



Convention on the Rights of the Child

Distr.: General
9 June 2011

Original: English

Committee on the Rights of the Child Fifty-seventh session

Summary record of the 1617th meeting

Held at the Palais Wilson, Geneva, on Tuesday, 31 May 2011, at 3 p.m.

Chairperson: Mr. Zermatten

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The meeting was called to order at 3 p.m.

Consideration of reports of States parties (continued)

Third and fourth periodic reports of the Czech Republic (continued)
(CRC/C/CZE/3-4; CRC/C/CZE/Q/3-4 and CRC/C/CZE/Q/3-4/Add.1)

1. *At the invitation of the Chairperson, the delegation of the Czech Republic took places at the Committee table.*

2. **Mr. Kotrane** asked what steps had been taken to stop the detention of children, especially to ensure that they were not held in detention centres. He also asked for statistics on the number of street children in the Czech Republic. With regard to the juvenile justice system, he wished to know what efforts had been made to provide specialized training for juvenile court judges, what was meant by the term “supervised educational system” and what court of law tried cases involving children under the age of 15. He also wished to know what measures had been taken by the State party to act on the Committee’s previous concluding observations relating to the involvement of children in armed conflict. Had any steps been taken to formally ban that practice?

3. **Ms. Aidoo** asked whether the Czech Government had in place a comprehensive, holistic child development policy for children up to the age of 8 years, since it was vital to tackle children’s problems early. It was very worrying that children under 3 years of age were being placed in institutional care; it was essential to provide a family support system in order to eliminate the need to institutionalize those children. She wished to know the meaning of “neighbourhood babysitting” – was it merely a means of providing a place to leave children while the mothers went to work? She also wished to know what types of early childhood protection were provided for by the Childcare Services Act.

4. The State party’s report provided no information on vocational education. She would like to know if the vocational and other education programmes provided for under Act No. 561/2004 had actually been established. Such programmes had the virtue of helping alleviate youth unemployment further down the line.

5. It was important to incorporate human rights education in the school curriculum, starting in primary school, so that children could learn about tolerance and about their own rights, as well as the rights of all community members.

6. **Ms. Wijemanne** said that she had been struck by information in the State party’s report pointing to the high percentage of children who were hospitalized for mental disorders. She wished to know what kind of screening was available during pregnancy. Noting that the practice of exclusive breastfeeding had fallen sharply in the Czech Republic in favour of breast-milk substitutes, she asked if those substitutes were monitored and advertised. Exclusive breastfeeding should be promoted and supported in the interest of sound childhood development: there might be a link between the high percentage of children in institutional care and the lack of breastfeeding, as the bond between mother and child enabled by breastfeeding had not been formed. Another matter of concern was suicide among children. She would like to know if any research had been conducted in that area and why the incidence of suicide was so high among children. Were family dysfunction and the lack of someone the child could talk to possible causes? Given the number of accidents, injuries and poisoning involving children, it would be interesting to know whether there were preventive education programmes for children in the Czech Republic. Young people who followed life-skills courses might avoid the pitfalls of substance abuse; helplines providing counselling services were another option that the Government might like to consider. She would be interested to know whether there were mechanisms for reporting the sexual abuse of children and whether any programmes had been set up to teach children how to protect themselves from such abuse.

7. It was important to make a clear distinction between inclusive education and special education. Many children with minor disabilities performed better in mainstream schools, rather than in separate schools providing special education.
8. **Mr. Madi** said that he would like to know exactly how many children were killed or injured in road accidents in the Czech Republic. He wondered if the legal driving age was a contributory factor to the high number of accidents involving children. With regard to the Government's plan to reduce "high-risk situations", he asked what, in the Government's view, constituted a high-risk situation.
9. **The Chairperson** asked for clarification as to whether juvenile justice courts had been established in all regions of the Czech Republic. He wished to know whether special training was provided for juvenile court judges and, if so, what the training involved. He also wished to know whether there were any alternatives to custodial sentences for minors, such as mediation. What criteria were applied before a judgement was handed down and what was the maximum period of detention? Noting that the age of criminal responsibility in the Czech Republic had been set at 15, he asked what forms of procedural protection were available for younger children. Lastly, he wished to know what types of institution children were placed in.
10. **Ms. Baršová** (Czech Republic) said that the treatment of Roma was one of the most challenging human rights issues in the Czech Republic. Various measures had been taken to tackle racial prejudice and to make people aware of the Roma contribution to Czech culture, including a Government campaign to combat intolerance towards the Roma population and awards for people who made significant contributions to Roma integration. In addition, efforts were made to show the Roma in a positive light by supporting and promoting their culture, for example by holding a Roma music festival and setting up a museum dedicated to the Roma people. In addition, monuments to Roma who had fallen in the line of duty had been erected to heighten public awareness of their contribution to the country.
11. A report issued by the Public Defender of Rights and the school inspection authority had confirmed that the education of Roma children posed daunting challenges, as there were serious gaps in their education and many improvements were necessary.
12. **Ms. Herczog**, referring to efforts to collect data on the Roma, said that she would like to know the outcome of the data-collection seminar organized in October 2010 by the Ministry of Education, Youth and Sports.
13. **Ms. Baršová** (Czech Republic) said that gathering ethnic data was difficult under the current legislation. Self-identification was permitted solely for research purposes and questions concerning ethnicity in the 2011 census had been optional.
14. **Ms. Herczog** said that since only 1 out of 20 Roma self-reported their ethnicity, it was alarming that others should decide who was a Roma. The prevalence of Roma in eastern Europe raised questions about whether Roma groups could be targeted without stigmatizing them and on what basis decisions should be made regarding the establishment of a support system for them.
15. **Ms. Baršová** (Czech Republic) said that the Czech Government endeavoured to include all groups, including the Roma, in policy measures. In general, it was not necessary to identify Roma specifically, because the Government already backed organizations that provided support for Roma cultural programmes. Although it was difficult to collect ethnic data, in practice the lack of such data was not a major problem. Persons might readily indicate their Roma origin for research purposes, but might not be so willing in the case of a census.

16. Early marriage was a common problem in Roma communities worldwide, particularly in those from the Balkans. However, Roma from that area accounted for only 2 per cent of the Roma in the Czech Republic. Early marriage among Roma was therefore not a major problem in the Czech Republic, where its incidence was the same as in other population groups. The legal age for marriage in the Czech Republic was 18, but could be lowered to 16 for societal reasons. Marriages under the age of 16 were not valid.

17. **Ms. Kaprová** (Czech Republic) said that the education of Roma children was a Government priority. It was a sensitive, complex issue involving many factors, and it was important to remember that the Roma were not the only disadvantaged group in the Czech Republic. The Government had an education policy that focused on improving the academic performance of all students, including children with special needs, and raising the standard of teaching. The number of children in segregated educational settings would be drastically reduced in future. "School for All" was a concept enshrined in the Education Act of 2005 and the recently implemented curricular reform addressing the needs of all schoolchildren. New legislation due to enter into force in September 2011 would provide support for children at risk of school failure, including Roma. The new legislation stipulated that schools should meet the special needs of all children, including those with mild mental disabilities, by offering educational programmes adapted to their needs and by providing additional staff. The new law also called for parents' informed consent before their children were placed in a special educational institution and specified what information parents should be given to enable them to make an informed decision.

18. **Ms. Sandberg** (Country Rapporteur) said that it was important to provide counselling for parents before they took that decision, and asked how Roma children were tested for mental impairment.

19. **Ms. Kaprová** (Czech Republic) said that all youth counsellors were trained in the use of diagnostic tools and in how to follow diagnostic procedures in a culturally sensitive way. The Ministry of Education, Youth and Sports had issued recommendations on special care for children at risk of school failure, including the use of tools reflecting cultural diversity and respect for individuals from all types of background. It was expected that trained counsellors would help children from socially disadvantaged families succeed in school.

20. **Ms. Lee** said that it was unusual for a country to have so many children with speech defects and wished to know whether there was a link between such children and socially disadvantaged and Roma students.

21. **Ms. Kaprová** (Czech Republic) said that speech therapy was provided by the Ministry of Education, Youth and Sports for children with speech and language problems, including Roma children. Support for language skills should lead to better reading skills and thus help children overcome speech and language disorders.

22. **Ms. Herczog** said studies had shown that children under 5 years of age from deprived families had only one third of the vocabulary of other children of the same age. Highlighting the benefits of inclusive education, she sought further information on the impact of the Government's reform programme on the scholastic achievements of Roma and other deprived children, and asked if the programme covered 3-year-olds.

23. **Ms. Kaprová** (Czech Republic) said that legislation had been enacted to provide inclusive education for socially disadvantaged and Roma students and to support teacher training, with a focus on promoting diversity. She hoped that cooperation with non-governmental organizations who worked closely with the Roma would also help promote inclusive education.

24. **Ms. Aidoo** said it was clear that some children were at risk, and asked what measures were being taken to help the families of such children.

25. **Ms. Trubačová** (Czech Republic) said that the Government was aware of the high percentage of children in institutional care and that the number of children entering institutions was not decreasing. Efforts were centred on keeping children at home with their birth families, promoting high standards of foster care, reuniting children with their families, providing prompt support to families and creating a network of support services. In order to develop alternatives to residential care, however, it was necessary to reallocate resources. Many problems were the result of the fragmented care system in the Czech Republic, but there were signs that the situation was improving. On the basis of new research comparing the development of children in foster care with those who lived with their birth families, the Government had decided to prohibit the placement of children under the age of 3 in institutional care.

26. An amendment to the law on the social and legal protection of children would take effect in April 2012. It focused on the work of municipal social workers and set out measures to improve cooperation between the authorities and vulnerable families, give social workers more responsibility and improve standards of foster care, including by training prospective foster parents. However, the amended law did not address some issues, such as what the quality standards would be. The Government had prepared a new child protection programme in which NGOs would be invited to participate.

27. The aim of “neighbourhood babysitting” was to help mothers stay on the labour market. Childcare services in the Czech Republic were not very highly developed, though they were subsidized by the Government.

28. **The Chairperson** asked whether the Czech Government had the means to achieve its laudable objectives and, in particular, whether there were enough trained social workers in the country.

29. **Ms. Nores de García** asked if all the alternatives were exhausted before children were placed in an institution.

30. **Ms. Trubačová** (Czech Republic) said that the Ministry of Labour and Social Affairs would be working closely with the Ministry of Education, Youth and Sports to achieve the Government’s objectives, although funding was not yet fully in place. Social workers needed to develop additional skills, but attempts to train them had met with strong resistance. Research indicated that 35 per cent more social workers were needed.

31. The Office for International Legal Protection of Children was the authority responsible for international adoption in the Czech Republic. Some 40 children, mainly Roma, had been placed outside the country. In her view, everything should be done to put a child in foster care before resorting to intercountry adoption.

32. **Mr. Guráň** (Country Rapporteur) said that the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption set standards for creating a good family environment for all children, and there was a need to develop clear procedures that would guarantee such an environment.

33. **Ms. Herczog** asked for further information on the preparation of prospective adoptive parents and prospective adopted children, and on the practice of open adoption.

34. **Ms. Trubačová** (Czech Republic) said that some regions of the Czech Republic prepared prospective adoptive parents for the task ahead, but there was no systematic framework in place for doing so in the country as a whole. Nor were children under the age of 3 prepared for adoption. However, some non-governmental organizations, with

Government support, did provide some specialized services for prospective adoptive parents.

35. **Ms. Baršová** (Czech Republic) said that the State served as a mediator in most adoption cases. The most important criterion was the prospective parents' ability to offer the adopted child a good home. To adopt a child in the Czech Republic, a couple or a single person had to follow a special course before they were considered eligible for selection as adoptive parents.

36. **The Chairperson** asked whether the Czech Government had any special programmes aimed at protecting children from violence.

37. **Ms. Binková** (Czech Republic) said that the 2009 Criminal Code prohibited rape, sexual abuse, pimping, the sexual enticement of children, human trafficking, sexual coercion, prostitution, endangering a child's moral development, the production, dissemination and use of child pornography, and the use of children in the production of pornographic material. Under the Family Act, parents were responsible for their children's care, including their health and their physical, emotional, mental and moral development.

38. The Council of Europe programme "Building a Europe for and with children" had been incorporated into the 2009–2010 action plan for the implementation of the national strategy to prevent violence against children. The plan had included an awareness-raising campaign to stop violence against children, with a focus on positive parenting, as detailed in paragraphs 22 and 23 of the written replies to the list of issues. Another action plan on the prevention of domestic violence for 2010–2014 also emphasized the protection of children. Several telephone helplines had been set up to provide information on child safety and numerous websites offered advice for children, parents, teachers and other relevant professionals on sexual violence against children. There were currently about 160 NGOs working with children, and many of them focused on domestic violence and sexual abuse. Government strategies to address domestic violence had been altered to put the emphasis on the perpetrator rather than on the victim alone, and the police and judicial staff had been given relevant training. In addition, staff at the Ministry of the Interior had been assigned to implement the European Union Daphne III programme, which aimed to prevent and combat all forms of violence, especially of a physical, sexual or psychological nature, against children, young people and women. The Ministry supported NGOs' and other organizations' activities and various Europe-wide initiatives.

39. **The Chairperson** asked why the State party had not ratified the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse.

40. **Ms. Lišuchová** (Czech Republic) said that an issue with the liability of legal persons currently prevented the Government from ratifying that Convention. That apart, all the other provisions of the European Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse had already been incorporated into domestic legislation. It was hoped that the issue of liability would be resolved by the end of 2011 and that the Government would be in a position to ratify several additional international human rights instruments in 2012.

The meeting was suspended at 4.35 p.m. and resumed at 4.50 p.m.

41. **Ms. di Falco** (Czech Republic) said that, while corporal punishment was not prohibited in all areas of the country, it was not included on the list of disciplinary measures that could be used in schools. As explained in paragraph 133 of the periodic report, the Family Act prohibited actions that would harm children's dignity. Research had revealed that public opinion was broadly tolerant of corporal punishment, as detailed in paragraph 23 of the written replies. The Government was therefore planning to focus on raising public

awareness of the need to use alternatives to corporal punishment. Once that had been achieved, it would draft legislation to introduce a universal ban on the practice.

42. **Ms. Herczog** noted that, when corporal punishment had first been prohibited in Sweden in 1979, only 15 per cent of the public had supported the ban. Some 20 years later, about 85 per cent of the public supported it and only 4 per cent of children could imagine being hit as a form of discipline. It was therefore a question of political will; she suggested that the State party might find it useful to amend legislation and raise awareness at the same time.

43. **Ms. Truellová** (Czech Republic) said that her country had a long tradition of high-quality preventive health care for children, beginning with antenatal care. In 2009, the infant mortality rate had been 2.88 per 1,000 live births. All children aged up to 19 received primary health care from specialists, including immunizations and preventive care which involved assessments of the family and any threats the family might pose to the child. Children at risk, those with chronic diseases and those with disabilities were closely monitored by specialists. Health care for children was free of charge until they finished their education, up to a maximum age of 26. The best interests of the child underpinned all children's health-care provision, and treatment could be administered to children without their consent only in specific circumstances. New legislation being prepared by the Ministry of Health strengthened children's rights in the area of health and included explicit reference to the relevant provisions of the Convention.

44. **Ms. Brzková** (Czech Republic) said that her country had joined the International Baby Food Action Network in 1991, and the Ministry of Health actively supported exclusive breastfeeding for the first six months of the child's life. On leaving hospital, 90 per cent of newborns were exclusively breastfed and over 98 per cent were breastfed. After the age of 6 months, over 38 per cent were exclusively breastfed and over 17 per cent were breastfed. In future, data would be gathered on the number of babies that were exclusively breastfed up to the age of 12 months. The Ministry of Health promoted breastfeeding by running awareness campaigns and supporting the country's network of baby-friendly hospitals. A new nutrition standard currently being prepared for children of all ages included a reference to breast-milk substitutes.

45. **Ms. Al-Asmar** asked whether there was a code of marketing for breast-milk substitutes in the State party and, if so, whether its implementation was monitored. She also wished to know whether breast-milk substitutes could be advertised and whether they were distributed in hospitals. It would be useful to know how long maternity leave lasted in the State party.

46. **Ms. Trubačová** (Czech Republic) said that, after an initial period of six months' maternity leave, working mothers could take up to four years' leave, at their discretion. There was also an allowance for paternity leave.

47. **Ms. Truellová** (Czech Republic) said that the National Action Plan of Child Accident Prevention for 2007–2017 had been introduced to address the alarming rate of injuries among children. The rate among children aged between 1 and 14 had dropped significantly in recent years. Most injuries to children up to the age of 5 occurred in the home or the surrounding area. The Ministry of Health was drafting a bill making it a legal requirement to report all child injuries in order to establish a reliable national register of child injuries. The Government was aware of the need to strengthen interdisciplinary cooperation at local, regional and national level, as well as the need for international cooperation in that regard.

48. The high rate of suicide, particularly among young people aged between 15 and 19, was a particular concern. The Ministry of Health was currently analysing the results of several research projects and would design preventive mechanisms on that basis.

49. Pregnant women could request an abortion until the twelfth week of pregnancy; such requests could be denied only on the grounds of a serious threat to the woman's life. Abortion was possible for health reasons up to the twenty-fourth week of pregnancy. The number of abortions had fallen significantly since the 1990s, owing to the fact that contraception had become widely available.

50. **Ms. Aidoo** asked whether the State party provided comprehensive education on reproductive health, especially for teenage girls and boys. If so, it would be useful to learn whether that information was imparted in schools only, or whether efforts were made to raise awareness about reproductive health outside a formal educational setting.

51. **Ms. Herczog** asked whether contraception was available free of charge. She also requested additional information on the number of babies that were abandoned in so-called "baby boxes", in which people could leave babies at hospitals on an anonymous basis. She would welcome the delegation's comments on the use of such boxes, since that practice appeared to violate the provisions of the Convention.

52. **Ms. Truellová** (Czech Republic) said that the contraceptive pill was available to girls with a doctor's prescription only, owing to the need to monitor the health of patients who took the pill. The pill was not available free of charge.

53. The first baby box had been installed in 2005. The Ministry of Health and the Ministry of Labour and Social Affairs had conducted research into the fate of babies who had been placed in the boxes between 2005 and 2010. Some 34 baby boxes were now available and about 36 babies had been abandoned in them over the five-year period. In all but one case, the abandoned babies had been in good health and were now being brought up by adoptive families. Given that those babies' lives had been saved by the baby box scheme, it would appear to fulfil a significant need. However, some infants aged up to 12 months had been placed in the boxes, which was a cause of significant concern. The Government was currently looking into examples of best practice in Slovenia and would take legislative steps to ensure that baby boxes were available only for newborn babies, since other forms of assistance were available to families with infants.

54. **Ms. Binková** (Czech Republic) said that, in January 2011, the maximum period of detention for unaccompanied minors and families with children who were seeking asylum had been reduced from 180 to 90 days. Unaccompanied minors were appointed legal guardians to assist them with all administrative proceedings. Steps were taken to ensure that unaccompanied minors who were sent back to their countries of origin would be given appropriate care on arrival. Several legislative amendments had been introduced during the reporting period to facilitate family reunification for asylum-seekers and give those in financial need the right to claim welfare benefits. Families seeking asylum who were granted subsidiary protection could stay in "integration asylum centres" for up to three months. In addition, the Ministry of Education, Youth and Sports had set up a body to ensure the enjoyment of the educational, legal and social rights of unaccompanied foreign minors between 3 and 18 years of age. Measures were also taken to assist the integration of foreign residents who did not require international protection, including by providing welfare benefits for vulnerable groups such as children, young people and women and courses in the Czech language.

55. **Ms. Lišuchová** (Czech Republic) said that, since the minimum age of criminal liability was 15, juvenile delinquents under that age were not liable to regular criminal proceedings. Courts could impose special measures on juveniles under the age of 15 who committed serious acts that were otherwise considered crimes.

56. **The Chairperson** asked what type of court conducted proceedings for juvenile delinquents who committed such acts.

57. **Ms. Lišuchová** (Czech Republic) said that such cases went before criminal courts that specialized in juvenile offences. They handed down protective measures such as supervision by a probation officer, counselling or protective care, as explained in paragraphs 39 and 40 of the written replies.

58. Judges, prosecutors and other judicial staff were given regular training on many specific issues, including domestic violence and how to interview children who had been victims or witnesses of crimes. Special techniques were used when questioning children who had been victims or witnesses of crimes; for example, puppets were used to help young children.

59. **The Chairperson** asked whether there were specialized courts for juvenile offenders throughout the country.

60. **Ms. Lišuchová** (Czech Republic) said that all district courts had units specialized in cases involving juveniles. District court decisions could be appealed before regional courts, and further appeals could be brought before the Supreme Court. Further judicial review was available at the Constitutional Court and the European Court of Human Rights.

61. **The Chairperson** asked where juveniles over the age of 15 who were deprived of their liberty were detained.

62. **Ms. Lišuchová** (Czech Republic) said that juvenile offenders were detained either in separate prisons or in separate units of regular prisons where they had no contact with adult offenders.

63. **The Chairperson** asked whether there was a minimum age at which minors could appear before a court.

64. **Ms. Lišuchová** (Czech Republic) said that the minimum age was 12 years.

65. **Mr. Guráň** welcomed the updated information the State party had provided. However, the Committee remained concerned at the lack of coordination of efforts to implement the provisions of the Convention and the apparent lack of a clear national action plan for children based on the Convention. It appeared that there was also no independent monitoring of children's rights, with no entity in charge of evaluating children's enjoyment of their rights and no complaints mechanism for children. While there was strong political will in the State party to decentralize social and legal protection services for children to the regional and local levels, financial and human resources at those levels remained inadequate. There was a clear need for more and better training for social workers, teachers and all persons working with children in order to ensure that the spirit of the Convention was translated into action in children's everyday lives.

66. **Ms. Sandberg** said that, while the State party had good plans, programmes and draft legislation to improve Roma children's education, the situation of disabled children in institutions and the care system in general, it was unclear whether they would all be put into practice and ultimately improve children's lives. She recommended that the State party set specific annual targets in order to assess results during the implementation phase of its plans. Given the lack of a coordinating entity for children's rights, she suggested appointing an existing body such as the Ministry of Labour and Social Affairs to oversee the disparate sectoral efforts that were currently being made.

67. **Ms. Šimůnková** (Czech Republic) said that, as the Government Commissioner for Human Rights, children's rights were her priority and she was aware of the gaps in the country's implementation of the Convention. She welcomed the Committee's comments and recommendations and looked forward to receiving its concluding observations.

The meeting rose at 6 p.m.