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SUMMARY RECORD OF THE 462nd MEETING

Held at the Palais des Nations, Geneva,
on Monday, 25 May 1998, at 3 p.m.

Chairperson: Mr. RABAH

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

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 4) (continued)

Initial report of Fiji (continued) (CRC/C/28/Add.7; HRI/CORE/1/Add.76; CRC/C/Q/FIJI/1)

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

Civil rights and freedoms (questions 16 to 18 of the list of issues (CRC/C/Q/FIJI/1))

2. Mrs. KARP, welcoming the proposed prohibition of corporal punishment, considered that it called for a change in attitudes, especially within the family. In that regard, the Government should pass legislation condemning such behaviour, which conflicted with respect for the dignity of the child, and conduct publicity campaigns to disseminate the idea of alternative disciplinary measures.

3. Concerned that information on HIV-infected children had been leaked, she inquired what measures were envisaged to ensure confidentiality of personal information kept in school records, particularly in the light of computerization plans.

4. Mrs. PALME expressed alarm that children were classified on all official documents by their racial identity, despite the importance of ethnicity for ownership of native land and other benefits. She inquired whether there were plans to abolish such classification.

5. Ms. SHAFIQ (Fiji) said there were currently no measures for protecting personal information in school records, nor were there any immediate plans to abolish racial classification in official documents, although she agreed that the question deserved consideration.

6. Mr. FULCI considered the report to be vague on the subject of birth registration. It mentioned provisions for registration only for native Fijians, but none for other groups. Registration was important for a number of reasons: it was the only form of official recognition of a child's existence and its legal status, and facilitated identification in emergencies, as well as enabling children to enjoy their other rights. It was vital for family planning and statistics on infant mortality, a key indicator for effective survival strategies. As had been stated in a Human Rights Committee report, the main purpose of the obligation of registration after birth was to minimize the risk of abduction and sale of, or traffic in, children, or other treatment incompatible with the enjoyment of the rights enshrined in the Convention. He inquired whether Fijian law contained a well-publicized obligation of immediate birth registration, whether such registration was free, and what mechanism existed to enforce immediate registration of births, especially those on remote islands. Was it facilitated in terms of access and language comprehension? He also wished to know what steps were taken by the State in the event that parents failed to comply.

7. Mrs. PALME, returning to the subject of corporal punishment, inquired whether thought had been given to periodic surveys to determine parents' reaction to the use of other forms of discipline. Such surveys would raise awareness, generate discussion among parents and encourage them to conform.

8. Ms. SHAFIQ (Fiji), replying to the question concerning registration, said that it was free. Internal hospital policy on the main island of Fiji required the computerized registration of births, which were subsequently notified to the Registrar General. On the remoter islands, registration was performed manually by nurses and the information transmitted to the main hospital, which then reported it to Registrar General. Parents had 12 months in which to register. Although not monitored, the system was relatively successful. Indigenous births were similarly registered, but had to be entered in the Vola ni Kawa Bula, the genealogical register of Fijian owners of native land.

9. While Fiji had not yet set up a follow-up mechanism to monitor the discontinuance of corporal punishment, it planned to do so, in compliance with the recommendation made in a report on the subject.

10. Mr. KOLOSOV, referring to paragraph 77 of the report concerning protection of cultural identity, wished to know whether mere membership of a particular geographical, ethnic or cultural group constituted a disadvantage *per se*.

11. Ms. SHAFIQ (Fiji) pointed out that certain disadvantages went hand in hand with membership of some minority groups in any society. They did not pose a major problem in Fiji, but where they existed, the groups' identity was protected under the Constitution.

Family environment and alternative care (questions 19 to 21 of the list of issues)

12. Mr. FULCI noted that the report announced the existence of the Adoption of Infants Act and the Intercountry Protocol between Fiji and other South Pacific countries, but did not say whether they conformed to the provisions of the Convention. Since adoption was still the ideal solution for orphans and was crucial to the best interests of the child, he also took issue with the vagueness of the report, which stated that some adoptions were illegal, slipping through the net of private adoptions organized through the Department of Social Welfare, which only acted on behalf of abandoned children or at the mother's request, and that the courts did not always observe the adoption laws. However, it provided no details about those deficiencies. He therefore requested more specific information on that issue.

13. Mrs. KARP endorsed Mr. Fulci's question on the conformity of adoption customs with article 20 of the Convention. Noting that adoptions were organized through the Department of Social Welfare or the courts, she wished to know what resources were available to the courts for verifying the suitability of prospective adoptive parents, and how adoptions within the country were organized to comply with the specific adoption conditions set

forth in the Convention. Did they fulfil the provisions of the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption?

14. She sought confirmation that the country had already formulated policies for addressing domestic violence, but lacked the budgetary and human resources to provide appropriate solutions, such as shelters for, and rehabilitation of, victims. She also wished to know the findings of the expert study conducted by the Office of the Attorney-General. She asked what steps were being taken to tackle the problem of lack of resources - and even legislation - for periodic review of children in institutions.

15. Mr. FULCI asked whether Fiji had considered appointing an ombudsman or similar official for protecting and directly communicating with children who suffered abuse.

16. Mrs. KARP observed that children could be severely affected by the courts' failure to enforce maintenance orders. Given the difficulty of mothers in pursuing defaulting spouses, she inquired whether there was a programme - already under way or planned - whereby the national insurance scheme paid the maintenance and the offenders were later obliged to reimburse the State.

17. Ms. SHAFIQ (Fiji) agreed with Mr. Fulci that adoption had not been adequately covered in the report, pointing out that the Adoption of Infants Act was archaic, required extensive amendment and was difficult to enforce, failing as it did to cover a number of situations, such as illegal and overseas adoptions. Given the many adoptions that occurred each year, the Act was undergoing a much-needed review, in conjunction with the current family law reform. One key measure for halting illegal adoption was the Department of Social Welfare's proposals for more stringent legislation governing homes and institutions. All intercountry adoption, which was confined to South Pacific countries, was handled by the Department of Social Welfare. Bilateral adoption agreements with Australia and New Zealand had recently been concluded and awaited the approval of her Government.

18. Replying to the question on conformity with the 1993 Hague Convention, she said that the matter had been examined in a paper produced by the Legal Subcommission of the Coordinating Committee on Children and certain recommendations had been made.

19. On the question of domestic violence, the non-governmental organization (NGO) Women's Crisis Centre had made recommendations to the Law Reform Commission for addressing violence against women and children and for protection measures not currently covered by legislation. While the Penal Code covered assault in general, it made no specific provision for assault on women and children. The most common remedies were counselling and reconciliation, although the latter was considered to be no more than a mitigating factor at the sentencing stage in court. Under the current system, the Department of Social Welfare only intervened when apprised of such cases. She therefore welcomed the suggestion to appoint an ombudsman and thereby afford children access to a specific appeal body.

20. Replying to the question on the enforcement of maintenance payments, she said that Fiji family law faced an enormous problem in that area. Magistrates hesitated to imprison defaulters on the grounds that their loss of earnings could only exacerbate their financial problems.

21. The CHAIRPERSON requested more detailed information about the reasons for the increase in child welfare cases between 1991 and 1994.

22. Ms. SHAFIQ (Fiji) explained that the statistics quoted by the Chairperson pertained to child protection cases covered by the Juveniles Act, in which the Social Welfare Department had intervened. The figures relating to adoption had gone up and more instances of child abuse had come to light owing to a heightened public awareness of the issue and a greater readiness to report such cases.

23. Mr. FULCI asked what action had been taken on the Fijian Prime Minister's proposal that the courts be given wider powers to prosecute paedophiles and deal with sex crimes involving children. Had the formal agreement with Australia to combat the production and circulation of pornographic material featuring children achieved any results? In view of the growth of drug abuse and alcohol consumption even among primary schoolchildren and the lack of any government policy or budgetary appropriation to prevent such addiction, he asked what measures had been taken to implement article 33 of the Convention and whether any surveys had been conducted on drug and alcohol abuse among Fijian children. Were any public campaigns being run to discourage the use of drugs and alcohol by the young? Were there any treatment and rehabilitation services specially tailored to children's needs in that respect?

24. Mrs. PALME asked whether there was a system for monitoring children placed in extended families or institutional care.

25. Ms. SHAFIQ (Fiji) replied that social welfare officers paid weekly visits to children placed in a family or institution. If the children voiced a complaint, a report was submitted to the Director of the Social Welfare Department.

26. Mrs. PALME asked if teachers, social workers and the general public had a duty to report child abuse.

27. Ms. SHAFIQ (Fiji) answered that the reporting of abuse was not specifically covered by any legal provision, but the Social Welfare Department had urged teachers to be vigilant and report any suspicious behaviour patterns in children.

28. Mrs. KARP said she was doubtful whether the information supplied about the periodic review of children in placement was really up to date. Was it true that children placed in institutions were subject to periodic review, while children placed with relatives were not? Were there any plans to remedy that situation? As NGOs appeared to be chiefly responsible for rehabilitation programmes for drug addicts, she wished to know how work was divided between

NGOs and the Government. Did the Government rely on NGOs in that sphere? Did the NGOs receive any government support? Were there any parallel government services?

29. Ms. BOLADUADUA (Fiji) acknowledged that drug abuse was on the increase in her country. The National Council on Substance Abuse, recently set up by the Minister of Education, was directing its main efforts at schoolchildren. Similarly, the National Council for Health Promotion was endeavouring to make children conscious of the risks stemming from tobacco and alcohol consumption. The Government worked in partnership with NGOs and awarded grants to organizations with expertise in particular fields.

30. Ms. SHAFIQ (Fiji) said that the information she had provided on the monitoring of placement was absolutely up to date. She chaired the inter-agency subcommittee whose members were drawn from numerous authorities and organizations; that enabled it to carry out effective case conferencing. At the subcommittee's previous meeting, she had been assured that the Child Welfare Unit was indeed supervising placement. Pornography was dealt with under the Penal Code, the provisions of which did not, however, specifically refer to the sexual exploitation of children. New legislation on that subject was therefore required, especially in the light of the spread of paedophile material on the Internet. The Governments of Fiji and Australia had signed a memorandum of understanding on 18 March 1998 which covered, *inter alia*, the exchange of information on trends in child sexual abuse and research into that topic. Furthermore, Fiji had sought the advice of an Australian expert on pornography on the Internet, who had assisted the Fijian authorities with the prosecution of an Australian national for the sale of indecent pictures of Fijian children.

31. The CHAIRPERSON sought further clarification concerning the multi-agency network referred to in the first paragraph on page 11 of the written replies.

32. Ms. BOLADUADUA (Fiji) explained that it was her country's policy to investigate children's injuries. If doctors suspected that abuse had occurred, they filed a report with the Paediatric Registrar, who forwarded the report to the police.

33. Ms. SHAFIQ (Fiji) added that three weeks earlier the subcommittee set up to promote inter-agency conferencing had produced guidelines on child abuse cases, which had been circulated to various departments and NGOs for comment. Their observations would be passed on to the Coordinating Committee on Children for further action. Workshops funded by USAID had been run in Fiji on the subject of inter-agency conferencing in child abuse cases.

34. Mr. KOLOSOV asked if the Fijian Government required technical assistance in the fields of social welfare for children, and counselling and mediation facilities for families.

35. Ms. BOLADUADUA (Fiji) said that her country would welcome help in that area.

Basic health and welfare (questions 22 and 23 of the list of issues)

36. Mrs. PALME asked whether the Fijian authorities realized that disabled children should be integrated in ordinary local schools if they were to enjoy equal opportunities. She inquired if Fiji had introduced measures to contend with the HIV/AIDS epidemic.

37. Mrs. KARP wished to know if the causes of the rise in maternal mortality rates had been examined. Were they connected with teenage pregnancies? Were there any clinics which provided teenagers with contraceptives and sex counselling? Who cared for pregnant teenagers? Were there any special schools they could attend? Did Fiji have enough rehabilitation programmes to enable young drug addicts to receive speedy treatment? Was suicide a problem? Had the causes been studied?

38. Ms. BOLADUADUA (Fiji) said that while the authorities realized that disabled children should not be educated separately, Fiji lacked the resources to equip ordinary schools with facilities for disabled children. A big effort was being made to prevent AIDS and the school population was being targeted in particular. The National AIDS Coordinating Committee, a multisectoral body comprising representatives of NGOs and the Government, supplied advice on controlling the epidemic. The small increase in maternal mortality was mainly due to poor delivery facilities on remote islands, where there was a shortage of doctors and trained medical staff.

39. A central adolescent health unit had been set up to address the problem of teenage pregnancies, and the Government's intention was to introduce more units in outlying areas as soon as possible. No special schools were available for the care of teenage mothers, but girls who became pregnant while at school were allowed to return after one year. A comprehensive family planning service operated by trained staff was available throughout Fiji. Several NGOs also offered counselling services.

40. Mr. KOLOSOV said that in 1993, the last year for which figures had been issued, some 50 per cent of infants under three months had been bottle-fed. He would like to know whether matters had improved since then.

41. Ms. BOLADUADUA (Fiji) said that she had no figures to hand, but believed that the trend had been downward over the past five years. The Government advocated full breastfeeding for the first four months, and so far had managed to set up two baby-friendly hospitals as part of a campaign to introduce them nationwide.

42. The CHAIRPERSON asked whether there were any major differences between the medical care provided for children in major urban centres and in remoter areas.

43. Ms. BOLADUADUA (Fiji) said that paediatric facilities were available in the three main hospitals situated on the two largest islands, and also in the subdivisional hospitals located on outlying islands. Specialist doctors were available at the main hospitals, while services in small hospitals were provided by general practitioners, who referred patients to the main hospitals when necessary.

44. Mr. KOLOSOV said he had noted that the number of squatters living in the Suva area was on the increase. As the latest available figures related to 1994, he wished to know whether the situation had improved. The children of squatter families were widely recognized to be in a high-risk category.

45. Mrs. KARP said it was her understanding that the main beneficiaries of social welfare in Fiji were the elderly and the extremely poor. What direct benefits were available to children? Also, what benefits did children derive from the alleviation fund established in response to the special economic situation?

46. Mrs. PALME said that Fiji had been very successful in attracting development support to ensure basic health care for children from the poorest sectors of the population. What long-term plans had been made to ensure that children continued to receive health care if such support was discontinued?

47. Ms. BOLADUADUA (Fiji) said that her Government was constantly trying to make more accommodation available to the increasing numbers of people from lower-income groups who were leaving rural areas to live in the city, and had provided more primary health-care workers and health centres to meet their needs. More community health workers were also being trained. They received six weeks' basic medical training from the Government, and their salaries were paid by the community.

48. As to direct social benefits for children, each family received a child allowance for the first three children.

49. Mr. KOLOSOV asked, in view of the widening gap between rich and poor, what part voluntary donations played in child health care.

50. Ms. BOLADUADUA (Fiji) said that on a number of occasions the Rotary Club of Fiji had supplied individual items of badly needed medical equipment to hospitals or medical institutions, and had also been instrumental in acquiring the services of overseas specialists, who came to work for short periods in fields in which Fiji lacked medical expertise.

Education, leisure and cultural activities (questions 24 to 28 of the list of issues)

51. Mr. FULCI said that one of the most serious anomalies in Fiji's overall system for safeguarding the rights of children was the fact that education was not compulsory. In the light of the report's assertion that children's failure to attend school was related to "the cost of education and to the values and attitudes of different cultural groups", he would like to ask a number of questions.

52. Firstly, what steps were being taken to improve the accessibility of general and vocational education to every child of secondary-school age? Was financial assistance provided to those in particular need? Secondly, what financial provision was being made with a view to establishing a truly accessible and high quality education system? Thirdly, was the legal age for completion of compulsory education the same as that for admission to employment? Finally, the report stated, in paragraph 202, that the

Government's aim was to make education compulsory up to 15 years "eventually". Did that mean that the Government was working to a schedule and, if so, when did it envisage completing the programme?

53. Mrs. PALME, associating herself with Mr. Fulci's concern about non-compulsory education, said that the report did not provide convincing evidence of the Convention's incorporation into school and teacher-training curricula.

54. Mrs. KARP asked whether the Government had initiated its project to provide grants for pre-school facilities in 1998 as planned. If so, were any statistics available?

55. Mrs. PALME was concerned at the high primary school drop-out rates shown in the report. What was being done to ensure that children participated in education to the level desired? She would also like to know the extent of school privatization in Fiji.

56. Ms. BOLADUADUA (Fiji) said that a governmental programme of compulsory primary education had started in 1997 in two of the nine educational districts. The Government's aim was to extend the programme to two more districts every year, and eventually to establish universal compulsory education up to age 15.

57. Free education was currently available to all children aged from 6 to 16. The Government had increased the level of annual grants to schools, and was working closely with NGOs and other organizations to try to ensure that children were free to enrol at the school of their choice. In 1997, the Government had made additional provision for rural schools, including the setting-up of boarding schools.

58. The pre-school project had begun in 1998, but figures were not yet available. It provided salaries for pre-school teachers, who had previously relied on community support. A system of pre-school teacher training had been established in conjunction with the University of the South Pacific, supported by financial and technical assistance from UNICEF, the New Zealand Overseas Development Agency and OZAIID.

59. With regard to drop-out rates, the main source of advice and information to young people was the Ministry of Youth. Organizations such as the National Youth Band and national youth training centres attempted to provide worthwhile activities at district level for non-attenders. Now that schools had been privatized, the Government provided the teachers and the local community was responsible for management.

60. Mrs. PALME said that communities could not be regarded as private sources of funding. She would like to know what private-sector organizations were involved in school privatization.

61. Ms. BOLADUADUA (Fiji) said that the Government now operated only a very small percentage of schools. All others were run by organizations within the community, including a significant number by the Church. The age for admission to school was 6 years.

62. The CHAIRPERSON asked whether separate funding outside the education budget had been allocated for young people's cultural activities.

63. Ms. SHAFIQ (Fiji) said that as far as her delegation was aware, leisure and cultural activities came under the budget of the Ministry of Education.

64. Mrs. PALME said that since so many schools had been privatized, it was especially important to know the extent to which the Convention had been incorporated into school curricula.

65. Ms. BOLADUADUA (Fiji) said that the provisions of the Convention were slowly being integrated into school curricula. The Convention had been translated in simplified form into the main minority languages, and its provisions were increasingly being reflected in teaching materials and teacher training programmes.

66. Mrs. PALME asked whether large numbers of educated young people were leaving the country because of poor employment prospects.

67. Ms. BOLADUADUA (Fiji) said that Fiji's university received students from 11 island countries. There was an increasing trend for them to seek work abroad after graduation.

68. Mr. KOLOSOV said that on a recent visit to Fiji's university at Suva, he had noticed that most students were of Indian, not Fijian origin. If that impression was correct, what were the reasons? He also asked whether any studies had been carried out on "killing time" among youths, a first step in the drift towards drug-taking and delinquency that was a well-known phenomenon in several island nations.

69. Ms. SHAFIQ (Fiji) said that the disparity between the numbers of indigenous and "Indian" Fijians undertaking university studies was attributable to cultural differences. While young Indians valued education as a route to professional success and material wealth, the priority for Fijians was to find employment in order to support their families and community. Thus, they had little time to devote to study.

70. Ms. BOLADUADUA (Fiji) added that Indians were better able to afford university tuition fees, whereas Fijians tended to be dependent on scholarships.

71. Mrs. PALME observed that the under-representation of indigenous Fijians in higher education was nevertheless surprising, given the special rights and privileges conferred upon them by the 1990 Constitution.

72. Ms. SHAFIQ (Fiji) replied that those provisions, and the constitutional amendments of 1997, were compensatory measures. Turning to the second point raised by Mr. Kolosov, she said that the phenomenon of "killing time" was a problem encountered in many Pacific island States. Studies conducted in Fiji had established that young people who became involved in crime and alcohol or drug abuse often came from broken homes or lacked family support. Her

Government had therefore introduced programmes to encourage problem families to take greater responsibility for their children's upbringing, while local NGOs were working directly with young people.

Special protection measures (questions 29 to 33 of the list of issues)

73. Mrs. PALME said that she wished to associate herself with the concerns expressed by Mr. Fulci at the previous meeting regarding the need to protect children, given the islands' large number of tourists, against sexual exploitation and the associated risk of contracting HIV/AIDS.

74. Mrs. KARP said she had been pleased to note that, in the future, offenders aged 17 and 18 would be tried within the juvenile court system, while the minimum age of criminal responsibility was to be raised. She was concerned, however, that children as young as 14 were liable to imprisonment if deemed to have infringed the civil law. Did the Government intend to address that problem? She also wished to know whether legal aid, which was currently available only to juveniles accused of murder or attempted murder, was to be made more widely accessible. In her view, every child facing the possibility of imprisonment should enjoy the services of a legal counsel, irrespective of the nature of the offence. She was encouraged by the plans to build a new juvenile rehabilitation centre, but wondered, firstly, whether the funds allocated would be sufficient to recruit the necessary staff, and secondly, whether the Government would increase budgetary allocations to existing institutions in order to improve conditions. Finally, she asked whether young drug and substance abusers had access to immediate treatment or were placed on waiting lists.

75. Ms. SHAFIQ (Fiji) said that, although under civil law offences committed by juveniles were punishable by imprisonment, it was unlikely in practice that a child as young as 14 would be sent to prison. Children of that age were usually ordered to be detained in a reform training centre. There were two such centres in Suva, one for boys, operated by the Department of Social Welfare, and another for girls managed by the Salvation Army on the Department's behalf. Security was minimal and detainees were able to attend work or training outside the institutions. Imprisonment would be considered only if a child persistently absconded from the reform training centres. He or she would then be placed in a segregated unit within an adult prison, there being no juvenile prisons in Fiji. She agreed that the practice should cease, and added that a recommendation to that effect had been made to the Law Reform Commission.

76. With regard to the provision of legal aid, the current arrangements were being reviewed, and it was likely that wider access would be recommended, particularly in cases involving children. As to the budgetary allocations for reform training centres and prisons, the Asia Crime Prevention Foundation, an NGO active in the field of prison reform, had recently submitted a paper on the subject to the Law Reform Commission, in which it had made recommendations on facilities in such institutions and the types of rehabilitation programme on offer.

77. Ms. BOLADUADUA (Fiji) said that treatment programmes for drug and substance abusers were in the early stages of development. Currently, after undergoing therapy in psychiatric hospitals, they received follow-up treatment in the community, where support was available from NGOs and religious groups.

78. The CHAIRPERSON invited the members of the Committee to give their preliminary impressions of the initial report of Fiji (CRC/C/28/Add.7) and the supplementary information provided in the written and oral replies.

79. Mr. KOLOSOV welcomed the comprehensive and frank nature of the report. The Government of Fiji had shown commendable openness in describing the problems it faced in implementing the Convention. The main shortcoming was statistical data, which, though adequate, had already been as much as five years out of date in 1996, when the report had been written. The members of the delegation had given full and detailed replies to all questions falling within their areas of expertise. In its concluding observations, the Committee should encourage the Government of Fiji to implement in full its ambitious plans and programmes for the enhancement of the status of children. He hoped that signs of positive change would already be apparent when Fiji presented its first periodic report in five years' time.

80. Mrs. KARP thanked the delegation of Fiji for its informative and honest replies. The report was a comprehensive document which reflected the Government's awareness, and its ability to analyse the status of implementation of the Convention and to devise innovative ways of overcoming the problems it faced. Her main concern was that the many excellent policies set out in the report might fail to be put into practice through lack of finance. There was also a need to expedite the adoption of new legislation in the field of children's rights. Finally, the Government must embrace the concept central to the Convention that children were entitled not only to care and protection, but also to recognition as people with rights and opinions and the capacity to participate in society. She hoped that the delegation's dialogue with the Committee would serve as a starting-point for energetic public debate on ways of enhancing the status of children in Fiji.

81. Mrs. PALME said that she was very impressed by the practical steps taken by the Government towards implementation of the Convention. Fiji, an island State with a culture emphasizing survival and self-reliance, was undergoing a transformation into a new, modern society more prepared to engage with the outside world and keen to take its place in the international community. The Government clearly recognized that one part of that process was the acceptance of international standards in such areas as human rights.

82. Mr. FULCI commended the report, which followed very closely the Committee's reporting guidelines. The dialogue with the delegation of Fiji had been frank and informative. The Committee, in its concluding observations, should encourage the Government to disseminate the Convention more widely and to cooperate with a broader range of NGOs, particularly those directly concerned with the rights of children.

83. Ms. BOLADUADUA (Fiji) thanked the members of the Committee for their constructive and helpful observations on her country's report. She undertook to convey their recommendations to her Government.

The meeting rose at 6 p.m.