



**Convention on the
Rights of the Child**

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Committee on the Rights of the Child

**Consideration of reports submitted by States parties
under article 44 of the Convention**

Combined second and third periodic reports of States parties

Haiti*

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** Annexes can be consulted in the files of the Secretariat.

Introduction

1. Haiti signed the Convention on the Rights of the Child (hereinafter referred to as “the Convention”), adopted by the General Assembly of the United Nations on 20 November 1989, on 26 January 1990 and ratified it on 23 December 1994. On 3 April 2001, it submitted a detailed initial report on its implementation of the Convention (CRC/C/51/Add.7), which the Committee on the Rights of the Child (hereinafter referred to as “the Committee”) considered on 22 June 2002.

2. Since then, it has not submitted any further reports. It is important to note, however, that this delay in the preparation of the country’s periodic reports is not due to neglect or indifference towards the implementation of the Convention. Rather, it can be explained by various factors and difficulties that have limited the State’s ability to report on its international obligations. First and foremost among these are political developments, including the violent demonstrations in 2004 that led to the removal from office of the President of the Republic, Jean-Bertrand Aristide; the emergence of the phenomenon of systematic abductions and violence; the tensions created by the 2006 general elections; and the food riots in April 2008 that resulted in the dismissal of the government led by Jacques Edouard Alexis. The country has also experienced a number of natural disasters, namely: the floods in Mapou, Fonds-Verrettes, Grand Gosier and Belle-Anse and Hurricane Jeanne in 2004, which resulted in loss of human life and destroyed much of the infrastructure and many of the plantations in the affected areas; the two devastating hurricanes, Hanna and Ike, that hit in September and October 2008 respectively; the terrible earthquake of 12 January 2010 and the cholera outbreak in October of that same year; and the electoral violence of late 2010 and early 2011. Haiti is still grappling with the serious economic consequences of the two most recent hurricanes, Isaac and Sandy, in 2012.

3. The above events have severely weakened the State’s administrative capacity, often forcing it to concentrate solely on dealing with emergencies and contingencies. Under these circumstances, it was not possible to submit the periodic report on the implementation of the Convention within the established time frame.

4. Nevertheless, the Government of Haiti is determined to fulfil its international commitments¹ and will not use these difficulties as a pretext for failing to meet any of its obligations. On the contrary, it intends to make good the delay by submitting to the Committee this combined second and third periodic report, which contains data covering the period from 2002 to 2013.² In accordance with paragraph 10 of the 2010 reporting guidelines, this report contains only information relevant to the situation with regard to the implementation of the Convention in Haiti and the follow-up given to the Committee’s recommendations. The common core document was submitted at the time of the universal periodic review.

5. This report has two objectives: (1) to provide information on the implementation of the Convention while taking into account the suggestions and recommendations made by the Committee in the concluding observations (CRC/C/15/Add. 202) that it adopted following its consideration of the initial report; and (2) to highlight the Government’s efforts to comply with the Committee’s recommendations and the constraints that are preventing it from implementing those recommendations and suggestions fully.

¹ In accordance with article 44 of the Convention on the Rights of the Child.

² The data for 2013 cover up to June of that year.

6. The report summarizes inputs from the ministries and government agencies involved in the implementation of the Convention.³ It also includes an analysis of information gathered from various public documents relating to children and from interviews conducted with officials of public and private institutions. The Government also took into account the information provided by the Office of the Ombudsman and comments submitted by civil society organizations working in the field of human rights, including some working in child rights, who were invited to consultations on the State's draft report in October 2013. The Government will not fail to inform the Committee, in responding to the list of issues, of any developments that may occur between the submission of this report and its consideration by the Committee.

I. General measures of implementation

7. With a view to implementing the Convention and the recommendations and suggestions made by the Committee, the Government of Haiti has adopted numerous measures covering various aspects of the rights of the child.

A. Measures to review legislation and practice

1. Legislation and administrative measures

8. The Committee encouraged Haiti to take all necessary measures to ensure that its domestic legislation conforms fully with the principles and provisions of the Convention, and in particular to: (a) undertake all necessary steps to finalize the harmonization of existing legislation with the Convention; (b) adopt, as a matter of urgency, a comprehensive code on children that will reflect the general principles and provisions of the Convention; and (c) ensure the implementation of its legislation.

9. As recommended by the Committee, the Government is in the process of harmonizing Haitian legislation with the Convention. Some laws have in fact been drafted since the ratification of the Convention, although a number of them have yet to be finalized.

10. Various laws or international treaties related to the rights of the child have been adopted or are in the process of adoption.

Laws and decrees currently in force

- The Act of 10 September 2001 prohibiting the corporal punishment of children;⁴
- The Act of 7 May 2003 on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment against children;⁵
- The Decree of 6 July 2005 amending the rules on sexual assault and eliminating discrimination against women in that regard.⁶
- The Act of 10 September 2007 on the establishment and organization of the National Office for Partnerships in Education;⁷

³ The Ministry of Social Affairs and Labour, the Ministry of Public Health and Population, the Ministry of National Education and Vocational Training, the Ministry of Justice and Public Security, the Ministry for the Status of Women and Women's Rights, the Ministry of Youth, Sport and Civic Action, the Ministry of Planning and External Cooperation, the Ministry of Economy and Finance, the Brigade for the Protection of Minors, the Social Welfare and Research Institute and the Prison Department.

⁴ *Le Moniteur* No. 80 of 1 October 2001.

⁵ *Le Moniteur* No. 41 of 5 June 2003.

⁶ *Le Moniteur* No. 60 of 11 August 2005.

- The Act of 22 January 2009 on the abduction, kidnapping and hostage-taking of persons;⁸
- The Act of 13 March 2012 on the integration of persons with disabilities;⁹
- The Act of 9 May 2012 on the organization and functioning of the Office of the Ombudsman;¹⁰
- The Decree of 26 April 2013 establishing the Interministerial Human Rights Committee;
- The Decree of 18 July 2012 taking measures to ensure the integrity of procedures for the international adoption of children of Haitians.¹¹

Pending legislation

- The new Adoption Act of 29 August 2013;
- The Act on paternity, maternity and filiation of 12 April 2012.

International agreements, conventions and treaties ratified by Haiti

- The International Labour Organization (ILO) Minimum Age Convention, 1973 (No. 138), ratified on 14 May 2007;¹²
- The ILO Worst Forms of Child Labour Convention, 1999 (No. 182), ratified on 14 May 2007;¹³
- The International Covenant on Economic, Social and Cultural Rights, ratified on 31 January 2012;¹⁴
- The Convention on the Rights of Persons with Disabilities and its Optional Protocol;¹⁵
- The Inter-American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities (1999), ratified on 12 March 2009.¹⁶

International treaties that have not been ratified

- The Hague Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption (1993), which was ratified on 11 June 2012 but the instruments of ratification whereof have not yet been deposited.

11. In response to the Committee's explicit recommendation, it should be mentioned that a preliminary draft children's code has been in preparation since 2001. The purpose of the code is to permit the development of a child protection system by establishing new legal norms and standards that are fully in line with the Convention. A draft was produced in 2003 and was reviewed by international experts in 2005, but the Transitional Government (in power from 2004 to 2006) decided not to adopt such an important code by decree. The process was taken up again in 2011 and a draft was

⁷ *Le Moniteur* No. 102 of 19 November 2007.

⁸ *Le Moniteur* No. 26 of 20 March 2009.

⁹ *Le Moniteur* No. 79 of 21 May 2012.

¹⁰ *Le Moniteur* No. 119 of 20 July 2012, art. 5.

¹¹ *Le Moniteur* No. 123 of 26 July 2001.

¹² *Le Moniteur* No. 56 of 15 June 2007.

¹³ *Le Moniteur* No. 58 of 19 June 2007.

¹⁴ Not yet published in the official gazette of the Republic of Haiti.

¹⁵ *Le Moniteur* No. 79 of 21 May 2012.

¹⁶ *Le Moniteur* No. 40 of 16 April 2009.

reviewed in September 2012. The Action Plan of the Ministry of Justice and Public Security for the period 2012-2016 includes the finalization of the Code and its submission to Parliament.

Administrative measures

12. The following administrative measures have been taken, notably in relation to the appointment and training of child protection workers and the creation of the structures needed to give effect to the rights protected by the Convention.

- The appointment of specialized juvenile judges in 2009 to all 18 courts of first instance, with the exception of the court in Mirebalais;
- The revision of the police training curriculum taught at the Police Academy to include modules on the rights of the child;
- The revision of the training curriculum for judges taught at the Magistrates' College and the inclusion of modules on juvenile justice;
- The construction of a juvenile detention centre in 2004, which was an improvement on the Fort National centre that until then had housed women and children in conflict with the law (Delmas 33 for boys, Pétionville Centre for girls); the transformation of the Delmas 33 centre into the Rehabilitation Centre for Children in Conflict with the Law;¹⁷
- The establishment in November 2002 of the Brigade for the Protection of Minors — see General Directive No. 069 of the Directorate-General of the Haitian National Police;
- The establishment of a unit for the protection of children's rights within the Office of the Ombudsman;
- The establishment in 2012 of a Working Committee on the integration of street children in school by the Ministry of National Education and Vocational Training as part of its implementation of the Programme for Free Compulsory Universal Education;
- The measures taken to implement articles 125 and 126 of the Decree of 4 November 1983 on the administrative procedures for adoption (2012);
- The adoption by the Social Welfare and Research Institute in 2012 of a plan to decentralize its services in nine departments;
- An administrative measure regulating travel by minors (2012) and a memorandum of understanding signed between the Social Welfare and Research Institute, the Brigade for the Protection of Minors and the Directorate of Immigration and Emigration.

13. A foster family mechanism was developed by the Ministry of Social Affairs and Labour and the Social Welfare and Research Institute in 2012 and 2013.

2. Institutional practice

14. Many efforts have been made to improve practice, including the administrative measures cited above. In addition, specific training courses have been offered to civil servants performing specific roles, such as staff of the Brigade for the Protection of

¹⁷ Conditions of detention have improved, although the Centre is not yet in line with the provisions of the Decree of 20 November 1961. A joint public-private initiative of 28 December 2007 provided for the establishment of a re-education and rehabilitation centre. Despite the memorandums of understanding signed in 2012 and the availability of infrastructure, the Centre has not yet opened its doors, due to a lack of operating funds.

Minors and the Social Welfare and Research Institute and judges. The decentralization of the services provided by the Social Welfare and Research Institute and the Brigade for the Protection of Minors in the country's departments, as well as the existence of groups to coordinate the efforts of institutional and non-governmental stakeholders working in child protection, have made it possible to provide better care for children at risk of abuse, exploitation or violence. For example, Brigade and Institute staff cooperate systematically in the various departments.

15. However, it should be noted that some provisions of international treaties and conventions have yet to be incorporated into domestic law. For example, the notion that cases of children in conflict with the law should be processed promptly, as provided for in article 37 (d) of the Convention on the Rights of the Child, the Beijing Rules and the United Nations Rules for the Protection of Juveniles Deprived of Their Liberty, has not yet been incorporated into domestic law. Because of this weakness in the legal framework, it has thus far not been possible to develop the procedures needed to reduce delays in the processing of children's cases, which are currently just as long as the delays faced by adults. Moreover, judges do not take adequate account, in their practice, of the fact that international instruments adopted by Haiti take precedence over domestic law; this can be explained by a lack of knowledge of these instruments among many legal professionals.

16. Given the above difficulties, implementing procedures for some laws remain to be developed. For example, the 2003 Act on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment against children includes an obligation for the Minister of Social Affairs and Labour to seek the views of children when taking decisions, yet there is no procedure for implementing this aspect of the Act.

17. The adoption of legislation alone is insufficient to bring about the desired change in practice. In order to achieve more significant behavioural change, the Government needs time to adapt the entire content of the Convention to the local context, and it is committed to ensuring in the long term that these changes are reflected in daily practice.

18. Other measures must accompany legislation, such as ensuring better working conditions for child protection workers, disseminating child protection instruments, establishing three juvenile courts in the various jurisdictions in the country and providing intensive training to all professionals working in the area of children's rights, particularly judges.

B. Coordination of the activities of government agencies

19. The Committee recommended that Haiti establish, as a matter of urgency, a body with the clear mandate to coordinate all activities related to the implementation of the Convention, and with the necessary powers and human and other resources to fulfil its mandate in an effective manner at the national, regional and local levels. The Committee further recommended that the Government take all necessary measures to allow the Social Welfare and Research Institute to carry out its functions at the national, regional and local levels.

20. A number of government agencies are involved in the implementation of the Convention, including the Ministry of Social Affairs and Labour, the Social Welfare and Research Institute, the Ministry of Justice and Public Security, the Ministry of National Education and Vocational Training, the Ministry of Public Health and Population, the courts of first instance, the juvenile courts, the State Department of Youth, Sport and Civic Action, the Ministry for the Status of Women and Women's

Rights and the Ministry for Human Rights and the Fight against Extreme Poverty. None of these institutions, however, performs a formal role as coordinator of activities to implement the Convention.

21. Nevertheless, coordination and collaboration mechanisms do operate under the auspices of the Social Welfare and Research Institute.

C. National plan for the implementation of the Convention

22. The Committee encouraged Haiti to develop a comprehensive national plan of action for the implementation of the Convention incorporating the objectives and goals of the outcome document entitled “A World Fit for Children” of the United Nations General Assembly special session on children. In this regard, it was encouraged to seek technical assistance from the United Nations Children’s Fund (UNICEF) and to involve civil society in the preparation and implementation of such a national plan of action.

23. The Government recognizes the limitations of sectoral efforts and the fact that implementation of the Convention will be difficult to achieve without a comprehensive approach to the issue of children’s rights. Accordingly, in November 2007 the Ministry of Social Affairs and Labour, with support from UNICEF, developed a framework document, the National Plan for the Protection of Haitian Children in Difficult or Vulnerable Situations, which aims to ensure special protection for vulnerable children, including child domestic workers, street children, children living with HIV/AIDS, children in conflict with the law, child victims of disasters or armed conflicts, children with disabilities, child victims of trafficking, orphaned children, children belonging to armed gangs and child victims of violence, sexual abuse and sexual exploitation.

24. To date, the National Plan has been adopted and partially implemented. The absence of a steering committee to oversee the process and insufficient budget allocations have slowed its implementation, leading to a lack of coordination among the activities of the ministries concerned. An evaluation of the Plan is currently being conducted, to be followed by the drafting of a national child protection strategy.

D. Independent body for monitoring the implementation of the Convention

25. The Committee encouraged the Government of Haiti to consider the establishment of an independent national human rights institution, taking into account the Committee’s general comment No. 2 on national human rights institutions, to monitor and evaluate progress in the implementation of the Convention at the national and local levels. In addition, the Committee recommended that the institution be allocated adequate human and financial resources and that its mandate include the power to receive and investigate complaints of violations of child rights in a child-sensitive manner, and to address them effectively. The Committee encouraged the Government to seek technical assistance from, among others, the Office of the United Nations High Commissioner for Human Rights (OHCHR) and UNICEF.

26. Prior to the adoption of the 1987 Constitution, there was no State body to monitor and promote human rights in Haiti. Article 207 of the Constitution laid the foundation for such an institution by establishing the Office of the Ombudsman.

27. The Act of 9 May 2012¹⁸ stipulates that the Ombudsman's Office is responsible for ensuring that the State fulfils its human rights commitments, including those undertaken at the regional and international levels. The Act strengthened the Office's capacity and broadened the scope of its work. Article 5 enables women and children who have suffered abuse at the hands of public authorities to lodge complaints with the Office. Nevertheless, the human and financial resources currently available are insufficient.

E. National budget for children

28. While recognizing the difficult economic conditions in Haiti, the Committee nevertheless recommended that Haiti make every effort to implement the Economic and Social Programme 2001-2006 and to increase the proportion of the budget allocated to the realization of children's rights, inter alia, by taking the necessary steps for a resumption of international aid programmes. In this context, it recommended that the Government ensure the provision of appropriate human and financial resources to children, in particular to the most vulnerable among them, and guarantee that the implementation of policies relating to children is given priority.

29. The funds planned for child protection come from several sources. The resources allocated for the realization of children's economic and social rights are included in the national budget. Data from the Ministry of Planning and External Cooperation indicate that a budget of G 718,728,000 (US \$17,968,200) for child protection was planned under the 2011/12 budget, of which G 692,691,920 were allocated and G 658,145,800 were committed. Specifically, since 2011 an amount of G 50 million (US \$1.25 million) has been allocated annually to the Social Welfare and Research Institute for its work in favour of children.

30. In addition, in the 2012/13 financial year the Government received special assistance from the Haitian private sector to support specific State programmes. For example, businesses supported the conduct of awareness-raising activities throughout the country. Such experiments in public-private cooperation have proved positive and will become a regular feature in certain sectors starting in 2014.

31. International assistance plays a huge role in the realization of children's rights in Haiti. The Government's major donors include the World Bank, the Inter-American Development Bank (IDB), the United States Agency for International Development (USAID), the European Union, the Canadian International Development Agency (CIDA), the European Commission's Humanitarian Aid and Civil Protection department (ECHO), the Petrocaribe Development Fund and the International Organisation of La Francophonie. Support has also been received through bilateral cooperation, for instance through the Spanish Agency for International Development Cooperation, which has been very active in the water and education sectors.

32. The United Nations agencies have directly and indirectly supported the Government in its implementation of programmes for children. Before the earthquake, the United Nations Development Programme (UNDP), UNICEF, the United Nations Population Fund (UNFPA), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Stabilization Mission in Haiti (MINUSTAH), the Joint United Nations Programme on HIV/AIDS (UNAIDS), the World Food Programme (WFP) and the World Health Organization (WHO) were already supporting activities in the fields of education, health, protection and justice. In response to the earthquake, these agencies massively expanded their support, extending it to other sectors such as reconstruction. These activities were also

¹⁸ *Le Moniteur* No. 119 of 20 July 2012.

supported by the Office for the Coordination of Humanitarian Affairs (OCHA). Since 2012, the number of activities has fallen sharply, as emergency funding has dried up.

33. International non-governmental organizations (NGOs) have always provided the Government with technical assistance and have directly implemented programmes to support children. According to the United Nations Secretary-General's Special Envoy for Haiti, former President Bill Clinton, Haiti has the world's largest number of NGOs per capita.¹⁹ The 2010 earthquake revealed the crucial role played by a number of these NGOs in the provision of essential services such as health care, education or job creation. However, these efforts have been marred by problems with regulation and accountability, the worst example being abuses related to the adoption of Haitian children.

34. After 2010, NGOs made a great contribution to managing the emergency in the immediate aftermath of the earthquake. They also helped rebuild and restructure the child protection system by increasing their technical and financial support. Particularly since 2010, hundreds of NGOs have been active in Haiti and it is not possible to list them all.²⁰ The International Donors' Conference held in March 2010 established an Interim Haiti Recovery Commission presided over by the Secretary-General's Special Envoy and the Prime Minister and a multi-donor trust fund managed by the World Bank for large-scale projects in order to facilitate coordination and avoid duplication. The conference also proposed the establishment of a permanent Haitian development authority that would be responsible for coordinating the work of NGOs.

35. In terms of the financial support provided to the Government by these organizations, there has not been any specific exercise to calculate the amount of international assistance²¹ devoted to children, and information on this subject is incomplete. There is no data collection system in place and several NGOs are still operating without accreditation from the Ministry of Planning and External Cooperation. Once adopted, the preliminary bill to regulate the operation of NGOs, which is currently being discussed with civil society, should facilitate the collection of data, including financial data, and ensure greater transparency and coordination of their activities.

36. A coordinating body for international development assistance was established in 2012 to improve the management of international assistance and thereby ensure consistency in actions to promote development in Haiti. In order to harmonize activities and properly channel funds allocated for children, partnerships are sometimes formalized through memorandums of understanding similar to those drawn up by the Social Welfare and Research Institute with its partners.

F. Cooperation with non-governmental organizations and civil society

37. The Committee recommended that Haiti establish well-structured, systematic cooperation with NGOs to set clear minimum standards for the service-providing activities regularly and make sure that they are given the necessary follow-up.

38. NGOs play a key role in social protection in Haiti. As non-State actors, they are active in various sectors, including child protection, under the supervision and control of the government authorities. In accordance with article 13 of the Decree of 14

¹⁹ Daniel Trenton. "Bill Clinton Tells Diaspora: 'Haiti Needs You Now'", *The Miami Herald*, 10 August 2009.

²⁰ See the websites of the Ministry of Planning and External Cooperation and OCHA.

²¹ For international humanitarian financial assistance, data from 2002 to 2012 are available on the OCHA website at <http://fts.unocha.org/pageloader.aspx?page=emergencyCountryDetails&cc=hti&yr=2010>.

September 1989 on non-governmental organizations,²² the Ministry of Planning and External Cooperation is thus responsible for coordinating and supervising the activities of NGOs in the country. The Ministry carries out this function through an administrative body called the Coordination Unit for NGO Activities. One of the Unit's main duties is to provide a summary of NGO activities at the end of each financial year.²³

39. It is important to note that the coordinating body for international development assistance organizes sectoral and thematic round tables, some of which relate to child protection, such as the sectoral round table on juvenile justice and the sectoral round table on child domestic workers. Their purpose is to bolster the capacity of ministries and agencies to carry out joint cooperation programmes and to serve as platforms for dialogue and consensus on drafting recommendations and implementing ministries' sectoral policies.

40. It is important to note the important work carried out by the Working Group on Children Separated from Their Parents (2010-2011), which later became the Working Group on Vulnerable Children. The latter operated until 2013 and brought together representatives of the State, United Nations agencies and international and national NGOs. Based on the experience of these technical groups, the Working Group on Child Protection was established in 2013 under government leadership; it comprises governmental and non-governmental partners and is active in most departments in the country.

41. There are also NGO coordination groups that are working to, inter alia, facilitate the work of NGOs and their interactions with the State.²⁴ The Inter-NGO Liaison Framework, for example, is made up of 46 Haitian and foreign NGOs working in Haiti. Its objectives include serving as an interface between its members and government institutions, donors and other stakeholders. The Liaison Framework includes working groups on issues such as health and education and was represented as an observer on the Interministerial Subcommittee to Coordinate and Monitor the Implementation of the National Growth and Poverty Reduction Strategy Paper. From June 2010 to May 2011, its chairperson also served on the board of the Interim Haiti Recovery Commission as a permanent representative of international NGOs.

G. Training and dissemination of the Convention

42. The Committee recommended that Haiti: (a) strengthen its efforts to disseminate the principles and provisions of the Convention as a measure to sensitize society to children's rights through social mobilization; (b) undertake systematic education and training programmes on the provisions of the Convention for all professional groups working for and with children, in particular parliamentarians, judges, lawyers, law enforcement officers, civil servants, municipal and local workers, personnel working in institutions and places of detention for children, teachers, health personnel, including psychologists, and social workers; and (c) seek technical assistance from, among others, OHCHR and UNICEF.

43. With regard to dissemination of the Convention, no systematic measures have been taken to make it known to the general public, even though article 40 of the amended 1987 Constitution requires the State to publicize legal instruments widely.

44. However, national and international organizations have held numerous awareness-raising and training sessions on the Convention, particularly since 2010, for

²² *Le Moniteur* No. 77 of 5 October 1989.

²³ Art. 16 (j) of the Decree of 14 September 1989 on non-governmental organizations.

²⁴ <http://cliohaiti.org/index.php?page=partenaires>.

professionals working for and with children and for children themselves. For example, discussions between teachers and students were organized in schools through an initiative of the Social Welfare and Research Institute and UNICEF. Other initiatives marking 20 November have taken place each year to make the Convention known to the general public.

45. Significant efforts have been made with regard to institutional training on the rights of the child. Training programmes are designed and implemented for staff working in places of detention. All staff of the Brigade for the Protection of Minors have received intensive training focusing on the rights and protection of children. Advanced training courses are also organized in Haiti and abroad for Haitian National Police investigators on the protection of minors, including efforts to combat ill-treatment, prostitution, paedophile networks, drug use and the exploitation of child domestic workers.

46. Police Academy instructors received training on the rights of the child in 2012/13 and training modules on the subject are currently being finalized. More than 20 instructors from the Magistrates' College received training on juvenile justice and some 100 stakeholders from the judiciary and the social sector underwent training at the College in 2013.

47. To date, no systematic measures have been taken to inform the general public and specialized organizations about the initial report of Haiti on the implementation of the Convention or about the Committee's concluding observations. Only very well informed professionals are aware of the existence of these documents.

II. Definition of the child

48. The Committee recommended that Haiti raise the minimum legal age of marriage of girls to that of boys.

49. According to article 1 of the Convention, "a child means every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier". Haitian law is in line with that definition. As information was already provided in the initial report on the various aspects of the concept of a child as set out in the Civil Code, the Labour Code and the Haitian Criminal Code,²⁵ there appears to be no need to restate this information. However, the Government would like to clarify some elements of the initial report, so that the Committee is more fully informed about the legal status of children in Haiti.

A. Status of the child under Haitian law

50. The status of the child is defined in article 329 of the Haitian Civil Code, not article 392 as stated in the initial report.²⁶ This status is determined by establishing the age of majority. In addition to the Civil Code, it is also confirmed in two other legal texts, namely, the amended Haitian Constitution²⁷ and the Decree of 8 October 1982 according married women a status in keeping with the Constitution and eliminating all forms of discrimination against them.²⁸

²⁵ See p. 9 of the report.

²⁶ *Ibid.*

²⁷ Article 16 of the Constitution sets the age of majority at 18 years.

²⁸ Article 16 of the Decree stipulates that 18 years is the age of majority. At this age, persons have the legal capacity to perform all acts of civil life.

51. To supplement the information provided in the initial report, it should be added that a child may be legally relieved of his or her status as a minor if emancipated by his or her parents²⁹ or by the family council in the parents' absence, or by another person authorized by law, such as a mayor. It should be stressed that emancipation may be revoked if the minor abuses the privilege. In such cases, the minor must be placed under guardianship again until he or she reaches the age of majority. However, emancipation is acquired permanently and by operation of law if the minor marries, and is retained even if the marriage is later dissolved.

B. Gender equality in relation to the minimum legal age

52. According to the Committee's concluding observations on the initial report (CRC/C/15/Add. 202, para. 21), there is a difference in the minimum legal age of marriage for boys (18 years) and for girls (15 years). The Committee therefore recommended that Haiti establish the same legal age of marriage for boys and girls. Information on this subject was either poorly presented or misunderstood. In fact, Haitian law does not make any distinction between boys and girls with respect to the minimum age of marriage. Article 139 of the Civil Code stipulates that: "boys who have reached 18 years of age and girls who have reached 18 years of age may marry without their parents' consent". This provision thus establishes gender equality in relation to the minimum legal age of marriage. This general rule is also reinforced by the Constitution, which states as follows: "All Haitians aged over 18, without distinction as to sex and civil status, may exercise their civil and political rights".³⁰ It should be noted, however, that article 133 of the Civil Code provides for an exception in serious circumstances³¹ by stating that men under 18 years of age and women under 15 years of age may enter into marriage with a dispensation from the President of the Republic.³²

C. Distribution of the child population by gender and area of residence

53. According to the census conducted by the Haitian Institute of Statistics and Computing in 2003, minors under 18 years of age make up 43.6 per cent of the country's total population.³³ This corresponds to 3,647,189 persons out of a total of 8,373,750 (table 1). The same census shows that the distribution is more or less equal between the two sexes. There are wide disparities, however, with regard to children's place of residence. There are many more children living in rural areas than in urban areas (see tables 2 and 3 for a comparison).

54. It should be emphasized that three of the country's 10 departments have higher numbers of children, namely, Ouest, Artibonite and Nord. There are 1,230,000 children living in Ouest department, 574,200 in Artibonite and 368,400 in Nord.³⁴ These figures account for 60 per cent of the total child population aged up to 17 years.

²⁹ "A minor, even if unmarried, may be emancipated by his or her father or, in the father's absence, by his or her mother upon reaching 15 years of age" (article 387 of the Civil Code).

³⁰ See article 17 of the Constitution.

³¹ If, for example, an underage girl becomes pregnant, this may constitute serious circumstances. Allowing her to marry before reaching the age of majority is a means of providing her with social protection, because in Haitian culture girls who give birth at too young an age, out of wedlock, are shunned or neglected by society.

³² It should be noted that the President of the Republic no longer holds this power, pursuant to article 150 of the amended 1987 Constitution.

³³ Haitian Institute of Statistics and Computing, *Grandes leçons tirées du recensement général*, 2009, p. 16.

³⁴ *Ibid.*

The remaining 40 per cent are distributed among the remaining seven departments, meaning that the geographical distribution of children in the country is very uneven. The Government therefore plans to step up its efforts in the first three departments, without however neglecting the others.

55. As the above figures indicate, Ouest department, where the capital is located, is the most heavily populated department. The metropolitan area is home to 23 per cent of the country's total population.³⁵ The extremely high unemployment rate³⁶ and the lack of public and private services and infrastructure in the rest of the country are the main factors contributing to the concentration of children and their parents in the capital.

56. It should be noted that the abovementioned tables and figures are taken from the 2003 census and are being provided in response to the recommendation, made by the Committee following its consideration of the initial report, that the Haitian Government provide statistical data on the number of children in the country, disaggregated by gender, age and area of residence. However, these figures cover only part of the reporting period, since the present report is a combined report. The population of Haiti has undoubtedly increased in the more than eight years since the last census. The next census will be held in 2013, since censuses are conducted every 10 years. In the meantime, a study conducted by UNICEF and published in 2012 estimated that there are 4,316,000 children under 18 in Haiti.³⁷ When compared with the estimate given in the 2003 census (3,647,189), this points to an increase of 668,811 in the number of children.

III. General principles

57. Following its consideration of the initial report, the Committee recommended that Haiti appropriately integrate the general principles of the Convention, in particular the provisions of articles 2, 3, 6 and 12, in all relevant legislation concerning children and apply them in all political, judicial and administrative decisions, as well as in projects, programmes and services which have an impact on all children. It further recommended that these principles should guide planning and policy-making at every level, as well as actions taken by health and welfare institutions, courts of law and administrative authorities.

58. The Government has not yet integrated these provisions fully in all its legislation. However, article 276, paragraph 2, of the amended 1987 Constitution states that: "Once international treaties or agreements are approved and ratified in the manner stipulated by the Constitution, they become part of the legislation of the country and repeal any laws in conflict with them." Under this constitutional provision, the Convention is incorporated into Haitian legislation in principle. The adoption of the Act on the integration of persons with disabilities (2012) and the ratification of the International Covenant on Economic, Social and Cultural Rights in 2012 partially address this recommendation.

59. The Government is taking active steps to disseminate the Convention more widely and intends to take measures to ensure its implementation in all political, judicial and administrative decisions concerning children, as outlined below.

³⁵ Ibid., p. 15.

³⁶ Two thirds of the workforce is underemployed, according to UNDP (2013); figures for Ouest department are not available.

³⁷ UNICEF, *Children of Haiti: Two Years After. What is Changing? Who is Making the Change?* Port-au-Prince, 2012, p. 4.

A. Non-discrimination

60. The Committee recommended that Haiti: (a) adopt, as a matter of priority, effective legal measures to stop discrimination against children born out of wedlock; (b) ensure through legislation that all children within its jurisdiction enjoy all the rights set out in the Convention without discrimination and prioritize and direct social services to children belonging to the most vulnerable groups through proactive and comprehensive policy measures; and (c) ensure effective law enforcement and launch comprehensive public information campaigns to prevent and combat all forms of discrimination, where needed within the framework of international cooperation. The Committee requested that specific information be included in the next periodic report on the measures and programmes relevant to the Convention undertaken by Haiti to follow up on the Durban Declaration and Programme of Action adopted at the World Conference against Racism, Racial Discrimination, Xenophobia and Related Intolerance, taking account of the Committee's general comment No. 1 on article 29, paragraph 1, of the Convention.

61. In response to the recommendation to adopt, as a matter of priority, effective legal measures to stop discrimination against children born out of wedlock, the Act on paternity, maternity and filiation Act adopted on 12 April 2012. Article 1 of the Act establishes the principle of the equality of all filiation ties, whether legitimate, natural, adoptive or otherwise, which necessarily implies equality among all children, whether or not their parents are married. The Act, which has not yet been enacted, will give children previously defined under article 611 of the Civil Code as children born of an adulterous or incestuous relationship the right to inherit from their fathers. This filiation carries moral and financial obligations for the parents.

62. Haitian legislation in general prohibits all forms of discrimination. For example, article 17 of the amended 1987 Constitution recognizes that citizens of Haiti aged 18 and over may exercise their civil and political rights irrespective of their gender or marital status. Article 18 of the Constitution also establishes equality before the law for all Haitians.

63. The Committee also recommended that Haiti prioritize and direct social services to children belonging to the most vulnerable groups, such as young girls, child domestic workers, children of poor families, street children, children with disabilities and children in rural areas.

64. Even though there is no systematic discrimination against these categories of children, the Government has acted on these recommendations by developing a set of programmes and subprogrammes for them as part of the Strategic Plan for the Development of Haiti.³⁸ These involve: (a) implementing a gender equity policy; (b) providing instruction for overage pupils and children left out of the education system; (c) building an orphanage in every local development pole; (d) ensuring the production and dissemination of information on gender equality; and (e) strengthening women's participation.

65. These programmes and subprogrammes are clearly aimed at prioritizing and directing social services to the most vulnerable children. The Ministry for the Status of Women and Women's Rights is conducting a systematic media campaign against all forms of discrimination against girls at all levels of society. The State Secretariat for the Integration of Persons with Disabilities is doing the same for children with

³⁸ Ministry of Planning and External Cooperation, Strategic Plan for the Development of Haiti, Port-au-Prince, p. 4.

disabilities. The free education programme specifically targets children of poor families, street children and children living in rural areas.

66. Foreigners in Haiti enjoy the same protection as Haitian citizens, in accordance with the law.³⁹

B. Best interests of the child

67. The Committee recommended ensuring that the principle of the best interests of the child is reflected in all relevant legislation, policies, programmes and otherwise in the implementation of the Convention and abolishing the rule of “*correction paternelle*”, which allows parents to place a child in prison.

68. While article 15 of the Decree of 8 October 1982 has not been repealed, research has shown that the Haitian courts have not had to rule on any such requests from parents. It is also important to draw the Committee’s attention to the fact that ratification of the Convention implicitly repeals that article.

69. According to the principle of hierarchy of norms, article 276, paragraph 2, of the Constitution allows duly ratified international treaties to repeal any laws that contravene them. Article 15 of the Decree of 8 October 1982, which contravenes article 40 of the Convention, is thus repealed. Children may no longer be placed in prison by their parents or guardians. The Government must nevertheless publicize article 40 of the Convention and its repealing effect more widely.

C. Respect for the views of the child

70. The Committee encouraged Haiti to ensure that children’s views are given due consideration, in accordance with article 12 of the Convention, in the family, in schools, in the courts and in all relevant administrative and other processes concerning them through, inter alia, the adoption of appropriate legislation, the training of professionals and the establishment of specific activities in schools.

71. The Government acknowledges that it has not taken systematic legislative and administrative measures to promote the implementation of this article. The views of children, even those capable of discernment, are not sought when appointing a family council or in child custody cases. However, the new Adoption Act provides that in cases involving children under 12 years of age their views must be heard and in cases involving children over 12 years of age their consent must be obtained.⁴⁰ In addition, article 4.3 of the Act on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment against children (2003) requires the Minister of Social Affairs and Labour to review with the child any decision affecting him or her and to solicit his or her views. This measure is implemented by the Social Welfare and Research Institute. In 2012, the principle of the child’s participation was incorporated into the new administrative procedures established by the Social Welfare and Research Institute, notably with regard to the foster care system and procedures for placing children with adoptive parents.

³⁹ See article 54 of the amended 1987 Constitution.

⁴⁰ The new Act amending the adoption regime, which has not yet been enacted, establishes children’s right to express their views.

D. The right to life, survival and development

72. Information on this right was provided in the initial report submitted in 2001. There have not been any major improvements in the situation since then. On the contrary, it has been aggravated by the 12 January 2010 earthquake and other natural disasters. The most vulnerable families face serious difficulties in providing for their children.

IV. Civil rights and freedoms

73. Articles 7, 8, 13-17 and 37 of the Convention on the Rights of the Child grant children a set of rights, including the right to a name, a nationality, their identity, freedom of expression, thought, conscience and religion and the right not to be subjected to torture, that every State party to the Convention must work to respect. All these rights can be considered to be fundamental rights of children. They can be divided into two categories: those requiring intervention by the State for their enjoyment (claim rights) and those whose enjoyment requires non-interference by the State and by parents or guardians (liberty rights).

A. Claim rights

1. Birth registration, name and nationality

74. In the light of article 7 of the Convention, the Committee urged Haiti to strengthen its efforts to ensure that all children are registered at birth, including through awareness-raising campaigns, to consider facilitating procedures of birth registration, notably by abolishing any fees and decentralizing the system,⁴¹ and to take measures to register those who were not registered at birth.

75. The registration of children at birth remains a concern for the Government, which has always taken measures to allow parents who fail to meet the declaration deadline provided for in the Civil Code to do so at a later date without the formality of a judgement. A decree of 1995 allowing late birth registration was enacted to this end and was welcomed by the Committee.

76. In terms of follow-up, the Government adopted a presidential decree on 1 February 2002 allowing any person without a birth certificate to regularize his or her civil status. The decree granted a tax exemption for the related formalities and allowed late declarations without a judgement, but has not been in force since 2007. Since 2011, the Social Welfare and Research Institute has strengthened its social work department, which facilitates the birth registration of abandoned children. In 2012, the Ministry of Justice and Public Security launched a national campaign for providing birth certificate coverage, which began in Sud-Est department in 2013. It involves issuing birth certificates for children under the age of two and provides streamlined, free procedures for others.

77. Registry offices have been decentralized in 137 of the country's 140 communes. National coverage of birth registration by registry offices is estimated at 81 per cent, according to the Fifth Mortality, Morbidity and Service Utilization Survey (EMMUS V) (table 4).

⁴¹ With regard to the decentralization of the birth registration system, the more precise legal term would be deconcentration.

78. With regard to the issuance of short-form certificates of civil status, an important deconcentration measure was adopted in 2005 by the head of the National Archives, by way of agreements between the National Archives of Haiti and money-transfer agencies scattered throughout the communes. Under the terms of these agreements, money-transfer agencies receive applications for short-form certificates from interested parties and forward them to the National Archives. This makes it easier for citizens to access their short-form certificates.

79. With regard to the child's name and nationality, the legal information provided in the initial report has not been amended.

2. Preservation of identity

80. The Committee recommended that the Haitian Government take the necessary measures, including the repeal of article 306 of the Civil Code, to ensure, as far as possible, respect for the child's right to know his or her parents' identities.

81. In terms of follow-up Measures, the Act on paternity, maternity and filiation of 12 April 2012 has been adopted, but has yet to be enacted. Article 1 of the Act establishes the principle of equality of legitimate, natural, adoptive or other filiations and article 8 expressly repeals article 306 of the Civil Code, which denied children of adulterous or incestuous relationships the right to know the identity of their parents.

82. The Act goes even further by repealing article 611 of the Civil Code, which provided that children of adulterous or incestuous relationships were entitled only to maintenance by their parents. Once the Act has been promulgated, all children will enjoy the same rights and privileges.

3. The right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment, including corporal punishment

83. The Committee recommended that Haiti: (a) take all necessary measures for the effective implementation of the law prohibiting corporal punishment, in particular by making use of information and education campaigns to sensitize parents, teachers, other professionals working with children and the public at large to the harm caused by corporal punishment and to the importance of alternative, non-violent forms of discipline, as foreseen in article 28, paragraph 2, of the Convention; (b) investigate in an effective way reported cases of ill-treatment of children by law enforcement officers and ensure that alleged offenders are transferred from active duty or suspended while they are under investigation, dismissed and punished if convicted; and (c) provide for the care, recovery and reintegration of child victims.

84. The Act prohibiting the corporal punishment of children (2001) and the Act on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment against children (2003) demonstrate unequivocally the commitment of the Haitian Government to protecting children from torture and any other cruel or inhuman treatment.

85. Under article 4 of the Act of 2003, legal proceedings may be instituted against any person suspected of torture, abuse, violence or ill-treatment against a child. The penalties are laid down in the Criminal Code.

B. Liberty rights

86. Articles 14, 15 and 17 of the Convention require the State to respect the right of the child to freedom of expression, thought, conscience, religion, association and peaceful assembly and to the protection of his or her privacy and image. With regard

to these rights, there are no provisions specific to children and the provisions of the amended 1987 Constitution apply.

1. Freedom of expression and the right to seek, receive and impart information

87. The right to freedom of expression is guaranteed under article 28 of the Constitution, which recognizes that every Haitian has the right to express his or her views freely on any subject and in any way. This freedom is granted to both adults and minors.

88. Moreover, children are not prohibited from seeking, receiving or imparting information of any kind. Children's access to the Internet and to libraries has contributed significantly to the development of this right. According to the National Directorate of Books, working in partnership with OIF, 16 reading and cultural activity centres have been set up in five departments (Ouest, Sud, Artibonite, Nord and Nord-Est) and are mostly frequented by persons aged 14 to 24. The goal is to establish 40 centres nationwide.

2. Freedom of thought, conscience and religion

89. In Haiti, the Constitution recognizes the right of every citizen to freedom of thought, conscience and religion. Article 30 of the amended 1987 Constitution states that all religions and faiths shall be exercised freely and that everyone is entitled to profess his or her religion and faith, provided that the exercise of this right does not disturb public order and peace. Children generally follow the religion of their parents, this being a cultural norm in Haitian society.

3. Freedom of association and peaceful assembly

90. Article 31 of the Constitution guarantees freedom of association and peaceful unarmed assembly for political, economic, social, cultural or any other peaceful purposes. As a result, all Haitians, regardless of age, are free to enjoy and exercise these rights throughout the country without the need for any State intervention. In public and private schools, as well as in residential neighbourhoods, children may gather freely and hold meetings in the form of class or neighbourhood committees to discuss and safeguard their interests. NGOs such as Save the Children, Plan International, World Vision, the Fondation pour la santé reproductrice et l'éducation familiale (Foundation for reproductive health and family education) (FOSREF) and Population Services International (PSI) have supported children's and youth group initiatives, notably through children's clubs and protection committees. For example, Save the Children was supporting 71 protection committees in 2013, according to data from the Social Welfare and Research Institute, while Plan Haiti and the Association of Children's Clubs were supporting 67 clubs.

4. Protection of privacy and protection of image

91. Children, even those capable of discernment, are subject to their parents or legal guardians with regard to their privacy, under article 12 of the Decree of 8 October 1982 on married women. Moreover, it is parents' involvement in their children's private lives that allows them to perform their duty to supervise and to guide.

92. Haitian legislation does not refer to the protection of the image of the child. However, a child's image cannot be used without the consent of his or her parents. There is no law on the media or code of conduct for journalists that might address such privacy issues, apart from the guidelines specific to certain professional associations.

V. Family environment and alternative care

93. The Committee expressed concern at the high incidence of violence against and abuse of children in some families and the growing number of children living outside the family environment whose views have not been taken into consideration.⁴² The fact that there is no periodic review of their placement outside the family environment was also cause for concern. The Committee's recommendation focused on parents' guidance and legal responsibility for their children, the protection of children against violence, ill-treatment and sexual abuse within the family environment, the separation of children from their families and the protection of children's interests during and following their separation from their parents.

A. Family environment and parental guidance in a manner consistent with the evolving capacities of the child

94. With regard to support for families, the Social Welfare and Research Institute has arranged meetings with parents in difficulty in order to promote harmonious relations. A module on child development is available to professionals working in the field.

B. Parents' common responsibilities and childcare services

95. The set of rights that the law grants to fathers and mothers over the person and property of their minor children constitute their parental rights under article 12 of the Decree of 8 October 1982.

96. In Haiti, the family code provided for in article 262 of the Constitution has yet to be drafted. However, existing legislation requires the parents or other legal representatives of children to provide them with appropriate guidance. It should nevertheless be noted that some children do not, under the law, have the right to know the identity of their father, especially when the latter is married to someone other than their mother at the time of their conception. This gap will be filled with the enactment of the Act on paternity, maternity and filiation of 12 April 2012, which will set out the common responsibility of all fathers and mothers for the upbringing and development of their children.

C. Protection of the child against violence or ill-treatment and sexual abuse within the family environment

97. The issue of violence against children within the family environment warrants close attention from the State. The Fifth Mortality, Morbidity and Service Utilization Survey (EMMUS V), conducted in 2012, showed that 86 per cent of children had been subjected to some form of psychological or physical violence⁴³ (table 5). The Survey specifically identifies three forms of violence considered to be disciplinary measures and carried out by the child's parents or legal guardians:

(a) Non-violent punishments, involving, *inter alia*, depriving the child of something that he or she loves, withholding meals or prohibiting the child from playing. A relatively small proportion of children — 8 per cent — have been subjected to such forms of punishment;

⁴² See article 12 of the Convention.

⁴³ See Fifth Mortality, Morbidity and Service Utilization Survey, September 2012, pp. 43-45.

(b) Psychological abuse, in the form of shouting or yelling at the child and insulting and denigrating the child. Five per cent of children have suffered from psychological abuse;

(c) Corporal punishment in the form of physical abuse, such as shaking, pulling ears, spanking, slapping or forcing the child to kneel. Such punishments have been inflicted on 81 per cent of children.

98. There is very little variation in the proportion of children subjected to corporal punishment according to the child's gender, place of residence or department or even the educational level of the head of household. However, it is slightly lower for children aged 10 to 14 (75 per cent) than for younger children (83 per cent or more). On the other hand, violent forms of corporal punishment are used more frequently against boys (18 per cent) than girls (14 per cent) and against children in urban areas as opposed to rural areas (17 per cent versus 15 per cent). They are also more common in camps for displaced persons⁴⁴ (27 per cent) than in other places of residence.

99. The Committee was particularly concerned at the cases of ill-treatment and sexual abuse, particularly of girls, in many Haitian families and therefore recommended that the Government take measures to rectify the situation.

100. The Haitian Government is aware of the problem and has made efforts to put an end to family violence. In terms of legislative measures, various laws have been adopted:

- The Act of 10 September 2001 prohibiting the corporal punishment of children; under article 1, any kind of inhumane treatment of children, including corporal punishment, is prohibited;
- The Act of 7 May 2003 on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment against children; article 4 allows the Ministry of Social Affairs and Labour to refer to the competent judicial authority any application by any child against any individual identified as the perpetrator or joint perpetrator of or accessory to acts of violence or ill-treatment against that child;
- The Decree of 6 July 2005 amending the rules on sexual assault and eliminating discrimination against women in that regard; article 3 stipulates that if the crime (of sexual assault or rape) was committed against a child aged under 15, the perpetrator is punishable by 15 years' hard labour. Article 4 establishes the penalty of hard labour for life if the perpetrator is a person who has authority over the child.

101. Administrative measures include the establishment in November 2002 of the Brigade for the Protection of Minors,⁴⁵ a specialized unit of the Haitian National Police. The Brigade's primary objective is to assist children, particularly the most vulnerable. The Brigade also has a unit that deals with domestic violence and is responsible for locating, identifying and questioning perpetrators of ill-treatment or physical or emotional abuse of minors and bringing them before the judicial authorities.

102. Hotlines⁴⁶ for children at risk have been set up and designated as toll-free numbers. In 2008, Haiti set up a free, 24-hour hotline in Port-au-Prince that offers counselling to victims/survivors of violence, with funding from UNICEF and the

⁴⁴ Temporary shelters housing some of the victims of the 12 January 2010 earthquake.

⁴⁵ This unit of the Haitian National Police has received sustained support from UNICEF since its establishment.

⁴⁶ The numbers are 511 and 133 for the Social Welfare and Research Institute and 188 for the Brigade for the Protection of Minors.

Government. The agencies offering this service are the Ministry for the Status of Women and Women's Rights, in partnership with NGOs such as Promotion Objectif Zéro SIDA (POZ) and the medical centre of the Haitian Group for the Study of Kaposi's Sarcoma and Opportunistic Infections (GHESKIO). In June 2012, the Social Welfare and Research Institute set up two toll-free numbers for children at risk, with financial support from UNICEF and Save the Children. The Brigade for the Protection of Minors call centre was set up in 2011 with support from UNICEF and MINUSTAH.

103. With respect to judicial measures, in addition to trial court decisions punishing perpetrators of offences against minors, attention must be drawn to the role that the prosecution services of courts of first instance play in prosecuting persons suspected of sexually abusing children. However, statistics are not available for this report.

104. The 2007 National Plan for the Protection of Children in Difficult or Vulnerable Situations has various components, including the National Programme for the Rehabilitation of Child Victims of Violence and Sexual Abuse,⁴⁷ which is aimed at eliminating all forms of violence and sexual abuse against girls and boys. The Plan also aims to assist women's institutions that support girls who are victims of exploitation, violence and sexual abuse, with a view to improving the coverage and effectiveness of support services and building the operational capacity of the Social Welfare and Research Institute with regard to the protection of child victims of sexual abuse.⁴⁸

105. According to figures from the Fourth and Fifth Mortality, Morbidity and Service Utilization Surveys, since 2005 there has been an overall decrease (0.3 per cent) in violence committed against persons aged 15 to 24. The Fifth Survey shows a higher prevalence in urban areas (0.4 per cent).

D. Children separated from their parents

106. The Committee recommended that Haiti: (a) ensure that a child shall not be separated from his or her parents against their will, unless such separation is in the best interests of the child and if it has been decided by a competent authority, subject to judicial review; (b) ensure that a child who is temporarily or permanently deprived of his or her family environment is entitled to special protection and assistance; (c) ensure that the child is given an opportunity to participate in the proceedings and that he or she can make his or her views known; and (d) undertake all necessary efforts to allow the Social Welfare and Research Institute to carry out a periodic review of placement of all children separated from their parents, whether in institutions or in foster families.

107. There have been no significant changes in this regard since the initial report. However, the Social Welfare and Research Institute set up a system for the systematic monitoring of children separated from their parents following the 2010 earthquake, which was then mobilized after Hurricanes Sandy and Isaac (2012). The system forms part of the Institute's emergency response and efforts are under way to make it part of the National Risk and Disaster Management System, specifically the Emergency Prevention and Response Group of the Civil Defence Department operating under the auspices of the Ministry of the Interior and Local Government.

⁴⁷ Ministry of Social Affairs and Labour, *Plan national de protection, Enfance en situation difficile ou de vulnérabilité*, Port-au-Prince, November 2007, pp. 42-44.

⁴⁸ *Ibid.* p. 42.

E. Family reunification

108. The Social Welfare and Research Institute, in partnership with NGOs, the International Organization for Migration (IOM) and UNICEF, conducts searches to locate the families of many minors who have been abandoned or presumed orphans and are living in children's homes. Children whose parents are identified are reunited with their families if the latter are deemed able to take care of them. Aid is sometimes granted in the form of income-generating activities, educational support or other forms of assistance specific to the situation of children, particularly those with disabilities.

109. The family reunification programme has achieved satisfactory results, with over 4,500 children being successfully reunited with their families over the past three years (2010-2013). To ensure that such reunification is sustainable, the Social Welfare and Research Institute and its partners conduct regular follow-ups. An inter-agency database has been set up to ensure that searches and reunifications are monitored, in cooperation with UNICEF, Save the Children, IRC, Terre des Hommes and Heartland Alliance.

110. In addition to reunification, community awareness campaigns are being carried out by social workers in order to build families' capacities to care to their children over the long term and to help prevent further separations.

F. Children deprived of a family environment

111. Normally, the family, the basic unit of society, is the environment most likely to foster the child's development. Unfortunately, family separation in Haiti is a serious problem. Such separation has several causes, including extreme poverty, absence of fathers and/or mothers and the irresponsibility of some parents who shirk their obligations by entrusting their children to third parties.

112. In such situations, some separated children are left in other homes, sometimes in situations of domestic exploitation, while others are put up for adoption. Thousands live on the streets, while nearly 32,000 live in residential centres,⁴⁹ most of them without proper social services.

1. Children in domestic service

113. According to a study conducted by Fafo in 2002 in cooperation with the Ministry of Social Affairs and Labour, the ILO International Programme on the Elimination of Child Labour (IPEC), UNDP, UNICEF, Save the Children Canada and Save the Children UK, child domestic service in Haiti is a consequence of, inter alia, many parents' economic difficulties.⁵⁰ Parents with low incomes, most of whom are peasants, offer their children for domestic service in order to ensure the child's survival and basic education.

114. The study identifies⁵¹ three objective criteria as constituting child domestic labour: separation of children from their parents, a heavy workload for the child and a lack of or a delay in schooling. Based on these criteria, the study estimates that 173,000 children, or 8.2 per cent of the population aged 5 to 17, work in domestic

⁴⁹ Social Welfare and Research Institute, Directory of Children's Homes, June 2013.

⁵⁰ Ministry of Social Affairs and Labour, *Domesticité des enfants en Haïti: Caractéristiques, contextes et organisation*, Port-au-Prince, December 2002, p. 5.

⁵¹ Fafo, *Les fondements de la pratique de la domesticité en Haïti*, for the Ministry of Social Affairs and Labour with support from UNICEF, the International Labour Office, UNDP and Save the Children, 2002.

service. Subsequent studies, including one conducted by USAID and the Pan American Development Foundation (PADF),⁵² have estimated that there are 225,000 child domestic workers in urban areas alone. Since the 2010 earthquake, the number of children in domestic service has increased dramatically and is probably in the region of 400,000.⁵³

115. It should be noted that the above figures are only estimates and are difficult to verify because, despite the obviously widespread use of child domestic service in Haitian society, no systematic survey of the number of children domestic workers has been conducted to date.⁵⁴ The next population census will allow the Government to obtain more complete and up-to-date data on domestic service. Given the informal nature of such activities, it is difficult to implement systematic monitoring and follow-up mechanisms.

116. In 2013, the Social Welfare and Research Institute in cooperation with UNICEF, the International Labour Office, IOM, Terre des Hommes and IRC, supported an analysis of the situation of child domestic workers that will allow State and non-governmental partners to establish prevention and victim-response mechanisms.

117. While children in domestic service come from every department, with the highest numbers coming from Sud (26 per cent), Sud-Est (22 per cent) and Nord-Ouest (22 per cent) departments (table 6), most such children live in Ouest and Artibonite departments. In urban areas, 72 per cent of children in domestic service are girls, compared with only 53 per cent in rural areas. This can be observed in Ouest department, particularly Port-au-Prince. These children also have to work very hard for the households that exploit them. Moreover, the Fafo study showed that 40 per cent of children in domestic service were not enrolled in school.

118. The Government has not been idle on the issue of domestic service. The Ministry of Social Affairs and Labour and the Social Welfare and Research Institute have conducted numerous awareness-raising campaigns to combat the problem since 2001, including one conducted as part of the family separation prevention plan developed in 2013. The Ministry also coordinates the efforts of national and international organizations through the round table against domestic service, which is operational at the central level and in four departments (Nord, Sud, Sud-Est and Artibonite).

119. The Government's efforts are backed up by the initiatives of civil society organizations,⁵⁵ which mount awareness-raising campaigns and run shelters for child victims.

2. Institutional care

120. Institutional care refers to the placement of some vulnerable minors in children's homes. As a sign of progress, in 2011 the Social Welfare and Research Institute, in the context of its efforts to afford such children maximum protection, took the initiative of producing a directory of children's homes in order to monitor these homes and the children living there more effectively and to oversee their activities. Through this initiative, it has identified and registered a nationwide total of 736 institutions and more than 32,000 children, the vast majority of whom are housed without any legal framework. The initiative was taken to determine the number of centres, gauge standards of care and take regulatory measures in accordance with the provisions the

⁵² USAID and PADF, *Lost Childhoods in Haiti*, 2009.

⁵³ *Courrier International*, « Le calvaire silencieux des Restaveks », interview with G. Séjour, Fondation Maurice A. Sixto, February 2011.

⁵⁴ Ministry of Social Affairs and Labour, *op. cit.*, p. 2.

⁵⁵ Examples include the Réseau Aba System Restavek, Foyer Maurice Sixto, Restavek Freedom, CAD and Foyer Lescale.

1971 Act on the functioning of children's homes. The findings suggest that only 15 per cent of centres met minimum standards. As a result, 36 centres have been closed, this low number being attributable to difficulties in finding alternative solutions for the children concerned. The initiative has also enabled centres that are up to standard to be accredited.

121. It should also be noted that the practice currently followed by children's homes with regard to placement is contrary to the 1971 Act; children in such homes must be placed there by the State, which under the Acts of 1961, 1971 and 1973 is the sole body authorized to place children in institutional care.

122. There are two State-run homes, Carrefour and Delmas 3, both of them located in Port-au-Prince.

123. With a view to improving the situation of some adolescents deprived of their families, the Social Welfare and Research Institute and SOS Village d'enfants d'Haïti concluded an agreement in the 2011-2012 financial year, under which SOS Village d'enfants d'Haïti agreed to provide special care for adolescents deprived of their families by way of a family housing programme that offers long-term care to orphaned children. Through its family-strengthening programme, SOS Village d'enfants d'Haïti works with children who are at very high social risk and whose biological families cannot afford to raise and care for them. The goal of this programme is to prevent family separation.

124. With a view to providing a more reliable support system, particularly for orphans, the Social Welfare and Research Institute has recently approved a joint project with UNICEF, Terre des Hommes and IRC to develop a foster family programme, the pilot of which is scheduled for 2013-2014 in four departments. The Institute plans to use the project to offer foster families to children in need of alternative care.

125. There is a temporary custody mechanism for Haitian families who are planning to adopt nationally. This also regulates de facto custody for families caring for children who are not their own. On average, 81 temporary custody measures are taken each year. Such families are subject to regular assessment by the Social Welfare and Research Institute.

G. Periodic review of placement

126. One of the Committee's recommendations was to carry out a periodic review of the placement of children in institutions or foster families. This task falls under the remit of the Social Welfare and Research Institute and safeguards the child's interests in his or her new family environment.

127. The placement of a child outside the family environment is in fact reviewed periodically. The Social Welfare and Research Institute is also reviewing placement mechanisms with a view to establishing a structure that is more appropriate than institutional care.

H. National and intercountry adoption

128. The Committee recommended that Haiti: (a) ratify the Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption; and (b) undertake efforts to enhance its capacities to monitor intercountry adoptions so as to ensure full observance of article 21 and other relevant provisions of the Convention.

129. The terms and procedures for adoption are defined by the Decree of 4 April 1974 and by the Haitian Code of Civil Procedure,⁵⁶ which were alluded to briefly in the initial report. Adoption in Haiti may be national or intercountry. It is national when the adopted child and adoptive parents reside in Haiti. If the adoptive parent resides in another country, regardless of his or her nationality, the adoption is intercountry.⁵⁷

130. In response to the concerns raised by the Committee at the increase in the number of intercountry adoptions, in June 2012 the Haitian Parliament ratified the Hague Convention of 29 May 1993 on Protection of Children and Cooperation in Respect of Intercountry Adoption, as recommended, and enhanced its capacities to monitor intercountry adoptions by implementing interim administrative measures.

131. According to the Social Welfare and Research Institute (b) and the Hague Conference on Private International Law (a), the numbers of intercountry adoptions were as follows from 2003 to 2013:

2003a	2004a	2005a	2006a	2007a	2008a	2009a	2010a	2011a	2012b	2013b
1 056	1 159	958	1 096	783	1 368	1 238	2 601	195	674	400

132. In view of the irregularities observed after the earthquake, receiving countries, with the exception of the United States, suspended adoptions in May 2010. On 18 July 2012, the Government adopted, as an administrative measure, a decree⁵⁸ that ensures the integrity of international adoption procedures. Between April and September 2012 and November 2012 and January 2013, the Social Welfare and Research Institute declared moratoriums on intercountry adoption so that procedures could be overhauled. Adoptions resumed only in January 2013. The Haitian Parliament also adopted a bill amending adoption procedures on 29 August 2013, which has yet to be finalized.

133. To ensure the best interests of the child, article 32 of the Act amending adoption procedures states, in accordance with article 7 of the Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption,⁵⁹ that the dossiers of foreign adoptive parents must be sent to the Social Welfare and Research Institute through a competent public body of the receiving country authorized by the Institute. If the receiving country does not have a competent public body, the dossier of the adoptive parents must be forwarded to the Institute by the central adoption authority of the receiving country that issued the authorization for adoption. Under the provisions of the decree mentioned above, intercountry adoption procedures cannot be initiated individually.⁶⁰ In this respect, the decree implements the law by stating that: “with a view to protecting children and ensuring the legality of procedures, intercountry adoption procedures may be conducted only with the assistance of public authorities or bodies duly approved by the receiving country and regularly authorized by the Social Welfare and Research Institute, as the competent national authority”.⁶¹ This provision of article 7 of the Convention is already being implemented through the new administrative procedures adopted in 2012.

⁵⁶ Art. 812.

⁵⁷ Implementing measures for articles 125 and 126 of the Decree of 4 November 1983, administrative procedure for adoption, Social Welfare and Research Institute, November 2012.

⁵⁸ *Le Moniteur* No. 123 of 26 July 2012.

⁵⁹ Article 7 of the Convention provides that central authorities shall cooperate with each other and promote cooperation amongst the competent authorities in their States to protect children and to achieve the other objects of the Convention.

⁶⁰ Art. 1 of the decree.

⁶¹ *Ibid.* art. 2.

134. In addition to the presidential decree, the Hague Convention, once it has been deposited with the Ministry of Foreign Affairs of the Netherlands, and the Act amending adoption procedures, once it has been promulgated, will mark clear progress towards the full implementation of the Hague Convention.

I. Illicit transfer and non-return

135. Significant efforts have been made to regulate the travel of minors. In this regard, since 2007 the Social Welfare and Research Institute has been issuing accompanying certificates specifically for minors who must leave the country, with or without their guardians. This measure was strengthened in 2012 to prevent trafficking, by means of a new administrative directive issued by the Social Welfare and Research Institute and a memorandum of understanding between the Social Welfare and Research Institute, the Haitian National Police (Brigade for the Protection of Minors) and the Directorate of Immigration and Emigration of the Ministry of the Interior and Local Government. Certificate templates have been forwarded to all diplomatic missions in Haiti and the document has been shared with children's authorities in Brazil, Argentina, the Dominican Republic and Chile, countries that receive a large number of Haitian children who lack the appropriate documentation. Following these measures, a decision was taken in late 2013 to issue a directive requiring parents to inform the State of their children's return to the country.

136. Since 1999, Haiti has had a bilateral repatriation agreement with the Dominican Republic, whereby the list of persons to be repatriated must be communicated to the Haitian authorities prior to their return, which is not always the case. Many unaccompanied children are repatriated without Haiti being duly informed. Moreover, children are sometimes sent back to Haiti via unofficial crossing points, meaning that the authorities have incomplete information about child returnees and the services put in place are unable to provide appropriate care. With other countries, information on scheduled repatriations and deportations is generally available in advance.

J. Violence, abuse and neglect

137. In the light of articles 19 and 39 of the Convention, the Committee recommended that Haiti: (a) assess the scope, nature and causes of violence against children, in particular sexual violence against girls, with a view to adopting a comprehensive strategy and effective measures and policies and to changing attitudes; (b) properly investigate cases of violence, through a child-sensitive judicial procedure, notably by giving appropriate weight to children's views in legal proceedings, and apply sanctions to perpetrators with due regard given to guaranteeing the right of the child to privacy; (c) provide services for the physical and psychological recovery and social reintegration of girl victims of sexual abuses and any other children victims of abuse, neglect, ill-treatment, violence or exploitation, and take appropriate measures to prevent the criminalization and stigmatization of victims; (d) take into consideration the recommendations of the Committee adopted at its days of general discussion on the theme "Violence against children"; and (e) seek technical assistance from, among others, UNICEF and WHO.

138. Information on this recommendation is included in other sections of the report.

VI. Disability, basic health and welfare

139. While welcoming the efforts made by the Haitian Government in the area of disability, basic health and welfare, the Committee made recommendations calling for the development of a national health plan, the improvement of child health, greater access to primary health services, the reduction of maternal, child and infant mortality, the prevention of HIV/AIDS and the safeguarding of adolescent health in terms of both sexual education and mental health. The Committee also focused on children with disabilities by recommending that the Government develop a comprehensive strategy and action plans for such children. The Government took note of these recommendations and has tried to respond to them.

A. Survival and development

140. The Committee recommended that Haiti should by, inter alia, implementing as soon as possible its National Health Plan: (a) reinforce its efforts to allocate appropriate resources and develop and implement comprehensive policies and programmes to improve the health situation of children, particularly in rural areas; (b) facilitate greater access to primary health services, notably in rural areas; reduce the incidence of maternal, child and infant mortality; prevent and combat malnutrition, especially among vulnerable and disadvantaged groups of children; and continue to promote proper breastfeeding practices; (c) continue its immunization campaigns and incorporate them into the Integrated Management of Childhood Illness; (d) establish midwifery training programmes to assure safe home delivery, and (e) pursue additional avenues for cooperation and assistance.

1. Infant and child mortality

141. Reducing the under-5 mortality rate is a concern for both the Committee and the Government. From 1990 to 2008, thanks to sustained efforts by the State, the infant mortality rate declined steadily from 105 to 57 deaths per 1,000 live births⁶² and the infant and child mortality rate declined from 152 to 76 deaths per 1,000⁶³ live births (the evolution of these trends are better illustrated in table 7, which shows the progress made on certain Millennium Development Goal (MDG) indicators). The figures varied slightly between January and June 2012, according to the Fifth Mortality, Morbidity and Service Utilization Survey (EMMUS V). This new statistical survey presents and compares data from three periods: 1997-2001, 2002-2006 and 2007-2012, providing an opportunity to assess the variations in these data. According to the results of EMMUS V, covering the period from 2007 to 2012, the under-1 mortality rate was estimated at 59 per 1,000 and the mortality rate for children aged 0 to 4 years was 31 per 1,000. The risk of dying before the age of 5 was 88 per 1,000 (see table 8 for a more in-depth assessment and comparison with the other periods).

142. There have been irregular fluctuations in child mortality. The rate decreased between 1993 and 2010, remaining constant since then. The Government has set itself the goal of reducing these rates in the decade from 2010 to 2020⁶⁴(see table 8b for variations between 1988 and 2012).

⁶² Ministry of Planning and External Cooperation, op. cit. p. 108.

⁶³ Ibid.

⁶⁴ Ministry of Economy and Finance, Haitian Institute of Statistics and Computing (IHSI), *Les OMDs, état, tendances, et perspectives*, December 2009, p. 34.

2. Maternal mortality and training of midwives

143. The maternal mortality rate has declined over the past 20 years, from 620 to 360 deaths per 100,000 live births.⁶⁵ According to EMMUS V, in almost all cases, maternal mortality is linked to home births. In rural areas, home births are a common practice that can result in obstetric complications. Over the past two decades, considerable efforts have been made to improve access to health services for pregnant women.

144. A comparison of the three most recent EMMUS surveys shows a clear trend towards an increase in births attended by skilled health personnel between 2000 and 2012. In 10 years, the rate rose from 24 per cent to 38 per cent. Data analysis (see table 9) shows that among women aged 15 to 49 who had had a live birth in the five years prior to EMMUS V, nine out of 10, or 90 per cent, had received prenatal care from a skilled health professional, compared with 85 per cent in 2005. The percentage of women making prenatal visits to a skilled health worker is higher among young women — according to EMMUS V, 90 per cent of women aged under 20 and 92 per cent of women aged 20 to 34 — representing a marked improvement on the findings of EMMUS III and IV.⁶⁶ Younger women have greater access to the assistance of a skilled health worker during childbirth: 40 per cent of women under 20, 38.7 per cent of women aged 20 to 34 and 30.31 per cent of women aged 35 and over. Such assistance varies little according to the level of education and place of residence of these women (table 9a).

145. Haiti has had a national health policy since 1996, which was amended in 1999 and updated in 2012. A national strategic plan for the reform of the health sector was developed for 2005-2010, followed by an 18-month interim plan for the health sector covering the period from March 2010 to September 2011. In addition, a national strategic plan for the reduction of maternal mortality was introduced in 2012, in partnership with international organizations such as UNICEF and WHO. In 2007, the Family Health Department of the Ministry of Public Health and Population set a target of reducing the maternal mortality rate by three-quarters by 2015, a reduction that was revised downwards in 2012 to a half.

146. The Government has also introduced several support measures, such as expanding the coverage of prenatal care from 44 per cent in 2000 to 54 per cent in 2005-2006 and 67 per cent in 2012⁶⁷ and launching a free WHO/Pan American Health Organization (PAHO) obstetric care programme in 2008, which was strengthened in 2011 with funding from the Canadian International Development Agency (CIDA). Modern contraceptive prevalence among women with a spouse/partner hardly changed between 2000 and 2005-2006, then increased significantly in 2012, rising from 22 per cent in 2000 to 25 per cent in 2005-2006 and 31 per cent in 2012.

147. The Committee recommended, in particular, that midwifery training programmes should be established to assure safe home delivery. Even today, only 36 per cent of women give birth in a hospital environment in Haiti. The Government has made efforts to provide midwives with adequate training through the opening of a Higher National Midwifery Training Institute in Cité Soleil in October 2013, with the support of MINUSTAH and UNFPA. The Institute offers an entry-level midwifery course that provides three years' training to interested graduates and an 18-month training course

⁶⁵ The WHO National Health Statistics Report 2012 gives 2010 data. It is important to note that EMMUS V does not provide the maternal mortality rate, while the latest EMMUS IV figures indicate a rate of 630 per 100,000 live births.

⁶⁶ EMMUS V, graph 9.1, Percentage of women receiving prenatal care from a skilled health professional, p. 123.

⁶⁷ EMMUS V.

for medical professionals, including registered nurses. Four more institutes are scheduled to open across the country and the National School of Nursing and Midwifery is due to reopen.

148. The Committee also recommended that Haiti: (a) undertake all necessary measures to formulate adequate adolescent health policies and programmes, paying particular attention to adolescent girls; and (b) strengthen sexual and reproductive health education, mental health and adolescent-sensitive counselling services and make them accessible to adolescents.

149. In 2006, the Government launched a family planning policy. Since 2009, the Ministry of Public Health and Population has made family planning one of its five strategic priorities for reducing maternal mortality. Family planning standards were updated in 2010 with the aim of standardizing quality. Since 2012, four family planning methods have been introduced and public education programmes targeting young people have been established with the support of UNFPA.

150. There are three organizations (USAID, PAHO and UNFPA) that fund the procurement of condoms for distribution either to promote reproductive health or to prevent HIV transmission. These condoms are made available by PSI through its sales outlets and by the Ministry of Public Health and Population through health facilities,⁶⁸ with 227,571,690 condoms having been made available between 2006 and 2011 (see table 9b). However, condom use among adolescents and young people is affected by, inter alia, a lack of knowledge, the cost of buying them and a lack of information about the location of points of sale or distribution. In 2012, only 31.1 per cent⁶⁹ of young people had a thorough grasp of HIV issues. This lack of knowledge, coupled with the difficulty of accessing condoms because of their cost, means that the rate of condom use has not increased greatly. There has been a linear progression in the number of adolescent boys who say that they used a condom during their most recent at-risk sexual encounter, from 28 per cent in 2000 to 43 per cent in 2005-2006 and 51 per cent in 2011. While this is a positive trend, 49 per cent of adolescent boys are still at risk, despite the 8-per-cent increase observed between the latest two periods under consideration. For young girls, however, there has been a decline in condom use, following a period of improvement between 2000 and 2005. The rate of condom use rate during the most recent at-risk sexual encounter increased from 12.6 per cent in 2000 to 29 per cent between 2005 and 2006, then fell to 23 per cent between 2007 and 2011, a decrease of 6 per cent (table 9c).

3. Immunization

151. The initial report made reference to the low immunization rate and the Committee recommended that the Government continue its immunization campaigns and incorporate them into the Integrated Management of Childhood Illness.

152. The progress in reducing child mortality is a result of the intensive efforts made by the State, NGOs, UNICEF and WHO to establish immunization programmes to protect children from communicable diseases. The proportion of children aged 12 to 23 months that have been immunized increased from 34 per cent in 2000 to 41 per cent in 2005-2006 and 45 per cent in 2012, according to EMMUS V data.

153. These efforts have involved the implementation of numerous immunization programmes, notably the Expanded Programme on Immunization (EPI), and intensive immunization activities. Moreover, as part of efforts to combat infant and child

⁶⁸ Ministry of Public Health and Population, National AIDS Programme, Declaration of Commitment on HIV/AIDS, United Nations General Assembly Special Session on HIV/AIDS, National Progress Report, March 2012.

⁶⁹ EMMUS, 2012.

mortality, immunization programmes have been accompanied by other support measures, such as the minimum package of health services,⁷⁰ the implementation in 2012 of the “Manman ak timoun an sante” (healthy mothers and children) programme,⁷¹ the Integrated Management of Childhood Illness in 2009⁷² and the refurbishment of hospitals and health centres.

4. Prevention of malnutrition

154. Malnutrition, like health problems, is also a concern for the Committee, which recommended that the Government prevent and combat malnutrition, especially among vulnerable and disadvantaged groups of children, and continue to promote proper breastfeeding practices. According to EMMUS V, in 2012, just over one fifth, or 22 per cent, of children under 5 were suffering from chronic malnutrition, 8 per cent from severe malnutrition and 14 per cent from moderate malnutrition. In 2005-2006 (EMMUS IV), 29.7 per cent were suffering from chronic malnutrition, compared with 21.9 per cent in 2012 (EMMUS V), while 10 per cent of children under 5 were suffering from acute malnutrition in 2005, compared with 5 per cent in 2012 (table 9d).

155. The national nutrition policy introduced by the Ministry of Public Health and Population is primarily targeted at vulnerable population groups, especially children aged under 5, pregnant and breastfeeding women, older persons and patients with tuberculosis or HIV/AIDS. The policy, which was updated and adopted in 2011, has six strategic lines of action: (1) prevention of malnutrition; (2) nutritional care; (3) nutritional protection in emergency situations; (4) improvement of nutrition information systems; (5) intra- and interministerial and intersectoral coordination; and (6) applied research and training on nutrition.

156. To address the problem of malnutrition, the Ministry of Public Health and Population, supported by PAHO, established the National Protocol for the Management of Acute Malnutrition in Haiti through the National Food and Nutrition Programme Coordination Unit.⁷³ The Ministry of National Education and Vocational Training also launched a policy document on integrated early childhood development in December 2012, aimed at, inter alia, raising parents’ awareness of the need to feed their small children properly, an important learning tool at the preschool level.

157. The Government is committed to promoting breastfeeding through awareness-raising campaigns in order to prevent malnutrition. In 2012, according to EMMUS V, 97 per cent of children were breastfed (compared with 96 per cent in 2005-2006 according to EMMUS IV), 81 per cent of them within the 24 hours following birth.

158. After the earthquake, there was an unprecedented increase in the nutrition services offered to women and children in order to prevent and treat malnutrition. This increase was supported, inter alia, by UNICEF,⁷⁴ which provided coordination assistance in order to increase equal access to care and material, technical and

⁷⁰ The minimum package of health service comprises four basic services: medicine, paediatrics, surgery and obstetrics-gynaecology. It focuses, in particular, on comprehensive care of the child; pregnancy, childbirth and reproductive health care; handling of medical and surgical emergencies and basic dental care; communicable disease control; environmental sanitation and drinking water supply; availability of and access to essential medicines; and participatory health education.

⁷¹ Made possible by financial support from CIDA, WHO, UNICEF and UNFPA, this programme subsidizes care for pregnant women and children aged under 5 in 19 centres and hospitals in the country’s 10 departments (see Ministry of Public Health and Population: *Les grandes réalisations 2011-2012*).

⁷² Model involving community and institutional actions to address the main causes of infant and child morbidity and mortality.

⁷³ This programme was launched in 2009 and revised in 2010.

⁷⁴ UNICEF, op. cit., p. 13.

financial assistance in order to establish 290 outpatient units and 24 stabilization centres for inpatient care of children suffering from severe acute malnutrition in conjunction with other medical complications. Over the same period, in order to guard against the consequences of the influx of free infant formula, units offering advice on baby nutrition were set up in camps for internally displaced persons, offering support to persons in distress in order to ensure the prevention, detection and treatment of acute malnutrition. These units were established primarily in Ouest and Artibonite departments. A baby-friendly hospital programme was also introduced by the Ministry of Public Health and Population in late 2012 to ensure that all maternity units become breastfeeding support centres.

159. Many institutions including, PAHO, WFP,⁷⁵ UNICEF⁷⁶ and a number of NGOs have provided sustained support to the Government in this regard.

B. Health and health services, in particular primary health care

160. The right to health is one of the fundamental rights recognized by the Haitian Constitution.⁷⁷ It applies to both adults and children. The Committee recommended that the Government, by, inter alia, implementing as soon as possible its National Health Plan: (a) reinforce its efforts to allocate appropriate resources and develop and implement comprehensive policies and programmes to improve the health situation of children, particularly in rural areas; and (b) facilitate greater access to primary health services, notably in rural areas.

161. The lessons learned from the National Growth and Poverty Reduction Strategy Paper show that the resources allocated to the health sector are insufficient to ensure a significant improvement in health coverage in terms of quality of care and universal access to health care. In parallel with the National Growth and Poverty Reduction Strategy Paper, the implementation of which is time-bound, the Strategic Plan for the Development of Haiti⁷⁸ aims to make Haiti an emerging country by 2030 and provides for the extensive strengthening of health services.⁷⁹ The Government's objectives are therefore to equip the country with university teaching hospitals, to build referral hospitals in regional development poles and community referral hospitals in local development poles and to establish nationwide school health programmes.

162. In order to implement the right to health, the Government, through the Ministry of Public Health and Population, drew up a National Health Plan in 2003 that incorporated a Strategic Child Health Plan 2003-2008, which is currently being reviewed. The main components of the National Health Plan are building technical and institutional capacities so that the Ministry can play a specialized role in the running of the health service; decentralizing key monitoring and oversight functions of departmental directorates; increasing community participation in the development of

⁷⁵ WFP supported Haiti in the aftermath of tropical storm Isaac and Hurricane Sandy by focusing on activities in the area of nutrition and prevention and treatment of moderate acute malnutrition for 100,000 women and children (see the website *Crises en Haïti* — fr.wfp.org).

⁷⁶ UNICEF and the Ministry of Public Health and Population are working together to implement a comprehensive strategy encompassing the treatment and recovery of severely malnourished children and the nationwide distribution of vitamin A to children aged under 5 and breastfeeding women (see www.unicef.org/haiti/french/nutrition.html).

⁷⁷ According to article 19 of the Convention, "the State has an absolute duty to ensure the right to health and respect for the human person to all citizens without distinction".

⁷⁸ The Strategic Plan for the Development of Haiti comprises several documents, including the National Growth and Poverty Reduction Strategy Paper.

⁷⁹ Ministry of Planning and External Cooperation, Strategic Plan for the Development of Haiti, Port-au-Prince, 2012, p. 4.

local health services; and expanding the availability of basic health services, particularly maternal and child health services, through municipal health units.

163. The implementation of the National Health Plan is starting to produce some positive results in terms of access to health services (1,531,960 paediatric visits in 2012), reduction of infant and child mortality, reduction of maternal mortality and training of midwives, continuation of immunization campaigns and prevention of malnutrition, prevention of HIV/AIDS transmission, the particular situation and health of children with disabilities and the sexual health and education of adolescents.

Access to health services

164. The Government's efforts in the health sector have been designed to increase children's access to medical care by strengthening the sector's institutional capacities and infrastructure. Access to primary health care has been given priority in both urban and rural areas, in line with the Committee's recommendations, in order to reach vulnerable and disadvantaged groups of children.

165. In almost all departments of the country, the Ministry of Public Health and Population has renovated, extended and modernized hospitals' internal medicine departments and built paediatric and surgical units. These efforts have included⁸⁰ the construction of a hospital for respiratory diseases in Sigüeneau (Ouest department), three health centres in Sud department and 12 health centres in Artibonite department; the construction and/or renovation of 21 health blocks in the different communes of Nord department; the construction of two incinerators, one at Saint-Marc (Artibonite department) and the other at Gonaïves (Artibonite department), and a health centre in Grand Bassin (Nord-Est department); the renovation of the Boucan Carré health centre (Centre department) and the Grand Vincent dispensary (Grand-Anse department); the strengthening of the Sainte Croix de Léogane hospital (Ouest department); the renovation of the Beaudin clinic in Petit Goâve (Western department); and the construction of a community referral hospital in Bassin Bleu (Nord-Ouest department).

166. The Ministry of Public Health and Population has organized training courses nationwide for social workers, matrons, doctors, nurses, laboratory technicians, auxiliary staff and health workers on the treatment of certain illnesses, in order to ensure that health-care institutions function more efficiently. The National Health Plan also provides for the training of health professionals; some medical specialists are trained in Haiti and others abroad. For example, under the programme between Haiti and Cuba, 818 doctors, 32 biomedical technicians and 58 health workers have been trained in Cuba, with the Haitian Government covering the students' costs. Until such time as there are sufficient Haitian specialists to provide nationwide coverage, foreign health workers, including 619 Cuban health professionals, have been working to improve the population's health. Paid for mostly by the Haitian Government, these workers are providing low-cost services in several parts of the country, especially those affected by the earthquake.

167. These health institutions are partly supplied with medical equipment or supplies such as microscopes, medicines and health-care pamphlets. The Ministry of Public Health and Population also established a national health information system in 2008 to make information on health conditions, services and resources available as part of efforts to guide health initiatives.

168. Within the framework of the National Health Plan, in 2003 the Ministry of Public Health and Population implemented a programme to organize and rationalize

⁸⁰ National Growth and Poverty Reduction Strategy Paper, published in 2011 by the Ministry of Planning and External Cooperation, p. 58.

the health sector, which was designed to improve maternal and child health, particularly the quality, availability and efficiency of the services provided. More precisely, the programme targets women of childbearing age (15 to 49 years) and children under 5. The expected outcomes of the programme have not yet been achieved, however: of a total of 58 units, only six municipal health units⁸¹ are currently operational.

C. Prevention of HIV/AIDS

169. The Committee recommended that Haiti: (a) increase its efforts to prevent HIV/AIDS, taking into consideration the recommendations of the Committee adopted at its day of general discussion on children living in a world with HIV/AIDS; (b) urgently take measures to prevent mother-to-child transmission, inter alia, by combining them with activities to reduce maternal mortality, and take adequate measures to address the impact upon children of the HIV/AIDS-related deaths of parents, teachers and others, in terms of children's reduced access to family life, adoption, emotional care and education; (c) strengthen its efforts to raise awareness about HIV/AIDS among adolescents, particularly among those belonging to vulnerable groups; and (d) seek further technical assistance from, among others, the Joint United Nations Programme on HIV/AIDS.

170. The HIV/AIDS epidemic remains a huge challenge for the Haitian health system. Considerable efforts have been made to halt its spread and HIV/AIDS prevalence has fallen significantly from around 6 per cent in the 1990s to 4 per cent in 2000 and 2.2 per cent in 2012 (EMMUS V).

171. The epidemic is generalized but tends to affect women and young people most. The prevalence rate is 2.7 per cent for women, compared with 1.7 per cent for men. Among young people aged 15 to 24, the rate is 0.6 per cent for men and 1.5 per cent for women. Young people aged 15 to 24 account for more than a third of all new cases of HIV infection.⁸² According to EMMUS V, HIV prevalence is much higher in the camps (3.9 per cent), particularly among women (5.7 per cent). These figures are consistent with another PSI survey,⁸³ which shows that nearly 70 per cent of new infections are among women and that the sex worker subgroup is particularly affected, with a rate of 8.4 per cent. A comparison with data for 2009, 2010 and 2011 is provided in table 12a,⁸⁴ while table 12b annexed to this report gives the EMMUS V figures. According to data from the Ministry of Public Health and Population and the National Alliance of State and Territorial AIDS Directors (NASTAD) (table 12c), 4.7 per cent of children aged 0 to 14 were infected with HIV/AIDS in 2011.

172. One of the most devastating effects of the HIV epidemic is the increase in the number of orphans and vulnerable children following the death or serious illness of a parent. In 2012, of a projected total of 88,200 children orphaned by AIDS, 70,970 were enrolled in programmes, of whom only 43,659, or 61.5 per cent, had been covered up until 2010.

173. The Government has introduced several prevention and support measures and programmes. The Ministry of Public Health and Population drew up a national strategic plan to combat HIV/AIDS 2002-2006, which covers both prevention and care. This national multisectoral strategic plan has a wider range of action, permitting

⁸¹ According to the National Growth and Poverty Reduction Strategy Paper, the goal was to provide the country with 63 municipal health units by 2012.

⁸² Ministry of Public Health and Population, Declaration of Commitment on HIV/AIDS, National Progress Report, 2012.

⁸³ PSI/Haiti 2012.

⁸⁴ Ministry of Public Health and Population, National AIDS Programme/UNAIDS/WHO, March 2012.

greater integration of State sectors specifically in the fight against HIV/AIDS and more generally in the sustainable improvement of the population's health.⁸⁵ The Ministry of Education and Vocational Training also plays a role through its 2002 sectoral strategic education plan for the prevention and control of HIV/AIDS, which includes preventive measures in the form of messages broadcast on radio and television and aimed at young people.

174. Between January 2011 and December 2012, a National AIDS Programme was drawn up as part of the national multisectoral strategic plan in order to prevent an increase in the risk of HIV/AIDS-related infection as a result of the worsening socioeconomic situation and the damage to health facilities caused by the earthquake.⁸⁶ The Programme targets the population of displaced person camps, young people aged 10 to 24, pregnant women, women of childbearing age (15 to 49 years) and persons with reduced mobility.

175. Many factors contribute to the spread of HIV/AIDS in Haiti. According to a Ministry of Planning and External Cooperation study,⁸⁷ these include poverty, multiple sexual partners, poor access to health care and health-related information, stigmatization of persons affected by HIV/AIDS and lack of monitoring and treatment mechanisms for sexually transmitted infections. The importance of risky sexual behaviours as a factor in understanding the prevalence of HIV/AIDS needs to be mentioned. The number of sexual partners and the incidence of unprotected sex must be taken into account. For example, 57 per cent of women having had more than two partners in 12 months did not use condoms during their most recent sexual encounter (EMMUS V).

176. As to young people's knowledge about HIV, 31.1 per cent of 15 to 24 year olds can correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission. EMMUS V included a whole series of questions about knowledge of HIV/AIDS and how it is transmitted and prevented and on risky behaviours. According to the results of this survey (table 10b), nearly 100 per cent of women and men aged between 15 and 49 said that they knew about or had heard about HIV/AIDS. This awareness is a positive factor in the fight against the disease. However, even though 97 per cent of the population know how HIV/AIDS is transmitted, the proportion of those being tested remains high for both sexes: 97 per cent for women and 94 per cent for men.

177. Some 13 per cent of women and 28.3 per cent of men aged 20 to 49 who were surveyed had become sexually active before the age of 15. The proportion of 15 to 24 year olds who said that they had used a condom during their most recent at-risk sexual encounter was 51 per cent for boys and 23 per cent for girls in 2011. In terms of counselling and testing, according to EMMUS V only 7 per cent of boys and 18 per cent of girls aged 15 to 19 had been tested and knew their results.

⁸⁵ Ministry of Public Health and Population, *Manuel de prise en charge clinique et thérapeutique des adults et adolescents vivant avec le VIH*, Port-au-Prince, 2008, p. ii.

⁸⁶ Ministry of Public Health and Population, National AIDS Programme, Port-au-Prince, April 2012, p. 18-19. The National AIDS Programme has the following objectives: (1) to continue the implementation of the national plan; (2) to ensure the availability of HIV/AIDS prevention and treatment services to persons living in temporary shelters; (3) to foster community involvement in prevention and care; (4) to ensure the availability of HIV/AIDS prevention and treatment services to the displaced and/or mobile workforce; and (5) to build the institutional capacity of the public and private sectors with a view to restoring and extending HIV/AIDS prevention and treatment services.

⁸⁷ Ministry of Economy and Finance, IHSI, *OMD, état, tendances et perspectives*, 2009, p. 39.

178. With regard to HIV counselling and testing services,⁸⁸ only 39 per cent of health-care establishments (354 out of 908) offer testing services: 85 per cent of hospitals and 11 per cent of clinics. Fifty per cent of private health-care establishments offer testing services, compared with 30 per cent of public establishments. Clinics have also been opened in several cities across the country to raise the public's, particularly young people's, awareness of HIV/AIDS.

179. The care offered includes placing children with HIV/AIDS in treatment centres and putting them on paediatric antiretrovirals. The Government, in parallel or in conjunction with other institutions, provides medical and psychosocial support to people living with HIV/AIDS, particularly those who are victims of stigmatization and discrimination.⁸⁹ Special prevention and care centres, as well as support groups, have been established throughout the country to provide psychological assistance to people living with HIV/AIDS. In that context, in 2003 the Ministry of Public Health and Population produced and distributed a first version of the manual on clinical and therapeutic care standards with the aim of standardizing care for people living with HIV/AIDS. In the light of scientific advances and the availability of new antiretrovirals on the market, the Ministry of Public Health and Population updated this manual on clinical and therapeutic care for adults and adolescents in 2008.⁹⁰

180. With regard to mother-to-child transmission of HIV, significant progress has been achieved through the partnerships formed between the Government and organizations such as UNICEF, particularly through the National Programme for the Prevention of Mother-to-Child Transmission of HIV, which has been supporting a growing number of pregnant women. According to the Ministry of Public Health and Population, the number of centres for the prevention of mother-to-child transmission of HIV has increased from 77 to 88 in 2006 and 139 in 2013. In 2006, 12 per cent of HIV-positive pregnant women had access to antiretroviral treatments, thereby preventing transmission of the virus to their babies. As a result, HIV/AIDS prevalence among pregnant women fell steadily and substantially over the period from 1993 to 2009, from 9.4 per cent to 3 per cent in urban areas and from 3.5 per cent to 2.4 per cent in rural areas (table 11a). From 2010 to 2012, the National Programme for the Prevention of Mother-to-Child Transmission of HIV permitted the testing of 149,000 pregnant women and provided antiretroviral treatment to 1,875 HIV-positive pregnant women.⁹¹

181. Also with regard to the prevention of mother-to-child transmission of HIV, around 51 per cent of pregnant women were tested for HIV in 2012, of whom 2.3 per cent tested positive.⁹² Furthermore, around 50 per cent of these women received antiretroviral prophylaxis⁹³ to prevent transmission of the virus to their children. According to the same sources, only 33.8 per cent of children born to HIV-positive mothers were tested before the age of two months. In 2012, nearly 12,000 children were living with HIV, of whom 47 per cent were receiving antiretroviral therapy.

⁸⁸ EPSSS, 2013.

⁸⁹ Some 55 per cent of the psychosocial care provided to people living with HIV via voluntary counselling and testing websites is provided by five institutions. These institutions also offer 85 per cent of palliative care and antiretroviral treatment. (see Ministry of Planning and External Cooperation, Final report on the implementation of the first National Growth and Poverty Reduction Strategy Paper 2008-2010, 2011, pp. 58-59.)

⁹⁰ www.who.int/hiv/pub/guidelines/haiti_art.pdf.

⁹¹ UNICEF, *Children of Haiti: Two Years After. What is changing? Who is making the change?* Port-au-Prince, 2012, p. 17.

⁹² Ministry of Public Health and Population, National AIDS Programme, HIV and Syphilis Sentinel Survey among Pregnant Women in Haiti in 2012.

⁹³ National AIDS Programme, National Data Quality Commission. Figures calculated after readjusting the denominator. The numerator is taken from the results of comprehensive monitoring, evaluation and surveillance.

182. It must be noted that the antiretroviral therapy protocol is implemented in various ways and that only 14 per cent of health-care establishments administer antiretrovirals effectively.⁹⁴ Moreover, in 2010, a period characterized by national disasters and emergencies, there was a drop in the proportion of children receiving antiretroviral therapy: from 62 per cent to 45 per cent in 2011, rising slightly again to 47 per cent in 2012.

183. There are 126 health-care establishments in Haiti, (table 11b) that administer antiretrovirals to people living with HIV (adults, adolescents and children). However, these establishments were set up to treat adults. Moreover, most of them are located in urban areas and major cities. This raises the question of how a population living below the poverty line and affected by the devastating effects of the disease is supposed to cover the indirect costs, such as transport and transfers where required.

184. The Fondation pour la santé reproductrice et l'éducation familiale (FOSREF), the Volontariat pour le développement d'Haïti (Haiti volunteering service, VDH) and PSI with their multidisciplinary services are three organizations that are particularly well known for their awareness-raising work with young people in Haiti. There are only 16 institutions that offer services tailored to adolescents and young people (table 11c), 56 per cent of which are concentrated in Ouest department.⁹⁵ These youth clinics, set up by FOSREF and the Haitian Group for the Study of Kaposi's Sarcoma and Opportunistic Infections (GHESKIO), cannot on their own meet all the screening needs of young people.

185. Several United Nations programmes have contributed to the work on HIV/AIDS. The Joint United Nations Programme on HIV/AIDS (UNAIDS) has mobilized technical working groups to develop its strategic priorities on extending access to voluntary testing and counselling, improving the national surveillance system, reducing HIV transmission, improving the care of people with HIV/AIDS and ensuring the advancement of women. UNFPA has funded programmes targeted at young people, including POZ, FOSREF and VDH. UNICEF has worked with NGOs on preventing mother-to-child transmission, including through the provision of antiretrovirals. UNDP has funded research into community responses to HIV/AIDS, while PAHO has worked with the Centers for Disease Control and Prevention (CDC) to improve HIV/AIDS surveillance systems and with POZ to run a reproductive health hotline. USAID has supported various organizations in the areas of prevention, services and treatment, advocacy and community engagement. GHESKIO and Zanmi Lasanté have also undertaken vaccine trials.

186. There has been a decline in the number of NGOs that focus on HIV/AIDS, from 10 in 2009 to only two, as a result of the disasters that have hit the country and dwindling financial resources.

187. The Ministry of National Education and Vocational Training has designed curricula to tackle the issue of HIV. The private education sector also includes the subject in sex education classes.

⁹⁴ Ministry of Public Health and Population, Evaluation of Health-care Delivery, Haiti 2013 (preliminary report).

⁹⁵ Base des données MESI.ht.

D. Efforts to address the most prevalent health challenges, to promote the physical and mental health and well-being of children and to prevent and deal with communicable and non-communicable diseases

188. Much of the information relevant to this section is provided under previous sections.

189. The October 2010 cholera epidemic, however, deserves special mention since it constituted a major public health event in Haiti. Because of the lack of hygiene and limited access to sanitation described above, the biggest outbreak in the world to occur in only one country had affected a cumulative total of 668,270 persons, with a fatality rate of 0.9 per cent or 8,197 deaths, by 28 July 2013, two and a half years after the outbreak of the epidemic in October 2010.⁹⁶

190. EMMUS V showed that, between October 2010 and 2012, 16 per cent of households surveyed reported having had at least one family member infected by the disease, whether he or she had died or survived. Comparing this number to the total population of the households surveyed, 5 per cent of the total population had been infected. Among those infected with cholera, 35.1 per cent were aged under 20. Among those who died, 24.9 per cent were aged under 20 and among those who survived, 35.7 per cent were under 20.

191. Between 1 December 2012 and 18 March 2013, 24,192 suspected cases of cholera and 204 associated deaths were recorded by the surveillance system. However, this overall number of suspected cases, while still high, hides a marked decline and a spatial heterogeneity.⁹⁷

192. Even today, there are still insufficient human resources to conduct targeted community prevention efforts, including a lack of epidemiologists. Cholera outreach workers are underfunded and the deployment of multidisciplinary health workers is still not systematic. Moreover, some funding ceased at the end of 2012 and municipal health units are often unable to pay for staff to conduct awareness-raising activities and distribute inputs. Since November 2012, the country's 140 municipalities have had two community drinking water and sanitation officers, whose role is to map water points and deal with emergencies.

193. The lack of logistical resources makes it difficult to conduct field investigations and make household visits. Stocks of home chlorination products were still far from adequate in 2013.

194. This state of affairs is compounded by coordination problems between response teams and those responsible for producing, disseminating and investigating epidemiological alerts. The flow of information between the Health Decentralization Support Unit and the Department of Laboratory and Research Epidemiology within the Ministry of Public Health and Population is not yet optimal and cooperation between cholera epidemiologists and coordinators needs to be improved, given that, at the local level, cholera outreach workers are not yet known to health institutions. The holding of health and water, sanitation and hygiene sectoral meetings is being strengthened, as is the Government's monitoring of the commercial sector and all relevant NGOs.

⁹⁶ http://reliefweb.int/sites/reliefweb.int/files/resources/Cholera_Apercu_Humanitaire_1er%20Aout%202013.pdf.

⁹⁷ <https://haiti.humanitarianresponse.info/system/files/documents/files/APHM%20-%20mission%20cholera%20Haiti%20-%20rapport%20final%20avril%202013.pdf>.

E. Adolescent health and sexual education

195. The Committee recommended that Haiti: (a) undertake all necessary measures to formulate adequate adolescent health policies and programmes, paying particular attention to adolescent girls; and (b) strengthen sexual and reproductive health education, mental health and adolescent-sensitive counselling services and make them accessible to adolescents.

196. In an effort to comply with the Convention and the Committee's general comment (CRC/GC/2003/4)⁹⁸ and respond to its recommendations, the Government is working in partnership with NGOs and international organizations such as FOSREF, VDH, UNICEF, UNAIDS, PSI and World Relief to provide young people and adolescents with reasonable support. The efforts of the Government and its partners involve the implementation of various programmes, such as awareness-raising campaigns on the prevention of sexually transmitted diseases, particularly HIV/AIDS, and early pregnancy, sexual, reproductive and family health education, the provision of youth clinical services and the establishment of youth centres. These youth centres are community centres in all the country's departments that offer young people the opportunity to improve their quality of life and develop their personal and social skills so that they can make a successful transition to adulthood.

197. EMMUS V data indicate that 8.7 per cent of young women aged 15 to 19 use contraception, as opposed to 21.5 per cent in 2005-2006. According to 2005-2006 figures, 11.6 per cent of women had their first child before the age of 20, which compares with 11.2 per cent in 2012. However, according to social service professionals, the number of young girls having early pregnancies is sometimes cause for concern.

F. The particular situation and health of children with disabilities

198. Given their particular situation, children with disabilities are a great source of concern for the Committee. It therefore recommended that the State party: (a) develop a comprehensive strategy, including the necessary plans of action, for children with disabilities; (b) collect data on disabled children in order to review their situation in terms of their access to suitable health care, education services and employment opportunities; (c) take note of the Standard Rules on the Equalization of Opportunities for Persons with Disabilities (General Assembly resolution 48/96, annex) and of the Committee's recommendations adopted at its day of general discussion on the rights of children with disabilities (CRC/C/69, paras. 310-339); (d) allocate adequate resources to strengthen services for children with disabilities, support their families and train professionals in the field; and (e) seek assistance from, among others, UNICEF and WHO.

199. Through its research, the Ministry of Social Affairs and Labour has identified three causes of disability:⁹⁹ genetic problems, poor access to or ignorance of basic health services and the consequences of ill-treatment or violent acts (including those committed against the child's mother during pregnancy).

⁹⁸ This general comment concerns adolescent health and development in the context of the Convention on the Rights of the Child (see in particular paras. 2, 26, 28, 30 and 31 thereof).

⁹⁹ Ministry of Social Affairs and Labour, *Plan national de protection, Enfance en situation difficile ou de vulnérabilité*, Port-au-Prince, November 2007, p. 15 (sect. 2).

1. Development of a comprehensive strategy and action plans for children with disabilities

200. In May 2007, as an initial administrative step, the Government established the State Secretariat for the Integration of Persons with Disabilities, under the control of the Ministry of Social Affairs and Labour, whose main role is to take action to prevent disabilities and to integrate persons with disabilities.

201. Parliament ratified the Inter-American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities and the Convention on the Rights of Persons with Disabilities and its two Optional Protocols in 2009. Pursuant to these instruments, an Act on the integration of persons with disabilities was passed in 2009 and promulgated in 2012. Its aim is to promote the principles and values that will contribute to the full integration of persons with disabilities in all spheres of Haitian society. It defines the main lines of action relating to the rights of children with disabilities to respect and development.

202. The Government also adopted a national disability policy in 2009, but has yet to implement a comprehensive strategy specifically for children with disabilities. The State Secretariat for the Integration of Persons with Disabilities is currently working on several projects¹⁰⁰ to implement the 2009 national disability policy drawn up by the Ministry of Social Affairs and Labour, including: the establishment of a Haitian-Brazilian rehabilitation institute, whose main task will be to train professionals and provide rehabilitation services; an accessible transport project to facilitate the mobility of persons with disabilities through the introduction of accessible buses in the public transport system and a national mass education plan¹⁰¹ to tackle the very high numbers of children with disabilities who are not in school. Of an estimated 120,000 school-age children with disabilities, only 2,000 are actually in school.¹⁰²

2. Data on children with disabilities

203. A special database on children with disabilities has yet to be established. Civil society organizations working with children with disabilities provide approximate figures. In 2003, the number of persons with disabilities was estimated at 800,000¹⁰³ (table 13 provides data disaggregated by disability), of whom between 200,000 and 300,000 were children.¹⁰⁴

204. The State Secretariat for the Integration of Persons with Disabilities also plans to conduct, in conjunction with the Haitian Institute of Statistics and Computing (IHSI) and with technical support from the Brazilian Government, a survey of persons with disabilities in Haiti in an attempt to establish a reliable database. The number of qualified personnel able to provide support to children with disabilities is extremely limited.

¹⁰⁰ See www.haitilibre.com/article-2492-haiti-société-des-projets-pour-les-handicapes.html.

¹⁰¹ Special education for children with disabilities is the eighth component of the operational plan 2008-2015 developed by the State Secretariat for the Integration of Persons with Disabilities.

¹⁰² Ministry of Social Affairs and Labour, *op. cit.* p. 42.

¹⁰³ Ministry of Social Affairs and Labour, *Politique du handicap, les grandes orientations*, Port-au-Prince, September 2009, p. 39.

¹⁰⁴ *Ibid.* p. 16.

3. Equal opportunities for children with disabilities compared to other children and the resources required

205. Since the establishment of the State Secretariat for the Integration of Persons with Disabilities in 2007, the Government has committed itself to providing equal rights to children with disabilities.

206. Additional information on education can be found under the section on education. Nevertheless, it should be noted that there are nine establishments in Ouest department, one in Nord department, four in Sud department and one in Sud-Est department that focus on teaching children with disabilities. In all, these establishments teach almost 1,000 children. The best-known special schools are Saint Vincent de Paul school (run by the Episcopal Church), the Monfort Institute and the Special Education Centre. These institutions provide vocational training, physical and mental health and rehabilitation services and assistive technologies. The Espoir hospital also offers services to children with disabilities. Moreover, the State Secretariat for the Integration of Persons with Disabilities, with USAID support, has launched a project to renovate school buildings so that they conform to universal accessibility standards.

207. The State Secretariat has teamed up with the hospital of the State University of Haiti and hospitals forming part of the Développement des activités de santé en Haïti (development of health activities in Haiti, DASH) network enabling children with disabilities to receive care at preferential costs.

208. The State Secretariat also undertakes sign language training, promotes sport for persons with disabilities in cooperation with several other specialized institutions and strengthens organizations of persons with disabilities. These projects are run in parallel with the Community Integration Programme for Children with Disabilities, launched in 2007 by the Government under the authority and coordination of the Ministry of Social Affairs and Labour. The Programme, with targets for the period from 2008 to 2013, was aimed at the full realization of the rights of boys and girls with special needs to survival, development and well-being¹⁰⁵. Despite limited resources, the Government, through the State Secretariat for the Integration of Persons with Disabilities, is supporting some families who have children with disabilities.

G. Measures to prohibit and eliminate all forms of harmful traditional practices, including female genital mutilation and early and forced marriages

209. Genital mutilation is not practised in Haiti. Although forced marriages are not widespread, a few isolated cases have arisen where some ill-advised justices of the peace have counselled parents of young girls who have been raped to marry them to their rapists. There are no official statistics on such cases, but they do not appear to be frequent. It should, however, be noted that all forced marriage is illegal¹⁰⁶ in the country.

H. Measures to protect children from substance abuse

210. A national drug control plan involving rehabilitation, treatment and social reintegration programmes for drug addicts, especially children and adolescents, was

¹⁰⁵ Ministry of Social Affairs and Labour, *op. cit.*, p. 20 (sect. 4).

¹⁰⁶ Civil Code, art. 134: "In the absence of consent, the marriage shall be declared null and void".

drawn up in 2003. Article 65 of the Act on the Control and Suppression of Illicit Drug Trafficking stipulates that anyone supplying a minor with one of the toxic chemical inhalants on the list published by the Ministry of Public Health and Population is liable to three years' imprisonment and a fine of 100,000 to 500,000 gourdes.

211. According to a survey by the National Drug Control Commission (CONALD) in 2005,¹⁰⁷ 53 per cent of schoolchildren had already consumed alcohol, 11.12 per cent had already smoked a cigarette, 29.70 per cent had used tranquilizers and 11.04 per cent had used an illegal substance. CONALD, in partnership with the Social Welfare and Research Institute, has also conducted prevention and treatment activities for incarcerated children and put in place a course on drug addiction to train professionals (medical personnel, social workers, psychologists) to work with drug addicts. In 2007-2008, 22 people completed the first course, followed by 20 people in 2008-2009. Following a 2009 survey revealing that nearly 60 per cent of school-age children had consumed alcohol and 53 per cent had used illicit substances, CONALD launched a campaign against drug use in schools in 2013.

I. Measures to ensure the protection of children with incarcerated parents and children living in prison with their mothers

212. Currently, there are no children living in prison with their mothers. However, if a mother gives birth in prison, the child stays with her for up to three months to enable her to breastfeed. The child is then placed with his or her extended family or taken into care by the Social Welfare and Research Institute. During the breastfeeding period, the child is brought to its mother daily.

213. The Social Welfare and Research Institute's prison social service does not take the children of incarcerated parents into care systematically. However, if one or both parents are incarcerated, the Institute makes a family visit to assess the situation of the children. Children are taken into care by child social services as and when necessary. If the parents so request, the Social Welfare and Research Institute must monitor the extended family's care of the child regularly.

J. Standard of living and measures taken, including material assistance and support programmes with regard to nutrition, clothing and housing, to ensure the child's physical, mental, spiritual, moral and social development and to reduce poverty and inequality

214. Information is provided under other sections.

K. Social security and childcare services and facilities

215. The following agencies form the main link between the social security system and the Ministry of Social Affairs and Labour: the Occupational Injury, Sickness and Maternity Insurance Office, the National Old-Age Insurance Office, the Civil Pensions Directorate, the Social Welfare Fund, the Public Enterprise for the Promotion of Social Housing and the Social Welfare and Research Institute. The first three institutions do not provide direct services to children.

¹⁰⁷ CONALD, Results of the school survey on the prevalence of drug use among secondary school students in Haiti, 2005.

216. There is a fee-paying childcare service, run exclusively by the private sector. However, this service is not affordable for vulnerable families.

L. Standard of living and material assistance measures

217. According to the latest *Human Development Report* published by UNDP in March 2013, Haiti ranks 161 out of 187 countries. This ranking demonstrates clearly the situation of poverty in which the vast majority of Haitian children.

218. The Government has put programmes in place through the Fund for Economic and Social Assistance and some ministries such as the Ministry of Planning and External Cooperation. The Ede Pèp programme, set up in 2012, is the most notable and provides support to vulnerable persons and families. Other programmes include: the Ti Manman Cheri programme, set up in 2013, under which 1,000 gourdes are given monthly to mothers with more than three children); the provision of solidarity baskets to the most vulnerable persons; mobile canteens providing hot meals to vulnerable persons in all urban centres; the opening of 60 community restaurants, 30 of them for the most vulnerable persons; and community bakeries providing free bread. The Aba Grangou programme,¹⁰⁸ designed to reduce hunger by 50 per cent by the end of 2016 and eradicate it by 2025, involves providing school meals, preventing malnutrition and promoting local produce.

219. It is important to note that some programmes are supported by the international community, primarily the World Bank, IDB and Petrocaribe funds.

VII. Education, leisure and cultural activities

A. Right to education

220. The Committee recommended that Haiti: (a) expedite an effective implementation of the National Education and Training Plan; and (b) continue its efforts to ensure that all children, especially girls, have equal access to educational opportunities, paying special attention to those living in rural and remote areas; (c) take the necessary measures to guarantee access to adapted and adequate curricula designed for vulnerable children such as street children, *restaveks* and over-age schoolchildren or adolescents; (d) take the necessary measures to identify the causes of the high repetition and drop-out rates in primary schools and take steps to redress the situation; (e) better monitor school curricula and the quality of education in private schools; (f) introduce, strengthen and systematize human rights education, including the rights of the child, in school curricula, beginning in primary school; (g) provide teachers with adequate training; (h) review its policy to ensure leadership in the governance of the education sector, notably by widening the powers of the National Partnership Commission; and (i) seek technical assistance from, among others, UNESCO and UNICEF.

221. In terms of follow-up, the Government has put in place a mass education policy, including a sectoral reform plan 2010-2015, and has strengthened teacher training and vocational guidance.

¹⁰⁸ Decree of 4 January 2012 appointing the National Commission against Hunger and Malnutrition (COLFAN), better known as Aba Grangou.

1. Mass education policy

222. The Working Group on Education and Training, created in 2008, proposed a national education pact between the State and private stakeholders in the education system aimed at improving that system. The pact requires private stakeholders to recommend to the Government strategies and initiatives for increasing access to education and improving the quality of Haitian schools and for modernizing the organization and functioning of the national education system and to draw up and submit for discussion a draft national pact on education. The Working Group's mandate was extended on the same terms in 2009 and renewed in 2010, with an expanded remit that includes the rebuilding of school infrastructures.

223. The Working Group's 2008 recommendations were followed in 2010 by the development of the Operational Plan for the Haitian Educational System and, in 2011, by the Programme for Free Compulsory Universal Education as part of the mass education policy.

Operational Plan for the Haitian Educational System

224. The State developed the five-year (2010-2015) Operational Plan in response to the Working Group's recommendations. This was done with the technical and financial assistance of various partners, including USAID, the Spanish Agency for International Development Cooperation (AECID), CIDA, the European Union, the World Bank and UNICEF. The cost of implementing the Plan is estimated at approximately G 172 billion (US\$ 4.3 billion). Its goals are the following: (1) to make Haitian schools accessible to all Haitians, regardless of their place of residence or social status; and (2) to provide a quality education based on a common foundation of knowledge and expertise imparted by competent teachers. From 2010 to December 2012, within the framework of the Plan, G 25.412 billion (US\$ 635.3 million), of which 48 per cent came from public funds, were invested in the sector.

225. The Government acknowledges, however, that some projects envisaged in the Plan have not yet been implemented for lack of funding, as only about 10 per cent of the amount pledged by donors has been allocated. This difficulty was emphasized by the Ministry of Education and Vocational Training at the opening ceremony for the Plan's sectoral review in February 2013, in the presence of the technical and financial partners.

Programme for Free Compulsory Universal Education

226. This Programme, launched in the 2011/12 school year, is in line with the Millennium Development Goal and is aimed at all school-age children, without distinction, in particular those aged 6 to 12 years in the first and second cycles of basic education. Under the Programme, children are distributed as follows:

- Children aged 6 and 7 will receive six years of free schooling;
- Children aged 8 and 9 will follow an accelerated four-year programme;
- Children aged 10 and over will receive two years of schooling. In this connection, the Government will hold an official examination in 2014 for children in this age group targeted by the Programme.

227. To implement the Programme, the Government has recruited graduates of the National Teacher Training College and the Accelerated Initial Training Programme, as well as holders of vocational training certificates, who have been given special training. The cost of the Programme over five years is G 11.728 billion (US\$ 293.2 million). Currently, 1,288,956 children in 10,020 public and private schools

throughout the country benefit from the Programme, for which the amount already invested comes to G 649,062,894 (US\$ 16 million) (table 14).

228. The implementation of the Programme for Free Compulsory Universal Education and the Operational Plan has made it possible to increase school attendance. The net rate of primary school attendance is estimated at 77 per cent, meaning that nearly 8 children in 10 aged six to 11 attend primary school. According to the Fifth Mortality, Morbidity and Service Utilization Survey (EMMUS V), the net rate of primary school attendance is higher in urban areas (85.9 per cent) than in rural areas (72.8 per cent). The highest net school attendance rates are found in the metropolitan area (Greater Port-au-Prince) of Ouest department (86.3 per cent), and Nippes department (85.7 per cent). The rest of Ouest department and Artibonite department have the lowest rates — 69.7 and 69.8 per cent respectively. At the secondary level, namely, among children aged 12 to 17, the net rate of school attendance is much lower — 25.4 per cent — with a great difference between urban (40.6 per cent) and rural (15.7 per cent) areas. The rate is 31.7 per cent for young people living in camps. Grande-Anse (13.5 per cent), Centre (15.9 per cent) and Sud-Est (16.4 per cent) departments have the lowest net school attendance rates. The metropolitan area (43.4 per cent), by contrast, has the highest rate (table 15). The gender parity index of 1.35 indicates positive discrimination in favour of girls aged 12 to 17, of whom 29 per cent attend school, as opposed to 22 per cent of boys in the same age group.

229. As regards follow-up to the recommendation to guarantee access to adapted and adequate curricula designed for vulnerable children such as street children, children in domestic service and over-age schoolchildren or adolescents, the Government has established a Working Committee on the Integration of Street Children in School, in the context of the Programme for Free Compulsory Universal Education. For the 2012/13 school year, according to the Committee, a total of 723 children benefited from these initiatives, 266 in the Delmas centre, 350 in Croix-des-Bouquets and 107 in Port-au-Prince, and 32 graduates of the Accelerated Initial Training Programme and 12 social workers were recruited. Teachers are assigned according to the numbers at each centre, with two or three assigned to each class in order to facilitate communication between teachers and learners. In accordance with article 32.8 of the amended 1987 Constitution, which establishes that the State shall ensure that persons with special needs have the protection, education and any other means necessary for their full development and integration or reintegration into society, the Government has provided these children with the following: one hot meal a day, two uniforms, one set of school supplies, full coverage of personal needs (shoes, undergarments, toiletries, haircuts, etc.), transport (a bus belonging to the Dignité company), and televisions and DVD players installed in the centres (table 16).

2. Education for children with disabilities

230. With regard to children with disabilities, the State Secretariat for the Integration of Persons with Disabilities supported the schooling of young people and children with disabilities over the period 2008 to 2010 by awarding scholarships to 23 pupils and integrating 421 pupils with disabilities into ordinary schools. In addition, from November 2011 to December 2012, 56 pupils with disabilities from three departments (Ouest, Nord and Sud) received full scholarships or a school subsidy.

231. Developments since the establishment of the Commission on Educational Adaptation and Social Support in 1993 include the development of a curriculum for persons with mild mental disability in 1997 (CRC/C/51/Add.7), the establishment of the State Secretariat for the Integration of Persons with Disabilities in 2007 and the inclusion of disability issues in the development of the National Protection Plan of the Ministry of Social Affairs and Labour, also in 2007.

232. Children with disabilities remain a major concern, despite the progress made to date. The needs of these children are little known and data on them are limited. It was only in the most recent school survey (2010/11) that the Planning and External Cooperation Department took a separate count of this group of children.

- Situation of children with special needs in preschool: in preschools, there are a total of 941 children with disabilities, 71 of them in public schools and 870 in private schools. There is no information on their distribution by region or place of residence, however. Information from the field has not clarified facts about them.
- Situation of children with special needs in primary school: according to the most recent school survey (2010/11), there are an estimated 2,893 children with disabilities attending primary school across the country. Ouest department accounts for 37 per cent of children with disabilities in primary school, Artibonite department for 18 per cent, Centre department for 14 per cent and Nord-Ouest department for 11 per cent. There is no information on the area of residence (urban or rural) of these children.
- Situation of children with special needs in secondary school: the 2010/11 school survey estimated that there are 1,251 children with disabilities in secondary school across the country, accounting for 0.20 per cent of all secondary school students (*MENFP Info*, March 2012).

233. There are 23 special schools in Haiti, three of which are public.¹⁰⁹ The Ministry of Education and Vocational Training and the State Secretariat for the Integration of Persons with Disabilities have also formed partnerships to public raise awareness, such as the partnership agreement with France's INS HEA (a national training and research institute for the education of young persons with disabilities) for the organization in 2013 of awareness-raising days on special education and inclusive approaches.

234. The Government is also setting up a national school cafeteria programme, which will provide State school students with one hot meal a day. To strengthen the programme, the Government signed a memorandum of understanding with WFP Haiti in December 2012.

235. The Programme for Free Compulsory Universal Education Programme is in its early stages and has not yet produced the desired results. There are many obstacles to its implementation. In accordance with article 32.5 of the amended 1987 Constitution, which states that preschool and nursery education, as well as non-formal education, shall be encouraged, the State, for some four years now, has focused on children aged 4 and 5 at the preschool level. It provides two years of preschool education in State schools, while acknowledging that the norm is three years. There are currently 616 public preschool centres with 50 children each, making a total of 30,800 children. The issue of preschool children who are over preschool age remains a concern, however, as educators themselves working with children aged over 6 who have not attended preschool sometimes steer them towards preschool rather than the first year of primary school.

236. A policy paper on comprehensive early childhood development was drawn up in December 2012 with technical and financial support from the World Bank, IDB and UNICEF. Its aim is to promote the all-round, balanced development of all young children in Haiti by focusing on the period from pregnancy and birth to three years through coordinated, multisectoral prenatal, neonatal and postnatal education and

¹⁰⁹ *Haiti Libre*, 30 July 2012.

parental support. Implementation of this policy is the responsibility of the Management Office for Preschool Education.

3. Teacher training and vocational guidance

237. In response to the Committee's recommendation to provide teachers with adequate training, the Government is running teacher training programmes. At the preschool level, it conducts a comprehensive assessment, monitors preschool classrooms and identifies staff shortcomings or weaknesses. Instructors travel around the country to meet preschool teachers and hold round tables with them. They have also held practice sessions with preschool teachers. Inspectors/supervisors from the Ministry of Education and Vocational Training visit schools year round to verify the quality of teachers' work. The Ministry is taking steps to extend supervision to all schools. The Government is also hiring increasing numbers of vocational training certificate holders and teacher training college graduates, thereby making it easier to train them. Technical and financial assistance from Haiti's partners (UNICEF, World Bank, IDB) is supporting the early childhood policy, assisting the preparation of governance and reference documents and providing teaching aids and furniture. In basic education, the Ministry of Education and Vocational Training has made great efforts in the area of teacher training through:

- The Accelerated Initial Training project, funded by the World Bank and the Government, which has been in operation since 2002;
- In-service training activities, which in 2012/13 enabled the Ministry to train more than 11,000 teachers in the first two cycles of basic education;
- Practical training in model schools that include a pedagogical support centre, which are funded by AECID. The Ministry has a network of 37 such schools, which include libraries and Internet connections. Twenty other schools have partnered with these model schools to send their student teachers there;
- Since the launch of the Programme for Free Compulsory Universal Education in October 2011, training sessions have been held for teachers and school principals. The most recent of these took place over five days in March 2013, with more than 11,000 persons — 8,000 teachers and 3,000 principals — trained. The training for school principals focused on the assessment of learning outcomes, teacher supervision and leadership in schools. Teachers were given training in lesson preparation.

238. The Government has also taken into consideration the issue of vocational guidance. In early February 2013, the National Vocational Training Institute set up a school-based programme providing vocational and other training to schoolchildren in the final three years of basic education in Fort Liberté, Cap-Haïtien, Gonaïves, Petit-Goâve, Carrefour, Port-au-Prince and Les Cayes. As a result, eight vocational training centres and 29 national schools or high schools have provided training to more than 3,000 young people in a dozen occupations in five of the country's six departments.¹¹⁰ The programme is also open to older street children, enabling them to receive vocational training.

239. The Working Committee on the Integration of Street Children in School, in conjunction with the National Vocational Training Institute, is setting up a vocational training project that will enable such children to learn a trade and enter the labour market at the same time. The Haiti-Tech vocational centre should shortly receive the first group of young people (table 17).

¹¹⁰ State Secretariat for Vocational Training.

240. Specific modules on human rights or the rights of the child have not yet been included, although some aspects are included in primary school civics classes.

B. The quality of education

241. The training of teachers and supervisors, the supervision of instruction, the appointment of teachers trained in the system, the monitoring of school curricula and the teacher information system are making it easier for the Ministry to ensure the quality of the instruction imparted in schools.

VIII. Special protection measures

242. In the area of special protection measures, the Committee's recommendations have prompted the Government to adopt various measures, including the protection of children in armed conflict, children in situations of exploitation, street children and children in conflict with the law. No special measures have been taken for refugee children and children belonging to a minority or an indigenous group. The latter can always be protected, where necessary, by ordinary legislation.

A. Children in situations of exploitation

1. Economic exploitation

243. The Committee recommended that Haiti: (a) strengthen the implementation of its labour laws and increase the number of labour inspectors; (b) ratify ILO Conventions Nos. 138 concerning the Minimum Age for Admission to Employment and 182 concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour; and (c) seek technical assistance from, inter alia, ILO.

244. The Government has responded to the Committee's recommendations by increasing the number of labour inspectors. In 2013, 50 inspectors were working to strengthen the monitoring of child labour.

245. Haiti ratified ILO Conventions Nos. 138¹¹¹ and 182¹¹² in 2007. An Act of 13 May 2003 also repealed not only article 341 of the updated Labour Code but also all the articles of the Code concerning child domestic workers. The legal employment age thus rose from 12 to 14 years. The adoption of the 13 May 2003 Act repealing section 9 of the updated Labour Code has led to the virtual elimination of the concept of child domestic workers from Haitian law.¹¹³ Article 3 of the Act, however, establishes that a child may be placed with a foster family as part of a relationship of assistance and solidarity. In this case, the child must be treated as a member of the family.

246. The following measures have been taken to prevent and put an end to the employment of children under the legal age:

- Publication by the Ministry of Social Affairs and Labour in 2009 of a communiqué informing the public of the Government's decision to make 14 years the minimum age for admission to employment;
- Implementation from September to December 2009 of a campaign to raise awareness of ILO Convention No. 138 in the departments of Nord, Artibonite, Sud-Est, Nippes and Sud;

¹¹¹ *Le Moniteur* No. 56 15 June 2007.

¹¹² *Le Moniteur* No. 58 19 June 2007.

¹¹³ *Le Moniteur* No. 41, 5 June 2003.

- Establishment of a tripartite committee for the eradication of child labour, with support from ILO;
- An awareness-raising campaign in schools and churches on the issue of child domestic workers.

2. Use of children in the illicit production and trafficking of narcotic drugs

247. The illicit production and trafficking of narcotic drugs are severely punished under Haitian law. The Act of 7 August 2001 on the control and suppression of illicit drug trafficking¹¹⁴ strengthened the system of penalties established by the Decree of 18 December 1975, as amended by the Act of 7 June 1982.

248. Under article 72 of the Act, when the offence was committed using a minor or against a minor or a person with a mental disability, the penalties provided for in articles 47 to 53 and 57 to 59 are doubled. Articles 47, 49 and 51 provide for penalties ranging from 10 to 30 years' imprisonment.

3. Sexual exploitation and sexual abuse

249. A child against whom an adult or another child has committed or attempted to commit an act of sexual abuse, such as rape, incest, touching, sexual exploitation, sex trafficking, prostitution and incitement to indecency, is considered to be a child victim of sexual violence. The concept of sexual abuse denotes the involvement of children and dependent or developmentally immature adolescents in sexual activities, the meaning of which they do not fully understand or that break social taboos concerning family roles.¹¹⁵

250. The problem of sexual exploitation and abuse is widespread in Haiti, but it is difficult to determine exact figures for the number of child victims. This difficulty is linked to the taboos surrounding the problem and the fear of reprisals when the perpetrator has a degree of authority over the victim. However, according to the preliminary findings of the Violence against Children Survey conducted by the Centers for Disease Control in 2012, one in four women had experienced at least one incident of sexual abuse before the age of 18. Among men in the same age group, one in five had experienced at least one incident of sexual abuse before the age of 18. Among those who had experienced at least one incident of sexual abuse before the age of 18, 69.5 per cent of women and 85.4 of men had experienced several incidents (two or more) of sexual abuse. The most common form of sexual abuse experienced by women and men before the age of 18 was unwanted sexual touching, followed by unwanted attempted sex.

251. A 6 July 2005 decree amended the legislation on sexual assault and increased the penalties for perpetrators. The positive work of State services such as health and social services, supported by women's organizations such as Kay Fanm and Solidarité Fanm Ayisyen, should also be noted. These organizations not only provide support to victims of rape and other sexual abuse but also lobby heavily for perpetrators to be prosecuted and punished as provided for by law.

252. A reporting mechanism has been introduced for vulnerable children, including child victims of sexual abuse or exploitation. The mechanism uses the Social Welfare and Research Institute's call centre and other free hotlines, as mentioned above.

¹¹⁴ Le Moniteur No. 81, 4 October 2001.

¹¹⁵ Cited by the *Plan national de protection* (2007), Finkelhor, 1996 — Kempe, 1978.

4. Sale, trafficking and abduction of children

253. Child trafficking is the main concern of the authorities and society at large. Although it is not easily quantifiable, the limited data available make it possible to assess the extent of movements of at-risk children. According to the Jeannot Succès Network, for example, 7,599 children have crossed the border with the Dominican Republic illegally since 2010 from northern Haiti alone. In 2010, of 1,200 children checked at official border crossings between Haiti and the Dominican Republic, the Brigade for the Protection of Minors rescued 280 from traffickers.¹¹⁶ This phenomenon is not new. For example, according to figures from the Support Group for Returnees and Refugees, in 2004 alone, more than 20,000 Haitians, including minors, crossed the border into the Dominican Republic illegally and in vulnerable situations.

254. One of the measures taken in this area is the ratification of the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime.¹¹⁷ The Protocol has been added to the Decree of 17 November 1980 on unlawful travel and the Act of 7 May 2003 on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment of children. A bill on trafficking and smuggling was passed by the Chamber of Deputies in August 2013 and will serve as a frame of reference for dealing with cases involving this problem. The abduction of children is also penalized in the strongest terms by the Act of 22 January 2009. For example, when the victim is a newborn or a child under 16 years of age, the penalty is hard labour for life (art. 2).

255. In July 2011, in partnership with UNICEF, IOM and various national organizations, the Ministry of Social Affairs and Labour, mindful of the need to address the problem, relaunched the multisectoral round table on combating child domestic labour and trafficking. This approach was subsequently extended to other departments, notably Nord, Artibonite, Sud-Est and Sud.

256. With regard to effective practical measures against trafficking, it should be noted that the Government has assigned responsibility for checking the travel documents of all Haitian children leaving the country through land border checkpoints and the international airport in Port-au-Prince to staff of the Brigade for the Protection of Minors. The Ministry of Social Affairs and Labour has appointed a national focal point on the trafficking of persons, particularly children, within the Social Welfare and Research Institute. Lastly, in 2012, to ensure more effective monitoring of the movement of children out of the country, the Institute, the Directorate of Immigration and Emigration of the Ministry of the Interior and Local Government and the Haitian National Police established a procedure whereby an exit permit signed by the Institute is required of a person seeking to leave the country with a minor who is not his or her child. This measure has already borne fruit by making it possible to question some child traffickers, several of whom were running children's homes.

257. Civil society, for its part, has demonstrated a great interest in combating child trafficking. Several NGOs, including the Support Group for Returnees and Refugees and the Pan American Development Foundation (PADF), have formed an anti-trafficking group that has developed an action plan to combat the problem.¹¹⁸ Action is being carried out under the aegis of the Working Group on Child Protection.

¹¹⁶ *Enfance sans enfance — Enfants haïtiens victimes de la traite et du trafic*, UNICEF Haiti, 2011.

¹¹⁷ Ratification decree of the National Assembly of 12 January 2004. *Le Moniteur* No. 51, 11 July 2005.

¹¹⁸ See *Plan national de protection*, November 2007, p. 18.

258. Combined data from MINUSTAH, the Social Welfare and Research Institute and the Brigade for the Protection of Minors on cases of sexual assault, child trafficking and physical, psychological and domestic violence continue to be recorded: 789 cases were recorded from January to October 2013. According to MINUSTAH, 1,221 minors, 922 of them girls, were victims of all kinds of violence from January 2012 to April 2013.¹¹⁹ It is evident, nonetheless, that the instruments ratified and the legislative measures adopted are not enough to eradicate the problem. The Brigade for the Protection of Minors, with the assistance of MINUSTAH, plans to step up its actions in order to establish a better system for preventing violence against children.

B. Refugee children

259. No applications for asylum from foreign children have as yet been recorded in Haiti. If such applications were to be made, the Government would extend the necessary protection to child asylum seekers under the laws in force in the country, including the Convention on the Rights of the Child and the Convention relating to the Status of Refugees of 28 July 1951, which was ratified by Haiti on 25 September 1984.

C. Children in armed conflict

260. The Committee recommended that Haiti ratify the Optional Protocols to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography and on the involvement of children in armed conflict.

261. Children belonging to armed gangs are, as the term suggests, any persons under 18 years of age who are either manipulated or used as scouts or to commit criminal acts by armed gangs of any kind, origin or make-up. Children belonging to armed gangs have much in common with children in conflict with the law or child victims of armed conflict.¹²⁰

262. The Optional Protocol on the involvement of children in armed conflict was signed in 2002, but has not yet been ratified.

263. The phenomenon of children belonging to armed gangs first emerged in Haiti some 10 years ago, with the growth of politically or economically motivated armed gangs in the largest shanty-towns of Port-au-Prince. Most of these gangs have recruited children, whom they use as scouts or lookouts or to commit criminal acts. In the commune of Cité Soleil alone, according to MINUSTAH, the number of children belonging to armed gangs at the end of 2005 was around 600, of whom at least 300 were armed. Cases have also been identified in Les Cayes, Carrefour-Feuilles and in Bel-Air.

264. In 2006, as part of its disarmament efforts and on the basis of the National Disarmament, Demobilization and Reintegration Plan, the MINUSTAH Child Protection Unit and UNICEF launched a negotiating process with the gangs that included the disarmament and demobilization of children. In the meantime, UNICEF, in partnership with UNDP, had already implemented three community projects for the prevention of violence and the disarmament, demobilization and reintegration of children and young people belonging to armed gangs in three locations especially affected by violence (a large shanty town in Port-au-Prince, Les Cayes and Gonaïves). To date, these projects, which are used as starting-off points for the MINUSTAH

¹¹⁹ *Le Nouvelliste* No. 39000, 5 June 2013, p. 4.

¹²⁰ Ministry of Social Affairs and Labour, *Plan national de protection*, 2007.

community disarmament process, have made it possible to collect up firearms and work towards the socioeconomic reintegration of adolescents and young people.

265. The Carrefour reception centre, run by the Ministry of Social Affairs and Labour, has taken in children removed from armed gangs.

D. Street children

266. The Committee recommended that the State party: (a) ensure that street children are provided with adequate nutrition, clothing, housing, health care and educational opportunities, including vocational and life-skills training, in order to support their full development; (b) ensure that these children are provided with recovery and reintegration services for physical, sexual and substance abuse, and services for reconciliation with their families; (c) investigate the disappearances of street children; and (d) develop a comprehensive strategy to address the increasingly large number of street children, with the aim of preventing and curbing this phenomenon.

267. In 2006, data from the first survey of street children and youth, made available by Aide Médicale Internationale, indicated that there were 2,129 children and young people (9 per cent of them girls) living on the streets of Port-au-Prince. The findings of a 2011 survey¹²¹ show that in February 2011, at least 3,380 children and young people were living on the streets of Port-au-Prince and Carrefour (22 per cent of them as a result of the earthquake). The survey thus shows that since 2006, 1,251 more children have taken to the streets, an increase of 55 per cent. The problem also exists in the country's other urban centres.

268. The 2007 National Protection Plan included a programme to eradicate the phenomenon of street children over the period from 2008 to 2013.¹²² Table 19 in the annex shows its objectives, expected results and priorities.

269. The Ministry of Social Affairs and Labour has taken initiatives for the care of street children, with three shelters located in the metropolitan area — the Carrefour, Petite Place Cazeau and Delmas 3 reception centres. The first two centres are fully operational and children there receive food, clothing, health care, schooling and vocational training. The Carrefour and Petite Place Cazeau centres are run by the religious NGO Petits Frères et Petites Sœurs de l'Incarnation. A G 55 million (US\$ 1,375,000) financial package was allocated to the Carrefour centre for the 2011/12 financial year. The Ministry of Social Affairs and Labour had sought to address the situation of 950 street children aged from 4 to 16 who were directed to the different centres in 2012 (table 18 on projected budget allocations). The Delmas 3 centre will be inaugurated shortly. The three shelters do not have the capacity to accommodate all street children. The Government is aware of this and is planning to build others, while reflecting on more sustainable solutions that would make it possible to reduce the number of street children.

270. In much the same vein, the Ministry has designed a project to build transit centres in the country's 10 departments that, while periodically placing reintegrating them with their biological families, can each accommodate 1,000 children in difficulty. The plans are to build these centres in all 10 of the country's departments. The projected cost of the project is G 500 million, or G 50 million (US\$ 1.25 million) per centre. Construction began in October 2011 and completion is expected in September 2016. In the 2011/12 financial year, G 25 million (US\$ 625,000) was allocated and disbursed for further work.

¹²¹ Aide Médicale Internationale/UNICEF. *Enfants et jeunes des rues de Port-au-Prince*, Survey, 2011.

¹²² *Plan national de protection, Enfance en situation difficile ou de vulnérabilité*, section 4, p. 10.

271. In February 2013, the Social Welfare and Research Institute tested a methodology in preparation for a national survey of street children designed to help it address the problem more effectively. Ninety-eight children took part in the trial.

272. As mentioned in section VII on education, the authorities have paid particular attention to the enrolment of street children in school.

E. Children in conflict with the law

273. The Committee recommended that Haiti take the necessary steps to reform the legislation concerning the juvenile justice system, in line with the Convention, in particular articles 37, 40 and 39, and other United Nations standards in the field of juvenile justice, including the United Nations Standard Minimum Rules for the Administration of Juvenile Justice (the Beijing Rules), the United Nations Guidelines for the Prevention of Juvenile Delinquency (the Riyadh Guidelines), the United Nations Rules for the Protection of Juveniles Deprived of Their Liberty and the Vienna Guidelines for Action on Children in the Criminal Justice System. As part of this reform, the Committee particularly recommended that the Government: (a) undertake all necessary measures to ensure that juvenile courts are established and trained juvenile judges appointed in all regions of the State party; (b) consider deprivation of liberty as a measure of last resort and for the shortest possible period of time, limit by law the length of pretrial detention and ensure that the lawfulness of this detention is reviewed by a judge without delay and regularly thereafter; (c) provide children with legal and other assistance at an early stage of the procedure; (d) provide children with basic services; (e) protect the rights of children deprived of their liberty and improve the conditions of detention and imprisonment, notably by establishing special prisons for children with conditions suitable to their age and their needs and by ensuring the availability of social services in all detention centres in the country, and in the meantime by ensuring that children are separated from adults in all prisons and pretrial detention places throughout the country; and (f) request technical assistance in the area of juvenile justice and police training from, among others, the Office of the United Nations High Commissioner for Human Rights and members of the United Nations Coordination Panel on Technical Advice and Assistance on Juvenile Justice.

1. Administration of juvenile justice

274. As noted by the Committee in its consideration of the initial report, only Port-au-Prince and Cap-Haïtien have juvenile courts, although it should be mentioned that the status of the Cap-Haïtien juvenile court has not been formalized in law. The Port-au-Prince juvenile court was seriously damaged by the 2010 earthquake and the Government has taken steps to restore it at an estimated cost of G 3,897,913 (US\$ 97,450). The juvenile justice system is therefore affected by a serious lack of juvenile courts.

275. Despite its limited means, the Government has tried to go at least some way towards implementing the Committee's recommendations for improving the functioning of the juvenile justice system. The significant measures taken include:

- Appointing a juvenile court judge to 17 of the country's 18 courts of first instance;
- Training judges in children's rights;
- Improving detention conditions for minors incarcerated in the Rehabilitation Centre for Minors in Conflict with the Law.

276. The transfer of minors from Fort National Prison to the Rehabilitation Centre, a structure created by administrative decision in 2010 and intended for the rehabilitation of minors, is another improvement that needs to be mentioned. The Rehabilitation Centre has a school, a sewing workshop and a clinic. Its establishment is a first step towards solving the complex problem of separating children from adults in the jurisdiction of the Port-au-Prince juvenile court. There was a public/private initiative to set up a first centre for the rehabilitation and reintegration of minors in conflict with the law (CHARMICAL) in Ouest department. Although the facilities are available, so far no opening date has been set.

277. Reform of the legislation on the juvenile justice system was taken up in 2013 by the Ministry of Justice and Public Security, which has set up a sectoral round table on juvenile justice. One of the tasks of this round table, comprising eight committees, is to draft a juvenile justice bill. The round table was launched on 9 April 2013 and held its first working meeting with the committees on 30 April 2013.

278. There is a legal aid office, supported by MINUSTAH, in Ouest department and an office for assistance to minors, supported by UNICEF, in Sud department.

2. Measures regarding children deprived of their liberty

279. Since 2010, some 320 children on average have been detained in Haitian prisons. Children often remain in pretrial detention for a long time before their cases are brought before the judge.

3. Sentencing of children by the juvenile courts

280. Juvenile courts do not sentence children in conflict with the law to capital punishment or life imprisonment. Alternative sanctions are slowly gaining ground in cases involving minors (prohibition on playing, obligation to achieve a goal, etc.).

281. Minors under 13 years of age enjoy an indisputable exemption from criminal responsibility, even though the law does not state as much explicitly; they are subject only to special protection measures. Minors over 13 and under 16 are ordinarily exempt from criminal responsibility and their age is a mitigating circumstance, unless the judge, in a ruling stating his or her reasons, decides otherwise.

4. Psychological recovery and social reintegration

282. There are no physical and psychological therapy and social reintegration services in the Haitian child protection system, as the rehabilitation and reintegration centres called for by law have not yet been set up. At the moment, the law makes no provision for specific post-detention rehabilitation, reintegration or redress measures for boys and girls who are victims or perpetrators of violence. Although victims or their parents sometimes consult private specialists, the State, through the prison social service, is responsible for assisting these children.

5. Training of professionals involved with the system of juvenile justice

283. Several activities to train juvenile justice professionals and staff have been planned and carried out. For instance, training programmes have been held for the staff of juvenile detention facilities, including the training in 2012/13 of 50 employees of the Prison Department. Staff of the Brigade for the Protection of Minors have also received various kinds of training from organizations involved in child protection, including UNICEF, MINUSTAH, IOM and various NGOs, and two of these officers work as peer instructors. Nonetheless, the frequent transfers of officers of the Haitian National Police lessen the long-term specific impact of these efforts. Judges and

prosecutors, for their part, have received very thorough training in juvenile justice at the Magistrates College.

284. The Government nonetheless plans to address the many shortcomings in the juvenile justice system. To this end, within the framework of the sectoral round table on juvenile justice, the intention is to develop an action plan for the establishment of rehabilitation and reform centres for minors and of juvenile courts with specialized judges and prosecutors.¹²³

F. Children belonging to a minority or an indigenous group

285. There are no children belonging to indigenous groups in Haiti, but even if there were, it would not be difficult to ensure their right to enjoy their own culture and to practise their own religion, as called for in article 30 of the Convention. Children of minorities, even when separated from their parents, must enjoy all the rights to which Haitian children are entitled.

IX. Conclusion

286. This report, prepared in accordance with article 44 of the Convention on the Rights of the Child and the 2010 harmonized guidelines on reporting, describes the efforts made by the Haitian Government, and the constraints it faces, in fulfilling its obligations with respect to the recommendations made by the Committee following its consideration of Haiti's initial report, submitted on 3 April 2001. Some recommendations have been implemented, others are in the process of being implemented.

287. Since the submission of its initial report, Haiti has faced major constraints that have hindered its progress towards fuller realization of the rights of the child. The political instability that ravaged the country from 2000 to 2006, the devastating tropical storms of 2008 and the 2010 earthquake should all be kept in mind.

288. From 2006 to 2012, however, significant efforts were made in favour of children in the areas of social welfare, education, nutrition, health and sanitation. The results are reflected in the findings of various surveys, including the Fifth Mortality, Morbidity and Service Utilization Survey (2012). It must be acknowledged that progress towards implementing the Committee's recommendations is not yet complete.

289. The recently adopted laws and administrative measures and the new projects, good practices and new attitudes on the part of institutions and communities herald a better future for the enjoyment by children living in Haiti of the rights enshrined in the Convention on the Rights of the Child. Recognition must be given to the significant contribution made by the men and women of national community, organizations, civil society and international stakeholders who make such progress possible every day and demonstrate a shared determination to foster a strong system of child protection and thereby improve the situation of children in Haiti, particularly the most vulnerable.

¹²³ Plan of the Ministry of Justice and Public Security.

Bibliography

A. Publications

Aide Médicale Internationale and UNICEF. *Enfants et jeunes des rues de Port-au-Prince*. Survey. 2012.

Cabrit, Alain. *Handicapés: Tous vos droits.*, Third edition, Éditions du Puits Fleuri, 1998.

Fafo. *Les fondements de la pratique de la domesticité en Haïti*, produced for the Ministry of Social Affairs and Labour with the support of UNICEF, ILO, UNDP and Save the Children. 2002.

Fifth Mortality, Morbidity and Service Utilization Survey. 2013.

Haiti. Amended Constitution. Port-au-Prince: Presses nationales, 1987 and 2012.

_____. Initial report of Haiti on the implementation of the Convention on the Rights of the Child. Port-au-Prince, 2000.

Haiti, Ministry of the Economy and Finance. *Objectifs du Millénaire pour le développement, état, tendances et perspectives*. Port-au-Prince, 2009.

Haiti, Ministry of Justice and UNICEF. *Compilation des instruments internationaux relatifs aux droits de l'enfant et à la justice des mineurs*. Port-au-Prince: Éditions des Antilles, 2002.

Haiti, Ministry of Planning and External Cooperation. *Rapport final sur la mise en œuvre du premier Document de stratégie nationale pour la croissance et la réduction de la pauvreté (DSNCRP, 2008-2010)* (Final report on the implementation of the first National Growth and Poverty Reduction Strategy Paper). Port-au-Prince, 2011.

_____. *Plan stratégique de développement d'Haïti* (Strategic Plan for the Development for Haiti). Port-au-Prince, 2012.

Haiti, Ministry of Public Health and the Population. *Manuel de normes de prise en charge clinique et thérapeutique des adultes et adolescents vivant avec le VIH*. Port-au-Prince, 2008.

_____. *Programme national de lutte contre le sida (PNLS)* Port-au-Prince, 2012.

Haiti, Ministry of Social Affairs and Labour. *Domesticité des enfants en Haïti, caractéristiques, contexte et organisation*. Port-au-Prince, 2002.

_____. *Plan national de protection. Enfance en situation difficile ou de vulnérabilité*, section two. Port-au-Prince, November 2007.

Haiti, Ministry of Social Affairs and Labour/State Secretariat for the Integration of Persons with Disabilities. *Politique nationale du handicap, les grandes orientations*. Port-au-Prince: Presses nationales, 2009.

Haitian Institute of Statistics and Computing. *Grandes leçons sociodémographiques tirées du 4e recensement général*, 2009.

International Federation of Social Workers and Association nationale des assistants de service social. *Travail social et droits de l'enfant*. ENSP: Rennes, 2005.

Kessler, Francis. *Cours de droit de la protection sociale*. Fourth edition. Paris: Dalloz, 2012.

Luc, Hector D. *Code de procédure civile haïtien*. Port-au-Prince: Henri Deschamps, 1989.

Menan, Pierre-Louis, and Pierre-Louis Patrick. *Code civil haïtien*, annotated. Port-au-Prince: Zémès, 2001.

_____. *Code pénal haïtien*, annotated. Areytos: Port-au-Prince, 2007.

Michel, Pierre-Marie. *Code de procédure civile*. Port-au-Prince: Edityak, 1999.

Norah, Jean-François A. *Législation haïtienne en vigueur sur les mineurs*. Port-au-Prince: Imprimeur II, 2007.

_____. *Nouveau regard sur l'enfance haïtienne*. Delmas: Le Béréen, 2008.

Trenton, Daniel. "Bill Clinton tells diaspora: 'Haiti needs you now'". *Miami Herald*, 10 August 2009.

UNICEF. *Children of Haïti: Two Years After. What Is Changing? Who Is Making the Change?* Port-au-Prince, 2012.

UNICEF and IOM. *Trafic des enfants haïtiens vers la République dominicaine*. Port-au-Prince, 2012.

United Nations. *International Review of Criminal Policy*, 1999.

USAID and PADF. *Lost Childhoods in Haiti*. 2009.

B. Legislation

Act of 8 October 1982 according married women a status in keeping with the Constitution and eliminating all forms of discrimination against them.

Act of 7 August 2001 on the control and suppression of illicit drug trafficking.

Act of 10 September 2001 prohibiting the corporal punishment of children.

Act of 7 May 2003 on the prohibition and elimination of all forms of abuse, violence, ill-treatment or inhumane treatment against children.

Act of 6 July 2005 amending the rules on sexual assault and eliminating discrimination against women in that regard.

Act of 10 September 2007 establishing and organizing the National Office for Partnerships in Education.

Act of 22 January 2009 on abduction, kidnapping and hostage-taking of persons.

Act of 7 May 2010 amending the adoption regime (not promulgated).

Act of 12 March 2012 on the integration of persons with disabilities.

Act of 12 April 2012 on paternity, maternity and filiation (not promulgated).

Act of 9 May 2012 on the organization and functioning of the Office of the Ombudsman.

C. International instruments

Convention on the Rights of the Child, ratified on 23 December 1994.

Convention on the Rights of Persons with Disabilities, ratified on 12 March 2009.

Convention relating to the Status of Refugees of 28 July 1951, ratified on 25 September 1984.

Declaration on the Rights of the Child, ratified on 16 January 1979.

Hague Convention on Protection of Children and Cooperation in Respect of Intercountry Adoption of 28 May 1993 (ratification not finalized).

ILO Minimum Age Convention, 1973 (No. 138), ratified by Haiti on 14 May 2007.

ILO Worst Forms of Child Labour Convention, 1999 (No. 182), ratified on 14 May 2007.

Inter-American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities, ratified on 12 March 2009.

International Covenant on Economic, Social and Cultural Rights, ratified by Haiti on 31 January 2012 (ratification not finalized).¹²⁴

Optional Protocol to the Convention on the Rights of Persons with Disabilities, ratified on 12 March 2009.

D. Regulations

Decree of 4 April 1974 on adoption.

Decree of 18 July 2012 taking measures to ensure the integrity of international procedures for the adoption of children of Haitians.

E. Electronic documents

Crises en Haïti (Crises in Haiti) — fr.wfp.org.

www.haitilibre.com/article-2492-haiti-societe-des-projets-pour-les-handicapes.htm.

www.unicef.org/haiti/french/nutrition.html.

¹²⁴ Not yet published in the official gazette of the Republic.