



**Convention on the  
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COMMITTEE ON THE RIGHTS OF THE CHILD

Fifteenth session

SUMMARY RECORD OF THE 375th MEETING

Held at the Palais des Nations, Geneva,  
on Wednesday, 21 May 1997, at 3 p.m.

Chairperson: Miss MASON

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The meeting was called to order at 3.10 p.m.

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

Initial report of Cuba (CRC/C/8/Add.30, CRC/C/Q/CUB.1) (English and Spanish only) ( continued )

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

2. Mrs. SARDENBERG said that, if she had understood correctly, the Prevention and Social Welfare Commissions played a significant consultative role in the protection of the rights of the child; she inquired whether that body might also be given a leading role in informing public opinion about related programmes. She pointed out that, although the commitments undertaken by Governments within the framework of the national action programmes adopted in consequence of the World Summit for Children were of a political nature, commitments undertaken under the Convention were of a juridical character. That was an essential distinction; it would be interesting to know if the Cuban Government intended to integrate the terms of its National Action Programme for Children into the national legislation.

3. It would also be useful to know in what way policies adopted at the central level were implemented at the local level. Furthermore, although Cuban law clearly prohibited all forms of discrimination, what was the real situation? Did racial discrimination exist in practice? Finally, in consequence of its ratification of the Convention and the consideration of its initial report by the Committee, did Cuba intend to revise those legislative provisions which related to the protection of the rights of the child?

4. Ms. ALIÑO (Cuba), replying to questions raised at the previous meeting, said that within the context of Cuba's free universal health-care system, family doctors, each of whom had a caseload of 600 to 800 individuals, could easily identify those families in which a child stood to be the victim of abuse when they made their community rounds. Furthermore, all children received regular medical checkups, which likewise allowed for the detection of possible abuse. Medical doctors were obliged, under the health law, to inform the authorities of all cases of ill-treatment that came to their attention. When such a case arose, the child was taken into care and rehabilitated within his own community. Lastly, with regard to the dissemination of the Convention, it should be noted that, with the assistance of UNICEF, the National Mother and Child Care Programme held regular meetings to familiarize members of the medical corps with its provisions.

5. Ms. DE PUZO (Cuba) said that although violence within the family did not constitute a significant social problem in Cuba, prevention mechanisms and sanctions had been established for individual cases that might arise. There were also mechanisms, described in the report, under which children whose rights had been violated could have recourse to the courts. When the interests of the child and those of the parents clashed, the judge was obliged to protect the child.

6. Ms. BERETERVIDE (Cuba) said that under Cuban law, the age of criminal responsibility was set at 18 years. However, for anyone between the ages of 18 and 20 found guilty of an offence, the court could reduce by a third the minimum and maximum limits of the applicable punishment and reduce by half that of minors between the ages of 16 and 18. Instead of being judged by the courts, minors under the age of 16 who committed an offence or manifested antisocial behaviour were taken into the care of a system of special institutions which took a pedagogical approach to the treatment of youthful offenders, and benefited from the services of educators, lawyers, and other specialists. Standards applied in Cuba in the area of juvenile justice administration were generally superior to those applied in other parts of the world. In fact, the utmost was done to see that most of the young people detained in those institutions acquired skills which would allow them upon leaving to practise an occupation.

7. Child prostitution was a phenomenon of increasingly alarming proportions throughout the world. In Cuba, the problem of prostitution, which included juveniles in a small number of cases, had emerged only after the country had opened its doors to tourism. And yet, the young women and girls who engaged in that sort of activity did not do so for the same economic reasons as those who had engaged in prostitution before the revolution, since they received, for instance, free health care and free education for their children. The Cuban Government had published material to alert communities to that problem, and to inform them that the education of young people was the responsibility of all. Courses were held for the young women in question; and social workers conducted monitoring and protection programmes. Despite the considerable efforts of educational institutions to instill a healthy attitude towards sex, prostitution continued to be a matter of concern for both public institutions and the various Cuban non-governmental organizations (NGOs).

8. Ms. FLÓREZ PRIDA (Cuba) pointed out that Cuba had only recently developed the tourist industry, for economic reasons, and that prostitution, which was linked to the rise in tourism, was relatively new in that country. It was worth noting, in that context, that Cuban law proscribed economic exploitation and that the courts dealt with such cases very severely.

9. Cuban law also prohibited all forms of discrimination, whether based on sex, race, colour, religion or national origin. According to article 295, paragraph 1, of the Criminal Code, all persons found guilty of discrimination for one of the aforementioned reasons, or who fomented ideas based on the superiority of a given race, would be subject to imprisonment or fine. It should also be pointed out that the population of Cuba was 66 per cent white, 33 per cent mestizo and black, and 1 per cent of Chinese extraction; the very diversity of the population accounted for the richness of Cuban culture.

10. With regard to legislative reform, she stressed that Cuban law in the sphere of children's rights had been comprehensive well before the United Nations had adopted the Convention. The Cuban authorities had therefore deemed it sufficient to fill gaps in the existing legislation.

11. Mr. KOLOSOV noted that questions 11 and 12 of the list of issues (CRC/C/Q/CUB.1) had not been satisfactorily answered, and made a number of remarks about that part of the written replies which touched on the definition

of the child. Firstly, the minimum legal age at which a child could be given a medical or legal consultation without parental consent, and in particular a surgical procedure, was not specified. Secondly, there was an obvious gap between the age at which the child was no longer compelled to attend school (12), and the age at which he could be employed (17); that five-year interval seemed long. He wondered whether the minimum working age should be lowered, or the age requirement for compulsory education raised. Thirdly, the minimum age for consensual sexual relations should be specified, since an adult could be prosecuted for engaging in sexual relations with a person who was not of age, even if consent had been given. Nor had data been supplied with regard to the age at which a citizen could have recourse to a court of law, receive an inheritance, engage in real-estate transactions, open a bank account, or consume alcoholic beverages. In that regard, he referred to the general guidelines regarding the form and contents of periodic reports, which indicated that States parties should address those matters.

12. Ms. OUEDRAOGO requested a response to her question as to what measures were taken to what was done to protect child victims of prostitution.

13. With regard to the definition of the child, she pointed out that although the age of majority was 18, the age requirement for a number of activities varied; should they not be harmonized? Noting that the age of marital consent was not the same for girls and boys, she welcomed the envisaged legislative reform and hoped that the new provisions would more closely conform to the conclusions of the Fourth World Conference on Women, Beijing.

14. Mr. FULCI, reverting to the matter of the adverse effects of tourism, said that although it was regrettable that a certain type of tourism brought an increase in pornography involving and the sexual exploitation of children, tourism was not only an economic asset but a means by which peoples could become better acquainted with each other and better aware of the interdependence of the countries on the planet. A solution might consist of sending special teams into countries opening up to tourism; the record showed that such interventions could yield excellent results. In addition, countries with morally healthy environments were more likely to attract tourism.

15. Furthermore, paragraph 64 of the report, under the section concerning family environment and alternative care, offered what appeared to be insufficient information. It stated, on the one hand, that children were rarely abandoned, and on the other that there were 15 centres and hostels for minors without families. Information was lacking on the number of abandoned children and the size of the centres and hostels, which would give some indication of the scope of the problem.

16. Mrs. SARDENBERG said that, when she had formulated her recommendations concerning the Prevention and Social Welfare Commissions she had not intended to impose anything whatever on a sovereign State, but rather to suggest ways by which the will of the Government might achieve political visibility. She noted that there was also a commission responsible for monitoring the implementation of government programmes for women, children and youth; in her view, that commission might also review the success of that implementation and propose policy reforms.

17. Turning to the matter of discrimination, she recalled that discrimination was practised despite the legislation that prohibited it, because modifying legislative texts was easier than changing attitudes. What was the view of the Cuban delegation in that regard? Had that situation begun to evolve?

18. With regard to the information concerning adoption supplied in paragraphs 65 and 66 of the report, the Cuban delegation should explain how, on the one hand, only 1 per cent of socially disadvantaged children were eligible for adoption, while on the other, some 1,000 children had been adopted since 1982. She would like a response to the question raised concerning the possible ratification by Cuba of the Hague Convention on Protection of Children and Co-operation in respect of Intercountry Adoption.

19. Mrs. KARP said she could see no justification for the declaration concerning article 1 entered by Cuba at the time of its ratification of the Convention, and requested clarification on that point.

20. She joined with Mr. Kolosov in inquiring about the age requirement for compulsory education. That was a pertinent question in a time of economic crisis in which parents often encouraged children to work for pay, and children often failed to attend school in the interests of helping out their families. In her view, Cuba should consider raising that age requirement.

21. The marriage age was also a matter of concern. A child who married - at age 15 for a boy and age 12 for a girl - in effect became no longer a child. Did he not also lose the protection accorded to that sector of the population? She wondered whether the marriage age should consequently be modified. Also of concern was prostitution, another instance in which the child became no longer a child. She inquired whether legal protection was envisaged for all children of age 18 or younger, whatever their status.

22. Ms. MBOI commended the Cuban authorities for according priority to health and education, areas in which the island had achieved remarkable results. Problems nevertheless persisted, particularly in regard to child prostitution, HIV/AIDS, and other sexually transmitted diseases (STDs). Although those were problems that a country could not solve alone, domestic measures must also be taken. She regretted that Cuba had not replied to question 32 and had failed to provide information as to the trends shown by those phenomena. Solutions to the new problems which abuse and the traffic in narcotic drugs presented for children lay in regional and international cooperation: Did the Cuban delegation have any suggestions as to the form which that cooperation could take?

23. With regard to family planning and abortion, answers had been provided to questions 23 and 31. And yet, according to the official statistics, 70 per cent of all pregnancies had been terminated by abortion in 1992. Data were lacking with regard both to the subsequent evolution of that phenomenon, and to what programmes had been envisaged in the area of family planning, especially for young people. In the light of the Cairo and Beijing Conferences, those questions were more pertinent than ever.

24. Mrs. KARP inquired whether there were instances of children committing suicide in Cuba, and whether research had been conducted in that regard. The question was important because the situation in Cuba, particularly from an economic point of view, could well lead children to lose faith in the future.

25. More detailed information should be offered concerning child accidents in the home, school, or elsewhere, and concerning what measures had been taken to prevent them.

26. The section of the report concerned with general principles called for further clarification, and in particular concerning the development of a child not only as a member of a community but also as an individual, the growth of his sense of human dignity, and his ability to express his opinion and to have his views heeded. An analysis of those provisions of the Convention which touched on civil and individual rights could well complement the efforts made by Cuba in the area of education and social services.

27. Mr. RABAH said he was troubled by certain aspects of the juvenile justice system. He would like to know if there was a law concerning justice for minors and youthful offenders, what measures were taken to prevent criminal activity in young people and to ensure the reintegration of youthful offenders, whether legal and practical measures had been established for the protection of detained children. What, for example, happened to a minor who was sentenced, at the age of 16, to 3 years or more in prison, when he reached 18? Was he then transferred to a prison for adults? The Cuban delegation should provide statistics on juvenile crime, sorted by age. Lastly, he inquired what role NGOs played in the administration of juvenile justice.

28. Ms. MOKHUANE requested additional information on paragraphs 71 and 72 of the report. Paragraph 72 indicated that 100 per cent of children with behavioural problems were enrolled in school, and that there were currently 35 special schools for such children, among them 13 of the new type: what was meant by "behavioural problems" and by "schools of the new type"? She wondered, furthermore, whether it was possible that all children with behaviour problems could be enrolled in school, or, in other words, whether it was possible that none were outside the school system. The Government should describe the measures it undertook to monitor the mental health of children, beyond those applied under the terms of the Family Code and the Children's Code.

The meeting was suspended at 4.35 p.m. and resumed at 16.50 p.m.

29. Ms. FLÓREZ PRIDA (Cuba) said that the Family Code established the age of marital consent at 18 for boys and girls, and permitted that age to be dropped to 16 for boys and 14 for girls under certain circumstances. And yet, the Family Code was being revised to establish the same age of marital consent for both boys and girls. That revision took into account the conclusions of the Beijing Conference and the recommendations of the Committee on the Elimination of Discrimination against Women. The Committee would be promptly informed of the results of that process.

30. In Cuba, all persons over the age of 18 had full legal capacity. The Civil Code provided that the legal guardian of a minor or the Public Prosecutor would represent the minor in certain civil matters. Furthermore, a minor was entitled to legal representation. Although a child's access to health care required parental consent, his best interests were taken into account. Education was compulsory until the age of 12.

31. Mr. AMAT (Cuba) said that the differences between civil majority, criminal majority, electoral majority, the minimum working age and the age of marital consent were attributable to the fact that the relevant legislative texts had been adopted at different times. Before the revolution, the age of civil majority had been 21; currently it was 18. The draft new Family Code, taking into account the legal instruments to which Cuba was a party, would establish the same age of marital consent for boys and girls. The theory that girls matured sooner than boys was no longer applicable, in particular because of the strides taken by the movement for the equality of men and women. Furthermore, although the age of criminal majority was 16, the court was obliged to reduce the sentence if the guilty party was less than 18.

32. In Cuba, the age of electoral majority was 16, and Cuban youth, who had demanded that right at several congresses, thereby made a very useful contribution to civic life. Minors could begin to work at the age of 17. Education was compulsory through the sixth grade, which was the final year of primary education. Most Cubans nevertheless pursued their studies through the ninth grade. Girls sometimes left school at the age of 16 for family reasons or because they had married. The Ministry of Education had therefore mounted a campaign to encourage girls, and young people in general, to resume their studies, by providing them with social assistance. In addition, work-study programmes had been established so that young people who did not wish to pursue secondary studies could learn a trade.

33. Unlike the exploitative use of prostitution, which was severely punished, prostitution itself did not constitute a criminal offence. That problem was not, however, any more common in Cuban society than the use of drugs. With the development of tourism, several isolated cases of tourists consuming drugs had been recorded. Cuba, which was situated between the drug-producing countries of South America and the drug-consuming countries of North America, had received international assistance, particularly from the United Nations, to halt that scourge. Cuban law established heavy sanctions against drug users.

34. In Cuba, respect was paid to a child's individuality, as well as to his cultural, intellectual, athletic and artistic development, such that he could find his place in society. In accordance with the teachings of the national hero José Martí, children were inculcated with the love of work and respect for the community, the fundamental precepts of collectivism. Cuba's successes over the preceding 37 years in the areas of health, education and high-level sports should suffice to show that not arousing individualism and egotism in children was important.

35. Youthful offenders were given psychological and social assistance, and, when necessary, were placed in the new schools, where they received the same education as in other teaching institutions. The new schools were open

institutions where children could be visited by their families, and where the utmost was done to provide them with an education which would permit their reintegration into society.

36. Offenders over the age of 16 who had been sentenced to prison were kept separate from detained adults, insofar as possible. Minors found guilty of petty offences could pay visits to their families. Court decisions rendered in cases involving minors could be appealed against to such competent instances as the Supreme Court, and the review of a decision could be requested from the Ministry of Justice.

37. Ms. DE PUZO (Cuba), replying to a question raised by Mr. Kolosov concerning the age of sexual consent, said that Cuba's Criminal Code presumed the absence of consent in any instance of sexual abuse committed against a minor, and established that the age of the victim was both a factor, and an aggravating circumstance in a number of sexual offences ( inter alia, pederasty, sexual abuse of a minor between the ages of 12 and 16, and corruption of a minor). The chief concern was not the establishment of an age of sexual consent but the protection of minors in accordance with their age. Thus, for example, a minor emancipated by marriage continued to enjoy those guarantees established by law for other minors. Furthermore, Cuba was assessing whether to accede to the Hague Convention on Protection of Children and Co-operation in respect of Inter-country Adoption.

38. Ms. BERETERVIDE (Cuba), offering clarifications with regard to the special schools mentioned in paragraph 72 of the report, said that the country had 35 such schools, whose task was to determine what measures to undertake with regard to minors under the age of 16 with behaviour problems. The new schools were establishments equipped with optimal facilities for taking care of that category of minors.

39. With regard to special education, Cuba had 252 facilities for the mentally disabled, among them 24,051 minors; 17 facilities for the hearing and speech-impaired, which cared for 1,772 persons; 7 facilities for the blind and sight-impaired, which cared for 842 persons; 13 facilities for 1,298 strabismic persons; 8 facilities for the treatment of language difficulties, which cared for 560 persons; 92 facilities for the treatment of retarded psychological development, which cared for 21,151 persons, and 1 facility for those with psychomotor disorders, which cared for 659 persons. In addition, 75 hospital-based classes had been established throughout the country for children who for health reasons could not participate in a regular teaching regime. Lastly, there were itinerant teachers who made home visits to children who could not attend school, as, for example, after surgery.

40. With regard to children without the protection of a family, Cuba had a network of child facilities: homes for children under the age of 6, homes for children over the age of 6, and homes for young people over the age of 17, which housed young people taken into the care of the State until they reached the minimum working age, and while they waited for employment or housing. All such children benefited from the services of specialized staff and were integrated into the regular education system. Those establishments served as substitute homes for children whose parents were serving prison terms, for

semi-abandoned children, and for those whose parents suffered from psychological problems which prevented their raising them. The conditions in those establishments, many of which had been homes for the wealthy before the revolution, were excellent. It should be added that some foreign organizations had provided assistance to the residents of those homes in the form of clothing, food and toys.

41. Ms. ALIÑO (Cuba) said that STDs had infected very few minors, and did not constitute a public health problem, despite the several cases of AIDS infection by transfusion or mother-child transmission that had been noted. Cuba was not, however, beyond the reach of such illnesses and had therefore formulated a set of information, education and communication strategies designed to promote risk-free sexual behaviour, with a view to protecting the population in general and youth in particular. Family medical clinics, which were located in all communities, had youth units which disseminated information on significant health issues and provided sex education, with particular attention to the prevention of early pregnancy and STDs. The student organizations represented on the National Health Service had determined that, for the purposes of awareness-raising, those units would be far more effective if they were located in schools. A decision had therefore been taken to engage the participation of the Ministry of Education, and to involve teachers, and students at all grade levels, in a programme designed to promote a healthier lifestyle.

42. Before the revolution, the chief cause of maternal mortality had been illegal abortion, and a decision had consequently been taken to legalize the termination of pregnancy. While not promoting or condoning abortion, the Ministry of Health sought to ensure that abortions were carried out under acceptable conditions. Despite the limited availability of contraceptives, the abortion rate had dropped in all age groups in Cuba, and in particular among women under the age of 21; despite the lowered birth rate, abortion had diminished in relative terms. No measures were taken in Cuba to limit the number of births; couples were free to decide on the number and spacing of children. Nevertheless, with a view to promoting reproductive health, campaigns had been conducted to encourage couples to allow a greater interval between births and thereby to improve the health of mother and child. Clinics offered all available family planning options; specialized clinics dispensed the more costly contraceptives only to couples at risk, as, for example, if the mother was diabetic or afflicted with some other illness.

43. There was no drug problem among young people in Cuba because there was no drug traffic in the country and because all psychotropic substances were strictly controlled and available only by prescription. Furthermore, suicide was rare among minors, as demonstrated by statistics published by WHO concerning the causes of mortality. Accidents, however, constituted a serious health problem, and were the primary cause of death after the first year of life. In 1996, a programme had been mounted to prevent accidents among persons under the age of 20, which complemented similar activities envisaged for the National Mother and Child Care Programme. One of the 13 principal intervention themes identified within the context of the Ministry of Health's overall strategy was the accident-prevention campaign, and workshops had been organized throughout the country to sensitize the population to that issue. Such NGOs as the Federation of Cuban Women had also played an important role

in that area. On the basis of pilot programmes, which had revealed that children did not know that accidents often caused death or damaged the quality of life, a series of awareness programmes, many of them supported by UNICEF, had been conducted in the schools. In addition, a manual - developed with the assistance of international organizations - had been distributed to all doctors to familiarize them with child-related accident prevention and treatment measures. It also dealt with the rehabilitation and psychological treatment of children who had suffered from accidents.

44. Ms. FLÓREZ PRIDA (Cuba), replying to the question raised about racial discrimination and discrimination against women, said that although there were laws and regulations prohibiting such discrimination, certain people harboured racial, religious and gender prejudices. As a result of the Beijing Conference, the Government had organized a workshop to formulate guidelines for the various administrative entities with a view to improving the situation of women, and in particular to ensuring that they were fairly represented in decision-making and management positions.

45. With regard to international cooperation, Cuba had indeed benefited from the assistance and cooperation of international bodies, but it should be remembered that it had also given assistance to other countries, as, for instance, when it had, despite economic and financial constraints, provided totally free treatment and care to 14,000 children affected by the explosion at the Chernobyl nuclear facility. Cuba also planned to develop health tourism, by opening the medical and hospital facilities located in tourist zones to visitors from neighbouring and other countries.

46. The CHAIRPERSON thanked the Cuban delegation and said that the questions that had not been answered would be taken up at the next meeting.

The meeting rose at 6.05 p.m.