 July establishes the conditions for awarding, acquiring, losing and reacquiring Angolan citizenship. This law provides that awarding Angolan citizenship takes effect at birth (art. 4). The Council of Ministers has jurisdiction to evaluate and make decisions on all matters pertaining to the acquisition, reacquisition and loss of citizenship when the National Assembly does not have this jurisdiction (art. 8).
5. Angolan citizenship may be by birth or may be acquired. According to the aforementioned law, a person is an Angolan citizen by birth when his or her father or mother is an Angolan citizen who was born in Angola, as is the child of a father or mother with Angolan citizenship who was born abroad (art. 9).
6. Moreover, note is made of the law that a newborn is a citizen of Angola who is in Angolan territory unless proven otherwise (art. 9, No. 2).
7. Angolan citizenship may be awarded to a minor or incapacitated child of a father or mother who acquires Angolan citizenship, and this child may opt for different citizenship upon reaching legal age.
8. Moreover, children born in Angolan territory who have no other citizenshipo may acquire Angolan citizenship, as well as children born in Angolan territory of unknown parents, parents of unknown citizenship, or stateless parents.
9. Minor children of Angolan nationals who are born abroad lose their citizenship and, since they also have another citzenship, if upon reaching legal age they claim that they are not Angolan, they also lose their citizenship. This is also true for children completely adopted by foreign citizens if, upon reaching legal age, they claim that there are not Angolans.
10. Refugee children are protected by the State as part of the treatment for their parents, family members, or persons who have assumed responsibility for them. Their nationality, declared by these persons and proven using means specific to the special programmes that deal with these matters, is preserved, taking international refugee registry standards into account. Likewise, the same holds for families in a state of asylum.

*Birth registration*

1. The implementation of Decree Law No. 2/07, which establishes the framework for the duties, competencies and legal system for the organization and operation of the provincial governments in the context of deconcentration, as well as the administrative strategic decentralization plan, have accelerated the resulting application of Decree No. 31/07 of 14 May of the Council of Ministers. This exempts all children between 0 and five years old from paying fees and gives the Identification Card to children from 8 to 11 years old. It also creates conditions that ensure that registration services work with the hospitals, maternity centres and mother-child centres as well as other centres that perform deliveries, and in the municipal and communal governments, and expands the system to the communities so that all children are eligible for this right.
2. We point out the work of information, awareness and mobilization in the urban, semi-urban and rural communities by teams led by the INAC that involve institutions and entities that include the networks that protect and promote children’s rights at the provincial, municipal and local levels for the purpose of understanding the measures provided for in Decree 31/07.
3. The allocation of domestic financial resources has strengthened the national birth registry system so that more children can be registered and have a national identification document. Nonetheless, the fact that there are no obstacles for children to access health services should be noted.

**B. Preservation of identity**

1. The Ministry of Culture, through its two specialized agencies, carries out a set of programmes that seek to preserve national culture and identity. As part of its duties the National Cultural Programs Division (Direcção Nacional de Acção Cultural – DNAC)[[13]](#footnote-13) has been working to involve children in the celebration of the Children’s Carnival, and is performing studies for creating cultural programme centres in the schools, to include students, teachers and educators, in order to carry out artistic and cultural as well as technical and scientific programmes to ensure that children are involved in the different artistic events, thereby contributing to their well-rounded training.
2. On 12 October 2005, the DNAC and the Agostinho Neto Pioneers Organization (OPA) initialed a Cultural Cooperation agreement to be in effect for five years. Its objectives are to jointly promote cultural and recreational activities and/or events and to pass on the habits and customs of the peoples of Angola to children. Some of the scheduled activities are the National Children’s Songfest, the Children’s Carnival, literary and theatrical arts contests, guided visits to monuments, sites, museums and other venues of historic interest.

**C. Freedom of speech**

1. Article 32 of the Constitutional Law guarantees the freedoms of speech, assembly and demonstration. This fundamental right is protected by several statutes, namely the Family Code and the Court for Minors Act (Law 9/96 of April 19). In general terms, they establish the right of minors who have reached age ten to be heard in courts in matters that pertain to them. The basic elements of these statutory provisions are in harmony with the Convention.
2. To protect children from violence and commercial exploitation in advertising and to prohibit the media from disclosing personal details and photographs of child victims or offenders, training and retraining courses are periodically held for journalists from private and government entities.
3. Training and technical-scientific and ethical-professional conduct training programmes as well as other information processes for social communication professionals have been developed to protect the rights and dignity of the child.
4. The training cycle indicators are rather positive indicators for protecting the rights of the child, with a significant increase in child participation in the information entities, also benefiting from journalistic training, with a significant number of child journalists throughout the country.
5. In an effort to promote and stimulate freedom of speech in children, the institutions of the State, Government and civil society created forums where they are able to freely express what they feel and think; these include meetings, assemblies and lectures where they speak freely, discussing topics related to their rights, peace, the conservation of nature, national culture, sports, and solidarity, and matters related to social conduct and civic pride, citizenship, morals, and the quality of education and health.

**D. Freedom of thought, conscience and religion**

1. Article 8 of the Constitutional Law defines the Republic of Angola as a secular State, with separation of church and State. The protection and respect of all religious expressions, places and objects of worship are guaranteed provided that they obey the laws of the State, namely Law No. 2/04 of 21 May on the Exercise of Freedom of Conscience of Worship and Religion. In accordance with article 20 of the Constitutional Law, the State respects and protects persons and human dignity and provides that every citizen has the right to the free development of their personality provided that they duly respect the rights of others.
2. Without instrumentalization, the family relationship determines through rules that children practice the parents’ religion, since from early on in their lives they live with their parents and share in their social activities.
3. As a recommendation of the Third National Forum on Children, to ensure the sustainability of policies for children, the Action Plan is now being prepared. This Action Plan includes the promotion of advocacy and social mobilization, for the purpose of protection from advertising and prohibiting the media from disclosing personal details and photographs of child victims or offenders, ensuring respect for them and their dignity.
4. It has been observed that the media are now protecting children’s privacy and dignity in journalistic matters, avoiding mentioning names and exposing them without protection when they report any act in which children are involved.
5. Since the Republic of Angola is a secular State, it does not interfere with the freedom of its citizens to adopt any religious creed. This is due to the fact that all the faiths that apply, under the terms of the law, obtain a license to establish their church in Angola, taking into account, in a certain way, matters of national interest, namely places of worship, the relationship between the public and the authorities, including and in particular aspects that may violate children’s rights.

**G. Freedom of association and to hold peaceful meetings**

1. The purpose of the Scouts Association of Angola, the Organization of Pioneers of Angola and others that are national and local in scope is social solidarity, civic education and philanthropy. This concretizes the establishment in the Constitutional Law and Law No. 16/91 of the freedom of expression, assembly, demonstration and association and all other forms of expression in public and private places. For purposes that do not conflict with the law, public morals, order and tranquility and the rights of individuals and groups, a right is granted to all citizens, including minors who are not yet 18, whenever the nature of the association justifies doing so, since minors under 16 years old are not permitted to serve in managerial positions.

1. However, the suggestion expressed in the initial report (CRC/C/3/Add.66) on the necessity to include in the law the guarantees of the effective exercise of these rights that children are recognized to have, is being protected as part of the legislative reform that is underway.

**F. Protection of privacy**

1. The inviolability of domicile and non-disclosure of correspondence, within the limits specially provided for in article 44 of the Constitutional Law, has State guarantees. Article 43 of the same Law gives the citizens the right to go through the courts to challenge all acts that violate their rights as established in the Constitution.
2. As citizens, children are guaranteed privacy based on the interpretation of the statutory provisions referred to in the previous paragraph and other legislation, namely the Civil, Penal and Family Codes and the Civil Registry. In addition to the statutory mechanisms for protecting the child’s privacy, the State has strengthened the role of the family through community education programmes, the expansion of micro-lending, leadership training to guarantee support and protection for the child, as well as the discharge and preservation of cultural and traditional values and the dissemination of the Convention and African Charter.

**G. Access to relevant information**

1. The mechanisms of access to sources of information with respect to the information that affects citizen privacy, and particularly the privacy of children, were established in the Media Act.
2. Programmes that broadcast news and local radio stations in national languages have also facilitated the child’s access to information through lectures and debates, awareness and social mobilization.
3. **The right to not be subjected to torture and other cruel,**

**inhumane or degrading treatment**

1. Integrating the population is a challenge due to the effects of over 30 years of armed conflict, whose principle protagonists were children, many of whom lost one or both parents. They find themselves required to move, seeking safety in other localities and supporting the youngest, and they become involved in different types of child labor and many families are unable to provide for their subsistence.

1. The result of this and other situations, characterized by a significant number of children expelled from the family environment, and reports of children accused of practicing sorcery, led the INAC, in carrying out its advocacy function, to conduct a preliminary study in the provinces and localities where this was most apparent.
2. From the preliminary findings and with a view to strengthening Peace and Reconciliation in the Country, the INAC, with UNICEF support, completed in 2006 and published on June 16, 2007, the study on the impact of Accusations of Sorcery against children in Angola, which seeks to protect human rights.
3. The Networks for the Protection and Promotion of the Rights of the Child, as a forum for coordination and dialogue between the communities and the authorities in which adolescents participate as representatives of the child, generated the fundamental objective of responding to the accusations of sorcery against children, and today they are working with all child protection issues.
4. The link with the provincial courts makes it possible to carry out supervisory programmes and measures for the social protection of children in cases of violence and abandonment.
5. To discourage society from practices that treat children cruelly, it is the Office of the Prosecutor that can order detention while awaiting trial, conduct pre-trial investigations in criminal matters, cooperate in investigating cases intended to verify violations, and report them to the criminal fact-finding and investigation authorities for criminal proceedings. They are brought to justice, duly tried and sentenced to prison and families of victims and prosecutors feel that justice is served.
6. The implementation of services to protect and assist victims is also in progress for temporary shelter, medical and psycho-social services, such as the government’s response to protect the child, including training and retraining for professionals that work with children.
7. The torture, cruel, inhumane and degrading treatment that was being inflicted on children in Angola ceased with the end of the armed conflict. However, accusing children of practicing sorcery generated a wave of violence against them, first in the northern provinces of Zaire, Uíge and Luanda, followed shortly thereafter by the entire country, with consequences that have occasionally been tragic.
8. The study of the Impact of Accusations of Sorcery against Children in Angola analyses the symbolic case and double victimization and states: “… the majority of children accused of sorcery are rejected by the family for various reasons. Frequently, these children are in a vulnerable situation because some have lost their parents, have fallen ill, have been abandoned, etc. At the time they are accused, many of these children have already experienced a violation of their fundamental rights, namely violence, mistreatment and abandonment, which are the frequent consequences of the accusations as elements that constitute a symbolic case of the violation of human rights, because these accusations are directed against some of the most vulnerable persons in the communities and families, because they involve extremely serious forms of violence punishable by the law, and because they almost irreversibly jeopardize the future of children of all ages...”.
9. The study of the factors that protect or increase the risk of children being accused of sorcery found:
10. Risk factors – being an orphan; separation from the mother; not being in the education system; suffering from tuberculosis, epilepsy, enuresis or other diseases; belonging to families that have no access to health services; belonging to families that attend churches that validate the accusations; belonging to families in stressful situations, with economic difficulties, and poor health; belonging to nuclear families that are separated due to a move or migration; and destruction of the extended family support network.
11. Protection factors – families and communities that have knowledge of the manifestations of the different stages of the child’s psycho-emotional development; extended families that serve as support networks, giving shelter to orphaned children and integrating them; the existence of Committees/Networks to protect and promote the rights of the child in the communities and provinces; children’s access to and remaining in school; the existence of support programmes for children that are not in the school system; and the availability of support and assistance for vulnerable families.
12. In the MED teacher training and qualification programme, subjects are taught that are related to the protection and promotion of children’s rights, sharing ideas to eliminate negative customary practices, hazardous or violent traditions used to discipline children as an excuse to violate their rights. The programme seeks to:
13. Concentrate efforts to make schools safe and comfortable, protecting the pupils and students from all forms of violence;
14. Organize advocacy and mobilization campaigns that contribute to improving child performance and results in general, and in particular for schoolgirls and in tertiary institutions;
15. Systematically disseminate the Convention on the Rights of the Child in the schools; and
16. Hold lectures on the problem of violence against children in the schools, providing information that strengthens respect for the child and dignity, involving teachers, parents, educators, administrative workers, students and the community.
17. The training programme for child specialists who work in hosting institutions warns against the use and practice of violent methods. The supervisory team that operates in these institutions strengthens control and the ban on acts of violence through monthly inspections. However, the policies identified to empower families to take better care of children include standards for preventing the use of violent methods.
18. The fact that there is no well organized system to detect, report and collect reliable data on acts of torture, cruel and other treatment to which many children are subject and that occur in the family and institutional environment (schools, children’s centres, police departments and elsewhere) and in the community environment (the street, entertainment venues, groups, etc.), makes it impossible to grasp the scope of these practices, and it is up to the government to devise a strategy to prevent and mitigate violence against children.

# VI. FAMILY ENVIRONMENT AND ALTERNATIVE CARE

## A. Parental management and orientation

1. The concept of the family is understood in different ways in Angola, including the nuclear and extended family. In most of the ethnic groups, families are organized according to structures of lineage or class. Parents consider their biological children to be their children, but they also include their nephews and nieces as their children as well. They show goodwill toward them if their real parents die or become unable to carry out their paternal role.
2. However, the Family Code has placed great importance on this, defining the family as the fundamental nucleus of the organization of society and, as such, subject to government protection, Angolan families live in an environment of social instability, economic and psychosocial disintegration, depression and frustration, and widespread violence as a consequence of the prolonged armed conflict, an environment in which parents raise their children without emotional stability.

## B. Parental responsibilities

1. In an effort to build family capacities, the MINFAMU created family counselling services and is carrying out gender-related activities.

1. The objective of the Family Counseling Program is to establish a climate of dialogue to prevent and lessen domestic violence, hold mediation and provide legal referrals, including for matters related to the failure to assume paternal responsibility and to assist children. In addition to this programme, counselling services are also provided by the INAC, the Organization of Angolan Women (OMA), and the Association of Women Lawyers (AMJ).
2. The promotion and guarantee of the full protection and education of children is the family’s responsibility. The family must live together directly with the children and provide total physical and moral protection for them with the special cooperation of the government, which the law charges with creating the necessary conditions. There have been few legislative changes in this area, so that the provisions established by articles 29 and 30 of the CL continue in effect.
3. The National Family Council is a collegial body that consists of various participants from the government and civil society. Its objective is to analyse the family situation and prepare policy proposals with the purpose of improving family responsibilities.
4. The neglect that causes many children not to attend school due to the lack of health care, clothing, footwear and food, the abandonment that removes children from the family environment, denial of paternity, which increases significantly the number of women that head families, and the high incidence of early pregnancies and promiscuity, are evidence of the high degree of failure by progenitors to assume paternal responsibility, and this fact is of concern to society in general and to the State in particular.

## C. Separation of parents

1. The National Family Tracing and Reunification Program (PNLRF), adjusted to the current context, works with and takes care of all children who are separated from their parents and are deprived of care, and who, voluntarily or involuntarily, find themselves outside the family environment. However, other initiatives have been tested to develop in children the dignity they deserve, placing them in the family or in a foster family, and avoiding institutionalization to the extent possible.
2. Article 134, No. 2 (a) and (b) is a provision of the Family Code that establishes that parental authority is extinguished only by the death of the progenitor or by adoption. The de facto separation of parents does not extinguish ownership of the parents’ right to paternal authority. They continue to possess the rights that are given to them as a result of the existing relationship, which continues in effect to correspond to the reality of the country.
3. For progenitors that do not have custody of the child in the event of separation, the law protects their position by providing that despite the fact that the exercise of paternal authority is not awarded, the progenitor retains the right to a personal relationship with the child and must participate in their schooling and upbringing and support the exercise of paternal authority by the other parent; this provision has guided the counselling services of the MINFAMU, INAC, OMA and AMJ.
4. However, there are still countless families that have no structure. In most, paternal authority over the children is exercised by one of the progenitors or by another family member.

## D. Children deprived of their family environment

1. According to the basic MICS indicators, about one-third (32 per cent) of all children between 0 and 14 years old are not living with both of their parents. Children who live with neither of their biological parents are six times more likely to live only with the mother, which is consistent with the 27 per cent of Angolan woman who are the heads of households. The percentage of children not living with their biological family does not vary between rural and urban areas. Moreover, slight variations have been recorded between regions: eight per cent in the national capital region and 11 per cent in the west and centre-south region. Significantly, children between age 10 and 14 are 27 per cent less likely to live with both parents than children in the younger category (0 to 4).
2. About ten per cent of children do not live with both parents. Roughly half of these children (6 per cent) live with host families, even though the father and mother are alive. These indicators continue to demonstrate the socioeconomic difficulties in households that are unable to provide care for their dependent children.

## E. Family reunification

1. The vast majority of children that were separated from their families because of the armed conflict have now been reunited with their biological families or placed in foster families through community alternative projects, thereby avoiding institutionalization.
2. The PNLRF locates the parents or other closer family members and identifies families that meet the requirements to care for children. It creates conditions and reunites children with their parents, placing them in foster families and provides support where the child is reintegrated or placed.
3. Temporary family custody (mother guardians or rapid response units), services in the home (for cases that are demonstrably without families and with no possibilities of reintegration or placement in a family); alternative services (mother guardians and milk and baby food), is another programme component that serves children under two years old with the objective of avoiding the institutionalization of this group of children by providing them with a family environment and contributing to reducing the level of infant mortality.
4. For demonstrable cases of children without families or other families that can be traced, there are managed self-construction and vocational training programmes that provide safe shelter for them and insert them into the community and the job market.
5. The number of institutions is being gradually and selectively reduced to discourage institutionalization and consequently, the voluntary separation of children from their families. At the same time, the conditions are being created to provide more dignified service for the others in detention and part-time detention facilities that will soon be built, as well as for children that do not have biological families or the possibility of being placed in foster families. An effort is also being made to improve the living conditions of foster families and guardian mothers, giving them basic shopping baskets and monetary grants.
6. There are also programmes for counselling, psycho-social rehabilitation and social and family reintegration of children that are victims of acts of violence. They are given vocational training with courses in cooking, manicure/pedicure, electricity, shoemaking, information technology, locks, mechanics, child care and others (these are other alternatives for providing care for this group of children).
7. The survey performed in the major population centres showed that there are some institutions in which there are children that have no biological family and that it was not possible to place them in foster families. Consequently, a national team was created to supervise and monitor these institutions, and the Government is working to locate their families and identify foster families that have the wherewithal to care for them. When this is not possible, the Government is planning to build and outfit five regional and ten provincial boarding centres, with programmes for recovery, education and reintegration into society in a dignified manner without discrimination in the context of social partnerships.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Resources that became available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated in absolute terms and percentages, per year** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Family tracing and reunification | 87,347,785.00 | 0.01 |  |  |  |  | NOT AVAILABLE |  |
| Social resettlement of persons and families |  |  | 9,236,508,571. 00 | 0.37 | 11,027,254,723. 00 | 0.51 | NOT AVAILABLE |  |

1. In an effort to understand the underlying causes of why this continues, studies were conducted on voluntary separation and on street children. The results pointed to the financial conditions of families and the dislocation of children from their areas of origin as factors.

## F. Illegal dislocation and retention

1. To prevent child trafficking, the Migration and Alien Division of the MININT strengthened controls at all the airports, ports, border posts and venues where many aliens are found in order to prevent this and the dislocation of minors to places outside the country. It also strengthened the mandatory requirement of complying with the terms of responsibility by accompanying persons and completing forms for minors. In addition to this measure, an INAC document is required that certifies the legality of the departure of children in question.
2. In this context, the criminal investigative bodies carry out special training programmes for the National Police, since they work directly in the control, detention and investigation of crimes of this type, so that performance is according to the provisions of the national legislation and international legal instruments.
3. According to studies performed by the ECCAS and ECOWAS, the trafficking follows routes such as: origin (countries or departure points for children who are victims of trafficking to a domestic or international destination); transit(countries, locations or points through which the traffickers and victims pass temporarily for geographic or logistical reasons); and destination (countries and arrival points in the traffic flow).
4. The lack of systematized information and the country’s current context make it impossible to determine Angola’s status. This objective situation means that the authorities that protect and promote children’s rights consider the situation extremely troublesome, and it should be the focus of attention for policies and programmes for children.
5. Trafficking is associated with sexual abuse and exploitation. It is one of the worst types of child labor. As such, it is one of the principal manifestations of violence against children in Angola at this time. The action plan with national, regional and provincial activities being carried out in the Santa Clara regions in Cunene province, in Matala in Huíla province, and at the central level, has produced remarkable results in preventing child trafficking. It is an experience that involves major departments of the Government, social partnerships and traditional authorities, and should be used to advantage to identify national strategies to protect and promote the rights of the child.
6. The Child Rights Protection and Promotion Networks are now in the creation phase and are being strengthened and expanded at the national, provincial and local level. They are in part the result of this experience and seek to make a contribution to preventing and mitigating this phenomenon.
7. Zaire province has reported obvious cases of kidnapping and child trafficking with unacknowledged objectives, reported many times to the provincial authorities. In coordination with the INAC and the Child Rights Protection and Promotion Networks, the National Police based at the border posts and in Mbanza Kongo has taken prevention and intervention measures that have prevented unaccompanied or improperly accompanied children from entering or leaving Angola via the Democratic Republic of the Congo, whose authorities maintain cooperation relations with the Angolan authorities. Prevention and interventions have recovered many Angolan and Congolese children and have reunited them with their respective families.
8. Even so, the situation is still troublesome. Because of the vast border, control is quite difficult, so that measures are being taken to attempt to decrease the flows of people at points where they can cross the border without police control. However, in general, Angolan children are taken from the capital city of the country and Congolese children are taken from Kinshasa.
9. The chart below shows some cases that were reported and monitored in the 2004-2007 period.

| ***EVOLUTION OF THE SITUATION*** | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| EVENT | NUMBER OF CHILDREN | | | | | | | | | | | | | | | PUNISHMENT FOR THE PERPETRA-TOR |
| 2004 | | | 2005 | | | 2006 | | | 2007 | | | 2004/2007 | | |
| M | F | MF | M | F | MF | M | F | MF | M | F | MF | M | F | MF |
| * 1. Kidnapped from Angola and trafficked into the DRC. (a) Recoveries by the SME and NP and taken to the Mbanza residential service centre   Kongo Angola  (b) Recovered by the Rights Protection and Promotion Network and taken to Luanda where they are returned to their families | 2 |  | 2 |  |  |  |  |  |  |  |  |  |  |  |  | **Trafficker held by the NP in Mbanza Congo** |
|  |  |  |  |  |  |  |  |  |  | 1 | 1 |  |  |  | **Traffickers not identified** |
| * 1. Kidnapped and prevented from being taken from the city of Mbanza Kongo or to the border.   (a) Reunited with their respective families  (b) Reunited with families  (b) Housed at Centro Santa | 2 |  | 2 |  |  |  |  |  |  |  |  |  |  |  |  | **Trafficker detained by the NP in Mbanza Congo** |
|  |  |  |  |  |  | 5 |  | 5 |  |  |  |  |  |  | **Traffickers not identified** |
|  |  |  |  |  |  |  |  |  | 2 |  | 2 |  |  |  | **Trafficker died suddenly** |
| **(c) Housed at Centro Santa** |  |  |  |  |  |  |  |  |  |  | 1 | 1 |  |  |  | **Trafficker detained by the NP** |
| * 1. Kidnapped from the DRC and prevented from being taken to the city of Mbanza Kongo or to the border.   (a) Taken to their country of origin (DRC) by the SME  (b) Taken to their country of origin (DRC) by the INAC and delivered to their family |  |  |  |  |  |  |  |  |  | 9 |  | 9 |  |  |  | **Traffickers not identified** |
|  |  |  |  |  |  |  |  |  |  | 1 | 1 |  |  |  | **Traffickers not identified** |
| (c) Boarded at Centro Santa |  |  |  |  |  |  |  |  |  |  | 2 | 2 |  |  |  | **Traffickers held by the NP** |
| (d) Housed at Centro Santa |  |  |  |  |  |  |  |  |  | 4 |  | 4 |  |  |  | **Traffickers held by the NP** |
| TOTAL |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. The INAC outlined a Strategy to Prevent and Mitigate Violence against Children, now in the consolidation and approval phase, to deal with this problem, which is reaching somewhat troublesome levels. One of the manifestations of violence is trafficking, which is not defined in the national legislation, which is why the prevention and mitigation work requires the preparation of a series of research activities, as well as a situational analysis, legislative reform, social mobilization, monitoring and evaluation, training, capacity-building and other alternative measures, with the involvement of all the social stakeholders, the communities, families and the children themselves.

## G. Support payments

1. To comply with the recommendations and commitments of the Third National Forum on Children, a cycle of seminars were held at the national level, covering the provinces of Benguela, Luanda, Lunda Norte, Lunda Sul and Moxico, for social awareness and capacity-building of managers in view of the necessity of revising and updating Law No. 7/05 and Decrees 38/98 of 6 November and 46-C/92 of 9 September on the family allowance, the law on support which strengthens the progenitors’ responsibility with regard to the requirement of supporting their children.
2. The initial report (CRC/C/3/Add.66), referring to articles 247, 250, and 259 of the Family Code, mentions that the definition of support covers everything that its necessary to sustain the life of the person being supported (a minor), including health, education and other costs related to a child’s well-being.
3. According to paragraph (g) of article 18 of Law 7/05 of 15 October, regulated by Decrees 50 and 52/05 of 8 August, the breastfeeding grant is a benefit intended to offset family expenses for a deceased worker for the loss of income from work. The Government has a support system for descendents of the beneficiary for the first year of life and the survival payment is temporary and covers children from age 0 to 18.
4. Of the 66,598 persons receiving support from the social security system, roughly 40,000 are children covered by the family allowance, breastfeeding grants and survival payments. Even with this, efforts are being made to expand the base of the impact on and coverage of the target groups.

## H. Abuse and neglect

1. In the context of administrative measures, the General National Police Command, by Order No. 242 of 11 October , created the Violence against Women and Children Unit in the National Criminal Investigation Division for the purpose of paying more attention to the cases of violence that frequently occur in families and in the community, and in 2006, through the Provincial Commands of the National Police, the School Brigades and Police Divisions, to monitor and provide care for minors, both in teaching institutions and in the families.
2. The victims and perpetrators units of the MININT give children who are victims of physical or psychological violence the opportunity to file reports that are forwarded to the Prevention and Juvenile Delinquency Departments, the School Police, the Violence against Women and Children Unit and/or to the Court for Minors. Based on the case, the corresponding measures that are provided for by the law are taken. With regard to caring for victims, the Psychology Section was created in the National Criminal Investigation Department, and it includes clinical and criminal psychologists.
3. Included in the awareness campaigns to fight violence against children, the INAC promoted and held annual workshops, seminars, debates and lectures with 24,732 participants, 63 per cent of whom were children, in an effort to educate the public on the negative consequences of the mistreated.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Public education activities**  **by province and by year** | | | | | | |
| **Topics** | **No.** | **Province** | **Number of activities** | | | |
| **2005** | **2006** | **2007** | **Total** |
| * + - * Children’s rights       * Violence against children       * Right to quality education       * Impact of HIV/AIDS       * Juvenile delinquency       * Early pregnancy       * Prevention of infectious diseases       * Preservation of the environment       * Child labor       * Protecting the child against danger       * Importance of the family in the child’s life       * At-risk children       * Sexual exploitation       * Child trafficking and its consequences       * Neglect, abuse, violence against children       * Instrumentalization of children | 1 | Luanda | 231 | 243 | 156 | 630 |
| 2 | Kuanza Sul | 120 | 230 | 135 | 485 |
| 3 | Moxico | 93 | 101 | 106 | 300 |
| 4 | Bié | 30 | 97 | 270 | 397 |
| 5 | Cabinda | 67 | 189 | 302 | 558 |
| 6 | Huambo | 271 | 87 | 113 | 471 |
| 7 | Uíge | 10 | 98 | 125 | 233 |
| 8 | Bengo | 30 | 67 | 93 | 190 |
| 9 | Kuando Kubango | 23 | 71 | 109 | 203 |
| 10 | Kuanza Norte | 37 | 124 | 83 | 244 |
| 11 | Namibe | 106 | 97 | 201 | 404 |
| 12 | Zaire | 128 | 270 | 285 | 683 |
| 13 | Lunda Sul | 39 | 23 | 78 | 140 |
| 14 | Lunda Norte | 10 | 73 | 67 | 150 |
| 15 | Cunene | 21 | 10 | 35 | 66 |
| 16 | Huíla | 210 | 121 | 243 | 574 |
| 17 | Malanje | 12 | 37 | 76 | 125 |
| 18 | Benguela | 132 | 204 | 137 | 473 |
| **Total activities** | | **1,570** | **2,142** | **2,614** | **6,326** |
|  |  | |  |  |  |  |

1. For reports and complaints, the INAC created public service areas where it provides counselling, conciliation and mediation for cases of neglect, non-compliance with parental obligations, failure to provide support and misunderstandings of the progenitors, situations that breach children’s rights. Other cases are sent to the institutions with jurisdiction, such as the Criminal Investigation Police, the Courts, the Court for Minors, etc., and this exercise produced the following data:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Cases of Violence Reported to the INAC in 2007*** | | | | | | |
| **Type of occurrence** | **Provinces** | | | | | |
| **Zaire** | **Bié** | **Luanda** | **Bengo** | **Kuando**  **Kubango** | **Total** |
| Manslaughter |  |  | 8 | 1 | 11 | 20 |
| Involuntary homicide |  | 8 |  |  |  | 8 |
| Attempted murder |  |  | 2 | 1 |  | 3 |
| Bodily injury | 9 | 17 | 25 | 2 | 6 | 59 |
| Rape | 1 | 4 | 17 | 4 |  | 26 |
| Attempted rape | 2 |  |  |  |  | 2 |
| Prostitution |  | 10 |  |  |  | 10 |
| Infanticide |  |  | 1 |  |  | 1 |
| Indecent assault |  |  | 10 |  |  | 10 |
| Kidnapping | 1 |  |  |  |  | 1 |
| Abandonment | 1 |  |  |  |  | 1 |
| Mistreatment |  |  | 1 |  | 2 | 3 |
| Accusations of practicing sorcery | 5 |  | 1 |  |  | 6 |
| Neglect | 30 | 132 | 2 | 7 |  | 171 |
| Early pregnancy | 3 | 97 |  |  |  | 100 |
| Displacement |  | 21 |  |  |  | 21 |
| **Total** | **52** | **289** | **67** | **15** | **19** | **442** |

1. Since the factors of child vulnerability to abuse and neglect persist, as well as difficulties dealing with them, a National Strategy to Prevent and Mitigate Violence against Children was prepared. Now in the approval phase, one of its objectives is to mitigate neglect and abuse by carrying out a set of programmes in conjunction with agencies of the State, the Government and civil society.
2. For children who are victims of abuse, there are programmes for counselling, psycho-social rehabilitation, vocational training in courses for cooking, manicure/pedicure, electricity, shoemaking, information technology, locks, mechanics, and child supervisors, which seek social and family reintegration for these children.
3. Recent data on gender violence incidents, collected monthly by the United Nations High Commissioner for Refugees in Moxico province (see table), indicated that in 2005 144 cases of domestic violence were reported, as well as 28 cases of early marriage and ten cases of sexual abuse of children in different localities in the province.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Report on gender violence in September 2005**  **Moxico Province** | | | | | | | |
| **Type of incident** | **Location and number of incidents** | | | | | | |
| Luena | Luau | Cazombo | Lumbala  N’Guimbo | Total | Previous month | Cumulative since January |
| Rape | - | - | - | 1 | 1 | 2 | 13 |
| Attempted rape | - | - | - | - | - | - | 8 |
| **Child sexual abuse** | **1** | - | - | - | **1** | **2** | **10** |
| Sexual harassment | - | - | - | - | - | - | 5 |
| Domestic violence | 2 | - | 3 | 1 | 6 | 26 | 144 |
| Forced marriage | - | - | 2 | - | 2 | 1 | 8 |
| **Early marriage** | - | **1** | - | - | **1** | **3** | **28** |
| Others | - | - | - | - | - | 5 | 25 |
| Total all types | 3 | 1 | 5 | 2 | 11 | 39 | 241 |

*Source****:*** *United Nations High Commission for Refugees*

1. A survey was conducted by the MINFAMU and INAC with support from UNICEF, the UNDP, UNIFEM and the UNFPA of 750 children, 410 of whom were girls, in 9 municipalities of Luanda province, and covered urban, semi-urban and rural areas. The study found that three-fourths of the children (girls) interviewed, or 78 per cent, between ages 14 and 18, had experienced physical, psychological and sexual violence, including early maternity as a consequence, while in the 12 months that preceded the survey, these events occurred in 27 per cent of the cases.
2. The survey also showed that school-age children between 12 and 17 years old, in the school system and not in the system, were subject to some type of violence. Of those that were studied, 17.4 per cent were between 12 and 15 years old, and 6.3 per cent were between 16 and 17 years old; of those, 11.9 per cent are girls and the percentage of boys is the same. For children not in the school system, 13.2 per cent were between age 12 and 15, and 6.6 per cent were 16 and 17 years old, and 13.2 per cent were girls versus 6.6 per cent were boys.
3. Although the measures that were taken have been positive, there is still much to be done to reverse the trend. We note that there are still difficulties, both structural and functional as well as material and financial. The Action and Intervention Plan against the Commercial Sexual Exploitation of Children, approved by Decree 24/99, has not been implemented with the required efficiency, and the INAC has undertaken a programme to evaluate the plan’s implementation, with the expectation that the result will contribute to planning actions to bolster the strategy.

## I. Periodic review of boarding conditions

1. Based on the necessity of providing shelter for many children who have been separated from their families, shelters were created with the necessary livability requirements to enable the child to fully develop. Based on the verification made of boarding conditions by the MINARS supervisory and monitoring team, the centres that did not meet the minimum requirements were closed.
2. The Government entered into partnership agreements with religious and other entities to improve the boarding institutions through integrated education and vocational training activities.

# VII. BASIC HEALTH AND WELL-BEING

## A. National Health System

1. Regulated by Law 21-B/92 of 28 August, the National Health System consists of the Ministry of Health (MINSA) and the national health care network, which includes the public and private service providers who ensure the right to assistance during infancy and maternity and recommends policies to pay particular attention to children.
2. The National Health System provides orientation for the health units, public and private hospitals, and their professionals to carry out all activities related to promotion, prevention and treatment in the area of health. The provincial Governments are responsible for the health care network in the respective provinces in order to ensure that all the units operate.
3. The System has a National Health Commission established in accordance with article No. 7 of the Framework Law. This is an advisory body of the Government that adopts policy measures on health. The figure below provides an overview of the system that consists of the MINSA and the national health-care services network (with institutions and services that fall under it, other public institutions, and private entities, both for-profit and not-for-profit) that provide health care to the population.

**National Health System in Angola and the MINSA’s role**

**NATIONAL HEALTHCARE NETWORK**

**MINSA**

**NATIONAL HEALTH SERVICES**

**OTHER GOVERNMENT ENTITIES**

**GOVERNMENT INSTITUTIONS AND SERVICES THAT ARE UNDER THE MINSA**

**PRIVATE ENTITIES**

**FOR-PROFIT**

**NOT-FOR-PROFIT**

**NGOs**

**CHUR-CHES**

**Regulation**

**Policy-making**

**Planning**

**Evaluation & Inspection**

*Source: 2002-2005 National Health Development Plan, MINSA 2002*.

1. The primary level is composed of about 228 municipal hospitals and referral health centres, around 1,450 health posts and an undetermined number of community organizers. At the secondary level there are 32 general hospitals, and the provincial hospitals are included in this group. At the tertiary level that are 8 specialized central hospitals.
2. The general framework on the outskirts of the cities (primary network and municipal hospitals, which are the basis of the NHS), is characterized by health units in the municipal seats and a few additional units in the communal seats, but many have precarious structures.
3. The expansion of the health network involved adding 14,071 new workers to the national health system. However, despite the progress, there are still many problems. The primary network is dealing with even more problems in its operations, mainly due to limited current resources; this makes it impossible for it to completely serve its purpose of screening out uncomplicated illnesses, and users are sent directly to the most referred units as an access portal to the system; this overburdens the hospital level with illnesses that could be treated at the lower level. The reform of the health sector and the NHP seeks to respond to these health challenges at the national level, as well as the regional and international level.
4. The decentralization of the Government entities, in progress since 2002, and the weak regulations of the Framework Laws, have created some constraints and limitations to accessing health care, especially in the inland provinces.

## Reform of the System and National Health Policy

1. The MINSA is implementing a reform of the Health System for the purpose of devising the new National Health Policy[[14]](#footnote-14) (NHP) and the medium-term strategic plan for the sector. Other activities are being carried out in addition to these measures, namely a revision of the type of cooperation, the strategic plans for the public health programmes, studies on NHS health unit costs, “Angola: Despesa Pública no Sector da Saude (2000-2007),”***[[15]](#footnote-15)*** and conferences on the health sector to obtain a clear vision and recommendations for the NHP.
2. The formulation of the NHP,[[16]](#footnote-16) supported by the World Health Organization (WHO), determines the guidelines that are to be implemented through national health development plans and operational plans, taking the national poverty reduction strategy into account as well as the Millennium Development Goals (MDG). It defines the role of each party involved, namely the communities, the national private sector, international agencies, bilateral cooperation and international donors in the process of developing the health sector in Angola.
3. According to estimates, between 70 and 80 per cent of the health units were damaged or destroyed during the war, and the current health system covers just 30 per cent of Angola’s population. There is a severe shortage of skilled health care and motivated health-care workers outside the capital city and the drug and medical equipment supply and management system is weak.

**Number of health units**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Hospitals** | **Health Centres** | **Health Posts** | **Total** |
| Operational | 100 | 249 | 926 | 1,275 |
| Not operational | 12 | 28 | 790 | 830 |
| **Total** | 112 | 277 | 1,716 | 2,105 |
|  | 0.6/100,000  inhabitants | 0.3/20,000  inhabitants | 0.3/5,000  inhabitants |  |

*Source: GEPE/MINSA, 2004*

1. To carry out programmes, the Government budget made the following amounts available to the sector:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated annually in absolute terms and in percentages** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Upgrade and increase the offer of basic social services for the populations |  |  | 2,345,543,582.00 | 0.11 | 6,107,113,183.00 | 0.24 | NOT AVAILABLE |  |
| Rehabilitate and build health units | 13,615,634,905.00 | 1.42 | 13,783,700,735.00 | 0.63 | 15,549,304,270.00 | 0.62 | NOT AVAILABLE |  |
| Prepare health units |  |  | 396,554,200.00 | 0.02 | 4,529,829,985.00 | 0.18 | NOT AVAILABLE |  |
| Build and revitalize the integrated social centres | 4,342,14.00 | 0.00 |  |  |  |  | NOT AVAILABLE |  |

*Source:**2004, 2005, 2006 and 2007 Government Budget*

1. With the end of the armed conflict in 2002, the decrease in the high child mortality rates, as well as disease control, have become the biggest challenges facing the health system in Angola.

## B. Health sector public expenditures

1. Public spending on health in Angola has risen in absolute terms, reaching US $447 million in 2005.[[17]](#footnote-17) Compared to the Government Budget, the summary table of expenditures by programme[[18]](#footnote-18) shows that spending from the Government budget in 2006 and 2007 on the health sector rose 4.4 per cent and 4.70 per cent respectively.
2. Donor contributions in 2005 reached approximately 59 million dollars. If the 15-20 million made available by the Global Fund are added, they may reach 14 per cent of total public spending. The total amount of the Government budget rose substantially and funding available for health doubled between 2005 and 2007. In addition to this effort there are the contributions of the WHO, UNICEF, the Global Fund to Fight AIDS, Malaria and Tuberculosis (GFATM), the President’s Malaria Initiative (PMI), the World Bank, the European Union and the Japan International Cooperation Agency (JICA).
3. The year 2006 marked the beginning of the implementation of major programmes to purchase hospital equipment, build 13 municipal hospitals with a capacity of 90 beds, nine health centres with a capacity of thirty bids, and renovate four regional hospitals and two sanatoriums.
4. The process of decentralizing the government agencies affected the health sector management model. The assessment entitled Angola: Despesa Publica no Sector da Saude (2000-2007) indicated that in 2006 there were 234 budgets for the health sector versus 82 in 2000. The financial decentralization of resources has been determined by several factors, indicating that in some provinces where decentralization is more advanced, there is more than one budget per municipality, while in others there is only one health unit outside the provincial capital that has its own budget. Due to a lack of resources in the primary network, users have continued to be involved in a partnership with hospitals, particularly in the urban areas.

## C. Health and assistance services

1. The health status of the people of Angola continues to be characterized by low life expectancy (46 years) and high morbidity and mortality rates. The epidemiological context is dominated by malaria, acute diarrheal diseases, acute respiratory ailments, tuberculosis, trypanosomiasis (sleeping sickness), and immuno-preventable diseases such as measles and tetanus, among others.
2. A small number of diseases, namely malaria, acute respiratory infections, diarrheal diseases and neonatal tetanus, are directly responsible for two-thirds of child deaths in Angola.[[19]](#footnote-19)
3. The maternal mortality rate is high as well, with an estimated 1,500 deaths per 100,000 live births. MINSA sources indicate that institutional coverage of deliveries is quite low, with only 22.5 per cent of deliveries taking place in health units, due to reasons of geographical, economic and cultural accessibility. The same proportion also represents the number of deliveries assisted by skilled workers and indicates that hemorrhages (33 per cent), unsafe abortions (24 per cent), septicemia (17 per cent), toxemia (14 per cent), and ruptures of the uterus (9 per cent), are the leading causes of direct obstetric deaths. The Maternal Death Prevention Committee held a workshop in 2006 on the strategy for implementing Maternal Death Prevention Committees with the purpose of building the capacities of the task force members of the Provincial and Municipal Committees to reduce maternal deaths through technical information in terms of guidelines for the various interventions at the institutional and community level.
4. The country’s epidemiological profile shows that malaria continues to be the principal cause of death throughout the country and was the leading cause of morbidity and mortality. The most recent MINSA data indicate that in 2005 malaria accounted for 64 per cent of all recorded cases and 65 per cent of all reported deaths. The mortality rate varies between 15 and 30 per cent. Children under five and pregnant women are the most heavily affected population groups. Malaria accounts for roughly 35 per cent of demand for health care, 20 per cent of hospital stays, 40 per cent of perinatal deaths, and 25 per cent of cases of maternal mortality.[[20]](#footnote-20)

**Morbidity trend by transmissible diseases from 2003 to 2006**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DISEASE** | **2003** | **2004** | **2005** | **2006** |
| Malaria | 3,027,514 | 2,080,348 | 2,125,718 | 2,329,316\* |
| ARI | 273,240 | 180,130 | 560,551 | 721,512 |
| ADD | 304,999 | 222,653 | 299,356 | 396,987 |
| Conjunctivitis | 24,342 | 19,400 | - | - |
| Typhoid fever | 23,163 | 20,616 | 75,171 | 89,019 |
| Bilharziosis | 17,480 | 9,663 | - | - |
| Tuberculosis | 12,303 | 9,539 | 36,480 | 48,103 |
| AIDS | - | - | 3,618 | - |
| Marburg disease | - | - | 252 | - |
| Cholera | - | - | - | 66,943 |

* Malaria data up to June 2006

*Source: MINSA/ 2006 – 2006 Government Survey*

1. The spread of trypanosomiasis is on the rise in Angola. With the 12 new mobile teams and the use of new technologies in the area of entomology, over 235 new cases have been discovered out of a universe of 301,380 individuals observed in six endemic provinces.
2. The five leading causes of illness and death continue to rise, and this became critical with the upsurge in cholera in February 2006 which, by December, had caused 66,943 cases and 2,715 deaths in all the provinces except Lunda Sul and Moxico. Deaths are concentrated in the rural areas without access to health services and in the outskirts of the major urban areas where the people are poor.

## D. Children’s health (child mortality in children less than five years old)

1. The Government has implemented specific programmes to promote a healthy lifestyle for the purpose of survival and protecting children’s development, and has made significant strides in strengthening essential services for the communities; the result is greater coverage of the number of children and a lower maternal-child mortality rate.
2. The MINSA is implementing the 2004-2008 National Strategic Plan to Accelerate the Reduction in Maternal-Child Mortality in Angola. The plan was readjusted for the 2005-2009 period[[21]](#footnote-21) to expand coverage and upgrade the quality of services in the primary network. This includes health posts, health centres and municipal hospitals and is being done to provide greater access to health services for the people. This Plan created the Municipal Children’s Health Days, begun in 2007, which will contribute to the main objective of the Strategic Plan in 59 municipalities at first.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated annually in absolute terms and in percentages** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Expanded immunization | 175,082,710.00 | 0.02 |  |  |  |  | Not available |  |
| Maternal-child health | 1,393,237,453.00 | 0.15 | 519,643,450.00 | 0.02 | 587,266,609.00 | 0.02 | Not available |  |
| Breastfeeding and nutrition |  |  |  |  | 99,748,200.00 | 0.00 | Not available |  |
| Malaria control |  |  | 378,021,092.00 | 0.02 | 407,107,860.00 | 0.02 | Not available |  |
|  |  |  |  |  |  |  |  |  |

*Source: Government Budget for 2004, 2005, 2006 and 2007*

1. The private sector is making a praiseworthy contribution to the provision of services to the population, as it has increased its health capacity by creating new health facilities.
2. Through the current reform, targeted and controlled intervention programmes have been implemented for all the components of the national health service, including preparing strategic and operational public health programmes, budgets, management, monitoring and project evaluation.

|  |  |  |  |
| --- | --- | --- | --- |
| **Amounts made available by UNICEF to the country,**  **in the context of cooperation with the Government**  **for the 2005 - 2008 period** | | | |
|  | **Regular resources**  *( in thousands of US dollars)* | | |
|  | *Regular* | *Others* | *Total* |
| Health and nutrition | 3,200 | 17,000 | 20,200 |

*Source: Government/UNICEF cooperation agreement*.

1. The child mortality rate in Angola is one of the world’s highest according to available data, with 55 per cent of deaths occurring in children under five.[[22]](#footnote-22) The infant mortality rate (less than one year old) is estimated at 150 deaths per 1,000 live births, while the mortality rate for children under five is one of the highest in the world, at 250 deaths per 1,000 live births.[[23]](#footnote-23)
2. The main causes of child mortality and morbidity are acute respiratory infections, diarrheal diseases and other illnesses. These are caused in turn by poor access to clean drinking water and adequate means for disposing of waste, in particular in the rural areas where many families (60 per cent) do not have access to drinking water and others have no means to dispose of their waste (75 per cent).

#### 2005-2009 Strategic Plan to Accelerate the Reduction in Maternal-Child Mortality in Angola

1. As part of the strategy to reduce maternal-child mortality and improve nutrition, in 2004 the MINSA and its partners prepared the 2005-2009 Strategic Plan to Accelerate the Reduction in Maternal-Child Mortality.[[24]](#footnote-24) On a national scale they are implementing theessential package of maternal-child health-care services, which is aligned with the epidemiological profile and the features of the national health system. This strategy aims to strengthen the technical and management capacities of the provincial and municipal levels and to foster innovative initiatives to achieve the announced objectives.
2. The package consists of a series of integrated preventive, promotional and curative interventions with the following objectives: lower the mortality rate to 50 per cent for children under five, lower the malnutrition rate for children under five to 30 per cent and lower the maternal mortality rate to 30 per cent.
3. Another low-cost high-efficiency package that is easy to implement is covering the country to benefit vulnerable groups without access to health services through a fixed network of public health services that includes NGOs and churches. This network was formed by outreach and mobile health teams with three community-based and family activities. Based on their competencies, the package is implemented by inter-related levels which complement each other to achieve the objectives of the Plan for the Accelerated Reduction of Maternal and Child Mortality, namely:
4. Clinical care and prevention activities of the fixed public health services network;
5. The provision of prevention services such as immunization, distribution of Vitamin A, disinfestation, distribution of insecticide-treated nets, education for the communities and curative services for some current diseases such as malaria and ADD, by outreach and mobile teams;
6. The provision of preventive and curative services by NGOs and churches selected by the MINSA;
7. Basic care and services at the community and family level.
8. The delivery of the intervention package to the target populations is guaranteed by the health network of the National Health Service (NHS) in the MINSA, supplemented by the health services provided by churches, NGOs and private entities. Care is provided primarily by the primary level or primary health care which is connected to the secondary and tertiary levels for treating emergency obstetric cases. Article 5 of the General Regulation on Health Units that are part of the Ministry of Health establishes bases for subdividing health throughout the country into “Health Areas” (health map) to improve the management process.
9. The MINSA established the bases for the planning[[25]](#footnote-25) and operationalization of the maternal-child health programmes package in the health services network, promoting participatory planning from the bottom up, developing the capacities of local employees and partnerships at the health unit level and the municipal level using national standards.
10. Municipal planning is based on the plans of each health unit, avoiding duplication, and ensuring complementarity between levels, and the territorial coverage of the municipality’s population. At the provincial level, the municipal plans are aggregated and supplemented with provincial support activities.

#### The Strategic Plan to Accelerate Child Survival and Development Programs

1. In the context of the Strategic Plan to Accelerate Child Survival and Development Programs, supported by UNICEF, the UNFPA and the WHO, whose principal goal is to lower mortality in children under five, the MINSA provided resources to the municipality of Kuito, in Bié province, to consider projects to revitalize primary health services.
2. The Government’s perspective is to increase and improve the child survival and development package through the process of revitalizing health services throughout the country, beginning with 16 municipalities in five provinces, i.e. Luanda, Moxico, Huíla, Cunene and Bié. In this first phase, 32 per cent of the total population of Angola will be covered. The package includes antenatal consultations, delivery care, post-partum and neonatal care, prevention for children’s health, providing drinking water, sanitation and hygiene, as well as HIV prevention, providing antiretroviral pediatric treatment and stopping the vertical transmission of HIV from mother to child.
3. To honor the first commitment from the Third National Forum on Children regarding life expectancy and the sustainability of the process, the 2007-2013 Investment Plan to Accelerate Child Survival and Development is being implemented in three phases until the entire country is covered. Invaluable support is being provided by the donor countries, the United Nations agencies, and both domestic and international NGOs.

## Malaria

1. Malaria is the largest public health problem in Angola. According to estimates, malaria accounts for 35 per cent of total mortality in children under five, 25 per cent of maternal mortality, 60 per cent of hospital stays for children under five, and 10 per cent of hospital stays for pregnant women. Malaria is responsible for 55 per cent of peripheral health network usage. Malaria prevalence is estimated at six million clinical cases per year in Angola.[[26]](#footnote-26)
2. Angola subscribed to the Abuja Declaration entitled *Roll Back Malaria* in 2000, adopted the Africa Malaria Day Declaration and celebrates Africa Malaria Day every year in April. These are international commitments that were the reason for the creation in 2003 of the National Malaria Control Program and the implementation of the National Strategic Plan to Control Malaria (Plano Estratégico Nacional para o Controlo da Malária - PNCM). This is a five year plan (2008-2012) with the following goal:
   * Reduce malaria prevalence by 50 per cent (estimated at six million clinical cases per year).
   * Reduce mortality due to malaria by 50 per cent.
3. The Government carries out priority prevention integrated vector control activities at the national level by distributing Insecticide-Treated Nets (ITNs) and Indoor Residual Spraying as part of the PNCM. In 2007 the Government also distributed 826,000 long-lasting mosquito nets and sprayed over 120,000 houses with insecticide in the provinces of Huíla and Cunene in 2007; roughly half a million people were served.

**Number of malaria cases in Angola (1999-2006)[[27]](#footnote-27)**



**Number of cases of deaths from malaria**

**in Angola (1999-2006*)***



1. The apparent decrease in the different rates as shown by the charts above should be interpreted based on the factors that may contribute to this, namely the deterioration of the reporting system in 2005-06, the stabilization of the populations, the improvement in the population’s nutritional status, the improvement in laboratory confirmation of diagnoses, etc.
2. The malaria programme gave rise to another strengthened vector control programme with new entomological measures including the use of biolarvicides. With the introduction of new drugs that are sensitive to the plasmodium, there have been accelerated adaptation courses for physicians, nurses and laboratory workers throughout the country.
3. New technologies to control the major endemics have been introduced and accelerated in the national public health programmes and malaria vector control with fumigation of the home and outside the home has been tested. In additions, physicians, nurses and diagnostic workers have been trained in managing malaria cases throughout the country, and in the use of new antimalarials sensitive to malaria parasites.

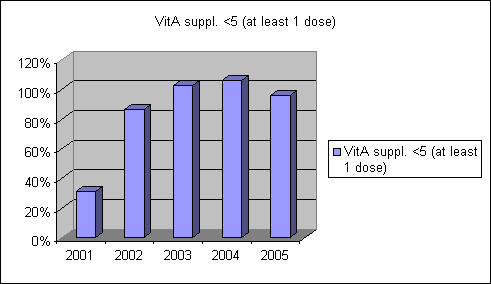
## E. Nutrition and breastfeeding

1. In partnership with UNICEF, the MINSA is developing a Nutrition Vigilance System, and the first nutrition survey is now underway. The National Nutrition Program which began in 2001 has a module that was revised in 2006 to manage malnutrition, which is an important instrument for treating severe malnutrition that the Nutrition Therapy Center will use. The module is based on the National Protocol to Treat Severe Malnutrition that was adopted in Angola in October 2000.
2. Severe malnutrition is managed by the community through Ready-to-Use Therapeutic Food (Alimentação Terapêutica Pronta a Usar - ATPU), which fosters the administration of food supplements at the supplementary food centres for children for six months at the local level and the purchase of therapeutic milk.
3. The purpose of the Food Security Program,[[28]](#footnote-28) now under development, is to support the initiatives of vulnerable population groups, distributing arable land to them to increase food production in the communities by providing integrated packages of farming services, with the principal goal of preventing hunger and malnutrition and ensuring that the most vulnerable people have access to the necessary food resources.

|  |  |
| --- | --- |
|  |  |

*Source****:*** *UNICEF Angola 2005*

1. Estimates from 2007 show that 5,710,463 children under five suffer from some type of malnutrition; of these, 40 per cent have moderate malnutrition and 12 per cent have severe malnutrition. Malnutrition affects half of the Angolan population under five years old and causes two out of every three deaths in this age group.
2. Activities to lower the rate by 30 per cent by 2009 are carried out through food security programmes and by upgrading health services, water, etc. Among the extremely poor groups, daily calorie consumption is less than one-third of the recommended amount and in urban areas just 25 per cent of families consume the recommended number of calories per day.[[29]](#footnote-29)
3. Deficiencies in micronutrients also have a significant impact on the health and development of children and women in Angola. Vitamin A deficiency in Angolan children less than five years old was 64 per cent in 2001, and it is estimated that 75 per cent of the mothers that breastfeed have a Vitamin A deficiency.



***Source:*** *UNICEF Angola 2005*

1. The anemia rate in Angolan children was estimated at 70 per cent and seems to have changed little in the last decade. There are no data on pregnant women, but according to estimates, two-thirds of them suffer from anemia, and this contributes to considerable levels of low birth weight.
2. There are no recent data on iodine deficiency diseases (ID), but the MICS found that only 30 per cent of families consume iodized salt. As part of the eradication of diseases caused by iodine deficiency, in 2002 the Government approved the Strategic Plan for the National Salt Iodization and Iodine Deficiency Disease Control Program.

****

1. Massive integrated campaigns to fight measles, polio and other diseases, including Vitamin A supplements, have been carried out since 2003, and disinfestation of children has been done for children nine months old, yet there are still many constraints that limit children’s access to routine services, Vitamin A and albendazol, which are being addressed so that they can be eliminated.

## F. Immunization

1. Although vaccine coverage has not yet even reached the 50 per cent level, it has improved considerably in Angola and the system is being strengthened. In 2006 about 70 per cent and in 2007 100 per cent of vaccines and routine vaccines and the pentavalent vaccine from GAVI were purchased by the Government to accelerate the process and honor the commitment to eradicate polio in Angola. The expansion and improvement of the cold chain network is still being supported by the alternative solar energy system.
2. With support from the United Nations agencies and other social partners, the Government carried out a series of activities to accelerate the immunization programmes, chief among which are:
   * Supplying the standard vaccines, Vitamin A and immunization materials to support routine BCG immunization, measles, DPT3, polio and yellow fever for children less than one year old;
   * Supplying the tetanus vaccine for women from 15 to 45 years old;
   * Capacity-building for 1,200 health-care workers in immunization;
   * Training for cold chain specialists in 59 municipalities;
   * Supporting the communities in 59 municipalities to monitor the immunization status of children;
   * Supporting for training adolescent girls, in the schools, to plan immunization for tetanus;
   * Evaluating and planning cold chain requirements at the provincial and municipal level;
   * Providing materials and equipment for the cold chain to the municipal level;
   * Supporting monitoring the immunization status of children less than one year old by the community;
   * Designing and carrying out social mobilization campaigns.
3. Technical support was provided to the National Expanded Program on Immunization (EPI) to prepare technical materials and train trainers for preparing microplans for 59 priority municipalities. In total, 1,981 health-care workers and 3,103 community volunteer activists were trained, which resulted in intensifying routine immunization, and consequently, in significantly higher coverage rates.

*Eradication of polio and measles*

1. As part of the national polio and measles immunization campaigns which began in the second half of 2003, the Government is continuing to intensify its activities to eradicate polio in Angola, covering the target population in the entire country in 2004. Five million children under age five were vaccinated against polio, and roughly four million received Vitamin A supplements during these campaigns.
2. There were 12 confirmed cases of the wild poliovirus in the provinces of Kuando Kubango, Namibe, Huila and Cunene from February 2005 to December 2006, and ten cases from January to September 2007, as well as two others in the provinces of Luanda and Benguela in the same year. This was the reason for organizing immunization campaigns in February 2007 and three national polio immunization rounds from June to September 2007; the first was held in conjunction with the border countries (the Republic of Namibia and the Democratic Republic of the Congo).

**Map 1.5.4.1: Epidemiological status of polio in Angola in 2007**

|  |
| --- |
| **Confirmed Cases of the Polio Virus from June 2006 to August 2007** |
|  |

**Source: UNICEF Health Section, 2007**

Legend:

**Ultima data de início 8 de Julho de 2006 = Last starting date was 8 July 2006**

1. In partnership with UNICEF, the WHO and others, the MINSA carried out a national campaign in 2006 entitled “Living a Healthy Life,” with many projects. The campaign reached 100 per cent coverage and covered 3,218,676 million children under five years old at the national level with the administration of the measles and polio vaccines, Vitamin A and disinfestation. Mosquito nets were distributed in seven provinces with a high prevalence of malaria. Routine Vitamin A administration and disinfestation are continuing in the health units where workers were trained and where Vitamin A and albendzol tablets are available.



Legend:

Vitamin A and Albendazol from 2001 to 2007

Intensification of routine activities with Vitamin A and albendazol in December 2007

*UNICEF, Nov. 2007*

1. The intensification of routine immunization in 2007 brought about a substantial increase in coverage rates in the last years as figure Ashows for covering children vaccinated during the three national polio immunization rounds during the NIDs. Given the effectiveness of the intervention package, and the synergy and sustainability of its effects, the campaign made a major contribution to the accelerated programme to lower the mortality of children under five in Angola.

Figure A: Angola: Coverage rates for the three national polio rounds in 2007



*Source: UNICEF Health Section, 2007*

**Table B. Estimated coverage of the National Polio Immunization Days in Angola, 2005-2006**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **Population** | **Total number of**  **c children vaccinated** | **Percentage %** |
| 2005 – phase 1  2005 – phase 2  2005 – phase 3  2005 - phase 4  SNID **March 2006**  2006 – phase 1 July  2006 – round 2 Sept.  2006 – round 3 Dec.  2007 – round 1 June  2007 – round 2 July  2007 – Round 3 Sept. | 5,366,468  5,366,468  5,366,468  5,366,468  1,812,308  3,800,535  5,563,896  5,563,896  5,701,416  5,701,416  5,701,416 | 5,369,118  5,376,558  5,662,741  5,803,547  1,794,380  4,152,567  5,669,128  5,708,622  5,932,313  6,108,586  6,108,586 | 100.5  100.2  105.5  108  99  109  102  103  103  107  107 |

*Source: MINSA*

*Routine immunization coverage*

1. Routine immunization coverage for children under one year old is still low, mainly due to the lack of a network of operational health facilities, logistical problems, problems maintaining the cold chain, and the lack of extension services in many zones. That is why this is the weakest component in routine immunization. The table below illustrates the percentage of coverage as a contribution to the routine immunization campaigns from 2003 to 2007. Map 6.2.b shows the percentage of pentavalent coverage in January and March 2007.

**Percentage of coverage by the routine immunization campaign**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **DTP3/Pentavalent** | **Measles** | **Polio 3** | **TT** |
| 2003 | 46 | 62 | 45 | 72 |
| 2004 | 60 | 70 | 57 | 78 |
| 2005 | 47 | 44 | 50 | 52 |
| 2006 | 40 | 48 | 44 | 56 |
| 2007\* | 59\*\* | 69 | 58 | 71 |

\* From January to September 2007 \*\* Pentavalent vaccine in 2007

**Map .6.2.b: Pentavalent Coverage, January-March 2007**



*Source: Health Section, UNICEF Angola, 2007*

Legend: Pentavalent-3 Coverage, Jan-March 2007

muncipalidade = municipality

sem vaccinacao = not immunized

[remainder illegible]

1. With technical support from UNICEF and the WHO, the Government designed a plan to intensify routine immunization at the health posts in order to reach the remote zones through mobile teams in an effort to vaccinate children less than one year old in 84 priority municipalities that represent 85 per cent of the target population. The vaccines include BCG, OPV, DPT and measles. UNICEF provided the OPV, DPT, BCG, TT, yellow fever and other materials.

**Percentage of routine immunization coverage in 2006-2007**



*Source: UNICEF Health Section*.

1. To increase routine immunization coverage, three additional rounds were carried out from September to December 2007 and included activities to eliminate TT in the higher-risk zones as well as Vitamin A supplements and disinfestation.
2. Although routine immunization coverage (OPV-3) is still below 60 per cent in children less than one year old, coverage has been on the rise.

## G. Children with special needs

1. The social policy for the most vulnerable groups carries out programmes to care for disabled persons. The programmes ensure and monitor their social insertion in accordance with Executive Decree No. 4/03 that governs the duties of the MINARS, and provides funding to disabled citizens with permanent disabilities to take on any job when they are not covered by any other social assistance and do not have their own financial resources, in accordance with Law No. 6/98 of 7 August.
2. To guarantee the rights of disabled children, the Government has a system that determines the nature and severity of the disability and facilitates access to health-care services, rehabilitation, training and social reintegration, through participation in socially useful activities.
3. Article 23 of the CL acknowledges the right of mentally and physically disabled children to live a full and decent life under conditions that guarantee their dignity, further their autonomy and facilitate their participation in the active life of the community, thereby avoiding any discrimination based on their disability.
4. It is acknowledged that there are a few legislative and policy gaps and that it is necessary to guarantee the rights of disabled children by adopting measures that monitor and assess the programmes that are intended for them, with training of special managers connected to services that provide care, rehabilitation, integration and active participation in the social life of this group of children, with sufficient funding to ensure their sustainability.

**H. National Strategic Plan for HIV/AIDS**

## HIV/AIDS: 2004-2007 and 2007-2010 National Strategic Plan to Control Sexually Transmitted Infections, HIV and AIDS

1. Beginning in 2002 the Government designed and implemented a National Strategic Plan for HIV/AIDS[[30]](#footnote-30) in partnership with civil society and the United Nations System in an effort to combat the spread of the disease. The strategy, divided into Provincial Action Plans for the 2003/2004 period, culminated in the enactment in 2004 of a law with provisions to protect children affected by HIV/AIDS from stigma and discrimination and to foster access to counselling, voluntary testing, antiretroviral therapy and prevention of mother-to-child transmission (PMTCT) during pregnancy, delivery and breastfeeding. Also, in 2005, the National Institute and National Commission to Fight AIDS were created.
2. In 2006, the MINJUD, in partnership with UNICEF and with technical support from the National Institute to Fight AIDS, launched the HIV/AIDS leisure time awareness programme in an effort to increase the level of knowledge in children between 15 and 18 years old of how to prevent sexually transmitted infections. The campaign is of great importance in the prioritization of activities directed toward children, primarily in the area of prevention, because they are a valid part of opportunities to lower incidence rates. Two years later, over 10,673 children have participated in the programme combined with activities carried out on the national scale.
3. In the context of monitoring, research was done for the Rapid Analysis and Evaluation (RAAAP-ANGOLA) and preparation of the National Action Plan for OVCs due to HIV/AIDS. The preparation of the National Action Plan to Prevent and Lower the Impact of HIV/AIDS on Families and Children, in January 2007, was a participatory effort coordinated by the MINARS and supplemented by governmental agencies that assist the Inter-ministerial Coordinating Commission for Early Childhood Activities.
4. Exponential growth in the HIV/AIDS epidemic has been observed in all the provinces and cumulatively in the country, and this gives rise to concern for the health authorities. UNAIDS estimates that in Angola there are nearly 450,000 persons living with HIV, and of these, over 76,000 cases are children under age 15. Prevalence rates remain at around 2.7 - 2.8 per cent, and the highest rate is in Cunene province at 10 per cent. In 2006 the it was reported that the number of cases compared to 2005 had doubled, with around 6,978 cases, which confirms a steady increase in cases in the pandemic. In some areas of the country and in specific population groups, rates are higher at around 12 per cent.[[31]](#footnote-31) The magnitude of HIV/AIDS infection is considered lower than the average of the countries of Southern Africa, which is considered the epicentre of the pandemic.
5. Although the estimated HIV/AIDS prevalence rate is relatively low (3.9 per cent), the extremely limited knowledge and predominant attitudes that conflict with desired attitudes and knowledge are the principal factors in the projected increase in prevalence for the coming years. The number of Orphans and Vulnerable Children (OVCs) due to HIV/AIDS is on the rise, and the rate is 9.2 per cent in Cunene province according to the indicators.

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| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated in absolute terms and percentages, per year** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Prevention and assistance for persons with STDs | 222,189,253.00 | 0.01 |  |  |  |  | NOT AVAILABLE |  |
| HIV/AIDS Control | 1,270,455,430.00 | 0.13 | 1,159,421,410.00 | 0.05 | 2,215,506,063 | 0.09 | NOT AVAILABLE |  |

*Source: 2004, 2005, 2006 and 2007 Government Budget*

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| --- | --- | --- | --- |
| **Amounts made available by UNICEF to the country,**  **in the context of cooperation with the Government,**  **for the 2005 - 2008 period** | | | |
|  | **Regular Resources**  *(in thousands of US dollars)* | | |
|  | *Regular* | *Others* | *Total* |
| Youth and HIV/AIDS | 2,000 | 6,000 | 8,000 |

*Source: Government/UNICEF cooperation agreement*

1. A recent study on the behavior of youths in Angola found that even though 90.5 per cent of youths had already heard of HIV/AIDS, very few felt that they were at moderate or high risk of infection, and few have sufficient knowledge of how to protect themselves and to prevent and treat HIV/AIDS. In Angola the age at which both boys and girls have their first sexual relations is 15.[[32]](#footnote-32) The vast majority of sexual encounters are unprotected, and only 9 per cent of youths stated that they had sometimes used a condom.[[33]](#footnote-33) Moreover, the 2001 MICS also found that 32 per cent of Angolan women had never heard of HIV/AIDS, and that just 8 per cent were knowledgeable enough to protect themselves from infection. It is predicted that in 2010 the seroprevalence rate will rise to 18 per cent, resulting in the infection of roughly 1.6 million persons with HIV/AIDS, and that in Angola there will be a total of 200,000 OVCs.[[34]](#footnote-34)

## I. Social security and child care services and facilities

1. In the context of support for disabled persons, implementation continued in the 2005/2006 two-year period of the Community-Based Rehabilitation Program (Program de Reabilitação Baseada na Comunidade - RBC), and the Equal Opportunity Promotion and Community Participation Programs (Programas de Promoção de Igualdade de Oportunidades e de Participação Comunitária), with the purpose of lowering dependency rates for this vulnerable group of the population. Services were provided to 20,877 disabled persons including children, which is roughly 30 per cent of the goal.
2. The S.O.S. Criança Program in Luanda province, whose purpose is to receive reports and refer cases to the police, justice and child protection institutions, is in an expansion phase to the provinces of Benguela, Huambo, Uíge and Zaire.
3. Based on the necessity of social protection of children, the Iluma Social Center was created in Luanda province. This centre provides services for female children who are victims of abuse and sexual exploitation and who come from low-income families, as well as for street children. At the centre they are given manicure and pedicure training, child supervision and cooking. The Projovem Center hosts male children and provides courses in electricity, locks and mechanics. In the other provinces, in a partnership consisting of the MINARS, MAPESS, MINFAMU and churches, children are given vocational training in shoemaking, carpentry, apparel-making, cooking, pastry-making and information technology.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated in absolute terms and percentages, per year** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Child assistance | 414,557,954,00 | 0.,04 | 471,144,524,00 | 0.,02 | 936,694,511,00 | 0.,04 | NOT AVAILABLE |  |

*Source****:*** *2004, 2005, 2006 and 2007 Government Budget*

## J. Standard of living

1. The context of peace generates economic growth, with a major increase in the Gross Domestic Product (GDP) beginning in 2005. The actual cumulative change in GDP from 2002 to 2006 was 89.6 per cent, so that it nearly doubled in the period. This is remarkable performance without parallel in Africa, after Equatorial Guinea. This cumulative increase reflects an average annual change in GDP of 13.6 per cent.
2. Although the oil sector dominates the Angolan economy, there has been, however, and for the same period, a significant recovery in the non-oil sector. The cumulative change was 81.4 per cent, which is an average annual change of 12.7 per cent. Diamond mining increased in the same period for a cumulative change of 79.3 per cent (with an average annual growth rate of 12.4 per cent), while the other sectors of activity, including agriculture, fishing, the processing industry, energy and water, construction and services, reported 61.63 per cent cumulative growth, which is an annual average growth rate of 10.1 per cent.
3. Nevertheless, in 2005 and 2006 the non-mineral sectors radically changed their growth dynamic. In cumulative terms, the change amounted to 44.1 per cent, which is an annual average rate of 20 per cent. This is an excellent record and justifies high expectations for improving living conditions for the people and doing a better job of meeting their basic needs, and the needs of children in particular.
4. The Government Programme implementation strategy established several priorities due to the necessity of making the dividends of peace more visible. Thus, the recovery in national production and improving the people’s living conditions were considered two key requirements of the programme. To strengthen them, public investments and policies should converge into a logic of maximizing the associated synergistic effects.
5. The general indicator for achieving these objectives is the GDP growth rate. Because it is a synthetic index, it is not possible to include immediate improvements in the people’s well-being. Nevertheless, the growing association between the economy and jobs demonstrates that, whenever the GDP growth rate is high, general living conditions tend to improve.
6. According to estimates, the actual national GDP growth rate in 2006 was 18.6 per cent, versus 19.5 per cent as projected and 20.6 per cent in 2005. Factors that contributed to not reaching the projected goal were lower growth in oil (13.1 per cent versus 21.6 per cent as projected), diamonds (30.9 per cent versus 41 per cent as projected), construction (30 per cent versus 66.2 per cent projected for the sector) and energy and water (13.25 per cent versus 28.3 per cent as projected). Despite these swings, in 2006 the country maintained the highest growth rate in Africa since Equatorial Guinea did not exceed 5 per cent.
7. Indeed, in 2006, non-oil GDP, which consists of activities in the areas of diamond mining, agriculture, forestry, livestock and fishing, the processing industry, construction, energy and water and all market services, were up by 25.7 per cent versus a projected 17.2 per cent and rose by 14.7 per cent in 2005. The reason for this performance can be attributed to the processing industry and market services, which experienced a near-exponential growth phase, as well as agriculture, whose projected growth was negative, and the dry weather in certain regions of the country that affected a few crops, eventually resulted in an actual change of 9.8 per cent.
8. In terms of employment (a crucial variable in domestic economic integration and ensuring national reconciliation), available data show that the unemployment rate in 2006 was around 25.2 per cent, which is four percentage points lower than the estimated value for 2005, which was 29.2 per cent, certainly due to the dynamics of job creation in the construction and fishing sectors and, to a certain extent, in non-market services.
9. As a corollary to these excellent results, there is the change in per capita GDP. Although synthetic, it is an indicator of general level of living conditions. This figure was about $2,565.20 in 2006 (in current prices), as opposed to $1,984.80 for 2005, which is a 29.2 per cent increase over 2005. It should be noted that in 2005 the increase in the value of per capita GDP was 57 per cent over 2004, and per capita income was approximately $1,265.
10. Real growth in the average income of Angolans was 15.3 per cent in 2006, for a demographic growth rate of 2.9 per cent (in 2005 this increase was around 17 per cent). Although the distribution of national income remained asymmetrical, it is likely that there was some improvement in the poverty rate.
11. Actually, combined with real growth, public investments in the social area, effective inflation control (31 per cent in 2004, 18.5 per cent in 2005 and 12.2 per cent in 2006), and the social inclusion policies of the General Government Program, it is likely that in 2006 the poverty rate fell to 50 per cent (note that the 2005 Survey calculated a value of 56 per cent for this year, 12.2 percentage points lower than in 2000, which is when the Family Expenditures and Income Survey was conducted).
12. Public investment, estimated at roughly $1.5 billion, grew by 76.5 per cent over 2005, and served as a major catalyst for the national economy, not just from the standpoint of providing incentives for private investment, which was estimated at $11.4 billion, but also from the standpoint of an improvement in the people’s general living conditions.
13. Indeed, of the total amount Government investment expenditures, the social sectors received 28.3 per cent, the economic sectors obtained 8.3 per cent, and the infrastructure sectors, including roads, railways, energy and water, received around 36.9 per cent. Therefore, it can be said, although just in general, that the policy in the 2005-2006 General Government Program of linking public investment to the creation of conditions for growing the productive sectors is improving the people’s well-being and has had concrete and positive results.
14. As for the policies to strengthen non-oil production, the following should be highlighted: the primary sector (agriculture, livestock and fisheries); the generation and distribution of energy and water; and the processing industry. Growth rates in the added values in 2006 show that this is the beginning of a process that could lead to repositioning capacities, increasing the economy’s production potential, and integrating the domestic market.
15. In 2006 budget execution was an important component for stabilizing prices in the country and for regaining confidence in the national currency; through the execution of public investments, structural conditions were created to improve the people’s living conditions and to ensure a sustained recovery of non-mineral production.
16. With regard to social well-being, the MINJUD is implementing the youth lending project, which aims to support around 20,000 youths that have business initiative, with a view to promoting employment for themselves and to support vulnerable youths.

1. The improvement in the standard of living is dependent on many factors that were addressed in the national strategy to fight poverty. The implementation of the programmes in the strategy are coordinated and linked institutionally, and there is effective integration of policies in all areas. There is institutional coordination and linkage in the implementation of strategy programmes, and policies are effectively integrated in every area, but there is room for improvement. Consequently, this is an obstacle to transposing them to the current challenge.

## K. Water and environmental sanitation

1. In cooperation with its social partners, the Government intensified programmes to: increase and improve water quality; strengthen supply services to the people; promote basic sanitation and hygiene; increase access to drinking water to 48 per cent of persons in rural areas and 76 per cent of persons in urban areas; and provide access to safe means of waste disposal to 32 per cent of persons in rural areas and 79 per cent in urban areas.
2. Although slow, progress in national coverage for supplying drinking water is positive. The Water Act, “Law 6/02,” brought about in-depth reforms in public policies for the sector to accelerate coverage by expanding partnerships and did so through integrated water resources management.
3. In 2005, with UNICEF support, and in cooperation with the European Union (EU) and UNESCO, the MED evaluated the status of water and sanitation services in schools in 41 municipalities.
4. An integrated approach to the water and sanitation sector was created in a logical framework to be included in the national water system. Implementing this process involved the participation of all the provinces, sector partners, national and international NGOs, and the private sector. Data from the surveys laid the groundwork to identify gaps, requirements and solutions to carry out the plans and programmes necessary to orient all the programmes in the water and sanitation sector at the national level in the next year. The results complemented the National Information Management System for Water and Sanitation and the System of Information Management for Education.
5. In the area of the Schools for Africa program, bathrooms and equipment for water were built in seven schools, benefiting a total of 3,735 students, 1,796 of whom were girls and 1,939 were boys, and 115 teachers as well. The Schools for Africa program merged the education and water/sanitation programmes into one comprehensive holistic school package. As the evaluation showed, a national strategic package for health and hygiene in the schools is being implemented in cooperation with the WHO, the WFP and UNICEF. This package aims to contribute to lowering child mortality and morbidity and to support the education of children by improving water supply, sanitation, and by promoting hygiene in the schools and in the communities.
6. The water and sanitation programmes included community participation for implementation and maintenance, and water user groups and parents’ committees were created as a way to ensure the sustainability of the water and sanitation projects. Women were trained and were included in the water and sanitation coordinating committees for the community of water user groups.
7. For the urban areas of the largest cities, efforts were undertaken to rehabilitate and build the water supply and sanitation system, with priority on the urban areas throughout the country, in order to achieve the ambitious goal of increasing coverage to 76 per cent in 2006.
8. In 2006, programmes concentrated on finalizing the execution of projects for specific areas in Bié, Huambo, Benguela, Uíge and Huíla. As a result, 62,000 new users were given access to drinking water supply services, for a total of 1.2 per cent of the rural population that has access to better water supply systems, lowering by 2.5 per cent the gap in terms of the MDGs. The Huíla provincial authorities agreed to finance 50 per cent of the water supply systems. A total of 49,000 students from 53 primary schools gained access to better water and sanitation services at school.
9. The “National Water, Sanitation, Environment and Hygiene Project (ASAH) by the European Union was designed for the 2007/2008 period to be implemented in a partnership with the Government and other key players at the national and provincial level. The consultation prior to the project provided the opportunity to supplement the Provincial Action Plans (PAP) for the ASAH and to obtain additional funding through the Government and the provincial authorities in Cunene and Huambo.
10. In accordance with the policies identified for this sector, activity in the area of energy and water continued to be oriented toward improving the supply of these services, from production to distribution, in order to ensure a steadier provision of the services and to meet the growth in consumption caused by economic development and the access of a growing number of citizens and population groups.
11. As for the capacity of the water supply systems in the localities and other water supply sources, the situation is reflected in the tables. With the investment effort carried out in this period, there have already been benefits in the quantity and quality of the water that has been produced and distributed, although a greater impact on access to this service for the target population has been more significant to the extent that current projects are now being completed, with a growing coverage rate, with the execution of home connections and the installation of fountains as planned by late 2008.



Legend:

Capacities in m3/day of water supply systems – provincial capitals

Provincial capital 2004 (starting data) 2005 2006 Change (%) Available

Nom. Cap. Available Projected/ Projected/ 06/04

Available Available

Totals

Average per capita

*Source: MINEA*

(1) The average per capita in liters/inhabitant/day was estimated for an urban population of 7,000,000.

(2) The storage capacity limitation and the distribution network limitation, as well as restrictions on the supply of power for the systems, restricts the volume of the water that is supplied

1. The available capacity of the systems as of the end of this two-year period rose by 27 per cent compared to 2004. This increase was well below the projected goal for the two years, which was 113 per cent. However, in the same way, this increase reflects per capita consumption, which can also be interpreted as a large number of inhabitants that obtained access to this service.
2. Nevertheless, the increase in available drinking water production capacity does not yet reflect in the same proportion the quantity of water actually distributed to the population. This is because of limits in water storage capacity and the distribution networks in some of the supply systems, and its intermittent functioning or conditioning, due to electricity supply restrictions that were still occurring in most localities that have service.



Legend:

Number of Water Points (boreholes) by province

Provinces Existing in 2004 (1) Existing in 2005 2006 Change (%)

Projected Existing Existing 06/04

Totals

Beneficiary population (1)

Source: MINEA

(1) – The existing figure for 2004 is taken as the starting data

(2) – It is considered that the average number of beneficiaries per water point is 250

1. For the water sector the preparation of the regulations on the general use of water resources and the public supply of drinking water, sanitation for residual water and urban rain drainage has been completed and submitted to the appropriate level for approval. Moreover, in the context of the development plan approved for this sector, efforts continued to create and develop local business entities that will assume responsibility for operating and managing the water supply systems at the level of the localities and provincial seats.
2. In 2006, investments in the energy and water sector, as in previous years, were almost entirely provided by the Government. The reason for this lies in the set of reforms to bring about private-sector participation in the preparatory phase, including the largest problem, which is the pricing policy.

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| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated annually in absolute terms and in percentages** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Basic sanitation | 8,202,010,018.,00 | 0.86 | 15,338,140,117.00 | 0.70 | 16,892,798,305,00 | 0.67 | **NOT AVAILABLE** |  |
| Water supply | 15,998,938,220.00 | 1.67 | 11,966,041,754.00 | 0.55 | 17,136,694,687,00 | 0.68 | **NOT AVAILABLE** |  |
| Environment | 18,823,084,444.00 | 1.97 | 2,084,406,683.00 | 0.10 | 39,069,419,482,00 | 1.56 | **NOT AVAILABLE** |  |

*Source: 2004, 2005, 2006 and 2007 Government Budget*

|  |  |  |  |
| --- | --- | --- | --- |
| **Amounts made available by UNICEF to the country in the context of cooperation with the Government, for the 2005 - 2008 period** | | | |
|  | **Regular resources**  *( in thousands of US dollars)* | | |
|  | *Regular* | *Other* | *Total* |
| Water, environmental sanitation and hygiene | 1,920 | 7,000 | 8,920 |

*Source: Government/UNICEF agreement.*

1. Notwithstanding the increase in programmes, the indicators in the initial report (CRC/C/3/Add.66) quoted the 2001 MICS,[[35]](#footnote-35) according to which 81 per cent of the Angolan population do not treat their water before they drink it, about 40 per cent do not take water from safe sources, 33 per cent use water brought into their homes or fountains, and 29 per cent use water from other safe sources such as boreholes, wells and protected springs. These statistics would be close to actual figures if a survey were conducted.
2. In the rural areas just 22 per cent of inhabitants have access to clean water for consumption and 26 per cent have access to sanitation services. In the urban areas, the figure is relatively higher. Only five cities in Angola have partial sewer coverage: Luanda, Huambo, Lubango, Lobito, and Benguela. Sanitary methods to dispose of waste are not used by 41 per cent of households.
3. It was also observed that despite being included in the sector programme, it has not yet been possible to change all of the systems to recover and increase some existing capacities due to the imperious necessity of restricting the construction of the respective projects due to available financing capacity.
4. Due to the lack of an urban policy in the zones on the outskirts of localities, there has been a growing use of fountains and boreholes for water supply. This situation is described in the following tables, in which the principal changes can be observed.
5. The number of fountains and boreholes reached consists not only of the new water points that are drilled, but also the rehabilitation of some existing ones, both of which contribute to interventions to increase the population’s access to safer sources of supplies of drinking water. Although the number of fountains projected at the end of the two-year period was not reached, the increase was 30.7 per cent over 2004, which exceeded the projected goal by 20 per cent. For the number of boreholes, the 4 per cent increase meets the goal planned for the two-year period.
6. Compared to 2005, the increase in water supplied in 2006 was 9.2 per cent, a rate lower than the growth rate for the capacity of the systems in the same period. Several projects are being implemented and became decisive in 2006 and, in addition to contributing to an increase in existing capacity soon, they will also significantly increase the use of these capacities.

# VIII. EDUCATION, LEISURE AND CULTURAL ACTIVITIES

## A. Education, including vocational training and orientation

1. Primary education consists of six years of schooling, all of which are mandatory, beginning at six years of age. Secondary education consists of two cycles of three classes each. The first is consolidation and strengthening of learning from the first cycle and preparation for the second cycle. The second is the development of abstract thinking, the ability to carry out scientific analysis, and preparation for the job market and/or higher education.
2. Adult education is considered a subsystem in itself, with primary education literacy and post-literacy programmes, as well as the first and second cycles of secondary education, as provided in general education, to serve youths and adults who are at least 15 years old who, for any reason, did not enter the education system or did not finish their primary schooling.
3. In implementing the enforcement strategy of Law No. 1/06 of January 18, the MAPESS took several measures that seek to build a set of integrated solutions for youths from 14 to 30 years old and to provide them with vocational training. The law created training centres and facilities, rural training schools and facilities to provide quality training and/or complementary training for youth, the right to free schooling for youths, a decrease in and containment of the rural exodus, diversification and increased training capacities in the rural areas, full integration of the regions and communities in rebuilding the country, a guarantee that youths will have a perfect mastery of the professions or occupations they choose, raising production and productivity levels.
4. Teacher training consists of programmes to train instructors for preschool education and general education (regular education, adult education and special education). This is standard mid-level education, organized for graduates of the first cycle of secondary school. It lasts from two to four years depending on the area of study.
5. Higher education of teachers is intended to meet the needs of secondary education and, if necessary, preschool and special education. Teachers are educated in upper schools and educational sciences institutes. Technical and vocational training consists of basic-level vocational training and mid-level vocational training. The former seeks to develop technical knowledge, attitudes and practices to practice an occupation. The latter seeks to provide technical and general knowledge for entering the job market and accessing higher education.
6. Higher education is divided into under-graduate (bachelor and license [licenciatura]) and post-graduate. Special education is considered a means of cross-cutting education for the general education of adults, and is intended for individuals with special needs, under the responsibility of the National Institute for Special Education.
7. The harmonious development of the child’s personality and the creation of conditions for them to be integrated into and participate in active life, seeking to implement economic, social and cultural rights, in education, vocational training, culture, access to first jobs, at work, in social security, in physical education, in sports and in the enjoyment of free time, was established in article 30 of the CL, which further establishes in article 49 the State’s duty to promote access for all citizens to education, culture and sports, and to guarantee the participation of various individual agents for implementing it.
8. An overview of the sources of financing for education in Angola shows that the principal source of funding is the Government through the Government Budget. Education receives roughly 7 per cent of the Government Budget, distributed as shown in the table below.

Spending on education, 2004 – 2007

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
|  | **AMOUNT** | **AMOUNT** | **AMOUNT** | **AMOUNT** |
| GOVT. BUDGET FOR EDUCATION | 69,637,027,360 | **100** | 55,561,821,774 | **100** | 85,523,557,267 | **100** | 140,394,653,720 | **100** |
| PRESCHOOL | ─ | ─ | ─ | ─ | 9,706,214 | **0.01** | 84,444,000 | **0.06** |
| PRIMARY EDUCATION | 3,265,346,418 | **4.69** | 3,203,609,358 | **5.77** | 3,207,381,676 | **3.75** | 10,134,228,803 | **7.22** |
| SECONDARY EDUCATION | 2,771,420,202 | **3.98** | 1,455,950,052 | **2.62** | 2,037,644,219 | **2.38** | 4,938,272,980 | **3.52** |
| TECHNICAL/VOCATIONAL EDUCATION | 2,405,286,895 | **3.45** | 2,082,148,406 | **3.75** | 19,379,977,853 | **22.66** | 45,151,136,117 | **32.16** |
| ADULT EDUCATION | 7,626,434 | **0.01** | 18,550,000 | **0.03** | 238,366,882 | **0.28** | 1,619,276,481 | **1.15** |
| HIGHER EDUCATION | 4,524,661,497 | **6.50** | 7,413,593,783 | **13.34** | 7,768,011,432 | **9.08** | 12,914,856,492 | **9.20** |
| OTHER EDUCATION SERVICES | 56,662,685,914 | **81.37** | 41,387,970,175 | **74.49** | 52,882,468,993 | **61.83** | 65,552,438,847 | **46.69** |

*Source: Ministry of Finance*

1. The percentages of spending by level of education are very low, taking into account that the majority of expenditures at these levels are concentrated in the “Other Education Services” category. This makes it difficult to determine the exact breakdown of expenditures within the education sector.

### *Current reorganization of the education sector*

1. According to the new organization as set forth in the Fundamental Law on the Education System (being implemented gradually since 2004), the Ministry of Education is responsible for the subsystems of general education, adult education, teacher training, technical-vocational training, and higher education. The education system in Angola consists of three levels of education: primary, secondary and higher education. Preschool, which is meant to serve as preparation for access to primary education, has its own organization and is the responsibility of the Ministry of Assistance and Social Reintegration.
2. This report on the Convention was prepared at a time when the education sector was undergoing considerable reform, since it is a decisive strategic vector for the people’s well-being and the country’s development. With the enactment of the Framework Law on Education, Angola is going through a transition phase in this sector, which essentially entails implementing the Education Reform (ER), now in progress, and whose experimental phase began in January 2004.
3. ER is manifested by significant strategic changes, with a primary education model of six classes, with mandatory attendance, with just one instructor per class, and three years for each of the two secondary education cycles. Implementation is in stages and began with an experiment in the first year of primary and secondary education in a small number of schools at the national level. It is scheduled to be completed in 2010, and the general implementation phase that began in 2006 will be completed in 2011.
4. One of the main objectives of ER is to meet the pressing need of raising the quantitative and qualitative levels of education and learning, both of which are particularly important in primary education.

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| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated annually in absolute terms and in percentages** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Education reform | \* |  | 1,115,977,000.00 | 0.05 | 2,160,781,297.00 | 0.09 | **NOT AVAILABLE** |  |
| Improving the quality of education | 89,850,000.00 | 0.01 | \*\* |  | \*\* |  | **NOT AVAILABLE** |  |

Source: 2004, 2005, 2006 and 2007 Government Budget

\* Programme was replaced by education reform

1. The plan is thus to make a decisive contribution to the equitable universalization of this level of education, with a view to achieving a real enrolment rate of 100 per cent by 2015 in accordance with the World Education Forum and the Millennium Development Goals (MDGs),[[36]](#footnote-36) and eliminating gender disparities in access to all levels of education.[[37]](#footnote-37) To achieve these goals, the contribution of several factors in different areas is essential, the most important are the training of teachers and trainers, the creation of infrastructures to support training, revamping curricula and programmes, and improving the education management and administration system.

### Education for all in the Angolan education system

1. The programmes to achieve education for all are being carried out under the Government Strategy to Rehabilitate and Develop the Sector, approved in August 2001. With the enactment of Law 13/01 of December 31, the groundwork was laid for the New Education System and was the principal basis for the Education Reform activities. In order to achieve universal education for primary school by 2015, based on an educational policy of improving access and fairness and system efficiency, a National Education for All Plan was prepared; it consists of three separate yet complementary phases, i.e.:
2. The preliminary Phase (2001-2002) of preparing the methodological process to design and develop the preliminary draft of the Plan;
3. The emergence phase (2003-2004), characterized essentially by the need to meet and strengthen the basic technical, physical and financial conditions for the full implementation of the next two phases;
4. The stabilization phase (2005-2008), indicated by the start of implementing the fundamental components of the new education system in the Basic Law on the Education System; and
5. The expansion, enlargement and development phase (2009-2015), whose objective is to strengthen and consolidate the programmes, plans and projects of the previous phases.
6. The coordination and liaison systems among the ministries and provincial bodies were strengthened considerably by the MED to implement education reform, which seeks to broaden access to primary and secondary education and to implement the 2006 – 2015 Integrated Strategies to Improve the Education System in terms of Gender, Literacy and Rehabilitation of Children Left Behind, for special education, the MED Strategic Plan to Fight HIV-AIDS, and the Back-to-School Campaign.

Taxa Bruta de Matrículas nas Escolas

1. In 2005, with the involvement of UNICEF, the WHO and the WFP, the MED carried out the Amigas da Criança Schools Project as part of the School Program for Africa in order to improve access to and the quality of primary education throughout the country. The objective of the programme is to provide a healthy environment in the schools for all children, and lay the groundwork for a national strategy as part of the Schools for Africa program. A package of standards and guidelines for infrastructure renovation is being developed. As a result, 219 schools have already been built, and 110 primary schools in 17 provinces have been renovated and are serving 88,830 children. Water and sanitation facilities were built in 72 Amigas da Criança schools throughout the country.
2. In 2006, an intersectoral task force formed by the MED, in a partnership with the MINSA, UNICEF and the WHO to promote school health in Angola, conducted a study on the prevalence of intestinal worms in school-age children in the provinces of Cabinda, Zaire, Uíge, Kwanza Norte, Kwanza Sul and Bengo. The result was a comprehensive strategy to build the capacity of schools and to deliver basic messages about children’s health. This ensuing intersectoral programme seeks to provide education for health and respond to the prevalence of intestinal parasites [[38]](#footnote-38) (>75 per cent) in school-age children. Six provinces and Luanda, the capital city, were disinfested and albendazole [[39]](#footnote-39) tablets were distributed to 916,000 school-age children. The programme was expanded to the national level in 2007, involving parents, educators and teachers for delivering basic messages about sanitation and hygiene. In total, 4.5 million children, 101,000 schools and 10,600 teachers were involved.
3. A campaign to fight cholera in the schools began in November 2006 in a partnership with UNICEF, and continued in 2007 in 14 provinces in the country, with seminars for teachers (training of trainers for 20 to 30 teachers) for the purpose of covering all the students and the communities in general.

## Teacher training

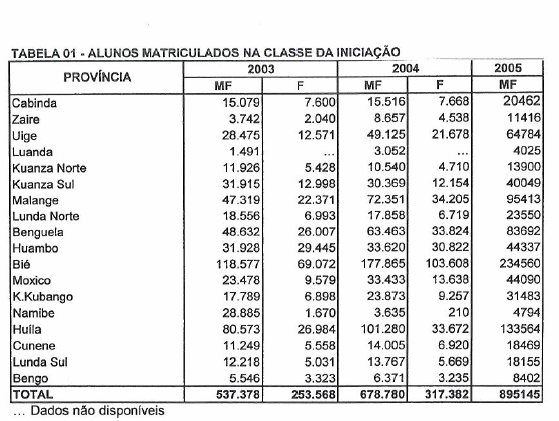
1. Teacher training in Angola is a priority for implementing educational policies, mainly for the ER. It was found that over 50 per cent of all working instructors do not have suitable academic credentials and do not have professional training for teaching.[[40]](#footnote-40) ER requires teachers with suitable professional skills so that they can follow changes and new programmes that come about with the increase in class sizes in all the cycles for pedagogical issues due to the fact that there is one instructor for six classes.
2. The MED has implemented measures that seek to discourage teachers from practicing physical and psychological violence, abuse and the sexual exploitation of minors.
3. ER became a reality in the entire country in 2006 and with it several programmes were carried out, including the Teacher Training Master Plan and the creation of the National Institute for Manager Training to better coordinate the reform of teacher training.[[41]](#footnote-41)
4. The goal was to cover 70,000 primary and secondary school teachers, to upgrade the quality of education for about 4.6 million students throughout the country, to cover 36,660 primary school teachers, 180 primary school principals and 67 provincial education managers (department directors and education inspectors). As a result of this coordination, a team from the Teacher Training Master Plan was set up and is carrying out substantial teacher training activities at the national, provincial and municipal levels.
5. In this context of implementation, a Framework Education System Law created a Teacher Training Subsystem as one of the six education subsystems. It was an indicator of strategic value for the quality of education and the country’s development. The Teacher Training Subsystem recommends a substantive reform of training and professional qualification for teachers and other educators, and this requires a statutory framework which has only been partially developed.
6. In addition to the Framework Education System Law, the current standard framework of the emerging subsystem can be found in the Teacher Training Subsystem Act, enacted in September 2004, which establishes the continuing education of teachers as one of the methods of professional qualification for primary education after the teacher has begun teaching.

## Preschool education

1. The preschool education subsystem, which is the basis of education and serves young children, is organized into daycare centres, children’s centres and PICs for children up to five years old. Responsibility is shared by the MINARS and the MED, and first grade (which is the last year of kindergarten).



1. In 2004, the First Forum on the Care and Development of Young Children was the incentive for the Early Childhood and Preschool Education Expansion Program. The following activities were carried out:
   * 153 PICs were built throughout the country (46 in 2005 and 107 in 2006) to benefit around 35,000 children;
   * 51 PICs were established in the provinces of Luanda, Bengo, Bié and Huambo;
   * 130 kits were distributed to educators and child supervisors in the provinces of Bengo, Bié, Huambo, Huíla, Luanda and Namibe.
   * At the same time, the Milk and Baby Food Project covered 6,887 children, with 4,076 cartons of Nan1 milk, 3,626 cartons of Nan2 milk, 5,968 cartons of whole milk, and 1,997 sacks of whole milk weighing 25 kg each.



Legend:

TABLE 01 – STUDENTS REGISTERED IN FIRST GRADE

PROVINCE

TOTAL

…data not available

*Source: Ministry of Education*

**Table 2.1: Services for five-year-old children in public and private institutions in 2007**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PROVINCES | **CIE** | **Crs** | **CIP** | **Crs** | **PIC**  **MINARS** | **Crs** | **PIC**  **NGOs** | **Crs** | **# of**  **Inst.**  **For**  **Children** | **Total**  **Crs** |
| BENGO | 0 | 0 | 0 | 0 | 34 | 6,800 | 10 | 2,000 | 44 | **8,800** |
| BENGUELA | 3 | 450 | 3 | 360 | 9 | 2,329 | 0 | 0 | 15 | **3,139** |
| BIE | 1 | 250 | 3 | 298 | 16 | 4,000 | 0 | 0 | 20 | **4,548** |
| CABINDA | 1 | 450 | 3 | 194 | 1 | 525 | 6 | 360 | 11 | **1,529** |
| CUNENE | 0 | 0 | 0 | 0 | 3 | 516 | 0 | 0 | 3 | **516** |
| HUAMBO | 0 | 0 | 7 | 840 | 20 | 5,000 | 5 | 641 | 32 | **6,481** |
| HUILA | 4 | 1,000 | 23 | 4,600 | 25 | 6,250 | 0 | 0 | 52 | **11,850** |
| KUNDO KUBANGO | **0** | **0** | **0** | **0** | **0** | **0** | **0** | **0** | 0 | **0** |
| KWANZA NORTE | 4 | 600 | 0 | 0 | 10 | 447 | 0 | 0 | 14 | **1,047** |
| KWANZA SUL | 3 | 308 | 1 | 250 | 4 | 365 | 1 | 120 | 9 | **1,043** |
| LUANDA | 5 | 2,000 | 80 | 24,000 | 8 | 2,000 | 38 | 5,200 | 131 | **33,200** |
| LUNDA NORTE | 0 | 0 | 0 | 0 | 4 | 180 | 0 | 0 | 4 | **180** |
| LUNDA SUL | 1 | 133 | 3 | 0 | 2 | 500 | 0 | 0 | 6 | **633** |
| MALANGE | 0 | 0 | 0 | 0 | 4 | 677 | 0 | 0 | 4 | **677** |
| MOXICO | 0 | 0 | 0 | 0 | 1 | 250 | 0 | 0 | 1 | **250** |
| NAMIBE | 7 | 604 | 1 | 250 | 4 | 950 | 4 | 859 | 16 | **2,663** |
| UIGE | 1 | 180 | 1 | 250 | 13 | 1,799 | 0 | 0 | 15 | **2,229** |
| ZAIRE | 0 | 0 | 0 | 0 | 3 | 600 | 2 | 544 | 5 | **1,144** |
|  | **30** | **5,975** | **125** | **31,042** | **161** | **33,188** | **66** | **9,724** | **382** | **79,929** |

1. An improvement in attendance for girls can be noted, with the parity ratio rising from 0.88 per cent in 2004 to 1.07 per cent in 2006, and projections show it reaching 1.19 per cent in 2007.
2. The crude enrolment ratio for this class was higher than 100 per cent in 2006 and shows that children over five years old continue to be registered in this class. In many schools, the number of children who were left behind in first grade is significant, and it demonstrates the unsuitability of the methods and the lack of clarification about the objectives of this preparation and motivation phase for regular enrolment. Trend in the number of students in First Grade between 2003 and 2007 [sic]
3. In the context of training, in January there was a National Seminar for Trainers for first-grade educators, supervisors and teachers. The seminar lasted 15 days and took place in children’s centres and PICs as part of the Education Reform. This was organized jointly by the MINARS and the MED with technical and financial support from UNICEF. There were 120 participants, including child educators, heads of children’s sections, educators from the centres and PICs, and educators from the Government and private centres and PICs in Luanda. In a partnership with the MED, in July 2007 the MINUA held a course on Education and Environmental Awareness with 60 persons trained.
4. This seminar focused on civil servants from the MINARS and the MED. Its principal goals were to build the technical capacity of trainers and to analyse the methodologies to be used in the preschool education subsystem to better orient first-grade educators, supervisors and teachers in the Children’s Centers and PICs on aspects related to the Education Reform process.

|  |  |  |  |
| --- | --- | --- | --- |
| **Amounts made available by UNICEF to the country,**  **in the context of cooperation with the Government**  **for the 2005 – 2008 period** | | | |
|  | **Regular resources**  *(in thousands of US dollars)* | | |
|  | *Regular* | *Others* | *Total* |
| Basic education | 2,544 | 16,000 | 18,544 |

*Source****:*** *Government/UNICEF Agreement*

## Primary education

1. Education System Reform began in 2004, when only the first four years of basic education were mandatory for children, and when this period was extended to six years, or six grades (1st, 2nd, 3rd, 4th, 5th and 6th), in an attempt to streamline the education system structure at the national level, with the principal goal of phasing in new curricula at all levels to ensure quality education. Primary Education is compulsory and is for the ages shown in the table below.
2. The number of students attending primary school rose between the 2004 and 2006 school yeas. The average annual growth rate was 5.6 per cent. If this average growth rate continues, there will be 3,558,605 students in 2007.
3. The growth rates demonstrate a relative difference between the inland provinces (66.3 per cent) and the coastal provinces (33.7 per cent) in 2006. This disparity merits the utmost in dedicated Government attention because it is a consequence of the end of the armed conflict. As for opportunities by gender, the female category continues to be more disadvantaged in the system, despite the slight improvement in the parity ratio, which climbed from 0.73 per cent in 2004 to 0.94 per cent in 2007.

**Students registered in primary school between 2004 and 2007**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **2004** | | **2005** | | **2006** | | **2007 (Estimates)** | |
| **MF** | **F** | **MF** | **F** | **MF** | **F** | **MF** | **F** |
| 3,022,461 | 1,273,711 | 3,119,184 | 1,508,281 | 3,370,079 | 1,629,601 | 3,558,605 | 1,720,763 |

Source***:*** *Ministry of Education*



*Source****:*** *Ministry of Education*

1. This increase in students resulted in a higher enrolment ratio, which was up from 118.1 per cent in 2004 to 118.2 per cent in 2005, 122.1 per cent in 2006 and projected to be 127.1 per cent in 2007. Since it is greater than 100 per cent, this rate demonstrates that the majority of students in primary schools are outside the official enrollment age group, which is from 6 to 9 years of age, and is the basic group involved.
2. With this growth in the number of students, between 2005 and 2006 the Ministry of Education created roughly 7,500 positions for instructors (primary and secondary education). The number of primary teachers rose gradually from 73,006 in 2004 to 75,569 in 2006, and this was reinforced with the intensification of instructor capacity-building and training to overcome the deficiencies in teachers.

**Status of primary education instructors in 2005**

|  |  |
| --- | --- |
| **Status** | **%** |
| No or insufficient academic credentials | 36 |
| Have acceptable academic credentials | 64 |

1. The higher number of students caused a change in the student/teacher ratio to around 43 and also the ratio of students per classroom. This apparent national average conceals major differences that demonstrate the existence of noteworthy disparities since there are teachers who teach one group, a class of 35 or 45 students who have two lecture shifts, but with one class that has over 100 students.
2. The higher number of students did not follow the number of school facilities in terms of infrastructure. Consequently, the student/classroom ratio has risen to above 100 students for the three periods. Under conditions that have worsened due to the physical deterioration of the facilities, the lack of teaching credentials for the instructors and the use of the triple system, the teaching/learning process will necessarily have to pay attention to the area of school facilities.
3. Available information indicates that education successes are low. Failure and dropout rates show averages of 23.9 per cent and 18.5 per cent respectively. This is thus synonymous with the loss of resources and students remaining in school for longer than desirable amounts of time and above the appropriate ages. They occupy space, take up teacher time and use other educational resources. One of the biggest constraints in the lack of school success is the poverty of families. Of every 1,000 students who enter the first grade, about 37.2 per cent reach the sixth grade. Thus, retention is extremely low compared to the average in Sub-Saharan Africa, where 71 per cent reach the sixth grade.
4. The primary school completion rate rose from 32.1 per cent in 2004, to 33.8 per cent in 2005 and 35.5 per cent in 2006. The comparison between crude enrollment ratios (greater than 100 per cent) and completion (under 40 per cent, which means that fewer than five out of ten children complete primary education), shows that retention is poor in primary education, due to the failure and dropout rates.
5. With an average passing rate of 57.2 per cent versus 58.3 per cent, males are at a slight disadvantage compared to females, with girls performing slightly better than boys.

## Secondary education

1. Secondary education has two levels; the first is for the 7th, 8th and 9th grades, and the second is for the 10th, 11th and 12th grades based on the structure in the table below:

|  |  |  |
| --- | --- | --- |
| **Cycles** | **Grades** | **Ages** |
|  |  |  |
|  | 7th | 12 years |
| 1º | 8th | 13 years |
|  | 9th | 14 years |
|  |  |  |
|  | 10th | 15 years |
| 2º | 11th | 16 years |
|  | 12th | 17 years |

*Source: Ministry of Education*



*Source:**Ministry of Education 2007*

1. The first cycle of secondary education represents less than 10 per cent of the school population pyramid. The trend in terms of students may be observed in the following table with the gender bias in favor of females:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Trends in student populations** | | | | | | | |
| **2004** | | **2005** | | **2006** | | **2007 (Estimates)** | |
| MF | F | MF | F | MF | F | MF | F |
| 197,735 | 107,152 | 233,698 | 126,640 | 270,662 | 146,671 | 316,664 | 171,599 |

*Source: Ministry of Education*

1. Crude enrollment ratios (25.2 per cent in 2004, 28.9 per cent in 2005, 32.5 per cent in 2006 and 36.9 per cent in 2007) are low, and this demonstrates not only the insufficient school network to guarantee meeting the demand for education, but it also points out the problems of the transition between the first and secondary levels. To counterbalance the situation, the MED is implementing a vast programme of building 53 secondary schools and polytechnic institutes in order to minimize the shortage and include over 78,720 students.

## Right to education for male and female children who belong to minority ethnic groups

1. Non-discrimination as one of the fundamental principles of the democratic State, established in the CL, in harmony with the Convention, is the basis for promoting economic, social and cultural solidarity among all the regions of the Republic of Angola, and seeks to ensure the harmonious development of the entire Nation of Angola. This constitutional principle serves as a legal basis for one of the Government’s current and future priorities of gradually eliminating the disadvantages faced by children living in the less developed urban and rural areas of the country, with an impact on the lands of minority ethnic communities.
2. For example, take the children in the Khoi San community, an ethnic minority in Angola, who are integrated normally into the community just like any other children in the country with access to schools. However, since they are a very conservative community, they carry out prevention measures among themselves and awareness campaigns to foster their integration in the region to which they belong. They are also involved in recreational and cultural activities as well as leisure activities under equal circumstances and treatment as all children.
3. Some special programmes in the area of transhumance seem to stem from the necessity of ensuring access for children of nomadic populations from Namibe, Huíla and Cunene provinces to social services, namely education and health.

## Education for children who are left behind

1. The enactment of the Framework Education System Act, Law No. 13/01, adjusted to the Education Reform Program in progress, simplified the educational system structure, and phased in new curricula to ensure quality education. With this, the 2006 – 2015 Literacy and Catch-up Strategy was adopted, among other strategies.
2. In the context of lowering illiteracy in the country and implementing the Ministry of Education’s Literacy and Catch-up for Being Left Behind Program, in partnership with UNICEF, the sector recorded positive indicators. In Luanda the attendance rate is above 30,000 persons for the 2007 school year, including persons who are at least 15 years old. The programme seeks to accelerate learning with the use of self-teaching and the certification of skills acquired in various contexts of formal and informal education. In several groups throughout the country, the method enabled about 80 percent of students to read and write in just three months..
3. Circular Letter No. 19/ SCM/ 2006 approved the Strategic Plan by implementing the School Meal Program for the 2007/2008 Period***.*** The aim of the programme is to make the child the centre of attention for education due to the importance of the physical and emotional stability of children as promoters of the future and development, keeping in mind that the fight to reduce poverty begins with child advocacy.
4. The Government designed and implemented the programme and allocated financial resources for 2007 to all the provinces. In 2007, the programme covered the provinces of Cabinda, Luanda, Kuanza Sul, Huambo, Benguela Moxico, Bié and Uíge, and was of benefit to 355,034 students in 454 schools. For 2008, the plan is to implement the programme throughout the country.



Legend:

3. Primary Education

4. Secondary Education

6. Higher Education

7. Special Education

## Education objectives

1. Education is a process that seeks to objectively and harmoniously develop physical, intellectual, moral, civic, esthetic and work-related capacities, to prepare the individual for the requirements of political, economic and social life and to develop in a human environment, the family circle, in labor relations, educational institutions and through cultural and gymnastic/athletic events.
2. Articles 1, 2 and 3 of Framework Law No. 13/01 on the Education System provides for legislative, administrative and educational measures that guarantee the objectives of State Education, with the task of teaching the young generation (children) respect for national values and symbols, human dignity, tolerance, the culture of peace, national unity, preservation of the environment and the attendant improvement in life, promotion of the law and respect for life, liberty and personal integrity.

## B. Leisure, recreation and cultural activities

1. The MINCULT, through its specialized agencies, carries out various programmes for the purpose of guaranteeing access for children to cultural and leisure facilities and to cultural products through the preparation of the Culture Development Plan, which includes various child-related projects and programmes. In 2007 the **“**Children’s Book Garden***”*** was reinstated. The fundamental objective of this annual event is to promote books and reading among children; national coverage is planned.
2. The Angola National Library is an entity that promotes reading. In 2006 it carried out the “Third Reflection Days on Books and Reading” with the theme “For the Future of Angola We Will Cultivate the Enjoyment of Reading.” The main focus will be children and this event will be combined with activities such as lectures, launches of child-youth books, and reading sessions. Throughout the 2006 – 2007 period a training programme was carried out for promoters of reading, lectures on topics related to the promotion of books and reading incentives, various reading sessions in the library, in schools, reception centres and other venues with the participation of 1,926 children, in addition to launches of children’s books, including the book entitled O Balão Vermelho, by Cremilda de Lima, with a special edition that was distributed free of charge***.***
3. As part of its activities, the National Anthropology Museum organized: (a) exhibits (open daily, including Saturdays, Sundays and holidays), (b) guided tours for a total of 23,970 children from five to twelve years old and 12,501 from 13 to 18 years old, and (c) 37 didactical lectures and debates (in the museum and elsewhere). The museum also cooperated to produce a guided tour of its facilities for a child and the tour was broadcast during the children’s programme entitled Carrossel on Angola Public Television.
4. As part of its activities, the National Natural History Museum organized: (a) the Vacation Program with the participation of 50 children from eight to fourteen years old, (b) the Christmas Workshop, attended by 30 children from age three to 12, (c) the Film Week on the Natural Sciences, with the participation of 200 children from age eight to fourteen, (d) the contests on elephants and the world of insects, with the participation of 300 children from ten to fourteen years old, (e) lectures and temporary exhibits entitled “The Crocodiles of Angola,” Palanca Negra Gigante,” the burning insect “Ferro em Brasa,” and “Sexually Transmitted Diseases,” with the participation of a total of 1,150 children between age twelve and fourteen.
5. The MINJUD is carrying out a sports programme entitled "Despontar," which focuses on the social insertion of children from age 7 to 18 through sports, i.e. football, chess, basketball, track and field and roller hockey, with the first phases in the provinces of Zaire, Benguela, Cabinda, Huambo, Huíla, Luanda, Lunda Norte and Moxico. In cooperation with the Brazilian Ministry of Sports, the MINJUD is carrying out the Pintando a Liberdade Project, which manufactures balls for children in detention centres (16 - 18 years old), as a mechanism for their vocational training and social reintegration, and the manufactured balls go to institutions that support the creation and promotion of sports activities.
6. As part of the Executive Plan to Support Youth, the MINJUD is carrying out the Casas da Juventude (Youth Houses) Project, which aims to build social service and support infrastructure for children who lack intergenerational relationships. There is also vocational training, how to spend leisure time and promoting information technology, not to mention other objectives. The Viana/Luanda Youth House has already been built, the Kuanza Sul house is in the official opening phase, and the houses in Uíge, Huambo, Zaire, Cabinda, Malange, and Benguela are now being built.
7. Through the National School Social Action Office, the MED is organizing and carrying out programmes in partnership with the specialized sectors of the Government: (MINCULT, MINJUD, etc.) and social partners (Fundo Lwini, OPA, etc.). The purpose of these cultural and recreational programmes in the schools is to visit historical venues and museums, conduct training visits, hold Olympiads in several educational disciplines, provide incentives to reading by creating school libraries, patriotic activities (raising and lowering the flag and commemorating astronomical events), children’s camps, recreational and cultural activities such as theater, Carnival, musical contests, drawing, composing manual works, and handicrafts, in addition to regulating access to sporting and recreational venues in the schools.

# IX. SOCIAL PROTECTION MEASURES

1. The State fosters and implements special protection policies for all children who are victims or are vulnerable, i.e., protection for young children, legal and judicial protection, protection inside families that are disintegrating or in extreme poverty, protection from all types of violence, thereby complying with point D7 of the committee’s final observations, and with articles 22, 38,39,40, 37 (b), (c) and (d), 32, 33, 34, 35 and 36 of the Convention.

## A. At-risk children

### *Refugee and displaced children in inland areas*

1. In achieving its goals and in observance of recommendation No. 59 of the Committee of Nations for the Rights of the Child, the Government is implementing a programme to again return and resettle the dislocated populations, refugees and other persons directly affected by the armed conflict, the general purpose of which is to ensure that these people return to and resettle in their areas of origin, with special attention to children.
   * The programme, designed in the post-conflict period, involves the Government’s social partners and has a Government poverty-reduction strategy component (2004–2006) with the purpose of carrying out sustainable reintegration programmes in areas in which repatriated and dislocated persons are concentrated, with the following priorities:
   * Upgrading basic services in the areas to which these people are returning;
   * Renovating the productive and social infrastructures in the areas to which these people are returning;

* Income-generating projects that have a rapid impact and create jobs;
* Promoting campaigns of peace, reconciliation and human rights, including

children’s rights.

### *Children in armed conflict*

1. After the Memorandum of Understanding was signed by the Government and the Cabindês Forum for Peace in Cabinda, the Cabinda provincial government carried out a series of programmes to provide special services to children in the context of reintegrating the vulnerable groups directly affected by the armed conflict in that part of the country. The traditional authorities are involved in protecting and promoting the rights of the children that live in these jurisdictions, and fundamentally to combat all types of violence against children, the birth registry, psycho-social rehabilitation and literacy.
2. The project to support the reintegration of vulnerable groups includes a training package in cooking and pastry-making, decoration, laundry services, sewing and embroidery, skills for life based on micro-lending, child protection, and primary health care, including HIV/AIDS.
3. According to the initial report (CRC/C/3/Add.66), unexploded mines and explosives (UXOS) are a lethal danger, especially for children, and are a serious obstacle to economic and social recovery. It is extremely difficult to locate these explosives. Despite the involvement of several governmental institutions such as the INAD and the CNIDAH, which cooperate with United Nations agencies and NGOs, the work of mapping, de-mining and removing explosives is a challenge, and those that have not been located or removed continue to create victims, including children.
4. Clearing, information and social awareness efforts about mines and explosives have been important in preventing and protecting children from the danger they represent and several social players are involved, including the Armed Forces, the National Police, the National Social Protection Commission, churches, United Nations agencies, domestic and international NGOs, local governments, specialized companies, traditional entities, and networks to promote and protect the rights of the child. They organize lectures, stage plays, provide brochures and various graphic materials and carry out other relevant activities.
5. To overcome these difficulties that still exist, the Government is continuing to establish partnerships and raise, human, physical and financial resources for the purpose of strengthening the programmes under development and providing better safety conditions for children.

### *Orphans and vulnerable children*

1. As extended or foster families continue to be the best solution for placing children orphaned as a result of the war or other reasons, these families are unable to provide care for and protect children who have been orphaned and made vulnerable by HIV/AIDS.
2. The Government carries out activities at the national level to serve vulnerable children and is finalizing and implementing the National Plan to Prevent and Reduce the Impact of HIV/AIDS on Vulnerable Children and Families, as well as to expand the policy of serving vulnerable children in a manner consistent with the National Strategy for Vulnerable Children, with the purpose of decreasing vulnerability of children to abuse and exploitation. This is being done by:

* Strengthening family capacities and the community’s ability to respond to orphans and vulnerable children;
* At the national level, bolstering institutional capacities to expand services for orphans and vulnerable children;
* Upgrading social protection mechanisms through political and legislative reforms in accordance with the national poverty reduction strategy.

1. The group of vulnerable children includes all children in conflict with the law, those deprived of parental care, those deprived of shelter or street children, those who are exposed to abuse and mistreatment, sexual and economic exploitation, orphans, neglected children, children who take care of and live with other children, those who have parents or guardians who are terminally ill, those who live in houses led by elderly people, those who are victims of violence, disabled children, those who are not in the education system, those who are at risk of infection, displaced children, and those who are experiencing an emergency.
2. The Networks for the Promotion and Protection of the Rights of the Child are in the process of being created, strengthened and expanded at the local, municipal and provincial levels. They will identify the needs of vulnerable children and are key to orienting and implementing activities in health services, education, reporting, awareness, conciliation, mediation, respect for anonymity, privacy, confidentiality, and non-discrimination, to mention a few.
3. By 2009 a child vulnerability survey will be taken in all the provinces in an effort to protect children who do not receive parental care and those whose rights are violated. Data will be collected at different levels and will be used to:
   * Improve basic services for vulnerable children;
   * Improve resources to strengthen programme coordination;
   * Financially support microlending for the most vulnerable communities and families by increasing farm production and supporting small businesses;
   * Build the capacities of employees at the provincial and national level who are implementing and monitoring the Plan;
   * Build the capacities of the NGOs, religious organizations and community leaders to stimulate local initiative, technical response and networks;
   * Expand existing vocational courses to cover the OVCs .

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Resources made available during the period** | | | | | | | | |
| **Programme** | **Amounts allocated annually in absolute terms and in percentages** | | | | | | | |
| **2004** | **%** | **2005** | **%** | **2006** | **%** | **2007** | **%** |
| **Government Budget** | | | | | | | |
| Child assistance | 414,557,954.00 | 0.04 | 471,144,524.00 | 0.02 | 936,694,511.00 | 0.04 | **NOT AVAILABLE** |  |

*Source: 2004, 2005, 2005 2006 and 2007 Government Budget*

|  |  |  |  |
| --- | --- | --- | --- |
| **Amounts made available by UNICEF to the country,**  **as part of cooperation with the Government**  **for the 2005 - 2008 period** | | | |
|  | **Regular resources**  *(in thousands of US dollars)* | | |
|  | *Regular* | *Others* | *Total* |
| Social policy, advocacy and communication | 2,920 | 3,000 | 5,920 |
| Intersectoral liaison | 8,000 | 11,000 | 19,000 |

*Source: Government/UNICEF cooperation agreement*

1. It is obvious that the armed conflict is the main reason there are orphans in Angola, but HIV/AIDS has increased the size of this vulnerable group of children, estimated at 15,000.00 [sic]. Of these, 160,000 are HIV/AIDS orphans, 37,552 of whom are in Cunene province. Of this total, roughly one-third (11,533) are reportedly vulnerable orphans, i.e., they are living with families that are extremely poor.
2. The child vulnerability mitigation programme, designed before the armed conflict ended, was not implemented for several years, but now it is beginning to be implemented in the current context. During those years, attention was focused primarily on the programme to locate and reunite separated children and orphans with their families. Many children orphaned by the war were placed in extended or foster families.
3. In earlier contexts, when an orphan child was reintegrated or placed, the guardian family actually took care of the child in the same way they treated their biological children. In the current context, studies on OVCs suggest that children who are orphaned are more likely to care for themselves or receive care from an elderly relative. They are also at a disadvantage in terms of direct access to education compared to other biological children who receive primary care.
4. Orphaned children also have difficulty accessing food and are more likely to start working at an age when they are developing, to live in the street, to be exploited in order to increase the income of the family who is caring for them and, under other circumstances, to be abused and instrumentalized to commit crimes, which in turns results in high levels of school dropout rates.
5. The inheritance of the deceased parents is subject to expropriation by the closest relatives who claim guardianship and protect the child. Based on experience in Angola, these children are more likely to be accused of sorcery.

## B. Children in conflict with the law

*Administration of justice to minors*

1. The Total Legal Protection System for Children In Angola is characterized by the public political levels, namely: the basic social necessities for all children; social assistance for those who need it; special protection for children who are victims; and guarantees of rights for children who are in conflict with the law.
2. The administration of justice to minors includes guarantees of rights, in which the State has sought to provide deferential treatment for them for matters related to legislation and other measures applicable to children in conflict with the law, perpetrators of offenses or, when they become victims, giving them guarantees of children’s rights in the context of implementing standards for justice for minors in accordance with articles 37, 40 and 30 of the Convention.[[42]](#footnote-42)
3. The Court for Minors Act and the Code of Procedure for the Court for Minors are the instruments that guarantee the administration of justice for minors in Angola. They are operating standards for the Court for Minors, an entity with jurisdiction over matters of social protection and crime prevention for children. They identify the statutory parameters of jurisdiction over children who are in social danger or a pre-delinquent situation, as well as procedural standards essential for implementing social assistance through its judicial entities, and for the other public and private entities called upon to become involved in implementation.
4. The purpose of the Court for Minors is to ensure that minors under its jurisdiction receive judicial protection, that their rights and interests are defended, and that they receive the statutory protection given to them by the law through the implementation of guardianship measures for their care, assistance and education. The Court for Minors Act provides for other complementary bodies and units that seek to make it more efficient in protecting the rights of the child, and their operations depend on the approval of appropriate regulations that will lead to expansion to all of the provinces in the country and strengthen the process.
5. To implement the Court for Minors Act, the Government carries out reflection programmes and regulates social-educational measures for preventing crime for children in conflict with the law. These statutory instruments are essential for the successful implementation of the measures to provide services to the community and for probation.
6. The process has been implemented in several stages, namely the design of the outline for the programme, preparation of the statutory bases, evaluation by everyone involved of the documents, and capacity-building.
7. There was also a Capacity-Building and Awareness Seminar, attended by court magistrates and the Office of the Prosecutor, as well as officials and employees of the social sectors involved. The theme was The Court for Minors and the Protection of Children’s Rights,” held in September 2006 on the regulamentação das medidas.[[43]](#footnote-43)
8. The challenges of effectively implementing Law 9/96 and the Code of Procedure for the Court for Minors in the country obviously remain, particularly in terms of expansion and strengthening. After the process was implemented, there was a recent evaluation to determine the status of the infrastructure, the operation of the Court for Minors and related organizations, so that some progress has been made in implementing Law 9/96 and the supplemental legislation.
9. The evaluation also found some constraints in the implementation of justice for minors. The effectiveness and efficiency of the system for administering justice to minors depends on other actions, namely building and regulating the operations of rehabilitation centres, allocating funding, and hiring and training personnel, which are matters that are dealt with by the governmental entities in the short term.
10. The conclusions will clearly identify the role and responsibilities of the different institutions involved in the system of administering justice to minors, the obligation of having them assume responsibilities, scheduling programmes that lead to implementing the law throughout the country, as well as the creation of technical, structural and financial conditions that guarantee that the system will be sustainable and effective.

*Children who are detained or in custody*

1. Since there are no rehabilitation centres, two alternative measures for detaining children who are in conflict with the law have been taken and rules have been made for implementation in accordance with Law 9/96, and they are:
2. The community services measure rule, article 17 paragraph (d) of Law 9/96 of April, the Court for Minors Act;
3. The probation rule, article 17 paragraph (e) of the same Law.
4. To monitor the implementation of these measures, the Government created by law the Minor Guardianship Commission, for which there is also a rule to improve its performance.
5. In the Court for Minors, the National Juvenile Delinquency Department monitors the implementation of parole and part-time detention measures ordered by the judge through police supervision of special police officers from that department.
6. Building assistance or education centres for part-time detention and for detaining children in conflict with the law or in social danger, preparing and approving the respective regulations, as well as hiring personnel, are the challenges the Government and its partners are facing.

## C. Street children

1. Despite the fact that the number of children who live on the street or who spend most of their time there is still significant, there has been a considerable decrease due to the relative improvement in the lives of the citizens.
2. According to Angolan law, street children, orphans, abandoned children and other vulnerable children are to be reintegrated into their families or placed in foster families. The Family Tracing and Reunification Program has guaranteed this right throughout the country.
3. After over 2,000 activists were trained for the campaign, activities were carried out in the provinces of Luanda, Benguela, Moxico, Malange, Uíge and Bié to support separated children in temporary institutions and host families, which reunited more than 10,000 children with their families.
4. Data on children that spend much of their time in the street or that live on the street, provided by the successive surveys until 2006, have not been adjusted to the current reality because of the fast pace of the programmes that reintegrate hundreds of children and place them with their biological families, with foster families, in homes and in institutions.
5. The factors that cause the “street children” phenomenon have not yet been entirely eliminated. The results of the studies on the causes of voluntary separation in Luanda province showed that there are 1,545 street children that have been picked up and hosted in Casa Pia de Luanda 600 in an effort to reintegrate them into their biological families. To this end, cooperation agreements are being initialed with different Government partners to implement a programme to develop and upgrade the private institutions to which street children will be taken, and there will be integrated education and vocational training programmes.

## C. Espaços Amigos da Criança (EAC)

1. The formal idea behind the “Espaços Amigos da Criança,” implemented in late 1999, was to provide safe haven to children as well as care and protection in several provinces ravaged by war during the conflict period. EACs were the only recognized public venue where children could be visible and be included as agents of society during that period. These Espaços Amigos da Criança offered psycho-social support for the children and also served as centres for education, mine awareness, information on HIV/AIDS, and family tracing.
2. In the post-conflict context, the EACs are contributing to protecting children’s rights as they are one of the alternatives that guarantee this right and the right of children to participate in the development of their personality.

## D. Child trafficking

1. With UNICEF support, the Government has investigated child trafficking patterns and has begun to develop national strategies to implement measures to prevent children from leaving the country without the oversight of the appropriate authorities.
2. The action plan adopted by the Huíla region (Matala) and Kunene (Santa Clara, a border locality), also has a national component to prevent child trafficking.
3. Monitoring is carried out by the structures are involved and there was an evaluation in September 2004. The lessons learned from the evaluation were used to take ad hoc measures, and the experience evolved into preparing a national strategy to strengthen various contributions, culminating with the second evaluation planned for 2008.
4. The Networks for the Protection of Children’s Rights and the Prevention of Trafficking are now being created, strengthened and expanded at the national, provincial and local levels to prevent and fight trafficking.
5. The Multilateral Cooperation Agreement to Fight the Trafficking of Humans, and of Women and Children in particular, in Central and West Africa during the Ministerial Conference of the Economic Community of West African States (ECOWAS) and the Economic Community of Central African States (ECCAS) against Human Trafficking in 2006 in Abuja, Nigeria, will contribute significantly to creating a coordination system to prevent and fight transborder trafficking. Kidnapping and trafficking are considered violence. By design, the strategy being adopted by the Government with UNICEF support placed priority on the implementation of programmes that are part of it and that will have major partners such as the WHO, ILO, Terre des Hommes, etc., and will be preceded by regional research efforts that have already been planned.
6. The purpose of the Agreement is to create a common front in the National Force against Human Trafficking in order to prevent, fight, eradicate and punish human trafficking through joint cooperation at the international level. It also seeks to protect, rehabilitate and return trafficking victims to their original environment when necessary, and to provide mutual assistance in investigating and detaining traffickers through cooperation between the authorities with competent jurisdiction of the signatory States. In 2007, in São Tome e Príncipe, the Government of Angola participated in the preparation of the Joint ECCAS/ECOWAS Action Plan against the Trafficking of Humans, and of Women and Children in particular.
7. It is understanding that the trafficking uses routes such as: origin (countries or exist points of children who are trafficking victims to a domestic or international destination); transit(countries, locations or points where traffickers and victims spend some time temporarily for geographic or logistical reasons); and destination (countries or arrival points in the traffic pattern). The lack of systematized information and the country’s current context make it impossible to determine where this is taking place in Angola. This objective situation causes the authorities that protect and promote the rights of the child to consider this objective situation extremely troublesome, and it should be the focus of attention for children’s policies and programmes.

## E. Violence against children

### *Violence against girls*

1. Domestic violence is by far the most common type of gender violence perpetrated against female children. In Angola this situation is of extreme concern. According to Article 1 of the United Nations Declaration on the Elimination of Violence against Women, violence against women is defined as any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.
2. In an attempt to update the Action and Intervention Plan against the Commercial Sexual Exploitation of Children, enacted by Decree 24/99, the INAC is evaluating its implementation in the hopes that the results will contribute significantly to planning actions to strengthen the strategy.
3. There have been situations of extreme concern regarding violence against women and against female children in particular. Recent data on incidents of gender-based violence collected monthly by the United Nations High Commissioner for Refugees in Moxico province (see table below) indicate that, in 2005, 114 cases of domestic violence were reported, as well as 28 early marriages and ten cases of sexual abuse of children in different localities in the province.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Report on Gender-Based Violence in September 2005**  **Moxico Province** | | | | | | | |
| **Type of incident** | **Location and Number of Incidents** | | | | | | |
| Luena | Luau | Cazombo | Lumbala  N’Guimbo | Total | Previous month | Cumulative since January |
| Rape | 0 | 0 | 0 | 1 | 1 | 2 | 13 |
| Attempted rape | 0 | 0 | 0 | 0 | 0 | 0 | 8 |
| **Sexual abuse of children** | **1** | **0** | **0** | **0** | **1** | **2** | **10** |
| Sexual assault | 0 | 0 | 0 | 0 | 0 | 0 | 5 |
| Domestic violence | 2 | 0 | 3 | 1 | 6 | 26 | 144 |
| Forced marriage | 0 | 0 | 2 | 0 | 2 | 1 | 8 |
| **Early marriage** | **0** | **1** | **0** | **0** | **1** | **3** | **28** |
| Other | 0 | 0 | 0 | 0 | 0 | 5 | 25 |
| Total, all types | 3 | 1 | 5 | 2 | 11 | 39 | 241 |

*Source****:*** *United Nations High Commission for Refugees*

1. A survey was performed by MINFAMU and the INAC with support from UNICEF, the UNDP, UNIFEM and the UNFPA. The survey studied 750 children, 410 of whom were girls, in nine municipalities in Luanda province, covering urban, semi-urban and rural areas. The study concluded that three-quarters of the children (girls), or 78 per cent of them between age 14 and 18, experienced physical, psychological, and sexual violence, including early motherhood as a consequence.
2. The survey also showed that school-age children between 12 and 17 who were not in the school system were subjected to some type of violence. Of those that were studied, 17.4 per cent were between 12 and 15 years old, while 6.3 per cent were between 16 and 17; of these, 11.9 per cent were girls and an equal percentage were boys. For those who were not in the school system, 13.2 per cent were between 12 and 15 and 6.6 per cent were between 16 and 17 years old, with 13.2 per cent girls and 6.6 per cent boys.
3. As part of the administrative measures, within the National Criminal Investigation Division, the Violence against Women and Children Section was created by Order No. 242 of 11 October by the Commander General of the National Police, for the purpose of paying more attention to the cases of violence that occur frequently in families and in the community. In 2006, this measure was supplemented with the creation of Brigades, whose activities at the provincial level are to prepare the guidelines for preventing this phenomenon and for providing information about the situation in the respective provinces.
4. On 13 September 2003, due to the growing number of cases, the National Police School Brigade was created to protect students, ensure their safety and eliminate crime in the schools.
5. The Family Tracing and Reunification Program, run by the MINARS, continues in effect. Its purpose is to reintegrate children who are at physical and social risk into their natural and/or foster families so that they can develop. In 2003 action plans were adopted at the local, regional and national level in order to prevent violence, protect victims and supervise them in the educational and vocational training process with multisectoral monitoring of victims and families.

### *Children accused of sorcery*

1. Some traditional practices encourage acts of violence, and thus children are accused of sorcery. This originated in the northern provinces of Uíge, Zaire and Luanda, and has spread, with some cases being found nearly everywhere in the country, and especially in some of the southern provinces.
2. Between 2001 and 2005, 423 children accused of sorcery were exposed to situations of extreme vulnerability in the streets of M'banza Congo; from there they were taken to the Santa Children’s Center run by the Catholic Church in that city. The destructive presence of traditional practices and allegations of sorcery and witchcraft against children caused the families to categorically refuse to deal with them.
3. As a result of the scope of problems related to the abuse and abandonment of children accused of sorcery in Angola, in 2005 the INAC performed a study on the “Impact of Accusations of Sorcery against Children in Angola” to learn about the event from an anthropological perspective and based on the rights of the child. This study, designed to develop an action plan to protect children and to build a platform for coordinated intervention by the governmental institutions, is strengthening the power of the legal systems and of the communities and is creating holistic protection for children who are victims of violence. This study was an important contribution to the comprehensive study on violence against children that was submitted by the Secretary General of the United Nations in 2006.

## Economic exploitation, sexual exploitation and child labor

1. The MAPESS has published and is continuing to disseminate the legislation on employment, training and vocational rehabilitation policies, whose implementation strategy in Law No. 1/06 of January 18 contains, among other things, the following measures:
2. Integration of youth into active life***,*** which aims to develop and promote jobs for youths through integrated policies that meet the needs of youth looking for their first job, at every step along the way of occupational insertion, stimulating and improving the diversity of choice and their contribution to the country’s overall development;
3. Training of youths in the learning system, which enables youths from 14 to 25 years old who are looking for their first job and who have at least six years of primary school to obtain the essential occupational license to facilitate the transition from the education system to the working world;
4. Technical and financial support for vocational training, for the public and private sectors and social partners who plan to develop vocational training programmes;
5. Temporary jobs for youths with activities of interest to the community, with the goal of keeping young people occupied temporarily with jobs that meet the needs of the localities and/or areas where they reside, in particular jobs with a civic character that are innovative and that occupy free time for the purpose of acquiring occupational skills, adjusting to the qualities of the working world, and participating in community activities;
6. Support for employment and vocational training of young girls, which seeks to build the capacities of the youngest groups of women and build their capacities to find their first jobs, giving them the opportunity at the personal and professional level to acquire skills for self-employment and/or access to family income;
7. Local employment programmes, which are part of local leadership and development to foster programmes that create jobs at the local level for youths looking for their first jobs;
8. Support for the socio-professional integration of moderately disabled youths looking for their first jobs, to promote capacity-building, qualification and vocational rehabilitation for social-professional integration and the job market for youths who are moderately disabled and are looking for their first jobs, to raise the awareness of employers and other entities that offer incentives for placing or hiring moderately disabled youths. It also aims to carry out individual and family socio-professional projects for persons with disabilities;
9. Support for the socio-professional integration of youths who are socially at-risk and of working age, which seeks to integrate youths who are of a working age (14-30 years), who have repeatedly failed in primary school and are at risk, orienting them to alternative lifestyles, in order to prevent them from becoming socially marginal by teaching them the basics of motivation that include projects for a dignified and professional life.
10. These measures, taken in harmony with the objectives of the International Labor Organization (ILO) and Convention 182, aim to gradually eliminate the worst forms of child labor (hazardous labor, commercial sexual exploitation, child trafficking, slavery, etc.).
11. Cases of violations of children’s rights, especially sexual abuse, discrimination, neglect and violence in the family, urban and rural communities and involvement in the worst forms of child labor (in diamond mines, border localities, airports, markets and bus terminals (and economic exploitation (hazardous activities, such as high-seas fishing in the South in Namibe province), and much mention was made of these issues in creating themes for the status of the child. The commercial sexual exploitation of children and street labor are visible, particularly in the urban centres where the most vulnerable groups are orphans and homeless children.
12. Measures to counter the situation are being taken in the national strategy to prevent and mitigate violence against children, without neglecting the urgent necessity of revising the National Action and Intervention Plan against the Commercial Sexual Exploitation of Children adopted through Resolution No. 24/99, which proved to be unsuitable for the current context, and whose activities to meet these needs are in progress.

## F. Use of drugs

1. The Government created the Committee to Fight Drug Use, which coordinates multisectoral activities to combat the possession, trafficking and consumption of narcotics.

1. Drugs are consumed by citizens beginning at age 15. The choice of drug depends largely on the user’s buying power, and usually starts with cannabis. The poorest frequently use inhalants (simple rags with gasoline), and street boys are the predominant users. This produces a sensation of euphoria and excitement, interferes with hearing and sight, and can even cause hallucinations. Repeated inhaling of solvents can destroy the neurons, resulting in a loss of reflexes, difficulty concentrating, and memory problems. The majority of inhalants depress the central nervous system, with acute effects quite similar to those from alcohol. Actually, many inhalant users also use other drugs at the same time, and alcohol in particular, which can lead to sudden death.
2. In this context, the National Criminal Investigation Department of the National Police recorded 950 crimes as of 2007, committed by 1,207 children of both sexes broken down as follows: in 2006, 646 crimes committed by 777 male children and 62 female children; in 2007, 304 crimes committed by 350 male minors and 18 female minors. The crimes committed are varied, but primarily there are the possession and use of narcotics (3 per cent) and the sale of narcotics (2 per cent).
3. Programmes to prevent and fight this problem are carried out in several government programmes that include moral, civic and patriotic education, awareness and social mobilization, as well as other control measures that have not yet proven to be as effective as necessary because measures were included as part of the national strategy to prevent and mitigate violence against children.

Annex 1

List of participants in the process of preparing the report

* + 1. **Representatives of Government bodies, namely:**
    2. Ministry of Assistance and Social Reintegration (MINARS);
    3. Ministry of [sic] (MINSA);
    4. Ministry of Education (MED);
    5. Ministry of Justice (MINJUS);
    6. Ministry of Family and Women’s Empowerment (MINFAMU);
    7. Ministry of the Interior (MININT);
    8. Ministry of Foreign Relations (MIREX);
    9. Ministry of Youth and Sports (MINJUD);
    10. Ministry of Culture (MINCULT);
    11. Ministry of Public Administration, Employment and Social Security (MAPESS);
    12. Ministry of Planning (MINPLAN);
    13. Ministry of Urban Development and the Environment (MINUA);
    14. Ministry of Social Communication (MCS);
    15. Ministry of Agriculture and Rural Development (MINADER);
    16. Ministry of Finance (MINFIN);
    17. Ministry of Energy and Water (MINEA);
    18. National Children’s Institute (INAC).
    19. Provincial governments;
    20. Local governments;
    21. School Security Brigade of the Provincial Command of the National Police in Luanda;
    22. **Representatives of religious entities:**
    23. Oblate Sisters;
    24. Dom Bosco;
    25. Pastoral da Criança;
    26. Centro Arnaldo Jansen;
    27. REMAR;
    28. **Representatives of civil society and others:**
    29. Legal Reception Centers of the Organization of Angolan Women (OMA);
    30. Women’s Network;
    31. Kandengues Unidos.
    32. **Representatives of United Nations agencies:**
    33. UNICEF
    34. OHCHR
    35. **Of children.**
    36. Provincial children’s assemblies
    37. **Others**
    38. Social referral centres: Kilamba Kiaxi**;** Ingombota; Sambizanga.
    39. Coordinating teams for the Network to Protect and Promote the Rights of the Child in the provinces of Huíla, Luanda, Uíge, Zaire and Benguela.

**Annex 2**

**The Voice of the Child**

To ensure that they participated effectively in the process of preparing the report, children from the 18 provinces, in age groups (10 - 13 and 14 - 17), met and discussed topics on HIV/AIDS, Education, Violence against Children, the Birth Registry, and Freedom of Speech and Association. Their statements follow:

*In our school there is no first aid, and we want to discuss issues such as early pregnancy and diseases such as HIV/AIDS.*

*We are entitled to protection against violence, physical aggression, robberies, mistreatment, abandonment, exploitation and sexual abuse. We ask our parents or educators to pay more attention to this during the school year, as well as the teachers, and to refrain from using obscene words that are morally and psychologically offensive to us.*

*We are entitled to a name, a nationality, to be registered, and to have an identification card so that we are able to register for school.*

***Children of the province of Namibe***

*There should be awareness campaigns with lectures, seminars, and workshops in the schools and churches and in the municipalities to shed light on sexually transmitted diseases and on HIV/AIDS in particular.*

*We call on the government to create mobile health posts in the schools.*

*In our province, our parents or educators take children out of school to help with farming, carry heavy loads, care for babies, and carry water over long distances; we are spanked with objects such as paddles, hangers, and we are punched and whipped.*

***Children of the province of Kuanza Norte***

*In our province there is a need to build more hospitals, centres, health posts, maternity centres, to train employees in pediatrics, and we are entitled to receive care for the various epidemics such as malaria or measles, diarrheal diseases, etc., and methods should be implemented to reduce child mortality. We deserve dignified services for a better and healthy country.*

*We are entitled to be protected. There should be lectures on violence throughout the province. Adults should be made aware that they must stop using violence against us, such as sexual abuse, mistreatment, contempt, moral harm, etc.*

***Children of the province of Zaire***

*We ask the government to ensure conditions so that circles of interest to us are created, and to have children participate in meetings and children’s radio programs. We want to participate in various activities, lectures and awareness meetings.*

*We want there to be more control over epidemics such as HIV/AIDS and other diseases. We want better food in hospitals. We want more hospitals built, especially in remote localities. We want campaigns to prohibit induced abortion, sexually transmitted and other diseases, improvements in patient care, especially for children, efforts to prevent the high number of infant deaths that continue to be recorded, with more nurses in the municipalities and other localities.*

***Children of the province of Uíge***

*We know that freedom of speech exists because Article 13 says we are entitled to learn about things and speak our mind through speech, writing or drawing, and here the right of speech is still not practiced properly due to lack of means. Many people speak on the Uige and Negaje radio stations as well as in schools. We have teachers that allow us to speak. We know about discussing our rights as children and how to pursue them. We are entitled to freedom of speech at home, on the streets, in the schools and in churches.*

*We are entitled to receive proper care in the hospitals and medical centres and posts, to be informed of various epidemics, to receive information in school, in the family, and even on the street on how to prevent HIV/AIDS.*

*In our school the teachers mistreat the students. They offend them morally, beat them and expel them from the classroom. Also, in the communities, mother and fathers spank children, burn them and we can’t say anything, because if we tell the police, they believe we are lying and we are arrested for libel.*

*We are entitled to be registered because it is important. Without the identification card we cannot register as students and will not be considered a being in society, because without the registry we do not have a name and no way to identify ourselves, for example, a citizen without a name is not recognized at the national level.*

*We ask our parents to listen to the child speak first before acting, because we have this right and in many cases we have good ideas.*

***Children of the province of Kuanza Sul***

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Bibliography

**AP** (1992) *Constitutional Law of the Second Republic*

**AN** (2005) *Law No. 7/05 of October 15r*

**AN** (2006) *Law No. 1/06 if January 18*

**AN** (1996) *Law 9/96 on the Court for Minors*

**AN** (2002) **Law 6/02, Water Act**

**CIVIL CODE** *Portuguese Colonial Law in effect in Angola*

**DNIC** (2004-2007) *Annual Reports*

**Family CODE** (1988) *Codification of Family Rights*

**GOVERNMENT**(2000-2007) *Evaluation of Public Spending on the Health Sector*

**GOVERNMENT** (1999) *Decree 24/99 Action and Intervention Plan against the Commercial Sexual Exploitation of Children*

**GOVERNMENT (2005)** *Decrees 50 and 52/05 of August 8*

**GOVERNMENT**(2004-2006) *Government Budget*

**GOVERNMENT** *National Plan to Prevent and Reduce the Impact of HIV/AIDS*

**GOVERNMENT** (2003) *Initial Report on the Implementation of the CRC in Angola*

**GOVERNMENT** (2007) *Findings of the Third National Forum on Children*

**GOVERNMENT** *National Strategic Plan to Control HIV/AIDS*

**GOVERNMENT** (2001-2015) *National Action Plan for Education for All*

**GOVERNMENT** (2005) *Report on the Implementation of the National MDG Action Plan – Government of Angola*

**GOVERNMENT** (2007) *Report on the Implementation of the Action Plan to Create a World Fit for Children*

**GOVERNMENT** (2007) *Joint Report on Human Rights Treaties*

**INAC/UNICEF** (2007) *Impact of Accusations of Sorcery against Children in Angola, “Uma análise na perspectiva dos Direitos da Criança”*

**INE** *Multiple Indicators Survey*

**MINADER** *Food Safety Program*

**MINARS** *Findings of the National PPD Conference*

**MINARS** *Program for Action, Analysis and Rapid Evaluation (RAAAP)*

**MINARS** *Localization and Reunification Program*

**MINIPLAN** (2006) *Government Program Survey*

**MINSA** *National Reproductive Health Strategy*

**MINSA** *National Strategic Plan for HIV/AIDS - MINSA*

**MINSA** *Strategic Plan for the Accelerated Reduction of Mother-Child Mortality*

**MINSA** *Expanded Program on Immunization*

**OAA** *The Angolan Legal System*

**STATE AND GOVERNMENT AGENCIES** *Sectoral reports and other official documents*

**UN** *Convention on the Rights of the Child*

**UNICEF** *“Best Estimate”*

**UNDP** (2006) *Human Development Report*

1. \* In accordance with the information transmitted to States parties regarding the processing of their reports, the present document was not formally edited before being sent to the United Nations translation services. [↑](#footnote-ref-1)
2. The Committee considered Angola’s first report (CRC/C/3/Add.66) at its 991st and 992nd meetings (CRC/C/ SR. 991-992), held on September 27, 2004, and adopted its final observations and recommendations at its 999th meeting held on 1 October 2004 . [↑](#footnote-ref-2)
3. HRI/MC/2004/3. [↑](#footnote-ref-3)
4. CRC/C/3/Add.66. [↑](#footnote-ref-4)
5. See sub-chapter 4 – National Action Plan. [↑](#footnote-ref-5)
6. Law No. 9/96, the Court for Minors Act, with implementing regulations adopted by Decree 6/03 of 28 July. [↑](#footnote-ref-6)
7. See the information on the birth registry in chapter IV – Rights. [↑](#footnote-ref-7)
8. These are part of the municipal governments; they record births and issue identification cards pursuant to aforementioned Decree No. 31/07. [↑](#footnote-ref-8)
9. Both are published in Official Gazette I Series No. 48 of 20 April 2007. [↑](#footnote-ref-9)
10. Ombudsman Status Act. [↑](#footnote-ref-10)
11. http://www.minfin.gv.ao/docs/dspSinteseGeralOGE2007.htm. [↑](#footnote-ref-11)
12. Pioneer is the name given to children that are members of the OPA, a children’s organization located throughout the country in schools and communities that carry out moral and civic educational and social solidarity activities.. [↑](#footnote-ref-12)
13. A unit in the Ministry of Culture that is responsible for generating, applying and auditing the activities and programs that seek to develop the country’s artistic and cultural potential and preserve and promote values that identify the natural culture and the knowledge of the values of African and Universal Culture. [↑](#footnote-ref-13)
14. National Health Policy. “ Por uma Vida Saudável para Todos”. 3rd draft 2007. [↑](#footnote-ref-14)
15. *Angola: Despensa Publica no Sector da Saude (2000-2007) ,*Editorial Principia, Cascais. Led by the Office of Research, Planning and Statistics (GEPE) in the MINSA. The study was prepared by MINSA in conjunction with the Ministry of Finance (MINFIN). Technical support was provided by the Health Sector Support Program (Programa de Apoio ao Sector da Saude - PASS), and financing came from the European Commission, a partner that has been supporting the sector for over a decade. [↑](#footnote-ref-15)
16. Ibid. [↑](#footnote-ref-16)
17. *Angola: Despensa Publica no Sector da Saude (2000-2007)* [↑](#footnote-ref-17)
18. http://www.minfin.gv.ao/docs/dspSintese2007-5.htm [↑](#footnote-ref-18)
19. National Public Health Department/UNICEF: Pacote Essencial de health materno-infantil: Bases normativas para a sua operacionalização, Luanda, 2007. [↑](#footnote-ref-19)
20. MINSA, National Public Health Department, Luanda 2007 [↑](#footnote-ref-20)
21. *2005-2009 Strategic Plan to Accelerate the Reduction in Maternal-Child Mortality in Angola. Investing in Human Development*. MINSA, National Public Health Department in partnership with the WHO, UNICEF and the UNFPA. [↑](#footnote-ref-21)
22. The mortality rate for children under five is the likelihood (expressed in a rate of 1,00 live births) that a child born in any given year will die before reaching age five, if current mortality rates for this age are used. UNICEF statistics. <http://childinfo.org/areas/childmortality/methodology.php> <http://childinfo.org/areas/childmortality/u5data.php> [↑](#footnote-ref-22)
23. UNICEF: Best estimate, Luanda 2007 [↑](#footnote-ref-23)
24. *2005-2009 Strategic Plan to Accelerate the Reduction in Maternal-Child Mortality in Angola. Investing in Human Development*. MINSA, National Public Health Department in partnership with the WHO, UNICEF and the UNFPA. [↑](#footnote-ref-24)
25. Essential Mother-Child Health Package: Standards for making it operational. MINSA. [↑](#footnote-ref-25)
26. “2008-2012 National Malaria Control Strategic Plan:” National Public Health Department. National Malaria Control Program. Ministry of Health Angola. [↑](#footnote-ref-26)
27. Ibid. [↑](#footnote-ref-27)
28. The program is caried out in the context of implementing the integrated projects of the United Nations, NGOs and government departments. [↑](#footnote-ref-28)
29. Ministry of Plannning: Strategy to Fight Poverty, Luanda 2003 [↑](#footnote-ref-29)
30. *National Strategic Plan to Fight HIV/AIDS, government of Angola.* [↑](#footnote-ref-30)
31. National AIDS Institute: 2004 Activity Report, Luanda 2006. [↑](#footnote-ref-31)
32. Knowledge, Attitudes, Practices and Behavior of Youth in: PNLS, PSI, UNICEF, USAID (2001), [↑](#footnote-ref-32)
33. PNLS, PSI, UNICEF, USAID,( 2003). [↑](#footnote-ref-33)
34. Futures Group: PNLS, UNICEF, UNDP, (2003). [↑](#footnote-ref-34)
35. MICS: Multiple Indicator Survey, [↑](#footnote-ref-35)
36. Objective of the Millennium Summit, New York, September 2000. [↑](#footnote-ref-36)
37. UN (2002). Angola: os Desafios do Pós Conflito Armado, Avaliação Conjunta do País. Luanda: United Nations System in Angola. [↑](#footnote-ref-37)
38. The presence of intestinal parasites in a person’s organism generally causes anemia, poor physical and intellectual development, and thwarts the ability to learn, thus affecting the quality of education for children. [↑](#footnote-ref-38)
39. Albendazole is a medication that can easily be chewed and is easily administered to children by their own teachers. [↑](#footnote-ref-39)
40. The number of educators (teachers without the appropriate professional qualification) for the 8th grade and even for the 6th grade is very high, mainly due to the shortage of skilled human resources, mostly in the communes and municipalities that are farthest from the provincial centres.. [↑](#footnote-ref-40)
41. 2001-2015 Integrated Strategy for Improving the Education System. [↑](#footnote-ref-41)
42. Recommendation No. 71 of the United Nations Committee on the Rights of the Child, in the Final Observations (CRC/C/SR.991-992) [↑](#footnote-ref-42)
43. Participants: Judges and the Office of the Prosecutor responsible for the enforcement of Law 9/96 in each province, two magistrates (one from the court and one from the Office of the Prosecutor) from the Family Section of the Luanda Provincial Court, two magistrates (one from the court and one from the Office of the Prosecutor) from the Criminal Section of the Luanda Provincial Court, six justice officers and directors of the provinces of Benguela, Huila, K. Kubango, Uíge, Huambo, and Moxico and 18 directors from the MINARS. [↑](#footnote-ref-43)