



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

Thirty-ninth session

SUMMARY RECORD OF THE 1045th MEETING

Held at the Palais Wilson, Geneva,  
on Monday, 30 May 2005, at 3 p.m.

Chairperson: Mr. DOEK

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The meeting was called to order at 3.15 p.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 5) (continued)

Third periodic report of Costa Rica (continued) (CRC/C/125/Add.4; HRI/CORE/1/Add.104; CRC/C/Q/CRI/3; CRC/C/RESP/81)

1. At the invitation of the Chairperson, Ms. Campos Chaves, Ms. Gil Fernández, Ms. Méndez Briceño, Ms. Meza Lazarus, Mr. Solano and Mr. Varela Quirós (Costa Rica) took places at the Committee table.
2. Mr. KOTRANE asked the delegation to comment on measures that the Government had taken to prevent child abuse and neglect. He wished to know whether the reporting of suspected abuse was mandatory and whether doctors were allowed to disclose confidential information in such cases. He enquired whether social services had statutory power to intervene in child abuse cases and whether all children were entitled to social security. The delegation should indicate whether the police and justice officials were trained in child rights. He wished to know the maximum period that a child could be held in custody.
3. Mr. POLLAR requested additional information on special protection measures, particularly with regard to migrant children and unaccompanied minors. He asked whether the Convention on the Rights of the Child had ever been invoked in court proceedings and whether Costa Rican law provided a legal right to a remedy for violations of child rights.
4. Mr. ZERMATTEN said that the delegation should describe the purpose and function of the State Distance University. He requested additional information on shelters and children's villages and on rural-urban disparities in the administration of juvenile justice. He wished to know the current status of the bill on the execution of criminal sanctions.
5. Mr. PARFITT wondered why so few juvenile offenders were held in detention. He asked whether prison officials received training in the Convention.
6. The CHAIRPERSON requested additional information on the role of the National Adoption Council and the seven regional councils and on private adoption.
7. Mr. VARELA QUIRÓS (Costa Rica) said that the media was actively encouraged to disseminate information of social and cultural benefit to children and adolescents. Many newspapers published weekly supplements containing information of interest to children. While legislative measures had been taken to prevent the dissemination of materials harmful to minors, the Government believed that the curtailment of media coverage of crimes involving minors would violate democratic principles.
8. Corruption was a criminal offence. Since corruption had a strong transnational component, international cooperation was crucial to the implementation of effective anti-corruption policies. He could not provide information on the extent to which corruption had hampered the implementation of children's rights.

9. Paedophilia among priests was uncommon. All persons guilty of the sexual abuse of children were subject to severe punishment, including deprivation of liberty. The sexual exploitation of children through the Internet was prohibited and punishable by law.
10. Ratification of the United States-Central American Free Trade Agreement was currently being debated by all sectors of society. Costa Rica would ratify the Agreement only if it would result in social benefits.
11. Ms. MEZA LAZARUS (Costa Rica) said that the Children and Adolescents Code was the main legal instrument pertaining to children; additional legislation had been adopted to address specific child-related issues. The Code stipulated that all institutions had the obligation to promote and protect children's rights, and that all professionals working with children must report suspected abuse. All legislation pertaining to children was consistent with the guiding principles contained in the Children and Adolescents Code.
12. The Responsible Paternity Act had been amended to regulate the procedure for determining the paternity of children born out of wedlock.
13. The CHAIRPERSON asked whether there were budget allocations for legislation with financial implications. The delegation should explain how children were informed of their rights and indicate whether the Government intended to integrate all legislation pertaining to children in a single code.
14. Ms. GIL FERNÁNDEZ (Costa Rica) said that, in most cases, the resources needed to implement legislation were allocated when such legislation was adopted. Otherwise, resources were allocated by the institution responsible for implementing the new legislation.
15. The Code on Children and Adolescents was a comprehensive body of child rights legislation; the formulation of an additional code was not feasible. Other provisions pertinent to children were contained in the Family Code and the Juvenile Justice Act. The Government was currently considering amendments to existing legislation in order to ensure conformity with the Convention.
16. Ms. MEZA LAZARUS (Costa Rica) said that all civil servants working with children received training in child rights legislation. The Government conducted awareness campaigns on new legislation that were specifically designed for children. Child-related issues were incorporated in university curricula, and materials concerning child rights were distributed to schools. The Government was currently compiling legislation on children with a view to creating a single reference document for public officials.
17. The Juvenile Justice Act provided for the imposition of sanctions commensurate with the offender's age. Children under 12 were not criminally liable; the National Children's Trust cooperated with families, care institutions and NGOs in the rehabilitation of offenders in that age group. NGOs conducted special programmes for children who used drugs and child victims of abuse. Sanctions imposed on children between the ages of 12 and 15 focused on rehabilitation and education; imprisonment was reserved for the most serious crimes. Convicted juvenile offenders between the ages of 15 and 18 were held in the Zurquí Juvenile Training Centre.

18. The CHAIRPERSON asked whether there was a probation service for juvenile offenders.

19. Ms. GIL FERNÁNDEZ (Costa Rica) said that there was one detention centre for minor offenders and one for young offenders between the ages of 18 and 20. Minors were not sentenced to deprivation of liberty unless they had committed a particularly serious crime. Most young offenders were subject to legal measures that entailed re-education and social reintegration. Young sex offenders were held in the Zurquí Juvenile Training Centre, and minors who had committed murder or other serious offences were held in other penal institutions. The Zurquí Juvenile Training Centre provided a specialized education service for detainees in order to guarantee their right to education.

20. Ms. MEZA LAZARUS (Costa Rica) said that minors were never tried in absentia, and the duration of criminal proceedings involving juveniles could not exceed six months.

21. Amendments to legislation on adoption, which would provide for the monitoring of private adoption, were currently in their second reading in the Legislative Assembly. Priority was given to domestic adoption rather than intercountry adoption, particularly when adoption involved children under the age of 4. All adoption procedures were carried out in accordance with the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption. National and international adoptions were carefully monitored. A tribunal for children and adolescents handled cases relating to direct adoption. Further efforts would be made to adopt legislation that ensured respect for children's rights and needs in adoption cases.

22. Ms. GIL FERNÁNDEZ (Costa Rica) said that the amended adoption legislation would help to prevent the use of adoption for trafficking in children. The case involving Guatemalan children who had been adopted for international trafficking demonstrated the need for increased security in adoption procedures.

23. Ms. MEZA LAZARUS (Costa Rica) said that, although the figures on corporal punishment seemed high, they did not all relate to serious cases. Costa Rica had a patriarchal society, and disciplining children by smacking them was not considered corporal punishment. The Government would make efforts to raise public awareness of the rights of the child and to change attitudes towards corporal punishment.

24. The Government had collected information on social issues that needed to be addressed in the education system, particularly issues involving migrant children and other vulnerable groups. Efforts to reform the education system included the increased teaching of second languages, training in information technology, and instruction in indigenous languages. Measures were being taken to train and employ local teaching staff in indigenous and Afro-Caribbean areas. The number of primary schools and primary school teachers was being increased, and a system of "leader" schools had been established. Secondary education had been extended and the number of secondary schools had increased, particularly in indigenous areas. Computer facilities had been improved in schools with only one teacher. In order to encourage dropouts to return to school, there were open classes for children learning outside their age group. Steps were being taken to increase flexible education to allow young people to combine study and work, particularly in rural areas. Illiteracy rates had fallen considerably as a result of measures taken in areas with large indigenous and migrant populations.

25. The CHAIRPERSON asked why less than one third of children in Costa Rica completed secondary education and why social disparity was not decreasing. He asked whether poor families received financial support to cover the cost of schoolbooks and transport.
26. Ms. GIL FERNÁNDEZ (Costa Rica) said that the rural, indigenous and marginal urban populations tended to be the most vulnerable to poverty and had the highest school dropout rates. A national programme had been launched to reduce disparity in education. Disadvantaged children received allowances for their transport to and from school and for school lunches; some school canteens were entirely subsidized by the State. State-funded projects had been established to encourage teenage mothers to return to school. The Government was aware that further measures must be taken to distribute wealth, and the Social Council was currently investigating means of generating jobs and increasing employment.
27. Ms. MEZA LAZARUS (Costa Rica) said that the New Life Plan focused on the most disadvantaged sectors of society and included measures to provide financial assistance for housing and education. Schooling was free, and allowances were allocated to families on the basis of their financial circumstances. Financial benefits, such as the so-called “school salary”, were provided to encourage parents to send their children to school. Transport vouchers enabled children living in outlying areas to attend school. Costa Rica’s increasing population and increasing immigration had hampered efforts to combat disparity.
28. The National Council on Rehabilitation and Special Education was training additional teachers to work with children with disabilities. Curricula had been adapted to meet the needs of children with learning difficulties, and measures were being taken to integrate children with disabilities into mainstream schools.
29. The CHAIRPERSON asked what was being done to eliminate discrimination against children with disabilities.
30. Ms. MEZA LAZARUS (Costa Rica) said that there were ongoing campaigns to ensure the maximum integration of children with disabilities into mainstream education. Classes had been adapted to their needs, and a comprehensive approach was being used to deal with the stigmatization of disabled children. A commission had been established to disseminate legislation on the rights of children with disabilities.
31. The CHAIRPERSON said that the Committee had been informed that some teachers had been dissatisfied with the adaptation of school curricula. He wished to know if that was true and, if so, what measures were being taken to address the situation.
32. Ms. MEZA LAZARUS (Costa Rica) said that the adaptation of school curricula was part of the re-socialization process. Although progress had been made, teachers required further training and class sizes had to be reduced. Efforts were made to find care providers in the local community for children who had been removed from their families for reasons of physical or psychological abuse. If an appropriate foster family could not be found, such children were placed in shelters. Private care programmes also existed, and the Government was cooperating with national organizations to develop special types of care for children according to their age, sex and specific needs.

33. Mr. KRAPPMAN requested further information on vocational training and measures to facilitate young people's entry into the workforce.

34. Ms. MEZA LAZARUS said that there were vocational training programmes for children over the age of 15. Training and apprenticeships had been organized, and distance-learning programmes were available to young people in remote areas who wished to continue their education.

35. Ms. GIL FERNÁNDEZ (Costa Rica) said that the National Apprenticeship Institute helped to address the issue of social disparity, since it provided technical training and preparation for entering the job market. Training courses were available to young persons irrespective of their educational background. Courses were provided in information technology, mechanics, languages and various other technical subjects. In order to provide a wider range of courses, an agreement had recently been signed with the Monterrey Institute of Technology.

36. Debt-servicing in 2003 had accounted for 40 per cent of Costa Rica's gross domestic product and had contributed to the shortage of resources for social spending.

37. Ms. CAMPOS CHAVES (Costa Rica) said that, since 1995, primary health-care coverage had more than doubled and currently included 90 per cent of the population. Nearly 95 per cent of deliveries took place in hospitals; as a result, the infant and maternal mortality rate had declined.

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

38. Ms. ORTIZ asked whether the reform of adoption legislation would end the practice of direct adoptions. She wished to know whether children were placed in institutional care pursuant to administrative or court-ordered procedures. The delegation should indicate whether such placement was governed by the Family Code or the Children and Adolescents Code, and it should specify the criteria used to determine the length of time that a child remained in an institution. She requested information on the application of non-custodial measures for juvenile offenders.

39. Mr. PARFITT wished to know what services were available to drug addicts and alcoholics in juvenile detention centres and interim facilities.

40. Ms. GIL FERNÁNDEZ (Costa Rica) said that amendments to the Family Code, which were currently before the Legislative Assembly, would make the National Children's Trust the central authority for both domestic and intercountry adoptions.

41. Ms. CAMPOS CHAVES (Costa Rica) said that the National Children's Trust worked only with accredited agencies and with countries that had ratified the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption. The proposed amendments to the Family Code would enable the National Children's Trust to assume responsibility for all intercountry adoptions, particularly direct adoptions.

42. Alternative care was provided for children by placing them with relatives or foster families, or in private institutions or shelters. The applicable protection measures were stipulated

in the Children and Adolescents Code. The National Children's Trust took an administrative decision regarding the type of measure to be applied and subsidized part of the related costs. Children were placed in institutional care for a maximum of six months, following which a decision was taken regarding their future.

43. Ms. GIL FERNÁNDEZ (Costa Rica) said that the various treatment facilities for young drug addicts and alcoholics in conflict with the law provided only physical rehabilitation. The National Children's Trust was in the process of setting up more comprehensive rehabilitation centres for such young people in San José and other provinces.

44. Mr. PARFITT asked whether juvenile offenders would be placed in rehabilitation centres by court order.

45. Ms. GIL FERNÁNDEZ (Costa Rica) said the proposed rehabilitation centres were intended for minors whose offences warranted non-custodial sentences. Their objective was primarily preventive: they would work with the juvenile's family, treat addiction and provide education. Juvenile offenders would be placed in the centres by court order.

46. Ms. MÉNDEZ BRICEÑO (Costa Rica) said that health-care reforms, which had doubled primary health-care coverage, included the establishment of comprehensive health-care teams throughout Costa Rica. Such teams consisted of a doctor, a nurse and a primary health-care technician for every 5,000 persons. The reforms had made general health services more accessible to the population by increasing the number of health centres and improving technical standards. Pursuant to the reforms, the Ministry of Health would henceforth regulate public and private health services and monitor primary health care.

47. The Government was currently negotiating with private enterprises to ensure that widely consumed foods were fortified with essential vitamins and minerals. An evaluation would be conducted in 2006 to determine the impact of those measures. Programmes to fluoridate drinking water in schools had yielded good results. Nutritional health evaluations were conducted by teachers and comprehensive health teams; children with nutritional disorders were referred to the appropriate health centre.

48. The development of a multidisciplinary masters programme on adolescence had encouraged cooperation between professionals in the field and had focused greater attention on issues relating to adolescents. The subject of childhood and adolescence was included in the curricula of all health professions.

49. Although the percentage of teenage pregnancies had decreased, the Government considered the issue to be an ongoing challenge. Committees had been set up to study individual cases of teenage pregnancy, and specialized health services in hospitals provided prenatal and post-natal services to teenagers.

50. Efforts had been made to address rural and urban discrepancies in health care by increasing the number of health centres and promoting the participation of the local population in decision-making regarding health. Legislation had established a commission in the Ministry of Health to deal with issues relating to breastfeeding and breast-milk substitutes, and to accredit hospitals that promoted breastfeeding.

51. There were no new cases of HIV/AIDS among children under 15. A test for HIV/AIDS had been included in pregnancy monitoring, and its use was expected to increase.
52. Ms. LEE wished to know whether Costa Rica had adopted the International Code of Marketing of Breast-milk Substitutes.
53. Ms. ALUOCH asked whether the Government provided education and counselling services with a view to preventing and reducing teenage pregnancies.
54. Ms. MÉNDEZ BRICEÑO (Costa Rica) said that a council for adolescent mothers had been set up to coordinate all matters relating to teenage pregnancies. Costa Rica had adopted the International Code of Breast-milk Substitutes and was making efforts to increase the number of months that mothers breastfed.
55. Ms. GIL FERNÁNDEZ (Costa Rica) said that the situation of teenage mothers was of concern to society as a whole. In Costa Rica's two largest hospitals, a separate maternity ward provided specialized care for teenage mothers. Allowances were provided to help teenage mothers to continue their education. A project had been launched to promote the reintegration of teenage mothers into the education system.
56. Ms. SMITH asked whether steps had been taken to facilitate access to contraceptives.
57. Ms. MÉNDEZ BRICEÑO (Costa Rica) said that, for cultural reasons, some health workers were not willing to dispense contraceptives. Efforts were being made to raise awareness of the importance of contraceptives in preventing teenage pregnancies.
58. Ms. GIL FERNÁNDEZ (Costa Rica) said that a number of measures had been taken to protect children under six. The Ministry of Health had set up infant centres, which provided health care for children, particularly children from poor families. In order to improve the nutrition of children from poor families, several programmes had been launched to distribute essential food products. Special multidisciplinary teams ensured that children in day-care centres received adequate care and protection. Prenatal screening had been extended to 95 per cent of pregnant mothers and covered a wide range of disorders. The National Children's Hospital provided treatment and follow-up services and offered genetic counselling for parents.
59. Ms. MÉNDEZ BRICEÑO (Costa Rica) said that special diets and medicine were prescribed for infants at risk of mental retardation or other disorders. Pregnant mothers received folic acid and other nutritional supplements. All children had access to free health-care services.
60. Ms. LEE asked whether all pregnant women were given folic acid and whether labels warning of the risk of mental retardation were placed on products with a high level of phenylalanine.
61. Ms. MÉNDEZ BRICEÑO (Costa Rica) said that folic acid was given to all women over the age of 15. The Ministry of Health recorded and monitored all substances that were brought into Costa Rica, and took the necessary measures to protect the population. She did not have any information on the labelling of products containing phenylalanine; that information would be sent to the Committee at a later date.

62. Mr. SIDDIQUI expressed concern that there would be discrepancies between the new statistical information system for children and the national system of statistics.
63. Ms. GIL FERNÁNDEZ (Costa Rica) said that Costa Rica had many information systems, including the national information system under the Ministry of Planning, the information system on the rights of children and adolescents at the University of Costa Rica, the information system on children's rights in the Office of the Ombudsman and the system for identifying and assisting children from poor families. The Government needed to develop an integrated information system and would welcome international assistance in that regard.
64. Costa Rica had taken a number of measures to combat the commercial sexual exploitation of children. The National Commission to Combat the Commercial Sexual Exploitation of Children and Adolescents in Costa Rica, which reported to the National Council on Children and Adolescents, included representatives from NGOs, international organizations and civil society. The International Labour Organization had introduced important programmes to combat the sexual exploitation of children and to protect working children. The National Plan against the Commercial Sexual Exploitation of Children and Adolescents was being implemented. Members of the police force had been trained to deal with issues relating to children's rights and to provide assistance to victims. A special unit had been set up to prevent the exploitation of children through the Internet, which was linked to the International Criminal Police Organization (Interpol) and the Federal Bureau of Investigation.
65. Ms. ORTIZ, Alternate Country Rapporteur, welcomed the wide range of activities that were being conducted in Costa Rica to protect children's rights. Additional efforts would be needed to prevent the exploitation of working children, provide assistance to street children and children of migrants and refugees, facilitate access to health and education services for adolescents, and combat the commercial sexual exploitation of children.

The meeting rose at 6 p.m.