



# Convention on the Rights of the Child

Distr.: General  
27 May 2015

Original: English

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## Committee on the Rights of the Child Sixty-ninth session

### Summary record of the 1991st (Chamber A) meeting

Held at the Palais Wilson, Geneva, on Wednesday, 20 May 2015, at 3 p.m.

Chairperson: Mr. Mezmur

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

**Consideration of reports of States parties (continued)**

*Third, fourth and fifth combined periodic reports of Ghana on the implementation of the Convention on the Rights of the Child (CRC/C/GHA/3-5; CRC/C/GHA/Q/3-5 and Add.1)*

1. *At the invitation of the Chairperson, the delegation of Ghana took places at the Committee table.*
2. **Ms. Oye Lithur** (Ghana), introducing her country's report, said that Ghana continued to strive for improvement of child welfare through legal, policy and institutional mechanisms. For instance, Parliament had enacted several laws pertaining to children's rights, such as the Children's Act 1998 and the Juvenile Justice Act 2003. A number of bills were also in the process of enactment, including the Property Rights of Spouses Bill and the Affirmative Action Bill.
3. With regard to policy framework, the Ghana Shared Growth and Development Agenda II (GSGDA) focused directly on child development and protection under Key Focus Area 10. In addition, the Child and Family Welfare Policy (CFWP) had recently been adopted which sought to establish a coordinated welfare system to ensure the protection and well-being of children. The Justice for Children Policy (JfCP) was also currently being finalized as a model for an effective and coordinated justice system for children. Furthermore, the Ministry of Gender, Children and Social Protection (MoGCSP) had been created to succeed the Ministry of Women and Children's Affairs. The new Ministry had developed an "Agenda for Change" document, which set out its new vision, and was also working on a five-year Strategic Development Plan. The Department of Children (DOC) served under the Ministry and was responsible for coordinating the implementation of children's rights through researching, collating and compiling child-related information which was then used to evaluate the status of children's rights in Ghana. The Commission for Human Rights and Administrative Justice (CHRAJ) had also established a unit for monitoring the implementation of policies on children which were published annually in a report on human rights in Ghana.
4. With reference to addressing the needs of vulnerable children, Ghana had established a Girls' Education Unit within the Ghana Education Service (GES) in order to remove barriers to education for girls. The "Take Home Ration" initiative, launched by the GES and the World Food Programme, had helped to decrease gender disparity in education in deprived regions. Regarding children with disabilities, data from the Department of Social Welfare had indicated a significant reduction in the number of registered children with disabilities between 2002 and 2013. Furthermore, the Ministry of Local Government and Rural Development now allocated 2 per cent of the District Assembly Common Fund to support persons with disabilities in every district.
5. Birth registration had considerably increased between 2002 and 2013 owing to such measures as free registration of babies within 12 months of delivery and the recognition of a "Birth Registration Day". In terms of the right to health, the Ghana Health Service had implemented a community-based management system to tackle child malnutrition. Free maternal and child health care was also available under the National Health Insurance Scheme. The Community-based Health Planning and Services (CHPS) model had brought health care closer to communities, particularly through the significant increase in the number of operational CHPS compounds and trained community health officers. As for HIV/AIDS, Ghana's success in reducing the prevalence of the disease could be attributed to a number of policies and programmes. For example, Prevention of Mother to Child Transmission (PMTCT) services had been integrated into sexual and reproductive health

services, and more pregnant women were now receiving antiretroviral medication to prevent MTCT.

6. The MoGCSP had closed down Bonyase witch camp, helping its inmates to reintegrate into society, and it was currently working to close down a further two witch camps with children as inmates. Moreover, a National Conference on Witchcraft Accusations had been held in 2014 to discuss how to eliminate the practice. With regard to female genital mutilation or cutting (FGM/C), the amendment of the Criminal Offences Act had criminalized the practice and it was now punishable by a prison term of between 5 and 10 years. Sexual exploitation of children was now also punishable by between 7 and 25 years in prison. The increase in early and forced marriage in Ghana could be attributed to poverty. In order to combat the phenomenon, the MoGCSP, in cooperation with the United Nations Children's Fund (UNICEF), had established a Child Marriage Coordinating Unit which had launched the Ending Child Marriage Initiative.

7. There had been a general reduction in poverty in Ghana which undoubtedly had an effect on childhood poverty. Ghana was the first country in sub-Saharan Africa to achieve the Millennium Development Goal of halving the population living in extreme poverty by 2015. Such a reduction was the result of a number of policies and programmes, such as the Livelihood Empowerment Against Poverty programme, which had provided financial grants to over 100,000 children. Furthermore, over a third of persons on the LEAP register were children. In respect of education, the Government recognized the contribution of the private sector but was constitutionally obliged to focus on public education. Consequently, measures had been taken to improve public education, such as the introduction of the Capitation Grant, the Free School Uniform and Exercise Book Programme and the School Feeding Programme. In addition, scholarships and scholarship packages had been granted to thousands of girls under different State projects in order to bridge the gender gap in education. Regarding child labour, the National Plan of Action for the elimination of child labour was being reviewed to tackle the issue of children working in the mining sector which, according to a recent survey, covered a very small proportion of children in Ghana. Finally, Ghana still had to address a number of challenges in the implementation of children's rights but it was committed to continued progress in that regard.

8. **Ms. Aldoseri** (Country Rapporteur), referring to issues of legislation, said that she noted Ghana's adoption of new laws in accordance with the provisions of the Convention, such as the Human Trafficking Act and Disability Act, but was concerned about the discrepancy between such laws and their implementation. For instance, FGM/C and domestic violence were on the rise despite being criminalized, and corporal punishment was permitted if justified according to the Children's Act. She asked if there were plans to amend the Act or adopt new laws in order to curb such violations. Regarding coordination, the process for implementing "Ghana fit for children" as a national plan of action had been halted when the Ghana Poverty Reduction Strategy II (GPRS II) had been drafted. She wondered whether GPRS II would provide a comprehensive basis for implementing the Convention and whether there were plans to develop a separate plan of action pertaining to children. Concerning Ghana Shared Growth and Development Agenda II (GSGDA II), she asked whether the Agenda had been approved by Parliament and who was responsible for its implementation and monitoring.

9. With reference to the Child and Family Welfare Policy (CFWP), she enquired as to the budget allocated for its implementation, as well as any preliminary results that could be shared with the Committee. She also sought clarification on when exactly the Justice for Children Policy (JfCP) would be adopted and whether it was the mandate of the Ministry of Gender, Children and Social Protection (MoGCSP) to monitor and evaluate its implementation. She also wondered whether MoGCSP had sufficient financial and human resources to carry out its mandate and how the Department of Children (DOC), as a

coordinating body, evaluated and monitored the implementation of children's rights on a local level. Moreover, referring to the recent merging of ministries in an attempt to avoid duplication of interventions, she wished to know how much more functional the new Ministry was in terms of coordination. In respect of allocation of resources, she wondered what measures had been taken to provide a sufficient budget for implementation of the Convention, particularly in view of the fiscal crisis. It would also be useful to know what had been done to improve the State party's data-collection system and whether Ghana was able to disaggregate its data.

10. With regard to the business sector, the investment in mining, cocoa and fishing industries in Ghana had not benefited local communities and children were being forced into labour and exposed to harmful substances. She asked whether a framework was in place to regulate such businesses and the impact that they had on children, whether agreements had been concluded with businesses to prevent harm caused to children, whether an assessment of children's rights had been conducted in such areas, and whether awareness-raising had been carried out among businesses. The Committee would also like to know whether the State party had incorporated awareness-raising on the Convention into the school curriculum. In respect of non-discrimination, although it was legally prohibited, social practices continued to discriminate against vulnerable children, particularly girls who were subjected to forced and early marriage and female genital mutilation and cutting. She wondered whether a comprehensive strategy existed to tackle the issue, such as training for parents, religious leaders and professionals working with children. As for respecting the views of children, she asked whether children from rural areas and vulnerable children were able to participate in children's clubs, whether children participated in decision-making at home and in judicial and administrative procedures, and what measures had been taken to improve such efforts. She noted that the best interests of the child were not adequately applied in administrative, legislative and juridical proceedings, and wondered whether persons working in those fields had been made sufficiently aware of the issue of children's rights.

11. **The Chairperson** (Country Rapporteur) said that he would appreciate clarification on reports that children born in Ghana who would otherwise be stateless were unable to acquire Ghanaian nationality. He also asked whether the State party was planning to ratify the 1954 Convention relating to the Status of Stateless Persons and the 1961 Convention on the Reduction of Statelessness. In respect of violence against children, he wished to know whether Ghana planned to establish mandatory reporting requirements on the issue, especially for professionals working with and for children. He would appreciate a comment on the extent to which domestic violence legislation was having a positive impact on the lives of child victims, on whether such laws addressed psychological violence in addition to physical violence, on whether the State party intended to establish a national database on all domestic violence cases, and on the progress thus far of the Domestic Violence Victims Support Unit of the Ghana Police Service. Referring to the increase in forced and early marriages, he asked whether any studies were available to explain the rise in such cases, whether it could be attributed to anything other than poverty, and what success had been achieved through the State party's initiatives to eradicate the practice.

12. **Ms. Sandberg** noted that marriage was prohibited in Ghana under the age of 18 but wondered whether there were any exceptions to the rule and, if so, what conditions were required in order to make the exception. Furthermore, she asked whether those persons married under the age of 18 were still considered children under the law.

13. **Ms. Muhamad Shariff**, speaking about access to appropriate information, said that few media outlets disseminated information for the benefit of children, consequently limiting their right to representation and participation. Certain media outlets also portrayed children who had been victims of abuse, which was in violation of their right to dignity and

privacy. In addition, many schools did not have access to computers and children were therefore lacking in computer skills. She asked how the State party would address all of the above-mentioned issues, whether journalists received training on reporting on children, whether sanctions were in place for journalists who violated children's rights, and whether children and their parents were made aware of the dangers of exposure to harmful information, such as violence and pornography.

14. **Ms. Aho Assouma**, speaking about birth registration, wanted to know whether people living in rural areas were aware of "Birth Registration Day", what steps were taken for people who did not register the birth of their child within the specified time frame, whether the bills in the process of enactment contained provisions on birth registration, what was being done to combat corruption in the field of birth registration, whether parents in rural areas were making use of mobile birth registration units, whether civil registry officers benefited from sufficient financial and human resources, whether such offices were being moved to maternity units for ease of registration, and what measures were being taken to help abandoned and refugee children in that regard. As for harmful traditional practices, she would appreciate a comment on the combat against *trokosi*.

15. **Mr. Gurán**, referring to the Commission for Human Rights and Administrative Justice (CHRAJ), said it would be useful to establish the exact competence of the Commission, its structure, the type of specialists involved, whether confidentiality for complainants was guaranteed, accessibility to children who wished to submit complaints, and the number and type of complaints received. He also wondered whether the State party intended to ratify the Third Optional Protocol to the Convention.

16. **The Chairperson**, speaking about *trokosi*, asked the State party what they had learned from implementing section 314A of Act 29 which criminalized the practice. Comments would be welcomed on whether the punishment was commensurate with the severity of the crime, whether there were gaps in the provision, and whether it required amendment.

17. **Mr. Nelson** said that local magistrates were insufficiently aware of the Convention and the principle of the best interests of the child in particular. He asked for copies of decisions made by local courts that referred to the Convention or applied the above-mentioned principle. Regarding domestic violence, he sought clarification on court sentencing policies. For instance, he wondered whether certain offences, such as the rape of children, would result in mandatory imprisonment, as was the case in other countries.

*The meeting was suspended at 4 p.m. and resumed at 4.15 p.m.*

18. **Ms. Oye Lithur** (Ghana), responding to questions by Committee members, said that the Commission on Human Rights and Administrative Justice was an independent body made up of appeal court judges who were mandated to consider complaints from the public. Forty per cent of the cases filed with the Commission between 2008 and 2013 had concerned children.

19. On the question of accessibility, the public could file complaints with human rights offices located in each of the country's 216 districts. The offices ran awareness programmes to alert communities and children, in particular to their rights and the mechanisms available for filing complaints. Some courts applied the principles and provisions of the Convention, and lawyers often invoked the Convention in legal arguments and submissions. Training was being provided to make that a more universal practice.

20. The principle of the best interests of the child underpinned the Children's Act and guided the proceedings of courts, notably the family tribunals. It had been specifically invoked in a number of cases but more training was needed to ensure it was applied consistently.

21. Ghana did not have a sentencing policy but was in the process of formulating one. Amendments had been made to the Criminal Offences Act to establish minimum and maximum penalties for offences such as defilement of a child, which carried a minimum penalty of 7 years' imprisonment. A worrying number of cases of child sexual abuse were being settled out of court. That issue needed to be addressed moving forward in order to protect children's rights. The delegation would supply the Committee with copies of relevant court decisions issued, particularly those where the principle of the best interests of the child had been invoked.

22. As for harmful traditional practices, it had been difficult to use legal intervention to eliminate them, as many of those practices had been in existence for centuries. Laws had been enacted to outlaw harmful practices and while success had been secured in combating female genital mutilation, for example, not a single person had been accused of involvement in *trokosi*, let alone prosecuted for it. Steps had been taken to free girls from *trokosi* and to introduce symbolic rituals as an alternative to the practice, but it was very difficult to envisage the closing down of *trokosi* shrines, as the shrines also performed other functions. The focus for the time being was on freeing girls from the shrines and reintegrating them into society.

23. **Ms. Khazova** asked whether there were no complaints about *trokosi* because of fear of reporting or because of a lack of awareness of the harm associated with the practice.

24. **The Chairperson** (Country Rapporteur) said he would welcome information about the lessons learned from implementation of the provisions of the Criminal Offences Act, whether it needed to be amended or not. Was the strategy to wait for attitudes to change before enacting laws or to enact laws while working in parallel to change societal attitudes? He wished to know whether the law was supporting behavioural change in Ghana or whether there was a need to rethink the approach to the law in relation to the practice of *trokosi*.

25. **Ms. Aho Assouma** expressed concern that it might not be possible to implement the law in practice given that *trokosi* was part of custom. Was there perhaps a need for meetings to be held with the heads of *trokosi* shrines or for subregional meetings to be organized to discuss the problem and ways of addressing it? She said that she would be glad to know how much time children spent in the shrines.

26. **Ms. Oye Lithur** (Ghana) said that once children had been given up to the shrines they remained there for the rest of their lives. The Government had set a national standard by enacting provisions to outlaw the practice, but it was very difficult to say what impact the law had on changing behaviour, given the sociocultural factors that came into play. More work needed to be done to engage the various parties, particularly families, in efforts to eliminate *trokosi*.

27. **Ms. Ayamba** (Ghana) said that the practice of female genital mutilation had no traditional standing and many practitioners did not even know why they were performing the procedure at all. The practice was especially difficult to eliminate in the north-east of the country, because those living in border areas could easily have the procedure performed in neighbouring Togo or Burkina Faso, even if it was illegal in Ghana.

28. Fear was indeed a factor in preventing reporting. Moreover, victims were reluctant to file complaints because the perpetrators of harmful practices were often members of their own extended family. Financial and human resources constraints also meant that information and education could not be disseminated on a sufficiently wide scale.

29. **Ms. Oye Lithur** (Ghana), turning to the subject of birth registration, said that announcements were made on national radio to encourage people to register births. Under new legislation, "unit committees" working at local government level would now be part of

the birth registration process. As part of a statistics improvement project being rolled out in five key ministries, logistical support was being provided to a ministerial unit responsible for birth registration to promote birth registration initiatives.

30. **Ms. Sagoe Moses** (Ghana) said that the Ministry of Health cooperated with the Ministry of Local Government to increase birth registrations. Child health promotion weeks were run to improve information about child health services, including birth registration services across the country. Community health nurses had been trained to help fill out birth registration forms and parents were prompted to fill in the child's birth registration number on child health cards as one way of encouraging birth registration. Births were registered free of charge in the first year, and community health nurses visited refugee camps to ensure registration of births there. Children wishing to enrol in schools had to provide a birth certificate as part of the enrolment process.

31. **Ms. Oye Lithur** (Ghana) said that traditional birth attendants in very remote areas recorded information about each birth and provided it to visiting community health nurses for the purposes of preparing birth registration documents. The Department of Social Welfare registered abandoned children and orphans.

32. Regarding access to information, children received information from the radio. Concerns had been raised about reporting on children in the media. The National Media Commission established regulations on reporting on children in the media, while journalists were required to follow a code of conduct on that issue. NGOs had conducted training to alert journalists across the country to the need to portray children in a sensitive manner in their reporting. The authorities had also intervened when problems had arisen. The claim that schools did not have computers was not true; the Government had in fact supplied thousands of computers to schools.

33. **Ms. Aho Assouma** asked what the time limit was for collecting birth certificates from registry offices and what happened if people did not pick them up. She said that she wished to know what action had been taken to deal with corruption surrounding the issuance of birth certificates.

34. **Ms. Muhamad Shariff** said she would be glad know what action had been taken to deal with journalists for negatively portraying children. She had taken the information regarding the lack of computers from the State party's report.

35. **The Chairperson** (Country Rapporteur) asked what happened in practice if a child walked into a school to enrol but did not have a birth certificate.

36. **Ms. Oye Lithur** (Ghana) said that the child could enrol but the parents would be told to go to the registry and get a birth certificate. As for corruption, the fee for late registration of a birth was minimal and so more details about alleged corruption would be welcome.

37. **Ms. Aho Assouma** said that there had been cases where parents had been asked to pay more for a birth certificate or for expediting issuance of a birth certificate.

38. **The Chairperson** (Country Rapporteur) said that he wished to know whether traditional birth attendants issued birth certificates or birth notifications.

39. **Ms. Oye Lithur** (Ghana) said that birth certificates were issued by district birth registration officers. The birth attendants just collected the initial information.

40. **Ms. Sagoe Moses** (Ghana), turning to the question of access to health information, said that interactive websites with discussion forums had been set up specifically to cater to children and adolescents. There was also a free health magazine for adolescents, and adolescent health clubs in schools had recently been revitalized to encourage young people to share their views on the health services provided to them. Community adolescent health

centres provided information on health, including sexual and reproductive health, to adolescents who were not enrolled in schools.

41. **Ms. Oye Lithur** (Ghana) said that corrupt practices regarding the issuance of birth certificates did not occur. No complaints or reports about corruption or over-charging for birth certificates had been received. Civil society organizations played a key role in providing information on sexual health to young people.

42. **Mr. Otoo** (Ghana) said that significant steps had been taken to improve the delivery and quality of ICT teaching and facilities in schools under the ICT in Education Policy. The subject had been introduced into the basic curriculum and integrated into teacher training. Although Internet connectivity remained an issue, secondary schools had access to a centralized learning platform that provided access to databases, websites and software for various subjects. The Government was in the process of distributing solar-electric laptops to schools to ensure that teachers and students could access those platforms. School television was also used to reach out to schools across the country, and video lessons were used as a form of virtual learning.

43. **Ms. Oye Lithur** (Ghana) said that the Government and civil society organizations had carried out a study to identify the extent to which children were exposed to harmful information on the Internet, the results of which had been disturbing. Steps were therefore being taken to discuss cyber safety with Internet service providers and raise awareness among parents. Help was being sought for training on child cyber safety for Criminal Investigations Department personnel and law enforcement officials. While the Electronic Communications Act of 2008 had made it illegal to transmit pornographic material to children, there were concerns about the capability and capacity to investigate and prosecute such crimes.

44. Children were consulted and participated in the drafting of the Child and Family Welfare Policy through community consultations held across the country.

45. Negative sociocultural practices and poverty were the overwhelming causes of early marriages. A Child Marriage Coordinating Unit and associated Committee of Experts had been set up in 2014 to develop appropriate strategies and monitor ongoing initiatives. Journalists had been given training to help raise awareness in the media and a shelter had been set up to protect and support victims. Children who entered into early marriage remained minors in the eyes of the law.

46. The Domestic Violence and Victim Support Unit, which had responded to 180,000 cases of domestic violence between 2005 and 2013, managed the national database on domestic violence, which included disaggregated data such as the age and gender of victims and perpetrators and the types of crimes committed. A multidisciplinary approach had been adopted in 90 victim support units across the country in order to help mitigate the psychosocial effects of violence. A clinical psychologist was stationed at some of those units and a referral system was in place at the remaining units.

47. **Ms. Obeng Asamoha** (Ghana) said that support from civil society organizations had been crucial in efforts to combat early and forced marriages, particularly in helping to rescue girls forced into marriage, returning them to the education system and even acting as intermediary to prevent the marriage from going ahead in the first place.

48. **The Chairperson** (Country Rapporteur) asked for detailed information on the court procedures followed in cases of domestic violence involving children.

49. **Ms. Oye Lithur** (Ghana) said that procedures under the Domestic Violence Act governed how cases relating to children were to be conducted. Three special gender-based violence courts had been established in Tema, Accra and Kumasi; elsewhere such cases were dealt with by the district courts. Courts had the power to issue protection orders, if



necessary, and proceedings were held in camera, with children being accompanied to court by social welfare officers. Interviews during the investigation phase were also held in private but there were challenges in ensuring confidentiality in some police stations. Police officers were obliged to record all complaints of domestic violence, and health-care professionals were legally required to report any signs of violence. In addition, the Children's Act of 1998 made it compulsory for any person with information relating to child abuse to report it.

50. **Mr. Foley** (Ghana), in response to a question about statelessness, said that a constitutional review had identified a conflict between the provisions of the Children's Act, the Constitution and the Citizenship Act, and the matter would be addressed. However, all children under the age of 7 — or under the age of 16 in the case of adopted children — were automatically citizens of Ghana.

51. **The Chairperson** (Country Rapporteur) asked whether Ghana intended to ratify the Convention relating to the Status of Stateless Persons and the Convention on the Reduction of Statelessness. He said that he would also welcome information on how effective the mandatory reporting obligations had been, how they had been implemented and whether public officials were fully aware of their responsibilities.

52. **Ms. Oye Lithur** (Ghana) said that standard operating procedures had been drafted for social workers, law enforcement officers, health-care professionals and other public officials on reporting cases of child abuse. In some cases, members of the public were using social networks to report cases anonymously. While the statistics demonstrated that there was a high level of reporting, the conviction rate was very low.

53. Turning to whether there was a comprehensive strategy in place to tackle discrimination against children, she said that non-discrimination was covered by the Constitution and the legislative framework.

54. **Ms. Aldoseri** said that there had been reports that children with disabilities, particularly those with mental disabilities, were confined to psychiatric institutions and prayer camps where they were socially excluded and subjected to abuse and inhuman and degrading treatment. What steps were being taken to ensure that those children could live in a family-type environment with access to appropriate support and inclusive education?

55. While the achievements in education were commendable, she said that gender and geographical disparities continued to exist. Many vulnerable groups, such as children with disabilities, children affected by HIV/AIDS, children living in poverty or orphans, still faced huge obstacles in accessing quality education. She enquired whether action was being taken to ensure that all children could enrol, what training was provided to teachers and whether there were any programmes in place for schools dropouts.

56. Private basic education institutions had seen unprecedented growth, which exacerbated segregation and socioeconomic disparities. Conditions in such establishments, particularly those that were unregistered, were often substandard. What was being done to monitor the performance and conditions in those schools and how did the Government ensure that teachers had received the appropriate training?

57. **The Chairperson** (Country Rapporteur) said that while progress had been made in reducing stunted growth and mortality rates in children under 5 years old, he wished to know how the State party planned to increase funding for health care. In view of the fact that the country had a high mortality rate among pregnant women and adolescent mothers, and that neonatal mortality accounted for 60 per cent of infant deaths, he wondered whether those areas were considered national priorities and what measures were envisaged to tackle them.

58. He said that he would be interested to know what action was being taken to halt the decline in exclusive breastfeeding and improve the implementation and monitoring of regulations promoting breastfeeding. Lastly, he wondered whether the delegation could provide information on the status of the national strategies and plan of action in relation to newborns.

59. **Mr. Gurán** said that he would welcome more information about the outcomes of the 2006 and 2010 family support schemes and the family-based care alternatives available for orphaned or vulnerable children. According to the data, only 12 children were placed in foster care in 2014, which seemed extraordinarily low. How was Ghana supporting family-based care as an alternative to institutionalization? He also wished for a clarification concerning the differences between domestic and intercountry adoptions since the information given in the State party's report was unclear.

60. **Ms. Muhamad Shariff** said that Ghana had a high juvenile pregnancy rate coupled with numerous cases of illegal and unsafe abortions. What initiatives were in place or envisaged to educate and raise awareness among adolescents, provide support to unmarried pregnant children and investigate and prosecute anyone performing illegal and unsafe abortions?

61. While significant improvements needed to be made in terms of reproductive health services, she said that it would be useful to know exactly what services and information were currently available and whether adolescents could access them free of charge.

62. In respect of drug and substance abuse, she said that she would like to know how the State party addressed the issue in schools, whether there were any specific drug awareness programmes, whether treatment was available to adolescent addicts and what legislation was in place to tackle drug abuse, possession and trafficking.

63. **Ms. Aho Assouma** said that she would appreciate information on intermittent preventive treatment for pregnant women. She also wished to know how the strategy on Caesarean sections was being implemented and subsidized, and whether blood transfusions were factored into the plan. Furthermore, what measures were in place in the event of a shortage of paediatric pockets?

64. She said that she wondered whether vaccination campaigns and birth registrations in the State party could be synchronized with those of neighbouring countries. Guinea worm had, for example, been eradicated in Togo, and its continued existence in Ghana represented a threat to its neighbours. While mosquito nets were available, how did the Government ensure that they were used, particularly in rural areas?

65. In terms of health and sanitation, she asked whether the State party was experiencing a so-called "brain drain" of health-care professionals and, if so, what was being done to curb it; whether rural areas received adequate water supplies; and whether all schools had access to drinking water and sanitation.

66. Lastly, she said that she wished to know what initiatives were in place to promote exclusive breastfeeding, what powers the regulatory authority had and whether any action could be taken against breaches of the International Code of Marketing of Breast-milk Substitutes.

67. **Ms. Sandberg** said that she wondered whether the State party's law on asylum and refugees would be reviewed to incorporate the rights of the child. Would Ghana consider prioritizing the cases of unaccompanied minors, appointing free guardians and providing them with the right of appeal?

68. **Mr. Nelson**, noting that street children and child labour were still major problems in the country, said that he would welcome information on the results of the recently

completed national plan of action on combating the worst forms of child labour and any future plans to tackle the issue. Had Ghana considered prosecuting mining companies that used child labour? It would also be useful to know what action was being taken to address the root causes of so many street children.

69. He said that juveniles continued to be held in adult detention centres or in pretrial detention and additional information on why those practices were being used would be appreciated.

70. Lastly, he said that he wished to know when the Justice for Children Policy would be adopted, what measures had been taken to tackle the use of traditional settlements outside the justice system, how the shelter established by the Department of Social Welfare fitted into the judicial system and what it was intended to achieve, and whether there were any data on the number and types of cases dealt with by the Child Panels.

71. **Ms. Khazova** said that the country had yet to make any changes to the adoption process, despite the previous concerns raised by the Committee. Trafficking, in particular, remained a huge problem that was facilitated by a lack of intercountry adoption controls. It would be useful to know how Ghana intended to remedy the shortcomings in relation to both in-country and intercountry adoptions, and whether it intended to join the Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption.

*The meeting rose at 6.05 p.m.*