

REPORT



Fourteenth CSO Forum on the African Charter on the Rights and Welfare of the Child

15th – 17th March 2019

Addis Ababa, Ethiopia

“Humanitarian Action in Africa: Children’s Rights First.”

Compiled by Violet Odala and Jennifer Kaberi



This is a Report of the 14th Civil Society Organizations (CSO) Forum on the African Charter on the Rights and Welfare of the Child (ACRWC) which took place from 15-17 March, 2019 in Addis Ababa Ethiopia

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The Civil Society Organization Forum to the African Charter on the Rights and Welfare of the children (CSO-Forum)



ACKNOWLEDGMENT

The 14th CSO Forum marks the 10th Anniversary of the forum, over the last 10 years we have seen the growth of this movement and we have been able to achieve a lot as forum in ensuring that children in Africa enjoy their rights.

I would like thank you to all the participants from all over the continent who spared time to attend the forum. I would also want to thank our partners who supported the forum and made financial and technical contribution.

We look forward to the next 10 years, as aspire to increase children involvement in all our work, including attending the sessions. We also look forward working with other like minded regional coalitions to advocate the child.

Ms Amelia Fernanda

Chairperson,

CSO Forum



TABLE OF CONTENT

ACKNOWLEDGMENT	4
ACRONYMS	8
EXECUTIVE SUMMARY	11
BACKGROUND	14
DAY ONE	16
Welcome Remarks	17
SESSION TWO: STATE OF CHILDREN’S RIGHTS ON THE CONTINENT	20
REACTION	21
ACERWC Presentation on Institutional Changes within the AU Restructuring Process	22
REACTION	23
African Report on Child Wellbeing 2018 : Progress in the Child-friendliness of African Governments	24
REACTION	26
DAY TWO	29
SESSION FOUR: ENDING VIOLENCE AGAINST CHILDREN	30
School related Gender Based Violence	30
REACTION	33
Child Marriage	33
Reflection	36
REACTION	37
General Comment No. 5	38
REACTION	41
Child Trafficking & CSEC	42
REACTION	44



“Humanitarian Action in Africa: Children’s Rights First.”

Ending FGM in Africa	44
REACTION	47
Children’s rights in a refugee setting; A presentation by children in Ethiopia	48
REACTION	50
DAY TWO PLENARY	50
DAY THREE	52
SESSION SEVEN: ECD and NHRIs SESSION	53
Nurturing Care for Early Childhood Development – Understanding the key issues in child protection	53
REACTION	58
Group work	59
National Human Rights Institutions	61
REACTION	72
SESSION EIGHT: THE INSTITUTION OF CSO FORUM	74
Elections of CSO forum Coordinating Committee	74
Work Plans	75
RESOLUTIONS	79
SESSION NINE: OUTCOME STATEMENT	80



***A CHILD abused
anywhere in AFRICA, IS
a CHILD abused
everywhere in AFRICA***



ACRONYMS

ACERWC African Committee of Experts on the Rights and Welfare of the Child

ACHPR African Charter on Human and Peoples’ Rights

ACPF African Child Policy Forum

ACRWC African Charter on the Rights and Welfare of the Child

AfECN Africa Early Childhood Network

AU African Union

CAR Central African Republic

CEAC Communauté des États d'Afrique Centrale

(Community of Central African States)

CEMAC Communauté Économique des États de l'Afrique Centrale

(Central African Economic and Monetary Community)

CNDHCI Commission Nationale des Droits de l’Homme du Côte d'Ivoire

COM Centre d’Observation des Mineurs

CRA Child Rights Act

CRC Convention on the Rights of the Child

CRNSA Child Rights Network of Southern Africa

CRPD Convention on the Rights of Persons with Disabilities

CM Child Marriage

CSO Civil Society Organisation

CSO Forum Civil Society Forum on the African Charter on the Rights and Welfare of the Child

DFID Department for International Development

DPE Département de la Protection de l’Enfant

DRC Democratic Republic of Congo

EAC East African Community

EACRN Eastern Africa Child Rights Network



ECD Early Childhood Development

FGM Female Genital Mutilation

GC General Comment

HRDD Human Rights Due Diligence

ILO International Labour Organization

INDH Institution Nationale des Droits de l'Homme

IWF -Internet Watch Foundation

MENA Middle East and North Africa

MIC Middle-Income Country

NANHRI Network of African National Human Rights Institutions

NHRI National Human Rights Institutions

NPC National Population Commission

OSC Organisation de la Société Civile

RAMEDE-CI Réseau des Acteurs de Médias pour les Droits de l’Enfant en Côte d’Ivoire

REC Regional Economic Community

REDEAC- Réseau pour les Droits de l'Enfant en Afrique Centrale (Network for the Rights of the Child in Central Africa)

SAHRC South African Human Rights Commission

SC Save the Children

SRH- Sexual Reproductive Health

UNICEF United Nations Children’s Fund



EXECUTIVE SUMMARY

The 14th CSO Forum took place between 15 to 17 March, 2019 in Addis Ababa, Ethiopia. The forum was attended by 113 participants from National Human Rights Institutions, CSOs from all the 5 regions, Regional and International child focused institutions.

The forum held under the theme **Humanitarian Action in Africa: Children’s Rights First**, was officially opened by the chair of the CSO Forum who was glad that the CSO Forum is gaining momentum and there has been an increase in the number of participants attending the forums.

The development partners were also glad of the progress the CSO Forum has made and they committed to continue supporting the forum in ensuring the continued engagement with the committee.

On Day One of the Forum, the participants were informed of the different progress the forum has made over the last ten years and the plans they have for the next ten years. Dr. Musa Chibwana making the presentation said that it is important as a forum to find a strategy to increase child participation at Committee level and increase collaboration with forums from other regions.

The secretariat Committee in their presentations welcomed the progress made by the Forum over the last 10 years and strong collaboration created. They urged the CSOs to support the Committee relocation plan as well in the African Union reform agenda.

In the afternoon of Day One, the Africa Child Policy Forum presented the finding of the just launched 2018 Africa Child Wellbeing Report, which showed that in 2055 Africa will have One Billion children which can either be a dividend or burden to the continent. The report also shows that two in every five children leave primary school without learning how to read, write or do simple arithmetic. Hence, African children are in school but are not learning. Child pregnancies are on the increase and hence need for reproductive health education and services. The report was an eye opener to participants who recommended that States need to invest in Early Childhood Development and increase budget allocation to children services.

The second day of the forum focused on Ending Violence Against Children. The opening presentation by Forum for African Women Educationist, who presented on School Related Gender Based Violence

(SRGBV). Noting that due to cultural and social norms SRGBV is perpetuated in learning institutions from an early age and thus need to change the strategy. Center

for Reproductive Rights highlight the Sexual reproductive Health (SRH) challenges girls in humanitarian settings face and the need to focus on these vulnerable girls.

Girls not Brides through a panel gave a compelling case of the need for better strategy involving community and grassroots organizations and girl advocates to increase the voices against child marriage. Their presentation was followed by a panel on Child trafficking which highlighted the way children are trafficked in Africa and the

In the afternoon the participants were taken though the new campaign on Female Genital Mutilation (FGM). Equality Now presenting on the new campaign highlighted some of the challenges faced by the war against FGM, saying that religious and social norms are biggest challenge. They challenged the participants to look for local solutions to ending FGM in addition to strengthening the legal framework.

**WE NEED TO START
THINKING ON WE CAN
HAVE A HEALTH, WELL
FED, WELL SCHOOLED
AND PROTECTED ONE
BILLION CHILDREN BY
2055**

challenges these children face.

Save the Children followed with a presentation on General Comment 5 of the African Charter on the Rights and Welfare of the child (ACRWC). They noted that the GC has very important guidelines in strengthening child protection systems from the community level. The CSOs were urged to popularise the GC so that states can start using it and reporting against it.

The third and final day of the forum started with an expose on Early Childhood Development by the Africa Early Childhood Network. They explained that the first five years of a child’s life are the most important, because they shape what child is going to turn out to be. The presenters urged the participants to advocate for increased budget allocation for Early Childhood Development because it is the sure way of ensuring that Africa’s future generation is prepared for the rapid development.

This presentation was followed by a special session by the National Human Rights Institutions. They started their presentation by sharing the role of NHRIs in ensuring the realization of children rights. This was

followed by presentations by different national NHRIs on different topics ranging from Intersex children, sexual reproductive health, children victims of witchcraft and child participation. The presenters reiterated that the collaboration between NHRIs and CSOs is important for the full realization of child rights as envisioned in the ACRWC.

2. Prof. Salah Arafa- Northern Africa Vice Chair
3. Vicar Bhangi- Central Africa
4. Hussain Rahman- Western Africa- Secretary General

In the afternoon of the last day, the forum conducted its elections in accordance to the CSO Forum constitution. The regions nominated a member who was elected. The new team of officials are

1. Ms Amelia Fernanda- Southern Africa- Chair
5. Mr. Paulino Akuei - Eastern Africa- Treasurer
6. Yvonne Gamu- Partners Rep

After the elections, the participants reviewed the draft communique and passed it to be presented to the Committee



BACKGROUND

The 14th Civil Society Organisations Forum on the African Charter on the Rights and Welfare of the Child (CSO Forum) was held in Addis Ababa, Ethiopia, from 15-17 March 2019, ahead of the 33rd Ordinary Session of the African Committee of Experts on the Rights and Welfare of the Child (ACERWC). Hosted under the theme, **Humanitarian Action in Africa: Children’s Rights First**, which is also the theme of the 2019 Day of the African Child, the 14th CSO Forum brought together over 113 participants drawn from CSOs working on the rights and welfare of children across Africa, National Human Rights Institutions (NHRIs), key child rights experts and the African Union. To ensure feedback from the delegates who attended the 13th CSO Forum, the meeting built on three broad themes addressed by the 13th CSO Forum, and discussed the **Status of Children’s Rights in Africa, Networking for Children’s Rights in Africa, and Collaboration between CSO Forum, National Human Rights Institutions (NHRIs) and the ACERWC**. At the end of the CSO Forum, a communique was adopted and it was presented to the ACERWC.

Elections of new office bearers for the **CSO Forum Coordination Committee** were conducted on the final day of the CSO Forum, and the following were elected,

1. Ms Amelia Fernanda - Southern Africa, Chairperson
2. Prof. Salah Arafa - Northern Africa, Vice Chairperson
3. Mr Vicar Bhangi - Central Africa
4. Mr Hussain Rahman - Western Africa, Secretary General
5. Mr Paulino Akuei - Eastern Africa, Treasurer
6. Ms Yvonne Gamuchirai Tagwireyi - Save the Children International, Representative of Partners

The Provisional Secretariat for the 14th CSO Forum

The Child Rights Network for Southern Africa (CRNSA)



DAY ONE



Welcome Remarks

The outgoing Chairperson of the CSO Forum, Professor Salah, thanked the participants for registering and attending the 14th CSO Forum. He said he was glad that despite the



introduction of the registration fee, the turnout was big and the funds would go a long way towards the sustainability of the Forum. He said he was glad that the relationship between the CSO Forum and the Committee has been improving over the last 2 years with a standing slot at the Committee Sessions. He said he hoped that the next CSO Forum would be hosted in Egypt. He urged the participants to look at Children’s Rights holistically and involve children in improving the welfare of the society.

Following the Chairperson’s remarks, individual introductions were done and participants stated some expected deliverables. This included sharing experiences at continental level, understanding how best the CSO Forum can influence the Committee, and how to ensure children’s voices were incorporated into the discussions.

Solidarity Remarks by Partners

CSO Forum Partners gave solidarity remarks. The Partners thanked the Coordinating Committee for organizing the 14th CSO Forum and congratulated the Forum on celebrating its 10th anniversary. The partners reiterated their commitment to supporting the CSO Forum. Representing Plan International, Salem Abraham indicated that as an organisation that has been working with the CSO forum since its inception, Plan was glad to see all the five regions represented in the Forum. She urged the Forum that that their engagement should go beyond the two meetings prior to the Committee Sessions, and start having intersession engagement at national and regional levels. She continued to say that it is important for the Forum to continue looking for sustainability strategies and in this regard, she wished the Forum a successful transition. She further urged the Forum to ensure that children’s voices are heard on the African Union agenda in **this year of Returnees, Internally Displaced Persons, and Refugees**, as the focus is on children and women. As a way of facilitating this, Plan had supported the participation of girls to the 14th CSO Forum to ensure that their voices are heard in decision making spaces. From Terres des Hommes (TdH), Lynette Awol explained that TdH works on child



protection and it was good that various stakeholders had been brought together to share lessons. She was glad to see some of TdH’s implementing partners amongst the participants, as the Forum was a great platform that would harness the urgency, resources and energy needed to create strong child protection systems. The Network of National Human Rights Institutions (NHRIs), was represented by Commissioner Fred Waliuya and he stated that NHRIs were pleased to be part of the movement that advocates for a group that has been left behind for a long time, i.e. The African Child. Spelling out the need to **“Listen them today and give them an opportunity for tomorrow”**, he continued to say that the African child lives in an environment of dominance by parents and communities who muzzle their voices, thereby violating their rights and principles. He urged the CSOs to ensure that the voices of children are heard, and never lose sight of the fact that **“A child abused anywhere in Africa, is a child violated everywhere.”**

“We need to take stock of all this and re-energise ourselves as a unified voice to ensure that the various recommendations are acted upon by the Committee, Governments, INGOs and ourselves as CSOs”

From the African Child Policy Forum, (ACPF), Dr Violet Odala noted that it was heartwarming to see that the CSO Forum has grown to such a large number from where it began in 2009 with a

meeting of 13 participants during the 12th Session of the ACERWC. She noted that this is not just another gathering of CSOs from across Africa, but a key framework for strategic partnership to improve child rights in Africa, with an institutionalised collaboration and cooperation with the Committee. She continued to say that over the past ten years, the CSO Forum had evolved in capacity, programmes, advocacy, resources and context, and she urged the participants to make good use of the gains which had been made since the inception of the CSO Forum, including getting a standing slot at every session of the Committee, to share recommendations and concerns with them. Other gains include knowledge and capacity building of CSOs on the mechanisms and procedures of the



“Humanitarian Action in Africa: Children’s Rights First.”

Committee, lobbying for and supporting the nomination and election of competent Candidates to the Committee and above all else, enhancing the visibility of the ACRWC and the Committee. All this with the aim of ensuring positive results for all children in Africa.

Dr Odala concluded by saying that one of the findings of the ARCW 2018 is that business-as-usual is not helping Africa’s children and hence the need nothing short of a radical and transformative actions. As CSOS we need demonstrate our value not just as facilitators or advocates with a convening power, but also as innovators and contributors to such transformation.



Save the Children international, was represented by Ms Nisha Fakir and she stated that it was encouraging for CSOs to still be able to gather and operate considering the challenges facing CSOs including shrinking space. She said that SCI champions the rights of every child and is in the forum because it realises that violation affects generations. She further said that the Forum provided the opportunity to maximize resources, and she continued to say that SCI remains committed to provide a supporting role and demand accountability and will collaborate with diverse partners. She expressed belief that the meeting would provide a renewed sense of energy and points of departure for furthering child

rights and wellbeing.

SESSION TWO: STATE OF CHILDREN’S RIGHTS ON THE CONTINENT

CSO Forum Secretariat Report

For the benefit of participants who may be attending the CSO Forum for the first time, the head of Secretariat and Coordinator of the CSO Forum, Dr. Musa Chibwana, first provided a brief history that the CSO Forum was formed in 2009 to ensure a united voice on behalf of Africa’s children and to strengthen the work of the ACERWC in order to carry out its mandate. He continued to say that it brings together CSOs from across Africa, Child Rights experts, and representatives from the African Union and is supposed to be organised twice a year, prior to the meetings of the ACERWC. The CSO Forum brings together civil society organisations from across Africa to provide them with the opportunity to engage with the child rights mechanisms under the ACRWC and also discuss issues directly with members of the ACERWC who attend the CSO Forum. The objectives of the CSO Forum are;

1. *To promote partnership and networking among:*
 - a. *Civil society organizations,*
 - b. *The African Committee of Experts on the Rights and Welfare of the Child;*
 - c. *The African Union Commission, its structures and organs, and*
 - d. *Other stakeholders working towards the promotion and protection of the rights and welfare of Children in Africa.*
2. *To contribute to the process of information-sharing, best practices and research between the African Committee on African Experts on the Rights and Welfare of Children, States Parties and civil society organisations on the implementation of the ACRWC*
3. *To build the capacity of civil society organizations on the ACRWC and its mechanisms.*
4. *To lobby member states to the respect and implement of the provisions of ACRWC*



5. *To contribute towards the development of policies, strategies and carry out actions for implementation and supervision of the ACRWC.*

He pointed out that the Forum has a standing slot at ACERWC Sessions to share its recommendations and concerns with the Committee. The slot has enabled deeper and meaningful engagement with the Committee. He then highlighted the achievements of the Secretariat since the last CSO Forum, including the following,

1. *Organization of the current Forum within the constricted time*
2. *Implementation of the quick wins resolutions e.g. payment of registration fees, which would duly be accounted for at the end of the Forum*
3. *Strengthening the working relationship with National Human Rights Institutions*
4. *Contributing to the agenda of the 33rd Session of the ACERWC, which among other things includes a Day of General Discussion on children and online child sexual exploitation.*

He challenged the participants that as the forum celebrates 10 years anniversary, it is

important to reflect what they would want to achieve in the next 10 years based on the following questions;

1. How can we embrace technology in fulfilling our objectives?
2. How can children participate in the Forum?
3. What intersession work should the Forum do?
4. How can we be more inclusive?
How can we ensure meaningful participation of all-different levels?
5. What content should the Forum



be focusing on going forward?

6. How should we foster relationships with like-minded platforms from other continents?
7. How can we work with other continental bodies such as Euro-child and Child-Asia?

REACTION

Following the Secretariat presentation, the participants thanked the Secretariat for arranging for Arabic translation in addition to French translation. they highlighted the need to focus on child participation in the forum and strengthening child participation at the local level.

“Humanitarian Action in Africa: Children’s Rights First.”

There was concern that some regions have limited participation such as the North and Central African Regions and in light of this, a point of reflection was made on how can the CSO Forum use technology to improve information sharing. Partners such as AfECN registered their interest to collaborate with the Forum and support intersession activities on thematic issues. It was also suggested that it is important to identify key priority advocacy areas annually in relation to the ACRWC, one of which should be universal ratification of the ACRWC. It was also proposed that thematic groups should be formed and they should report in every Forum. One key area that has not been given much attention is privatization of social services and it was proposed that the CSO Forum should explore how to engage on this. To enhance child participation, it was proposed that national level child participation structures should be strengthened and organised in such a way that a report from children should be submitted at the Forum. The Secretariat urged the participants to be proactive to ensure that their interests are well represented in the CSO Forum.

ACRWC Presentation on Institutional Changes within the AU Restructuring Process



The presentation by the African Committee of Experts on the Rights and Welfare of the Child was made by Ms Adiam Tsighe. She explained the mandate of the Committee, as derived from the Charter, namely, to promote and monitor the implementation of the ACRWC, to interpret the

ACRWC, and to investigate violations of children's rights in Africa. This includes receiving and reviewing State Party Reports, receiving communications, developing General Comments, and commissioning investigations and studies on the state of child rights.

Adiam informed the participants that so far the Committee has,

- a. Received 10 Communications and there is one which is new



- b. Developed five General Comments, and one is currently being developed
- c. Conducted investigations and monitoring missions
- d. Commissioned studies and
- e. Established special monitoring mechanisms headed by Rapporteurs under the 10 priority areas of Agenda 2040.

It was noted that seven countries have not ratified the ACRWC yet, nine have not yet submitted their initial State Party Reports and only eight have submitted their periodic reports. She urged the CSOs to advocate for the ratification of the Charter and follow up on Concluding Recommendations to be implemented by State Parties.

She informed the participants that during the 33rd ACERWC session the report of the continental study on Children on the Move will be launched. She urged the CSOs to popularize the findings of the report and advocate for the implementation of the recommendations in the report. Participants were reminded that the Charter is turning 30 in 2020. The Committee has planned a series of activities to commemorate this milestone and the CSO Forum is requested to engage with the Committee in preparing and commemorating the ACRWC@30.

On AU reforms, it was mentioned that there are possibilities of the protection mandate of the Committee limited. Participants were urged to lobby to ensure that African children remain protected under the Committee and the Charter. It was also mentioned that the Committee is in the process of moving to Lesotho and there is need for financial and technical support towards this process.

REACTION

The participants agreed that is important as CSOs to look at State Party reporting as a process rather than an event. Thus the need for CSOs to have evidence based and targeted advocacy to State Parties. Questions raised included the difference between signing and ratification and this was explained that signing is a process that takes place before the treaty becomes binding and it does not place obligations on the State unlike ratification.

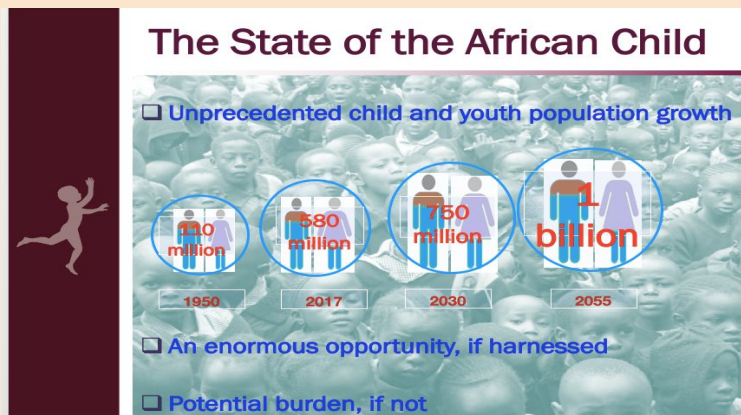
There was concern that the ACERWC Concluding Recommendations are very mostly too general and hence difficult to implement and follow up and the Committee indicated that this is an issue they are working on, to ensure that more specific recommendations are provide. A suggestion was made that the Committee should request for an implementation plan from States Parties. Participants wanted to know if CSOs can submit complementary reports before the States submits, in the event that the State is taking too long to submit the same. It was

“Humanitarian Action in Africa: Children’s Rights First.”

mentioned that to ensure ownership and political goodwill, the Committee prefers to engage the States to report before others report, but this is something they could consider in an event where extreme circumstances apply. NHRIs also wanted to know if they can submit reports directly to the Committee and it was explained that the committee has given NHRIs affiliate status and they can report independently from the state. IN addition, there was concern that CSOs do not know how to engage the media and hence missing on opportunities to advocate for children.

The African Report on Child Wellbeing 2018 : Progress in the Child-friendliness of African Governments

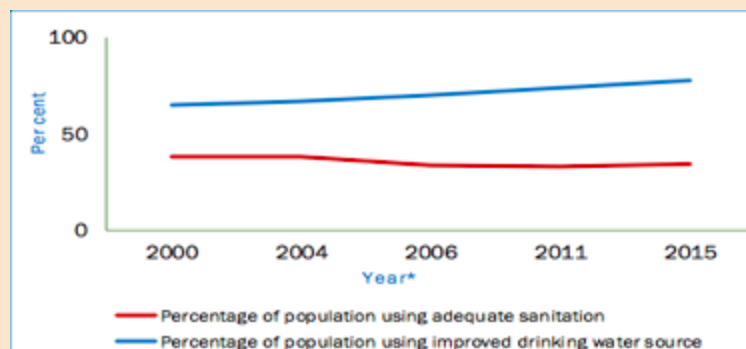
The findings of the 2018 African Report on Child Wellbeing, a biennial flagship report for the African Child Policy Forum (ACPF) were presented by Mr Yehualashet Mekonen. He stated that



the timing of the report is very significant in light of the upcoming 30 year anniversary celebrations for both the CRC and ACRWC. The report examines progress made by African governments in realizing child wellbeing over the last decade, based on the Child-Friendliness Index (CFI), an empirical rights-based statistical framework for measuring and

monitoring State accountability. The report identifies the best and worst performers in child-friendliness across the continent. It therefore provides a Pan-African status of child rights by highlighting the progress made by African governments in implementing both provision and protection rights of children.

Using the CFI, the 2018 report reveals that Africa is facing an unprecedented child and youth population growth with enormous opportunity if harnessed and potential burden if not, as Africa will be home to One Billion children in a little over 30 years’ time. According to the findings,



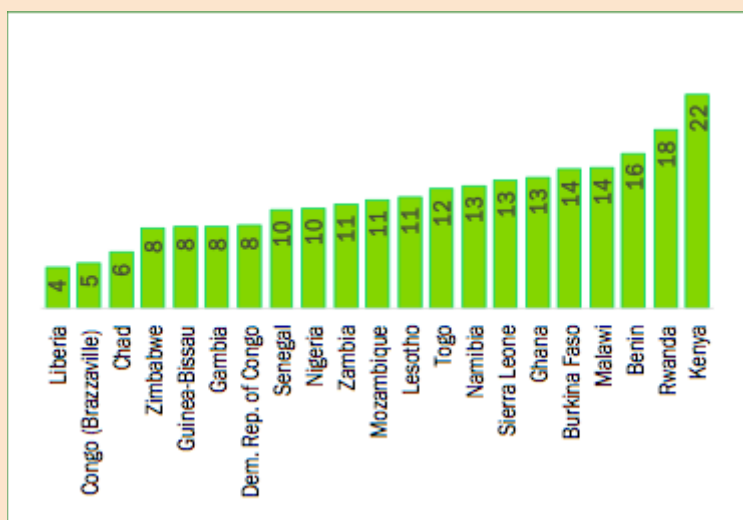
there has been progress in child wellbeing in Africa with a significant decline in child mortality by half (from 87 to 47) in the last 15 years. There is also increased access to healthcare but while child poverty is declining, it is still widespread. In addition, impressive social and economic progress over the last two decades underlines the “Africa Rising” narrative. The last few years in particular have seen positive political advances for children both at the global and continental levels.

However, he noted that undernutrition is the most pressing challenge facing Africa with stunting at unacceptably high levels at 30.4%. More than half of the children in Burundi, Eritrea and Madagascar are stunted. Sadly, the most affected are the 6 months to 23 months old among only 9% receive the acceptable dietary requirements. This has grave consequences on Africa’s growth and development. For instance, Ethiopia loses 16.5% of its GDP annually and 5.6% in Uganda as a result of poor nutrition.

In addition to under nutrition in early years, there is limited access to early learning. Children in rural areas are excluded and children from lower income families are not accessing early learning as it is mostly provided by private schools. As children grow older only 40% are in school and they are not getting the proper learning. The majority of those not in school are girls and children with disabilities. In terms of child protection, there has been progress with many countries in harmonising their laws, and although there are improved efforts to enhance enforcement, there are still some significant gaps. For instance, many countries have not yet

complied with the minimum age of criminal responsibility.

Birth registration still remains a challenge with countries such as Ethiopia, Zambia and Chad having less than 15% of their population registered. While there has been a decline in child marriage rates, the numbers are still high with countries such as Niger, Central African Republic and Chad having over 65% of their girls getting married before the age of 18 years.

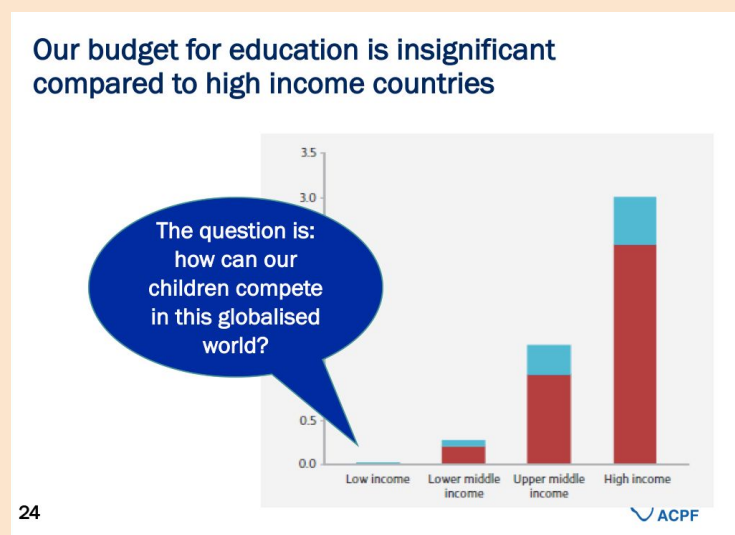


It was noted that the countries that performed well in enacting and implementing laws, also achieved better outcomes in reducing child marriage and child labour, and also expanding birth

registration. He also noted that there has been progress in budget allocation for children but it has not been enough.

REACTION

During discussions, it was clarified that the report the targets of the report are treaty bodies, governments and CSOs. Participants commended ACPF for producing what could be described as the most important advocacy document at regional level. However, they noted that the



indicators are good but they were concerned how the indicators address emerging issues such as ICT, intersex children, migration, and that the rating and ranking assumes that all countries are at same per capita income levels so the percentage may not be the same as some rely on donor funding. They also wanted to know what national stakeholders ACPF works with at national level and if any training is organised to enable national actors use the report effectively as an advocacy tool. In

response, it was explained that ACPF is developing a monitoring tool that CSOs can use to measure what States are doing. Participants also wanted to know the position of States towards the African report and that the report has strong credibility amongst States Parties, as governments have high respect for it, such that they take action to address the gaps highlighted in the report. A call was made to include the report as part of the communique as it provides key issues which if not addressed, will see Africa get into a development crisis that is looming.

Gallery Walk

After the presentation of the report, there was a gallery walk where each region showcased the work being done in promoting and implementing child rights and wellbeing. This was done through posters and IEC materials and charts showing what they are doing, their membership and environment of working.



DAY TWO



The second day of the Forum focused on violence against children in relation to the sustainable development goals and the 2018 theme of the Day the African Child, which is *Humanitarian action in Africa: Children’s Rights First*.

SESSION FOUR: ENDING VIOLENCE AGAINST CHILDREN

School Related Gender Based Violence

The objectives of this session were;

- To bring out the leading forms and causes of violence in schools among AU Member States
- To enhance a shared understanding among African CSOs on the ideal multifaceted approach in addressing SRGBV in collaboration with relevant stakeholders and authorities
- To showcase best practices in addressing SRGBV



Maria was 13 when she was raped. Scared of the reprisals if she disclosed who raped her, she decided not to confess about the issue. Maria later reported to school. About three months into the school year, the school undertook its first round of unannounced, mandatory pregnancy testing. Neither Maria nor her stepmother were informed that there would be pregnancy testing at the school; further, the school did not request Maria's or her stepmother's consent before performing the test;

Maria later gave birth but she was not allowed to reenroll in the same school

The session was presented by Ms Juliette Kimotho of FAWE and Ms Mirriam Nthenge from the Centre of Reproductive Rights. The presenters explained that over the past 20 years, there has been a considerable growth in attention on school-related violence in global, regional and national policies. School related gender based violence (SRGBV) has globally been acknowledged as a significant barrier to achieving quality education for girls and boys. Initiatives on violence against children have tended to focus on bullying or corporal punishment without examining the ways in which forms of violence are interlinked, and underpinned by equitable norms and practices and have sidelined gender-based violence. She noted that 246 million children are subject to gender based violence, approximately 15 million adolescent girls (aged 15 to 19) worldwide, have experienced forced sex (forced sexual intercourse or other

sexual acts) at some point in their lives. On average, 3 girls out of 10 experience sexual violence before they turn 18; In the vast majority of countries, adolescent girls are most at risk of forced sex by a current/former husband, partner or boyfriend. However, only one percent ever sought professional help.

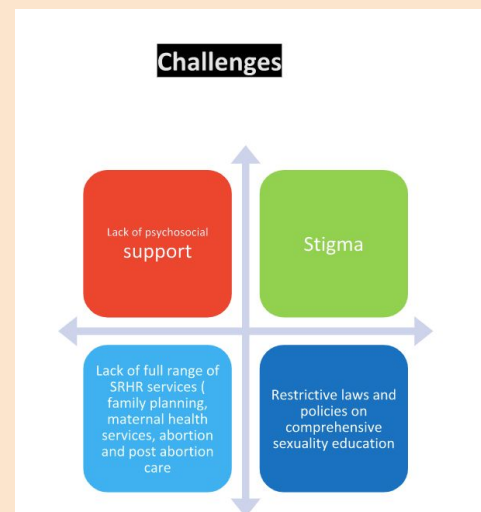


In 2016 alone, close to 500 attacks or threats of attacks on schools were documented or verified in 18 conflict-affected countries or areas. Every year, around 1.3 million adolescents die as a result of various causes, including infectious diseases, pregnancy and childbirth, and injuries.

Addressing this violence requires a multi-level approach that encompasses the various contributor. Such a

comprehensive response to gender-based violence in schools encompasses all of the following elements: effective laws and policies, relevant curricula and learning materials, training and support for school principals and teachers, support for students and their families, partnerships between the education sector and other actors, and monitoring and evaluation. Including starting to address gender and cultural norms from early years of children’s lives through the gender responsive pedagogy (i.e. teaching that pays particular attention to the specific learning needs of girls and boys).

Even though African countries have ratified a number of international and regional human rights treaties that obligate them to prevent and respond to violence in schools, including the CRC, CEDAW, the Maputo Protocol and the ACRWC, violence continues to prevail in schools. There is however no consolidated research on school related gender based violence and there is a general lack of governance and accountability mechanisms. Most countries lack specific legislation on SRGBV but most have school safety guidelines. A review of interventions related more broadly to addressing violence against women and girls in low-income countries shows that an increasing number of countries have



developed national policies in this area. However, the implementation remains patchy, laws are not accompanied by budget allocations and there is often a lack of support to the laws from key actors, such as the judiciary and police. Some good practices were highlighted such as, the Tuseme Model (Let us speak out) in Kenya; Referral tracking and reporting guidelines on VAC in schools, in Uganda; Investing in Menstrual Hygiene Management (MHM) in a number of countries; and readmission and reintegration guidelines in Malawi, Zambia, and Kenya. The Centre for Reproductive Rights uses strategic litigation to address the needs of girls and ensure that they are protected from violation of their reproductive health right.

**Addressing this violence
requires a multi-level
approach that encompasses
the various contributor**

The presenters recommended that for effective elimination of school gender based related violence, the following needs to be done



- Access to full range of SRHR services (family planning, maternal health care services, post abortion care, abortion) and SRH information including in conflict setting
- Enact re entry to schools policies and facilitate retention of girls in schools
- Investigate and prosecute perpetrators of sexual and gender based violence
- Review restrictive laws on access to abortion and post-abortion care
- Awareness raising programs to fight stigma against sexual violence victims
- Provide psychosocial support and

legal aid to victims of sexual violence

- For the Committee: Full guidance on SRHR including for sexual violence victims



Reaction

During discussions, participants explained that since violence has a cultural implication, it is important to start from a young age at the family level to teach children against the dangers of violence. It was mentioned that sometimes abuse in schools can be contributed to the quality of training that teachers receive and there is need for an advocacy toolkit to ensure that teachers are taught on gender responsive approaches. There is also lack of proper reporting mechanisms in schools, especially for girls. A point was also raised that there is need to look into GBV in humanitarian settings as soldiers are violating girls by asking them for sex for food. Also worth noting is that the challenges in addressing GBV are rooted in culture, and we need to see how we can use positive aspects of culture to end violence. The need for involving everyone, including community based mechanisms and traditional institutions was therefore highlighted. There is a challenge though with ensuring that there is age appropriate sex information given in schools. Some studies show that early education on this causes the children to think in that direction. It was explained that there is guidance in the Gender Equality Strategy for Africa that was drawn from a Continental Strategy on education. A call was made that as a movement, the CSO Forum should provide solidarity and call out for action from the AU.

Child Marriage in Africa – Collective Action for the Next Phase of the AU Campaign to End Child Marriage

This was a panel discussion moderated by Mundia Situmbeko of Girls Not Brides.

The panelists were,

- **Sara Tabit** (Plan AUO)
- **Jennifer Kaberi** (Mtoto News)



- **Two young girls (Yekaba, 14 and Tejitu 16),** who had stopped their own child marriages

The aim was to provide;

1. A comprehensive understanding of the initial phase of the AU Campaign to End Child Marriage –

recognising successes and challenges.

2. An analysis of challenges faced with specific emphasis on CSOs as well as their collective action.
3. Recognition of opportunities that regional bodies and initiatives present for CSOs.
4. A draft set of recommendations to:
 - a. Inform/support collective and citizen-driven activities
 - b. Promote CSOs to become influential stakeholders in national decisions-making processes
 - c. Support CSOs in holding governments accountable for their commitments

The moderator provided a short overview on the state of child marriage globally and in the continent. It was said that while there has been remarkable progress at the regional level in securing government commitments to address child marriage, recent statistics show that efforts are not accelerated. Africa will be home to the highest number of child brides by 2030. It was noted that 12 million girls are married before the age of 18 years in Africa annually, that is 23 girls every minute with a prevalence rate of 76% in Niger and 7% in Rwanda. Child marriage drivers include poverty, lack of education and cultural/social norms. Following the regional launch of the AU Campaign in 2014, 24 countries also launched national-level campaigns to raise awareness about child marriage and to show commitment to

According to Yekaba, her parents decided to get her marriage at the age of 15. She was going to draw water and heard neighbors talking about her marriage and when she asked she was told that the day before her uncle, who had been visiting every Sunday, had been given money for her marriage. She was scared and went home but they had already decided, which made her angry. She refused but was told the father was old and sick and could not afford to pay for her education. The father said if she refused she would not be supported anymore by the family. She was aware of a Plan International program at school, that raised awareness on ending child marriage. She told her friends to write a letter to the teacher and asked the teacher to get involved. The father was called to school and was cautioned against it. The family understood and cancelled the marriage. Yekaba wants to be a Doctor.

For Tejitu, while studying one day, her sister told her a husband had come for her. She was disturbed but she had been sensitised on consequences of child marriage so in the morning she wrote her name and put it in a box in a Plan International program at school. Her teacher informed the welfare officer and her parents were called. The family said they had no resources to educate two children so one had to get married and

addressing the issue. Some examples including the drafting of national strategies and national action plans to end child marriage have been led by government ministries as well as First Ladies.

Peer-to-peer training is an opportunity to create solidarity among the youth to advocate for an end to child marriage within communities

Sarah Tabit highlighted the key regional instruments including the African Charter on the Rights and welfare of Children, the Maputo Protocol, Agenda 2040, Agenda 2063 and the General Comment on Ending Child Marriage, that CSOs could use to hold governments accountable for their commitments to end child marriage. The AU Compendium on Marriage Laws in Africa compiles all laws on child

marriage, and 71% of African countries have not outlawed child marriage completely, while 78% have general legal frameworks but need to look at various dimensions like exceptions. She continued to say that the Joint General Comment provides for a minimum age of marriage with no exceptions, as exceptions put girls at risk. There is need for community mobilization, youth engagement in addressing child marriage. Jennifer Kaberi highlighted that strategic collective action can be successful through a movement of grassroots organisations, empowerment of CBOs, amplification of voices through the media and facilitation of funding for national organisations.

Reflection

The following lessons were shared

- Successful collective action would ideally be driven by the movement of grassroots organisations to empower CBOs and encourage youth participation.
- Sustainable collective action would have to include the support of national organisations to facilitate funding.
- The role of communities including traditional and religious leaders is vital in addressing social norms and supporting an end to child marriage through their influential status.
- Teachers and health workers have to be trained so as to creating



points of contact for alerting incidents of child marriage.

- The empowerment of youth through information sharing is vital to ensuring that they are able to make informed decisions and are also able to speak out if they or their peers are faced with child marriage.
- Peer-to-peer training is an opportunity to create solidarity among the youth to advocate for an end to child marriage within communities.
- A simplification of frameworks would be beneficial to encourage their use by community members to hold governments accountable for their commitments.
- Sensitisation of child marriage should include regional initiatives that CSOs can use to strengthen their messaging and gain political support.



REACTION

In reaction to the panelists, participants wanted to know the prevalence of child marriage in big cities of Ethiopia. It was explained that the statistics differed according to different reports. Other questions referred to how much bride price is charged and whether girls are forced to get married if they fall pregnant. It was explained that bride price in Ethiopia depends on the region, and there is no law requiring girls to get married if they fall pregnant but social norms create expectation for this and the girls are forced to do so in the name of preserving the family’s dignity. In addition, the importance of engaging the media to end child marriage and establishing mechanisms to punish perpetrators, was discussed. Plan International – Girl’s Advocacy Alliance strategies encourage peer to peer education in schools and community conversations. The participants wanted to know how the girls’ families view them after successfully refusing to get married and what their plans are after turning 18 years. It was explained that the families have since been very supportive of the girls education and the girls hope to continue with their studies at university.

General Comment No. 5 of the African Committee of Experts on the Rights and Welfare of the Child

The aim of the session was to improve the Understanding the ACERWC General Comment No.5 of CSOs.



The presentation was made by Ms Yvonne Tagwireyi and Ms Rebecca Theuri from Save the Children International. They explained Article 1 of the Charter.

- (i) Member States to the Charter shall recognize the rights, freedoms and duties enshrined in this Charter and shall undertake the necessary steps, in accordance with their Constitutional processes and with the provisions of the present Charter, to adopt such legislative or other measures as may be necessary to give effect to the provisions of this Charter.
- (ii) Nothing in this Charter shall affect any provisions that are more conducive to the realization of the rights and welfare of the child contained in the law of a State Party or in any other international Convention or agreement in force in that State.
- (iii) Any custom, tradition, cultural or religious practice that is inconsistent with the rights duties and obligations contained in the present Charter shall to the extent of such inconsistency be discouraged.

They continued to explain the rationale of the General comment to include the following;

1. Provides detailed guidance to governments, and other stakeholders on a systematic process of implementing other ACRWC Articles.
2. Guides States Parties on the necessary legal, policy, budgetary, administrative and relevant measures to combat deprivation, provide protection, enhance access to quality basic services, and improve the overall safety and wellbeing of every individual child.
3. Due to limited understanding of the reach and scope of Article 1, G.C lays out the meaning of and scope of this provision, which is the core Article providing the obligation for African governments to realise child rights.
4. Explain the ACERWC preferred approach to child protection systems strengthening.

They further said that the Charter provides for state obligations in different ways. For instance Constitutional provisions on children rights and harmonisation of laws, Legislative provisions concerning child protection are required and States Parties that have entered reservations are encouraged to withdraw reservations.

They continued by saying that one of the main reasons for General Comment 5 was to strengthen child protection systems in Africa. By focusing on coordination of different parts of the systems led by state agencies. This will facilitate the promotion of the right to child protection, Prevent violence abuse, neglect, and exploitation and Respond when violations or issues occur.

The process was initiated at a conference in Dakar in 2012 and in 2013, more than 10 agencies developed the Joint Inter-Agency Statement, seeking to:

- Present a common understanding of child protection systems in sub-Saharan Africa and building a case for why States should invest in this approach



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- Issue a call to action to governments, the AU, RECS, multilateral agencies, donors, the private sector, academia, CSOs, communities and organized children’s and youth groups

The systems approach to child protection acknowledges that children face complex problems that require a multi-disciplinary response. That is, an Individual child can be confronted by multiple needs, violations and vulnerabilities, of differing durations and severity in both stable and emergency settings e.g. a single child might suffer from severe neglect, exploitation, family separation and sexual violence

It advocates for inter-connectedness and cooperation at all levels from the community to national level and vice versa, acknowledging the sub-systems existing, i.e. Children live with their Families/Kin who live among communities which exist in a wider societal system enabled by the Government

Section 6.1 of The General Comment Five focuses on Systems Strengthening for Child Protection. The ACERWC has noted that in its interaction with State Parties, child protection

A systemic approach to child protection moves us away from fragmented, single issue response and directs us to holistic, comprehensive and sustainable interventions taking into account the multiple risks that children face in different contexts and at different stages of their lives

efforts remain weak resulting in multiple violations of children’s rights. This led to continued advocacy by the ACERWC that a systems strengthening approach to child protection should be adopted by State Parties as the most beneficial way in which to improve implementation of the Charter’s protection rights.



Implementing a systems-strengthening approach would address the full spectrum of the rights of the child, and would especially reach the most vulnerable and marginalized such as displaced or migrant and refugee children including unaccompanied children, children with disabilities, girls, children affected by

conflict/disaster, orphaned children.

Key elements of a systems strengthening approach as guided by the GC are:

- Clear foundation in national legislation, as well as accompanying policies and guidance that support its implementation
- Development of comprehensive and rights based national strategies rooted in the Charter, developed through a process of consultation with civil society and other stakeholders including children and young people
- All efforts should be rooted in the specifics of the child protection issues being faced by the respective State Party

The ACERWC urges State Parties to increase the resources dedicated to child protection, and to set targets for annual increases. It also urges State Parties to include specific information relevant to this issue in its interactions with the Committee, including in State Party reports, with sufficiently detailed indicators and results to enable the Committee to assess progress made

There has been achievement on the implementation of the general comment for example Ghana, Kenya, Sierra Leone and Tanzania were in the process of redefining their child protection systems through development of new policy frameworks whilst tapping into existing practices and resources, and forging links between the informal and formal parts of the system. Countries periodically undertake national VAC surveys to inform interventions and programming

The most recent milestone achieved on Strengthening CP systems at a large scale level is the Adoption of the Framework for Strengthening Child Protection Systems in the East African Community (adopted by all 6 Partner States of the EAC)

REACTION

Following the presentation, interventions from the participants focused mostly on strengthening child protection systems. They wanted to know what States and CSOs can do to strengthen lower level structures to ensure action from lower level. A question was raised on what the specific indicators are to ensure that no one is left behind in a child protection system, and the importance of putting in place mechanisms that are backed with a budget was emphasized. In response, it was acknowledged that working with grassroots level organizations is important and there is need to invest in capacity that is devolved. Most importantly, contextualizing what is Child Protection at the community is important for CSOs engaging in the



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implementation. CSOs therefore have a task to make sure that the General Comment is embedded in their projects, and advocate for States to report on it. NHRIs wanted to know what their role is in implementing and monitoring of the General Comment. The General Comment recognises NHRIs in promoting children rights, and they can also work with States and CSOs.

Child Trafficking and Sexual Exploitation of Children

The aim of this session was to highlight the challenge of child trafficking in Africa and the role of CSOs to ending child trafficking.

The panel discussion began with a short video on child trafficking in Uganda, where girls as young as 9 years old are sold from rural Uganda and brought in Urban parts to work as hawkers or sex work.



“There is nothing as street children, Streets have never give birth”

Lynette, from Terre des Hommes Netherlands started by defining the term Child Trafficking saying that, it is the recruitment and relocation for the purpose of exploitation. She continued to say that child trafficking leads to other forms of abuse such as child sexual exploitation, child marriage, child labor.

She further said that the largest number of persons trafficked globally are children, 71% are female.

What are the drivers of Trafficking?

Poverty is the key driver to trafficking, most of the children trafficked are looking for a better life. As CSOs we can not turn our backs on ending poverty.



Human conflict is another cause for trafficking, most children trafficked come from humanitarian areas.

Negative social/cultural norms have contributed to trafficking. Change of cultural infrastructure in most parts of Africa has put children at risk of being trafficked.

The panel urged CSOs that they have a critical role in ending child trafficking by influencing processes at different levels. As individuals we have role of ending child trafficking.

The panel conclude by calling for action fro CSOs and Committee as follows

- Development of subnational laws that help in ending child trafficking.
- Enure there are regulation on transportation of children
- Child trafficking is a security and humanitarian concern, hence the committee should take steps to end it.
- The Committee should make statements on the slave market and the drowning of African refugees going to Europe.
- Regulation for international adoption.

REACTION

During discussions, participants mentioned that trafficking is a political dangerous issue and wanted to know how one activists can protect themselves. In the East African Community (EAC), an anti-trafficking policy has been developed but it has not yet been adopted. Once adopted it will

go a long way towards strengthening crossborder protection of children from trafficking. It is also important to always consider the situation of children affected following crisis. CSOs need to lobby for implementation and to sensitize the community not to give money to children begging and leave their families as children will not benefit out of this. It was asked whether or not there is a referral process and continuum of care for victims of trafficking. There is no regional or continental study on child trafficking and the need to conduct one was raised and TdH and other stakeholders said they are planning on conducting continental research. In addition, CSOs need to leverage on the best practices in RECs, like the development of cross border agreements i.e. in Sierra Leone, Central African Republic (CAR) e.t.c between stakeholders like law enforcement authorities, Interpol. The need to look into how the media portrays children was also highlighted, as an important aspect in preventing children from being revictimised in the process.

**“Educate/Empower
the Child”**

Ending FGM in Africa

Female Genital Mutilation (FGM) is a harmful traditional practice that involves the partial or total removal of the female genitalia for non-medical reasons. FGM is recognized internationally as a violation of the rights of women and girls, an extreme and violent form of discrimination. It violates women’s and girls’ rights to equality, bodily integrity and dignity. The physical and psychological effects are extensive and irreversible, and negatively impact the sexual, reproductive and mental health and wellbeing of survivors. Furthermore, FGM reinforces the inequalities suffered by women and girls in communities where it is practiced.



States have an obligation to end harmful practices. The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC) contain legally binding obligations that relate both in general and specifically to the elimination of harmful practices. Both include provisions which cover

harmful practices as human rights violations and oblige States parties to take steps to ensure that they are prevented and eliminated.

At Africa level, The Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa bans FGM and the African Charter on the Rights and Welfare of the Child call on all states to take appropriate measures to protect children from harmful cultural practices. These efforts were reinforced by the passing of the United Nations General Assembly Resolution 67/146 in December 2012, led by the African delegation, calling for a global ban on FGM. On 25th September 2015 the UN General Assembly adopted the Sustainable Development Goals with a stand-alone gender goal that included target 5.3 that speaks to ending FGM. This has further reinforced the importance of holistic efforts to end FGM



Context of Our Conversation

Most countries have registered a decline in FGM prevalence especially among the 15-19 years age group. Number of cases reported and brought to court has increased since 2015 however most countries are struggling with getting convictions. Only a quarter of cases reported get convictions. Even though countries are facing challenges in the fight against FGM the noticeable gains provide an opportunity to act on this momentum and accelerate efforts to help transform the lives of girls and young women all over the world for the better by ending FGM.

Why Now

The time is right! With only 11 years remain it is important to take stock. According the UN joint program on female genital mutilation, In order to achieve SDG 5.3 by 2030 acceleration is needed. If current pace of intervention is maintained, the SDGs target will not be met.

What Next: Areas of Focus

- **State obligations and accountability:** To fast track implementation of government commitments such as ending FGM towards respect for, promotion and protection of rights of girls, government must embrace a multi-sectoral approach. This can be done by individual states unpacking their obligations under ratified human rights instruments or national laws, and proceeding to link the relevant institutions or sectors of government with the primary responsibility for compliance.
- **Prosecution and Protection:** communities are not aware of existing laws and duty bearers do not understand the laws. Lack of proper investigation and articulation of the crime has led to low convictions despite the high numbers of citizen reports on FGM incidences.
- **Emerging issues:** Medicalization of FGM, cross border FGM, FGM in refugee communities and cutting of older women under the guise of consent. All this are areas that lack comprehensive studies ye they continue too contribute to the prevalence of FGM.
- **Evidence for change:** Quality data is at the Centre of SDG 5 and therefore needed to monitor progress and advance gender-responsive strategies. Government must prioritize gender data, by investing in national statistical systems and the statisticians who collect and analyze data.
- **Advocacy and resource mobilization;** with a continued trend in FGM prevalence reduction, let us not be comfortable more resources need to be pumped in the anti- FGM

discourse to avoid regression on the many gains achieved so far.

Saleema: African Union Initiative on Eliminating Female Genital Mutilation

She concluded by saying that on galvanizing political commitment towards the elimination of female genital mutilation in Africa, the following needs to be done;

- African Union Champion for the Elimination of Female Genital Mutilation.
- Main focus on ending medicalization and addressing cross border practice of female genital mutilation.
- Put in place accountability framework to hold Member States to account at the regional and national level in line with commitments
- Need for a gendered/ feminist perspective

REACTION

Following the presentation, it was mentioned that we need to find a way of linking the interventions of child marriage and FGM as the two are interrelated. Attention was drawn to the high prevalence rates of both FGM and child marriage in humanitarian settings. Participants also wanted to know the strategies available to support CSOs to help governments to pass laws on ZERO tolerance on FGM in the context of religious and traditional laws that provide otherwise. It was said that ending FGM needs contextualized interventions including community conversations, engaging with parents, and if there are new approaches to ending FGM, experiences must be shared. Uganda was mentioned as a best practice where the prevalence rate has gone down since the enactment of the Anti-FGM Act. A call was made to rejuvenate the conversation and involve the communities, as there has been a lot of impatience among those advocating against FGM, but not much progress seems to have been made. As FGM is perpetrated as an income generating activity for most perpetrators, there is need to find innovative ways to address their needs.

Children’s rights in a refugee setting; A presentation by children in Ethiopia



The session moderated by Plan International Pan African Office, started with testimonials of two ladies of their refugee experience . One narrated how she was forced to run away from her

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country, she traveled day and night to the refugee camp in Ethiopia, she lost a child on the way. Since her arrival in Addis Ababa, she has been able to start over her life.

The testimonials set an environment for the presentation on the 2019 AU theme; “The year of Refugees, Returnees and IDPs: Towards durable solution towards forced displacement in Africa” , which the Committee have customised to the Humanitarian Action- Children Rights First.

The presentation done by Salem Abram , giving a situation of the current humanitarian state, she started by saying that most children are forced Displacement is driven by such factors as conflict , poor governance, political instability, environmental change and resource scarcity. She said that the situation of women and children is very difficult and access to key services considerably limited.

She noted that over the years there is an increase in the scale, complexity and duration of these drivers of displacement, which impacts on the access to essential services including education , which is important for supporting livelihoods of refugees, is considerably limited to refugees. The scale of these crises and their protracted nature require innovative and robust approaches to tackle root-causes and implement approaches that support durable solutions



The African continent hosts over a third of the world's forcibly displaced persons. 6.3 million refugees and 14.5 million internally displaced persons (IDPs).

Noting that globally estimate of 68 million people are forcibly displaced. At least one person is forcibly displaced every two seconds as a result of conflict. The African continent hosts over a third of the world's forcibly displaced persons. 6.3 million refugees and 14.5 million internally displaced persons (IDPs). Africa is home to 509,900 asylum seekers and 712,000 stateless persons. There are approximately 28 million forcibly displaced children worldwide including 10 million child refugees , 1 million child asylum seekers and 17 million children who have been internally displaced. Forced



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displacement in Africa due to conflict, natural disasters, human rights violations or political instability has resulted in over 12 million IDPs and an estimated 6.2 million refugees and asylum seekers.

She pointed out that this year marks the 50th Anniversary of the 1969 OAU Convention Governing the Specific Aspects of Refugee Problems in Africa (OAU Convention)- Article 7, 10th anniversary of the 2009 African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (the Kampala Convention).

Hence the AU has organised a number of activities to mark the the theme. They include



THE YEAR OF REFUGEES, RETURNEES AND INTERNALLY DISPLACED PERSONS:

Towards Durable Solutions to
Forced Displacement in Africa.

“WHEN CHILDREN AND YOUTH ARE
DEPRIVED OF THEIR RIGHT TO EDUCATION,
THEIR COMMUNITY IS DEPRIVED OF A
SUSTAINABLE FUTURE. IT IS ALL THE
MORE TRUE WITH REFUGEES.

Forest Whitaker

#NEVERMYCHOICE

www.au.int     

- Coordination Summit June/July 2019
- International Day of Refugees – June 20th
- A Humanitarian Summit – late 2019
- National level workshops to promote ratification and implementation of the Kampala convention
- Advocacy for domestication

REACTION

During discussions, it was raised that the AU theme creates opportunities for more players to work on the theme as CSOs we can make it an advocacy agenda. Participants highlighted the importance of holding States accountable to their commitments to protecting children in humanitarian settings, especially unaccompanied minors. They wanted to know specific actions taken by the AU in respect of socio-economic reintegration of returnees, in order to achieve durable solutions. They also wanted to know how issues of sexual exploitation in refugee



settings are dealt with, and whether or not children participate on matters concerning them. Key to the discussions was the issue of detention of migrant children which participants called for an end. The African Union needs to be reactional instead of proactive.

RESPONSES

- It creates opportunities for more players to work on the theme as CSOs we can make it an advocacy agenda.
- We need to hold states accountable on this issues.
- The African Union is reactional instead of proactive

DAY TWO PLENARY

- The General Comment 5, gives an opportunity for CSOs to work NHRIs in submitting reports as guided in the affiliate status.
- The return to school model can be scaled up ensuring both mother and child have a second chance to better life.
- Innovating includes, including children voices, may be having side events for children.
- Advocating for increased budget allocation for children.
- Child help line is a tool that can be used to report violence and collect data on children. In Africa 116 is a short toll free number to make it easy for children to report trafficking and other abuses.
- Quality and affordable secondary school education for the girl child is essential to ending violence.
- Have there been any conviction or any case laws available of FGM.
- Inter country adoption needs regulation, to ensure safeguarding of children adopted out of the continent.
- State parties to balance between physical infrastructure and human capacity.
- There is need to examine the relationship between online exploitation and child trafficking.
- There is need for proper coordination when dealing with child trafficking.
- Is child harvesting, child trafficking. Child harvesting is where children are produced for trafficking. Girls are forced to sleep with boys, they give birth and the babies are sold into trafficking.

RESPONSE

- Baby factories is both sexual exploitation and child trafficking.
- Trafficking is complex
- There is a law that has been





DAY THREE



SESSION SEVEN: ECD and NHRIs SESSION

Nurturing Care for Early Childhood Development – Understanding the key issues in child protection

The presentation was made jointly by Dr. Amina and Ms Alice Kabwe, representing the Africa Early Childhood Network (AfECN). The two provided an overview of the science of early childhood development (ECD), stressing on the need for understanding nurturing and care for early childhood development. They also presented the global and regional landscape of early childhood development and reflected on what needs to be done.

ECD encompasses physical, socio emotional, cognitive and motor development between 0-8 years of age. It covers the period from pre-conception. ECD is important because child development is a foundation for community development and economic development. Brains are built over time, and are built from the bottom up, and the interaction between genes and experience shape the structure of the developing brain. Poor early experiences affect the individual child, community and larger society. As such, creating the right conditions for early childhood development can be more effective and less costly than



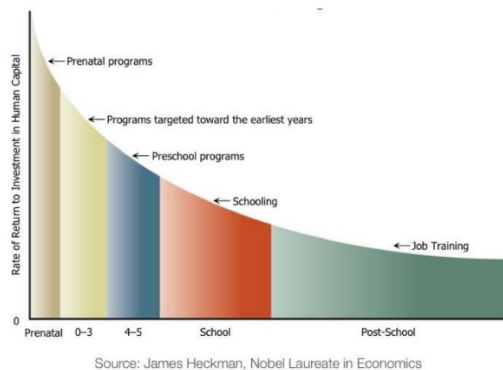
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addressing problems later. Caregivers play a key role in building the developing role through responsive caregiving. Capable children become the foundation of a prosperous and sustainable society. Therefore, early development of skills builds a strong foundation for success into adulthood. These include cognitive and social skills, emotional wellbeing, physical and mental health, communication, critical thinking, problem solving and collaboration. In brain development, simpler neural connections and skills form first, followed by more complex circuits and skills and the connections that form early provide either a strong or weak foundation for the connections that form later. Adverse experiences in the early years can impact brain functions with negative effects lasting into adulthood. The brain architecture is constructed through an ongoing process that begins before birth.[1] In the first few years of life, more than 1 million new neural connections are formed every second.

Neural connections enable fast communication among neurons that specialize in different brain functions. The early years are the most active period for establishing neural connections. After this period – connections are reduced to enable efficiency (pruning). The interaction of genes and experience shape the developing brain. The brain

develops a genetic blueprint in the embryo/fetus that establish the broad strokes of development. The environment modifies this blueprint during critical periods of development.

4. Economists have found that investing early results in a higher rate of return



**17%
Return on
Investment**

Investing in quality early childhood programmes particularly for vulnerable populations can level the playing field



Responsive caregiving (interactions with adults) is the active ingredient as sensory, language and cognitive functions are dependent on early experiences between conception to 2 years. It is easier and less costly to form strong brain circuits during the early years through interaction. Economists have found that investing early results in a higher rate of return (17%) on investment. Investing in quality early childhood

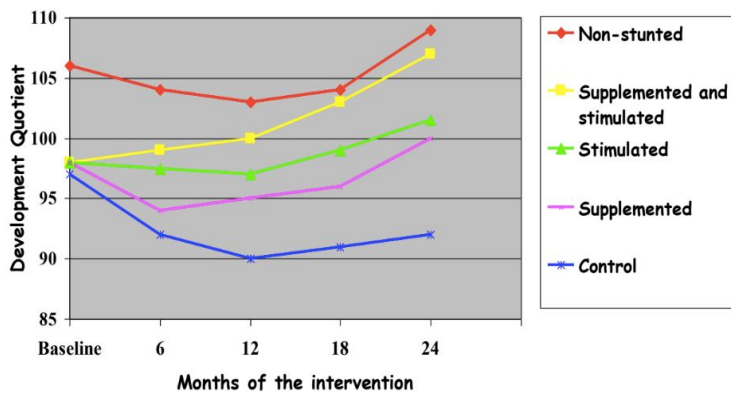


programmes particularly for vulnerable populations can level the playing field. Poor quality experiences in early childhood create inequalities in health and economic achievement. Quality early experiences can break the intergenerational cycle of poverty.

On the importance of caregiver-child interactions, it was mentioned that every time a parent speaks to a young child, it sparks something in the child, stimulate them and brain connections are formed.[2] Responsive caregiving therefore involves quality interactions between adults and young children. A case study from Jamaica was presented, to highlight how responsive caregiving impacts child development. This was an experimental intervention study which looked at the effects of nutritional supplementation and psychological stimulation on stunted children aged 9-24 months. A total of 129 children from poor neighborhoods were randomly assigned to four groups. There was the control group; the supplemented group which received milk-based formula; the stimulated group, which received weekly play sessions at home; and the supplemented plus stimulated group.[3] Those who were supplemented and stimulated

showed the best development results. When the children were followed up at 17-18 years, the supplemented and stimulated group had, higher reading, vocabulary, IQ scores, less depression and anxiety, and higher self-esteem. No differences were observed for the group that was supplemented only. At the age of 22 years, the stimulated and supplemented group showed higher adult IQ, education, and learning. There were fewer fights and serious violent behavior amongst them.

Effects of supplementation and stimulation on the development of stunted groups compared with non-stunted groups



Development quotient includes practical reasoning, eye and hand coordination, hearing and speech, and performance.



They displayed less depression and social inhibition while there was no differences observed for the supplemented only group. Thus child development is a foundation for community development and economic development. Poor early experiences affect the individual child, community and larger society. For a best start in life, children need good nutrition as well as a protective and caring environment. Neglect fails to provide stimulation, which is critical for later brain learning. Abuse results in elevated levels of cortisol which is toxic to brain cells.



Poverty is one of the major drivers of developmental delay in children. Nurturing care is a set of conditions for a whole society child centered approach to strengthening societies. Nurturing children means keeping them safe, healthy and well nourished, paying attention and responding to their needs and interests, encouraging them to explore, and providing them with opportunities to learn. In order for caregivers to be able to provide nurturing care, they must be secure, economically and socially, participate in social networks, be empowered to make decisions in the best interests of the child, and affirmed in the important role they play in the lives of the children in their care. There are multiple entry points to strengthening the enabling environment that young children develop. These include, caregivers’ capabilities, supportive services, empowered communities and enabling policies.



Ms Alice Kabwe provided an overview of where we are now and what needs to be done.

Globally, there has been prioritization of ECD as follows,

a. Prioritisation in the Sustainable Development Goals (SDGs).

Goal 1, target 1.2:

Poverty reduction; Goal 2, target 2.2: End hunger, access to adequate nutrition; Goal 3, target 3.2: Reduce neonatal and child mortality; Goal 4, target 4.2: Access to quality early childhood development, care and pre-primary education and Goal 16, target 16.2: End abuse, exploitation, trafficking and all forms of violence and torture

b. Prioritisation in international and regional instruments

The Committee on the Rights of the Child adopted General Comment No. 7 of on implementing child rights in early childhood development.

CESA 2016-2025 focus on pre-primary education Early Childhood Education & Development Cluster.

Africa faces a significant gap in human potential as 43% of its children aged under 5 are at risk. Globally 250 million children from low and middle income countries are at risk of not achieving their developmental potential. Two out of three children under 5yrs are developmentally off track as a result of poverty and stunting. Africa has the highest prevalence of poor development compared to any other region. About 47% of Africa’s population live on less than USD\$1.90/day.[4] There has been a reduction in child poverty in the last 15 years but wide discrepancies within countries remain. Stunting of children under 5 has decreased by 8% in the last 16 years. At least 30.4% of Africa’s children are stunted. There is wide variability between and within countries. In terms of education, at least 42 countries have pre-primary in their formal curriculum but access remains a challenge. There is lack of quality standards and monitoring for the private sector. In terms of protection, children aged below 4 years are two times more likely to face some form of maltreatment from parents/caregivers. Paid maternity leave is offered in 44 countries. There is a growing use of cash transfers to support families. In 2017, only 17 countries had social safety net programmes for OVCs. ECD policies/guidelines

Africa’s human potential gap is further compounded by the increasing child and youth population

1 BILLION
By 2055, 40% of the world’s child population will be in Africa

We have the opportunity to invest now and create nurturing environments for young children to thrive and become active, creative and productive members of the workforce.



have been integrated in 24 countries only, while 8 countries have inter-ministerial coordination mechanisms. In terms of health, 32 countries have universal health coverage policies. There have been reductions in infant and child mortality (53% and 78% in

2016). However, there is inadequate attention to maternal mental health and limited integration of stimulation/responsive caregiving within health care and other child care settings. Africa’s human potential gap is further compounded by the increasing child and youth population. By 2055, there will be 1 Billion children in Africa, and 40% of the world’s child population will be in Africa. We have the opportunity to invest now and create nurturing environments for young children to thrive and become active, creative and productive members of the workforce.



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To support nurturing care, child rights advocates can provide early learning opportunities, health and nutrition. They can advocate for quality environments and transitions from child care centers/pre-schools to primary; maternal mental programmes; nutrition and stimulation programmes; responsive caregiving; parenting programmes; safe family play spaces; provision of safe water and sanitation; reduction of air pollution; prevention of violence by intimate partners and families; insurance/income assistance (cash/in-kind transfers); and minimum wage

Child rights advocates can also empower caregivers about the importance of their role in early brain development. In conclusion, the presenters stressed the importance of starting early, focusing on marginalized communities, and ensuring multisectoral Collaboration.

When we invest wisely in children and families, the next generation will pay that back through a lifetime of productivity and responsible citizenship”.

REACTION

Questions

- Share examples on proper supplementation
- Is the stimulation for both girls and boys the same?
- What is the recommended age to get to ECD
- How willing are parents to get into stimulation
- When does social attachment begin?
- Is stunting is reversible since the signs show much later
- What is your comment on advanced technology as young kids play with phones even at 2 years old?
- Cognitive development and physical development often a child can skip a step from not being able to crawl to walking. Is there any effect



- Is there potential for governments to invest in ECD and are there any examples

Response

- Proper stimulation – the practice has been supplementation but for the child to develop fully, we need to include stimulation including simple play and communication activities
- Stimulation rates is the same for boys and girls and no need to separate play materials according to gender
- Ideal age for ECD = in most countries preschool is at 3 or 4 but other countries like Finland do it later but they have other programmes at homes. Social emotional aspect is very important and pre-schools should not focus on arithmetic so need to focus on quality and at that level it means ECD activities. At 24
- We know enough but are not doing enough. Governments know the importance but not taking it seriously. We need to advocate
- Cognitive development begins in the womb and we need to start stimulation even before the baby is born
- Stunting begins early and can be reversed especially before 5
- Advanced technology, is not powerful or encouraged as the communication and interaction is key
- Physical development, children get ready at different times unless the delay exceeds the expected period
- Absence of investments from the government's- what are communities doing? Important for communities to play a role using existing structures

Group work

After the presentation, the participants were put into groups per their regions and requested to respond to the following questions

1. How can we utilize the content in our regions and as the CSO Forum?
2. How can the CSO Forum use the information?
3. How can AfCEN support you?



	How can you utilise this content in your regions?	How can the CSO forum utilise these contents to enhance child rights	How can AFECN Support you
Eastern Africa	<p>Promote positive parenting, focusing from below 3 years at the household level</p> <p>Child participation from early stages</p> <p>Sensitize that learning is beyond academics, it includes play and not focusing on grades.</p> <p>Advocate for community led ECD supported by states. Translate the models into humanitarian settings</p> <p>Incorporate ECE into SRH programs</p>	<p>Advocating for ECD</p> <p>Advocating for positive parenting as part of child protection systems</p> <p>Push for policies of early years that promote ECD.</p> <p>Push for budget allocation for ECE Indicators of ECD and Implementation</p>	<p>Train CSOs on ECD. Support a multi sectoral approach for ECD.</p> <p>Sharing materials and resources</p> <p>Have an oversight structure for ECD</p>
West Africa	<p>Disseminate information to others.</p> <p>Support family planning.</p>	<p>Collaborate with other members at regional level.</p> <p>Enhance Capacity</p>	<p>Technical and financial support to members</p>
South Africa	<p>We need to have national network advocating of development if there is none and implementation if there is a policy in place</p> <p>Use the data to advocate for effective implementation and</p>	<p>Advocacy Integrated ECD Model in African Incorporating status of ECD in Complementary/Alternative Reporting Processes with UN</p>	<p>Assess on ECD by CSO which can be shared at regional on rating or performance</p>



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	<p>monitoring of the ECD Policy. In addition, the information presented can support National Networks to advocate for adequate resourcing for ECD, efficiency in spending, budget tracking as a critical step for implementation of ECD.</p> <p>Lobby for government put budget on ECD</p>	<p>Committee and ACERWC</p> <p>Publish good practice on integrated and comprehensive ECD.</p> <p>Use the data as a driver for ECD with the SADC Protocol.</p>	<p>Capacity building and technical support CSOs</p>
North Africa	<p>Publish the information</p> <p>Share the content with the committee</p>		<p>Sharing the data</p>
Central Africa		<p>Advocate on improvement of ECD</p>	<p>Develop Training</p> <p>Build the capacity of members on ECD</p>

National Human Rights Institutions

The aim of this session was streanghen the collaboration between National Human Rights

Institutions and CSO Forum. The



session started with a short brief on the role of NHRIs in monitoring children rights by Marie Ramtu, The child rights Coordinator at NANHRI.

The presentation was followed by presentations from National Human Rights Institutions.

Veronica Mwangi-Asst. Director/Advocate, Head of Complaints Management Unit-KNCHR (Joint Secretary Intersex Persons’ taskforce-GoK

May, 2017), briefly elaborated on the mandate of the Kenya National Commission on Human Rights (KNCHR). The Commission seeks to inculcate a culture for respect of human rights for All, through functions and strategies outlined in Section 8 of the KNCHR Act (2011).

The presentation started with a set of videos showing the plight of intersex children which can be found on the following links

- a. The plight of Intersex children: Abroad and here in Africa.

<https://www.youtube.com/watch?v=5dJduGC3HyQ>

- b. African contexts:

- **Kenya** See born in between documentary see:

https://www.youtube.com/watch?v=jX_krtp-cw0

- **Uganda** See: <https://www.youtube.com/watch?v=K38SltVzBqM>

- Documentary that was done for the day of the African child #DAC2018

[leave-no-child-behind](#)

- Commissioner Jedidah from KNCHR talks about work on children including intersex children. <https://youtu.be/UB7TUVbxazc>

She said that according to Dr Ngatia, “Hormones are not assigned, they assign themselves.” UN Office for Human Rights, concluded that around 1.7% of new-borns across the world can be classified as intersex. Intersex is a condition where a human being’s physiological characteristics cannot be classified as exclusively fitting into the binary



concept of ‘male’ or ‘female’ at birth. There are over 46 intersex variations. The legal definition of intersex in terms of The Persons Deprived of Liberty Act (2016) is “a person certified by a competent medical practitioner to have both male and female reproductive organs”. The medical definition refers to ‘Intersex condition’ as “a disorder of sex development” (DSD),

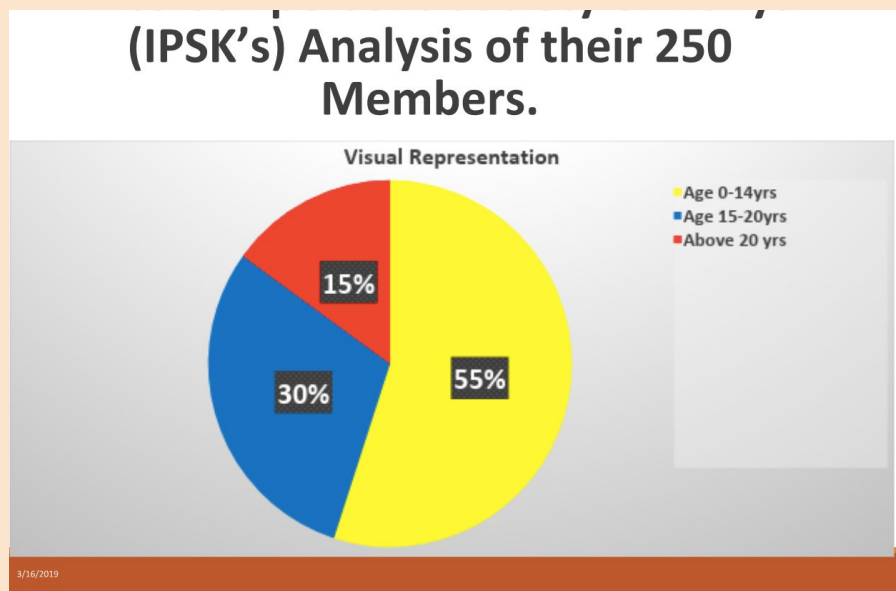


denoting congenital conditions with chromosomal, gonadal and anatomical sex development that is atypical.

Most countries have not taken steps to establish comprehensive data on intersex persons. Consequently, not many countries have made concrete legislative and other measures specifically aimed at safeguarding the rights of intersex children. She continued to say that Human rights are entitlements to every human being. They are inherent; they belong to a person by virtue of being born. In Kenya, Chapter 4 of the Constitution guarantees all rights, including the right to life and human dignity, protection from discrimination, security of the person, and access to justice, association.

There are also religious definitions and the Biblical perspective is taken from Genesis 1:27 and Mathew 19:12 (NIV), while the Quranic perspective is derived from Qur’an 42:49-50, and it recognizes 4 genders: male, female, Khusna & effeminate male. Societal definitions, include one who has been born with biological characteristics which cannot fit in a typical male or female binary.

Veronicah said that the KNCHR, as an institution established under Art.59 Constitution of Kenya to safeguard the enjoyment of human rights for all by exercising an oversight mandate, promotes and protects the rights of all including of intersex persons as equal persons before the law. The protection mandate includes accountability platforms like complaints management, investigations, public inquiry, Public interest Litigation, monitoring state



compliance, media advocacy etc. In May 2017, a task force on the rights of intersex persons was established and the KNCHR was appointed as a member and designated as the Secretariat the taskforce. Joint Secretaries are drawn from KNCHR and office of the Attorney General. Partnerships have been formed with state and non-state actors and development partners to

achieve the mandate of the taskforce. A baseline survey has been conducted, various media platforms are used to raise awareness, and stakeholder forums are held to receive memoranda on the plight of Intersex persons. In 2019 there is heightened advocacy for reforms (legal, policy, practice). The taskforce transmitted its final report to the Attorney General, and there has been dialogue with Kenya Bureau of Statistics (KBNBS) to include a code three under sex-intersex/other in the 2019 Census.

To achieve its TORs, the Taskforce undertook comprehensive and intensive research and stakeholder consultations targeting various actors drawn from health, justice, social work, professional bodies, education, academia, government agencies, CSOs, intersex families and intersex persons both old and young. The Taskforce rolled-out a nationwide survey and use of ICT platforms to complement desk review and stakeholder input, which informed the key proposals on development of policy, legal, institutional and administrative measures to address the plight of intersex persons.

This culminated into a final comprehensive report, on the plight of intersex persons, findings and recommendations, for transmission to the Attorney General of Kenya. Following this, the taskforce proposed the following definition for intersex persons ... “A person who is born with a biological sex characteristic that cannot be exclusively categorised in the common binary as female or male due to their inherent and mixed anatomical, hormonal, gonadal (ovaries and testes) or chromosomal (X and Y) patterns which are apparent at birth, puberty or adulthood.”



Challenges faced by intersex persons include lack of recognition and documentation, human rights violations, discrimination, inadequate policies, laws, institutional, administrative processes, inadequate psychosocial support and medical structures, lack of prioritization...even by all stakeholders. Intersex persons have been subjected to non-consensual medically unnecessary genital normalising surgeries and genital mutilation on minors; infanticide and baby abandoning; lack of appropriate legal recognition and administrative processes allowing intersex persons to acquire or amend identity documents; stigma (socializing, psychological



distress, ridicule by peers, isolation); child abandonment; unfair discrimination in schools, health care facilities, competitive sports, work, access to public services, detention and many other spheres of life, difficulties to get married, mob attacks, and some have attempted suicide as a result of this.

KNCHR has joined cases as *Amicus Curiae* (friend of the court). In *The R.M vs. Attorney General & 4 others* [Nairobi High Court Petition No. 705 of 2007], the Court addressed the legal recognition of intersex persons for the first time. In this case, the Court rejected the claim by the Petitioner that he had suffered lack of legal recognition on account of having not been registered under the Births and Deaths Registration Act. The Court argued that intersex persons could be categorised as either male or female by relying on their dominant sex characteristics. Further, the Court rejected the petitioners claim that the meaning of ‘sex’ under the Constitution of Kenya included ‘intersex’, restricting itself to a strict gender/sex binary. However, the court affirmed the right to dignity and protection from torture, inhumane and degrading treatment. The Court found that strip searches had been subjected to RM during incarceration and held this to be cruel and to have brought ridicule and contempt. As a result, the Court constituted inhuman and degrading treatment in violation of the Constitution. The ruling informed recognition of the Intersex persons in the enactment of the Persons Deprived of Liberty Act [2014], which makes provision for confinement and searches for intersex persons while in custody, and Chapter 15 of Police Standing Orders, which makes provision for the treatment of detained intersex persons with regard to searches and confinement in cells.

In *Baby ‘A’ (Suing through the Mother E A) & another v Attorney General & 6 others* [2014] eKLR (Baby ‘A’ Case), hospital records indicated the baby’s sex by a question mark and as a result, the child could not be issued a birth certificate. The High Court ruled that ‘baby A’ had suffered from the lack of legal recognition and that differential treatment was not on account of discrimination. However, the Court made rulings which have a positive bearing on the rights of intersex persons. First, the Court determined that the petitioner was an intersex person, thus recognising that such a category of individuals existed, contrary to the finding in the Richard Muasya case. Second, the Court went on to order ‘appropriate relief’ for the petitioner by compelling the Attorney General to file a report identifying the status of a statute addressing intersex persons as well as guidelines and regulations on ‘corrective surgery’ for this group. Thereafter, On May 26, 2017, the Government of Kenya gazetted a taskforce on policy, legal, institutional and administrative reforms regarding intersex persons in Kenya in an effort to implement the decision in the Baby ‘A’ Case.



To help in addressing the plight of intersex persons, people can engage in advocacy- create awareness to all; ensure Police and legal reforms; reduce social stigma by all in society; offer, avail and make accessible support services needed to safeguard the human dignity of the intersex persons; recognise intersex persons existence then open up a dialogue and stop mass human rights violations against them. The society needs to stop marginalizing intersex children and persons and a multi sectoral approach is needed to address the concerns of intersex children. They need to be included in research indicators, advocacy programmes, activities, and their voice should be enhanced at the regional level.

Witchcraft as an emerging threat for child rights in Tanzania

Mr Stanley Kalokola, Commission for Human Rights and Good Governance (CHRGG)

Mr Kalokola gave a background to the issue of witchcraft suspicions against children in Tanzania. Early October 2018, there was an emergence of reports from media on missing children. From December, 2018 ten children were reported missing in Njombe region, Southern part of Tanzania which shocked the whole nation. Most of the reports associated abduction with witchcraft which seems to be predominant in that region. Therefore, it was not clear whether all the abductions were as a result of Witchcraft because of the complexity around witchcraft. On 20th January 2019, three children from same family were found murdered but some body parts were missing i.e private parts, tongues and teeth. It was from this observation the community suspected that the deaths of the innocent children were connected to witchcraft, and this brought a lot of tension to the public.

The Government intervened strongly by condemning the incidences and initiated an investigation. In some areas, secret votes were made to unveil the perpetrators which largely assisted investigation. The Government made a call for review of the licenses of all traditional medicine men to



screen those who were cited to be involved. More than 47 suspects were arrested in connection with murders, out of which 10 were traders. On 12 February 2019, three persons were arraigned and charged with the murder of three children of the same family. The children were kidnapped by their cousin while playing outside their parents’ house on January 20, 2019. CHRAGG conducted a fact finding mission on Njombe region which involved the RC, RPC, RMO, NPS, Local NGOs, Traditional Medicine Men Organization, Police Gender Desk, business men, some members of the community to gather information. The mission also found out that there were issues on a number of deaths reported in the media. Joint statements were also issued by various CSOs.

Through this process, there have been some lessons learnt. There’s need for more human rights education. Fact finding missions are very important and the media, the family and communities all have a big role to play. Child protection mechanisms have to be comprehensive and sustainable rather than reactionary. Witchcraft practices still have strong roots in societal beliefs. NHRIs and child protection stakeholders need to cooperate.

Sexual and Reproductive Health and Rights in Malawi: The Role of the Malawi Human Rights Commission

The focus of MHR Services in Malawi on SRHR has traditionally been maternal and neonatal health (including prevention and management of unsafe abortion).

Young people’s sexual and reproductive health, family planning, prevention and management of STI, HIV and AIDS, early detection and management of cervical, prostate and breast cancer, elimination of harmful maternal



practices including domestic and sexual violence, prevention and management of obstetric



fistula, prevention and management of infertility, male involvement in the development, promotion and delivery of SRHR services, development of human resources for SRHR services, and strengthening of the support systems for delivery of SRHR services.

The reason for addressing SRHR for the youth was due to increased occurrence of early and unwanted pregnancies, cases of induced abortions and cases of STIs and HIV infections. Most young people in Malawi engage in sexual activities at an average age of 15 years (DHS 2015-16). On some situations girls start having sex at the age of 10 years (and there are some reported cases of 12 year old girls being pregnant). The School curriculum, the media and peers are mostly reliable sources of SRHR issues in Malawi (DHS). Culturally, the youth don’t feel comfortable to be treated by male nurses, and medical personnel are not comfortable with children or the youth asking for condoms. Some clinics do not have admission facilities, and pregnant children are sometimes forced to give birth at home for parents to protect their public image.

Most SHRH services do not target the youth despite the Ministry of Health developing Youth Friendly Health Services standards. The Malawi society in general does not support the Youth’s access to SRHR services. Girls pregnancy is one of the major contributing factor to school drop out. To address the issue of lack of SRHR services, the MHRC has hosted meetings with District Local Authorities and district stakeholders, monitored service centres and units, held public hearings (led by the High Court Judge), and conducted a public inquiry on SRHR and Human Rights in 2015. The public inquiry found that although most youths and children start engaging in sex at the age of 12, parents and teachers are not open about sex and sexuality despite having topics on sex education in the curriculum. The health clinics have un youth friendly health services, as there is no privacy (sometimes there are five to six people in the room, which makes adolescents feel shy to say they have a SRH issue). The inquiry also found that there are increased cases of forced marriages, sexual violence and coerced sex, incest and defilement. In 2016, a Malawi country assessment of the accountability for sexual, reproductive, maternal, child and neonatal health and human rights, found that a lot of NGOs work in the urban than in the rural areas and most youth in the urban areas are able to demand SRH services. SRH services mostly available in the urban clinics than in the rural clinics. The study recommended that there should be intensified appropriate sexuality education in the schools. Accordingly, the MHRC should provide an oversight role and leadership in the promotion and protection of SRMNCH rights, and the Medical Council work in partnership with the Commission. Following this, the National Sexual and Reproductive Health and Human Rights Policy (2017-2022) was developed and it provides for youth-friendly services that support



young people to have quality services that are safe, that support safeguarding privacy and confidentiality, with informed consent, while also respecting cultural and religious values.

There are so many unmet needs for SRH among the youth, and in 2018, the Human Rights Coordinating Forum was established, with overseeing an equal distribution of human rights services including the SRHR, as one of its functions. There are District Monitoring Committees (formed following a 2015 National Conference on Sexual and Reproductive Health and Rights) on the implementation of SRHR services to the youth with periodical district review meetings. In terms of advocacy for legislative reform, the MHRC is currently working on a position paper on recognition of SRHR in the Constitution of the Republic of Malawi. Section 30 of the Constitution, provides for the right to health as a subset of the right to development. Services to adolescents on sexual and reproductive health are generally covered in the context of women’s health hence lacking comprehensive guidelines or policy on adolescents.

An implementation framework for the sexual and reproductive health policy for adolescents and ensure that sexual and reproductive health was developed in collaboration with NGO CCR, the Ministry of Gender, Children, Disability and Social Welfare, and Ministry of Justice, and a child friendly booklet has been developed to popularize the policy.



There are challenges in that the National Youth Policy allows the youths to access to SRH, but The Ministry of Education Policy does not allow availability of family planning services in schools. The communities as well does not accept availability of family planning services to the youth. As such, areas still in need of consideration and public deliberations include, whether a girl child should have access to contraceptives, or condoms should be available in primary and secondary schools. Whether girls should access SRHR on their own without the knowledge of their parents and what role do parents and teachers have in the sexual and reproductive health of their children.

The extent to which is SRHR information is available in the home is not known. On the community vs the school on SRHR lessons in the curriculum, there is a general feeling that current educational programs in the primary and secondary schools encourage sexual behaviour hence increased cases of teen pregnancies and contraction of STIs and HIV amongst adolescents.



Addressing Early Pregnancy in Schools in Cote D’Ivoire

The National Council of Human Rights of Côte d'Ivoire (CNDHCI) was established and is governed by Law No. 2018-900 of November 30, 2018. The Council has national territorial jurisdiction and embraces all categories of Human Rights. Amongst its functions, CNDHCI promotes, protects and defends human rights. It advises the Government, Parliament and any other institution competent in the field of human rights, to report, on the situation of human rights in the country. The CNDHCI is composed of the Central Council with 12 members, and Regional Councils, and 248 regional councilors, have been set up to enable the CNDHCI to get closer to the populations. The CNDHCI prepares an annual report on the state of human rights, which it sends to the President and to all institutions of the Republic.

There has been a growing trend in pregnancy rates as shown in the pocket school statistics 2016.2017 from the Directorate of Planning Strategies and Statistics at MENET

School Years	Pregnancy Cases
2000	202
2015	5992
2016	4035
2017	4471
2018	4276

He noted that more than half of girls live in rural areas, and 60% are aged between 12-17 years. About 4% of the pregnancies are by teachers.

The main factors contributing to teenage pregnancies in Cote D’Ivoire are, lack of sex education, lack of communication between parents and children (as discussing sexuality issues is considered a taboo), clandestine sexuality among teenagers, and poverty sometimes pushes some young girls to give themselves to men in exchange for money. The consequence is that there is interruption of the girl’s schooling, which is a violation of the right to education of the girl. There are also some health risks such as unsafe abortions and sterility. In order to combat

early pregnancies, the CNDHCI engages in an awareness-raising campaign on compulsory schooling; conducts research and produces and disseminates reports since 2013, addressed to the President of the Republic and the High Authorities; supports government Initiatives on Zero Pregnancy Campaign and promotes the Ministerial order of reinstatement of the girl after delivery. In addition, CNDHCI engages in community mobilization, by working with Civil Society Organizations, such as "AIEESEC" of Korhogo and the Ivorian agency of social marketing (AIMAS), which are conducting a campaign on sensitization on the issues of pregnancies in schools.

Political and administrative authorities are also playing a big role in the fight against early pregnancies, and there have been Members of Parliament who have encouraged parents to file complaints against the perpetrators of pregnancy in schools. Through the State Party reporting mechanism to treaty bodies such as the ACERWC and the Committee on the Rights of the Child, the CNDHCI has been able to submit reports on the implementation of the Convention on the Rights of the Child in 2018. In order to deal with the problem of early pregnancies in schools, Cote D'Ivoire needs to strengthen the penal system, increase the academic infrastructure for girls, and people must feel free to engage the NHRI to take up the issue.

Good Collaboration with CSO in Ensuring Children’s Participation
by Omolara Akintoye-Asuni, South African Human Rights Commission (SAHRC)

The SAHRC was established by the Constitution as one of the institutions supporting democracy. It is mandated to, promote respect for human rights and a culture of human rights; promote the protection, development and attainment of human rights; and monitor and assess the observance of human rights in the Republic.



The Commission has the power to promote and protect human rights enshrined in national legislations, national policies, international and regional instruments. In line with the Constitution the Commission has divided its work stream into Promotion - Advocacy, Protection- Complaints handling and Monitoring- Research. The Commission has 8



Commissioners who have specific focus areas to manage. These focus areas are; access to justice and adequate housing, basic services and health care, basic education, disability and older persons, environment, rural development and natural resources, immigration and equality, human rights and law enforcement and children’s rights

Realizing the importance of collaborating with CSOs, the SAHRC Act requires the Commission to liaise and interact with any organisation which actively promotes respect for human rights and other sectors of civil society to further the objects of the Commission. The SAHRC complements the civil society’s footprint through its mandate to investigate matters and compel government. This ensures strategic impact which avoids duplication. The platforms for collaboration include Section 11 Committee Meetings, Memorandum of Agreement/ Understanding on specific projects, investigative hearings, stakeholder engagement, collaborating to host events. In addition, through the complaint handling procedure the Commission works together with CSOs to lay and resolve complaints.

One good example of collaboration has been a project on child participation. In the last two years, the Commission has made efforts to receive children in South Africa. As such it has, drafted a children’s complaint handling procedure; created child-friendly spaces within the SAHRC; produced advocacy materials for children.

In addition to these and in collaboration with Civil Society, the Commission has developed its own child-friendly framework for the Commission’s Children’s Manifesto. The Commission promotes making communities safer for children. It is lobbying for the establishment of the Office of the Rights of the Child in the Presidency, and for the National Coalition of Children’s Rights NGO.

REACTION

- Is intersex linked to FGM?
- Registration of intersex children, are you suggesting that this be
- Getting approximate figures and stigma associated with IS persons, how will you ensure that the figures are accurate since some births happen at home
- Legal definition that partly speaks to IS as someone who has been certified by a medical practitioner. Doesn’t that perpetuate the stigma?
- School dropout of iSC. Is there anything being done in particular to ensure that they remain in school
- Witchcraft – licensing some of the witchdoctors is it a solution to reducing some of these violations happening to children?



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- Cote D’Ivoire – what is the content of the law on the education of pregnant girls. In some countries, once girls are pregnant, they are not accepted in schools.
- Abstinence- we know that it doesn’t work always but giving girls tools so that they do not become pregnant.
- If intersex is biological, then why include it in the acronym LGBTI. What are the implications for removing or keeping it there What is the extent of exchange of information amongst NHRIs in Africa to learn from each other?
- To what extent are we prioritizing issues that can be taken at continental level?
- Commercial sex...does it apply to children?
- Tanzania, when identifying perpetrators you used the Secret ballot but can’t that exacerbate false accusations?
- South Africa – how are you cascading the CP initiatives to the deepest rural areas to ensure that no child is left behind
- SAHRC – how has the Com played a role in safeguarding the rights of children in religious communities especially Christian communities that are coming up with strange tendencies like spraying pesticides
- Isn’t witchcraft not part of freedom of religion and conscious
- Are the youths not accessing SRHS. What laws are available on this
- ECD playing ISC – how about investing more in ECD to ensure that ISC is also addressed
- Private sector to be involved, how do we move the agenda?
- Zero pregnancy and teen pregnancy being limited to school girls how about activities for girls out of school
- Have the NHRIs assessed their importance and impact in communities
- ISC – what has been done since last years communique to the Committee?
- What is witchcraft and are there child witches or those who work with sorcerers?

Responses

- When looking at FGM discussions we need to look at the issue of normalizing surgeries that are done and ask if that follows human rights principles e.g. consent
- Role of religious communities – Muslims agree but for the more work needed Christians.
- The birth certificates should not be left open but that this is recognised
- Need to put a mechanism that allows the different
- Kenya National bureau of Statistics open to including IS in the indicators for ISC.
- ISC defining problematic. Need to revisit
- School dropout - duty on all actors to ensure the rights of ISC are not violated.
- Research institutions – when revising indicators include IS ie ACPF



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- LGBTI – IS is a congenital disorder and a reality. LGBTI provided the space for IS when the rest did not. Can we provide the space?
- Kenya, an IS is both a mother and father – their genitalia was not messed up when young
- Licence includes what kind to give to witchcraft so they are monitored
- Secret Ballot vote – in criminal justice system, due process mechanisms through the courts as there must be a clear investigation. If used properly, the mechanism can change the story
- In school, not all are minors and those below 18 that are sexually active, and parents have a big role on this. Hard to digest the given image that touches upon our sensitive nature. Not trying to make the school girl feel guilty but raising awareness on girls and boys
- Legal measures - right to protection and those responsible perpetrators will be faced with sanctions.
- SA HRC engages with SADC and conceptualized issues across the region to see how they engage on regional issues
- Child participation – needed to ensure a Child friendly approach with
- NHRIs working with others like in TZ on common issues eg children with albinism
- Freedom of conscience – there are practices which have been clearly established by the law and it does not limit the freedom as long as it does not violate the rights of others
- Religion negatively impacting on children, South Africa has a commission on religious affairs and HRC works together with them
- Use of youth and adolescents is available in the legal and policy framework = HRC working for a submission to include SRHS in the Constitution.
- SRHR addresses youth as future mothers but we argue to address them as youth today...
- Medical interventions = not asking for this but that they be looked at as normal.

SESSION EIGHT: THE INSTITUTION OF CSO FORUM

Elections of CSO forum Coordinating Committee

In accordance to the CSO Forum constitution, the Forum held elections to elect leaders to coordinate the forum for 2 years. The participants were requested to nominate two people from each region, one to lead and the other to deputize. The partners were also requested to

caucus and elect a lead and deputy. The leaders were asked to elect among themselves the different positions. The forum elected the leaders as follows

1. Ms Amelia Fernanda- Southern Africa- Chair
2. Prof. Salah Arafa- Northern Africa Vice Chair
3. Vicar Bhangi- Central Africa
4. Hussain Rahman- Western Africa- Secretary General
5. Mr. Paulino Akuei - Eastern Africa- Treasurer
6. Yvonne Gamu- Partners Rep

Work Plans

In addition regions were requested to develop six months work plans of advocacy agendas for their regions

EASTERN AFRICA

Thematic focus	Key activities	Partners	Timelines	Expected outcomes
Institutional strengthening	<ul style="list-style-type: none"> Capacity building of national networks on use of communications at the ACERWC Implementation of OCA findings among all member national coalitions. 	PLAN PAO PLAN RESA SCI TdH Netherlands. GMT	April – December 2019.	EACRN members are strengthened as independent, accountable and effective advocacy organizations.
Networking and communication	<ul style="list-style-type: none"> Enhanced communication among EACRN member coalitions. Enhanced communication among the 5 regional networks on child rights in Africa through joint programming. 	PLAN PAO PLAN RESA SCI TdH Netherlands. CRNSA REDEAC West Africa coalition North Africa coalition	April – December 2019.	EACRN members enhance their advocacy capability as a result of access to information Enhanced partnerships and learning among child rights networks at regional level.
Child Rights Monitoring	<ul style="list-style-type: none"> Assist CSOs to prepare alternative reports to treaty monitoring bodies. Conduct follow up workshops for countries that have reported to human rights mechanisms. Lobby Eastern African countries that have not ratified the ACRWC to do so. 	PLAN PAO PLAN RESA SCI TdH Netherlands.	April – December 2019.	States in the Eastern African region held accountable on their obligations on child rights.
Research	<ul style="list-style-type: none"> Research on CT & CSEC in Eastern African Region. 	PLAN PAO PLAN RESA SCI TdH Netherlands.	April – December 2019.	Enhanced data based, child rights advocacy

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Advocacy work	<ul style="list-style-type: none"> Enhance working relationship between CSOs in the Eastern Africa region with the ACERWC, and the ACHPR to achieve meaningful outcomes. Continue supporting regional initiatives in various thematic areas including ending child marriage, ending violence against children and ending FGM, re-entry of teenage mothers in to school. Working with the media to improve reporting on child rights, including training of journalists on CT and CSEC. 	PLAN PAO PLAN RESA SCI TdH Netherlands.	April – December 2019.	
Work with NHRIs	<ul style="list-style-type: none"> Consolidate already developed work plans with NANHRI aimed at Identifying and working together in areas of mutual interest. 	PLAN PAO PLAN RESA SCI TdH Netherlands.	April – December 2019.	Enhanced CSO/NHRIs collaboration and joint action

WESTERN AFRICA

Thematic Focus	Key Activities	Collaborating Partners	Expected Outcome
Institutional Strengthening	<ul style="list-style-type: none"> Organize a general assembly of CSO members Capacity building on good governance of regional Members Capacity building on funds raising for west African regional members 	Save the Children, Plan International others	<p>Improved governance structure of WACRC</p> <p>Improved governance skills of west Africa regional members</p> <p>Enhanced fundraising for WACRC; increased funding base for WACRC</p>
Networking	<ul style="list-style-type: none"> Inception meeting among regional CSO networks on experience sharing for best practices Develop website and other social media platforms 	Save the Children, Plan International others	<p>Improved management and implementation of activities among WACRC members</p> <p>Improved communication among WACRC members and other regional blocks</p>
Child rights monitoring	<ul style="list-style-type: none"> Mapping of countries that have not submitted their report (UNCRC and ACRWC) 	Save the Children, Plan International others	Country identified assisted to report



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Research	Develop a regional scorecard to assess country performance	Save the Children, Plan International others	
Advocacy Work	Conduct regional advocacy on ACRWC	Save the Children, Plan International others	
Work with NHRs	Sharing of reports	Save the Children, Plan International others	Improved policy implementation

SOUTHERN AFRICA

THEMATIC FOCUS	KEY ACTIVITIES	COLLABORATING PARTNERS	TIMELINES	EXPECTED OUTCOMES
INSTITUTIONAL STRENGTHENING	Host our Annual General Meeting	National networks/ members	April 2019	To ensure efficiency and effectiveness in child interventions in the SADC region
	Members capacity assessment and development OCD Plans.	Donors and technical partners	April-November 2019	
NETWORKING & COMMUNICATION	Host regional learning event		November 2019	
	Quarterly National learning events and bi-annual dissemination of reports to CRNSA Secretariat.	National networks	April-November 2019	To promote accountability and shared learning at country and regional level
	Secretariat to develop and share a reporting template for members	National networks	April 2019	
CHILD RIGHTS MONITORING	Finalize the regional child barometer.	Technical partners, donors, Govts and national networks	June 2019	To facilitate advocacy on children’s rights at regional level
	Disseminate the barometer with members for advocacy at national levels.		April-November 2019	
RESEARCH	A Regional situational analysis for the SADC Child Rights Protocol	ACPF, National Networks, SADC Secretariat	November 2019	To facilitate advocacy and promote accountability at regional and country level
ADVOCACY	State party reports submissions to the committee	SCI, Plan International/RESA	April-November 2019	To ensure the fulfilment of children’s rights in the SADC Region
	Monitor implementation of the Committee concluding observations	National Networks	April-November 2019	
	Development of a SADC Child rights protocol.	RIAT, SCI, UNFPA, SADC, REPSSI, SAT, SAPST, TdH,	April- Nov	

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		National Networks		
	Popularize the African child wellbeing report by ACPF.	Media	April-November 2019	
	Development of model law guide on child marriage.	Girls not brides UNFPA National Networks SADC	May 2019	
	Coverage of the ACERWC Reporting.	Media	November 2019.	
WORK WITH NHRI’S	CRNSA to have courtesy calls with NHRI’s and map collaborative opportunities.	National Networks, NHRI’s	April-November 2019.	To promote collaborative advocacy

CENTRAL AFRICA

Thematic focus	Key activities	Partners	Timelines	Expected outcomes
Renforcement institutionnel	<ul style="list-style-type: none"> - Renforcer les Coalitions Nationales - Fonctionnement du REDEAC (logistique, RH, tenue des reunions/ateliers, suivi et evaluation). 	<ul style="list-style-type: none"> - Save The Children - Plan International 	2019	Le REDEAC se consolide et devient très efficace et compétitif
Réseautage et communication	<ul style="list-style-type: none"> - Elaborer une stratégie de communication - Appuyer les Coalitions Nationales 	<ul style="list-style-type: none"> - Save The Children - Plan International 	2019	<ul style="list-style-type: none"> - La communication s’améliore au sein du réseau - Les Coalitions Nationales deviennent efficaces et opérationnelles
Monitoring des droits des enfants	<ul style="list-style-type: none"> - Renforcer les capacités des membres sur les techniques de monitoring - Documenter les cas des violations des droits des enfants 	<ul style="list-style-type: none"> - Save The Children - Plan International 	2019	<ul style="list-style-type: none"> - Les membres améliorent leur travail sur terrain - Les abus et violations des droits des enfants sont



“Humanitarian Action in Africa: Children’s Rights First.”

	en Afrique Centrale - Publier les rapports pour dénoncer les abus et violations à l’égard des enfants - Partager l’expérience avec les autres regions			documentés et dénoncés - Les membres du REDEAC acquièrent des nouvelles approches et/ou pratiques
Recherches	Mener une étude sur la situation des enfants en Afrique Centrale	- Save The Children - Plan International	2019	Les résultats de l’étude sont publiés avec des recommandations claires
Plaidoyer	- Organiser des ateliers et diners parlementaires - Contacts formels et informels avec les Gouvernements - Rédiger des pétitions et déclarations	- Save The Children - Plan International	2019	Les Autorités prennent des décisions favorables à la protection de l’enfant
Travail avec les INDH/CNDH	- Organiser des missions conjointes - Contribuer à l’élaboration des rapports sur la situation des Enfants	- Save The Children - Plan International	2019	La collaboration entre les INDH/CNDH et les OSC de défense des droits des enfants s’améliore

NORTH AFRICA

1. Holding Local Meetings in Cairo and Algeria to Brief National Associations about the 14th CSO Forum and its recommendations and distribute the final report. March-April 2019. (Attached is the report on the Briefing done in Egypt).
2. Discussing a Host Family Program for African Children. Now-November 2019.
3. Distributing information on the Forum and its 14th CSO Forum Communiqué to the 6th International Meeting of the African Media, which will be held Thursday, December 13, 2019 in Egypt.
4. Visiting the National CSOs in each country of the Region to inform and attract more and active participation from the CSOs in the Region. The aim is to have a focal point in each country. September-October 2019.



5. Organizing an International Conference in Cairo, Egypt on “Harmful Practices to Children Rights and Welfare” with participation of 2 Children from each region with an Exhibition on Children Arts Expressing their Hopes for a Sustainable Future. Planned for March 2020.
6. Holding the CSO Forum in Egypt – November 2019

RESOLUTIONS

Regarding continuous engagement with the committee, it was resolved the there should In session meetings for CSOs along the the Thematic areas envisioned in Agenda 2040

Regarding strong and accountable CSO forum, it was resolved that the Coordination Committee and secretariat to Develop of CSO forum governance documents such

- Strategic plan
- Communication strategy
- Safeguarding policy
- Anti harassment and anti bullying code of conduct

Regarding increasing knowledge on children in Africa, it was resolve the the CSO forum develop a Research agenda and partner with other regional forums in conducting research in Africa with a priority on the the state of implementation of the ACRWC 30 years on

Regarding advocating for children in the continent, it was resolved that the CSO forum develop an Advocacy plan with consideration of the unique challenges in each region.

Regarding child participation, it was resolved that the forum should develop a strategy of ensuring children participate in the forum and the Committee sessions
new coordination committee



SESSION NINE: OUTCOME STATEMENT

Fourteenth CSO Forum on the African Charter on the Rights and Welfare of the Child

15 – 17 March 2019: Addis Ababa, Ethiopia

“Humanitarian Action in Africa: Children’s Rights First”

Communique to the 33rd Ordinary Session of the African Committee of Experts on the Rights and Welfare of the Child (ACERWC)

Adopted on 17 March 2019, Addis Ababa, Ethiopia

A. PREAMBLE

We, the 113 participants of the Fourteenth CSO Forum, made up of National Human Rights Institutions, Civil society organizations from the five regions in Africa, Pan-African Institutions and International Non-Governmental Organizations, met in Addis Ababa from 15-17 March 2019 and discussed child rights issues, under the theme **“Humanitarian Action in Africa: Children’s Rights First”**.

Commending the Committee for the standing slot in its Sessions and implementing some of our past recommendations

Acknowledging the granting of affiliate status to National Human Rights Institutions (NHRIs) by the ACERWC, which will give them a greater role in monitoring the realization of children rights in Africa;

Supporting the African Union reform agenda that aims to strengthen its organs and mechanisms to be more effective and productive and hoping to see an increasingly strong Committee of Experts on the Rights and Welfare of Children in Africa;

Noting with concern that in most humanitarian situations children are the majority, particularly now as many children are faced with ongoing flooding in Southern Africa, rampant political violence, violations as result of escalated migration, religious extremism and economic meltdown in various parts of Africa;

Therefore, make the following observations and recommendations;

B. HUMAN DEVELOPMENT CRISIS

Noting with concern, that Africa is on the verge of a serious human development crisis. In little more than 30 years’ time, Africa will be home to One Billion children. Yet, nearly half of all children in sub-Saharan Africa are living in extreme poverty, 30% of children in Africa are stunted, 60% of 15 to 17 year olds are out of



school and those in school are not properly schooled, 3 out of 5 girls in Africa get married before the age of 18 years and early pregnancies are on the rise (ACPF,2018).

Recognising that children have the potential to transform Africa - but if neglected they could also increase the burden of poverty and inequality, posing a serious risk to peace, security and prosperity. We therefore urge the Committee to recommend to States Parties to

- Harness the demographic dividend through investment in nurturing environments beginning at conception that provide for early stimulation, adequate nutrition, health, education and employment opportunities for Africa’s young population.
- Commit to major transformative actions which ensure an Africa of one billion well-fed, well-educated and globally competitive children, through a balanced approach to financing human capital development and infrastructure.
- Commit to accelerating domestic resource mobilisation; increasing allocations for child focused sectors in national and sub-regional budgets; efficient and equitable expenditure of available resources; and transparent and accountable public finance management.
- Develop multi-sectoral policies and integrated programmes that utilize a holistic and life-cycle approach to early childhood development, including enhanced monitoring of early childhood development policies and programmes.

Urging the committee to

- Work closely with the recently established African Union Continental Education Strategy for Africa’s (CESA 16-25) Early Childhood Education and Development (ECED) Cluster to ensure the rights of young children are represented.
- Hold a day of general discussion on Africa human development crisis in the context of child rights

C. NATIONAL HUMAN RIGHTS INSTITUTIONS

Recognising that NHRIs as primary actors of the national human rights systems, play a critical role in ensuring that States Parties take all the appropriate action in fulfillment of their obligations under the African Charter on the Rights and Welfare of the Child (ACRWC), Urge the Committee to expedite the finalization of the Guidelines for engagement of NHRIs with the Committee.

D. VIOLENCE AGAINST CHILDREN

Concerned that, Violence against Children remains one of the biggest challenges in the realization of child rights and wellbeing in Africa, causing Africa to lose tens of billions of dollars in lost earnings and human capita (World Bank, 2018). Noting with concern 1 in 4 women experienced physical violence as children, 1 in 3 experienced sexual violence, and 3 in 10 were emotionally abused, fifteen million girls get married before the age of 18 years annually in Africa, 3 out of 5 girls are mothers before 18 years, 35% of girls in Africa have undergone Female Genital Mutilation while Child Trafficking and Sexual Exploitation of Children is on the rise (Unicef,2018).

Ask the Committee to urge States Parties to put in place mechanisms to end violence against children, including;

- Ensuring availability of age, ability and gender disaggregated data,



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- Providing psychosocial and legal support,
- Addressing cultural and social norms that promote violence against children.
- Adopting policies and programs that facilitate the retention of pregnant girls and young mothers in schools
- Improving access to sexual and reproductive health rights information and services.
- Promoting the role of traditional and religious leaders
- Making full use of the media to amplify children voices
- Mobilising communities and disseminating information.

Commending the Committee for developing General Comment Number 5 on Article 1 of the ACRWC. Urge the Committee to;

- Finalise the Guidelines on child participation, Meaningfully and deliberately engage children in its Sessions with at least one Pre-Session for children per year.
- Encourage States Parties to consult with children in the formulation of plans, policies and laws that have a bearing on their interests. Child participation in governance must be devolved to national, regional and district levels.
- Request States Parties to specifically report on the status of coordination of different government agencies at different levels within their reporting process of the progress achieved in strengthening, child protection systems.
- Call upon States parties to establish harmonized child helplines in Africa, by adopting the 116 call number, making it easy for children to report violations and to get help in the shortest time possible anywhere in the continent.

F. CHILDREN ON THE MOVE

Recognizing an estimated 30 million children are on the move, both within and between countries, with or without their parents (SCI,2016). We urge the Committee to;

- Take concrete steps to ensure that factors such as poverty, climate change and conflict, which drive children to move, are addressed at national level.
- Encourage cross-border collaboration among State parties for the recognition and support of children on the move.
- Develop an implementation framework to address the findings of the continental mapping on children on the move.
- Work with States to develop more robust inter-country and multi-agency child protection system that addresses the protection needs of children who are trafficked, living on the streets, left behind when caregivers migrate, stateless, undocumented and unaccompanied, detained and children living in refugee and internal displacement settings.

G. MEDIA AND CHILDREN

Recognising that, the media is a gatekeeper of human rights. Noting with concern that media in Africa and globally depicts the African child in ways that puts the child in more harm. Recommend the Committee to

- Issue guidelines on media and children in Africa,
- Hold a day of general discussions on media and children,
- Urge State Parties to have mechanisms to monitor the accountability of media towards children including where religious institutions broadcast activities that violate children’s privacy and dignity.

E. CONCLUSION

The CSO Forum marks 10 years since its establishment in 2009. As we celebrate this milestone, note with concern that CSOs in some parts of Africa are restricted and are not able to contribute to the Committee’s efforts. We urge the Committee to continue providing an enabling space for CSOs’ engagement in its programmes.

Pledge our commitment and support to the Committee in the execution of its mandate and the promotion and protection of child rights and wellbeing in Africa. We commit to work with the Committee in the implementation of these recommendations.

Wish the Committee a successful session and look forward to action by the Committee on ensuring full realisation of the rights of children in Africa.





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