

List of Issues Prior to Reporting (LOIPR)

from
Non-Governmental
Organizations
(NGO's) of Aruba



to the
United Nations' Committee
on the
Rights of the Child



Oranjestad, Aruba, July 2019



COLOPHON

List of Issues Prior to Reporting (LOIPR) of non-governmental organizations (NGO's) of Aruba to the United Nations' Committee on the Rights of the Child.

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Produced by Asociacion Trabao di Hubentud na Aruba, in cooperation with CEDE Aruba.

July 2019



Preface

This is the report containing the List of Issues Prior to Reporting (LOIPR), compiled by the non-governmental organizations, or NGO's, of Aruba who work with children and youngsters. It contains their concerns regarding the non-compliance with the rights of children and youths in Aruba.

This project was made possible by the Asociacion Trabao di Hubentud na Aruba* (ATHA), in cooperation with Centro di Desaroyo Aruba† (CEDE Aruba).

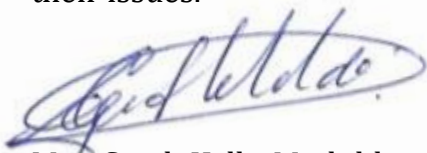
A total of 80 NGO's were invited to participate in this process. They were divided into 7 sectors (see table on pages 4 and 5). For each sector a session of two hours was held (from 7:00pm–9:00pm) during 7 evenings between April 8 and May 8, 2019. Twenty-nine (29) NGO's had an actual input (36.3% response).

Mrs. drs. Caroll J. Kock collected the data with the assistance of Mrs. Mariela I. Chirino, volunteer at the ATHA and with the practical and administrative support of Mrs. Gina Vrolijk, intern of the Educacion Profesional Intermedio‡ (EPI). This report has been written by Mrs. Kock. The data collection was done using the notes on the flipcharts used during the sessions, the minutes of the sessions, and the information provided by the NGO's on the *"Form for the collecting of issues and context by NGO's for the purpose of reporting to the Committee on the Rights of the Child in Geneva 2019."*§

This report follows the required format of 8 clusters; one chapter for each cluster. In each chapter, a sub-section is devoted to each issue, with the description of its context and questions formulated to the State. The description of the context is a result of the data collection and therefore a description of the opinion of the participating NGO's.

The priorities chosen by the participating NGO's were, firstly "Family and alternative care" (Cluster 5); secondly "Education, leisure, cultural activities" (Cluster 7) and thirdly "Disability, health, welfare" (Cluster 6). A total of 35 questions were formulated (see pages 9-11). Since there is a limit of 30 questions allowed, the first 30 questions were chosen based on the priorities determined by the NGO's.

Hereby, I would like to, again, thank all NGO's that participated to the sessions, for the trust placed in the team put together by the ATHA by openly communicating their issues.



Mrs. Cyndi Kelly-Mathilda
Director Asociacion Trabao di Hubentud na Aruba (ATHA)
Oranjestad, July 3, 2019

* Aruba Youth Work Association

† National Social Development Fund

‡ Intermediate vocational school

§ This form has been set-up by Mrs. Kock for the purpose of collecting the issues and their context by NGO's. See Appendix.

**Table: List of NGO's per sector and who have actually participated in the process
(April 8 - May 8, 2019)**

SECTOR/ Name NGO	Date session/ Representative present	Listener present	Form filled in
1) SCOUTING AND CHARITAS/SOCIAL ASSISTANCE			
Apr-08			
Scouting Aruba	X	X	X
Arubaanse Jongens Meisjes en Gilde			
Oansa El Camino			
DeMolay			
Anali Cabrera Foundation	X		X
Goshen Sustainable Development			
Mision di Caridad Savaneta			
Adventist Development and Relief Agency			
Fundacion Yudami			
2) YOUTH ORGANIZATIONS			
Apr-09			
Asociacion Trabao di Hubentud na Aruba ATHA	X		
Centro pa Desaroyo Aruba (CEDE Aruba)	X		
Aruba Youth Impact	X		
Heart-Centered Leadership Foundation	X		
Social Emotional Learning Center for Children			
JCI Young Active Leaders of Aruba			
Reach Your Goal Foundation			
Aruba College Fair Foundation	X		
Adult and Teen Challenge Aruba			
Fundacion Parlamento Hubenil	X		X
Kiwanis Club of Aruba			
Aruba One Happy Island Lions Club			
3) HEALTH CARE, CHILD DAY CARE AND PROTECTION			
Apr-15			
Wit Gele Kruis Aruba	X	X	
Stichting Epilepsie Aruba			
Stichting Kinderhuis Imeldahof			
Stichting Reclasseur en Jeugdbescherming Aruba	X	X	X
Fundacion Respeta Mi	X	X	X
Fundacion Telefon pa Hubentud	X	X	X
Red Cross Aruba			
Fundacion Pro Lechi Mama Aruba	X		X
Fundacion Pa Nos Muchanan			
Tienda di Educacion			
Arubaanse Padvindsters Gilde (APG)	X		X
YMCA of Aruba	X		
Stichting Kids Creation Center	X		X
4) FAMILY CARE AND DRUG CONTROL			
Apr-16			
Fundacion Bon Nochi Drumi Dushi			
Ban uni man pa cria nos muchanan			
Famia Planea Aruba	X	X	X
Centro Famia di Criansa Arubano			
Fundacion Guia Mi	X	X	X
Fundacion Pa Nos Comunidad			
Fundacion Pro Famia Feliz			
Fundacion Centro Famia Piedra Plat			
Stichting Maatschappij & Criminaliteit			
Fundacion Anti Droga Aruba	X		X
Fundacion pa Maneho di Adiccion di Aruba	X		
Kiwanis Club of Aruba	X		

SECTOR/ Name NGO	Date session/ Representative present	Listener present	Form filled in
5) ARTISTIC EDUCATION, SPORTS AND COMMUNITY CENTERS			
Apr-17			
Stichting Arubaanse Muziekschool			
Union di Organizacionnan Cultural Arubano			
Fundacion Museo di Arte pa Mucha di Aruba			
Fundacion CINEARUBA			
Centro di Bario Brazil			
Centro di Bario Lago Heights			
Centro di Bario Tanki Lender			
Centro di Bario Savaneta			
Centro di Bario Ayo			
Centro di Bario Noord			
Centro di Bario Dakota			
Amateur Baseball Bond Aruba			
Aruba Voetbal Bond			
Aruba Basketball Bond			
Aruba Wieler Bond			
Fondo Cas pa Comunidad Aruba (FCCA)			
6) DISABILITY CARE			
May-6			
Fundacion Autismo Aruba	X	X	
Fundacion Arubano di esnan Visualmente Incapacita	X	X	
Stichting voor Verstandelijk Gehandicapten Aruba	X	X	X
Stichting Trampoline pa Trabao			
Sonrisa			
Fundacion Siñami Paso pa Paso Aruba			
Centro di Educacion Special Desaroyo y Stimulacion Special			
Fundacion pa Esnan cu Deficiencia Auditivo			
Fundacion pa Esnan cu Problema di Oido			X
Fundacion Muchila Creativo	X		X
Fundacion Mi Por			
Stichting Casa Cuna Progreso	X		X
7) SCHOOL BOARDS (EXCL. PUBLIC SCHOOLS)			
May-8			
Stichting Educacion Profesional Basico	X		X
Stichting Katholiek Onderwijs Aruba (SKOA)			
Stichting Middelbaar Onderwijs Aruba (SMOA)			
Stichting Onderwijs van de Advent Sending Aruba (SOAZA)			
Stichting Protestants Christelijk Onderwijs Aruba (SPCOA)			
Stichting Volle Evangelie Onderwijs Aruba (SVEOA)			
Stichting Onderwijs Combina (De Schakel)			

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List of Abbreviations

ACE	Adverse Child Experiences, when a child has experienced a traumatic experience him- or herself or became an eyewitness to it
ADL	Activities of Daily Living
ATHA	Asociacion Trabao di Hubentud na Aruba: Association for Youth Work in Aruba
AZV	Algemeen Ziektekostenverzekering = General Health Insurance
CEDE	Centro di Desaroyo Aruba = National Social Development Fund
CRC	Convention on the Rights of the Child
EPI	Educacion Profesional Intermedio = Intermediate vocational school
FEPO	Fundacion pa Esnan cu Problema di Oido = foundation that has the deaf and hearing impaired as its target group
HAVO	Hoger Algemeen Voortgezet Onderwijs = higher-level high school
KIA	Korrektie Instituut Aruba = Aruba's prison
MAVO	Middelbaar Algemeen Voortgezet Onderwijs = mid-level high school
MDC	Multi-Disciplinaire Centrum = Multi-Disciplinary Center
NGO	Non-governmental organization
OC	Orthopedagogisch Centrum = residential institution for out-of-home placements of youngsters
SPO	Scol Practico pa Ofishi = lower level vocational training school
STD's	Sexually transmitted diseases
UNCRC	United Nation's Convention on the Rights of the Child
UNICEF	United Nations' Children's Fund
VWO	Vorbereidend Wetenschappelijk Onderwijs = highest-level high school and preparation for academic education

Questions formulated to the State, in order of priority

Cluster 5: Family and alternative care

1. What plans can the State present to timely identify vulnerable and high-risk families and to better guide and support them in order to prevent that they become problem cases?
2. What concrete steps will the State take in order to invest in educational programs to stimulate the assertiveness of youths, so that pregnancy, crime, and alcohol and drug abuse among teenagers are reduced?
3. What concrete steps will the State take to better regulate day care centers?
4. What will the State do to offer families, living in poverty, an adequate living standard?
5. When will the State adequately staff the agencies involved in the system of guardianship so that in divorce cases the child's best interests are safeguarded?
6. When will the State introduce an evaluation system to assess with each out-of-home placement, whether the best interests of the child have been taken into account?

Cluster 7: Education, leisure, cultural activities

7. When will the State ensure a better integrated curriculum that is better linked to the Aruban culture, for example bilingualism? And introduce the possibility of a "summer school"?
8. What steps will the State take to put more emphasis in the curriculum on the personal development of the child and programs with tailor-made learn-work trajectories?
9. When will the State appoint the investigation officials who will have the task of actually acting against parents who do not comply with the Compulsory Education Act?
10. Can the State, in a short-term, ensure that the phrase '... or has reached the age of 17' in the Compulsory Education Act is replaced by '... or when the student has obtained a school-leaving qualification'?
11. When will the State invest in leisure activities, and thus invest in the prevention of social problems, for example, by allocating more subsidy funds to NGO's that have this as their objective?
12. When will the State ensure that there are sufficient social workers available for all schools?
13. What steps will the State take to offer teachers the opportunity to improve their competence in order to: 1) better understand the socio-emotional problems of students and be able to respond adequately to them, and 2) better recognize and understand disabilities in students?
14. Within what period of time can the State additionally staff the MDC (at least temporarily) to work through the waiting lists and then staff it adequately so that the stream of requests for IQ tests can be dealt with properly?
15. Can the State, in a foreseeable future, equip at least one school per district so that children with disabilities or disorders can participate in education together with other children?
16. What special programs for youngsters with behavioral problems can the State introduce?

17. When will the State start the process of re-evaluating outdated laws within the education system and, where necessary, adapting them, in particular to include sex education in the curriculum?
18. Can the State create a separate budget for children of undocumented migrants who cannot take out private health insurance?

Cluster 6: Disability, health, welfare

19. Which specific steps will the State take to help parents of children with disabilities find their way in the system of care in order to receive the timely help they need for their child's development?
20. What plans does the State have to expand the coverage of the general health insurance to include children with disabilities?
21. Via the State's crisis plan, it was agreed in 2017 that a residential institution for children would be set up providing 24-hour care. To date, why has this institution not yet been opened?
22. In what way can the State support the agencies involved so that they are better able to carry out early detection, including a tailor-made treatment plan?
23. When will the specialized psychiatric institution for youths and young drug addicts be established?
24. When will the State expand the AZV-package to cover paramedical services, in particular for children and youngsters with a disability?
25. What steps will the State take to offer medical and paramedical professionals the opportunity to improve their competence so that they are better able to identify and treat children and youngsters with certain disabilities?

Cluster 8: Special protection measures

26. What steps will the State take to act more firmly against shopkeepers who sell alcohol to minors and to prevent the distribution of drugs in schools?
27. What steps will the State take to ensure that when a minor is arrested, the treatment is in line with the intellectual level of the minor, including youngsters with mild intellectual disabilities, and that these youngsters receive proper legal assistance in the entire process?
28. When will the State take the initiative to set up a multi-disciplinary committee with representatives of all the agencies concerned, both public and non-governmental institutions, so that together a collaboration can be established towards the care of youngsters who end up in the criminal justice system?
29. When does the State intend to increase the prison sentence for the sexual abuse of children, accompanied by effective help to the offender during his (longer) sentence?

Cluster 1: General measures of implementation

30. Can the State, in the near future, launch a balanced, targeted and continuous information campaign on children's rights?
 - When will the State make the reports public that have been sent to and by the Committee on the Rights of the Child since January 2001?
 - Can the State explain why NGO's that can make a positive contribution to the National Social Crisis Plan are not involved enough?

- What actions will the State take to work in a more targeted and preventive manner, so that the limited resources can be used more efficiently to work on priorities?

Cluster 4: Civil rights and freedoms

- What action will the State take to act more firmly against sensationalistic journalists who violate the privacy of youngsters?

Cluster 2: Definition of a Child

- Can the State take steps to amend the legislation and to set the age of majority at 24 years?

Chapter 1 Cluster 1: General Measures of Implementation

1.1 There is insufficient information on children's rights (art. 4 and 42)

The Aruban government is making insufficient effort to educate the society on children's rights (including sexual rights). Information about children's rights must become part of the curriculum. Parents also need more information on these rights.

It's also of importance to balance the information with respect to children's rights. The notion exists that by emphasizing children's rights, children become impatient and rude, rather than assertive and outspoken. The rights of the parents and the responsibilities of the children must also be highlighted. Children must also have more clarity about their rights, responsibilities, and consequences when they don't meet their obligations.

Cluster 1) General Measures of implementation

Art. 4: protection of rights
 Art. 42: knowledge of rights
 Art. 44: reports available

Moreover, it turns out that government reports on these rights are not available to the public (Article 44).

Questions:

- Can the State, in the near future, launch a balanced, targeted and continuous information campaign on children's rights?
- When will the State make the reports public that have been send to and by the Committee on the Rights of the Child since January 2001?

1.2 NGO's are not or not enough involved in the crisis plan (art. 44)

A National Social Crisis Plan has been created to improve the child abuse protection system. Various NGO's have this as their objective. But they are hardly involved in this or not involved at all.

Question:

- Can the State explain why NGO's that can make a positive contribution to the National Social Crisis Plan are not involved enough?

1.3 Curative policy does not protect rights (art. 4)

The government functions ad hoc with every new cabinet and little is done on prevention. Most actions involve curative actions. Also, there is no database to evaluate interventions so as to work in a more result driven way. There is also no data exchange between NGO's and between government agencies and NGO's. Because of these shortcomings, the State cannot adequately protect children's rights.

Question:

- What actions will the State take to work in a more targeted and preventive manner, so that the limited resources can be used more efficiently to work on priorities?

Chapter 2 Cluster 2: Definition of a Child

2.1 Age of majority must be defined at age 24 (art. 1)

By setting the age of majority at 18, the adolescent brain is not taken into consideration. The prefrontal cortex develops around the age of 24. A youngster can then still have difficulty making decisions and with impulsiveness. But it's better developed than at the age of 18.

<u>Cluster 2) definition child</u>

Art. 1: definition term child

Question:

- Can the State take steps to amend the legislation and to set the age of majority at 24 years?

Chapter 3 Cluster 3: General Principles

3.1 Too little attention is paid to children's opinions (art. 12)

In Aruba there is an authoritarian system. Too little attention is paid to the child's opinion. A lot is decided on children, without hearing them. The same applies to children with a disability. By ensuring a continuous, balanced flow of information on children's rights, the society can be stimulated to listen more often to the child's opinion (see also §1.1).

Cluster 3) general principles

Art. 2: non-discrimination
Art. 3: best interests of the child
Art. 6: life and development
Art. 12: opinion of the child

3.2 Children with disabilities do not have equal opportunities (art. 2)

Due to their disability, the rights of many children and youngsters with a disability in Aruba are not ensured, e.g. in education and leisure (see Chapters 6 and 7).

Chapter 4 Cluster 4: Civil rights and freedom

4.1 Children's privacy is violated (art. 8, 16)

Youngsters who come into contact with the law appear in the media with facial recognition. Since Aruba is a small community, children and youngsters are negatively affected by sensationalistic press releases.

The privacy of some youngsters is also violated when their private life is violated by cyber-bullying, insults, fighting, teasing, and gossiping. Youngsters themselves don't know where the boundaries are on social media.

More information on children's rights could mitigate this trend (see §1.1).

Cluster 4) civil rights and freedom

Art. 7: name, nationality, birth registration

Art. 8: protection of identity

Art. 13: freedom of expression

Art. 14: freedom of thought, conscience, religion

Art. 15: freedom of association

Art. 16: privacy

Art. 17: right to information

Art. 28: dignity

Art. 37: no punishment

Art. 39: appropriate care for victims of violence

Question:

- What action will the State take to act more firmly against sensationalistic journalists who violate the privacy of youngsters?

4.2 No suitable care for victims of violence (art. 39)

Children who deal with verbal and/or physical violence at home are ashamed and therefore don't report this. In the Aruban culture, there is a taboo on discussing issues at home. As a result, no suitable care can be offered to these children. The State can help make these children more outspoken by providing the right information (see §1.1).

Chapter 5 Cluster 5: Family and alternative care

5.1 Parents assume insufficient responsibility (art. 5 and 18)

Neglect. NGO's notice a lot of child neglect. Emotional neglect often leads to low intrinsic motivation and/or concentration for school, which often results in a failure to attain a diploma. Last year, the parent-child relationship was the number 1 reason why children called the children's help line. They feel neglected and not understood by their parents.

Parents are not enough involved in the development of their child. They're not willing to pick up their children or bring them to and from activities. They don't make sure that their child participates in "drop-out prevention" programs. Neglected children take on a street culture to protect themselves or they join gangs. The street culture means respect must be earned by fighting.

Cluster 5) family and alternative care

Art. 5: role of parents in the development of the child
 Art. 9: child-parent separation
 Art. 10: family reunification
 Art. 11: child abduction
 Art. 18: responsibilities of parents
 Art. 19: protection against violence
 Art. 20: children without parental care
 Art. 21: adoption
 Art. 25: evaluation of out-of-home placement
 Art. 27: adequate living standard
 Art. 39: appropriate care for victims of violence

There is no time to prepare lunch or dinner at home, so there's a regular consumption of 'junk food', resulting in obesity in children and youths. Internet has become a modern form of neglect: parents give their children a phone or tablet with internet, so they are distracted. Due to the lack of money for childcare, older siblings babysit the smaller children. But they themselves are also children and want to play with their friends.

Some cultural activities end up way too late. After these activities very young children can still be seen on the streets until late into the night. This is unsafe. There is no law regulating the curfew after a certain time.

It has been proven that breastfeeding can offer a solution to limit neglect later in life. To the benefit of closer family bonds it's important that in the first hour after birth, when the baby is placed with the mother for latching, that the father is also present in all tranquility with the mother and the child. In the breastfeeding world this is called the "Golden Hour".

Upbringing. Parents run different shifts and/or have multiple jobs to keep their heads above water. As a result little time and energy remains for the upbringing of their children. Because of this, many children are being cared for by grandparents who have no energy to raise children. Children are also increasingly being brought up materialistically and are not given the norms and values to be socially acceptable (e.g. show respect, be orderly, have commitment, show good manners). Respect for parents is sometimes lacking.

Young, sometimes single parents (or teenage mothers) are often persons with mild intellectual disabilities and don't have the necessary knowledge or lack the ability to effectively address the socio-emotional problems of their children.

Working mothers are often not supported by the fathers in the upbringing of their children. But the opposite also occurs: there are also more and more women who adopt the attitude that they would rather enjoy a better social life. Children are then

neglected by them. On the other hand, there are more and more fathers who want to be more involved in the upbringing of their children, but are often hindered in this by others. There is no law to regulate paternity leave, which also leads to a closer family bond.

Research has shown that at least 10 minutes of quality connection every day is of great importance for a child.

Parents are often not well prepared to give sex education to their children at home. Sex education remains a taboo in many families.

Child day care centers. There are no regulations, nor control or inspection of day care centers for small children. The care offered is often of low quality. The centers that offer higher quality are too expensive for many families. No official data is kept. Most parents work; can't the (large) companies provide safe day care centers for the children of their employees?

Question:

- What plans can the State present to timely identify vulnerable and high-risk families and to better guide and support them in order to prevent that they become problem cases?

5.2 Inadequate protection against violence (art. 19)

Children and youngsters are insufficiently protected against abuse. Children are abused at home and there is also violence in schools. In the Children's Film Festival on the Rights of Children, child abuse was often portrayed in the drawings of primary school students. For many children, school is a much safer environment than home. There's insufficient suitable care for the victim of violence or abuse. Gangs cause violence in schools and on the streets.

Many families don't function well. Common situations are: divorce, new partners, "sugar daddies", lack of money, use of drugs and alcohol, violence and neglect. Children and youngsters don't feel safe with step-parents or the partner of the parent they live with. Many parents themselves suffer from psychological symptoms, depression (for example, after divorce), are aggressive or have addiction problems. For children, this is an unsafe situation at home. Maternity leave is too short. After the maternity leave, the baby is left in a place where safety may not be guaranteed.

Children should be better protected against internet violence ("cyber safety"). Parents who don't know enough about this can't offer the needed protection.

There's also no control on the compliance with a restraining order. So the perpetrator can contact the child or the victim at any time. Also, in case of violation of the restraining order, there are no consequences.

Questions:

- What concrete steps will the State take in order to invest in educational programs to stimulate the assertiveness of youths, so that pregnancy, crime, and alcohol and drug abuse among teenagers are reduced?
- What concrete steps will the State take to better regulate day care centers?

5.3 Many families don't reach an adequate living standard (art. 27)

The Aruban economy is mainly based on tourism, which is a service sector. Most of the jobs require little or no training and are at minimum wage level. On the other hand, due to tourism, living in Aruba is expensive: the subsistence minimum is much higher than the minimum wage*. The labor conditions are poor: physically demanding work, 6-day working weeks, not much time off and/or holidays. Parents often work two jobs to keep their heads above water. As a result, they have little time and energy to spend with their children. See also §5.1.

Many children and youngsters live in long-term poverty. If the parent is unemployed, the unemployment pension is not enough to live on. Children are bullied at school with this home situation. Teenage mothers and their children are at high risk of poverty and developmental problems.

Children have to babysit each other because there's no money for day care. Or children quit school early to go to work to contribute financially at home. Neglected children/youngsters tend to join gangs in order to belong somewhere.

Question:

- What will the State do to offer families, living in poverty, an adequate living standard?

5.4 Many Divorces

In Aruba, divorce rates are high. There are many broken families. Divorce also has a major impact on the financial capacity of the family. In divorce cases, a counselor needs to be added in order to support the family systematically so as to reduce the psychological consequences of the divorce. This counselor will develop a parenting plan in which the best interests of the child come first. Furthermore, parents who split up need to know that the child does not have to choose between them. This conforms emotional neglect.

In the guardianship system, the mother is automatically favored and the father remains in the background. But there is a growing trend of fathers wanting to be more involved in the upbringing of their children. This is often not recognized by the system. There is also not enough guidance when children are abused or beaten by the other parent. Institutions need to cooperate better, where everyone knows exactly who does what and when, in order to better protect the child from neglect and/or abuse.

Question:

- When will the State adequately staff the agencies involved in the system of guardianship so that in divorce cases the child's best interests are safeguarded?

* Writer's note: According to the Central Bureau for Statistics Aruba, in October 2010 the minimum subsistence level for a family of two adults and two children under the age of 16 was AWG. 4,169 per month (Source: *Rapport Bestaansminimum 2010, Centraal Bureau voor de Statistiek Aruba, november 2010*). In 2019, the statutory minimum wage is still at AWG. 1,711.15 (National ordinance on minimum wages AB 1989, no. GT 26).

5.5 Insufficient evaluation of out-of-home placement (art. 25)

Generally children spend (on the judge's order) too much time in a residential institution. Family life is very important, especially for small children. Children with traumas are traumatized even more by a long stay in a residential institution. In a situation of violence at home, it's important to look more at a child's own network to accommodate him/her, instead of taking the child out of its environment.

There is no proper evaluation of all the aspects when placing a child in a residential institution. Children are placed without a medical examination. The Rape-Kit is not used. No protocol has been established for this.

There is a shortage of staff in the residential institutions. There are waiting lists. The residential institutions still have an old-fashioned approach and are often not open to innovation. A more homely environment can be created in the residential institutions. Children in difficult home situations sometimes attach themselves to staff members.

On the other hand, there are not enough foster families. Adoption is not a possibility in Aruba. When a foster family takes in a baby, the biological mother isn't allowed to bond with the baby. It often happens that foster families reject the mother.

The medical care in residential institutions is insufficient; children placed in Casa Cuna* don't have a fixed family doctor or pediatrician. Each child maintains its physician. The same goes for school: schools don't have emergency spots available for midterm placements. Children who are placed in Casa Cuna must still attend the school in their former neighborhood.

Question:

- When will the State introduce an evaluation system to assess with each out-of-home placement, whether the best interests of the child have been taken into account?

* Casa Cuna is a residential institution for children between 0 – 8 years.

Chapter 6 Cluster 6: Disability, health, welfare

6.1 There is little accessibility for children with disabilities (art. 23)

Parental responsibility. After parents are given a diagnosis by the doctor that their child has a disorder or disability, parents shut down or end up in denial. Parents having problems accepting the diagnosis get no help from a specialized professional. When referred to other professionals, follow-up visits depend on these parents. Often grandparents have great concern. Many parents of children with a disability function at a low intellectual level themselves and are unable to raise their children.

Parents of children with hearing impairments don't receive training in how to communicate with their child, which, from an early age, can lead to bonding problems between a parent and a child. This can lead to socio-emotional problems, as well as language developmental disorders, and academic problems.

Education. Many parents and teachers are not sufficiently aware of new assistive technical devices for children with visual impairments. ADL* devices are expensive. This makes access to mainstream education difficult for children with disabilities. There's not enough transition to secondary education for children/youngsters with disabilities. In setting up the National Library of Aruba, the needs of visually impaired children were not considered.

Institutional care, daily activities and leisure. There is no institutional care for children with an intellectual disability. Moreover, there are not enough day care activities for children/youngsters with a disability. This also applies to leisure activities and sports. Because of this, many children/youngsters with a disability are forced to stay home.

Insufficient early detection. The doctors and paramedics working at the White Yellow Cross are not sufficiently trained in identifying the symptoms of disability. Because of this, they report this too late, with all its consequences for the child's development.

Adequate living standard. Parents with children/youngsters with disabilities are forced to stay at home to look after them and can't work. Children with disabilities under the age of 16 are not eligible for the disability pension. Parents of these children cannot rely on financial support from the government, although they do have extra medical costs since the birth of the child.

Medical and paramedical assistance. (Family) Doctors are not specialized in, or don't have any knowledge on, working with children with disabilities. The labor law should be adapted to give parents the opportunity to take children with disabilities to therapy. There is no subsidized professional guidance for parents of autistic chil-

Cluster 6) disability, health, welfare

Art. 6: life and development

Art. 18: responsibilities of parents

Art. 23: children with disabilities

Art. 24: health and health care

Art. 26: social services

Art. 27: adequate living standard

Art. 33: protection against drug abuse

* ADL = Activities of Daily Living

dren. Due to the lack of speech therapy, deaf or hearing-impaired children are more likely to have serious gap in speech and language development and are thus hindered in understanding linguistic information.

There is insufficient suitable care for the autistic youth. Private care is too expensive for most families. There is no knowledge/expertise center for parents of autistic children. Subsidized special therapy for autism is not available and medical care is not covered by the AZV*. That is why parents are often forced to immigrate to the Netherlands.

Children with disabilities not born in Aruba. When the child is not covered by the AZV, no equivalent insurance is arranged. This is the reason why the child is not admitted in various day care centers or at school (see also §8.4).

Transportation. Visually impaired children depend on their parents for transportation. The public bus stops (Arubus[†]) are usually too far away for them. And public buses are not wheelchair accessible.

Support for parents. Neither respite care, nor support groups exist for parents of children with disabilities.

Work. The labor market is not accessible for persons with disabilities. More incentives should be introduced for employers in order to give these youngsters a chance on the labor market.

Sex education. Children and youngsters with a disability need targeted sex education adapted to their disability.

Questions:

- Which specific steps will the State take to help parents of children with disabilities find their way in the system of care in order to receive the timely help they need for their child's development?
- What plans does the State have to expand the coverage of the general health insurance to include children with disabilities?
- Via the State's crisis plan, it was agreed in 2017 that a residential institution for children would be set up providing 24-hour care. To date, why has this institution not yet been opened?
- In what way can the State support the agencies involved so that they are better able to carry out early detection, including a tailor-made treatment plan?

6.2 Insufficient help for children with intellectual disorders (Art. 24)

There are not enough services of care for children and youngsters with intellectual disorders. There is a chronic shortage of ambulatory care providers in the mental health care system. There is a language and cultural barrier with the current child psychiatrists and child psychologists. It is estimated that 1 in 3 or 4 children in Aru-

* AZV stands for "Algemene Ziektekostenverzekering", which is the general health insurance of Aruba

† Arubus is the national public transportation company of Aruba

ba have experienced an ACE*. Aruba needs more mental health professionals who know the Aruban culture and understand the link between ACE's and drug abuse.

Family doctors do not cooperate in referring children and youngsters to a psychologist or psychiatrist. For many parents, getting psychological help is still a taboo. Private psychological help is usually not affordable for most children or youngsters who need it.

Question:

- When will the specialized psychiatric institution for youths and young drug addicts be established?

6.3 Neglect and abuse (art. 18)

Many parents have limited time to pay good attention to their children and they fail to meet appointments. This leads to neglect and insufficient care of their children, as well as abuse. Children with disabilities have no support from their network, also no help at school or in life. See also §5.1.

6.4 Not enough access to health care services (art. 24)

The AZV does not cover enough physical therapy; speech therapy is not covered at all and is too expensive for most families. Creative therapy is also not covered and is therefore financially not accessible for many children.

Breastfeeding must be normalized. Breastfeeding, especially prolonged, reduces the risk of dozens of diseases, for both the mother and the child. It's an excellent obesity prevention method. But the breastfeeding rates in Aruba are still very low (only 2-3 of 10 children up to 6 months are breastfed).

The diagnosis of autism does not lead to treatment. Autistic children/youngsters need special medical care. The treatments are part of the care and support plan.

Due to the lack of a structural pre-care from the very start, parents don't learn how to effectively stimulate their hearing impaired or deaf child in their socio-emotional and language development at home. In the pre-care there's no free speech therapy available to hearing-impaired and deaf children; parents must pay for it themselves. Fundacion pa Esnan cu Problema di Oido† (FEPO), in charge of the coordination of the pre-care, isn't able to do this well due to a shortage in personnel.

Questions:

- When will the State expand the AZV-package to cover paramedical services, in particular for children and youngsters with a disability?
- What steps will the State take to offer medical and paramedical professionals the opportunity to improve their competence so that they are better able to identify and treat children and youngsters with certain disabilities?

* ACE stands for "adverse child experiences", when a child has experienced a traumatic experience him- or herself or became an eyewitness to it

† FEPO is a foundation that has the deaf and hearing impaired as its target group

Chapter 7 Cluster 7: Education, leisure, cultural activities

7.1 Shortcomings in the structure of the education system (art. 28 and 29)

Dutch as the language of instruction. Dutch as the only language of instruction doesn't fit within the culture. Children are often labeled with dyslexia, while reading difficulties are more related to a foreign language in education. An alternative would be to introduce bilingualism: Papiamentu in addition to Dutch as an instruction language.

Grade Retention. Some children have to repeat an entire school year, while they failed only one or two subjects. There should be a kind of "summer school" for specific subjects in which the child is weak.

Cluster 7) education, leisure, cultural activities

Art. 28: education

Art. 29: purpose of education

Art. 30: children of minority groups

Art. 31: leisure, games and recreation

No room in the curriculum for the development of personality and talents. The education system is too much focused on only cognitive knowledge. No attention is paid to personal development, norms, values, arts, sports, music, and basic life skills. Little to nothing is done for the development of the child's talents. Creative arts are important for the development of children. In the present educational system, this isn't perceived as such. More information should be given about the value of theatre, recreational activities, and artistic skills in the development of a child's personality. Also, there isn't always room for lessons about good citizenship, social interaction, and professional attitude in vocational education. This is sorely missed, also by the business sector.

There's much homework and academic pressure put on children and youngsters, leaving no time for after-school activities. Youngsters receive no practical training at MAVO, HAVO, or VWO. Education is still based on gender: boys are more inclined towards technical subjects; girls towards professions in the area of care taking. Parents often impede their child's participation in practical education because of an incorrect perception of it. Various schools struggle with poor infrastructure.

Questions:

- When will the State ensure a better integrated curriculum that is better linked to the Aruban culture, for example bilingualism? And introduce the possibility of a "summer school"?
- What steps will the State take to put more emphasis in the curriculum on the personal development of the child and programs with tailor-made learn-work trajectories?

7.2 Flaws in the Compulsory Education Act (art. 28 and 29)

On December 1, 2012, compulsory education was introduced, and a Compulsory Education Bureau was set up. However, in practice it's not functioning optimally. In the case of violations, no fines or sanctions are imposed by the Bureau.

The Compulsory Education Act, Article 2, paragraph 1b, states that a youngster must attend school "...until he has at least completed the education provided at a vocational or general secondary school, or has reached the age of 17". Because of this definition, many youngsters leave school at 17, even if they have not completed an edu-

cation. Also see Chapter 2 of this report for the request to legally set the age of majority at 24 years.

Questions:

- When will the State appoint the investigation officials who will have the task of actually acting against parents who do not comply with the Compulsory Education Act?
- Can the State, in a short-term, ensure that the phrase '... or has reached the age of 17' in the Compulsory Education Act is replaced by '... or when the student has obtained a school-leaving qualification'?

7.3 Limited services for leisure activities for children (art. 31)

Invest more in prevention. Leisure activities are of great importance to children and youngsters. Creative subjects such as art and music are hardly included in the educational package, while these offer children the space to express themselves in an artistic way. These activities help with the development of their personality. They also offer good opportunities for the youngsters to learn to play together, work together, and learn about norms and values. Lack of leisure time is a major criminogenic factor. It can be said that investing in leisure activities means investing in the prevention of socio-emotional problems in children and youngsters. The biggest challenges in organizing leisure activities are: manpower (volunteers), finance, and transport.

Limited after school activities. There are not enough after-school activities for youngsters in secondary education. The project "Traimerdia"* has deteriorated in recent years. There are almost no services for youngsters over the age of 12, and what's available isn't easily accessible, either financially or geographically. Due to the high costs, these activities are only accessible to a select group. On the other hand, there are also parents who prefer activities that raise the family status, such as gymnastics, ballet, music, etc., instead of activities that the children like. No after-school care is available for children/youngsters with disabilities or an autistic spectrum. And transportation to leisure activities is limited and expensive, which is why these children are often unable to participate in them.

NGO's struggle with limited resources. The NGO's that organize leisure activities struggle with limited resources. NGO's who offer art and theater fall between two stools, because, strictly speaking, they're not considered a social project. Often parents say they can't afford to pay the contributions and NGO's must do fundraising in order to continue their activities. There are also few volunteers. Availability of personnel is of great importance when offering after-school activities. Why can't individuals on social welfare be offered incentives to work as volunteers for these NGO's? If necessary, these volunteers can be further trained.

Use of existing infrastructure for after-school activities. Due to the scarcity of resources, better use can be made of the existing infrastructure in the vicinity of, for example, schools, community centers, and the like, for the purpose of after-school activities. Community centers should be made more accessible both financially and geographically, by constructing for example, bicycle paths.

* After-school care for primary and secondary school children.

Question:

- When will the State invest in leisure activities, and thus invest in the prevention of social problems, for example by allocating more subsidy funds to NGO's that have this as their objective?

7.4 More attention for school personnel

Due to a lack of social workers in schools, sometimes teachers are assigned as such, while they're not educated to do so. Teachers often don't have the competence to deal properly with the socio-emotional problems of students. Children are sometimes inclined to see a teacher as the parent or caretaker who neglects or mistreats them (transference). In so doing, they lose respect for the teacher. The teacher must be able to recognize/acknowledge this and not go along with the misbehavior (counter transference).

There is a lack of male teachers in Aruba's education; male teachers can have a more positive influence on the development of boys, who often grow up with a single mother. Teachers at regular schools lack the necessary knowledge to make adjustments for children with disabilities.

Questions:

- When will the State ensure that there are sufficient social workers available for all schools?
- What steps will the State take to offer teachers the opportunity to improve their competence in order to: 1) better understand the socio-emotional problems of students and be able to respond adequately to them, and 2) better recognize and understand disabilities in students?

7.5 No early detection

Early detection is very important in the case of children with special needs, for example autistic spectrum. The detection of the child's level of intelligence is not done in a timely manner. Schools only accept the diagnosis of the Multi-Disciplinary Center (MDC) that conducts IQ tests; the diagnosis of other specialists is not recognized. The result is that there are long waiting lists. It takes too long before children are diagnosed and receive tailored support in education. For many children it's not known what stage of development they are in, and as a result no adequate education can be sought for them.

Question:

- Within what period of time can the State additionally staff the MDC (at least temporarily) to work through the waiting lists and then staff it adequately so that the stream of requests for IQ tests can be dealt with properly?

7.6 Insufficient attention for children with special needs

Education isn't inclusive at this moment. Children and youngsters with special needs are often unable to join in with their peers who have no disabilities. Schools are not designed with autistic children in mind. Children with special needs (autism, dyslexia, etc.) are not properly accommodated in the current educational system. There are not enough day care centers and schools for children with serious learning disabilities. There's no special secondary education for children/youngsters with intellectual disabilities.

At this moment, deaf children with a cochlear implant (CI) have no access to appropriate education at cluster-2 level. These children get stuck in regular (pre-school) education due to a lack of knowledge and specialism in the field of education for the deaf. The necessary knowledge is (still) available, but after the closure of 'Scol Scucha Nos'* this knowledge is dispersed.

Project Cluster 4 targeting children with psychiatric disorders has no kindergarten grade and only admits 8 children per grade. Schools have no emergency spots available for mid-term placements. Children who are placed in Casa Cuna still have to attend the school in their old neighborhood.

Question:

- Can the State, in a foreseeable future, equip at least one school per district so that children with disabilities or disorders can participate in education together with other children?

7.7 Insufficient attention for children with behavioral problems

There are no special programs for youngsters with behavioral problems. Because of behavioral problems, children are too quickly sent to a school for children with serious learning disabilities after pre-primary school. Children, who are expelled from school due to misbehavior, often have no other possibility in getting an education.

Question:

- What special programs for youngsters with behavioral problems can the State introduce?

7.8 Insufficient attention for teenage mothers and sex education

Teenage mothers. Teenage girls with low self-esteem are at risk of becoming teenage mothers. Not all schools have the same policy regarding teenage mothers who want to breastfeed. By opening the possibility to breastfeed or pump at school, teenage mothers can finish school. By encouraging teenage mothers to breastfeed, they tend to take responsibility for their role as mothers and they increase their baby's chances for a good future (proven in the literature). Abortion is illegal, so no pre- or aftercare exists, with all its consequences. Teenage mothers don't have the right to decide about their own body in case of an unwanted pregnancy.

Sex education. It has been proven that sex education leads to less incest, less neglect, fewer teenage pregnancies and it makes youngsters better inclined to defend themselves. Educational laws date back to 1920 and need to be replaced. For example, parents still have to sign a written agreement that their child is allowed to receive sexual education at school. The growth in STD's[†] among youngsters is alarming. But little attention is paid to this.

Question:

- When will the State start the process of re-evaluating outdated laws within the education system and, where necessary, adapting them, in particular to include sex education in the curriculum?

* Scol Scucha Nos was a primary education school that offered education to children with hearing impairments

† STD's stand for sexually transmitted diseases

7.9 Children of minority groups

Children of undocumented migrants may only attend school if they take out private health insurance. This is often too expensive for these families. As a result, these children, despite their right to education, have a higher risk to drop out.

Question:

- Can the State create a separate budget for children of undocumented migrants who cannot take out private health insurance?

Chapter 8 Cluster 8: Special protection measures

8.1 Inadequate protection against alcohol and drug use (art. 33)

Many children and youngsters try alcohol or drugs for the first time within family settings. A law exists that prohibits selling alcohol or drugs to minors, but there is no control over this. Certain cultural activities promote the normalization of alcohol.

Drug use among youngsters is alarmingly high. The use of drugs is often found in children's blood tests. Youngsters have easy access to drugs. For example, drugs are easily available at school. It's seen as normal among children and youngsters. That's why children and youngsters are put under pressure to try this by the others who are already using it. Some (especially girls) are being used to sell drugs.

Drugs are promoted as medicine, but recreational marijuana affects the healthy growth of brain cells. Children and youngsters don't get enough or not the right information about the negative effects of alcohol and drugs. More needs to be done about the self-esteem of youngsters, so that they don't have to turn to alcohol or drugs.

Cluster 8) special protection measures

Art. 22: refugees
 Art. 30: children from minority groups
 Art. 32: child labor
 Art. 33: protection against drug abuse
 Art. 34: sexual exploitation
 Art. 35: abduction, trafficking, sale of children
 Art. 36: other forms of exploitation
 Art. 37: punishment and deprivation of liberty
 Art. 38: armed conflicts
 Art. 39: appropriate care for victims of violence
 Art. 40: application of juvenile justice system

There is no center for young drug addicts, youngsters needing psychiatric help, youngsters with disabilities, or other children with mental health issues. See also §6.2.

Question:

- What steps will the State take to act more firmly against shopkeepers who sell alcohol to minors and to prevent the distribution of drugs in schools?

8.2 No fair legal process (art. 40)

When a juvenile is arrested by the police, the Stichting Reclassering en Jeugdbescherming* must be involved immediately. This doesn't always happen. In the case of detention, the age of the juvenile isn't taken into account and they're treated as adults. Parents are sometimes not immediately informed of the arrest of their child and they're not always allowed to visit their child, for example, when there's a shortage of personnel. If the child is placed in police custody, there is no proper separation between youngsters and adults. The government doesn't provide proper legal assistance in the entire process. There's no speedy trial or juvenile court judge.

It's estimated that about 80% of youngsters who commit crimes function at the SPO-level† and are probably youngsters with mild intellectual disabilities. Often the process is not conducted at their level, so they're often not able to follow it. For example, the accusations made aren't explained at their level, as a result the youngster won't even understand what he's being accused of.

* Foundation for the Rehabilitation and Youth Protection of Aruba

† SPO stands for Scol Practico pa Ofishi, which is a low-level vocational training school

Placement in an institution for youngsters isn't possible in Aruba, but there's no judicial institution for youngsters who've come in contact with the justice system. The services offered by the Orthopedagogic Centre of Aruba should better connect with the aftercare, juvenile justice system and probation services. Ideally, the litigants with behavioral problems should be accommodated in a setting of assisted living.

Children or youngsters who are locked up in the Correctional Institute of Aruba (KIA*) receive no correction at all. There's no judicial placement. Recidivists are not dealt with properly, with the result that the same youngsters commit ever heavier crimes. The social environment of the youngsters isn't considered. Also, youngsters in the KIA are not offered education. The juvenile justice system was introduced in 2014, but the pedagogical aspect is missing. There is no re-integration process when they leave the KIA.

It has been proven that not being able to participate in leisure activities is an important criminogenic factor. Investing in good leisure activities is investing in the prevention of crimes committed by youngsters (see Chapter 7). It's also worth noting that 90% of litigants use drugs.

Questions:

- What steps will the State take to ensure that when a minor is arrested, the treatment is in line with the intellectual level of the minor, including youngsters with mild intellectual disabilities, and that these youngsters receive proper legal assistance in the entire process?
- When will the State take the initiative to set up a multi-disciplinary committee with representatives of all the agencies concerned, both public and non-governmental institutions, so that together a collaboration can be established towards the care of youngsters who end up in the criminal justice system?

8.3 Inadequate protection against sexual exploitation (art. 34)

Prison sentences for sexual abuse of children aren't high enough to serve as repression. These offenders are soon released and can make more victims, or the same child becomes their prey again. Imprisonment alone doesn't help; the offender must also get help while serving his/her sentence.

Youngsters older than 12 years, who file a complaint with the youth police and the Special Victims Unit, aren't interviewed by an expert in this area, but by a common police officer.

Reports of abuse become separate reports; there's no central registration point. No names and addresses are given, which means that social assistance services have no view on the problem families.

Because (young) hearing-impaired children are unable to express themselves sufficiently because they lack a good language base, they are more likely to become a target for (sexual) abuse. After all, it's difficult for them to explain what happened.

* KIA stands for Korrektie Instituut Aruba, or Aruba's prison

Questions:

- When does the State intend to increase the prison sentence for the sexual abuse of children, accompanied by effective help to the offender during his (longer) sentence?
- How can the State assist the social services agencies in establishing a central registration system in which high-risk or problem families can be better identified regarding possible child abuse?

8.4 Children of undocumented migrants and minority groups (art. 30)

Undocumented (illegal) children are not entitled to health care through the AZV, e.g. for psychological and/or psychiatric help and help with STD's. Therefore, many of these children aren't allowed to attend school. Furthermore, children born abroad are not entitled to financial support from the government (see §7.8).

8.5 Inadequate protection against armed hostilities (art. 38)

There are several gangs in Aruba. They cause violence in schools and on the streets. These gangs possess weapons to fight each other. Children from troubled families are vulnerable to gangs. See also §5.2.

8.6 Inadequate protection against child labor (art. 32)

Children perform internships at a young age and in some cases also enter employment commitments at a young age. In the hotel and catering industry it's not always a safe environment for youngsters (alcohol consumption, etc.). Youngsters, who live in poverty for a long time, also quit school to help with household bills by taking up work.

Appendix: Form for the collecting of issues and context by NGO's for the purpose of reporting to the Committee on the Rights of the Child in Geneva 2019

(Fill this in Dutch or Papiamentu and mail it to schaduwrapportaua@gmail.com or print it out and take it with you to the plenary session to which your organization has been invited.)

Example:

A foundation that provides services to children with a physical disability fills in cluster 6 (or 7), in connection with Article 28 (the right to education):

Issue: *Primary schools are not accessible to children in wheelchairs.*

Context: *Some of our clients who depend on a wheelchair are illiterate, because primary schools are not accessible for wheelchairs.*

Name of organization:	
Objective organization: (max 25 words)	
Briefly formulate here the most important issues and their context in the relevant cluster	
1) general measures of implementation Art. 4: protection of rights Art. 42: knowledge of rights Art. 44: reports available	Issue (max 10 words):
	Context (max 50 words):
2) definition of a child Art. 1: definition term child	Issue (max 10 words):
	Context (max 50 words):
3) general principles Art. 2: non-discrimination Art. 3: best interests of the child Art. 6: life and development Art. 12: opinion of the child	Issue (max 10 words):
	Context (max 50 words):

<p>4) civil rights and freedom Art. 7: name, nationality, birth registration Art. 8: protection of identity Art. 13: freedom of expression Art. 14: freedom of thought, conscience, religion Art. 15: freedom of association Art. 16: privacy Art. 17: right to information, conscience Art. 28: dignity Art. 37: no punishment Art. 39: appropriate care for victims of violence</p>	<p>Issue (max 10 words):</p> <hr/> <p>Context (max 50 words):</p>
<p>5) family and alternative care Art. 5: role of parents in the development of the child Art. 9: child-parent separation Art. 10: family reunification Art. 11: child abduction Art. 18: responsibilities of parents Art. 19: protection against violence Art. 20: children without parental care Art. 21: adoption Art. 25: evaluation of out-of-home placement Art. 27: adequate living standard Art. 39: appropriate care for victims of violence</p>	<p>Issue (max 10 words):</p> <hr/> <p>Context (max 50 words):</p>
<p>6) disability, health, welfare Art. 6: life and development Art. 18: responsibilities of parents Art. 23: children with disabilities Art. 24: health and health care Art. 26: social services Art. 27: adequate living standard Art. 33: protection against drug abuse</p>	<p>Issue (max 10 words):</p> <hr/> <p>Context (max 50 words):</p>
<p>7) education, leisure, cultural activities Art. 28: education Art. 29: purpose of education Art. 30: children of minority groups Art. 31: leisure, games and recreation</p>	<p>Issue (max 10 words):</p> <hr/> <p>Context (max 50 words):</p>
<p>8) special protection measures Art. 22: refugees Art. 30: children from minority groups Art. 32: child labor Art. 33: protection against drug abuse Art. 34: sexual exploitation Art. 35: abduction, trafficking, sale of children Art. 36: other forms of exploitation Art. 37: punishment and deprivation of liberty Art. 38: armed conflicts Art. 39: appropriate care for victims of violence Art. 40: application of juvenile justice system</p>	<p>Issue (max 10 words):</p> <hr/> <p>Context (max 50 words):</p>