STATEMENT

BY

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AT

FOURTH AND FIFTH REVIEW OF THE FEDERAL DEMOCRATIC
REPUBLIC OF ETHIOPIA BEFORE THE COMMITTEE ON THE RIGHTS OF
THE CHILD

GENEVA, 22 MAY 2015
Madam Chairperson,

Distinguished members of the UN Committee on the Rights of the Child,

Ladies and Gentlemen,

Let me begin by saying how I am pleased to be here with you today to present Ethiopia’s combined 4th and 5th Periodic Report on the implementation of the United Nations Convention on the Rights of the Child. I welcome the interactive dialogue with the distinguished experts of the Committee in the examination of the national report to enhance our implementation capacity of the convention which is of great importance to Ethiopia.

I am confident that in the course of both sessions in the morning and afternoon our exchange of views on issues of mutual interest will be conducted in a constructive fashion that will help further strengthen the cooperation between Ethiopia and the Committee in future engagements.

I am leading a high-level delegation whose composition comprises the State Minister of Women, Children and Youth Affairs and other senior officials and representatives from the ministries of Foreign Affairs, Justice, Education and Health. All members of the delegation and myself are ready to engage in a constructive discussion by providing responses and clarifications to questions and observations from the distinguished members of the committee.

Before I proceed, allow me to put in national context the presentation of our report on the implementation of the Convention of the Rights of the Child as it could not be viewed in isolation from the progress made in the wide-ranging socio-economic and political activities at the country level. This is especially true in ensuring the promotion, respect and protection of child’s rights which requires simultaneous progress in other equally important areas of development such as health and education. The day after tomorrow, for instance, our electorate of over 34 million Ethiopians will participate in the 5th national and regional elections which confirm the full exercise their civil and political rights in an uninterrupted manner. As the Committee examines our national report which is before it, we hope that there will be an understanding that the promotion and protection of child rights also depends on the progress made in relevant development fields including legal, policy and programs, in particular through physical connectivity by providing roads and communication networks to reach schools and health facilities in remote rural areas of the country. Efforts to build democratic institutions and working to enhance good governance have also empowered our people to fully exercise their rights as stipulated in our federal constitution which provides wider range of human rights guaranteed to the child.
Madam Chairperson, and members of the committee

Ethiopia has travelled long distance in the twenty four years since the change of political order in the country. Today, the wind of democracy and developmental change have swept across our society and our peoples’ aspirations for better governance, for economic growth and development are being met gradually. I am glad, in this regard, to note that Ethiopia is one of the few non-oil producing fast economies in the world and its economy has grown in double digits for decade plus. Given the development gains obtained so far and the good performance in implementing the 2\textsuperscript{nd} five year Growth and Transformation Plan, we have laid a solid foundation to transform Ethiopia into a middle income country by 2025. In recent years, we have succeeded in making important progress towards achieving MDGs, in particular in the reduction of under-five child mortality rate, education, health and poverty in general. This impressive progress we have been able to achieve, in our view, is the result of our Government sound public policies and socio-economic development programmes supported by strong and committed leadership, active involvement of the people at all levels of decision making process and the close cooperation with the international community and development partners.

It is within this national picture that I have tried to draw in general terms that I will briefly outline key areas of progress, challenges and our future commitments to address the implementation gaps identified thus far.

Madame Chairperson and members of the Committee

The Constitution of the FDRE guarantees the rights and freedoms of Children. We have also acceded major international human rights conventions as part its national laws. On this basis, we have formulated policy frameworks at all levels of government strata. In this regard, we have registered encouraging results through our continued efforts based on the National Plan of Action on Children (NPA). We have mainstreamed the rights and interests of children in all national development, programs and plans. We have registered promising results, among others, the gross enrolment at pre-primary school has increased from 2.2\% in 2003/04 to 34\% in 2013/14, gross enrolment rates rose from 68.4\% to 101.3\% at primary school, 22.1\% to 39.3\% at first cycle of secondary education and from 3.2\% to 10\% at second cycle secondary education in the same period. Coverage of girl-students in grades 9 to 10 also expanded from 34.6\% to 47.3\%.
Currently, the Government is preparing the third NPA on Children (2015-20) in alignment with the Second GTP (2015-20), and other pertinent development programs and policies. As a follow-up effort, the Ministry of Women, Children and Youth Affairs (MOWCYA) has submitted to the Council of Ministers a comprehensive child policy for approval. Furthermore, my Ministry has framed a participatory Guideline on Child Mainstreaming for effective implementation and monitoring of child rights to be used as a tool for legal frameworks, policies, and programs at all levels. MOWCYA established CRC committees from federal to the lowest level of administrations to implement the Convention. In addition, we have established child units in all ministries, National Committee on Eradication of HTP, National Steering Committee on Sexual Abuse and Exploitation of Children, and the National and Regional Task Forces on orphans and vulnerable children, to address child issues. These committees are chaired by state ministers of the federal government. As part of the continued commitment of the Government of FDRE, the annual budget and human resource of MOWCYA has increased by 300% while the human resource has increased significantly from 172 to 232 over the last three years.

The Central Statistics Agency which is our main source of data and Vital Events Registration Agency, also introduced a nationwide birth registration system with a central database to further improve birth registration. In addition to this, we are developing a Child Wellbeing Management Information System to centralize data on children from federal, regional and local Government agencies across all sectors. At present, the Child Wellbeing MIS is functioning as a pilot project in the Amhara, Oromia, SNNP, and Harari regional states and Dire Dawa and Addis Ababa city administrations and will be expanded to other regions in the foreseeable future.

Since its third report, Ethiopia ratified several international treaties and adopted legislative, policy measures and strategies that are relevant to children. The details can be found in my written statement. These include the ratification of the Convention on the Rights of Persons with Disabilities, the two Optional Protocols to the Convention on the Rights of the Child, the Protocol to Prevent, Suppress and Punish Trafficking in Women and Children, The Protocol Against Smuggling of Migrants by Land, Sea and Air, the Tripartite Consultation (International Labour Standards) Convention, the Convention for the Suppression of the Financing of Terrorism, the World Health Organization Framework Convention on Tobacco Control, the Social Protection Policy, the Social Protection Strategy, the National Criminal Justice Policy, the National Strategy On Harmful Traditional Practices, the National Strategy On Human Trafficking, the National Policy Framework for Early Childhood Care and Education, the Diaspora Engagement Policy and

Freedom of expression, association and assembly is a constitutional rights in Ethiopia. Based on this principle, various platforms are introduced throughout the country that directly and indirectly maximized the participation of children, some of this are child parliament, school clubs, school mini media, television and radio programs, youth centers, anniversary festivals. As a reflection of the constitutional right, children are enrolled in different platforms and exercise their right to participation. One among them is children’s parliaments in which elected children exercise their democratic rights at federal, regional and local administration levels. They have the right to be present their concerns and demands which will be considered in due course.

**Madame Chairperson and Members of the Committee**

Corporal punishment in institutional settings is prohibited. The Government is also exerting efforts to eliminate corporal punishment in family settings through awareness raising programs, and positive child disciplining approaches. We have consistently provided trainings Law enforcement organs and the judiciary as well as other organs working on child rights issues.

MOCYA is working intensively in collaboration with different stakeholders to tackle violence against women and girls at the grassroots level. Special Investigation and Prosecution Units are established in all regional states as well as in Addis Ababa and Dire Dawa city administrations to ensure women and children victims get a one stop service from medical professionals, police and prosecutors and to avoid secondary victimization.

Legal aid centers established by the Ethiopian Human Rights Commission play a pivotal role in curbing gender based violence and child abuse. Furthermore, MOWCYA and its respective regional Bureaus and women’s associations provide legal aid to victims. Our policy environment
encourages multiple social actors in providing appropriate services to victims. As a result, rehabilitation centers and shelter-providers are increasing in number with the greater engagement of civil society organizations, CBOs and development partners. We have established Integrated Care and Justice System Pilot Program in Addis Ababa and Dire Dawa that bring together different mechanisms to support and provide justice to victims. We are committed to scale this up to other regional states.

A National Alliance to End Child Marriage composed of representatives from the MOWCYA, the Ministry of Health, the Ministry of Justice, law enforcement agencies, Courts and concerned NGOs has been setup to fight HTP and sexual violence. The Government has adopted an Action Plan and a National Strategy on the Elimination of Harmful Traditional Practices and FGM, which is being implemented in all regional states. Government has similarly established a National Committee on the elimination of harmful traditional practices to implement the National Action Plan. These include promotional activities, including raising public awareness through media, community dialogue, and experience-sharing forums on the illegality and adverse impacts of harmful traditional practices, including forced, arranged and early marriage. These prevention and prosecution measures have produced encouraging results: FGM prevalence dropped from 74% in 2005 to 23% in 2010 while abduction prevalence has dropped from 23.3% in 1997 to 12.7% in 2009/10. The prevalence of early marriage has, likewise, dropped from 33.1% in 1997 to 8% in 2013/14.

Abandonment of children is an associated challenge taken up during the reporting period to address the rights of the child. We put in place the National Guidelines on Alternative Child Care. The Guidelines promote family and community-based care and support services to orphans and vulnerable children. Regional BOWCYAs work in partnership with civil society organizations and communities to facilitate technical support for the services. Intensive reunification programs are in place to reunite children with their parents. Orphans and vulnerable children are provided with social services such as healthcare and education through referral arrangements. Where it becomes impossible to reunify children with biological parents or extended families are placed in alternative care options, including foster care, local adoption and independent living arrangements. The Guidelines promote good parenting practices, mindful of the cultural, ethnic and religious heterogeneity of Ethiopia. Alternative basic and adult education programmes serve as means of imparting improved parenting skills to families and communities. In the last four-years 4.9 million children were provided with community-based alternative care services.
To address the root cause of child abandonment, sustained effort is underway to raise the income-levels of poor households, through implementation of National Poverty-Reduction Program both in rural and urban areas. This has resulted in the decline of overall poverty level from 29.6% in 2010/11 to 26% in 2012/13. Food-poverty has also declined from 33.6% in 2010/11 to 31.8 in 2012/13. Focusing on children, cash-transfer programmes also enable the survival and development of children of vulnerable households. To this end, the Productive Safety Net Programme (PSNP) initiated with the support of development partners is playing a major part towards achieving food security for families. Through the PSNP that was implemented from 2005 to 2009 with the largest social protection programme in the country with the annual budget of 500 million USD, we have provided services to around 7.8 million vulnerable citizens.

Madame Chairperson and members of the Committee

We are pleased to inform the committee that Ethiopia achieved the MDG 4 to reduce child mortality. This is the outcome of continuous effort of the people and Government of Ethiopia. We would like to reassure the committee of our continued and firm commitment to further strengthen our achievements in the years ahead. This includes strengthening routine immunization, expansion of Community and Facility-Based Integrated Management of Neonatal and Childhood Illnesses (IMNCI); Community Based Newborn Care (CBNC); Integrated Community Case Management (ICCM); establishing New-born Corners and Neonatal Intensive Care Units (NICUs); capacity building on programme management for child health services; strengthening the Health Extension Programme (HEP) scaling up family planning services and facility births, and implementing locally relevant and effective child health interventions in pastoralist areas by focusing on equity and quality services. As a result, under five mortality (U5) rate per thousand live births declined by two-thirds from 204 in 1990 to 68 in 2012, meeting the MDG target on child survival and currently 64/1000 live births.

We have registered encouraging results in managing health related problems of children and young infants both at community and at health facility levels. IMNCI service has been expanded and by the end of 2014 coverage reached 89%. To meet the needs of rural communities, the Ministry of Health introduced an Integrated Community Case Management (ICCM) of common childhood illnesses package of interventions by HEWs in 2010. The ICCM coverage reached 92% of health posts by the end of 2014. Meanwhile the CBNC, with nine intervention packages, has activated the HEWs to improve the rate of newborn survival. CBNC coverage has
reached 42.3% of health posts. Whereas the Newborn Corner Initiative (NBC), started in 2011 by piloting in 100 health facilities and currently with 50% coverage of health centers aims at closing gaps in preventing newborn morbidity and mortality by offering standard newborn care immediately after birth in health facilities and tackles the three main causes of neonatal mortality. The Neonatal Intensive Care Unit currently being implemented in 50% of the hospitals has likewise been effective in helping newborns who need advanced care and to complete referral and linkage.

Through improved access, expansion of infrastructure and the health extension programme, and introduction of new life saving vaccines, more than 80 percent of the nearly 3 million annual birth cohorts are protected against the ten vaccine preventable diseases each year. The administrative Expanded Program of Immunization (EPI) coverage showed significant increase from as low as 42% in the 1990s to as high as 82% in 2013/14.

We have adopted Option B+ for PMTCT, around 2500 health facilities are providing PMTCT services and more than 60% of HIV positive pregnant women received ART to prevent MTCT of HIV. All the health services for neonatal care, vaccination, prevention of transmission of HIV/AIDS from mother to child and anti-retroviral therapy are accessible for mothers and children living in remote and rural areas. Facility coverage, the approximate indicator for health service geographic coverage has also reached 92 percent.

**Madame Chairperson and Members of the Committee**

As a development priority of the Government of Ethiopia, we are expanding equitable access to education and creating conducive teaching environment for all. In this regard, the Government has been working on improving the quality of education through the General Education Quality Improvement Package since 2005/06. This program consists of 6 major quality programs known as the School Improvement Program, Curricula Development and Implementation, Civic and Ethical Education, School Leadership, Management and Administration, Teacher Development Program and ICT in education focused on promoting and protecting the rights of the child. These quality initiatives aimed at improving students’ achievements and awareness on human rights issues as well as to exercise these rights in their daily life. Furthermore the above quality programs play a critical role in improving the retention capacity of schools through enhancing child friendly environment such as increasing the availability of water, separate latrines for boys and girls, provision of sanitation pads to girls which in turn will contribute to reduce levels of dropout, repetition and being out of school.
Parent-Teacher-Student-Associations (PTSAs) ensure that communities have direct ownership and take part in decision making over the provision of quality and equitable education. They also play an active role in monitoring and evaluating classroom performance. The PTSAs have improved parents' involvement in their children's education. Children above age 7 who failed to attend school the previous year, dropouts or un-enrolled altogether are identified and registered in house to house visits and headcounts. Currently, a Development Army has been mobilized to bring about improved student learning and school attendance and close to 2 million out-of-school children have resumed their studies in 2012/13 through community-centered efforts. These efforts have resulted in dramatic increase in the number of primary schools from 11,000 in 1996/97 to over 32,048 in 2013/14 with a corresponding increase in student enrolment from 3.7 million to over 18 million.

Madame Chairperson and members of the Committee

Ethiopia is committed to prevent homelessness in children and to protect children in street situation. The Social Protection Policy of Ethiopia contributes significantly to address vulnerable children. In this regard, the Government is working in partnership with NGOs and development partners by providing them with trainings and skill development programs. Nearly 13000 street children are now engaged in different income generating activities and 36000 children are reintegrated or reunified.

Human trafficking has been identified as challenge to be addressed through coordinated efforts. To meet this challenge the Government has put in place a comprehensive plan of action aimed at curtailing illegal migration and human trafficking. We have formed a National Task Force, led by the Deputy Prime Minister, to coordinate the campaign against human trafficking at all levels. A joint investigation and prosecution unit of the police and Ministry of Justice has been formed to effectively investigate and prosecute human trafficking crimes. Likewise, a reception center has been established to provide assistance for returnees and to help victims effectively reintegrate with their native communities.

We will continue on our firm conviction to promote public awareness on the harmful effects of child labour and to upgrade our implementation capacity through various sensitization and training activities. Trainings on child labour issues are regularly provided to parliamentarians, child parliaments, the judiciary, the media, labour inspectors, employers' and employees' associations as well as the public at large. Monitoring and oversight mechanisms have been
strengthened through the introduction of a national labour inspection system and regularly conduct workplace inspection to verify compliance with the labour standards. We are committed to exert ourselves to further address this issue at all levels.

Madame Chairperson,
Distinguished Members of the Committee,
Ladies and Gentlemen

Finally, I would like to take this opportunity to once again thank you all on behalf of myself and my delegation and we welcome your questions and look forward to a fruitful and constructive dialogue that will contribute to our national endeavor to ensure better protection of the rights of children in Ethiopia.

I thank you very much for your attention.