



**Convention on the
Rights of the Child**

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COMMITTEE ON THE RIGHTS OF THE CHILD

CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES
UNDER ARTICLE 44 OF THE CONVENTION

Periodic reports of States parties due in 1997

SUDAN *

[7 July 1999]

* For the initial report submitted by the Government of Sudan, see CRC/C/3/Add.3, CRC/C/3/Add.20; for its consideration by the Committee, see documents CRC/C/SR.69-72 and 89&90 and for the Concluding Observation's see CRC/C/15/Add.6 & CRC/C/15/Add.10.

INTRODUCTION

1. This report has been made under article 44, paragraph 1, of the Convention on the Rights of the Child with the aim of affirming a number of facts, *inter alia*:

(a) The question of the family and child is a critical area of concern and a strategic objective that forms part of all development plans and programmes;

(b) The importance which the State attaches to children stems from its concern for the future of its children and its efforts to secure that future. The Sudan has recently undergone progress in the fields of government, administration, politics and peace, thus widening the scope for national unity, political participation, public freedoms and the move towards rural development, which has had a positive impact on children's affairs.

2. The Sudan welcomed the observations and recommendations made by the Committee on the Rights of the Child and has endeavoured to respond by means of this report, which covers the themes contained in the general guidelines regarding the form and contents of periodic reports, adopted by the Committee on the Rights of the Child at its thirteenth session in October 1996. The report was prepared in the following manner:

(a) By a decision of the Minister of Social Planning made on a recommendation of the Secretary-General of the National Council for Child Welfare dated 26 February 1996, a national committee, chaired by the Secretary-General, was formed to prepare the report. The membership of the committee included representatives of the competent ministries, such as the Ministries of Health, Education, Interior, Labour, Finance, Social Planning, Foreign Affairs and Culture and Information. It also included representatives of competent bodies, such as the judiciary, the Office of the Public Prosecutor, the Advisory Council for Human Rights, the National Council for Peace, the Population Council, the Zakat Office, the Office of the Commissioner for Humanitarian Aid, the Central Office of Statistics, the National Water Authority, the Federation of Sudanese Voluntary Organizations and the Sudanese Human Rights Organization, as well as national and international organizations and associations, organizations of the United Nations and prominent national figures concerned with children's affairs;

(b) The national committee then formed a number of working groups to deal with eight main themes, as follows:

- (i) General measures of implementation;
- (ii) Definition of the child;
- (iii) General principles;
- (iv) Civil rights and freedoms;
- (v) Family environment and alternative care;
- (vi) Basic health and welfare;
- (vii) Education, leisure and cultural activities;
- (viii) Special protection measures;

(c) Questionnaires were drawn up and circulated to all states, ministries and organizations for the purpose of gathering information;

(d) The eight working groups received intensive training in the processes of gathering information and preparing reports. Each working group then used a standardized method for gathering the information and material relating to its work;

(e) For their sources of information, the working groups relied on the competent ministries, the Central Office of Statistics, the Office of the United Nations Children's Fund (UNICEF) in the Sudan and the World Health Organization (WHO), as well as on the results of field surveys and the replies to the questionnaires collected from the different states;

(f) A number of workshops were held on various topics, including the role of the judiciary in implementing the Convention on the Rights of the Child and the effect of the Peace Agreement on children. Other workshops were also held in several states with a view to promoting the concept of the rights of the child;

(g) After the working groups had submitted their reports, a drafting group consisting of specialists in their respective fields was selected to prepare the initial draft of the report;

(h) The draft report was discussed in a national workshop involving politicians, executive officers and child experts, as well as representatives of international organizations, local and foreign voluntary organizations and the media. The workshop produced observations and amendments which were incorporated into the report at the second drafting stage;

(i) The report was submitted to the coordinating committee for child action, the membership of which includes under-secretaries of the competent ministries, whose observations were also incorporated at the third drafting stage, following which the report was approved by the committee.

3. Details of the themes addressed are as follows:

(a) General measures of implementation

The section on this theme deals with the legislative, administrative and information measures adopted by the Government with a view to implementation of the Convention, with reference to constitutional decrees and amendments made to domestic legislation in that context. This theme covers the status of the Convention in the forthcoming constitution and the mechanisms established to ensure implementation of the Convention. It also covers the activities undertaken to raise awareness of the Convention and disseminate its principles and its provisions, including training for the groups concerned.

(b) Definition of the child

The section on this theme provides information on the concept of the child in Sudanese law, the civil rights of the child, medical counselling and the end of compulsory education. It also provides information on the child labour laws and the age of marriage in the context of the discussion concerning the marriage of Muslims and non-Muslims, in addition to information on voluntary enlistment in the armed forces, conscription into the armed forces, participation in hostilities, criminal responsibility, capital punishment, life imprisonment, the testimony of the child in court and the right of the child to lodge complaints, seek redress and participate in administrative and judicial procedures affecting him or her.

(c) General principles

The section on this theme deals with the principle of non-discrimination and the steps taken in that connection, as well as the steps taken to reduce disparities and combat discrimination against different groups. It also provides information on the consideration given to the principle of the best interests of the

child in administrative, legislative and social terms, including measures of a legislative and administrative measure taken to ensure the protection of the child.

(d) Rights of the child and civil freedoms

The section on this theme comprises information in regard to the consistency between the articles of the Convention and the rights stipulated in Sudanese law.

(e) Family environment and alternative care

The section on this theme contains information on the family structures in Sudanese society and the measures adopted to ensure respect for the rights of the child, with reference to the laws and procedures which safeguard those rights. It also contains information on the available family counselling services, awareness campaigns for parents and children and the support programmes which the Government provides for poor families. It further discusses the measures adopted to ensure that the child is not separated from his or her parents and to guarantee family reunification. In addition, it contains information on the concept of adoption and *kafalah* of Islamic law and concludes with a discussion of the administrative measures adopted by the Government in connection with the family environment.

(f) Basic health and welfare

The section on this theme covers the policies, laws and statutes relating to health in general and to maternal and child health in particular, with reference to the obstacles impeding achievement of the desired objectives. It also refers to the measures adopted in regard to general facilities in the field of preventive health and treatment, with emphasis on maternal and child health facilities in rural and urban areas. Moreover, it covers the role of international organizations and local and foreign voluntary organizations, as well as the situation of disabled children, health and social insurance and standard of living.

(g) Education, leisure and cultural activities

The section on this theme deals with the policies and objectives aimed at recognizing the right of the child to the various forms of education and discusses the measures adopted to ensure that right. It also provides information on innovative projects supported by international cooperation, together with information on the development of public education and the measures taken to ensure respect for the liberty of individuals and organizations to establish educational institutions. It additionally refers to the difficulties encountered in connection with the educational process in the Sudan.

(h) Special protection measures

The section on this theme covers the definition of the word "refugee" under international instruments, the distinct and firmly established policies of the Sudan towards refugees and the services provided by the Government of the Sudan for refugee children, as well as the efforts of the State to find permanent solutions to the problem of refugee children. It also covers international conventions and the measures adopted by the State to ensure the rights of the child in the armed conflict zones, including recovery and social reintegration. In addition, it discusses legislative measures and laws relating to the administration of juvenile justice, together with the Sudanese child labour legislation and the measures adopted by the Government to protect children against the use of narcotic drugs and psychotropic substances. Also discussed are the Sudanese legislative enactments dealing with the sexual abuse, exploitation and forced labour of the child and the situation of children belonging to minorities.

I. GENERAL MEASURES OF IMPLEMENTATION (arts. 4, 42 and 44, paragraph 6)

4. The steps and measures adopted by the Government of the Sudan with a view to implementation of the Convention on the Rights of the Child stem from its faith in the human values and inherited traits which God bestowed as an honour on the human race. They are also linked with the Sudan's commitment to all international human rights instruments and treaties; it has already signed and ratified several of these and arrangements to complete signature and ratification of the remainder are under way. Given the obstacle to the safeguarding and protection of human rights posed by the situation of armed conflict in some areas of the country, the Government of the Sudan took on board the task of preparing an appropriate climate for a final end to that conflict with a view to enabling individuals to enjoy the full rights guaranteed to them under the national laws, the provisions of which are consistent with those of the various international treaties and instruments to which the Sudan has acceded. The end of the conflict and fighting in the country signals a true beginning for the protection of human rights and for guaranteed security, stability and socio-economic growth, bearing in mind that the population of the Sudan numbers 27.4 million inhabitants, approximately 14 million of whom are children under the age of 18.

5. Forty-two years of civil war in the Sudan have destroyed the basic infrastructures of health, education, social services and agriculture in the rebel areas. The peace efforts in the Sudan are therefore accorded utmost priority in the policies of the State.

6. The national conference for dialogue on peace issues, followed by rounds of peace talks with rebel factions, led to signature of the Peace Charter, which formed the core of the Khartoum Peace Agreement between the Government and a number of the factions engaged in the fighting in southern Sudan. The subjects covered by the Peace Agreement include fundamental freedoms and guarantee of the human rights stipulated in the Universal Declaration of Human Rights. The Agreement also adopts the principle of citizenship as the basis of rights and duties, without distinction on grounds of religion, race or culture, together with the principle of the fair distribution of wealth and power among the states of the Sudan. With the entry into force of this Agreement, the country began to witness positive changes which are still taking place and which will have far-reaching effects. These changes include the following:

(a) De facto implementation of the Peace Agreement with the promulgation of the Fourteenth Constitutional Decree;

(b) The formation of a committee to draft a permanent constitution for the Sudan, which was put to a referendum of the people and is now at the approval stage;

(c) The creation of an open political climate that will effectively promote and establish human rights with the promulgation of numerous legislative enactments relevant to implementation of the Peace Agreement;

(d) Improvement of the country's economic performance, the growth rate having reached an average of 5 per cent as a result of the measures taken to reduce the rate of inflation. Trade in imports also fell by 64 per cent, while trade in exports rose. The inadequacy of international aid to the Sudan, however, has been highly detrimental in terms of the essential services available to Sudanese citizens and children, despite the endeavours of the Government to provide the funds needed for that purpose and despite the valuable efforts made at the grass-roots level to complete economic and social projects.

7. The President of the Republic promulgated Constitutional Decree No. 97 of 1994 establishing an advisory council to monitor human rights questions in the Sudan under the chairmanship of the Ministry of Justice and with the membership of the National Council for Child Welfare and a number of relevant bodies, namely:

- (a) The judiciary;
- (b) The Ministry of Justice;
- (c) The National Assembly;
- (d) The security apparatus;
- (e) The Ministry of Foreign Affairs;
- (f) The Ministry of Interior;
- (g) The Ministry of Labour;
- (h) The Ministry of Culture and Information;
- (i) The National Council for Child Welfare;
- (j) The Office of the Commissioner for Relief Operations;
- (k) University faculties of law;
- (l) The Lawyers' Union;
- (m) The Office of the Commissioner for Refugees;
- (n) National human rights organizations.

8. The Council is competent to:

- (a) Counsel and advise the Government in the field of human rights;
- (b) Conduct the necessary research and studies in the field of human rights and step up the efforts made to secure those rights;
- (c) Collate the necessary information and data furnished by the organs of State;
- (d) Participate in relevant local and regional scientific conferences and committees;
- (e) Organize and arrange visits to the Sudan by relevant delegations, individuals and organizations.

9. It is worth noting that that the Sudan has signed and ratified 12 international human rights instruments, of which there are 24 in all, and that the State legislature has promulgated numerous laws to ensure their application.

10. National laws were therefore instituted on the basis of the provisions and articles of those instruments, which are as follows:

- (a) The International Covenant on Civil and Political Rights;
- (b) The International Covenant on Economic, Social and Cultural Rights;
- (c) The International Convention on the Elimination of All Forms of Racial Discrimination;
- (d) The International Convention on the Suppression and Punishment of the Crime of *Apartheid*;
- (e) The International Convention against *Apartheid* in Sports;
- (f) The Convention against Torture and Other Cruel, Inhuman and Degrading Treatment;
- (g) The Convention on the Rights of the Child;
- (h) The Slavery Convention;
- (i) The Protocol amending the Slavery Convention;

- (j) The Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery;
- (k) The Convention relating to the Status of Refugees;
- (l) The Forced Labour Convention, the Right to Organize and Collective Bargaining Convention and the Employment Policy Convention of the International Labour Organization (ILO).

11. In addition to the above are the Geneva Convention relative to the Protection of Civilian Persons in Time of War, the Geneva Convention relative to the Treatment of Prisoners of War, the Geneva Convention for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field and the African Charter on Human and Peoples' Rights.

12. The Advisory Council for Human Rights has formulated a plan aimed at raising citizens' awareness of their rights as provided for in various instruments. Human rights education committees were also formed in the 26 states of the Sudan.

13. On 24 July 1990, the Sudan signed the Convention on the Rights of the Child, which it then ratified on 3 August 1990 by a law promulgated pursuant to the Third Constitutional Decree of 1989 by the Revolution Command Council.

14. By means of the above legislative procedure and in accordance with the Sudanese legal system, the Convention became part of national legislation and consequently entered into force as a binding law on all parties, including the bodies and institutions of the State. As a result, the Sudanese judiciary is aware that the provisions of the Convention must be applied and may be invoked in court. Proceedings may also be instituted in connection with its provisions and compensation may be claimed in the event of their violation. In that regard and pursuant to the Constitution, the Constitutional Court plays an essential role in protecting the fundamental rights under the Convention and may examine all appeals in their connection in accordance with the Administrative and Constitutional Courts Act of 1997.

15. As for the legislature or National Assembly, in accordance with article 53 of the regulations governing its activities, its specialist committees are entrusted with the task of examining the effects resulting from application of the laws and policies adopted and of ensuring compliance by the executive body with those policies and legislative enactments. As a matter of course, the Convention is incorporated into the high-ranking framework represented by the National Assembly. On 25 June 1996, moreover, the National Assembly issued its resolution No. 29 in which it called for the adoption of further constitutional measures, thus affirming its commitment to the protection of the child and its efforts to create conditions conducive to his or her enjoyment of the rights set forth in the Convention.

A. Measures adopted for incorporation of the Convention into the Constitution

16. Following the Revolution of National Salvation, the Sudan entered a transitional stage which will continue until the permanent constitution is further developed and approved. During this period, the affairs of government are regulated by constitutional decrees initiated by the President of the Republic and approved by the National Assembly (Parliament). Pursuant to these decrees, all fundamental rights, freedoms and guarantees are assured, as follows:

- (a) The State is responsible for the welfare of children (article 7 of the Seventh Constitutional Decree of 1993);
- (b) Freedom of belief and worship is guaranteed (article 1 of the Seventh Constitutional Decree of 1993);

(c) Discrimination on grounds of religion, race, wealth or social status is prohibited (article 9 of the Seventh Constitutional Decree of 1993);

(d) Freedom of expression is guaranteed (article 9 of the Seventh Constitutional Decree of 1993);

(e) Citizens have the right of political participation and are guaranteed equal opportunities (article 3 of the Fourteenth Constitutional Decree concerning the Khartoum Peace Agreement of 1997);

(f) The enactment of legislation prejudicial to the fundamental rights and freedoms of citizens is prohibited (article 3 of the Fourteenth Constitutional Decree of 1997);

(g) The sovereignty of the rule of law is guaranteed, as is the independence of the judiciary (article 61 of the Thirteenth Constitutional Decree of 1995);

(h) Respect for different cultures and religions is guaranteed (article 3 of the Fourteenth Constitutional Decree of 1997);

(i) The right of appeal to the Supreme Court is guaranteed in cases where fundamental freedoms are violated (articles 9 and 25 of the Thirteenth Constitutional Decree of 1995).

Article 69 of the Thirteenth Constitutional Decree of 1995 also provides that the President of the Republic must draft the constitution on the basis of the articles of the constitutional decrees in force and include additional provisions which remain consistent with the spirit of those decrees and the constitutional experience. In other words, the next constitution will not emerge from a vacuum but will be based on established principles and guidelines contained in the constitutional decrees in force, including the above-mentioned provisions.

17. An analysis of the Convention reveals that its provisions are divided into two sections. The first of these relates to fundamental rights and freedoms enshrined in the Constitution, such as equality, non-discrimination, freedom of thought, expression and religion and freedom of organization. As already stated, these rights are generally covered by the constitutional decrees in force and will be shifted into the permanent constitution. The second section relates to rights under ordinary law, which are covered by a wide number of Sudanese legislative enactments, as mentioned elsewhere in this report.

18. It should be stated that the Government of the Sudan has adopted an approach to rule in which every effort is made to lower the administrative profile, achieve a fair distribution of wealth and power and broaden the base of participation. The former Transitional National Assembly – now the Sudanese Parliament – promulgated the Twelfth Constitutional Decree, which is regarded as the core legal document and constitutional term of reference for the federal system pursuant to which the Sudan is divided into 26 states, each with its own executive and legislative authority. The Decree provides for the distribution of power and authority into three separate lists:

- (a) A special federal list pertaining to matters within the mandate of the central authorities;
- (b) A state list pertaining to the state authorities;
- (c) A joint list pertaining to both federal and state authorities; as well as
- (d) A list pertaining to the remaining authorities.

19. Financial resources are also divided among the three federal, state and local levels. A federal government office under the supervision of the President of the Republic was also established and charged

with the task of coordinating among the different states and authorities and ensuring the exchange of experiences.

B. Indicators contained in laws and legislative enactments for the development of policies guaranteeing children's enjoyment of their full rights

20. With the aim of implementing the Convention on the Rights of the Child, the Minister of Justice formed a high-level committee to review the Sudanese child-related laws in order to ensure their conformity with the provisions of the Convention. The committee then produced a report on the subject, which made it clear that the State had long ago put in place the guarantees needed to ensure child rights, as demonstrated by the Labour Act of 1997, the Public Health Act of 1975 and the Juvenile Welfare Act of 1973. Each of these laws contains provisions on child rights, all of which relate to the basic principles found in the Constitution. Article 7 of the Seventh Constitutional Decree concerning constitutional principles, systems and developments stipulates that society is built on the spirit of piety, public education, guidance and free progress and grows with the spread of culture, science and sports. It also stipulates that children, young people, women, men and families have a part to play in society and in ensuring that decent morals and customs prevail. With a view to illustrating the conformity of Sudanese laws with the Convention, the following table shows the laws relating to child rights and the articles of the Convention to which they correspond. Some of these laws were promulgated long before the Convention came into being but are consistent with its provisions nonetheless.

| <i>No.</i> | <i>Law</i> | <i>Article number</i> | <i>Corresponding articles of the Convention on the Rights of the Child</i> |
|------------|--|---|--|
| 1. | Public Health Act of 1975 | 44, 45, 57, 58, 68, 69, 71 and 72 | 24 |
| 2. | School Health Act of 1974 | 4, 8 and 12 | 24 |
| 3. | Registration of Births and Deaths Act of 1972 | 5 | 7 and 8 |
| 4. | Juvenile Welfare Act of 1983 | 3, 4, 5, 6, 11, 13, 14, 17, 18 (excluding paragraph (f)), 19 and 20 | 24 |
| 5. | Sudanese Nationality Act of 1993 | 4, 5, 6, 7, 8, 10, 11, 12, 13 and 14 | 8 |
| 6. | Asylum Act of 1974 | 2 | 20 |
| 7. | National Council for Child Welfare Act of 1991 | 5 | 20 |
| 8. | Personal Status of Muslims Act of 1991 | 81 (1), 82, 84 and 109 | 27 |
| 9. | Penal Code of 1991 | 9 | 40, paragraph 3 (a) |

| <i>No.</i> | <i>Law</i> | <i>Article number</i> | <i>Corresponding articles of the Convention on the Rights of the Child</i> |
|------------|---|-------------------------------------|---|
| 10. | Criminal Procedures Act of 1991 | 47 | 37 |
| 11. | Child Welfare Act of 1971 | 4 6 7 10 11 13 17 | 34 and 35 3 3 40, paragraph 4 40, paragraph 4 40, paragraph 3 40, paragraph 1 |
| 12. | Civil Transactions Act of 1984 | 54, 55 and 62 | 4 |
| 13. | Civil Procedures Act of 1983 | 10 (b), (g) and (h) | 27 |
| 14. | Public Education Act of 1992 | 4 | 29, although the Act seeks to a greater degree to realize the rights of the Sudanese child |
| 15. | Welfare of Disabled Persons Act of 1984 | | |
| 16. | Copyright Act of 1993 | | |
| 17. | Press and Publications Act of 1996 | | |
| 18. | Labour Act of 1997 | | |

C. Mechanisms for follow-up and monitoring of the implementation of the Convention on the Rights of the Child

21. In September 1991, the President of the Republic issued a decree forming the National Council for Child Welfare, on the strength of the National Council for Child Welfare Act, as a high-level national institution with independent prerogatives which enable it to remain untrammelled by bureaucracy. In accordance with the decree, the chairmanship of the Council is vested in the President of the Republic and its membership consists of state governors and federal ministers concerned with children's affairs, their positions as such forming the basis of their appointment to the Council. The Council is competent to:

(a) Fulfil the obligations of the Sudan in connection with the instruments which it has signed, in particular the Convention on the Rights of the Child, the Charter on the Rights of the Arab Child and the Charter on the Rights and Welfare of the African Child, and follow up their implementation;

- (b) Raise awareness of children's issues and design ways and means of mobilizing the public;
- (c) Enhance the security of family life and ensure the family's basic needs with a view to creating the stable environment required for the sound upbringing of children;
- (d) Provide full preventive health care and treatment for children;
- (e) Establish development-led social services for all children;
- (f) Establish education centres for particular categories of children;
- (g) Coordinate the efforts of government bodies, voluntary societies and grass-roots associations involved with children and follow up and evaluate children's activities;
- (h) Issue internal regulations governing the activities and meetings of the Council;
- (i) Establish a statistical database on the situation of children, provide a reference base from which everyone may benefit, including decision-makers and researchers, and undertake research and studies to determine the needs of children, diagnose their problems and propose alternatives in a bid to improve their circumstances;
- (j) Organize meetings and discussion seminars for researchers and decision-makers, review the situation of children, develop projects and assist in outlining the implementation of follow-up methods;
- (k) Assist in running training courses and workshops aimed at improving the performance of children's organizations and devise training materials for that purpose.

22. In conformity with the Convention on the Rights of the Child, the State prepared a national plan of action after convening a number of national conferences and also developed a number of sectoral plans. With a view to implementing the provisions of the Convention, the National Council for Child Welfare is able to call upon the following mechanisms:

(a) The General Secretariat of the National Council for Child Welfare: This is the executive and administrative body of the Council, headed by a secretary-general who ranks as a minister of State;

(b) State councils for children: These consist in child welfare councils at the state level and in children's committees at the provincial and local district levels. State councils are formed under the chairmanship of the state governor (*wali*) and with the membership of the ministers concerned with children's affairs, the commissioners and three other people with an interest in children's affairs. Each state council also establishes a general secretariat, which serves as its administrative and executive body. The state councils for children play a part in implementing the Convention on the Rights of the Child, as they encourage the child services units to fulfil their role. They also supply the National Council for Child Welfare with information relating to children, follow up and monitor implementation of the Convention and organize all children's activities in the states, thus playing a role similar to that of the Council. In all, 21 state councils have hitherto been established, as shown in the following table:

| | <i>State</i> | <i>Date of establishment</i> |
|-----|---------------------|------------------------------|
| 1. | Gezira | 1993 |
| 2. | North Darfur | 1993 |
| 3. | Khartoum | 1993 |
| 4. | River Nile | 1994 |
| 5. | Bahr al-Jabal | 1994 |
| 6. | South Kordofan | 1994 |
| 7. | Kassala | 1994 |
| 8. | Upper Nile | 1995 |
| 9. | West Darfur | 1995 |
| 10. | West Bahr al-Ghazal | 1995 |
| 11. | White Nile | 1995 |
| 12. | Sennar | 1994 |
| 13. | South Darfur | 1995 |
| 14. | Jonglei | 1996 |
| 15. | Lakes | 1996 |
| 16. | West Kordofan | 1996 |
| 17. | Gedaref | 1996 |
| 18. | East Equatoria | 1997 |
| 19. | West Equatoria | 1997 |
| 20. | Red Sea | 1997 |
| 21. | Blue Nile | 1997 |

In the provinces, the children's committees are arranged in the same way as those at the state level under the chairmanship of the commissioner and with the membership of the directors of the ministries concerned with children's affairs.

(c) The Technical Advisory Committee of the National Council for Child Welfare: This was formed in accordance with the Council of Ministers Resolution No. 400 of 18 September 1995 on the basis of article 10 of the National Council for Child Welfare Act. This Committee, which comprises representatives of all the ministries, government departments and units concerned with children's affairs, is charged with outlining general policies and drawing up national child welfare plans and programmes. It is regarded as a follow-up mechanism, as it has the opportunity to carry out sectoral follow-up work through its special branch committees, which provide additional information on children and the type of services available to them.

(d) The Coordinating Committee for Voluntary Societies: This Committee, which comprises all the children's societies, was established to coordinate national and foreign voluntary efforts in order to avoid duplication and channel the resources available for children in the best direction. The regulations governing its work were issued under the signature of the President of the Republic in November 1994. One of its offshoots is an executive committee, chosen through free and direct elections, which deals with seven critical areas of concern:

- (i) Law;
- (ii) Health;
- (iii) Education;
- (iv) Social welfare;
- (v) Finance;
- (vi) Information;

(vii) Emergency situations.

23. In addition to the above mechanisms, the General Secretariat of the National Council for Child Welfare took to making field visits, one of the most useful ways of discovering the reality of a situation, with a view to determining the amount of progress achieved. Such visits were conducted by teams headed by the Minister of State and the Secretary-General of the Council.

24. On 24 November 1996, the President of the Republic issued a directive declaring the National Council for Child Welfare as the official umbrella for the coordination of all child-related activities in the Sudan. The Council of Ministers also issued its Resolution No. 145 of 16 March 1997 in which it designated the National Council for Child Welfare as the counterpart of the United Nations Children's Fund (UNICEF) in all matters relating to children's projects and programmes, both official and voluntary, in the Sudan.

25. With a view to promoting awareness of the provisions of the Convention and rallying the public, the National Council for Child Welfare made efforts to publicize and disseminate the Convention at the federal and state levels by circulating 11,000 copies in Arabic and English to senior politicians and executives, grass-roots and voluntary organizations, judges, teachers, children and families. It also organized seminars and workshops in Khartoum and in various states, as illustrated in the table below.

C. Problems, obstacles and future outlook with respect to implementation
of the Convention

26. Despite the substantial progress achieved in implementing the Convention on the Rights of the Child, the drain of the war on the economy stands as a major obstacle to further improvement, especially when coupled with the lack of assistance provided on that score by the international community. In this context, the National Council for Child Welfare has made efforts to:

- Improve its performance level by recruiting suitably qualified personnel with a view to achieving the desired structure, as approved by the Council of Ministers;
- Prepare an integrated project for a core database to provide information on all child-related matters at the national and federal levels;
- Activate the state councils with a view to ensuring that they each convene during the current year;
- Heighten the involvement of the Government, voluntary organizations and grass-roots efforts in order to broaden the scope of programmes aimed at raising awareness of children's issues;
- Conduct scientific surveys and prepare studies on children, in which connection a study on child employment has now been drafted;
- Formulate plans to step up teaching in the field of child welfare at both the federal and state levels;
- Begin preparing an ambitious service scheme in order to recruit greater numbers of personnel who are qualified for work relating to children.

27. The introduction to this report provides information on the process of its preparation, the extent of the participation in that process, the steps taken to publicize and translate the report and the measures adopted to ensure wide dissemination of the concluding observations adopted by the Committee on the Rights of the Child in relation to the previous report of the Sudan.

Seminars and workshops introducing the Convention on the Rights of the Child

| <i>Activity</i> | <i>Date</i> | <i>Place</i> | <i>Target group</i> |
|--|----------------------------------|-------------------------------|---|
| 1. Seminar on implementation of the Convention on the Rights of the Child | 1993 | Khartoum | Senior executives from the sectors of health, education, social welfare, culture and information and water. |
| 2. Workshop to promote understanding of the Convention on the Rights of the Child | 1993 | Khartoum | As above |
| 3. Seminar on implementation of the national plan and the child welfare strategy | 1994 | Madani | As above in Madani in Gezira state (formerly the Central region) |
| 4. Workshop on mobilizing society on children's affairs | 1994 | Al-Obeid | As above, plus voluntary societies and organizations |
| 5. Workshop introducing the role of voluntary organizations in the dissemination and implementation of the Convention on the Rights of the Child | 1994 | Khartoum | Children's societies and organizations |
| 6. Workshop on nutrition for mothers and children | 1994 | Khartoum | Senior executives in the sectors of health, education, social welfare, culture and information and water, plus voluntary organizations |
| 7. Seminar on the effect of armed conflict on children | 1995 | Khartoum | As above |
| 8. Education of the Sudanese child | 1995 | Duwaym | Children and teachers |
| 9. Ways of mobilizing grass-roots involvement in children's affairs | 1995 | Juba | Senior executives in the sectors of health, education, social welfare, culture and information and water, as well as voluntary children's organizations |
| 10. Seminar on child employment | 1995 | Khartoum | Senior executives in the sectors of health, water, education, social welfare, culture and information |
| 11. Workshop on mobilizing the involvement of society in children's affairs | 1996 | Fashir | As above |
| 12. Workshop to promote the Convention on the Rights of the Child | 1996 | Madani | Executive sectors |
| 13. Meeting of children from Khartoum (during the international broadcast for children) | December 1996 | Khartoum | Children |
| 14. Seminar on the role of the National Assembly in implementing the Convention on the Rights of the Child | 23 June 1996 | Khartoum | Members of the National Assembly (senior legislators and monitors) |
| 15. School seminar on issues relating to disabled children | October 1996 | Khartoum | Disabled children, as well as official bodies and organizations concerned with disabled children |
| 16. Training seminar on the Convention on the Rights of the Child | November 1996 | Hotel Qasr al-Sadaqa | |
| 17. Training seminar on the Convention on the Rights of the Child | November 1996 | Hotel Qasr al-Sadaqa | |
| 18. Discussions of the Khartoum State Council of Ministers concerning implementation of the Convention on the Rights of the Child | Council session of 16 March 1997 | Council of Ministers/Khartoum | Khartoum State Council of Ministers |

| <i>Activity</i> | <i>Date</i> | <i>Place</i> | <i>Target group</i> |
|---|-------------------|--|--|
| 19. Discussions of the Khartoum State Council of Ministers concerning implementation of the Convention on the Rights of the Child | April 1997 | Khartoum/Khartoum state | Khartoum State Council of Ministers |
| 20. Discussions of the Gezira State Council of Ministers concerning implementation of the Convention on the Rights of the Child | 9 July 1997 | Madani | Gezira State Council of Ministers |
| 21. Workshop of the committee assigned to write the report on the Convention | 11-14 August 1997 | Khartoum | National committee assigned to write the report of the Sudan |
| 22. Workshop on the role of the judiciary in implementing the Convention | 11 July 1997 | Khartoum | Judges and lawyers |
| 23. Workshop on the effect of the Peace Agreement on children | 10 August 1997 | Qa'at al-Sadaqa (Hall of Friendship), Khartoum | Senior politicians and executives |
| 24. Discussions of the Bahr al-Jabal Government Council, the Parliament and the secretariat of the National Congress | 18 August 1997 | Juba | Senior politicians and executives |
| 25. Discussions of the East Equatoria Government Council | 17 August 1997 | Juba | Senior politicians and executives |
| 26. Discussions of the West Equatoria Government Council | 17 August 1997 | Juba | Senior politicians and executives |
| 27. Briefing and mobilization of the secretariat of the National Congress of Gezira State in regard to the role of the political system in implementing the Convention on the Rights of the Child | 7 August 1997 | Madani | Senior politicians and executives |
| 28. Training seminar on the implementation of the Convention on the Rights of the Child | February 1997 | Khartoum | Agency for student activities in the states |
| 29. Training seminar on the implementation of the Convention on the Rights of the Child | February 1997 | Khartoum | Information officers |
| 30. Conference on children's culture | 1993 | Khartoum | Senior executives |
| 31. Seminar on follow-up of the Convention on the Rights of the Child | 1995 | Al-Obeid | Cultural, social and information sector |
| 32. Participation in a conference of psychiatrists (promotion of psychiatric services for children) | October 1997 | Madani | Senior health officers and health executives |
| 33. Commemoration of World AIDS Day (Children Living in a World of AIDS) | December 1997 | Khartoum | Senior executives and voluntary organizations |
| 34. Workshop on the Charter on the Rights of the Arab Child | November 1997 | Khartoum | Senior politicians and executives, judges, lawyers and doctors |
| 35. Workshop on harmonizing the Charter on the Rights of the Arab Child with the Convention on the Rights of the Child | November 1997 | Khartoum | Senior politicians and executives, judges, lawyers and doctors |
| 36. Workshop to promote understanding of the Convention on the Rights of the Child | December 1997 | Kassala | Senior politicians and executives, community leaders and mothers |
| 37. Workshop to promote understanding of the Convention on the Rights of the Child | December 1997 | Gadaref | Senior politicians and executives, community leaders and mothers |
| 38. Workshop to promote understanding of the Convention on the Rights of the Child | December 1997 | Damazin | Senior politicians and executives, community leaders and mothers |
| 39. Workshop to promote understanding of the Convention on the Rights of the Child | December 1997 | Gadaref | Senior politicians and executives, community leaders and mothers |

| <i>Activity</i> | <i>Date</i> | <i>Place</i> | <i>Target group</i> |
|--|---------------------|--------------|--|
| 40. Workshop to promote understanding of the Convention on the Rights of the Child | December 1997 | Damazin | Senior politicians and executives, community leaders and mothers |
| 41. Training workshop on the Convention on the Rights of the Child | 7-8 January 1998 | Khartoum | Students from the Police Academy |
| 42. Training workshop on the Convention on the Rights of the Child | 12-16 January 1998 | Khartoum | Police officers |
| 43. Training workshop on the Convention on the Rights of the Child | 10-12 February 1998 | Omdurman | Students from the Faculty of Education at the University of Khartoum |
| 44. Training workshop on the Convention on the Rights of the Child | 1-4 March 1998 | Khartoum | Doctors and administrators at the Ministry of Health |
| 45. Training workshop on the Convention on the Rights of the Child | 10 March 1998 | Omdurman | Midwives and nurses |
| 46. Training workshop on the Convention on the Rights of the Child | 16 March 1998 | Khartoum | Medical assistants |
| 47. Training workshop on the Convention on the Rights of the Child | 19 April 1998 | Khartoum | Pre-school education instructors |

II. DEFINITION OF THE CHILD (art. 1)

28. Sudanese legislative acts employ a variety of words to refer to children, depending on the rights to be safeguarded. This discussion of the definition of the child will begin with an overview of the concept of the child and then proceed to highlight the substance of Sudanese laws on the subject.

29. The word “infant” or “child” applies to any young being from the time of emergence from the mother’s womb until the age of puberty. The word appears in the Quran: “It was He who created you from dust, making you a little germ, and then a clot of blood. He brings you infants into the world; you reach full maturity, then decline into old age.” It is therefore a term that is clearly used to refer to an individual from the time of birth until puberty or full maturity is attained. Childhood is thus the period between birth and puberty.

30. The maturity which signals the end of childhood is attained when an individual becomes fully rational and discerning (*mumayyaz*) and acquires intellectual, mental and physical maturity. In the view of jurists, maturity is marked in two ways: the first is the appearance of the usual outward “signs of maturity”, such as puberty, the growth of pubic hair and, in the case of young girls, menstruation and the ability to conceive. The second is the attainment of full legal age, a subject on which jurists hold differing views and on which other positive laws are also at variance.

31. As for the concept of the child in Sudanese law, an examination of the child-related laws reveals that they employ different terms, such as “infant”, “minor”, “young person” or “juvenile”, “delinquent”, “sexually immature youth” and “pupil”. The absence of a specific definition or term for the child is clearly attributable to the fact that the types of protection developed by the legislature vary according to the age of the child and the rights and obligations involved. This is consistent with article 1 of the Convention on the Rights of the Child, which defines a child as “every human being below the age of eighteen years unless under the law applicable to the child, maturity is attained earlier.” This provision provides scope for national legislations to determine the age of a child as being no higher than 18 years. Clearly, there is no difference between Sudanese legislative acts and the above article 1 of the Convention on the Rights of the Child.

A. Minimum legal age and the rights of the child in the Sudan

1. Legal and medical counselling without parental consent

(a) Legal counselling

32. Article 22 of the Civil Transactions Act of 1984 stipulates that any person having attained 18 years of age is fully competent to exercise his civil rights and that any person who lacks discretion on account of his young age (below seven years) or who is demented or insane is incompetent to exercise his civil rights. It also specifies that any person having attained the age of discretion who has not reached full legal age and is profligate or negligent is incompetent as prescribed by law. A person who is legally incompetent is, according to circumstance, subject to the provisions on guardianship, tutorship and custodianship. On that basis, articles 116 to 120 of the Civil Procedures Act of 1983 stipulate that civil procedures on behalf of a minor who is a plaintiff or a defendant in any lawsuit must be conducted by the guardian appointed by the court for that purpose. Any measures taken against a minor without the appointment of such a guardian are deemed invalid. Similarly, a minor having attained 15 years of age may, before he reaches the full legal age of 18, administer his property with the permission of his guardian or tutor, provided that he first obtains leave to do so from the court. In that case, he is legally competent

insofar as those matters for which he has received authorization are concerned and has the right to seek legal counselling, in accordance with the provisions of the law.

(b) Medical counselling

33. The right of the child to enjoy protection and care should not be prejudiced by the provisions concerning the guardianship of individuals and property, which aim to protect children from their own vulnerability, immaturity and lack of reason. A guardian has the duty of care and bears social responsibility in the first instance for any failure of that duty, as well as legal responsibility in accordance with article 76 of the Penal Code of 1991. It is therefore clear that the child should not receive medical counselling except in the presence of his guardian or tutor or any person standing in the place of either. The child's father, legal guardian or custodian is responsible for taking care of his health, as affirmed in article 44, paragraph 1, of the Public Health Act of 1975, pursuant to which the child's father, guardian, custodian, school principal or health officer is responsible for ensuring that the child receives all initial and subsequent inoculations.

2. End of compulsory education

34. Promulgated in 1992, the Public Education Act specifies the different stages of education and provides for continuation of the basic stage for eight years instead of six. Basic education begins with the pre-school stage at the age of four, which means in principle that primary school enrolment takes place at the age of six. One of the educational policies adopted is to ensure that compulsory basic education is universally available by 2000, in which connection sovereign decrees were promulgated with a view to encouraging all families to enrol their children in school at the basic stage. Educational regulations were also issued, specifying six years as the age of school admission, although pupils may still be admitted up to the age of nine years. In other words, compulsory education ends at the age of 14 years for pupils admitted at six years of age and at the age of 16 years for pupils admitted at eight years of age.

3. Admission to employment or work, including hazardous work, part-time work and full-time work

35. Formerly, there were several different laws on child employment, each of which dealt individually with one particular aspect of the question. In view of the identical subject matter, however, it was considered appropriate to amalgamate them into one law, namely the Labour Act of 1997, the provisions of which regulate the method of admission to employment or work and cover hazardous work, part-time work and full-time work, as follows:

(a) The Act stipulates that children under 18 years of age are not permitted to work, with the exception of those employed in government-run training schools, in non-profit-making training workshops or in family-owned businesses in which only other family members are employed under supervision of the owner, and those employed under an industrial apprenticeship;

(b) The Act defines a "young person" as any individual under the age of 16 years;

(c) The Act prohibits the employment of young people in jobs which are hazardous or harmful to health or which are physically demanding and in jobs or occupations which are detrimental to their morals, pursuant to article 21 of the Labour Act of 1997;

(d) The Act stipulates that young people may not be employed at night between the hours of 8 p.m. and 6 a.m., nor may they work overtime or during official or weekly holidays or for longer than

seven hours, a period which must be interspersed with one hour's rest with pay. Moreover, young people may not work for more than four hours continuously.

4. Marriage and sexual consent

(a) Marriage of Muslims

36. Given that the basis of marriage is consent, article 34 of the Personal Status of Muslims Act of 1991 stipulates that a guardian may give a mature woman in marriage if she consents to the husband and to the dowry. Her statement of her maturity is accepted unless it is conspicuously false. Information has already been provided on how maturity is determined, namely on the attainment of puberty or the appearance of unmistakable physical signs. Article 40 of the Act nevertheless permits the marriage of a person of discretion; in accordance with paragraph 2 of the article, discretion is acquired at 10 years of age. A 10-year-old male is therefore permitted to marry if it is demonstrated that the marriage is likely to be in his interest. A guardian may not, however, give a 10-year-old girl in marriage without the consent of the judge, which is based on the considerations of advantage and good reason, provided that the husband is suitable and the dowry equals that of the girl's peers.

(b) Marriage of non-Muslims

37. The marriage of non-Muslims is regulated by the Marriage of Non-Muslims Act of 1926, article 10 of which stipulates that the competent court may invalidate a marriage entered into under the Act by a male under 15 years of age or a female under 13 years of age.

38. As for minors, the Act stipulates that their consent is required for marriage. Article 29 provides that if either one of the couple to be married is under 21 years of age and is not widowed or divorced, it is essential to obtain the written and signed consent of the father, or of the mother if the father is deceased, delinquent or outside the country, or of the guardian if both parents are deceased, delinquent or outside the country. In all cases, if the party in question has no parent or guardian resident in the Sudan who is qualified to consent to the marriage, the judge of the court may give his written consent if, after interviewing the couple, he is persuaded that the marriage is appropriate. In such cases, his consent has the same effect as the consent given by a father or mother. The Sudan recognizes no sexual relationship or consent outside the marital relations defined by the divine laws and governed by the above-mentioned laws.

5. Age of voluntary enlistment in the armed forces, conscription into the armed forces and participation in hostilities

39. It is well-known that the Sudan's compliance with humanitarian law and the Convention on the Rights of the Child derives from its practice of ratifying any convention which it signs with a law, pursuant to which the convention in question becomes an internal law of the State that must be constitutionally and legally respected. Consequently, the People's Armed Forces Act of 1986 stipulates the conditions for recruitment to the ranks of the armed forces, namely that the person concerned must be sufficiently fit and healthy to withstand the rigours of military service. Article 10, paragraphs 4 and 5, stipulates that all those capable of bearing arms are regarded as a reserve force and that the President of the Republic may call upon them to serve in any branch or unit of the armed forces whenever the need arises. Paragraph 5 also stipulates that, without prejudice to the provisions of paragraph 4, the President of the Republic may require any person who is capable of bearing arms to undergo military training and thus be prepared as a member of a reserve force in accordance with the conditions specified by any law or decree in force. The Popular Defence Act of 1989 was accordingly promulgated and provides that any

person volunteering for the Popular Defence Forces must be no younger than 16 years of age and medically fit. The National Conscription Act of 1992 also stipulates that any Sudanese person having attained 18 years of age and who is no older than 33 years of age may be subject to conscription, which is consistent with the provisions of article 38 of the Convention on the Rights of the Child.

6. Criminal responsibility

40. Article 8 of the Sudanese Penal Code of 1991 stipulates that criminal responsibility applies only to persons who are legally obliged to fulfil the precepts of the law and also capable of exercising free choice. In regard to acts of minors, article 9 provides that a minor who has not attained maturity is not deemed to have perpetrated an offence. The measures of care and reform stipulated in the Code must, however, be applied in the case of all such persons over seven years of age, as the court deems fit. Accordingly:

(a) A person having attained seven years of age has no criminal responsibility;

(b) Article 3 stipulates that “a mature person” means any person showing the unmistakable physical signs of proof that he has reached puberty, which could apply to a person having attained 15 years of age. Any person having attained 18 years of age is considered mature, even if he shows no such signs of maturity;

(c) Pursuant to article 3, a child is not considered responsible for a criminal act, although he is subject to the measures of care stipulated in article 47, pursuant to which the court may apply such measures to a young suspect who was over 7 and under 18 years of age at the time of perpetration of the criminal offence, as well as reform measures intended to improve and correct behaviour.

7. Capital punishment

41. The Penal Code contains provisions relating to capital punishment. Article 27, paragraph 2, for example, stipulates that, apart from crimes of *hadd* (doctrinal punishment) or *qasas* (retribution), no person under 18 or over 70 years of age may be sentenced to death. Article 27, paragraph 2 (f), deals with the criminal responsibility of persons between the ages of 7 and 18. For crimes of murder or *qasas* (retribution), they are pardoned or ordered to pay blood money to the relatives of the victim. The death penalty is not enforced unless the latter refuse to accept the blood money or agree to a pardon.

8. Life imprisonment

42. Article 33, paragraph 3, of the Penal Code of 1991 stipulates that, except for crimes of brigandry, a sentence of life imprisonment may not be handed down to any person under 18 years of age.

9. Giving testimony in court in civil and criminal cases

43. The testimony of a discerning child is admissible pursuant to the Evidence Act of 1993, article 24 of which stipulates that any rational person who is discerning in regard to the facts about which he is testifying is competent to give testimony.

10. Lodging complaints and seeking redress before a court or other relevant authority without parental consent

44. The Criminal Procedures Act of 1991 defines a complaint as a verbal or written allegation made by a person against whom or against whose property an offence has been committed. There is nothing to prevent the courts from admitting any complaint lodged by children to the effect that an offence has been committed against them.

11. Participation in administrative and judicial proceedings affecting the child

45. There are no legal obstacles to the appearance of a child before a juvenile court, whether as a complainant or as a witness.

12. Giving consent to change of identity, including change of name, modification of family relations, adoption and guardianship

46. The law does not permit a child in the Sudan to change his name or modify family relations, adoption and guardianship until he has reached full legal age.

13. Having access to information concerning the biological family

47. The Personal Status Act of 1991 stipulates that legal proceedings may be instituted with a view to establishing a blood relationship. Such proceedings may establish paternity or filiation alone or may secure other rights in addition. The Act also stipulates that the acknowledgement of a blood relationship other than paternity, filiation or maternity applies to no one other than the person making the acknowledgement unless substantiated or given as testimony. The Act further stipulates that a blood relationship may be established by means of testimony, common knowledge and hearsay (articles 97, 102 and 103 of the Personal Status of Muslims Act of 1991).

14. Legal capacity to inherit, to conduct property transactions and to create or join associations

48. The capacity of a child to inherit is established before birth. The Personal Status of Muslims Act of 1991 stipulates that the larger share of an estate should be bequeathed to the unborn child until it is known whether the child is male or female.

49. As for the conduct of property transactions, the financial dealings of a discerning young person over seven years of age are valid if they are wholly beneficial to him and invalid if they are wholly detrimental to him. Dealings which are a combination of the two may be invalidated in his interest in accordance with the provisions of article 55 of the Civil Transactions Act of 1984.

50. The Act of 1957 which previously regulated the creation and joining of associations specified 18 years as the minimum joining age. The Act of 1995 promulgated in its place, however, specifies no joining age, which means that there is nothing to prevent the child from joining social leagues within his or her own vicinity.

15. Choosing a religion and attending religious school teaching

51. Sudanese laws specify no minimum age for choosing a religion. The birth certificate contains no details of a child's religion, although it states the father's religion. The child is therefore born with a natural disposition and acquires whatever denomination it might be from the initial environment in which he thrives. The religion acquired by a child therefore depends on his early upbringing. Pursuant to the

Public Education Act and the School Regulations, a child has the right to attend religious classes in accordance with his creed and denomination.

16. Consumption of alcohol and other controlled substances

52. All children are forbidden to handle and consume alcohol. Any child who does so is in breach of the law in accordance with the provisions of articles 78, 79 and 80 of the Penal Code of 1991. Articles 15 and 20 of the Narcotic Drugs and Psychotropic Substances Act of 1994 also fully prohibit the use of narcotic drugs and psychotropic substances.

17. How the minimum age for employment relates to the age of completion of compulsory schooling, how it affects the rights of the child to education and how relevant international instruments are taken in to account

53. Without question, the extension of schooling to the age of 16 years, mentioned earlier, enables children to complete the basic stage of education, which, as stated in paragraph 34 of this report, will be compulsory. The right of a child to education is consequently unaffected.

18. Cases where there is a difference in the legislation between girls and boys

54. In accordance with the law, the basis for marriage is maturity, the definition of which is given in this report. In Sudanese law, there is no difference between girls and boys in regard to the legal marriageable age, which is 10 years. There is a difference, however, in that, for the marriage of a discerning young girl, the law additionally requires that the judge must give his permission, the husband must be deemed suitable and the dowry must equal that of her peers. This requirement is stipulated out of concern for girls and in order to prevent any form of exploitation.

III. GENERAL PRINCIPLES

A. Non-discrimination

55. Non-discrimination is a binding principle in Sudanese legislation. The Twelfth Constitutional Decree of 1995 provides for the distribution of federal powers under chapter III, article 6 of which stipulates that the federal authorities may implement legislation and generally make plans, including in connection with the matters covered in paragraph (e) concerning nationality, immigration, passports and alien affairs. These provisions affirm the importance of matters of nationality in that they affect all rights of citizenship and equality before the law.

56. Recently promulgated, the Fourteenth Constitutional Decree giving effect to the Peace Agreement of 1997 sets forth guiding principles in chapter II, article 3, paragraph 3 of which provides that legislation which prejudices the fundamental rights and freedoms of citizens may not be enacted. Paragraph 3 (f) also provides that citizenship is the basis of public rights and duties. By virtue of their citizenship, all Sudanese participate on an equal footing in political, economic, social and cultural life. The Fourteenth Constitutional Decree of 1997 therefore enshrines the principle of public freedoms and duties and the fundamental rights of citizens, which all Sudanese share by virtue of their citizenship. Article 3, paragraph 1, of the Fourteenth Constitutional Decree stipulates as follows:

“1.The Sudan is a multi-ethnic, multicultural and multi-faith State. Islam is the religion of the majority of the population and Christianity and other African beliefs have a considerable number of followers.

“2.Freedom of religion and belief is universally guaranteed, as is the freedom to practice religious ceremonies, engage in missionary activity, preach and offer spiritual guidance. No citizen may be coerced into embracing any religion or belief.”

57. The foregoing is one of the principal steps taken to ensure that discrimination is prevented and combated, in both law and practice, including discrimination on the basis of race, colour, sex, language, religion, politics or other opinion, national, ethnic or social origin, property, disability or birth. Consequently, there is no discrimination in the Sudan, in conformity with the provisions of the Convention on the Rights of the Child.

Measures adopted to reduce economic, social and geographical disparities

58. Article 3, paragraph 9, of the Fourteenth Constitutional Decree of 1997 stipulates that the State must endeavour to ensure development at the state level and eliminate the disparities in basic services among the different states by drawing up a comprehensive social and economic plan. It also stipulates that priority should be given to the least developed states.

59. In regard to children with disability, the Welfare of Disabled Persons Act of 1994 (annexed hereto), which is a general law for disabled persons, including children, was promulgated. It encompasses all the provisions necessary to ensure that disabled persons experience no discrimination owing to their condition of health or their affliction.

60. As for children born out of wedlock, the Child Welfare Act of 1971 (annexed hereto) guarantees their enjoyment of a decent life and of non-discrimination. It also regulates adoption and foster placement for non-Muslims, as well as the establishment of homes which provide such children with shelter.

61. Homeless children are catered for under the Juvenile Welfare Act of 1983 (annexed hereto), which defines and puts in place the necessary safeguards for their benefit, including social and legal remedies, in order to ensure that they are not subjected to discrimination after they leave a care institution.

62. The Asylum Act of 1974 (annexed hereto) stipulates compliance with all conventions and treaties granting asylum to which the Sudan has acceded. In no aspect of life is there any discrimination against refugee children, to whom Sudanese laws apply in the same way as to Sudanese children.

63. Gender-based differences, exclusions and preferences are non-existent in law and in administrative practices, labour relations, education and health. On the contrary, all children have equal rights. This report contains detailed information on the groups of children mentioned above and the laws regulating the measures adopted in that connection. In every aspect, one of the most important child welfare measures adopted was the establishment of the National Council for Child Welfare, which is responsible for following up implementation of the Convention and the child-related laws in force, in conjunction with the relevant authorities. The Constitution and Sudanese laws guarantee that the child is protected against all forms of discrimination, punishment and harm on the basis of the status of the activities, expressed opinions or beliefs of the child's parents, legal guardians or family members. Substantial progress has been made in disseminating programmes to raise awareness of the Convention and the laws and international instruments relating to non-discrimination and human rights, a purpose for which the Sudan is in need of further technical and material assistance.

B. Best interests of the child
(art. 3)

64. The Sudan devoted attention to the best interests of the child long before the Convention on the Rights of the Child came into being; both before and after its signature of the Convention, various laws were promulgated to guarantee the fundamental rights of the child to development and to respect for his or her being from the moment of birth, rights for which the States continues to show due regard in all economic and administrative matters. The National Child Welfare Act of 1991 (annexed hereto) was promulgated following the Sudan's signature of the Convention. A number of other laws also contain provisions which affirm the State's concern for the best interests of the child. Some of these provisions have a direct impact and others an indirect impact. They include:

The Penal Code of 1991 (annexed hereto)

65. The indirect effects include those covered by the provisions contained in chapter IX, entitled "Offences relating to public health and safety", in accordance with which some acts, namely those which endanger life and property, are treated as offences punishable by law with a view to preserving public health and safety. These acts include pollution of water and the environment, negligence which endangers life and property, denial of assistance and breach of the legal obligation towards disabled persons. As already discussed, the Code guarantees protection for children by determining the age of criminal responsibility. It also provides for the punishment of any person who incites a minor to commit suicide (article 34), as well as for the punishment of abortion and acts leading to abortion or causing the death of the foetus. In addition, it covers the measures prescribed for juveniles (article 47).

The Civil Transactions Act of 1984 (annexed hereto)

66. The interests of the child are covered under articles 54 to 56, which accord to minors the right to conclude contracts. The provisions cover contracts involving minors who are capable of discretion or discernment and minors who are not. Article 54 stipulates that a minor who is capable of discretion has no

right to dispose of his property and that all of his transactions are invalid. The meaning of a person who has the discretion to conclude contracts has already been discussed. Article 56 also stipulates that 18 years is the full legal age, subject to any other restriction of capacity prescribed by law, including the legal restrictions of capacity mentioned earlier. The Labour Act of 1997 (annexed hereto) also provides for measures of care which are in the best interests of the child, as already discussed.

67. As stated in connection with the definition of the child, the Juvenile Welfare Act provides for the establishment of juvenile courts and a juvenile police force. The Chief Justice recently issued an ordinance establishing juvenile courts in every state of the Sudan in accordance with the Juvenile Welfare Act of 1983 (annexed hereto).

Administrative measures in the best interests of the child

68. One of the main characteristics of federal government in the Sudan that is has a low administrative profile. In that connection, the Twelfth Constitutional Decree of 1995 (annexed hereto) and the Fourteenth Constitutional Decree of 1997 (annexed hereto) both guarantee social welfare, which, under the stipulation of their provisions, is one of the responsibilities of the state governments. It is the task of the administrative authorities to fulfil that responsibility at the state level, to which end the Local Government Act of 1995 (annexed hereto) was promulgated.

The administrative authorities

69. Health is covered under chapter V of the Local Government Act of 1995, while security and public order is covered under chapter VI, the first part of which is entitled “Access to guidance, education and employment for juvenile delinquents”. Chapter VII covers national education and the establishment of basic schools, literacy and adult education classes, the supervision of sports and cultural clubs and the establishment of nurseries. This clearly reflects the importance which the administrative authorities attach to children and the priority devoted to ensuring their best interests.

70. Planning and development policies also take into consideration the best interests of the child, incorporating as they do a strategy for children into the national housing policy insofar as the number of children constitutes a priority in matters of land allocation, the aim being to achieve stability for the family and consequently for the child. Students also enjoy the special concession of reduced fares when travelling on public transport. As for the environment, there is an environmental health law aimed at creating an environment conducive to ensuring the development of the child. Voluntary organizations are active in the field of environmental health and a court was recently established to examine environmental offences in order to preserve the health of the environment.

71. In regard to adoption and foster placement (*kafalah*), the laws regulate the latter in accordance with the Islamic Shariah, while adoption is regulated by the laws of non-Muslim confessions. The Personal Status Act also caters for the best interests of the child inasmuch as it includes a provision for bequests that may be applied to foster children. Islam prohibits adoption and, in accordance with the provisions of the Islamic Shariah, foster children cannot inherit. They may, however, be saved from destitution on the death of their foster carer by means of such bequests, a subject which is covered under articles 315 and 316 of the Personal Status for Muslims Act. This type of bequest is defined in article 315 as “a bequest enabling a person who is not entitled to inherit to acquire a specific share of the estate of the testator”, which is unquestionably in the interests of the foster child.

(a) The administration of juvenile justice

72. The administration of justice is guaranteed for all citizens in the Sudan, including children in any of the State institutions of justice, in accordance with the relevant laws. In view of the particular status of children, the Juvenile Welfare Act of 1983 (annexed hereto) was promulgated in order to ensure that they receive justice in every respect in the event that they have perpetrated an offence or crime. Justice is enforced by the competent authorities, such as the police, the Office of the Public Prosecutor, the juvenile courts, probation offices and educational and care institutions, as stipulated in the Act. There are now four courts which deal specifically with juvenile cases: three in Khartoum state and one in Al-Obeid in North Kordofan state. The Chief Justice also recently issued a directive (annexed hereto) on the establishment of courts in all states of the Sudan. Where none of the special authorities stipulated in the Juvenile Welfare Act is available, the Office of the Public Prosecutor and the competent public courts are jointly responsible for taking legal action, with due regard for all aspects of the status of juveniles. Under the Prison Regulations, juveniles remanded in custody are also accorded special status in that they are segregated from adult detainees.

(b) Placement and care of children in institutions

73. The existing institutions for the placement of children are in need of refurbishment. It is now time to carry out such refurbishment and to establish care homes for young people who are homeless. Despite the efforts of the legislative and administrative authorities, the difficulties encountered in implementing such programmes prevent attainment of the desired objectives. In particular, the low level of support provided by foreign voluntary organizations and the relevant United Nations agencies working in the Sudan has an adverse affect on the performance of those authorities.

(c) Social security

74. The basic elements of the social security channelled to children through the family include:

- Medical care;
- Sickness and unemployment benefits;
- Maternity allowances;
- Invalidity and old-age benefits;
- Benefits for poor and productive families;
- A maintenance allowance for orphans.

(See paragraph 35 of this report, which discusses the safety and health standards in connection with the care and protection of children.)

75. In brief, the fundamental problems encountered in guaranteeing the best interests of the child are the embargo, both declared and undeclared, against the Sudan, the civil war, the interferences of neighbouring countries, the external debt burdens, poverty and the inadequacy of foreign aid and assistance. The Sudan very much hopes that international organizations will assist in implementing the programmes formulated in that connection and in implementing the Convention in general.

C. The right to life, survival and development
(art. 6)

76. The State has adopted the measures needed to guarantee the child's right to life and to create an environment conducive to ensuring the survival and development of the child, including physical, mental, spiritual, moral and psychological and social development, in a manner compatible with human dignity.

This it has done by devising a strategy for children which consists of both short-term and long-term programmes. The right of the child to life, survival and development is also affirmed in a number of different laws.

77. As for measures taken to ensure the registration of the deaths of children, there is a law governing the registration of deaths, namely the Registration of Births and Deaths Act of 1992 (annexed hereto).

78. The measures adopted to prevent suicide in children include the Penal Code of 1991 (annexed hereto), which stipulates that: "Any person who incites a minor or a person who is immature, insane, intoxicated or mentally disturbed to commit suicide shall be sentenced to a term of imprisonment of not more than one year. If suicide is committed as a result of the incitement, he shall receive the penalty prescribed for pre-meditated murder." The Code thus punishes the incitement of a child to commit suicide, as well as any breach of the legal obligation towards a disabled person.

D. Respect for the views of the child
(art.12)

79. The legislation in the Sudan emphasizes the right of children freely to express their opinions in all matters affecting them; the former Constitutions enshrined the right of all Sudanese, including children, to express their opinions and many of the legislative enactments and regulations promulgated under those Constitutions are still in force.

80. The legislation provides the opportunity for children to be heard in judicial and administrative proceedings affecting them and stipulates the situations in which the child may intervene directly or through a representative or an appropriate body. It also stipulates the right of the child to institute legal proceedings through his or her legal guardian in accordance with the Civil Procedures Act of 1993 (article 116). The Evidence Act further stipulates the right of children to give testimony (article 24).

81. The information requested in paragraphs 43, 44 and 45 of the general guidelines regarding the form and content of periodic reports (CRC/C/58) can be found in paragraphs 94-101 of this report, while the information requested in paragraph 46 of the general guidelines can be found in paragraph 352.

IV. CIVIL RIGHTS AND FREEDOMS (arts. 7, 8, 13-17 and 37 (a))

82. The Convention on the Rights of the Child was ratified by Act No. 80 of 1990 and published in Special Annex No. 1542 of 15 August 1990. Having been ratified by the legislative authorities in accordance with the legal and constitutional system in the Sudan, it acquired the same force as other laws and its implementation is consequently binding on all executive and judicial bodies and authorities at the federal and provincial levels.

A. Name and nationality (art. 7)

83. The right to a proper name from birth is a legal right. Accordingly, every child born alive is given a name during the week after birth and is attributed to his or her father.

84. The State has long attached importance in its laws to the registration of births. At the time of submission of the initial report of the Sudan, the relevant law in force was the Registration of Births and Deaths Act of 1972. In the context of the federal government system which now prevails in the Sudan, however, the Act was reviewed in order to overcome the chief impediments to its application in practice. As a result, the Registration of Births and Deaths Act of 1995 was promulgated, pursuant to which the Act of 1972 was abolished. The basic measures established to ensure that every child is registered at birth are as follows:

(a) The registration of births is now compulsory in accordance with the provisions of article 5 of the above-mentioned Act, to which end registration at the state level is now carried out in conjunction with the health authorities, to which end the provinces are divided into registration districts. The Act also stipulates that, in every state, a registrar of births must be appointed by the *wali* (governor);

(b) Under the Act, every legal midwife attending a birth in the Sudan is required to give notification of the birth, as are the *'umdah* (village chief), the *shaykh* (village elder), the civil marriage officer, the father, if he was present at the birth, the mother, unless she is indisposed, and any adult living in the same house as the mother at the time of birth. In order to ensure that children are registered at birth, the Act stipulates that penalties are to be imposed on any of the afore-mentioned persons who fails to notify a birth.

85. Potential social and administrative obstacles have been overcome by ensuring that the administrative procedures for notifying a birth to the registrar are applicable to each district in every state, beginning with the local government areas and extending to include the *'umdah* (village chief), the *shaykh* (village elder), the civil marriage officer and the people's committees. The registration of children born in any state, including children born to nomadic groups, displaced persons or refugees, is therefore unavoidable. Further information on this subject is provided elsewhere in this report.

86. In regard to respect of a child's right to the preservation of his or her identity, article 10 of the Registration of Births and Deaths Act of 1995 stipulates the information to be provided at the time of notifying a birth, which must be done immediately. The elements of a child's identity required by law are shown on the relevant forms, annexed hereto, and are as follows:

(a) The name of the newborn child, if alive at birth, and the male or female gender of the child;

(b) The full name of the father (consisting of four elements) and his age, occupation, domicile, nationality and religion, as well as the name and family name of the mother, the place of birth and the date of the certificate.

87. The law stipulates that this information must be included in the register and that a certificate must be issued accordingly. If the information is not registered, the medical authorities issue certificates of age estimation on request. These certificates have the same force as evidence provided by witnesses. Consequently, all children born in the Sudan, whether registered or not, are able to prove their identity. This form of information prevents any kind of stigmatization or discrimination in regard to the child.

88. The measures adopted to ensure the child's right to know the identity of his parents and receive their care are set forth in paragraph 51 of the initial report. The subject is regulated under chapter III of the Personal Status of Muslims Act of 1991.

89. The Sudanese Nationality Act of 1957 was abolished on promulgation of the Sudanese Nationality Act of 1993 (annexed hereto), article 3 of which defines the word "parent" to include the mother of a child born out of legal wedlock or whose filiation is unacknowledged. It also defines the word "child" as a legitimate child, which includes the adopted child and children of either spouse. Measures taken to ensure the child's right to acquire a nationality include the provisions contained in article 4, paragraph 2, which stipulate that: "A child born following the entry into force of this Act is Sudanese by birth if, at the time of his birth, his father was Sudanese by birth."

90. Paragraph 3 of the same article stipulates that: "A person born to parents who are Sudanese by naturalization shall be Sudanese by birth if the parents acquired Sudanese nationality by naturalization prior to his or her birth." Paragraph 5 of the same article also stipulates that: "A minor of unknown parents who is found abandoned shall be regarded as Sudanese by birth until it is proved otherwise." Article 7, paragraph 4, further stipulates that the minister may, on request, include the names of minor children on any certificate of Sudanese naturalization granted to their responsible parent and that each of those minor children is regarded as Sudanese by naturalization from the date when his or her name is entered on the certificate of naturalization. Under article 9, the President of the Republic is vested with the authority to grant a certificate of Sudanese naturalization to any alien, even where the law provides otherwise.

91. It is clear from the above that the Sudanese laws provide considerable opportunity for children born out of wedlock and for asylum-seeking and refugee children to acquire nationality.

B. Preservation of identity (art. 8)

92. It is well-known that the Sudan is a multi-ethnic, multicultural and multi-faith State, a situation for which the Fourteenth Constitutional Decree of 1998 (annexed hereto) has due regard in that article 3, paragraph 1, thereof stipulates that: "The Sudan is a multi-ethnic, multi-cultural and multi-faith State. Islam is the religion of the majority of the population and Christianity and other African beliefs have a considerable number of followers." The approach adopted in this Decree affirms the wording in the preamble to the Convention in which the international community signals its agreement to the content, taking into account the importance of the traditions and cultural values of all peoples as a guarantee of the protection and harmonious development of the child. The individual pieces of federal legislation also take into account the specific situation in each state with a view to preserving the identity of its people and children. Constitutional and legal protection is thus provided with a view to the preservation and

establishment of all elements of a child's identity. It is also prohibited by law to take children out of the country, to conceal or occasion their disappearance and to substitute them with other children.

93. Article 9 of The Seventh Constitutional Decree of 1993 (annexed hereto) states that the rights of citizens include freedom of public expression, participation and adherence to the law. Paragraph 2 of the article stipulates that: "A citizen has the legal right of freedom of belief without coercion and freedom of worship without impediment, as well as the right of freedom from injustice or discrimination in public rights by reason of his or her personal religious faith."

C. Freedom of expression
(art. 13)

94. Article 3, paragraph 3, of the Fourteenth Constitutional Decree of 1997 stipulates that: "Legislation which prejudices the fundamental freedoms and rights of citizens may not be enacted." This provision therefore guarantees the protection of fundamental freedoms and rights, including freedom of expression for all adults and children. In addition, the aims of education, as articulated in the Public Education Act of 1992 (annexed hereto), are, *inter alia*, to "exercise the minds of young people, educate them in the sciences, infuse them with experience, develop their bodies through exercise, further their integrity through customs and morals and teach them to be scrupulous in their thoughts, actions and treatment of others." The same Act states that one of the strategic aims of education is to "encourage creativity, develop abilities and skills, provide opportunities for training in modern technology and develop and adapt that technology in order to further justice, good and probity through the optimum use of resources with a view to the achievement of comprehensive development."

95. The School Regulations (annexed hereto) also state that main school activities should include morning parades, school broadcasts, the production of newspapers for posting on walls, activities run by artistic, literary and scientific societies and drama activities, all of which provide children with full opportunities to express their views and develop their abilities and talents.

96. It is well known that rights usually obtain without restrictions on their exercise within the framework of compliance with the law. Any such restrictions, however, should not prevent exercise of the right of freedom of expression, as stated in the above-mentioned Constitutional Decree. Restrictions to which the exercise of this right may be subjected are no different from those spelled out the Convention as being necessary in the interests of, for example, the protection of the rights and freedoms of others, the protection of national security or of public order (*ordre publique*), or of public health or morals, in addition to restrictions in the interests of the rejection of any call to violence.

97. In actual practice, therefore, children in the Sudan freely express their opinions through every medium and in school activities, without impediment, restriction or distinction other than as stated above in exhaustive detail.

D. Freedom of thought, conscience and religion
(art. 14)

98. The Sudanese legislative enactments in this field are in concert with the innate character of the human being, on which basis freedom of thought, conscience and religion for children in the Sudan is rooted in instinct, as affirmed by the fact that the family is the first physical environment inhabited by the child. The family therefore has a major impact on the formation of the child's thought, conscience and religion. In prescribing the child's right to the preservation of identity, consideration must be given to the fact that, owing to his or her vulnerability and immaturity, the child's thoughts and beliefs are shaped by the customs, culture and religion of his or her earliest environment. This is confirmed in article 3,

paragraph 2, of the Fourteenth Constitutional Decree of 1997 (annexed hereto), which stipulates that: “Freedom of religion, belief and worship is guaranteed for all, as is the freedom to practice preaching, missionary activity and spiritual guidance. No citizen may be coerced into embracing any religion or creed. Freedom of religion is embodied in the public practice of the ceremonies of all religions and the creation of a climate conducive to ensuring the practice of ceremonies of worship. Legislation which prejudices the religious rights of any citizen may not be enacted.”

99. This unequivocal provision represents a constitutional safeguard of the right of the child to manifest his or her religion or beliefs. Moreover, in accordance with the Penal Code of 1991 (annexed hereto), any person who contravenes the provisions of articles 125 and 127 thereof is held accountable and punished, including any person who destroys or defiles any place intended for worship or anything held sacred by any group of people or who opposes or disrupts a religious gathering. Sudanese legislation thus punishes actions which are liable to cause overt injury to religious sentiment.

100. In regard to the measures taken to guarantee respect for the child’s right in relation to any religious teaching in public schools or institutions, the objectives of public education stated in the Public Education Act of 1992 (annexed hereto) and in the education strategy are, *inter alia*, that the State should endeavour to “instil religious belief and morals in young people, impart to them the teachings and heritage of religion and lead them to embrace the path of religion in order to build a faithful, God-worshipping and civilized individual who is capable of bearing responsibility and implanting social values motivated by devoutness and piety.” The School Regulations of 1993 (annexed hereto) proceed along the same lines, stating that children in Sudanese schools should receive instruction in their respective religions. This freedom is subject only to those limitations set forth in the Convention and internationally recognized as controls on the exercise of fundamental freedoms and rights. On that basis, the Sudan has overcome the major obstacle preventing implementation of the Convention on the Rights of the Child. Differences of religion therefore pose no obstacle to the protection, development and survival of children.

E. Freedom of association and peaceful assembly
(art. 15)

101. Freedom of association and peaceful assembly is guaranteed by Sudanese legislative enactments and protected by the Convention inasmuch as it is a national law. Freedom of association is guaranteed for children in schools, student unions and universities in accordance with the Public Education Act of 1992 (annexed hereto) and the School Regulations of 1993 (annexed hereto), article 17 of which stipulates that school activity is an essential part of the curriculum, as the two are mutually complementary in both theory and practice. Such activity breaks down the barriers and divisions between the school and the surrounding environment, develops and refines talents and aptitudes, deepens the spirit of community and sense of responsibility and ensures that leisure time is fruitfully spent in useful pursuits. Article 18 of the School Regulations also stipulates that school associations should be established for different types of religious, cultural, social, scientific, sporting and artistic activity, each on the basis of the child’s inclinations, desires and potential. It is thus affirmed that Sudanese legislative enactments meet the requirement of article 15 of the Convention on the Rights of the Child and categorize the principles articulated therein as fundamental rights.

102. All associations registered in accordance with the law enjoy a legal personality, financial protection and the right of legal action. This liberal framework has encouraged the establishment, in all states of the Sudan, of various non-profit-making associations which are essentially geared to offer children’s activities in the fields of health, education, sports, culture, art and science. Although continuous

efforts are being made on this score, further support is needed, particularly in the areas of civil war in the south.

103. Freedom of peaceful assembly is guaranteed by law, unless such assembly leads to unrest or a breach of peace and public security, in accordance with articles 67 and 69 of the Penal Code of 1991 (annexed hereto).

F. Protection of privacy
(art. 16)

104. The previous report referred to the protection of this right under the Penal Code of 1991, specifically chapter XVI, article 166, thereof. In addition, articles 158 and 159 punish slander and defamation of reputation and article 160 punishes the use of abusive and insulting language.

105. The law provides protection against any interference in privacy and against slurs on honour and reputation by prescribing the penalty of imprisonment and a fine for any person who commits such offences in contravention of the provisions of the aforementioned articles. The Penal Code of 1991 also stipulates the inviolability of homes and provides that they cannot be searched without the permission of the occupants, a judge or the competent representative of the Office of the Public Prosecutor, in accordance with the rules and procedures specified by law. The remedies made available to the child entail following the procedures for reporting a complaint under the Code, which protects these rights and punishes their violation.

G. Access to appropriate information
(art. 17)

106. The Public Education Act of 1992 (annexed hereto) stipulates that the aims of public education and the education strategy are to encourage creativity, develop abilities and skills and provide opportunities for training in modern technology. The fundamental freedoms and rights articulated in the Peace Agreement of 1997 (annexed hereto) also include the freedom to express and develop culture and language. There is now a significant move in the country towards the production and dissemination of children's books, together with the transmission of radio and television programmes for children and the family.

107. Obstacles and difficulties posed by the high cost of producing children's newspapers and books nevertheless continue to hinder the flow and dissemination of information. Efforts to seek international cooperation for the production, exchange and dissemination of information and material of social and cultural benefit to the child remains an utmost imperative; the limited amount of international assistance provided to the Sudan in this connection and the consequences of the undeclared economic and political embargo against it affect the development of the child's creative abilities and potential. In regard to the protection of the child from information and material injurious to his or her well-being, Sudanese laws in general protect Sudanese culture and morals and public decency. The Press and Publications Act of 1996 (annexed hereto), for example, prohibits the publication of anything which offends public decency, damages social customs or fuels dissension.

H. The right not to be subjected to torture or other degrading treatment or other cruel, inhuman or degrading treatment
(art. 37 (a))

108. Chapter IV of the Penal Code of 1991 (annexed hereto), entitled “Welfare and reform”, stipulates that a court may discipline a juvenile suspect who has attained the age of 10 years by ordering that he should be flogged, although the number of lashes may not exceed 20. Article 190, paragraph 1, of the Criminal Procedures Act of 1991 provides that sentences must be immediately enforced, even if an appeal is lodged, except in the case of sentences including, *inter alia*, flogging. The provisions of article 194, paragraph 1, also stipulate that, in executing sentences such as flogging, the state of health of the person so sentenced must be taken into account, as must the appropriate time for enforcement, with a view to ensuring that the individual concerned endures no greater harm than intended by the punishment.

109. Article 197, paragraph (b), determines how flogging is to be carried out by stipulating that a medium-sized whip must be used to administer each lash in a single moderate stroke which breaks neither skin nor bone and which is directed away from the face, head and vital areas of the body. Paragraph (c) of the same article also provides that the judge must order a halt to the flogging if it becomes apparent to him while it is being carried out that the offender’s state of health will no longer enable him to withstand the remainder of the punishment.

110. Article 15, paragraph (l), of the School Regulations of 1993 (annexed hereto) provides that a teacher has a duty to refrain from disciplining pupils by means of verbal insult, which is distasteful and undignified, and from reprimanding pupils in anger.

111. Article 16 of the School Regulations also provides that a teacher has a duty to abide by the following principles of reward and punishment:

- (a) He must desist from rudeness, control his anger and excuse the errors of pupils;
- (b) He must bear in mind the factors which determine the efficacy and suitability of the type of reward and punishment, namely the child’s age, economic and social status, individual conformity and personality;
- (c) He must lean towards moderation in punishment, exercise caution and care and avoid making mistakes and wounding pride;
- (d) He must carry out the punishment in segregation and hand out rewards in front of other pupils as an incentive;
- (e) He may not cane or kick pupils or strike them on the face or head;
- (f) He may not subject pupils to collective punishment, such as flogging or verbal insults and abuse. In boys’ schools, any punishment of flogging which it is found necessary to impose must not exceed four lashes, although the matter must first be taken up with the school principal and consideration given to the pupil’s state of health;
- (g) He must refrain from punishment when in a state of anger and irritation.

112. It is clear from the above that the intention behind any measure taken against a child is not to inflict torture, cruelty or insult or even simply to impose punishment. On the contrary, the intention is to

correct and discipline. The Ministry of Education has adopted a programme to raise teachers' awareness of the Convention on the Rights of the Child and the National Council for Child Welfare has also carried out training and awareness-raising activities for personnel in institutions, services and facilities working with and for children aimed at preventing any form of ill-treatment. In conclusion, the attention paid to the civil rights and freedoms of children in the Sudan, the type and extent of which vary as to the strength of their impact and the connection between means and ends, ensures that such rights, whether moral or material in substance, permeate all aspects of human life.

V. FAMILY ENVIRONMENT AND ALTERNATIVE CARE
(arts. 5; 18, paras. 1-2; 9-11; 19-21; 25; 27, para. 4; and 39)

A. Parental guidance
(art. 5)

113. The structure of the family in Sudanese society is made up of the father and mother, who represent the smaller family of the child in accordance with the inherited Sudanese social tradition. The wider family is the child's extended family and includes brothers, sisters and so on. This structure is affirmed in various laws, such as the Personal Status of Muslims Act of 1991 and the Penal Code of 1991, which stipulate the rights and duties of parents and other persons legally responsible for the child in providing appropriate direction and guidance to the child in a manner consistent with the child's evolving capacities.

114. The various laws and measures adopted in the Sudan offer numerous opportunities for the provision of family counselling services and the conduct of awareness campaigns on the rights of the child within family life. The most significant of these is the Adult Education Act, pursuant to which those who missed out on education are able to enrol in specific programmes aimed at teaching them what they need to know in order to fulfil their duties towards their children. The establishment of numerous voluntary organizations under the Voluntary Work Act of 1995 similarly provided extensive training opportunities to large numbers of social workers with a view to helping them to disseminate information to such families. Here, it is worth mentioning that the provision of sufficient funding for the organizations and bodies engaged in this work enables them to increase their activities in the communities in question. Technical and material support also furthers the efforts to pinpoint the ideal method of conveying knowledge and information about child development and the evolving capacities of the child to parents or other persons responsible for the child.

B. Parental responsibilities
(art. 18, paras. 1- 2)

115. The Penal Code of 1991 (annexed hereto) devotes particular attention to the legal responsibility of parents towards their children in an effort to ensure compliance with and fulfilment of that responsibility. The provisions of the Personal Status of Muslims Act of 1991 (annexed hereto), which are consistent with Muslim beliefs, emphasize that priority and preference should be given to the interests of the child by providing food, clothing, shelter and a sound upbringing. The laws regulating public health and education also emphasize the joint responsibility of parents for the upbringing and development of the child. These laws further stress compliance with the principles of non-discrimination and respect for the child's views in accordance with his or her level of development. The government authorities, voluntary organizations and social funds in the Sudan provide parents, or legal guardians in the absence of one or both parents, with the assistance needed to help them fulfil their responsibilities in regard to child upbringing and very frequently shoulder the full costs. On assuming its responsibilities towards children in the Sudan, the National Council for Child Welfare immediately proceeded to draw up a list of the institutions involved in working with children and ensure coordination among them. These institutions are as follows:

| | <i>Institution</i> | <i>Type of institution</i> | <i>Type of service</i> |
|-----|---|-----------------------------------|---|
| 1. | Council for the Welfare of Orphans and Widows | Government | Coordination among organizations involved in orphan care (educational, health and social services, material and moral support and productive family projects) |
| 2. | Zakat Office | Government | |
| 3. | Solidarity Fund (project for carers and their charges, child welfare homes) | Government | |
| 4. | Orphan Care Homes | Government | |
| 5. | Savings and Social Development Bank | Bank for the poor | |
| 6. | Sudanese Islamic Bank | Private sector | |
| 7. | Bank of the Two Niles for Industrial Development | Government | |
| 8. | Al-Shahid Organization | Voluntary organization | |
| 9. | Sudanese Association for Children's Villages | Voluntary organization | |
| 10. | Muwaffaq Charitable Organization | Voluntary organization | |
| 11. | Ithar Charitable Organization | Voluntary organization | |
| 12. | Salsabil Charitable Organization | Voluntary organization | |
| 13. | Islamic Relief Agency | Voluntary organization | |
| 14. | African Maternal and Child Welfare Society | Voluntary organization | |
| 15. | World Health Institution | Voluntary organization | |
| 16. | International Women's Centre | Voluntary organization | |
| 17. | International Endowments Body | Voluntary organization | |
| 18. | Al-Ayna' Charitable Society | Voluntary organization | |

116. A further 54 voluntary associations also provide children's services in their respective areas of activity. It should be mentioned that these agencies, voluntary organizations and banking institutions operate at the federal and state levels, without distinction. Despite the valuable services which they offer, however, such institutions are unable to expand and increase their activities due to lack of resources. They therefore require financial support from international sources, coordinated under the auspices of the National Council for Child Welfare, with a view to the delivery of humanitarian services and social support to children displaced by the armed foreign aggression waged against Sudanese territory on three fronts.

117. At the federal and state levels, the Government is now formulating and implementing programmes to provide cash and material support to poor families in addition to the support provided by social solidarity funds and other institutions. An example of the support provided to orphans by voluntary organizations follows below. The foster placement and care of orphans and their families is handled by social centres established for that purpose. These centres look after the educational and health interests of orphans. The groups who benefit from these services include fostered orphans and their families (widows and siblings) and poor families living in the vicinity of such centres.

1. Services provided

118. These include maintenance payments for orphan families and assistance in the form of food and clothing, as well as other essential needs secured for orphans by way of their monthly allowances.

2. Programmes

119. A summary of the different programmes available to all recipients, with the exception of the monitoring programme for orphan families, is as follows:

(a) Kindergarten programmes

These cater for fostered orphans and their siblings under six years of age, as well as for children from poor families and some children from middle-income families, who pay for any extras provided by the kindergarten (food, toys, etc.). These kindergartens offer a curriculum which includes classes in memorizing short chapters of the Quran, elementary Arabic, recreational excursions, free play and video screenings.

(b) Educational programmes

These programmes include classes in memorizing the Quran, Islamic jurisprudence, public morals and the biography of the Prophet Muhammad. They are offered to orphans, widows and poor families at centres or learning camps for orphans.

(c) Learning programmes

These consist of extra classes in academic subjects for orphans and literacy classes for widows and mothers of poor families.

(d) Income development programmes

These consist of training in a variety of skills with a view to enabling widows and orphans to acquire other means of earning an income. Widows, for example, may take courses in tailoring,

dressmaking and handicrafts, orphans may attend vocational training centres and families may be supplied with production facilities to the extent permitted by the maintenance allowance.

(e) Monitoring programmes

These programmes cater for orphans and their families and entail:

- (i) General monitoring: Families receive home visits aimed at identifying and resolving their problems and monitoring the impact of the programmes offered at the social welfare centres on all the individuals in the family of the foster orphan;
- (ii) Academic monitoring: This is carried out in conjunction with the schools attended by orphans with a view to monitoring the academic standard and general behaviour of the orphans and encouraging the teachers to carry out such monitoring;
- (iii) Health monitoring: This is aimed at monitoring the health of orphan families, performing the necessary health checks and dispensing treatment.

C. Separation from parents
(art. 9)

120. The measures of a legislative nature contained in chapter IV of the Personal Status of Muslims Act of 1991, which relates to custody, set forth the legal safeguards preventing separation of the child from his or her parents, except where such separation is necessary for the best interests of the child. Even when separation is necessary or unavoidable, the competent court, in this case the personal status court, makes the decision as to the child's place of residence in accordance with his or her interest. Adopted from Sudanese custom, this is now an established legal principle. Under the laws regulating court proceedings, all parties to a lawsuit, including children, are given every opportunity to make their views known.

121. The measures adopted to ensure the right of the child who is separated from one or both parents to maintain personal relations and direct contact with both parents on a regular basis are founded on Sudanese traditions and values. They are also found in Sudanese legal precedents based on the Shariah and customary law, which are the sources of legislation in cases where no explicit provisions exist. The judgements rendered in these precedents take into account the views of the child, except if they are contrary to his or her best interests, as affirmed by the Personal Status of Muslims Act of 1991. As for Christians, their affairs are settled by application of the laws particular to them.

122. The Personal Status of Muslims Act of 1991 (annexed hereto) stipulates the arrangements for the child in cases where the parents separate. The parent with custody may not prevent the other from visiting the child or enquiring about his or her condition (article 109). The parent without custody has the right to receive visits from the child, if requested, unless the courts decide otherwise in accordance with the best interests of the child (article 123). Sudanese law punishes any non-compliance with custody orders. If parents commit acts of violence against a child or if their normal behaviour places the child at physical, moral or psychological risk, they lose legal guardianship and the child is removed from their care, in accordance with the provisions of the Personal Status of Muslims Act of 1991. In this case, the court may entrust the care and maintenance of the child to a person whom it deems fit for that purpose in accordance with the provisions of the law.

123. It is difficult to supply any further detailed information on this subject. It should be stated, however, that National Council for Child Welfare has established a child information centre and that a

database on all matters relating to the Convention on the Rights of the Child is being completed. The Sudan is highly dependent on external financial, material and technical assistance for the centre, the aim being to ensure the future availability of more accurate, detailed and comprehensive information classified on the basis of the features and criteria requested by the Committee on the Rights of the Child and the criteria for the overall development of the child.

D. Family reunification
(art. 10)

124. The application of article 10 of the Convention on the Rights of the Child does not conflict with Sudanese laws, as freedom of movement and residence is guaranteed for all Sudanese and aliens alike in accordance with the provisions of the Passport, Travel and Immigration Act of 1993. This report discusses the efforts of the Sudan to reunify abducted and displaced children with their families. It also contains information on unaccompanied children and refugee children. The law provides that parents resident outside the Sudan may freely visit any children of theirs who are resident in the Sudan in a manner consistent with the rules of Sudanese legislation.

E. Illicit transfer and non-return
(art. 11)

125. On the basis of paragraph 65 of the initial report of the Sudan, submitted in September 1992, concerning the transfer of children abroad, we should like to highlight the key facts and information in regard to the children abducted by the rebel movement and transferred abroad. We should also like to emphasize the trouble, deceit, duplicity, double-dealing, prevarication and political dishonesty which the Sudan encountered and the violation of international treaties and charters which it saw take place during the process of repatriating those children to the Sudan and reunifying them with their families.

126. These children have now endured repeated tragedy for 10 years and more, ever since the start of the last rebellion in the Sudan in 1983. They were either abducted from their homes and held by the rebel movement in the remote forests of the south or sought refuge in Ethiopia after trekking long distances on foot in intolerable conditions. Some are seized in towns such as Nasir, Fashala, Bakok, Kapoeta and Torit during the course of their return to the Sudan, while others are obliged to travel to Narus on the Sudanese-Kenyan borders or seek refuge in the Kenyan town of Lokichoggio or return to Narus where they are forced to carry arms and fight in the ranks of the rebel movement.

127. The rebel movement has forced groups of children to travel to Cuba for weapons training with a view to forming the nucleus of the so-called Red Army. Some of these children have returned to Uganda, where they are traced by the rebel movement to the Sudanese refugee camps in the north of the country and forced to join its ranks. Other children, however, escaped to the Sudan to tell the tale of the suffering to which they were continuously subjected for eight years.

1. Effects of child detention

128. The abduction and detention of children by the rebel movement and their compulsory recruitment into the ranks of its Red Army has caused them serious harm, which can be summarized as follows:

(a) Children in their tens of thousands perished from hunger, thirst and disease or in attacks by wild animals during their exhausting journey, to which there was never any end;

(b) Thousands of the children forced to carry military supplies over long distances died as a result of the sheer effort involved, which was more than their energy could sustain;

(c) Tens of thousands of children thrown into battle by the rebel movement were placed in danger and many were captured in the fighting between the Government and the rebel movement in the states of South Kordofan and Kordofan and in the southern part of Blue Nile state;

(d) The detention of children by the rebel movement deprived those who survived of the most basic rights of family care and education, as well as of all the fundamental rights guaranteed by the divine religions and international instruments, including those relating to the rights of the child;

(e) The children detained by the rebel movement were forced into orphanhood, the psychological and social effects of which they continue to suffer to this day.

2. Current situation of child detainees

129. The issue of children held by the rebel movement still continues to plague society almost 10 years after the problem first began in 1984. The children abducted from their relatives can be categorized as follows:

(a) Sudanese refugee camps in Kenya

130. The reports of the United Nations High Commissioner for Refugees (UNHCR) and the other organizations working in this field indicate that there are about 20,000 unaccompanied children in Kakuma camp in northern Kenya.

(b) Sudanese refugee camps in Uganda

131. The reports indicate that there are large groups of unaccompanied children in the following camps:

- Ogudebe camp;
- Koboko camp;
- Mbokolo camp.

(c) Sudanese refugee camps in Zaire

132. The information available indicates that there are large groups of unaccompanied children in Dungu camp.

(d) Refugee children in Cuba

133. The information available indicates that there are some 4,000 unaccompanied children in Cuba. Eight years ago, these children were sent by the rebel movement to receive military training in Cuba, the intention being that they would form the nucleus of the rebel movement's Red Army. A small number of these children returned to Uganda, which repatriated them to the Sudan. The children returning from Cuba were fully debriefed and confirmed the above-mentioned facts. They also stated that large numbers of children were still in Cuba awaiting help from the international community to enable them to return the Sudan.

(e) Children detained in the southern Sudan

134. The rebel movement continues to hold large numbers of unaccompanied children in some areas of southern Sudan. These children are constantly brain-washed and also undergo regular military training. Balatoka, Narus and Mayot are examples of places where children are being held.

(f) Children fighting in the ranks of the Red Army

135. The situation of this group is the worst and most dangerous of any to which children detained by the rebel movement are subjected. The precise locations and numbers of these children are not known. It is certain, however, that the rebel army includes substantial numbers of children and that their detention and recruitment to the ranks of the rebel army are continuing uninterrupted. Recently available information indicates that the rebel movement has been actively abducting and recruiting children in some areas of southern Sudan. This information confirms that the rebel movement has no qualms about punishing families who refrain from handing over their children by imposing heavy fines, seizing their cattle or threatening to set fire to the villages where they live.

3. Position of international organizations concerning the question of detained children

(a) UNHCR

136. The Government of the Sudan has communicated with UNHCR headquarters in Geneva and with its offices in Khartoum, Nairobi and Kampala on numerous occasions. Its efforts, however, have failed to motivate UNHCR to assume a positive role in resolving the problem of detained children. In particular, it has done little to protect the children detained in the refugee camps in neighbouring countries, especially Kenya and Uganda, a subject which will be discussed in detail in a later paragraph.

(b) UNICEF – Operation Lifeline Sudan

137. The United Nations established Operation Lifeline Sudan under the supervision of UNICEF to deal with the problems of citizens adversely affected by the war in the Sudan. Despite the obvious difficulty of the children detained in southern Sudan and the fact that they are detained in locations within the mandate of UNICEF-Operation Lifeline Sudan, none of the required effort has been made to deal with the problem. In many instances, UNICEF did no more than simply monitor events, whereas it should have made serious efforts to bring the problem to an end, especially since it is chiefly in charge of Operation Lifeline Sudan in the places under rebel control.

(c) International Committee of the Red Cross (ICRC)

138. ICRC is engaged in searching for missing persons in the areas of armed conflict, which entails the following:

- Identification of missing persons;
- Exchange of correspondence;
- Family reunification.

ICRC conspicuously neglected to carry out the role within its mandate in regard to the issue of child detainees. It has shown only limited cooperation with the Government of the Sudan, whereas it should have stepped up its efforts to resolve the problem of child detainees.

(d) Non-governmental organizations (NGOs)

139. Some NGOs, such as Action against Hunger (France) and Save the Children (Sweden), have endeavoured to provide assistance to the children being held in detention camps in Ethiopian territory (Gambella) and in towns such as Fashala, Nasir and Mayot. Although the provision of assistance to these children in any location is undoubtedly merits appreciation, some children's organizations have very noticeably refrained from providing the Sudanese authorities with the information in their possession, which, if made available, may assist in the formulation of plans and remedies aimed at ending the children's misfortune.

(e) Abduction of children from Sudanese refugee camps

140. Those concerned with the question of child detainees are following with increasing concern the abduction of children from the Sudanese refugee camps in neighbouring countries. In fact, the transfer of Sudanese children to neighbouring countries has failed to provide them with safe refuge, as the rebel movement has persistently tracked them down in the Sudanese refugee camps, from where it has abducted them for recruitment into the ranks of its Red Army and forced them to take part in military action. It is reported that the operations to abduct children from refugee camps have never ceased. On the contrary, they are occasionally stepped up on the basis of the military situation in southern Sudan. The rebel movement apparently treats the Sudanese refugee camps as a reserve camp of fighters from which it takes both men and children alike to put into the killing fields. Given the recurrence of this phenomenon in recent years, it is essential to pinpoint examples, some of which are cited below.

141. Some 5,000 children were abducted from the Sudanese refugee camps in Kenya at the beginning of 1992. Immediately thereafter, the national committee assigned to deal with the issue of abducted children in the Sudan wrote to UNHCR, which, in a reply dated 19 June 1992, asserted that all the children were enjoying care and protection in the refugee camps in Lokichoggio in northern Kenya and that arrangements to move them to safe camps deep inside Kenyan territory were proceeding smoothly. Uncomforted by this news, the committee treated the UNHCR statements with the utmost caution. It then received firm information indicating that approximately 5,000 Sudanese children had been smuggled out of the refugee camps in Kenya to be returned once more to Sudanese territory to take part in the aggressive military operations of the rebel movement, in which regard their position was identical to that of the children who took part in the invasion of South Darfur.

142. Information received from Uganda indicates that children are regularly abducted from the Sudanese refugee camps in northern Uganda and forced to go to the training camps run by the rebel movement near the Sudanese borders.

143. Reports from Zaire say that children in the Sudanese refugee camps in northern Zaire are also regularly abducted for recruitment into the rebel movement.

144. Local and international news agencies have recently reported the abduction of large numbers of children from the Kakuma camp for Sudanese refugees in northern Kenya, where there are about 20,000 unaccompanied children.

145. Accountability for the continuing abduction of children from the Sudanese refugee camps in neighbouring countries undoubtedly lies with UNHCR, as it has proved incapable of fulfilling its responsibilities, spelt out in its charter, to protect refugees.

146. This was stated in the response of the rebel Richard Molla aired by the British Broadcasting Corporation (BBC) on 15 August 1992, in which he held UNHCR responsible for transferring children

from Ethiopia to Fashala when it was in rebel hands and then from Fashala, when it was freed, to Kenya. UNHCR then abandoned them again once they became refugees for which it had responsibility.

147. Following the above review of the problem of children who are either detainees, refugees or recruited as soldiers in the areas where military operations are taking place, the relevant points can be summarized as follows:

- (a) These children are Sudanese for whom the Government of the Sudan is responsible;
- (b) These children are in a special situation which requires special treatment;
- (c) Bearing in mind their immaturity, these children should be repatriated and reunified with their families.

F. Recovery of maintenance for the child
(art. 27, para. 4)

148. Article 81 of the Personal Status of Muslims Act of 1991 provides for child maintenance and the rules which apply. Minors who have no assets must be maintained by their father. A female child must be maintained until she marries, whereas a male child must be maintained only until he reaches the age at which his peers are capable of earning a living, unless he is a student, in which case he must continue to receive maintenance for as long as he continues to pursue his studies with success. Measures adopted to ensure respect for non-discrimination, the best interests of the child and the right to life, survival and development are dealt with elsewhere in this report.

G. Children deprived of their family environment
(art. 20)

149. The Personal Status of Muslims Act of 1991 regulates alternative care for the child who is temporarily or permanently deprived of his or her family environment or who, in his or her best interests, is not permitted to remain in that environment. Chapter IV provides for custody, which entails the maintenance, education, upbringing and care of the child in a manner consistent with the rights of the guardian and the interests of the minor. It specifies the persons who may take custody, the conditions which those persons must satisfy and all matters relating to the child concerned. The question of children whose parents are unknown and the means of dealing with such children are governed by the Child Welfare Act of 1971, which stipulates that social workers must be appointed to undertake all the procedures in their regard and find an appropriate and competent person to care for them. The carer must share the same religion as the child.

150. The law requires that the carer must care for the child humanely and love the child as his own. He must also provide the child with suitable accommodation, food, clothing, medical care and education. The Act further stipulates that the child is regarded as part of the carer's family from every point of view and that the Muslim child does not have the right to inherit from or make bequests to his carer, a provision which is not construed as preventing the carer from leaving a part of his estate to the child in his will.

151. Children who remain in care institutions are provided with all the basic elements needed for a decent lifestyle. At the state level, the Ministry of Cultural and Social Affairs runs institutions which take in children of unknown parents, to whom the same law applies. Supervised and monitored by the competent government agencies, a number of voluntary organizations and NGOs, such as the Sudanese

Society for Children's Villages, also offer shelter to children who are orphaned or deprived of or separated from their families.

152. Major obstacles include the inadequacy of the budgets allocated to care institutions, the lack of trained personnel and the increasing numbers of disabled persons. The targets set for the future are to set up investment projects in order to finance care institutions and to attract funding from solidarity and social welfare funds and from national, regional and international charitable bodies and organizations in order to ensure that these institutions fulfil their role of caring for such children and offer them a decent lifestyle.

H. Adoption
(art. 21)

153. Sudanese legislative enactments, laws and customs specify the procedures for and effects of *kafalah* of Islamic law in order to ensure that the child cared for under the *kafalah* system is protected from ill-treatment and exploitation. Islamic law prohibits adoption under any circumstance. It does, however, encourage the *kafalah* system of caring for children, as explained in the above paragraph. Children cared for under that system do not have the right to inherit, although bequests may be made to them. As for Christians, the adopted child enjoys all the rights and duties stipulated in that connection in their own religious law. Further details on this subject are found in paragraph 62 of the Sudan's initial report.

I. Periodic review of placement
(art. 25)

154. Sudanese legislative enactments regulate the periodic review of placement in accordance with the Child Welfare Act of 1981 and the Juvenile Welfare Act of 1983, as well as the health laws and the laws and regulations on prisons and on public and private hospitals with a view to ensuring the child's care, protection and treatment. In some cases, the periodic review is subject to legal monitoring. Information on this subject is contained in paragraph 68 of the initial report of the Sudan.

J. Abuse and neglect (art. 19), including physical and psychological recovery and social reintegration (art. 39)

155. Sudanese legislative enactments, including chapter XIV of the Criminal Code of 1991, ensure that children are protected against ill-treatment, violence, harm and deprivation. They also include measures offering care, reform and supervision for child offenders. Mild flogging is stipulated essentially for the purpose of reforming, educating and disciplining children at this stage of their lives as an alternative to sending them to social care institutions or prison. The Juvenile Welfare Act also contains provisions and measures for the recovery and reintegration of child delinquents and vagrants. For that purpose, a delinquent means a child of not less than 10 and not more than 18 years of age who commits an act contrary to the provisions of any criminal law and a vagrant means a child vulnerable to delinquency who is usually either homeless or unable to specify his place of residence, state who is the person responsible for him or provide adequate information about himself and who sleeps on the streets or is unemployed or engages in begging and is without a family provider or has escaped from the control of his parents or carer.

156. Arrangements for delinquents are made in accordance with the provisions of the law through the competent court, which may order measures of reform and send the delinquent to a correctional home for a period of not more than five years in order to provide supervision, care, training, appropriate recovery and all physical, medical and mental needs. Arrangements for the reform of vagrant children are made by

the court, which may hand the child over to one or both parents or to the child's legal guardian or to the person responsible for the child's care. Alternatively, it may entrust the child to a charitable society catering to young persons or to a care institution or it may put the child on probation on the basis of a social report compiled by the competent authorities. In addition, the Public Education Act of 1992 and the Public Health Act of 1975 include measures for review aimed at positively improving the care, protection and treatment of the child and eliminating all violence and cruelty. It should be stated that the Ministry of Justice conducted an earlier review of all child-related laws in the Sudan in order to harmonize them with the provisions of the Convention. In this respect, the Government carried out a ground-breaking experiment to rehabilitate vagrant children, reunify them with their families and provide economic support for the families by supplying them with the means of production to guarantee them a decent livelihood.

157. The State has adopted various administrative measures in connection with the family environment, some of which are mentioned elsewhere in this report. In addition, important political decisions and ministerial ordinances have been adopted on this same subject, including:

- (a) Ministerial Ordinance No. 11 of 1993 forming a council to coordinate projects for productive families and the environmental industries, issued by the Minister of Social Planning;
- (b) Ministerial Ordinance No. 18 forming a council to oversee the care of orphans under the *kafalah* system and care for widows, also issued by the Minister of Planning;
- (c) Republican Decree No. 26 of 1994 forming the National Council for Clothing Provision, issued by the President of the Republic;
- (d) Ministerial Ordinance No. 18 of 1994 forming the Communal Marriage Council, which is responsible for formulating policies, plans and programmes to facilitate marriage and combat the social difficulties in its way, as well as plans for fund-raising and investment for that purpose. It is also responsible for elaborating the rules and principles for providing assistance to those entering into marriage and for seeking the best means of implementing these policies in the states and provinces.

158. In addition to the information contained in paragraph 26 of the Sudan's initial report of 1993, details of the progress achieved in the field of care for vagrant children are as follows:

The difficult circumstances in which vagrant children live demands special attention and care, a topic which has been discussed at length. The Sudanese experience in caring for such children has established that the family and the community offer the best form of care and that institutional care should be used only as a last resort, since, regardless of the attention devoted to care institutions and irrespective of their resources and professional capabilities, they can never compensate for the love of a family and the affection of a mother and father. Sudanese society therefore strives to mend the suffering of vagrant children by offering social facilities for their care and protection that also play a role in safeguarding the heritage of the nation and ensuring that it is perpetuated for generations. In order to achieve these goals, it is vital to strengthen the capabilities, resources and status of the family so that it is able to pursue its roles at home and in the community.

159. The main traits of the families of vagrant children are as follows:

- The overwhelming majority of them are young, 85 per cent of their members being under 40 years of age, and most migrated to towns during the 1980s;

- Males are in the large majority in vagrant families, accounting for 64 per cent of their members as opposed to females, this being a particularly distinctive feature of migrant or displaced families;
- The high rate of dependency in these families forces some children to enter the labour market or become professional vagrants;
- Another distinctive feature of these families is their size, each family having an average of six children;
- These families typically consist of many members who are lacking in the skills and expertise demanded by the nature of the employment in urban areas.

Measures to tackle vagrancy

160. With a view to resolving the problem of vagrancy, a decision was taken to reduce the period of time spent in rehabilitation and in vocational training institutions and to use those institutions to meet the needs of children who cannot be returned to their families. It is essential to trigger the role of social institutions in the different towns and states in monitoring children to ensure that they settle in well with their families after reunification. It is also essential to implement productive projects of a communal nature in preference to those of an individual nature and develop the exiled communities by strengthening education and health services, building the capacities of vulnerable families, promoting and mobilizing the energies of local communities and raising their awareness in order to ensure that they fulfil their duties in caring for their children.

Rehabilitation of vagrant children

161. The rehabilitation of vagrant children is the responsibility of the State, whereas the responsibility for implementing the programmes concerned is shouldered by voluntary associations and national organizations, which are assisted by the United Nations and donor organizations under the supervision of the Ministry of Social Planning in accordance with the strategies and policies of the State. This activity is aimed at shaping the behaviour of children, reforming their inborn character and enabling them to live in harmony with their families.

The Federation of Societies

162. A federation of the societies involved in the care and rehabilitation of vagrants was established with a view to ensuring that their activities are coordinated and carried out in a scientific manner. The societies belonging to the federation are essentially those working mainly in this field, since they already enjoyed close ties.

163. The Federation of Societies for the Care and Rehabilitation of Vagrants (UNICEF), which includes the African Maternal and Child Welfare Society, the Friends of Children Society (Amal), the Sabah Society, the Saint Mansur Society and the Popular Sudanese Committee for Relief and Reconstruction, provides services for children at the reception centre in conjunction with the Ministry of Social Planning, the Ministry of Social and Cultural Affairs (Khartoum state) and the relevant government bodies. The first group taken in by the centre, which has estimated capacity of 1,000, consisted of 200 children from the Hijayr camp. The children remain at the centre for a maximum period of six months for the purpose of social and psychological recovery that is intended to free them from the street life and pave the way for a natural return to their families.

164. The first group of vagrant children was taken in on 23 February 1997. The children were transferred from Hijayr Abu Dum camp, situated north of Omdurman, to the centre belonging to the African Maternal and Child Welfare Society. The group consisted of 200 children, as illustrated in the following table:

| | | |
|--|-----|---------------|
| Children reunited with their families through family reunification | 25 | 12.5 per cent |
| Children collected from the centre by their families | 15 | 7.5 per cent |
| Children reunited with their families in Khartoum state with the help of ACS | 14 | 7 per cent |
| Children reunited with their families outside Khartoum state | 7 | 3.5 per cent |
| Children who dropped out of the centre | 31 | 15.5 per cent |
| Children still at the centre | 108 | 54 per cent |
| Total | 200 | 100 per cent |

Source: Ministry of Social Planning.

The centre also took in a second group consisting mainly of street children, whose movement was as follows:

| | | |
|--|----|--------------|
| Children failing to fulfil the admission criteria | 19 | 20 per cent |
| Children collected from the centre by their families | 4 | 4.2 per cent |
| Children who dropped out of the centre | 41 | 43 per cent |
| Children still at the centre | 30 | 32 per cent |
| Total | 94 | 100 per cent |

The third and final group of 144 children was brought from Hijayr on 10 June 1997 and its movement was as follows:

| | | |
|--|-----|---------------|
| Children reunited with their families through family reunification | - | - |
| Children collected from the centre by their families | 13 | 9 per cent |
| Children reunited with their families in Khartoum state with the help of ACS | - | - |
| Children reunified with their families outside the centre | 15 | 10.4 per cent |
| Children still at the centre | 116 | 80 per cent |
| Total | 144 | 100 per cent |

Source: Ministry of Social Planning.

The overall intake of vagrant children amounted to 438, as illustrated in the following table showing the movement of children between 23 February and 10 July 1997:

| | |
|--|-----|
| Total number admitted to the centre | 438 |
| Number from Abu Hijayr camp on 23 February 1997 | 200 |
| Number delivered by the police on 13 April 1997 | 94 |
| Number from Abu Hijayr camp on 10 June 1997 | 144 |
| Total intake | 438 |
| Total reunited with their families | 78 |
| Total number of drop-outs | 87 |
| Number released for non-fulfilment of the admission criteria | 19 |
| Current number of children | 254 |

Source: Ministry of Social Planning, 1997.

The following table shows the daily activities at the centre:

| <i>Daily activities and routine chores</i> | <i>Changing timetable of activities</i> | <i>Social and psychological follow-up</i> |
|--|--|---|
| Personal hygiene (shower and wash) | Indoor physical exercise | General supervision of activities |
| General cleaning of rooms and premises of the centre | Recreational programmes (videos, games, assembly and construction, etc.) | Indoor group activity (discussion of problems) |
| Three meals | Outside activities | Guidance and counselling |
| Announcement of prayer times | General weekly cleaning day | Completion of forms and writing of case reports |
| Break times | Academic follow-up (education) | Follow-up of cases of illness |
| Medical examination and treatment | | Reception of families and family visits |

Source: Ministry of Social Planning, 1997.

The vagrant children accommodated clearly suffer from health problems, as shown in the medical report. The following table illustrates the illnesses prevalent among vagrant children:

| <i>Illness</i> | <i>Number of children</i> |
|-----------------|---------------------------|
| Cough | 55 |
| Ringworm | 46 |
| Malaria | 4 |
| Bilharzia | 20 |
| Mumps | - |
| Dysentery | 2 |
| Tuberculosis | 68 |
| Eye disease | - |
| Worms | - |
| Anaemia | 10 |
| Night-blindness | - |
| Pneumonia | 4 |
| Malnutrition | 1 |

Source: Ministry of Social Planning.

The following team of medical personnel has been provided to work at the reception centre:

| | |
|-----------------------|---|
| Paediatricians | 1 |
| Medical assistants | 1 |
| Nutritional officers | 2 |
| Drivers | 1 |
| General practitioners | 2 |
| Project coordinators | 1 |
| Social workers | 6 |
| Nurses | 2 |

The following table shows the medication supplied:

| <i>No.</i> | <i>Name of medication</i> | <i>Quantity</i> |
|------------|---------------------------|------------------|
| 1 | Amoxil capsules | 6 000 |
| 2 | Amoxil syrup | 500 phials |
| 3 | Erythromycin tablets | 5 000 |
| 4 | Erythromycin suspension | 400 phials |
| 5 | Septin syrup | 500 phials |
| 6 | Septin tablets | 4 000 |
| 7 | Chloroquine syrup | 250 phials |
| 8 | Chloroquine injectable | 300 ampoules |
| 9 | Chloroquine tablets | 3 000 |
| 10 | Empty syringes | 5 000 |
| 11 | Penicillin solution | 6 000 injections |
| 12 | Procaine penicillin | 400 phials |
| 13 | Eye ointment | 200 tubes |
| 14 | Fansidar tablets | 1 000 |
| 15 | Sutures | 5 cartons |
| 16 | Panadol tablets | 4 000 |
| 17 | Panadol syrup | 300 phials |
| 18 | Disinfectants | Unspecified |
| 19 | Cotton wool and bandages | Unspecified |

Source: Ministry of Social Planning, 1997.

The table below shows the donor contributions to the centre:

| <i>Donor</i> | <i>Contribution</i> | <i>Amount in stock</i> |
|-----------------------------------|---|---|
| GOAL | 350 cartons of soap 392 cloths 169 pairs of shoes 350 cartons of fresh milk Stationery and sports equipment | 300 Available - - |
| ADRA | 80 x 50 kg. SFSG 7 x 50 kg. sacks of lentils 27 x 20 kg. cartons of vegetable oil | - - - |
| World Food Programme (WFP) | 23 x 25 kg. sacks of DSM 68 x 50 kg. sacks of sugar | 22 65 |
| Ministry of Social Planning | 2 sacks of onions 64 x 1-litre cans of oil 4 sacks of Egyptian beans 2 sacks of Egyptian beans 8 sacks of Egyptian beans 25 x 90 kg. sacks of wheat 5 x 90 kg. sacks of wheat Other spices | - 4 4 1.5 4.5 25 5 Available |
| NUCRVC | 2 x 25 kg. sacks of DSM 1 x 50 kg. sack of sugar (for tuberculosis patients) | - - |
| Médecins sans Frontières (France) | Quantity of medicines | - |

Source: Ministry of Social Planning, 1997.

The table below outlines the budget of the centre and the donor committee:

| <i>No.</i> | <i>Amount in Sudanese pounds</i> | <i>Donor</i> |
|------------|----------------------------------|---|
| 1 | 55 000 000 | Federal Office of Zakat |
| | 17 000 000 | Zakat Office – Khartoum |
| | 13 500 000 | Ministry of Social and Cultural Affairs, Khartoum state |
| | 10 500 000 | Federation of Societies |
| | 16 841 360 | GOAL |
| | 112 841 360 | Total |

Source: Ministry of Social Planning, 1997.

165. Paragraph 33 of the addendum to the initial report of the Sudan (CRC/C/3/Add.20) referred to the future plan in this connection and efforts are still continuing to implement the objectives of this plan.

166. In brief, the difficulties encountered concern the funding of such programmes and the lack of humanitarian assistance directed to the country. Material and technical support is needed from the international community if the social reintegration of these children is to become a national priority.

VI. BASIC HEALTH AND WELFARE
(arts. 6; 18, para. 3; 23; 24; 26; 27, paras. 1-3)

A. Disabled children (art. 23)

167. The attention devoted to disabled children by the State began in 1970 in the form of social welfare activities. Numerous societies were established for disabled persons with hearing, visual, physical or mental impairments, including:

- (a) The Society for the Hearing and Speech Impaired;
- (b) Al-Nur Society;
- (c) The Sakina Society for the Physically and Mentally Disabled;
- (d) The Sabah Society;
- (e) The Amal Society.

168. These societies were formed in the capital and later established branches in the states, as in the case of the Amal Society, which moved into the states of Gezira, North Kordofan, River Nile and Bahr al-Jabal. In 1982, the State began to provide health care for disabled children in cooperation with the British Embassy, the University of Khartoum and Suba University Hospital, where the Cheshire Institute for Disabled Children was established to provide medical care for physically and mentally disabled children. Paediatricians are in attendance weekly to offer health and medical care and Suba University Hospital carries out operations on children with poliomyelitis.

169. Some voluntary organizations, such as the Sakina Society, also began to open health clinics for disabled children and keep records on every child. The State undoubtedly helped by setting up a factory to make prosthetic limbs for disabled children and by working for the social, educational, vocational and physical rehabilitation of disabled children with a view to their social reintegration. A special department was created in the Ministry of Social Planning to cater for disabled persons, in accordance with the comprehensive national strategy. This department conducted a study on disabled children in the relevant centres and institutions, the findings of which were as follows:

| | | |
|-----------------------------|--------|---------------|
| Number of disabled children | 90 248 | |
| Males | 52 906 | 58.6 per cent |
| Females | 37 342 | 41.4 per cent |
| In urban areas | 27 587 | 30.6 per cent |
| In rural areas | 62 661 | 69.4 per cent |

The breakdown by disability is as follows:

| | | |
|---------------------------------|--------|---------------|
| Physical | 38 390 | 42.5 per cent |
| Hearing and speech impaired | 20 749 | 23 per cent |
| Blind | 7 233 | 8.1 per cent |
| Multiple disability | 3 175 | 3.5 per cent |
| Mental | 13 069 | 14.5 per cent |
| Other (psychiatric and genetic) | 7 208 | 8 per cent |
| Unspecified | 442 | 0.4 per cent |

170. The number of disabled children in Khartoum state amounted to 12,297, of whom 7,057, or 42.6 per cent, were males. The number of disabled children successfully rehabilitated in Khartoum state amounted to only 2,682, or 31.8 per cent, which is naturally attributable to the high cost of educating a disabled child, the small number of institutions and centres catering to disabled children and the inability

to start up extra classes in the existing institutions. In 1996, there were 620 children, or 23.5 per cent, in the institutions offering rehabilitation in Khartoum state and the number of children previously rehabilitated stood at 2,051, or 76.5 per cent. Of the 11 institutions in Khartoum state, two are government-run and the remainder are voluntary institutions or centres run by societies or individuals.

The number of disabled children in institutions offering rehabilitation in Khartoum state is as follows, by disability and age:

| <i>Disability</i> | <i>Number</i> | <i>Males</i> | <i>Females</i> | <i>Under 6 years</i> | <i>6-12 years</i> | <i>12 years and above</i> |
|--------------------------|---------------|--------------|----------------|----------------------|-------------------|---------------------------|
| Mental | 129 | 89 | 31 | 28 | 72 | 29 |
| Hearing | 325 | 123 | 102 | 10 | 169 | 46 |
| Visual | 86 | 60 | 26 | - | 40 | 36 |
| More than one disability | 180 | 119 | 61 | 45 | 93 | 42 |
| Total | 620 | 400 | 320 | 83 | 374 | 163 |
| Per cent | 100 | 64.5 | 35.5 | 13.4 | 60.3 | 26.3 |

It should be pointed out that physically disabled children are not shown in the table, as there were none attending the institutions concerned owing to the fact that they are mainstreamed into regular schools.

171. The number of personnel working with disabled persons in these centres is extremely small, amounting to a total of 91. Despite the scarcity of resources, however, comprehensive services are provided within the centres, as follows:

| <i>Type of service</i> | <i>Number</i> | <i>Percentage</i> |
|---------------------------------|---------------|-------------------|
| 1. Rehabilitation and education | 11 | 23.4 |
| 2. Vocational training | 1 | 2.1 |
| 3. Psychological counselling | 11 | 23.4 |
| 4. Family training | 5 | 12.9 |
| 5. Financial assistance | - | - |
| 6. Protection services | 7 | 14.9 |
| 7. Early intervention | 5 | 10.6 |
| 8. Employment | 1 | 2.1 |
| 9. Transport | 5 | 10.6 |
| Total | 47 | 100 |

172. Despite the efforts of the Government and voluntary organizations, the following difficulties are encountered in regard to health care for disabled persons:

- The activities of the organizations concerned do not extend to other states;
- Accurate statistics and data on disabled persons are unavailable;
- The different pieces of equipment and apparatus for disabled children are unavailable;
- Transport is unavailable and the curricula, training and information are inadequate;
- The cost of prosthetic limbs is extremely high.

173. In order to reduce the incidence of disability, the State has endeavoured to:

- Ensure the success of expanded immunization programmes, particularly those aimed at eradicating poliomyelitis in children;
- Implement a project to supplement table salt with iodine.

174. The progress achieved in prenatal, perinatal and post-natal services with a view to forestalling any potential causes of disability in the child during these stages is illustrated in tables 9-1, 9-2, and 10-1, 10-2 and 10-3 concerning disabled children.

B. Health and health services
(article 24)

1. Implementation of the Convention on the Rights of the Child in the field of health care

175. The Sudan began to apply numerous primary health care policies early on and has a exceptional body of health personnel, such as medical assistants, who, together with village midwives, are mainly responsible for providing rural health services, as has been the case since pre-independence days.

176. Following the Alma Ata Conference in 1978, the State made an undertaking to adopt policies focusing on primary health care in order to achieve health for all. It consequently began to establish administrative bodies and provide resources in the form of personnel, personnel training and health units. The assistance received from United Nations agencies at that time had a great impact on the implementation of primary health care programmes, which initially achieved good results until 1990, when international support for these programmes began visibly to diminish, a factor which has hitherto continued to have major implications by disrupting the flow of achievement of the desired results and set targets.

177. It is should be stated that the impressive results recently attained in the field of primary health care and immunization in particular were due to the valuable support provided by the Government, despite difficult economic and social circumstances and the lack of foreign aid from various organizations, and to the effort of those working in that field.

178. In view of the above circumstances, the objectives of the primary health care programmes designed to reduce morbidity and mortality are still far from attainment, taking into account the spread of epidemics and water-borne diseases such as malaria (see the table below), which affects many inhabitants and kills enormous numbers of children, and the effects of the ruinous war on the situation of children. Children are thus deprived of their basic health, educational and social rights, as well as their rights to survival and development, particularly bearing in mind the geographical location and physical features of the Sudan, which is frequently stricken by drought and desertification or by torrential floods, its extensive surface area and the ensuing communication difficulties. Despite the obstacles mentioned, however, the State has taken measures to address these challenges by decentralizing and ensuring the fair distribution of resources in order to lower the administrative profile and consequently transfer the authority for development planning, including health planning, to the local government areas, which, being the geographical unit for the health district, can provide and train personnel. With input from the public, a health district policy was also outlined to ensure the integration of health services with the other relevant services. By 1996, there were 53 health districts and efforts are now under way to form health districts in all the local government areas in every state, which inevitably requires considerable support from all

authorities. The Ministry of Health also adopted a project to integrate treatment of the five child-killer diseases, namely malaria, diarrhoea, acute respiratory disease, malnutrition and measles.

179. In order to promote overall development and thus enable the delivery of health care services to all, the State embarked on the construction of various interstate roads, such as the Western Salvation Highway and the Northern Challenge Highway, the aim being to ensure that development encompasses the whole country, including children.

180. A major enhancement has been the strengthening of the radio and television broadcasting network, as a result of which all citizens have access to information, including information on health and on maternal and child health in particular.

181. The overall strategy for development includes a health strategy aimed at providing universal access to primary health care and according priority to child and maternal care, a priority to which the State is committed at the highest levels. It should be pointed out that several amendments have been made to the health laws to accompany achievement of the targets set in the fields of primary health care and the rights of the child (see the laws annexed hereto). Moreover, the Khartoum Peace Agreement brought an end to the war which had violated all the fundamental rights of the child stipulated in articles 6, 7, 8, 9, 19, 24, 27 and 28 of the Convention.

2. Overall demographic and health indicators

182. The information below was obtained from the Federal Ministry of Health, the National Health Information Centre, the Sudanese Survey of Maternal and Child Health, the 1993 Arab Project for the Advancement of Children and "The State of the World's Children" (UNICEF, 1997).

Number of children (in millions)

| <i>Under 18 years of age</i> | <i>Under five years of age</i> |
|------------------------------|--------------------------------|
| 14.2 | 4.7 |
| 41.6 per cent | 13.3 per cent |

Source: Arab Project for the Advancement of Children, 1993.

Annual population growth rate (percentage)

| | |
|------|-----|
| 1995 | 2.9 |
|------|-----|

Source: Central Office of Statistics.

| <i>Crude mortality rate per thousand</i> | <i>Crude birth rate per thousand</i> |
|--|--------------------------------------|
| 1995 | 1995 |
| 13 | 29 |

Source: Central Office of Statistics.

| <i>Percentage of urban population</i> | <i>Annual increase in urban population</i> |
|---------------------------------------|--|
| 1995 | 1965-1980 |
| 25 | 5.6 |
| | 1980-1995 |
| | 4.8 |

Mortality rate per thousand among infants under one year of age

| | |
|--------|------|
| 1960* | 170 |
| 1993** | 110 |
| 1995* | 69.5 |

* *Source:* "The State of the World's Children" (UNICEF, 1997), the Sudanese Survey of Maternal and Child Health and the Arab Project for the Advancement of Children, 1993. For further details, see table 2 annexed hereto.

** *Source:* Population census of 1993, Central Office of Statistics.

Under-fives mortality rate per thousand

| | |
|------|-------|
| 1960 | 292 |
| 1995 | 112.6 |

Source: Arab Project for the Advancement of Children, 1993.

- It should also be stated that infant and child mortality rates are extremely high in states such as Darfur and those in eastern Sudan.
- The annual number of births is 1,099,000.
- The annual number of deaths among the under-fives is 126,000.

Percentage of births supervised by qualified personnel

| | |
|-----------|----|
| 1990-1996 | 85 |
|-----------|----|

Source: Arab Project for the Advancement of Children, 1993.

- Maternal deaths during pregnancy and birth amount to 379 per 100,000 (Source: Arab Project for the Advancement of Children, 1993);
- The pregnancy rate in the Sudan is 40 per cent, or in other words, about one million pregnant women every year;
- Married women and mothers account for approximately 20 per cent of every 100,000 inhabitants, or in other words, about 5 million.

Overall fertility rate

| | |
|------|-----|
| 1980 | 6.5 |
| 1995 | 4.5 |

Source: Arab Project for the Advancement of Children, 1993.

Percentage of contraceptive use

1960-1997 9.9

Source: Arab Project for the Advancement of Children, 1993.

Percentage of pregnant women not immunized against tetanus

| | |
|-----------|----|
| 1990-1996 | 65 |
| One dose | 18 |
| Two doses | 10 |

Source: Arab Project for the Advancement of Children, 1993.

Percentage of the population with access to clean water

| | <i>Urban areas</i> | <i>Rural areas</i> |
|------|--------------------|--------------------|
| 1993 | 60 | 20 |
| 1996 | 84 | 41 |

Percentage of children fully immunized at the age of one year

| 1992-1995 | Tuberculosis | Triple vaccine | Poliomyelitis | Measles |
|-----------|--------------|----------------|---------------|---------|
| | 88 | 76 | 77 | 74 |

The 10 main causes of deaths in children (0-5 years) admitted to hospital in 1989

| <i>No.</i> | <i>Cause of death</i> | <i>Number of deaths</i> | <i>Annual percentage</i> |
|------------|--------------------------------|-------------------------|--------------------------|
| 1. | Diarrhoea | 743 | 24 |
| 2. | Pneumonia | 473 | 15 |
| 3. | Malaria | 367 | 12 |
| 4. | Malnutrition | 299 | 10 |
| 5. | Meningitis | 157 | 5 |
| 6. | Anaemia | 144 | 4 |
| 7. | Other respiratory diseases | 104 | 3 |
| 8. | Rheumatic fever | 62 | 2 |
| 9. | Cardiac failure | 60 | 2 |
| 10. | Non-specific symptoms | 46 | 1 |
| | Total deaths from disease | 2 455 | 80 |
| | Other deaths | 611 | 20 |
| | Overall deaths in the category | 3 066 | |

Source: Federal Ministry of Health - National Centre for Health Information.

The 10 main causes of deaths among children (0-5 years) admitted to hospital in 1993

| <i>No.</i> | <i>Cause of death</i> | <i>Number of deaths</i> | <i>Annual percentage</i> |
|------------|--------------------------------|-------------------------|--------------------------|
| 1. | Diarrhoea | 777 | 26 |
| 2. | Malaria | 575 | 20 |
| 3. | Pneumonia | 480 | 16 |
| 4. | Malnutrition | 366 | 12 |
| 5. | Dehydration | 128 | 4.4 |
| 6. | Anaemia | 100 | 3.4 |
| 7. | Meningitis | 90 | 3 |
| 8. | Cardiac failure | 58 | 2 |
| 9. | Typhoid | 43 | 1.4 |
| 10. | Poor blood circulation | 41 | 1.4 |
| | Total deaths from disease | 2 568 | 88 |
| | Other deaths | 340 | 12 |
| | Overall deaths in the category | 2 908 | |

Source: Federal Ministry of Health - National Centre for Health Information.

The 10 main causes of death among children (0-5 years) admitted to hospital in 1995

| <i>Disease</i> | <i>Cases</i> |
|----------------------------|--------------|
| Malaria | 777 |
| Pneumonia | 542 |
| Diarrhoea | 377 |
| Blood poisoning | 306 |
| Dehydration | 294 |
| Malnutrition | 224 |
| Anaemia | 148 |
| Meningitis | 102 |
| Cardiac disease | 84 |
| Other respiratory diseases | 51 |
| Total | 2 905 |

Source: Federal Ministry of Health – National Centre for Health Information.

The 10 main causes of hospital admission among children aged 0-5 years in 1995

| <i>Cause</i> | <i>Cases</i> |
|----------------------------|--------------|
| Malaria | 35 459 |
| Pneumonia | 22 654 |
| Diarrhoea | 8 910 |
| Malnutrition | 3 134 |
| Anaemia | 2 509 |
| Other respiratory diseases | 2 178 |
| Dehydration | 1 914 |
| Abcess | 1 292 |
| Accident and injury | 967 |
| Eye disease | 877 |
| Total | 89 925 |

Source: Federal Ministry of Health – National Centre for Health Information.

3. Measures adopted to implement article 24 of the Convention

183. Children have the right to the highest standard of health and medical care and the State is particularly obliged to provide primary health care and protection, spread health awareness and reduce child mortality rates.

(a) Medical care of the child

184. The State has made commendable efforts in this respect by promoting and developing all medical resources in the form of health facilities, personnel and medication. In so doing, it has given fair and equal priority to rural children, the vast majority of whom are vulnerable to disease, a matter which will be discussed in detail.

(b) Health facilities

(Source: Federal Ministry of Health – National Centre for Health Information)

185. The combined efforts of the State and the public have had an impact on the development of various health facilities, with emphasis on those dedicated to mothers and children, especially in rural areas, as the following tables clearly illustrate. Table 3 illustrates material and human resources in 1992 and 1995-1996. The number of health facilities generally increased, as follows:

| | <i>1992</i> | <i>1996</i> |
|--------------|-------------|-------------|
| Hospitals | 216 | 253 |
| Beds | 20 135 | 22 444 |
| Dispensaries | 1 271 | 1 478 |
| Clinics | 1 285 | 1 558 |
| Health units | 3 115 | 2 916 |

| | Health facilities in the Sudan (1992-1996) | | | | |
|---------------------------|---|-------------|-------------|-------------|-------------|
| | <i>1992</i> | <i>1993</i> | <i>1994</i> | <i>1995</i> | <i>1996</i> |
| Hospitals | 216 | 216 | 228 | 240 | 235 |
| Beds | 20 135 | 20 435 | 21 024 | 21 827 | 22 444 |
| Health centres | 426 | 470 | 477 | 521 | 571 |
| Dispensaries | 1 271 | 1 344 | 1 346 | 1 400 | 1 478 |
| Clinics | 1 285 | 1 317 | 1 388 | 1 412 | 1 558 |
| Primary health care units | 3 115 | 3 012 | 3 013 | 3 007 | 2 916 |

The annual increase in the number of hospitals, beds, health centres, dispensaries and clinics can be noted.

186. The gradual increase over the years in the number of hospitals, beds, health centres, dispensaries and clinics is clear. The evident fall in the number of primary health care units, on the other hand, is due to the fact that some were upgraded to clinics or dispensaries.

The following table shows the rate of increase in the number of beds per 100,000 inhabitants between 1992 and 1996.

| | 1992 | 1996 |
|------|-------------|-------------|
| Beds | 7.6 | 8.5 |

The following table also shows the type of hospital and type of services available:

| <i>Consultants</i> | Teaching hospitals | | <i>Consultants</i> | Public hospitals | | |
|--------------------|---------------------------|--------------|--------------------|--------------------------|----------------|--------------|
| | <i>Specialist fields</i> | <i>Total</i> | | <i>Specialist fields</i> | <i>General</i> | <i>Total</i> |
| 20 | 16 | 36 | 37 | 7 | 138 | 253 |

A careful analysis of the material and human resources illustrated in tables 3, 4 and 5, together with the information on the health facilities available for mothers and children, shows that these facilities have progressively increased and are evenly distributed throughout the rural and urban areas of each state, thus affirming the success of the policy to decentralize and seek the fair distribution of resources.

187. The appalling decline in these facilities is also noticeable in the southern states, where the war has destroyed the entire infrastructure. Children are consequently denied their fundamental rights, which can be realized only with peace and through increased local and foreign efforts aimed at reconstructing and renovating such facilities.

- (c) Health education institutions and health personnel
(Source: Federal Ministry of Health and National Office for Health Information)

188. The steady growth is an inevitable result of the development of a number of health education institutions (see table 6 on material and human resources). In the context of the revolution in education now taking place throughout the country, various medical schools and colleges for other health personnel have been established, along with the National Sudanese Council for Specialist Medicine. In addition, numerous specialisms are already taught in the Universities of Khartoum and Gezira. It should be pointed out that substantial numbers of doctors and specialists returned after studying abroad. The number of health personnel increased as follows:

| | 1992 | 1996 |
|-------------------------|-------------|-------------|
| Consultants | 578 | 609 |
| Registrars | 166 | 184 |
| General practitioners | 1 189 | 991 |
| Housemen | 281 | 449 |
| Dentists | 190 | 205 |
| Total number of doctors | 2 354 | 2 438 |
| Pharmacists | 228 | 290 |
| Medical assistants | 4 745 | 5 247 |
| Technicians | 1 400 | 1 633 |
| Nurses | 16 354 | 17 182 |

In 1996, the ratio of health personnel to inhabitants was one doctor for every 100,000 inhabitants.

| <i>Category</i> | <i>Consultant</i> | <i>Dentist</i> | <i>All doctors</i> |
|-----------------|-------------------|----------------|--------------------|
| Number | 609 | 205 | 2 438 |
| Ratio | 0.2 | 0.1 | 0.9 |

Ratio of medical and assistant health personnel

| <i>Category</i> | <i>Technicians</i> | <i>Medical assistants</i> | <i>Health inspectors and officers</i> | <i>Nurses</i> |
|-----------------|--------------------|---------------------------|---|---------------|
| Number | 1 529 | 4 918 | 250 | 14 211 |
| Average | 0.7 | 2.2 | 0.1 | 6.4 |

189. It should be pointed out here that there is a close link between children's health and an increase in relevant personnel, such as nurses, village midwives, trained midwives, health visitors, medical assistants, immunization technicians, gynaecologists, obstetricians and paediatricians. It is noticeable from examining the distribution of these personnel throughout the different states that there are very few of them in the southern states owing to the war (see tables 3, 4 and 5).

(d) Essential medicines

190. According to the fourth national list of medicine requirements for 1995, there were 454 essential medicines, excluding vaccines. The State has adopted a national policy on essential medicines, the focus of which is to cover the needs of citizens at the lowest cost. In 1996, a project was launched to provide free medical treatment in the accident departments of government hospitals, in which context 73 types of medicine were earmarked for availability free of charge in emergency cases.

191. In order to meet the need for medicine at reasonable prices, the State took the following steps:

- (a) The Pharmaceuticals, Toxins, Cosmetics and Medical Supplies Act of 1997 was promulgated;
- (b) The regulations concerning the registration of pharmaceutical preparations and the principles for determining need, safety, effectiveness, quality and cost were redrafted and the number and prices of registered preparations were listed;
- (c) Measures and principles in connection with the import of medicines were adopted;
- (d) Binding rules for pharmaceutical establishments were issued;
- (e) Regulations concerning the registration of medicinal plants and pharmaceutical preparations made from such plants were issued, together with regulations for inspection, sampling and analysis;
- (f) In order to reduce the cost of medications, a system of people's pharmacies was established under which 295 pharmacies were established by 1997, increasing to 3,000 by the year 2000;
- (g) In order to ensure an adequate supply of pharmacists, several pharmacology faculties were established at various universities, producing between 40 and 150 graduates annually, in addition to those graduating from universities abroad;

(h) In this connection, the National Drug Testing and Analysis Laboratory received support in the form of the qualified personnel and equipment needed to carry out such testing and analysis.

(e) Drug manufacture

192. The country now has 15 operational drugs factories which annually produce 15 types of medicines in order to cover the national list of medicine requirements. The State has taken the initiative to waive customs duties on medicines in order to encourage the private sector to start manufacturing drugs.

(f) Private pharmacies

193. Private pharmacies supply 97 per cent of medicines through importation. The value of imported medicines rose from \$4 million in 1990 to \$40 million in 1997. Through banks, some states have begun to set up small enterprises and companies in order to purchase medicines in addition to those provided by the Government, in which connection the Bamako project is also being implemented throughout the Sudan.

(g) Primary health care

194. Articles 6 and 24 of the Convention on the Rights of the Child relate to the survival and development of the child and to the provision of primary health care, one component of which is nutrition. Article 27 also recognizes "the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development". In that connection, the following has been achieved:

(h) Nutrition

(Source: Federal Ministry of Health, Department of Nutrition)

195. The indicators for nutrition in the Sudan are as follows:

- Children with low birth weight during the period 1990-1995: 15 per cent;
- Children exclusively breastfed from birth to 30 months: 94 per cent;
- Children taking solids to supplement breast milk between the ages of six and nine months: 45 per cent;
- Children still breastfeeding between the ages of 20 and 23 months: 44 per cent;
- Children underweight (emaciation and dwarfism):

| | 1992-1996 | |
|-------------|------------------|-------------|
| Underweight | Emaciation | Dwarfism |
| 24 per cent | 13 per cent | 24 per cent |

(See table 7 on nutrition)

Goitre among children between 6-10 years of age

| <i>Percentage of families consuming iodized salt</i> | <i>Darfur</i> | <i>White Nile</i> | <i>Eastern states</i> | <i>Khartoum</i> | <i>Northern states</i> | <i>Southern states</i> |
|--|---------------|-------------------|-----------------------|-----------------|------------------------|------------------------|
| 0.03 | 87 | 78 | 69 | 17 | 24 | 30 |

(i) Trace elements (iron deficiency)

196. Anaemia brought on by iron deficiency is one of the 10 main causes of hospital admission, as well as one of the 10 main causes of hospital deaths. Accordingly, between 1995 and 1995, in conjunction with the WHO and experts from the Diseases Control Center in Atlanta, the National Department of Nutrition conducted a study to measure the amount of haemoglobin in under-fives and their mothers, the findings of which were as follows:

Anaemia in under-fives and their mothers in nine states (1995-1996)

| <i>No.</i> | <i>State</i> | <i>Percentage of children with less than 11 grams of haemoglobin per millilitre</i> | <i>Percentage of mothers with less than 12 grams of haemoglobin per millilitre</i> |
|------------|----------------------------|---|--|
| 1. | Northern (Merowe province) | 68.3 | 84.5 |
| 2. | Khartoum | 73 | 89.2 |
| 3. | Sennar | 78.9 | 95 |
| 4. | Kassala | 81.7 | 37.4 |
| 5. | Gezira | 82.9 | 55.6 |
| 6. | North Kordofan | 90.8 | |
| 7. | South Darfur | 86.4 | 39.2 |
| 8. | Red Sea | 89.1 | 56.4 |
| 9. | River Nile | 92.1 | 53.1 |

By examining the table below, in which the figures are arranged in descending order, it can be seen that child anaemia is most prevalent in the River Nile, North Kordofan and Red Sea states, and least prevalent in Khartoum state and Northern state, while the southern states of Darfur, Gezira and Kassala are in between. As for maternal anaemia, it is most prevalent in Sennar, Khartoum and Northern states, and least prevalent in North Kordofan, South Darfur and Kassala states, with Red Sea, Gezira and River Nile states in between.

197. This geographical disparity and the disparity in the prevalence of anaemia in children and mothers requires further study with a view to identifying whether anaemia has an environmental cause, is caused by illness, intestinal worms, malnutrition or eating habits or is attributable to cultural or educational causes. Appropriate programmes can then be devised to deal with these causes and eradicate anaemia.

| <i>No.</i> | <i>State</i> | <i>Percentage of children with less than 11 grams of haemoglobin per millilitre</i> | <i>State</i> | <i>Percentage of mothers with less than 12 grams of haemoglobin per millilitre</i> |
|------------|----------------|---|----------------|--|
| 1. | Nile | 92.1 | Sennar | 90.5 |
| 2. | North Kordofan | 90.8 | Northern | 84.5 |
| 3. | Red Sea | 89.1 | Khartoum | 89.2 |
| 4. | South Kordofan | 86.4 | Red Sea | 56.4 |
| 5. | Gezira | 82.9 | Gezira | 55.6 |
| 6. | Kassala | 81.7 | River Nile | 53.1 |
| 7. | Sennar | 78.9 | North Kordofan | 44.9 |
| 8. | Khartoum | 70.3 | South Darfur | 39.2 |
| 9. | Northern | 68.3 | Kassala | 37.4 |

(ii) Iodine deficiency

198. Studies have confirmed that illnesses resulting from iodine deficiency, particularly goitre, are common throughout every state in the Sudan. These studies produced the following findings:

Percentage of illnesses resulting from iodine deficiency, particularly goitre

| | |
|----------------|------|
| Darfur sector | 87 |
| Eastern sector | 13.5 |
| Khartoum | 78 |
| Other states | 17.5 |

In order to tackle this health problem, in 1995 the State distributed potassium iodide tablets to primary schools in South Darfur, as well as injectable iodine and tablets to the worst affected areas, thus benefiting two million people in Darfur and While Nile. Iodine was then added to well water in North Kordofan and lastly, table salt was iodized, beginning in 1995, with the aim of eradicating illnesses caused by iodine deficiency by the year 2000 in accordance with the recommendations of a world conference on the elimination of nutritional deficiencies of trace elements, including iodine, held in Canada in October 1991. In December 1995, a contract was signed to install the necessary machinery in Port Sudan, following which factories began operation and the factory workers received training in the production of iodized salt to the agreed specifications. The distribution of iodized salt to the different states has now started. Using the facilities of the Sudan Railways Corporation, an initial 150-ton batch of iodized salt was supplied to Kordofan sector from the factory in Port Sudan.

199. A project is currently under way to supplement table salt with iodine in the Darfur sector, which is in the west of the country and has five million inhabitants. According to the 1993 census, there are 2,152,466 inhabitants and 12 million heads of livestock (according to the state veterinary authorities). Health problems caused by lack of iodine, such as birth defects, still births, miscarriages, mental retardation, speech impairment, low intelligence and learning difficulties in children, are remarkably common. In some parts of West Kordofan state, for instance, their incidence is as high as 95 to 99 per cent. Experts from the National Department of Nutrition at the Federal Ministry of Health and the political, legislative and health authorities in the state of South Darfur state were consequently moved to promote and support a private sector initiative by the company Baskam, which came forward to tackle this health problem on the basis that society should play a part in resolving its own health problems, which is the concept behind primary health care. The company set up a factory in the town of Nayala, installed

three salt iodization machines and staffed the factory with the necessary engineers, chemists and technicians. Training was provided for administrative and supervisory staff and production began on 6 September 1997. Each machine has a daily production capacity of 15 tons, thus amounting to 45 tons for all three machines. There are three phases to the project:

- Phase 1: Iodized salt production.
Phase 2: Packaging of the salt in plastic containers.
Phase 3: Refinery and washing of salt in order to eliminate impurities and packaging of the iodized salt in small plastic bags of one kilogram or half a kilogram.

200. In cooperation with the state's veterinary authorities, the company will supply iodized salt for animals. The company is expected to develop and increase production to cover all states and subsequently export salt to neighbouring countries such as Chad and the Central African Republic. In future, the Government also intends to develop the factory's chemical laboratory into a quality control laboratory for food and drinking water in the western sector of the country (Source: Federal Ministry of Health, National Department of Nutrition, 1997).

(iii) Vitamin A deficiency

201. Vitamin A deficiency is a common nutritional problem throughout the Sudan, as illustrated by the percentages in the table below.

| <i>Year</i> | <i>State</i> | <i>Age</i> | <i>Number</i> | <i>Night-blindness</i> | <i>Clouded vision</i> | <i>Dryness</i> |
|-------------|------------------------------|---------------|---------------|------------------------|-----------------------|----------------|
| 1992 | Eastern region | Under 5 years | - | 2.8 | 1.1 | 0.05 |
| 1989 | White Nile | Under 5 years | - | 2.8 | 3 | - |
| 1992 | Khartoum (displaced persons) | Under 5 years | - | 2 | - | - |
| 1992 | Kordofan | Under 5 years | - | 1.9 | 0.9 | - |
| 1989 | Red Sea | 6 years | 2001 | 1.1 | 0.7 | 0.05 |
| 1991 | Blue Nile | Under 5 years | - | 0.8 | 0.9 | - |
| 1989 | North Darfur | 6 years | 1919 | 0.25 | 0.1 | 0.1 |

The table below shows the findings of the study conducted in 1995-1996 on the distribution of vitamin A capsules and the percentage of night-blindness in children aged 6-24 months.

| <i>No.</i> | <i>State</i> | <i>Percentage of vitamin A Distribution</i> | <i>Percentage of night- blindness</i> |
|------------|------------------------------|---|---|
| 1. | Northern Darfur | 92.6 | No information available |
| 2. | Sennar | 53 | 0.5 |
| 3. | Gezira | 83.1 | 0.26 |
| 4. | Khartoum | 78 | 0.2 |
| 5. | Kassala | 110.4 | 0.01 |
| 6. | Red Sea | 54 | 1.2 |
| 7. | White Nile | 44.6 | 0.2 |
| 8. | Upper Nile – Nasir region | 24 | 0.08 |
| 9. | River Nile | 96.1 | 0.36 |
| 10. | Gedaref | 63.2 | 0.15 |

Source: Federal Ministry of Health, National Department of Nutrition.

In general, the rates of vitamin A deficiency are remarkably high in most areas of the Sudan, which has prompted the Government to distribute vitamin A capsules as a preventive measure to children under two years of age with the aim of covering 80 per cent of children in the areas where vitamin A deficiency is prevalent. Vitamin A capsules have been distributed for such preventive purposes as follows:

- 200,000 capsules twice annually for children aged 6-24 months;
- 100,000 capsules for children aged 6-11 years;
- Capsules to be taken by nursing mothers as a preventive measure for the first six weeks after delivery.

Vitamin A capsules were also distributed to treat cases of night-blindness.

(i) General measures

202. It should be pointed out that the State has adopted general measures for nutritional health, aimed in particular at providing food and combating poverty and diseases of malnutrition, as outlined below:

(a) Increase in areas cultivated with agricultural crops

| | <i>1991/92</i> | <i>1995/96</i> |
|--------------|----------------|----------------|
| Sorghum | 18 123 | 14 663 |
| Pearl millet | 6 241 | 8 157 |
| Wheat | 807 | 23 563 |

(b) Increase in food crops (thousands of tons)

| | 1992/93 | 1995/96 |
|--------------|----------------|----------------|
| Sorghum | 4 042 | 2 450 |
| Pearl millet | 449 | 385 |
| Wheat | 445 | 527 |
| Maize | - | 21 |
| Rice | - | 1 |
| Total | 1 336 | 3 344 |

(c) Increase in oil seed crops (thousands of tons)

| | 1992/93 | 1995/96 |
|------------|----------------|----------------|
| Sesame | 97 | 160 |
| Peanuts | 180 | 714 |
| Sunflower | 11 | 57 |
| Cottonseed | 179 | 164 |
| Total | 467 | 1 095 |

(d) Pulses (thousands of tons)

| | 1992/93 | 1995/96 |
|--------------|----------------|----------------|
| Lentils | 1 | 4 |
| Beans | 4 | 16 |
| Broad beans | 65 | 90 |
| Other pulses | 2 | 7 |
| Total | 72 | 117 |

(e) Animal production (millions)

| | 1992/93 | 1995/96 |
|-----------------------|----------------|----------------|
| All grazing livestock | 58.2 | 125.5 |

(f) Milk production (tons)

| | 1992/93 | 1995/96 |
|------|----------------|----------------|
| Milk | 283 900 | 6 885 000 |

(g) Poultry meat production (tons)

| | 1992/93 | 1995/96 |
|--------------|----------------|----------------|
| Poultry meat | 22 500 | 31 000 |

(h) Egg production (tons)

| | 1992/93 | 1995/96 |
|------|----------------|----------------|
| Eggs | 34 500 | 36 000 |

Source: Statistics of the Arab Organization for Agricultural Development.

(i) Percentage of food in total imports

1992/93
22

1995/96
18

(j) The State contributed by supplying food to Operation Lifeline Sudan. It also used every expedient to ensure delivery of the food supply, particularly to children, in which connection it frequently overlooked violations of its sovereignty in order to ensure the flow of food to children, without distinction, in the areas concerned;

(k) A project has been implemented to subsidize the cost of workers' food;

(l) Workers' salaries have been supplemented with a child allowance;

(m) A target for the improvement of household food security has been set within the framework of the Government's agricultural policies, development programmes and socio-economic programmes;

(n) Small farmers have been able to acquire agricultural facilities through social development banks;

(o) Activities and projects to raise the income of urban and rural families living in poverty have been promoted;

(p) Food centres have been established in states such as Sennar, North Kordofan, Kassala, Red Sea, White Nile, South Darfur and Gezira;

(q) In times of emergency and disaster, such food centres have been set up to distribute food, monitor the growth and development of children and provide other preventive services and treatment;

(r) Natural breast-feeding.

Source: Sudanese Survey of Maternal and Child Health; Arab Project for the Advancement of Children, 1993.

203. The State devoted attention to encouraging breast-feeding and spreading awareness of its benefits, in which context maternal and child health workers received appropriate training. A guide to supplementary feeding for children aged four months was published, together with another guide to children's diets. Substantial time slots have been allocated to the subject of health education on both radio and television, in which connection expansion of the broadcasting networks has had an influential effect, as 96 per cent of infants up to the age of three months are now breast-fed, 45 per cent of infants aged 6-9 months are fed solids in addition to breast milk and 44 per cent of infants aged 23-24 months are still breast-fed.

(j) Immunization measures and achievements

(Source: Federal Ministry of Health, Department of Immunization)

204. In the Sudan, immunization against disease began with an experimental programme in 1976. In 1980, a plan was drawn up to immunize 80 per cent of children between the ages of three months and three years in towns supplied with electricity. By the end of 1984, the plan had accomplished a success

rate of 16 per cent. A five-year plan for the years 1986-1990 was then devised to immunize 80 per cent of children under the age of one year as a global target, which was achieved. In the northern states of the Sudan, 62 per cent of all children were immunized. This rate, however, fell to 51 per cent between 1991 and 1993 as a result of declining foreign support, thus prompting the State to lend generous support to the immunization programme. The rate in all states consequently leapt to 80 per cent by the end of 1996 (see table 8 on immunization). As a result, the number of measles cases 678 per 100,000 inhabitants in 1976 to 53 per 100,000 inhabitants in 1996. The number of cases of diphtheria and whooping cough also fell.

(i) National campaigns to eradicate poliomyelitis among the under-fives in the Sudan

205. Results of the first national campaign in 1994

- First round coverage rate of 88 per cent;
- Second round coverage rate of 65 per cent.

Results of the second national campaign in 1996

- First round coverage rate of 81.67 per cent;
- Second round coverage rate of 84.2 per cent.

Results of the third national campaign in 1997

- First round coverage rate of 87 per cent;
- Second round coverage rate of 90 per cent.

Cases of poliomyelitis in children consequently fell from 252 in 1993 to 51 in 1996.

(ii) Combating tetanus in newborn infants

206. Information concerning tetanus immunization is as follows:

- All 1,562 women targeted in the province of Boram in South Darfur state were immunized in 1995;
- The first round produced a coverage rate of 84.5 per cent;
- The second round produced a coverage rate of 80.7 per cent.

(iii) General measures

207. The results of the general measures adopted are as follows:

- The number of permanent immunization centres in southern Sudan increased from three in 1993 to 35 in 1996;
- The number of immunization centres in rural areas increased from 149 in 1989 to 325 in May 1997;
- The capacity for vaccine storage increased, as eight states were supplied with eight large refrigeration chambers;

- Solar energy was used in the refrigeration chain and the number of refrigerators increased from 175 in 1990 to 325 in May 1997;
- A subsidy was given to the Parasitology Unit at the National Testing Laboratory, which was also refurbished, and the virus for child poliomyelitis was isolated;
- Between 1989 and 1997, a total of 21,066 personnel received training in the expanded immunization programme (see table 8 on immunization).

(iv) Immunization in the areas at highest risk

208. During the national immunization campaign to eradicate child poliomyelitis, a single dose of measles vaccine was also given. A coverage rate of 62 per cent was achieved among children under five years of age. Under-fives in the areas of displacement are given an additional dose of measles vaccine and children under one year have a first inoculation against measles at the age of six months and a booster injection at nine months, as a result of which the incidence of measles has declined in these areas.

209. The overall result of the measles immunization campaign was that the numbers of those contracting the disease fell from 678 per 100,000 children in 1976 to 53 per 100,000 in 1996. The interval between measles epidemics also grew, producing a noticeable transformation in the number of over-fives (aged between 5 and 12 years) contracting the disease, this being the age group at the highest risk. As measles epidemics are now concentrated in children between those ages, a further dose of the vaccine should be given at the age of five years.

(k) Family and reproductive health (arts. 6 and 24)

(Source: Federal Ministry of Health, Department of Maternal and Child Health)

210. In earlier years, the State, in conjunction with WHO and UNICEF, provided training for health personnel, expanded the base of services and the information system and improved the curriculum for maternal and child health. Between 1992 and 1993, training programmes in the field of maternal and child health were conducted in four health districts in the eastern states. A five-year plan was formulated in which the basic staffing and equipment requirements were determined with a view to extending maternal and child services countrywide and providing information on family planning, prenatal care and traditional practices harmful to mothers and children, in particular female circumcision. The plan also determined the requirements of obstetric departments in rural hospitals for the treatment of high-risk cases, emergencies involving mothers and newborn infants and miscarriages. It further specified the training needed by personnel working in maternal and child health clinics, who were provided with information on sexually transmitted diseases and their treatment.

211. It should be pointed out that the implementation of these programmes is seriously hampered by a number of difficulties, which can be summed up as follows:

- (a) Unavailability of the materials and consumable items needed by fully trained midwives, such as thread, anaesthetic and iron tablets;
- (b) Unavailability of the instruments, equipment and first aid items needed by many maternity hospitals and hospital maternity wards;
- (c) Unavailability of outreach services for distribution of the items needed for maternal and child health to other hospitals and rural health facilities.

(l) Drinking water and sanitation

212. The Sudan has an abundance of water resources, including surface water. The capacity of the 100 or so ditches, dams and reservoirs providing these resources ranges between 50,000 and 250,000 cubic metres, in addition to which there is an estimated 900 billion cubic metres of artesian water. Nevertheless, only 35 per cent of the population has access to clean drinking water. It is a well-known fact that 90 per cent of diseases are water-borne, as in the case of malaria and Guinea-worm disease, and that 40 per cent of deaths among children under five years of age are caused by diarrhoea resulting from lack of access to water or the contamination of clean drinking water. The number of cases of diarrhoea can rise to 30 million annually, of which 35 per cent are treated with dehydration salts or with plant preparations. A child has a daily requirement of 20 litres of safe clean water, which should come from a source situated no further than one kilometre away from his or her home. According to the 1993 census, 60 per cent of urban inhabitants have a clean water supply to their homes, which is true for only 20 per cent of rural inhabitants. Further details are provided in the tables below on the basis of information obtained from the National Water Corporation. The following table shows the percentage of water consumption from different sources in 1993.

| <i>Source</i> | <i>Northern states</i> | | <i>Total</i> | <i>Southern states</i> |
|------------------------|------------------------|--------------------|--------------|------------------------|
| | <i>Rural areas</i> | <i>Urban areas</i> | | <i>Urban areas</i> |
| Distribution grids | 20.03 | 65.8 | 35.33 | 7.02 |
| Wells (water stations) | 19.62 | 20.25 | 43.93 | 55.16 |
| Rivers and canals | 56.12 | 2.25 | 10.06 | 30.01 |
| Weirs | 14.09 | 0.59 | 3.35 | 0.24 |
| Ditches and ponds | 4.78 | 7.17 | 3.94 | 5.40 |
| Other sources | 1.39 | 3.82 | 3.92 | 1.74 |
| Unspecified sources | 3.97 | 0.11 | 0.08 | 4.30 |
| Total | 100 | 100 | 100 | 100 |

The following table shows the percentage of citizens with access to means of sanitation.

| <i>Type of service</i> | <i>Northern states</i> | | | <i>Southern States</i> | | |
|------------------------|------------------------|--------------------|--------------|------------------------|--------------------|--------------|
| | <i>Rural areas</i> | <i>Urban areas</i> | <i>Total</i> | <i>Rural areas</i> | <i>Urban areas</i> | <i>Total</i> |
| Sewage system | 0.2 | 2 | 0.8 | - | 0.5 | |
| Cesspools | 38.5 | 56.9 | 44.7 | - | 22.5 | |
| Other | 14.5 | 19.2 | 16.4 | - | 25.6 | |
| None | 46.4 | 21.9 | 38.1 | - | 51.4 | |
| Total | 100 | 100 | 100 | | 100 | |

In 1997, therefore, no more than 24 per cent of inhabitants had access to means of sanitation. It is also worth mentioning that, in 1996, the Sudan had 114,772 cases of Guinea-worm disease, amounting to 78 per cent of all cases worldwide, whereas two years earlier they had amounted to only 32 per cent. The daily consumption of clean drinking water is 20 litres for urban inhabitants and 8 litres for rural inhabitants. Here, it should be pointed out that it is young girls who have the task of fetching water, usually from faraway, and that they manage to obtain only one-third of the amount of water which they need.

213. The measures adopted to provide access to clean drinking water include efforts to:

- Reconstruct and overhaul water systems;

- Plan programmes to construct wells and install manual pumps with low running costs, particularly in rural areas;
- Train technicians to manufacture water equipment locally, the plan for which was half-completed in 1997, as a result of which the consumption of drinking water in urban and rural areas increased as follows:

| 1993 | | | 1996 | |
|--------------------|--------------------|--------------------|--------------------|----|
| <i>Urban areas</i> | <i>Rural areas</i> | <i>Urban areas</i> | <i>Rural areas</i> | |
| 60 | | 20 | 84 | 41 |

214. Similar activities were also carried out by Save the Children-UK. In urban areas, homeowners built their own means of sanitation. A small percentage of inhabitants in Khartoum use the public sewage network. At this juncture, it should be said that there are no statistics on government funding of rural sanitation projects. The limited funding available for rural areas is provided by international organizations, voluntary bodies and local organizations.

- (m) Acquired immune deficiency syndrome (AIDS)
(Source: Federal Ministry of Health, AIDS Office)

215. The State has devoted particular attention to this disease; in 1988, it formed a national committee to combat AIDS under the patronage of the President of the Republic, the membership of which includes all the competent authorities (see annexes). The committee formulated plans and strategies for the prevention of HIV/AIDS, concentrating on the following four areas:

- Raising health awareness based on guidance from the teachings of religion;
- Conducting regular field surveys to determine the number of people with HIV/AIDS;
- Requiring all health establishments to test blood from donors before it is used in order to ensure that it is virus-free;
- Adopting arrangements for the treatment of AIDS patients and HIV-carriers (for further details, see the annexes on AIDS).

At 30 June 1997, the extent of the problem was as follows:

AIDS cases between 1986 and July 1997

| <i>1986-1979</i> | <i>1978</i> | <i>1988</i> | <i>1989</i> | <i>1991</i> | <i>1992</i> | <i>1993</i> | <i>1994</i> | <i>1995</i> | <i>1996</i> | <i>1997</i> |
|------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| 2 | 2 | 64 | 122 | 130 | 184 | 191 | 201 | 250 | 221 | 87 |

For an analytical breakdown and information concerning the type and means of infection, reference should be made to table 11 on AIDS, annexed hereto. Laboratory tests were conducted on a total of 14,801 individuals, 186 of whom were found to be carrying HIV (see table 3 on AIDS, annexed hereto). It is noticeable from the following table that the disease is concentrated among young people and is virtually non-existent in children, even though there are children who carry the virus. The table forecasts the potential increase in the number of people carrying HIV (1992-1998).

| <i>Age group</i> | <i>1992</i> | <i>1998</i> |
|------------------|-------------|-------------|
| 5-14 years | 1 700 | 10 200 |
| 15-19 years | 10 300 | 61 800 |
| 20-49 years | 91 510 | 200 000 |
| Over 50 years | 1 400 | 8 400 |

It can also be seen from the table that a high increase is anticipated in the number of HIV-carriers among both children and adults. In 1992, an estimated average of 14,800 children lost parents to AIDS. This figure clearly indicates that the number is likely to increase in 1998.

(n) Female circumcision

(Source: The Sudanese Society for the Elimination of Harmful Traditional Practices and the 1993 Sudanese Project for the Promotion of Maternal and Child Health)

216. There has long been a general consensus among clerics, community leaders, lawyers and doctors that there are drawbacks to female circumcision and that it has no connection with religion. In 1979, the Babakar Badri Women's Association was formed and thereafter made active and concerted efforts to combat this harmful traditional practice scientifically and through the media. In 1980, a government committee was also established at the Ministry of Interior in order to target female circumcision as a harmful practice to be uprooted from society. This was followed by the birth of the Sudanese Society for the Elimination of Harmful Traditional Practices in 1985 following the African Regional Conference, held in Dakar, and the World Conference to Review and Approve the Achievement of the United Nations Decade for Women, held in Nairobi. The President of the Republic signed the Convention on the Rights of the Child at the New York summit meeting in 1992, following which one of the basic objectives forming part of the overall national strategy was to combat female circumcision. A number of international, foreign and local voluntary organizations, as well as various federations, then joined in activities to combat this harmful social custom, which were also incorporated into the curriculum for the basic stage of education.

Measures adopted to combat female circumcision

217. Efforts to raise public awareness were intensified; each week, entire radio and television programmes were devoted to delivering scientific messages from experts with the aim of combating female circumcision. In addition:

- A film on circumcision and its harmful effects was produced;
- The theatre played a role in combating female circumcision, particularly in the rural areas of Kordofan and Darfur states, where complications from circumcision are clearly implicated in the incidence of urinary problems;
- Over 200,000 copies of various printed materials were produced between 1992 and 1997.

218. Training was provided for members of groups having a direct link with the public and with maternal and child health, such as clerics and midwives, with a view to effectively driving the message home.

219. The Sudan celebrates a national day to combat harmful traditional practices, which each year coincides with the beginning of the fourth week of September. All sectors join in conveying the message to society in the form of different activities which lay particular emphasis on the practice of female circumcision.

220. At the congress of state governors held in 1995, each *wali* made a commitment to open an office to combat harmful traditional practices in his state.

221. A round table on female circumcision was organized under the banner of "Language, religion, law and custom". Participants included eminent Sudanese personalities in the fields of literature, culture and law.

222. In 1992, a countrywide survey was conducted, the findings of which were as follows:

- 80 per cent of women were in favour of female circumcision and 20 per cent were against;
- Of those in favour, 72 per cent cited reasons of custom, 16 per cent believed circumcision to be in the girl's interest and 12 per cent believed in it on religious grounds (see the table of indicators, annexed hereto);
- In 1991, 1992, 1993, 1995 and 1997, the Netherlands Government evaluated the effect of media campaigns and other activities aimed at combating female circumcision, as did Save the Children-Sweden in 1992, as a result of which it emerged that:
 - Rural inhabitants were aware of the harmful effects of the practice;
 - Female circumcision and its harmful effects were frequently discussed by men, women and clerics in both urban and rural areas;
 - There was a clear move away from the Pharaonic method of circumcision towards less harmful methods, although the efforts to combat the practice focused on all methods.

Further details can be found in table 12 on harmful traditional practices and in the table of indicators, annexed hereto.

(o) International support in the field of health (article 24)

223. Until 1990, international support was constantly forthcoming from various organizations and from the agencies of the United Nations. Thereafter, however, it began to decline, signalling an enormous setback for health programmes in that it delayed achievement of their objectives. This support had focused on advisory services, which increased from 3.6 per cent in 1994-1995 to 24.9 per cent in 1996-1997.

Amount of support provided by international organizations to the health sector

| <i>Organization</i> | <i>Years</i> | <i>Budget in dollars</i> |
|--|--------------|--------------------------|
| WHO | 1994-1995 | 4 417 600 |
| | 1996-1997 | 4 783 600 |
| UNICEF | 1996 | 1 534 813 |
| | 1997 | 2 544 154 |
| United Nations Population Fund (UNPFA) | 1995-1996 | 4 013 126 |
| United Nations Development Fund (UNDP) | 1990-1995 | 600 000 |
| Total | | 17 893 293 |

- For the amount of support provided by voluntary organizations, see table 13-1, annexed hereto.
- For the State health budget for 1991-1996 in millions of Sudanese pounds, see table 13-2, annexed hereto.
- Bilateral agreements: All bilateral health agreements signed with other States focus on the exchange of experience and information, without any specific financial commitment. Grants and donations are normally dependent on circumstance and on donor contacts and initiatives.
- It should be pointed out that WHO provides support in the form of 44 health projects, with particular emphasis on malaria, which is a major source of concern for the State; the amount of such support stood at \$407,000 obtained from the budget and a further \$530,000 obtained from extra-budgetary sources.

(p) The health information system: registration of births and deaths

224. Still one of the country's major stumbling blocks, the registration system now includes all dispensaries, health centres and hospitals. Village midwives are also required to notify births to the health centres on a regular basis. The registration rate currently stands at 40 per cent and is targeted to reach 100 per cent by the year 2000.

(i) Measures adopted for the registration of births and deaths

225. Promulgated in 1992, the Registration of Births and Deaths Act stipulates that all births and deaths throughout the country must be entered in the general register of births and deaths maintained by the director of the Central Office of Statistics, who has delegated his powers to the Under-Secretary of the Federal Ministry of Health, as all the vital events occur in the areas under his supervision. The Second and Fourteenth Constitutional Decrees also state that statistics should be maintained at the federal and state levels. The powers vested in the Federal Ministry of Health by the Council of Ministers in 1995 also include vital statistics as part of the mandate of both federal and state ministries of health. The registration rate for urban and rural areas, however, still stands at only 40 per cent and is particularly low in rural areas, as the registration of births is dependent on midwives, who submit monthly reports on village births to the medical director of the nearest rural hospital. On that basis, they then receive the instruments, equipment and materials which they need to perform deliveries, which are a rare occurrence in rural hospitals. The rate of registration is still low, although the requirement of a birth certificate for school admission and for the appraisal of housing applications may promote an increase. The decision to conduct the Sudanese Survey on Maternal and Child Health as part of the 1993 Arab Project for the Advancement of Children represented a significant measure, as the results serve as a foundation for sound planning to improve maternal and child health in the Sudan.

(q) Health education

226. The expansion of the radio and television network has helped to convey the message to the public at large. Various personnel have received health education training and some states have seen the establishment and essential equipment of health education units. The subject of health education has also been introduced as part of the curriculum in schools, institutes and colleges and a project to educate parents with a view to enhancing childcare and child development is currently being considered by UNICEF with a view to funding and subsequent implementation. One of the aims of the project is to increase the knowledge and skills of parents, families and teachers concerning child education and development and enable them to bring out the hidden talents of the child by means of developmental,

educational and health practices. It also aims to educate teachers, health personnel and social workers through the media, as well as alert decision-makers and executives to the substance of the subject in order to ensure that they prioritize children at every level of the relevant development programmes. For a period of two years, developmental, educational, social and cultural messages of relevance to children under eight years of age are to be transmitted on the radio and television for half an hour each week. In addition, publications containing these messages will be produced for pre-school children and school pupils to give to their parents. The messages will also explain the techniques and factors which help to stimulate a child's intelligence, growth and development.

(r) Size of the State health budget

227. The health budget amounted to 491 million Sudanese pounds for the years 1991-1992, rising to 32.757 million Sudanese pounds in 1996 (see the budget tables annexed hereto). In 1997, the health sector's share of the national income amounted to no more than 1 per cent. It should be pointed out here that a substantial contribution was made at the grass-roots and sectoral levels through the construction of health facilities ranging from clinics to hospitals; if monitored and evaluated, that contribution would be shown to equal State spending on the health sector.

C. Social security and childcare services and facilities
(arts. 26 and 18, para. 3)

1. Health insurance

228. The Health Insurance Act was promulgated in 1994 and provides for a system of compulsory insurance in which the amount of contribution paid by each individual is determined on the basis of monthly income. Under the Act, a worker and his family benefit from whatever number of health services they require, irrespective of family size. The initial amount of contribution is set at 10 per cent, 4 per cent of which is paid by the worker from his monthly wage and the remaining 6 per cent of which is paid by the employer. Workers pay 25 per cent towards the cost of medicines. All individual family members continue to enjoy this service until marriage in the case of girls and until 18 years of age in the case of boys, or 24 years of age if they are still at university. One of the main features of the health insurance in the Sudan is that, in conjunction with the social solidarity funds and the *zakat* (alms tax) fund, it covers treatment for the poor and needy and for orphans and families of martyrs, without distinction as to sex, race or religion.

229. The compulsory nature of health insurance ensures that all segments of society, including children, have access to and are assured of medical services as a right at such time as they need them, in consistency with article 6 of the Convention on the Rights of the Child concerning the right of the child to life, survival and development. The principle of sharing the risk of illness among the greatest number of people is also achieved, as the cost of medical treatment to the individual is reduced owing to the fact that social security and solidarity are shared among high-income and low-income earners on the one hand and among those individuals who experience few illnesses and those who frequently attend to see medical personnel. A further factor in the equation is that some individuals have no family dependents but still contribute to the health insurance system.

The objectives of health insurance in the Sudan are, *inter alia*:

(a) To promote and develop health services in line with developments in the field of medicine;

- (b) To help to reduce the financial burden on the State and subsequently channel funding into restoring the health of the environment and fighting epidemics;
- (c) To invest the funds of the General Organization for Health Insurance with a view to improving health services;
- (d) To attract qualified personnel to the health sector by creating an appropriate working climate, in which connection it should be pointed out that the Ministry of Finance pays a monthly sum of 160 million Sudanese pounds towards health insurance costs.

By September 1997, the health insurance system had been introduced in 14 states, namely Khartoum, Sennar, Blue Nile, Gezira, Red Sea, River Nile, White Nile, North Darfur, West Darfur, North Kordofan, West Kordofan, Kassala, Northern and Gedaref, the hope being that it will be extended to all states. Activities and the material and financial support provided are shown in tables 4-1 and 14-2.

D. Standard of living
(art. 27, paras. 1-3)

(a) Measures

230. As for the measures adopted to ensure a standard of living adequate for the child's physical, mental, spiritual, moral and social development, social programmes have been implemented with a view to alleviating the burden of living costs for the poor and vulnerable segments of society. Various institutions have been established under these programmes, including the Zakat Office, the Fund for the Promotion of Shariah Law, the Students' Support Fund, the Programme for Productive Families, the Fund for Independent Traders and Small Industries and the Fund for Agriculture and the Traditional Sector, as well the Savings and Social Development Bank. A project has also been established to use alms tax (*zakat*) for the benefit of residential districts and villages.

231. In the past five years, pay structures have been regularly modified with the aim of achieving a social balance and protecting vulnerable groups. A number of benefits and allowances were also introduced, such as the cost-of-living allowance, the married couple's allowance, housing benefit and cash benefit, and the Zakat Office began to play a more active role insofar as 50 per cent of the revenue from alms tax is now earmarked to provide support for the poor and needy. In addition, the Programme for Productive Families started to provide individual and communal projects with their own means of production. The Savings and Social Development Bank was established in 1995 with a view to tackling poverty and enabling small producers, craftspersons and productive families to improve their productivity. It now has 31 branches in various states and finances social development plans and projects run by local communities, which are therefore able to make plans under the programme to provide small industries and productive families with their own means of production. Such projects are additionally financed by the Zakat Fund, the State Support Fund and various federal government deposits intended specifically for rural development. The use of alms tax to benefit residential districts and villages is now an important factor in local development and in achieving fellow understanding and institutional solidarity. Although only recent, this experiment has already been quite successful, notwithstanding the obstacles which accompanied it and the fall in real incomes which occurred as a result of high inflation rates. Some families have therefore managed to achieve self-sufficiency, particularly in food.

232. It is worth pointing out that, in 1997, the Ministry of Finance and National Economy, the Zakat Office and Khartoum state together supported productive families to the tune of 7 billion Sudanese pounds (Source: Ministry of Finance and National Economy). Similar support was also earmarked for the poor,

the needy and students in every state of the Sudan. Social support included help with electricity bills for poor families, food for workers and subsidies for workers' economic institutions provided in association with the General Federation of Sudan Workers' Trade Unions. In the 1998 budget, the estimated social support allocation rose to 11 billion Sudanese pounds, resulting in an increase of 47 per cent in the cost-of-living subsidy for disadvantaged groups. This increase covers 20 per cent of wages.

233. The family support and protection measures to be adopted in order to ensure the right of every child to an adequate standard of living will take the form of supplying one million families with their own means of production. This will take place over the next 10 years at a rate of 1,000 productive families per year and at an annual cost of 2 billion Sudanese pounds, amounting to a total of 20 billion Sudanese pounds.

Table 2: Child and infant mortality rate over 10 years

| <i>Mortality rate</i> | <i>First five years</i> | | | <i>Last five years</i> | | |
|---|-------------------------|--------------|--------------|------------------------|--------------|--------------|
| | <i>Urban</i> | <i>Rural</i> | <i>Total</i> | <i>Urban</i> | <i>Rural</i> | <i>Total</i> |
| Mortality rate among infants aged under one month | 36.3 | 29.7 | 31.6 | 26.6 | 29.9 | 29.4 |
| Mortality rates among infants aged 1-11 months | 34.7 | 39.0 | 37.5 | 30.6 | 37.9 | 3.4 |
| Mortality rates among infants aged under one year | 69.9 | 68.7 | 69.1 | 59.2 | 67.8 | 64.9 |
| Mortality rate among children aged under four years | 32.7 | 63.8 | 53.1 | 36.2 | 50.0 | 45.3 |
| Mortality rate among children aged under five years | 100.4 | 128.2 | 118.5 | 93.2 | 114.4 | 107.2 |

Malaria tables

Cases of malaria and ensuing deaths during the period 1990-1995

Table 1

| <i>Year</i> | <i>Number of cases</i> | <i>Deaths</i> |
|-------------|------------------------|---------------|
| 1990 | 295 505 | 215 |
| 1991 | 353 679 | 394 |
| 1992 | 281 359 | 503 |
| 1993 | 363 732 | 703 |
| 1994 | 246 154 | 575 |
| 1995 | 234 267 | 444 |
| Total | 1 769 696 | 2 834 |

Source: Federal Ministry of Health – Malaria Office.

Measures adopted to combat malaria during the period 1990-1997

Insecticides in the period 1990-1997

Table 2

Insecticide and quantity in tons

| <i>Source</i> | <i>Fenitrothion</i> | <i>Malathion</i> | <i>DDT</i> | <i>Abate</i> | <i>Ritalin</i> |
|-------------------|---------------------|------------------|------------|--------------|----------------|
| Japanese donation | 200 | - | - | - | - |
| World Bank | - | 147 | - | 0.24 | 2.8 |
| WHO | - | 117 | 126 | 26 | 7.5 |
| Total | 200 | 264 | 126 | 26.24 | 10.3 |

Source: Federal Ministry of Health – Malaria Office.

Malaria drugs

Thirty per cent of the annual budget provided to the Sudan by WHO is allocated to combating malaria. The order for tablets, ampoules and vaccines of chloroquine, Fansidar tablets, quinine tablets and vaccines and primaquine is estimated on the basis of the annual demand.

Table 2
Child and infant mortality rates during the 10 years preceding the survey conducted in 1993 in urban and rural areas

| <i>Mortality rate</i> | <i>First five years</i> | | | <i>Last five years</i> | | |
|--|-------------------------|--------------|--------------|------------------------|--------------|--------------|
| | <i>Urban</i> | <i>Rural</i> | <i>Total</i> | <i>Urban</i> | <i>Rural</i> | <i>Total</i> |
| Mortality rate in infants aged under one month | 35.3 | 29.7 | 31.6 | 0.6 | 29.9 | 29.4 |
| Mortality rates in infants aged 1-11 months | 34.7 | 29.0 | 37.5 | 0.6 | 37.9 | 35.4 |
| Mortality rates in infants aged under one year | 69.9 | 68.7 | 69.1 | 0.2 | 67.8 | 64.9 |
| Mortality rate in children aged 1-4 years | 32.7 | 63.8 | 53.1 | 0.2 | 50.0 | 45.3 |
| Mortality rate in children aged five years | 100.4 | 138.2 | 128.5 | 118.2 | 114.4 | 107.2 |

Source: 1993 Sudanese Survey of Maternal and Child Health (Arab Project for the Advancement of Children).

3. Training in the field of malaria

Groups trained during the period 1990-1997

| <i>Doctors</i> | <i>Medical assistants</i> | <i>Technicians</i> | <i>Health assistants</i> | <i>Malaria analysts</i> | <i>Health officers</i> |
|----------------|---------------------------|--------------------|--------------------------|-------------------------|------------------------|
| 350 | 130 | 632 | 1 520 | 1 287 | 368 |

Source: Federal Ministry of Health – Malaria Office.

4. Budgets provided by WHO during the period 1990-1997 (in thousands of dollars)

| <i>1991/92</i> | <i>1992/93</i> | <i>1993/94</i> | <i>1994/95</i> | <i>1995/96</i> | <i>1996/97</i> | <i>Total</i> |
|----------------|----------------|----------------|----------------|----------------|----------------|--------------|
| 600 | 700 | 990 | 900 | 600 | 407 | 4 197 |

Source: Federal Ministry of Health – Malaria Office.

Table 3
Information on the new states, 1995-1996
Health establishments, 1995

| <i>States</i> | <i>Hospitals</i> | <i>Beds</i> | <i>Hospitals offering consultant services</i> | <i>Special hospitals</i> | <i>Blood banks</i> | <i>Radiography units</i> | <i>Health centres</i> | <i>Dispensaries</i> | <i>Clinics</i> | <i>Primary health care units</i> |
|----------------------------|------------------|-------------|---|--------------------------|--------------------|--------------------------|-----------------------|---------------------|----------------|----------------------------------|
| Federal Ministry of Health | 18 | 3713 | 5 | 13 | 7 | 14 | - | - | - | - |
| Khartoum | 18 | 1096 | 6 | 3 | 4 | 12 | 89 | 194 | 59 | 31 |
| Gezira | 36 | 2611 | 6 | 1 | 6 | 6 | 135 | 241 | 484 | 119 |
| White Nile | 14 | 1149 | 4 | - | 2 | 2 | 38 | 74 | 68 | 193 |
| Sennar | 11 | 1002 | 5 | - | 2 | 2 | 19 | 101 | 299 | - |
| Nile | 17 | 1259 | 4 | - | 2 | 3 | 91 | 97 | 89 | 73 |
| Northern | 24 | 1314 | 5 | - | 3 | 6 | 43 | 116 | 56 | 62 |
| Kassala | 10 | 1205 | 2 | 2 | 2 | 2 | 15 | 37 | 63 | 129 |
| Gedaref | 11 | 1016 | 3 | - | 1 | 1 | 15 | 57 | 79 | 107 |
| Red Sea | 7 | 847 | 1 | - | 1 | 2 | 7 | 32 | 23 | 201 |
| North Kordofan | 13 | 1169 | 3 | 1 | 1 | 2 | 23 | 70 | 82 | 430 |
| South Kordofan | 6 | 538 | 2 | - | 1 | 2 | 14 | 67 | - | 27 |
| West Kordofan | 9 | 633 | 2 | - | - | 1 | 18 | 38 | 51 | 252 |
| North Darfur | 8 | 650 | 2 | 1 | 1 | 1 | 15 | 40 | 4 | 221 |
| South Darfur | 7 | 598 | 2 | - | 1 | 1 | 12 | 52 | 16 | 289 |
| West Darfur | 3 | 210 | 1 | - | - | 1 | 5 | 41 | 66 | 144 |
| Bahr al-Jabal | 4 | 648 | 1 | 1 | 1 | 2 | - | - | - | - |
| East Equatoria | 3 | 188 | - | - | - | - | 7 | 68 | 39 | 238 |
| West Equatoria | 7 | 354 | - | - | - | - | | | | |
| North Bahr al-Ghazal | 1 | 150 | - | - | - | - | | | | |
| West Bahr al-Ghazal | 2 | 461 | 1 | - | 1 | 1 | 2 | 40 | - | 83 |
| Warap | 3 | 93 | - | - | - | - | | | | |
| Lakes | 3 | 250 | - | - | - | - | | | | |
| Upper Nile | 9 | 662 | 1 | 1 | 1 | 1 | | | | |
| Unity | 2 | 131 | - | - | - | - | 8 | 55 | - | 41 |
| Jonglei | 2 | 200 | - | - | - | - | | | | |
| Total | 253 | 22444 | 57 | 23 | 38 | 64 | 571 | 1478 | 1558 | 2916 |

Source: Federal Ministry of Health – National Centre for Health Information.

Table 4
Type of hospitals, 1995

| <i>States</i> | <i>Teaching hospitals</i> | | | <i>Other non-teaching hospitals</i> | | | <i>Total number of hospitals</i> |
|----------------------|----------------------------|-------------------|--------------|-------------------------------------|-------------------|--------------|----------------------------------|
| | <i>Consultant services</i> | <i>Specialist</i> | <i>Total</i> | <i>Consultant services</i> | <i>Specialist</i> | <i>Total</i> | |
| Federal | 5 | 13 | 18 | - | - | - | 18 |
| Khartoum | 1 | 2 | 3 | 5 | 1 | 9 | 18 |
| Gezira | 1 | 1 | 2 | 5 | - | 29 | 36 |
| White Nile | 1 | - | 1 | 3 | - | 10 | 14 |
| Blue Nile | - | - | - | 1 | - | 4 | 5 |
| Sennar | 1 | - | 1 | 4 | - | 6 | 11 |
| Nile | 2 | - | 2 | 2 | - | 13 | 17 |
| Northern | - | - | - | 5 | - | 19 | 24 |
| Kassala | 1 | - | 1 | 1 | 2 | 6 | 10 |
| Gedaref | 1 | - | 1 | 2 | - | 8 | 11 |
| Red Sea | 1 | - | 1 | - | - | 6 | 7 |
| North Kordofan | 1 | - | 1 | 2 | 1 | 9 | 13 |
| South Kordofan | - | - | - | 2 | - | 4 | 6 |
| West Kordofan | - | - | - | 2 | - | 7 | 9 |
| North Darfur | 1 | - | 1 | 1 | 1 | 3 | 8 |
| South Darfur | 1 | - | 1 | 1 | - | 5 | 7 |
| West Darfur | - | - | - | 1 | - | 2 | 3 |
| Bahr al-Jabal | 1 | - | 1 | - | 1 | 2 | 4 |
| East Equatoria | - | - | - | - | - | 3 | 3 |
| West Equatoria | - | - | - | - | - | 7 | 7 |
| North Bahr al-Ghazal | - | - | - | - | - | 1 | 1 |
| West Bahr al-Ghazal | 1 | - | 1 | - | - | 1 | 2 |
| Warap | - | - | - | - | - | 3 | 3 |
| Lakes | - | - | - | - | - | 3 | 3 |
| Upper Nile | 1 | - | 1 | - | 1 | 7 | 9 |
| Unity | - | - | - | - | - | 2 | 2 |
| Jonglei | - | - | - | - | - | 2 | 2 |
| Total | 20 | 16 | 36 | 37 | 7 | 173 | 253 |

Source: Federal Ministry of Health. National Centre for Health Information.

Table 5
Ministry of Health and University doctors in 1995

| <i>Doctors/Work location</i> | <i>Consultants</i> | <i>Locum tenentes</i> | <i>General practitioners</i> | <i>Dentists</i> | <i>House physicians</i> | <i>Total number of doctors</i> | <i>Pharmacists</i> |
|------------------------------|--------------------|-----------------------|------------------------------|-----------------|-------------------------|--------------------------------|--------------------|
| Doctor Training Department | - | - | - | - | 449 | 449 | - |
| Federal Ministry of Health | 315 | 181 | 274 | 90 | - | 860 | 154 |
| Khartoum | 33 | 3 | 130 | 40 | - | 206 | 34 |
| Gezira | 61 | - | 109 | 17 | - | 187 | 42 |
| White Nile | 22 | - | 36 | 4 | - | 62 | 3 |
| Blue Nile | 8 | - | 11 | 2 | - | 21 | 5 |
| Sennar | 15 | - | 22 | 5 | - | 42 | 5 |
| Nile | 20 | - | 34 | 9 | - | 63 | 2 |
| Northern | 17 | - | 36 | 4 | - | 57 | - |
| Kassala | 19 | - | 37 | 7 | - | 63 | 5 |
| Gedaref | 19 | - | 34 | 3 | - | 56 | 5 |
| Red Sea | 22 | - | 43 | 11 | - | 76 | 2 |
| North Kordofan | 23 | - | 4 | 8 | - | 78 | 12 |
| South Kordofan | 4 | - | 12 | 1 | - | 17 | 3 |
| West Kordofan | 4 | - | 11 | - | - | 15 | - |
| North Darfur | 9 | - | 39 | 1 | - | 49 | 4 |
| South Darfur | 13 | - | 27 | 2 | - | 42 | 4 |
| West Darfur | 2 | - | 10 | 1 | - | 13 | 4 |
| Bahr al-Jabal | 1 | - | 22 | - | - | 23 | 6 |
| East Equatoria | - | - | 4 | - | - | 4 | - |
| West Equatoria | - | - | 6 | - | - | 6 | - |
| North Bahr al-Ghazal | - | - | 9 | - | - | 13 | - |
| West Bahr al-Ghazal | - | - | 13 | - | - | 13 | - |
| Warap | - | - | - | - | - | - | - |
| Lakes | - | - | 1 | - | - | 1 | - |
| Upper Nile | 2 | - | 20 | - | - | 22 | - |
| Unity | - | - | 3 | - | - | 3 | - |
| Jonglei | - | - | 1 | - | - | 1 | - |
| Total | 609 | 184 | 991 | 205 | 449 | 2438 | 290 |

Source: Federal Ministry of Health. National Centre for Health Information.

Table 5 (continued)
Technicians and their work locations

| <i>Technicians / Work locations</i> | <i>Laboratory technicians</i> | <i>Radio-graphy techn.</i> | <i>Ophthalmic technicians</i> | <i>Radio-therapy techn.</i> | <i>EEG</i> | <i>ECG</i> | <i>Dental Techniciens</i> | <i>Senior nurses</i> | <i>Statisticians</i> | <i>Total number of technicians</i> |
|-------------------------------------|-------------------------------|----------------------------|-------------------------------|-----------------------------|------------|------------|---------------------------|----------------------|----------------------|------------------------------------|
| Federal Ministry of Health | 133 | 124 | 51 | 6 | 1 | 5 | 9 | 267 | 132 | 769 |
| Khartoum | 19 | 13 | 5 | - | - | - | - | 13 | 150 | 200 |
| Gezira | 6 | 17 | 15 | - | - | - | - | 28 | 69 | 135 |
| White Nile | 2 | 9 | 5 | - | - | - | - | 3 | 37 | 56 |
| Blue Nile | - | 1 | - | - | - | - | - | 3 | 3 | 7 |
| Sennar | 1 | 6 | 3 | - | - | - | - | 4 | 17 | 31 |
| Nile | - | 7 | 7 | - | - | - | 2 | 9 | 20 | 45 |
| Northern | 1 | 5 | 4 | - | - | - | - | 1 | 19 | 30 |
| Kassala | 5 | 4 | 4 | - | - | - | - | 4 | 23 | 40 |
| Gedaref | 3 | 2 | 3 | - | - | - | - | 5 | 10 | 23 |
| Red Sea | 6 | 5 | - | - | - | - | - | 5 | 12 | 28 |
| North Kordofan | 5 | 7 | 6 | - | - | - | - | 10 | 35 | 63 |
| West Kordofan | - | 2 | - | - | - | - | - | 2 | 6 | 10 |
| North Darfur | - | 2 | 1 | - | - | - | - | 14 | 13 | 30 |
| South Darfur | - | 3 | 3 | - | - | - | - | 8 | 21 | 34 |
| West Darfur | - | 1 | - | - | - | - | - | 2 | 13 | 16 |
| Equatoria | - | 10 | - | - | - | - | - | 12 | 37 | 59 |
| Bahr al-Ghazal | - | 3 | - | - | - | - | - | - | 24 | 27 |
| Upper Nile | - | 4 | - | - | - | - | - | - | 14 | 18 |
| Total | 181 | 226 | 106 | 6 | 1 | 5 | 11 | 393 | 704 | 1633 |

The figures for the southern states represent the number of technicians posts in 1987.

Source: Federal Ministry of Health. National Centre for Health Information.

Table 5 (continued)
Medical assistants in 1995

| <i>Assistants/ Work locations</i> | <i>General medical assistants</i> | <i>Ophthalmic assistants</i> | <i>Dental assistants</i> | <i>Assistant neurologists and psychiatrists</i> | <i>Theatre assistants</i> | <i>Ophthalmic theatre assistants</i> | <i>Laboratory assistants</i> | <i>Assistant pharmacists</i> | <i>Assistants anaesthesists</i> | <i>Physio- therapists</i> | <i>Nursing instructors</i> | <i>Primary health care instructors</i> | <i>Total</i> |
|---|---|----------------------------------|------------------------------|---|-------------------------------|--|----------------------------------|----------------------------------|-------------------------------------|-------------------------------|--------------------------------|--|--------------|
| Federal Ministry of Health | 1 | 29 | - | 9 | 326 | 30 | 120 | 138 | 117 | 95 | 57 | - | 932 |
| Khartoum | 299 | 98 | 53 | 2 | 28 | - | 68 | 73 | 17 | 2 | 15 | 4 | 659 |
| Gezira | 289 | 34 | 29 | 10 | 87 | - | 54 | 31 | 31 | 16 | 27 | 4 | 612 |
| White Nile | 90 | 9 | 8 | 1 | 32 | 1 | 19 | 13 | 14 | 6 | 9 | 2 | 204 |
| Blue Nile | 59 | 4 | 6 | - | 8 | 1 | 6 | 7 | 3 | 3 | 6 | 1 | 104 |
| Sennar | 99 | 9 | 13 | 3 | 36 | 4 | 25 | 21 | 5 | 4 | 10 | 1 | 230 |
| Nile | 106 | 10 | 11 | 3 | 30 | 6 | 23 | 22 | 12 | 8 | 12 | 2 | 245 |
| North State | 166 | 20 | 23 | - | 31 | 4 | 22 | 10 | 13 | 3 | 12 | 2 | 306 |
| Kassala | 100 | 16 | 19 | 3 | 23 | - | 21 | 24 | 14 | 4 | 17 | 4 | 245 |
| Gedaref | 67 | 6 | 4 | 2 | 20 | 2 | 16 | 9 | 12 | 3 | 8 | 2 | 151 |
| Red Sea | 69 | 14 | 2 | - | 34 | - | 18 | 7 | 18 | 8 | 8 | 5 | 183 |
| North Kordofan | 98 | 22 | 21 | 2 | 36 | 5 | 23 | 19 | 18 | 12 | 16 | 5 | 277 |
| South Kordofan | 95 | 7 | 5 | - | 17 | - | 13 | 7 | 14 | 4 | 13 | 5 | 180 |
| West Kordofan | 47 | 8 | 9 | - | 8 | - | 8 | 9 | 3 | 2 | 10 | 2 | 106 |
| North Darfur | 115 | 22 | 19 | 3 | 17 | 4 | 21 | 16 | 15 | 3 | 13 | 1 | 249 |
| South Darfur | 74 | 8 | 10 | 1 | 12 | 6 | 13 | 10 | 10 | 6 | 7 | 4 | 161 |
| West Darfur | 44 | 5 | 4 | - | 4 | - | 5 | 4 | 2 | - | 5 | 1 | 74 |
| Equatoria | - | - | - | - | - | - | 59 | - | - | - | - | - | 59 |
| Bahr al- Ghazal | 57 | 11 | 14 | - | 46 | 15 | 46 | 25 | 20 | - | 6 | 9 | 249 |
| Upper Nile | - | - | - | - | - | - | 21 | - | - | - | - | - | 21 |
| Total | 1875 | 332 | 250 | 39 | 795 | 78 | 611 | 445 | 338 | 179 | 251 | 54 | 5247 |

The figures represent the number of medical assistant costs in 1987. The actual number of posts occupied in the southern states is, however, unknown.

Source: Federal Ministry of Health. National Centre for Health Information.

Table 5 (continued)
Nurses in 1995

| <i>Nurses/State</i> | <i>Nurses with diplomas</i> | <i>Nursing midwives</i> | <i>Trainee nurses</i> | <i>Total number of nurses</i> | <i>Primary health care workers</i> |
|----------------------------|-----------------------------|-------------------------|-----------------------|-------------------------------|------------------------------------|
| Federal Ministry of Health | 1,655 | 116 | 931 | 2,702 | - |
| Khartoum | 655 | 15 | 571 | 1,241 | 50 |
| Gezira | 1,915 | 94 | 538 | 2,547 | 111 |
| White Nile | 509 | 17 | 158 | 684 | 215 |
| Blue Nile | 140 | 12 | 170 | 322 | 83 |
| Sennar | 577 | 30 | 143 | 750 | 44 |
| Nile | 583 | 27 | 272 | 882 | 74 |
| Northern | 482 | - | 206 | 688 | 88 |
| Kassala | 489 | 41 | 176 | 706 | 157 |
| Gedaref | 387 | 16 | 110 | 513 | 107 |
| Red Sea | 326 | - | 201 | 527 | 228 |
| North Kordofan | 641 | - | 224 | 865 | 290 |
| South Kordofan | 343 | - | 109 | 452 | 126 |
| West Kordofan | 206 | - | - | 206 | 172 |
| North Darfur | 239 | 23 | 228 | 490 | 221 |
| South Darfur | 309 | 8 | 211 | 528 | 310 |
| West Darfur | 68 | - | 40 | 108 | 142 |
| Equatoria | 682 | 18 | 547 | 1,247 | - |
| Bahr al-Ghazal | 611 | 7 | 395 | 1,013 | - |
| Upper Nile | 309 | 37 | 565 | 711 | - |
| Total | 11,126 | 461 | 5,595 | 17,182 | 2,418 |

Source: Federal Ministry of Health – National Centre for Health Information.

Tableau 5 (continued)
Other maternal and child health care assistants in 1995

| <i>States</i> | <i>Health visitors</i> | <i>Assistant health visitors</i> | <i>Nursing midwives</i> | <i>Traditional midwives</i> | <i>Nutrition officers</i> | <i>Nutritional advisors</i> |
|----------------------------|------------------------|----------------------------------|-------------------------|-----------------------------|---------------------------|-----------------------------|
| Federal Ministry of Health | 31 | - | - | - | 29 | - |
| Khartoum | 183 | 1 | 792 | 496 | 19 | - |
| Gezira | 122 | - | 1,053 | 175 | 9 | 7 |
| White Nile | 35 | - | 730 | 75 | - | - |
| Blue Nile | 18 | - | 80 | 140 | - | - |
| Sennar | 28 | - | 582 | 90 | 2 | - |
| Nile | 38 | 102 | 386 | - | 1 | - |
| Northern | 31 | 35 | 417 | - | - | - |
| Kassala | 40 | - | 286 | 160 | 6 | 8 |
| Gedaref | 18 | - | 303 | 175 | 1 | - |
| Red Sea | 34 | 14 | 236 | - | 1 | - |
| North Kordofan | 62 | - | 493 | 173 | - | - |
| South Kordofan | 62 | - | 493 | 173 | - | - |
| West Kordofan | 32 | - | 219 | 43 | - | - |
| North Darfur | 29 | - | 374 | 220 | 3 | - |
| South Darfur | 28 | - | 274 | 268 | - | - |
| West Darfur | 13 | - | 250 | 87 | - | 2 |
| South Sudan | 57 | - | 148 | 50 | - | - |
| Total | 835 | 152 | 6,784 | 2,235 | 71 | 4 |

Source: Federal Ministry of Health – National Centre for Health Information.

Table 5 (continued)
Environmental health personnel

| <i>States</i> | <i>Environmental health inspectors</i> | <i>Environmental health officers</i> | <i>Environmental health supervisors</i> | <i>Assistant environmental health supervisors</i> |
|---|--|--|---|---|
| Main office of the Federal Ministry of Health | 22 | - | 5 | - |
| Khartoum | 12 | 30 | 145 | 271 |
| Gezira | 23 | 26 | 120 | - |
| White Nile | 9 | 10 | 63 | - |
| Blue Nile | 4 | 3 | 13 | 30 |
| Sennar | 7 | 2 | 38 | 98 |
| Nile | 6 | 13 | 52 | 81 |
| Northern | 4 | 8 | 47 | 56 |
| Kassala | 4 | 7 | 56 | 35 |
| Gedaref | 8 | 3 | 57 | 71 |
| Red Sea | 3 | 3 | 27 | 42 |
| North Kordofan | 5 | 8 | 48 | 31 |
| South Kordofan | - | 3 | 29 | - |
| West Kordofan | 1 | 1 | 12 | 9 |
| North Darfur | 1 | 4 | 31 | 36 |
| South Darfur | 7 | 8 | 84 | 20 |
| West Darfur | 3 | 2 | 11 | 21 |
| Total | 119 | 131 | 838 | 801 |

Source: Federal Ministry of Health – National Centre for Health Information.

Table 6
1. Technical institutes and colleges

| <i>No.</i> | <i>Name of institute or college</i> | <i>Date of opening</i> |
|------------|-------------------------------------|------------------------|
| 1 | Institute of Laboratory Technicians | 1970 |
| 2 | Radiography Technicians Institute | 1970 |
| 3 | College of Nursing | 1958 |
| 4 | College of Obstetrics | - |
| 5 | Institute of Optical Technicians | 1954 |
| 6 | College of Health | 1933 |
| 7 | Institute of Technical Training | - |
| 8 | Institute of Health Statistics | 1977 |

2. Schools for general medical assistants

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|--|------------------------|
| 1 | Omdurman School for General Medical Assistants | 1946 |
| 2 | Al-Obeid School for General Medical Assistants | 1970 |
| 3 | Port Sudan School for General Medical Assistants | 1975 |
| 4 | Atbara School for General Medical Assistants | 1971 |
| 5 | Sennar School for General Medical Assistants | 1985 |
| 6 | Juba School for General Medical Assistants | - |

Source: Federal Ministry of Health – National Centre for Health Information.

3. Laboratory assistants

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|---|------------------------|
| 1 | Khartoum School for Laboratory Assistants | 1909 |
| 2 | Atbara School for Laboratory Assistants | - |
| 3 | Port Sudan School for Laboratory Assistants | June 1983 |
| 4 | Al-Obeid School for Laboratory Assistants | August 1983 |
| 5 | Juba School for Laboratory Assistants | - |
| 6 | Wad Madani School for Laboratory Assistants | 1984 |
| 7 | Dongola School for Laboratory Assistants | 1996 |

4. Schools for health attendants

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|---|------------------------|
| 1 | Khartoum School for General Theatre attendants | 1966 |
| 2 | Khartoum School for Ophthalmic Theatre Attendants | 1945 |
| 3 | Wad Madani School for Theatre Attendants | 1971 |
| 4 | Wad Madani School for Ophthalmic Theatre Attendants | 1975 |
| 5 | Port Sudan School for Ophthalmic Theatre Attendants | - |
| 6 | Juba School for Theatre Attendants | - |
| 7 | Al-Obeid School for Theatre Attendants | - |
| 8 | Dongola School for General Theatre Attendants | 1996 |

5. Schools for medical assistants (various specialist fields)

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|--|------------------------|
| 1 | Khartoum Institute for Nursing | 1994 |
| 2 | Khartoum School for Assistant Pharmacists | 1973 |
| 3 | Khartoum School for Assistant Physiotherapists | 1963 |
| 4 | Khartoum School for Assistant Anaesthetists | 1965 |
| 5 | Khartoum School for Ophthalmic Assistants | 1954 |
| 6 | Omdurman School for Dental Assistants | 1962 |
| 7 | Madani School for Dental Assistants | 1995 |
| 8 | Omdurman School for Assistant Psychiatrists | - |
| 9 | Medani School for Assistant Ophthalmologists | 1995 |
| 10 | Khartoum School for Laboratory Assistants | - |

Source: Federal Ministry of Health – National Centre for Health Information.

6. Schools for health supervisors

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|--|------------------------|
| 1 | Khartoum North School for Environmental Health Supervisors | 1978 |
| 2 | Madani School for Environmental Health Supervisors | 1984 |
| 3 | Juba School for Environmental Health Supervisors | - |

7. Midwifery Schools/Nurses

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|---|------------------------|
| 1 | Omdurman Midwifery and Nursing School | 1920 |
| 2 | Wad Madani Midwifery and Nursing School | 1968 |
| 3 | Al-Obeid Midwifery and Nursing School | 1970 |
| 4 | Fashir Midwifery and Nursing School | 1974 |

8. Schools for health visitors and assistant health visitors

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|---|------------------------|
| 1 | Omdurman School for Health Visitors | 1947 |
| 2 | Madani School for Health Visitors | 1973 |
| 3 | Dami School for Assistant Health Visitors | 1972 |
| 4 | Sennar School for Assistant Health Visitors | 1981 |
| 5 | Dongola School for Health Visitors | 1996 |

Source: Federal Ministry of Health – National Centre for Health Information.

9. Midwifery schools

| <i>No.</i> | <i>Name of school</i> | <i>Date of opening</i> |
|------------|---------------------------------|------------------------|
| 1 | Khartoum North Midwifery School | 1964 |
| 2 | Dongola Midwifery School | 1978 |
| 3 | Atbara Midwifery School | 1955 |
| 4 | Kassala Midwifery School | 1957 |
| 5 | Port Sudan Midwifery School | 1969 |
| 6 | Gedaref Midwifery School | 1973 |
| 7 | Al-Obeid Midwifery School | 1948 |
| 8 | Nahud Midwifery School | 1978 |
| 9 | Kadogli Midwifery School | 1972 |
| 10 | Fashir Midwifery School | 1959 |
| 11 | Geneina Midwifery School | 1959 |
| 12 | Nayala Midwifery School | 1971 |
| 13 | Madani Midwifery School | 1953 |
| 14 | Rufa'a Midwifery School | 1983 |
| 15 | Managil Midwifery School | 1983 |
| 16 | Juba Midwifery School | 1950 |
| 17 | Malakal Midwifery School | 1958 |
| 18 | Wau Midwifery School | 1975 |
| 19 | Sennar Midwifery School | 1970 |
| 20 | Kosti Midwifery School | 1976 |
| 21 | Duwaym Midwifery School | 1974 |
| 22 | Umm Ruwaba Midwifery School | - |
| 23 | Damazin Midwifery School | - |
| 24 | Yambio Midwifery School | Closed |

Source: Federal Ministry of Health – Department of National Health Statistics.

**Number of doctors graduated from the faculties of medicine at the universities
of Kassala, Shendi, Al-Zaim al-Azhari and Bah al-Ghazal**

Kassala University

| <i>Class</i> | <i>Number</i> | <i>Males</i> | <i>Females</i> | <i>Date of graduation</i> |
|--------------|---------------|--------------|----------------|---------------------------|
| First | 113 | 64 | 49 | February 1997 |
| Second | 99 | 58 | 41 | |
| Third | 104 | 71 | 33 | |
| Fourth | 86 | 55 | 31 | |
| Fifth | 60 | 35 | 25 | |
| Sixth | 50 | 31 | 19 | |

Shendi University

| <i>Class and year</i> | <i>Number</i> | <i>Males</i> | <i>Females</i> | <i>Date of graduation</i> |
|-----------------------|---------------|--------------|----------------|---------------------------|
| First – 1990 | 14 | 8 | 6 | 1997 |
| Second – 1991 | 2 | 10 | 11 | 1998 |
| Third – 1992 | 31 | 12 | 19 | 1998 |
| Fourth – 1993 | 30 | 14 | 16 | 1999 |
| Fifth – 1994 | 34 | 20 | 14 | 2000 |
| Sixth – 1995 | 39 | 19 | 20 | 2001 |

Al-Zaim al-Azhari University

| <i>Class and year</i> | <i>Number</i> | <i>Males</i> | <i>Females</i> | <i>Date of graduation</i> |
|-----------------------|---------------|--------------|----------------|---------------------------|
| First – 1994 | 73 | 31 | 42 | |
| Second – 1995 | 67 | 36 | 31 | |
| Third – 1996 | 67 | 19 | 48 | |
| Fourth – 1997 | 0 | 0 | 0 | |
| Fifth – 1998 | 0 | 0 | 0 | |
| Sixth – 1999 | 0 | 0 | 0 | |

Bahr al-Ghazal University

| <i>Class and year</i> | <i>Number</i> | <i>Males</i> | <i>Females</i> | <i>Date of graduation</i> |
|-----------------------|---------------|--------------|----------------|---------------------------|
| First – 1994 | 28 | 18 | 56 | |
| Second – 1995 | 38 | 19 | 19 | |
| Third – 1996 | 49 | 32 | 17 | |
| Fourth – 1997 | 33 | 25 | 8 | |

Source: Federal Ministry of Health – Department of Human Resources Development.

Table 7
Protein deficiency during the period 1991-1996: percentage of dwarfism
(persons of below average height in relation to age)

| <i>No.</i> | <i>State</i> | <i>Year</i> | <i>Severe dwarfism</i> | <i>Average dwarfism</i> |
|------------|------------------------------|-------------|------------------------|-------------------------|
| 1 | White Nile | 1992 | 2.7 | 15.9 |
| | | 1995 | 4.7 | 12.7 |
| 2 | Khartoum (displaced persons) | 1992 | 4.0 | 14.7 |
| | Khartoum | 1996 | 4.7 | 16.4 |
| 3 | North Darfur | 1991 | 3.4 | 16.9 |
| 4 | South Darfur | 1995 | 1.7 | 6.8 |
| 5 | Gedaref | 1995 | 5.3 | 9.3 |
| 6 | Red Sea | 1995 | 9.0 | 16.2 |
| | | 1996 | 12.1 | 21.3 |

Source: Federal Ministry of Health – Department of Nutrition.

Table 8
Personnel trained in the expanded immunization programme

| <i>Personnel</i> | <i>1989</i> | <i>1990</i> | <i>1991</i> | <i>1992</i> | <i>1993</i> | <i>1994</i> | <i>1995</i> | <i>1996</i> | <i>1997</i> | <i>Total</i> |
|-------------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|
| Assistant doctors | 1,869 | 1,817 | 2,121 | - | 348 | 220 | 272 | 242 | 23 | 6,912 |
| Volunteers | 1,415 | 2,190 | 4,370 | - | 86 | 142 | 0 | 48 | 0 | 8,251 |
| Trainers and theatre officers | 90 | 0 | 0 | - | 24 | 23 | 39 | 43 | 26 | 245 |
| Refrigeration technicians | 10 | 5 | 5 | - | 0 | 0 | 6 | 8 | 4 | 38 |
| Solar energy technicians | 24 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | 24 |
| University students | - | 0 | 0 | - | 0 | 161 | 193 | 193 | 0 | 547 |
| Total | 6,408 | 4,945 | 7,588 | - | 458 | 546 | 510 | 558 | 53 | 21,066 |

Source: Federal Ministry of Health – Department of Immunization.

Immunization of children under one year of age over the past eight years countrywide

| <i>Year</i> | <i>Percentage</i> |
|-------------|-------------------|
| 1989 | 40 |
| 1990 | 62.3 |
| 1991 | 62.4 |
| 1992 | 52.6 |
| 1993 | 51 |
| 1994 | 70.7 |
| 1995 | 73.6 |
| 1996 | 80 |

Source: Federal Ministry of Health – Department of Immunization.

Table 9
Disabled persons
Names of institutes and centres, areas of activity, type of management and number of disabled children

| <i>No.</i> | <i>Name of institute or centre</i> | <i>Area of activity</i> | <i>Type of management</i> | <i>Parent authority</i> | <i>Date of establishment</i> | <i>Current number of children</i> | <i>Number of children rehabilitated</i> |
|------------|---|--|---------------------------|---|------------------------------|-----------------------------------|---|
| 1 | Nur Institute for the Blind | Blindness | Government | Ministry of Education | 1960 | 86 | 300 |
| 2 | Salmabi Institute of Hearing and Communication | Speech impairment | Government | Cultural and Social Affairs | 1979 | 105 | 250 |
| 3 | Amal Institute | Speech impairment | Voluntary | National Society for the Welfare of Speech-Impaired Persons | 1973 | 120 | 400 |
| 4 | Sakina Institute for Mental and Physical Disability | Mental disability, speech impairment and physical disability | Voluntary | Sakina Society for Mental and Physical Disabilities | 1985 | 180 | 500 |
| 5 | Basma National Centre for Skills Development | Mental disability | Voluntary | Basma Society | 1986 | 34 | 230 |
| 6 | Children's Advisory Centre | Mental disability | Voluntary | Private | 1994 | 29 | 150 |
| 7 | Fursan al-Irada Centre | Mental disability | Voluntary | Private | 1994 | 26 | - |
| 8 | Ahbab Allah Centre | Mental disability | Voluntary | Private | 1964 | 18 | 32 |
| 9 | ABC Kindergarten | Mental disability | Voluntary | Private | 1995 | 20 | 5 |
| 10 | Psychiatric and Clinical Assessment Centre | Child intelligence and personality assessment | Voluntary | Private | 1996 | Indefinite | 184 |
| 11 | Centre for Young Children | Mental disability | Voluntary | Private | 1996 | 15 | - |
| | Total | | | | | 631 | 2,051 |

Source: Ministry of Social Planning, 1996.

Table 10
1. Disabled children in the northern states by gender

| <i>Gender</i> | <i>Number</i> | <i>Percentage</i> |
|---------------|---------------|-------------------|
| Male | 52,906 | 58.62 |
| Female | 37,342 | 41.38 |
| Total | 90,248 | 100 |

Source: Department of Population Statistics – Central Office of Statistics.

2. Type of disability among children in 1993

| <i>Motor</i> | <i>Speech impairment</i> | <i>Blindness</i> | <i>Multiple</i> | <i>Mental</i> | <i>Other</i> | <i>Unspecified</i> | <i>Total</i> |
|--------------|------------------------------|------------------|-----------------|---------------|--------------|--------------------|--------------|
| 38,390 | 20,749 | 7,277 | 3,157 | 13,069 | 7,258 | 442 | 90,248 |

Source: Department of Population Statistics – Central Office of Statistics.

3. Type of services provided by centres for disabled children in 1993

| <i>No.</i> | <i>Type of services</i> | <i>Percentage</i> |
|------------|-------------------------|-------------------|
| 1 | Educational | 23.4 |
| 2 | Vocational training | 2.1 |
| 3 | Psychiatric counselling | 23.4 |
| 4 | Rehabilitation | 12.9 |
| 5 | Prevention | 14.9 |
| 6 | Early intervention | 10.6 |
| 7 | Employment | 2.1 |
| 8 | Transport | 10.6 |
| 9 | Cash | - |
| | Total | 100 |

Source: Department of Population Statistics – Central Office of Statistics.

HIV/AIDS surveillance report 1994

Country : Sudan

Date of report : 31 December 1994

Period of report: Fourth quarter

| <i>Number of cases</i> | <i>AIDS</i> | <i>ARC</i> | <i>Asymptomatic HIV</i> | <i>Total</i> |
|-----------------------------|-------------|------------|-----------------------------|--------------|
| During the reporting period | 75 | 0 | 126 | 201 |
| Cumulative total | 1,090 | 111 | 1,276 | 2,472 |

AIDS cases by year

| <i>1979- 1986</i> | <i>1987</i> | <i>1988</i> | <i>1989</i> | <i>1990</i> | <i>1991</i> | <i>1992</i> | <i>1993</i> | <i>1994</i> |
|-----------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| 2 | 2 | 64 | 122 | 130 | 188 | 184 | 191 | 201 |

Breakdown of AIDS cases

| <i>Age</i> | <i>During the reporting period</i> | | | | <i>Cumulative total</i> | | | |
|------------|------------------------------------|----------------|----------------|--------------|-------------------------|----------------|----------------|--------------|
| | <i>Males</i> | <i>Females</i> | <i>Unknown</i> | <i>Total</i> | <i>Males</i> | <i>Females</i> | <i>Unknown</i> | <i>Total</i> |
| 4 | 0 | 0 | 0 | 0 | 9 | 2 | 0 | 11 |
| 5-14 | 0 | 1 | 0 | 1 | 10 | 5 | 0 | 15 |
| 15-19 | 0 | 1 | 0 | 1 | 64 | 21 | 0 | 85 |
| 20-29 | 22 | 12 | 0 | 34 | 217 | 111 | 0 | 328 |
| 30-39 | 24 | 6 | 0 | 30 | 374 | 109 | 0 | 483 |
| 40-49 | 5 | 0 | 0 | 6 | 79 | 18 | 0 | 97 |
| 50+ | 2 | 0 | 1 | 3 | 19 | 7 | 2 | 28 |
| Unknown | 0 | 0 | 0 | 0 | 0 | 0 | 43 | 43 |
| Total | 53 | 20 | 1 | 74 | 772 | 273 | 45 | 1,090 |

Modes of AIDS transmission

| <i>Mode</i> | <i>During the reporting period</i> | <i>Cumulative total</i> |
|----------------------|------------------------------------|-------------------------|
| Heterosexual | 75 | 1,065 |
| Homosexual | 0 | 0 |
| Bisexual | 0 | 0 |
| Blood/blood products | 0 | 11 |
| Injecting drug use | 0 | 0 |
| Mother-to-infant | 0 | 14 |
| Total | 75 | 1,090 |

Breakdown of AIDS cases in 1995

| <i>Age</i> | <i>During the reporting period</i> | | | <i>Total</i> |
|------------|------------------------------------|---------------|----------------|--------------|
| | <i>Male</i> | <i>Female</i> | <i>Unknown</i> | |
| 0-4 | 1 | 0 | 0 | 0 |
| 4-14 | 0 | 0 | 0 | 0 |
| 15-19 | 1 | 0 | 0 | 1 |
| 20-29 | 24 | 13 | 0 | 37 |
| 30-39 | 27 | 7 | 0 | 34 |
| 40-49 | 7 | 1 | 0 | 8 |
| 50+ | 2 | 0 | 0 | 2 |
| Unkown | - | - | - | - |
| Total | 62 | 21 | 0 | 83 |

| <i>Cumulative total</i> | | | <i>Total</i> |
|-------------------------|----------------|----------------|--------------|
| <i>Males</i> | <i>Females</i> | <i>Unknown</i> | |
| 13 | 3 | - | 16 |
| 12 | 5 | - | 17 |
| 66 | 21 | - | 87 |
| 291 | 137 | - | 428 |
| 452 | 123 | - | 575 |
| 119 | 23 | - | 142 |
| 23 | 8 | 2 | 33 |
| - | - | 43 | 43 |
| 976 | 320 | 45 | 1,341 |

Mode of AIDS transmission

| <i>Mode</i> | <i>During the reporting period</i> | <i>Cumulative total</i> |
|----------------------|------------------------------------|-------------------------|
| Heterosexual | 80 | 1,308 |
| Homosexual | 0 | 0 |
| Bisexual | 0 | 0 |
| Blood/blood products | 0 | 12 |
| Injecting drug use | 0 | 0 |
| Mother-to-infant | 3 | 21 |
| Total | 83 | 1,341 |

HIV/AIDS surveillance report

Country : Sudan
Date : 20 January 1996
Period of report: 1996

1. Number of cases of HIV/ARC/HIV

| <i>Number of cases</i> | <i>AIDS</i> | <i>ARC</i> | <i>Asymptomatic HIV</i> | <i>Total</i> |
|-----------------------------|-------------|------------|-------------------------|--------------|
| During the reporting period | 221 | 0 | 277 | 498 |
| Cumulative total | 1,562 | 126 | 1,790 | 3,478 |

2. AIDS cases by year

| <i>1979-1989</i> | <i>1987</i> | <i>1988</i> | <i>1989</i> | <i>1990</i> | <i>1991</i> | <i>1992</i> | <i>1993</i> | <i>1994</i> | <i>1995</i> | <i>1996</i> | <i>Total</i> |
|------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|
| 2 | 2 | 64 | 122 | 130 | 188 | 184 | 191 | 201 | 257 | 221 | 1,526 |

HIV/AIDS surveillance report 1995

| <i>Number of cases</i> | <i>AIDS</i> | <i>ARC</i> | <i>Asymptomatic HIV</i> | <i>Total</i> |
|-----------------------------|-------------|------------|-------------------------|--------------|
| During the reporting period | 83 | 0 | 45 | 128 |
| Cumulative total | 1,341 | 126 | 1,513 | 2,984 |

AIDS cases by year

| <i>1979-1986</i> | <i>1987</i> | <i>1988</i> | <i>1989</i> | <i>1990</i> | <i>1991</i> | <i>1992</i> | <i>1993</i> | <i>1994</i> | <i>1995</i> |
|------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| 2 | 2 | 64 | 122 | 130 | 188 | 184 | 191 | 201 | 257 |

3. Cases by age and gender

| <i>Age group</i> | <i>During the reporting period</i> | | | | <i>Cumulative total</i> | | | |
|------------------|------------------------------------|---------------|----------------|--------------|-------------------------|---------------|----------------|--------------|
| | <i>Male</i> | <i>Female</i> | <i>Unknown</i> | <i>Total</i> | <i>Male</i> | <i>Female</i> | <i>Unknown</i> | <i>Total</i> |
| 0-4 | 1 | - | 0 | 1 | 14 | 3 | - | 17 |
| 4-14 | 4 | - | 0 | 4 | 16 | 6 | 0 | 22 |
| 15-19 | 2 | - | 0 | 2 | 68 | 21 | 0 | 89 |
| 20-29 | 63 | 31 | 0 | 49 | 354 | 168 | 0 | 655 |
| 30-39 | 63 | 17 | 3 | 80 | 515 | 140 | 0 | 655 |

Mode of AIDS transmission

| <i>Mode of transmission</i> | <i>During the reporting period</i> | <i>Cumulative total</i> |
|-----------------------------|------------------------------------|-------------------------|
| Heterosexual | 220 | 1,528 |
| Homosexual | 0 | 0 |
| Blood/blood products | 0 | 0 |
| Injecting drug use | 0 | 12 |
| Mother-to-infant | 0 | 0 |
| Unknown | 1 | 22 |
| Total | 221 | 1,562 |

Table 12

1. Voluntary and federal societies active in combating harmful traditional practices, in particular female circumcision

| <i>No.</i> | <i>Society</i> | <i>Parent authority</i> | <i>Area of activity</i> | <i>Remarks</i> |
|------------|---|-----------------------------------|-------------------------|--|
| 1 | Babakar Badri Society for Women | Ahfad University | National | Active since 1997 |
| 2 | Sudanese Society for the Elimination of Harmful Traditional Practices | Voluntary | National | A branch of the African Society for the Elimination of Harmful traditional Customs (IAC) |
| 3 | Hand of Woman Society | Voluntary | Darfur | |
| 4 | Hawa Society | Voluntary | Kordofan | |
| 5 | Working Women's League | Group federation | National | |
| 6 | General Federation of Sudanese Women | General federation | National | |
| 7 | African Society for the Welfare of Children | Society for the African continent | Khartoum | |

Source: Sudanese Society for the Elimination of Harmful Traditional Practices.

2. Departments and special Government programmes dealing with female circumcision

| <i>No.</i> | <i>Department/programme</i> | <i>Parent authority</i> | <i>Date of establishment</i> | <i>Remarks</i> |
|------------|--|---|------------------------------|--|
| 1 | Government Committee to combat female circumcision | Ministry of Social Welfare (at that time) | 1982 | Voluntary societies also included in the membership |
| 2 | National Committee for the coordination of programmes to combat traditional practices harmful to maternal and child health | Federal Ministry of Health and Ministry of Social Planning | 1992 | Established by ministerial ordinance with a view to implementing the strategy |
| 3 | National programme to combat traditional practices harmful to maternal and child health | Federal Ministry of Health / Ministry of Women and Children's Affairs | 1992 | Plan of the Federal Ministry of Health, Department of Women and Children's Affairs |
| 4 | National Council for Child Welfare | Ministry of Social Planning | 1991 | Established by republican decree and chaired by the President of the Republic |
| 5 | Department for the Rights of Women and the Child | Ministry of Foreign Affairs | 1993 | Plan of the Ministry of Foreign Affairs |
| 6 | Development information and demographic communication | Ministry of Culture and Information | 1993 | Plan of the Ministry of Culture and Information |

Source: Sudanese Society for the Elimination of Harmful Traditional Practices.

Table 13-1
Support provided by international and voluntary organizations

| <i>No.</i> | <i>Name of organization</i> | <i>1992-1993</i> | <i>1993-1994</i> | <i>1994-1995</i> | <i>1995-1996</i> | <i>1996-1997</i> |
|------------|--|------------------|------------------|-----------------------------|---------------------------|--|
| 1 | Médecins sans frontières (The Netherlands) | - | - | \$ 142,566 | DM 8,900,519 | DM 30,022,396 |
| 2 | Médecins sans frontières (France) | - | \$16,527,534 | - | AFR 1,775,797 | - |
| 3 | World against Hunger | - | \$ 6,459,434 | - | AFR 1,775,797 | - |
| 4 | ADRA | - | \$ 99,666 | - | - | - |
| 5 | Africa in the World Church | - | \$ 2,145 | - | - | - |
| 6 | Christian Outreach | - | - | \$ 6,958,235 | - | - |
| 7 | Care International – Sudan | - | - | \$ 473,289 | - | - |
| 8 | Concern | - | - | DM 23,043 | - | - |
| 9 | Episcopal Church of the Sudan | - | - | GBP 1,595 | - | - |
| 10 | Ethiopian Relief Agency | - | - | \$ 1,064,382 | - | - |
| 11 | GOAL | - | - | \$ 82,204,466 | \$ 3,817,230 | - |
| 12 | Humanitarian Organization for Health in Africa | - | - | \$ 1,305,544 | - | - |
| 13 | International Organization for Geriatric Care | - | - | GBP 3,762,119 | - | GBP 19,229 BKR 9,180 |
| 14 | International Rescue Committee | - | - | \$ 8,584,604 | - | - |
| 15 | Call of Peace | - | - | \$ 60,000 | - | - |
| 16 | Laramba Organization | - | - | \$ 115,948,131 | - | - |
| 17 | Lower Saxony Organization | - | - | \$ 281,188,828 | DM 6,653,360 | DM 5,535,000 |
| 18 | Mowafag Charity Organization | - | - | DFL 44,278,438 | - | NDK 2,029,383 |
| 19 | Nile Society for Ethiopian Refugees | - | - | \$ 1,064,382 | - | - |
| 20 | Norwegian Church | - | - | \$ 518,056 | - | - |
| 21 | Save the Children (UK) | - | - | \$ 4,441,791 | - | - |
| 22 | Sudanese Organization for Development and Relief | - | - | \$1,712,600 | \$58,980 | - |
| 23 | Sudan Council of Churches | - | - | \$ 197,134,745 | - | - |
| 24 | Sudan Aid | - | - | \$9,633,320 | \$ 80,710 | - |
| 25 | Sudanese Fertility Society | - | - | \$ 914,353 | - | - |
| 26 | You and I Society | - | - | \$ 33,922 | - | GBP 585,910 |
| 27 | Islamic Aid Organization | - | - | - | DM 1,190,900 | - |
| 28 | Ockenden International | - | - | - | - | GBP 347,784 |
| 29 | Oxfam (UK) | - | - | - | - | GBP 1,509,010 |
| 30 | Oromo Society for Refugees | - | - | - | - | DM 2,627,302 |
| 31 | UNICEF | - | - | - | \$ 116,185,923 | \$136,095,421 |
| 32 | UNFPA | - | - | GBP 34,500 \$ 20,769,335 | - | - |
| 33 | UNHCR | - | - | - | DFL 80,600 GBP 431,363 | DFL 872,530 DFL 11,251,800 \$ 11,827,697 BBB 38,381 |

Source: Federal Ministry of Health – General Department of External Relations.

Table 13-2
Government health budget in millions of Sudanese pounds for the period 1991-1996

| <i>Year</i> | <i>Budget</i> | <i>Gross domestic product (GDP)</i> |
|-------------|---------------|-------------------------------------|
| 1991-1992 | 491 | 415 |
| 1992-1993 | 2,432 | 1,525 |
| 1993-1994 | 5,291 | 3,433 |
| 1996 | 32,757 | 18,165 |

Source: Federal Ministry of Finance.

Table 14-1
Health insurance

| <i>State</i> | <i>Number of insured units</i> | <i>Number of insured persons</i> | <i>Number of cards issued</i> | <i>Number of functioning health centres</i> | <i>Number of functioning hospitals</i> | <i>Amount of support in kind in Sudanese pounds</i> | <i>Amount of cash support in Sudanese pounds</i> | <i>Total support in Sudanese pounds</i> | <i>Date of inclusion in the health insurance scheme</i> |
|----------------|--------------------------------|----------------------------------|-------------------------------|---|--|---|--|---|---|
| Sennar | 33 | 7,518 | 23,162 | 19 | 1 | 37,138,000 | 37,138,000 | 181,550,000 | October 1995 |
| Khartoum | 114 | 59,449 | 26,140 | 37 | 10 | - | - | 13 | 150 |
| Gezira | 6 | 17 | 15 | - | - | - | - | 28 | 69 |
| Gedaref | 2 | 9 | 5 | - | - | - | - | 3 | 3 |
| Red Sea | - | 1 | - | - | - | - | - | 3 | 3 |
| Nile | 1 | 6 | 3 | - | - | - | - | 4 | 17 |
| White Nile | - | 7 | 7 | - | - | - | 2 | 9 | 20 |
| North Darfur | 1 | 5 | 4 | - | - | - | - | 1 | 19 |
| West Kordofan | 3 | 2 | 4 | 4 | - | - | - | 4 | 23 |
| Blue Nile | 3 | 2 | 3 | - | - | - | - | 5 | 10 |
| Darfur | 6 | 5 | - | - | - | - | - | 5 | 12 |
| North Kordofan | 5 | 7 | 6 | - | - | - | - | 10 | 35 |
| Northern | - | 1 | - | - | - | - | - | 3 | 8 |
| Kassala | - | 2 | - | - | - | - | - | 2 | 7 |
| Total | - | 2 | 1 | - | - | - | - | 14 | 13 |

Table 14-2
Details of priority activities and support received in kind and in cash by state

| <i>No.</i> | <i>State</i> | <i>Number of insured units</i> | <i>Number of insured persons</i> | <i>Number of cards issued</i> | <i>Number of functioning health centres</i> | <i>Number of functioning hospitals</i> | <i>Amount of support in kind in Sudanese pounds</i> | <i>Amount of support in cash in Sudanese pounds</i> | <i>Total supporting Sudanese pounds</i> | <i>Date of inclusion in the health insurance</i> |
|------------|----------------|--------------------------------|----------------------------------|-------------------------------|---|--|---|---|---|--|
| 1 | Sennar | 33 | 7,518 | 23,162 | 19 | 1 | 37138000 | 37138000 | 181550000 | October 1995 |
| 2 | Khartoum | 114 | 59,449 | 26,140 | 37 | 10 | 120419000 | 129419000 | 246886295 | June 1996 |
| 3 | Gezira | 28 | 17,516 | 40,861 | 10 | 3 | 65502500 | 65502500 | 115000000 | August 1996 |
| 4 | Gedaref | 79 | 15,787 | 41,450 | 17 | 2 | 61305300 | 61305300 | 60000000 | August 1996 |
| 5 | Red Sea | 6 | 3,029 | 2,692 | 6 | 7 | 25773950 | 25773950 | 115000000 | September 1996 |
| 6 | Nile | - | - | - | - | - | 11640000 | 11640000 | 40000000 | June 1996 |
| 7 | White Nile | 20 | 3,395 | 6,000 | 5 | 3 | 47209567 | 47209566 | 68000000 | February 1997 |
| 8 | North Darfur | 6 | 2,381 | 3,082 | 2 | 2 | 36176780 | 36176780 | 41500000 | January 1997 |
| 9 | West Kordofan | 6 | 750 | 3,219 | 1 | - | 35556725 | 35556725 | 30000000 | January 1997 |
| 10 | Blue Nile | 19 | 2,242 | 1,207 | 1 | - | 26478180 | 35478180 | 42500000 | February 1997 |
| 11 | South Darfur | - | - | - | - | - | 31201000 | 26478180 | 180000000 | April 1997 |
| 12 | North Kordofan | 4 | 6,000 | - | 3 | - | 8012135 | 8012135 | 50500000 | December 1996 |
| 13 | Northern | - | - | - | - | - | 24452135 | 24452135 | 20000000 | May 1997 |
| 14 | Kassala | - | - | - | - | - | 31981000 | 31981000 | 11000000 | July 1997 |

Indicators

| <i>No.</i> | <i>Indicator</i> | <i>1996</i> | <i>2000</i> |
|------------|--|--|----------------|
| 1 | Mortality rate among newborn infants aged below one month | 34 per one thousand | 17 |
| 2 | Mortality rate among newborn infants aged over one month | 34 per one thousand | 17 |
| 3 | Infant mortality rate | 69.5 per one thousand | 35 |
| 4 | Mortality rate among children between the ages of four and five years | 46 per one thousand | 22 |
| 5 | Mortality rate among children of five years of age | 113 per one thousand | 22 |
| 6 | Material mortality rate | 379 per hundred thousand | 330 |
| 7 | Pregnant women receiving antenatal care | 54 per cent of the total number of pregnant women 60 per cent through midwives 42 per cent through doctors | 80 80 80 |
| 8 | Pregnant women receiving obstetric care | 77 per cent through midwives 19 per cent through doctors 4 per cent through relatives | 90 20 - |
| 9 | Places of delivery | 80 per cent at home 18 per cent in government establishments 2 per cent in private establishments | - - - |
| 10 | Methods of delivery | 80 per cent by the normal method 20 per cent by caesarian section 9 per cent experienced complications | - 10 1 |
| 11 | Pregnant women who received a single dose of the tetanus vaccine | 64 per cent | 90 |
| 12 | Total fertility rate – births per mother | 4.6 per cent | - |
| 13 | Number of children born to mothers aged 15-49 years | 5 | - |
| 14 | Number of children born to mothers aged 45-49 years | 9 | - |
| 15 | Desirable number of children | 6 | - |
| 16 | Mothers aged 15-49 years wishing to have more children | 64 per cent | - |
| 17 | Married women with a knowledge of family planning methods | 93 per cent | - |
| 18 | Married women using modern and traditional family planning methods | 2 per cent | - |
| 19 | Married women using contraceptive pills | 18 per cent | - |
| 20 | Married women using the coil | 4 per cent | - |
| 21 | Married women | 47 per cent | 75 |
| 22 | Divorced women | 17 per cent | - |
| 23 | Women married for the second time | 55 per cent | - |
| 24 | Women married to men with other wives | 17 per cent | - |
| 25 | Women married to relatives | 55 per cent | - |
| | <i>Female circumcision</i> | | |
| 26 | Women in favour of female circumcision | 80 per cent | 40 |
| 27 | Percentage of women against female circumcision | 20 per cent | 60 |
| 28 | Religion | 12 per cent | - |
| 29 | Traditional practice | 72 per cent | - |
| 30 | In the girl's interest | 16 per cent | - |
| 31 | Women who experienced no problems in marriage or child delivery as a result of female circumcision | 82 per cent | - |
| 32 | Women who experienced difficulty in | 4 per cent | - |

| <i>No.</i> | <i>Indicator</i> | <i>1996</i> | <i>2000</i> |
|------------|---|--|-------------|
| | urinating as a result of female circumcision | | |
| | <i>Immunization</i> | | |
| 33 | Children who received the full course | Tuberculosis: 88 per cent Triple vaccine: 76 per cent Poliomyelitis: 77 per cent Measles: 74 per cent | - |
| | <i>Nutrition</i> | | |
| 34 | Newborn infants weighing less than 2.5 kgs | 15 per cent | 5 |
| 35 | Shortness of stature | 17 per cent | 5 |
| 36 | Emaciation and weakness | 31 per cent | 5 |
| 37 | Goitre in children aged 6-11 years | 60 per cent | 30 |
| 38 | Anaemia in children | 83 per cent | 40 |
| 39 | Anaemia in pregnant women | 62 per cent | 30 |
| 40 | Vitamin A deficiency | 1.7 per cent | 0.1 |
| 41 | Breastfeeding Breast-fed infants aged 0-3 months | | |
| 42 | Infants aged 6-9 months whose breastfeeding is supplemented | 45 per cent | |
| 43 | Infants aged 20-23 months who still breastfed | 44 per cent | |
| | <i>Disabled children</i> | | |
| 44 | Disabled children aged under five years | 598 per 100,000 | 200 |
| 45 | Disabled children aged 5-14 years | 1,238 per 100,000 | 600 |
| | Accidents in children | | |
| 46 | Accidents | 2 per cent | - |
| 47 | Burns | 58 per cent | - |
| 48 | Wounds and fractures | 9 per cent | - |
| 49 | Poisoning | 4 per cent | - |
| 50 | Accidents in the home | 64 per cent | - |
| 51 | Accidents with lasting effects | 35 per cent | - |
| | <i>Environment</i> | | |
| 52 | Consumers of safe drinking water | Urban 84 per cent Rural 41 per cent | 95 80 |
| 53 | Sanitation: Users of latrines | Urban 68 per cent Rural 45 per cent | 90 80 |
| 54 | Users of outdoor areas, particularly in rural areas | 48 per cent | 20 |
| 55 | Users of flush toilets | 7 per cent | - |
| | <i>Medical treatment</i> | | |
| 56 | Health establishments/hospitals | 253 | - |
| 57 | Beds | 22,444 | |
| 58 | Dispensaries | 1,478 | - |
| 59 | Health clinics | 1,558 | - |
| 60 | Primary health care units | 2,916 | - |
| 61 | Beds per 100,000 inhabitants | 8 | - |
| | <i>Personnel</i> | | |
| 62 | Consultants | 609 | - |
| 63 | Registrars | 184 | - |
| 64 | General practitioners | 991 | - |
| 65 | House physicians | 449 | - |
| 66 | Dentists | 205 | - |
| 67 | Total | 2,438 | - |
| 68 | Pharmacists | 295 | - |
| 69 | Medical assistants | 5,247 | - |
| 70 | Technicians | 1,633 | - |

| <i>No.</i> | <i>Indicator</i> | <i>1996</i> | <i>2000</i> |
|------------|---|---|-------------|
| 71 | Nurses | 17,182 | - |
| | Averages | | |
| 72 | Doctors per 100,000 inhabitants | 0.2 | 3 |
| 73 | Dentists per 100,000 inhabitants | 0.1 | 2 |
| 74 | 100,000 inhabitants for all doctors | 0.9 | 2 |
| 75 | Technicians per 100,000 inhabitants | 0.7 | 2 |
| 76 | Medical assistants per 100,000 inhabitants | 2.2 | 4 |
| 77 | Nurses per 100,000 inhabitants | 6.4 | 8 |
| 78 | Health officers per 100,000 in habitants | 0.1 | 3 |
| | Medical drugs | | |
| 79 | Essential medical drugs | 454 | - |
| 80 | Local medical drug factories | 15 | - |
| 81 | Varieties of medical drugs manufactured annually by such factories | 15 | - |
| 82 | Imported or locally manufactured medical drugs supplied by the private sector | 97 per cent | - |
| | Universities, colleges and schools | | |
| 83 | Schools for village midwives | 24 | 26 |
| 84 | Schools for nursing midwives | 4 | 10 |
| 85 | Schools for health visitors | 5 | 10 |
| 86 | Schools for environmental health inspectors | 3 | 10 |
| 87 | Schools for general medical assistants | 6 | 10 |
| 88 | Schools for theatre attendants | 5 | 10 |
| 89 | Schools for medical laboratory assistants | 7 | 10 |
| 90 | Schools for other medical assistants | 9 | 15 |
| 91 | Colleges for technicians | 7 | - |
| | Malaria | | |
| 92 | Malaria cases during the period 1990-1995 | 1,769,696 | - |
| 93 | Deaths from malaria during the period 1990-1995 | 2,834 | - |
| 94 | Education of women compared with men | 60 per cent | 80 |
| 95 | Female adult illiteracy rate | 1990: 17 per cent 1995: 35 per cent | 70 |
| 96 | Primary school enrolment | 1990-1995: 48 per cent 1997: 52 per cent | 80 |
| 97 | Ranking of the Sudan in the list comparing progress in regard to deaths among the under-fives in 1997 | 42 | 60 |

VII. EDUCATION, LEISURE AND CULTURAL ACTIVITIES
(arts. 28, 29, 31)

A. Education, including vocational training and guidance
(art. 28)

234. In conceptual terms, the right of the child to education is at once humane, social, economic, political, cultural, scientific and technical in scope. Its attainment is also a paramount aim of Sudanese legislation. Moreover, it ranks in the category of basic needs and is intrinsic to the established system of legislation. It is therefore a right of such key importance that it cannot be abolished or eradicated, a fact which is clearly apparent in educational theory, the education strategy and the general policy on education. It is also equally apparent from studies on human rights in general and child rights in particular that education is the foundation on which the principle of absolute justice for the human being lies.

235. The country's education projects and programmes are therefore coherent and consistent with the general objectives of education. The available educational opportunities are based on the principle of equality, right and justice, which is regarded as a spiritual value and not simply as a constitutional obligation or a legal maxim. Stemming from these guidelines, laws were enacted and educational programmes and projects were planned and implemented, built on the principle of absolute justice among Sudanese children without distinction and on full equality, whether between males and females or between religious and non-religious communities. They also echoed the spirit of the high ideal embodied in international instruments, as well as the spirit of peace, dignity, freedom, brotherhood and justice. The underlying intention was to maintain regard for human dignity, strike a reasonable balance between the aspirations of the soul and the demands of body and mind and accomplish the solidarity needed to achieve education for all and develop communication among the diverse cultures, ethnicities, religions and traditional elements of Sudanese society. It should be noted that this is not so over-idealistic as to be impossible to apply. As with the educational strategy and policy, the objectives of education are based on systematic plans which leave no room for digression, misconception or malpractice and which instead harmonize the idealism of the objectives with the evolving circumstances of life in the Sudan. The legislative enactments, programmes and projects relating to education have accordingly acquired a scientific character, thus simultaneously combining the idealism of purpose with the practicalities of implementation on the basis of the society's own capabilities, without coercion or restriction. The motto of education as a universal right therefore gradually emerged in accordance with the principal objectives of the plan for the survival, protection and educational development of Sudanese children, which are as follows:

- (a) To increase the enrolment rate in basic schools to 70 per cent by 1995 and to 100 per cent by 2000;
- (b) To increase the completion rate to 75 per cent by 1995 and to 80 per cent by 2000;
- (c) To reduce the illiteracy rate to 50 per cent in 1995 and eradicate illiteracy by 2000;
- (d) To expand early child development services and pre-school education.

236. The provisions of the following laws and regulations, annexed hereto, are consistent with the provisions of the international instruments on education in general and the Convention on the Rights of the Child in particular. These laws and regulations are as follows:

- (a) The Public Education Act of 1992;

- (b) The National Literacy and Adult Education Council Act of 1991;
- (c) The School Health Act of 1973, which covers protection from contagious and endemic diseases, the establishment of a central health council to formulate public policies for school health services and determine the acceptable minimum for such services, the organization of research and studies on student health and the setting of health standards for sports and physical education;
- (d) The National Centre for Curricula and Educational Research Act of 1996;
- (e) The Parent-Teacher Association Regulations of 1992, aimed at establishing a link between the home, the school and the community;
- (f) The Basic School Regulations of 1992;
- (g) The Secondary School Regulations of 1992.

Main legislative measures adopted to ensure the right to life, survival and development, as well as the right to enjoyment of the highest standard of health

237. The role played by education in implementing these measures is exemplified in the following:

- (a) The school nutrition project;
- (b) The School Health Act;
- (c) The oral and dental hygiene project;
- (d) The introduction of demography as a curriculum subject in basic and secondary schools, as well as for young people who are not in school, with a view to tackling reproductive health problems and harmful practices, together with the publication of a handbook on population, demography, health, nutrition, development, environment and values, with the support of the United Nations Population Fund (UNFPA).

238. The budget allocated to education in 1996 was estimated at about 5.8 billion Sudanese pounds, representing 5.3 per cent of the general budget. The expenditure on basic education amounts to 44 per cent of the overall expenditure on public education, although this figure does not represent the actual expenditure from the approved budget. In 1996, the grass-roots effort represented 53 per cent of the expenditure on public education.

239. Financing for education must be viewed from a wider perspective in the future. In other words, contributions should be increased by expanding the base to include other sectors and a variety of organizations. The strategy consists of providing allowances designed to alleviate the family burden of school expenses and adopting a flexible approach that can be tailored to local requirements, also bearing in mind the significance which the family attaches to the true cost of educating a child and the adequacy of the support provided. The State is clearly concerned to guarantee access to education, in particular basic education for all, in which connection the measures adopted include the following:

- (a) The procurement of technical and financial support from the local and international communities. The World Food Programme (WFP) incorporated basic education into the Sudan Food for Work project; launched in 1998 and covering those areas of the Sudan which are vulnerable to food

shortages, the project is set to build 1,000 classrooms in five states. UNDP is also carrying out a survey of the basic education sector with the aim of determining needs and providing support to meet those needs;

(b) The promotion of grass-roots and voluntary efforts and the establishment of a solidarity fund, a *zakat* fund and a fund to support productive families;

(c) The allocation of 25 per cent of the subsidies received from expatriate workers to the benefit of education.

240. Following the institution of federal rule in the Sudan, one of the measures initiated as part of the educational policy (chapter VIII concerning policies approved by the Council of Ministers in 1996) was to encourage local cultural communities and tribal groups to consider the possibility of introducing their languages into their local schools. Sudanese individuals are keen that their thinking and conduct should stem from their roots, demonstrating an original approach to the problems of childhood, which has both positive and negative aspects, and looking ahead to a future in which they hope to see progress and development. Questions should be asked, however, about the Sudanese educational attitude towards those with special needs and those in especially difficult circumstances, the criteria and programmes for whom should relate to their abilities with a view to fostering their creativity and encouraging them to adapt to their own circumstances and fit in with the community.

241. The education policy in regard to children who are gifted, academically outstanding, disabled, displaced or refugees is not simply an abstract intellectual idea or an exercise of the mind, a game of logic, a stimulus of emotion or nourishment for the soul. On the contrary, in actual practice, it is also so distinctly objective in meaning, idealistic in value, global in approach, comprehensive in guidance and humane in scope as to produce the ideal model of a child in word, behaviour and deed, a unique human being capable of pioneering leadership, who, through the upbringing, guidance and education which he or she receives, acquires a penetrating insight, an original understanding, a profound awareness, a level mind and a lively conscience. Displaced, refugee or disabled children therefore transcend the immense horizons of humanity, beyond time, place, gender, colour, language and culture. Without this profound understanding, the performance of education in meeting the requirements of children with special needs and children in especially difficult circumstances would be purely mechanical, without voice, spirit, influence or purpose, and would therefore be incapable of expressing the values and high ideal of the education policy of the Sudan and its overall objectives.

242. This meaning becomes clearer and deeper in the light of the programmes, referred to below, aimed at implementing the policies in question. In order to devote special attention to gifted children and exceptional pupils and enhance the care which they receive, plans have been made to:

(a) Develop appropriate criteria other than examination results in order to gauge excellence;

(b) Strengthen the development of administrative skills in schools and institutions with a view to identifying and catering for gifted children;

(c) Prepare special curricula and classes for such children;

(d) Provide teacher training.

In order to ensure that all children, including girls, children with special needs and children in especially difficult circumstances, have full access to an enlightened education and adequate educational facilities, the measures outlined below have been adopted.

Disabled children

243. The policies for disabled persons include measures such as:

- Design and codification of the tools needed to detect different types of disability;
- The preparation and development of special curricula for the different categories of disabled persons;
- Training for teachers and instructors of disabled persons and the introduction of special allowances for such teachers and instructors.

Achievement

- There are seven special educational institutions for disabled persons, which cater to 679 students and have a total staff of 160 teachers (Source: Report of the 1996 Geneva Conference on the Problems of Refugees, Displaced Persons, Migration and Asylum Issues, p. 44);
- A nationwide count of disabled persons has been made (see annex 1).

Basic education

244. Basic education is an essential means of acquiring the fundamental skills of reading, writing, arithmetic and oral expression, as well as the vital skills needed to progress in life and make a contribution to development. The basic education provided by the traditional school is insufficient on its own to enable attainment of the goal of education for all. Other alternatives therefore came to acquire significance in introducing new forms of education that are accessible to children and deprived communities.

Education for young people

245. The developments and advances made in the field of education include the attention devoted to non-formal education as a way of making education accessible to children of different ages who are not in school. Special education programmes for youngsters between the ages of 9 and 14 are run in parallel with formal basic education, with particular emphasis on girls so that they can pursue their studies and enter into formal education. This attention extends to nomads, for whom mobile schools have been established to cater to their educational needs.

Objectives of the youth education project

246. The objectives of this project are as follows:

- (a) To provide educational opportunities for those in the 9-14 age group who are not in school or who dropped out of the early stages of basic education;
- (b) To provide a type of education consistent with the needs and circumstances of this group so that they can develop their abilities, their knowledge and their preferences;
- (c) To open up channels linking formal education with this type of education so that young people who wish to do so may continue their education;

(d) To develop flexible routes to education so that educational opportunities become accessible to all and to girls in particular;

(e) In all, 23 centres have been opened in six states, catering to 1,161 children, including 303 females.

The assistance project for displaced persons

247. The project aims to provide children displaced by drought and war with access to educational opportunities in their new locations and has done so in the case of a quarter of a million children, 40 per cent of them female. This project benefits the southern states and a few states in the north.

The nomad education project

248. The education of nomads in the Sudan is a chronic problem which has been neither studied nor diagnosed so that education officers might explore the most appropriate solutions to ensure that nomads receive their share of education, as befits their needs and the development of their communities.

249. By 1997, with UNICEF support, 259 mobile schools had been opened for nomads, catering to a total of 13,219 children, including 4,863 girls, in the major states of Kordofan and Darfur. The basic aim of the project is to provide nomads with a fundamental education in "basic skills and knowledge" in order to serve the following objectives:

(a) To achieve education for all;

(b) To raise the standard of living in nomad society without affecting the way of life. Education is essential to ensuring "the development of respect for the child's parents, his or her own cultural identity, language and values...." (art. 29 of the Convention on the Rights of the Child). In achieving that aim, it is vital to respect the natural environment, as well as human rights, freedoms and principles. With the advancement of their society, nomads are able to participate in development;

(c) To ensure that the most up-to-date methods of animal breeding are accessible to nomads.

The project for access to education for all villagers

250. In response to international guidelines and in conformity with the Jomtien World Declaration on Education for All and the 1990 International Declaration on the Rights of the Child, as well as on the basis of the resolutions of the national conference on education policies, held in 1990, and the comprehensive national strategy for the education sector, the Federal Ministry of Education is engaged in intensive efforts to achieve the objective of basic education for all by the year 2000. In order to achieve this objective, plans for the village school project were developed.

251. During the 1980s and early 1990s, efforts in the field of basic education ran into various difficulties epitomized by the poor infrastructure and the scant resources set aside for education, which led to incompetence, poor-quality education and disparities among urban and rural areas. This situation provoked thinking about innovative ways of intensifying the effort and bridging the gap in educational opportunities, resulting in the idea of education for all villagers, which differs from the traditional method, as follows:

(a) Planning is carried out at the village level;

(b) The local community is involved at every level of the project, from determining and subsequently planning for needs, elaborating suitable plans and programmes, monitoring and evaluating their implementation and endeavouring to ensure their continuity;

(c) The experience gained from similar projects, such as the child-friendly villages project, is used as an advantage.

Aims of the project

252. The aims of the project are as follows:

- (a) To promote the efforts to achieve education for all, particularly in rural and remote areas;
- (b) To promote the policy of decentralizing education;
- (c) To build capacities at the foundation level;
- (d) To ensure involvement of the local community in educational issues;
- (e) To assess the current status of education at all levels.

Project strategy

253. The project strategy is based on the following:

- (a) Mobilization of the local community;
- (b) A comprehensive view of education of all types and for all ages;
- (c) Integration with other social and economic development activities;
- (d) Encouragement of participation by new organizations in the project and its subsequent implementation in the states of Kordofan and Darfur.

Girls' education

254. The aims of education include reducing illiteracy among girls and women, increasing school enrolment among both sexes, reducing drop-out rates and narrowing the differences between boys and girls on the one hand and between the regions and areas where inhabitants are concentrated. To that end, the Ministry of Education, represented in the Educational Planning Agency, conducted a study designed to identify the difficulties and obstacles resulting in the abandonment of education and assess the demand for education in the family and the community.

255. The study targeted the following groups:

- (a) The principals of the schools included in the study;
- (b) The teachers working in the schools included in the study;
- (c) The parents of the school pupils;

(d) Girls in the 8-18 age group having previously attended or never attended an educational institution;

(e) Female pupils in 7-12 age group attending the basic stage.

256. The findings of the study confirmed a number of factors which ultimately cause girls to leave school or never to attend in the first place. These can be summarized as follows:

- The domestic responsibilities placed on girls;
- Poverty;
- The tendency among certain communities to oppose the education of girls;
- The distance between school and home;
- The few opportunities available for school admission and for repetition of an academic year;
- Early marriage;
- The absence of any connection between the studies followed, the local environment and the needs of society;
- Frequent absence from school.

All of these innovative projects are supported by international cooperation in the form of UNICEF.

257. In conjunction with UNICEF, the Ministry of Education has also engaged in efforts to run educational seminars for parents, using folklore as a means of conveying the message to local communities of the importance of education for girls. This activity began in 1997 in the states of western Sudan, such as South Kordofan.

258. The Ministry also made efforts to ensure that school education services cover smaller individual areas, thereby making them more easily accessible to inhabitants, which also furthers the two objectives of reducing costs and reducing the number of boarding schools so that girls are then able to pursue their education. This is now clearly well established in the policy applied in local government areas for admission to basic education. The curriculum has also been developed to provide a variety which is more appropriate to local environments and yet which does not neglect the objective of national unification, as is apparent in all the new basic school textbooks.

Other educational changes

Introduction of the Convention on the Rights of the Child into teacher training programmes

259. During the current year, the Convention on the Rights of the Child was introduced as part of in-service teacher training programmes for the first time and implemented throughout the different states of the Sudan in order to raise awareness of the importance of children's rights and ensure that the message was conveyed at the local level.

260. Another aim of incorporating the Convention into teacher training programmes is to ensure that it is disseminated in the teachers' own communities. It is also important to associate this with the registration of births, which is instrumental to planning, not only for education but for all aspects of life, and primarily vital for knowing the identity of a child. The School Regulations refer to the role of a teacher as social supervisor and a cultural communicator (art. 7).

Teacher-related issues

Steps taken to ensure that there are sufficient teachers in the school system, to enhance their competence and to ensure and assess the quality of teaching

261. The Ministry has devoted attention to the following aspects of teacher-related issues:

- (a) Academic qualification;
- (b) Enhancement of the professional and social status of teachers;
- (c) Careful teacher selection and the supply of schools with a sufficient number of teachers.

In order to enhance the competence of teachers, the following steps were taken:

(a) An open cadre was approved, with retroactive effect to 1992, which had a major impact on teacher stability, improved the efficiency of education and attracted university graduates into the teaching profession;

(b) Special allowances were created, making teachers' salaries among the highest in the country. These allowances are as follows:

- (i) Teaching allowance;
- (ii) Professional promotion allowance;
- (iii) Community development allowance;
- (iv) Administrative allowance;
- (v) Hardship allowance.

These measures have now been implemented.

262. In the field of literacy and adult education, the following steps have been taken:

- The Literacy and Adult Education Act was promulgated in 1991;
- A comprehensive literacy campaign was launched to target eight million young and productive people in the 10-45 age group;
- A detailed literacy plan was developed by the campaign secretariat in conjunction with the United Nations Educational, Scientific and Cultural Organization (UNESCO).

The campaign was greeted with enthusiasm by the grass roots and gained political support, while various ways and means of achieving its objective were established. The campaign efforts bore fruit, 4.25 million individuals having achieved literacy by 1995-1996, which was higher than the number envisaged at the mid-plan stage. This achievement was accomplished through political and grass-roots organizations and through individual efforts. According to the fourth population census, a total of 2,796,749 children under the age of 18 were not enrolled in school in 1993.

Systems of non-formal education

263. The systems of non-formal education consist in Quranic schools, schools run by the Teachers' Union, vocational centres and national centres for crafts and cottage industries. In 1995, there were 10,636 Quranic schools in the Sudan, attended by 537,395 pupils and staffed by 11,992 spiritual guides.

264. The Teachers' Union established a total of 141 secondary schools, which, according to 1995 statistics, were attended by 74,411 pupils, including 32,890 girls. These schools operate in the evenings on the double shift system and are run by Teachers' Union.

265. There are 43 vocational and apprenticeship training centres in all. The three of these which are for girls currently cater to 103 pupils who are studying embroidery, drawing and packaging techniques. The number of male students in these centres stands at 3,713. A further nine centres belonging to the Ministry of Labour are attended by 1,616 male and female students. These centres award a diploma after three years, whereupon the student may continue by enrolling in higher education or enter the labour market.

Changes that have occurred in the education system with regard to legislation, policies and facilities

266. In connection with the Convention of the Rights of the Child, one of the most recent legislative enactments relevant to the education system is the Fourteenth Constitutional Decree embodying the Khartoum Peace Agreement, concluded on 21 April 1997, which covers freedoms, full participation in decision-making and the subject of languages.

The monitoring mechanism

267. The monitoring mechanism used is as follows:

- A computerized education database has been developed and teachers have received training in various data entry and processing programmes, an experiment which has now extended to three states;
- The Sudanese school certificate is also computerized.

The difficulties encountered in connection with the monitoring mechanism are the lack of trained personnel, the cost of equipment maintenance and supply and the poor infrastructure in connection with electrical and other related supplies.

268. The data on education outcomes are as follows:

- Data on the basic school certificate is compiled at the state level and detailed statistics are available;
- Of the 134,487 students who sat the secondary school certificate in 1996, a total of 88,755 passed, representing a success rate of 66 per cent;
- Examinations are an important factor in the education process and demonstrate the extent to which the teaching, the curricula, textbooks, teachers and other school facilities are effective.

269. The development of examination systems should take the following into account:

- (a) The need to pursue a scientific approach to examinations;
- (b) The need to measure scientific and intellectual skills and abilities;

(c) The need to ensure that laboratory and practical applications in the various scientific fields are not overlooked.

As part of its efforts to develop examination systems, the Sudan has embarked on training qualified personnel to set examinations on the basis of fixed objectives and specifications.

The pre-school stage of education

270. Sudanese children undergo three stages of education. The first is the pre-school stage, from which a total of 343,767 children benefit, representing 18.5 per cent of children in the 4-5 age group. Efforts are required to improve this percentage. The number of kindergartens and Quranic schools now stands at 7,541. The larger schools have 40 pupils per class, a high ratio which demands greater efforts to provide more childcare. Pre-school is an important basic stage of education for which a national curriculum is now being prepared to take into account cultural and geographical diversity with the aim of developing the abilities of children of this age. Pre-school education employs a total of 8,897 teachers.

Table 1: Development of pre-school education for the academic years 1991/92 to 1995/96

| <i>Year</i> | <i>Number of pupils</i> | | <i>Total</i> | <i>Number of schools</i> | <i>Number of teachers</i> |
|---------------------|-------------------------|---------------|--------------|--------------------------|---------------------------|
| | <i>Male</i> | <i>Female</i> | | | |
| 1991/92 | 115 894 | 137 782 | 253 676 | 4 580 | 6 456 |
| 1995/96 | 132 901 | 210 866 | 343 767 | 7 541 | 8 897 |
| Percentage Increase | 15 | 53 | 36 | 65 | 38 |

Source: Federal Ministry of Public Education – Education Planning Department, 1991-1996 (Book of Education Statistics)

Basic stage of education

271. The basic stage of education spans a period of eight years, which begins at the age of six years. The number of years spent in the basic stage has been increased in order to impart to pupils more of the knowledge, skills and behaviours which they need for their future education or way in life. On completion of the stage, pupils are at an appropriate age for entry to the employment market. The State is endeavouring to introduce the basic stage countrywide with a view to gradually declaring it compulsory, beginning in 1998. Thus far, three states, which account for 20 per cent of the population, have declared education to be compulsory. In 1992, the sixth year of basic education was completed by 68 per cent, rising in 1996 to 70 per cent of all those having enrolled in the first year in 1991.

Secondary stage of education

272. There are 468,690 pupils enrolled in secondary education in a total of 1,361 schools, with males outnumbering females; 53 per cent of those enrolled are males and 47 per cent are females.

Technical education and vocational schools

273. In all, 24,424 students are enrolled in various schools, including women's schools, for subjects such as business, agriculture and industry. Student proportions are noticeably higher for males than for females; in 1995, the proportions amounted to 67 per cent for males and to only 33 per cent for females.

274. The Sudan has 89 vocational and technical schools in which 24,424 students are enrolled. Of these, business schools account for 14 per cent, women's schools for 30 per cent, agricultural schools for 21 per cent and industrial schools for 35 per cent. The main problems of technical education are as follows:

- (a) Vocational education is perceived as socially inferior;
- (b) Admission is based on grades rather than on a student's willingness and desire to study;
- (c) Only a small percentage of students have the opportunity to pursue higher education;
- (d) The facilities and curricula fail to keep pace with modern technological developments;
- (e) Unemployment is widespread among graduates owing to the failure to create a linkage between the employment market and the skills acquired in vocational education.

Comments on the development of public education

Basic education

275. Over the past 20 years, pre-school education and basic education have noticeably improved, as demonstrated by the statistics on public education for the period 1992-1996. The intake at the pre-school and basic stages of education has risen; the number of kindergartens and Quranic schools increased from 6,520 in 1992 to 7,541 in 1996 and the number of those enrolled increased from 253,676 to 343,767 over the same period, with females accounting for 39 per cent of that number. The statistics also show that the number of schools in the basic stage increased from 8,288 in 1992 to 10,680 in 1996. Moreover, the intake increased by 141 per cent for females and 129 per cent for males. In other words, the number of females increased at a faster rate than males during the last decade (see table 1). Despite this development, the apparent intake rate among the 6-13 age group for both sexes stands at 54.8 per cent, averaging 51 per cent for females and rising to 58.3 per cent for males (see table 2). The statistics also reveal an obvious disparity in the intake rates according to gender and state.

Secondary education

276. In the chapter of the Public Education Act dealing with the administration of public education, articles 11, 12 and 13 define the powers and jurisdictions of the federal and state education authorities; responsibility for implementing education policies falls to the states, including the opening of secondary schools, both academic and technical. The education strategy aims to standardize secondary education ("the comprehensive school"), being an important stage and a further step along the way to human resources planning, since it is intended to enable the individual to contribute effectively to the development of society and to pursue higher stages of education. This concern is highlighted by the rapid expansion of secondary education; the numbers of schools leapt from 591 in 1992 to 1,361 in 1995-1996, representing an increase of 770 schools.

277. Equality in education is a top priority of the education policy. Despite the progress achieved in secondary education over the past 20 years, much remains to be done. The number of those of both sexes enrolled in secondary education is still low compared with the number of inhabitants in the secondary school age group (14-16 years). According to the figures and statistics for 1995-1996, the apparent intake rate for both sexes stood at 27.9 per cent, averaging 27.3 per cent for girls and rising to 28.6 per cent for boys (see table 3).

278. The tables below show the basic and secondary school intakes in 1995/96, the minimum age for school attendance, the maximum age for compulsory education and the percentages of children of school age who are registered in schools.

Table 2: Apparent basic school intake by gender in 1995/96

| | 6-13 age group | | Total |
|------------|-----------------------|--------------|--------------|
| | Boys | Girls | |
| Population | 2 779 183 | 2 610 163 | 5 389 346 |
| Intake | 1 619 604 | 1 331 678 | 2 951 282 |
| Percentage | 58.3 | 51 | 54.8 |

Source: Federal Ministry of Education – Education Planning Department (Statistical Yearbook for the academic year 1995/96).

Table 3: Apparent secondary school intake 1995/96

| | 14-16 age group | | Total |
|------------|------------------------|--------------|--------------|
| | Boys | Girls | |
| Population | 866 065 809 314 | 1 675 379 | |
| Intake | 247 459 221 231 | 468 690 | |
| Percentage | 28.57 | 27.34 | 27.98 |

Source: Federal Ministry of Public Education – Education Planning Department, 1996

279. The education policies approved by the Council of Ministers state the following:

- (a) Basic education should be accessible to all by the year 2000;
- (b) Education should be made compulsory and legislation promulgated to that effect (education is now compulsory in three states);
- (c) Education at the basic stage should be free of charge;
- (d) The intake at the basic stage in the northern states for the academic year 1995/96 amounted to 54.8 per cent, falling short of expectations owing to the war conditions which prevailed, despite the efforts of the State to achieve peace.

Development of secondary education

280. The number of secondary schools increased from 578 in 1989 to 1,361 in 1995, as shown in table 4 below.

Table 4: Rise in secondary education

| <i>Stage Years</i> | <i>Basic stage</i> | | | <i>Secondary stage</i> | | |
|--------------------------------|--------------------|---------------|-----------------|------------------------|---------------|-----------------|
| | <i>Schools</i> | <i>Pupils</i> | <i>Teachers</i> | <i>Schools</i> | <i>Pupils</i> | <i>Teachers</i> |
| 1989 | 7 720 | 2 003 317 | 51 520 | 578 | 251 074 6 766 | |
| 1995 | 10 680 | 2 951 282 | 95 262 | 1 361 | 468 690 | 12 121 |
| Increase (per cent) | 38 | 47 | 85 | 135 | 87 | 79 |
| Annual growth (per cent) | 5.5 | 6.7 | 10.8 | 15.3 | 10.9 | 10.2 |

Source: Federal Ministry of Public Education – Education Planning Department, 1996.

Higher education visibly expanded during the five years from 1993 to 1997; the number of government universities increased to 26 and the number of private universities and university libraries increased to 15. The table below shows the geographical distribution of government universities.

| <i>Institution</i> | <i>Name of university</i> | <i>State</i> |
|--------------------|---|----------------|
| Old universities | University of Khartoum | Khartoum |
| | Islamic University of Omdurman | Khartoum |
| | University of Gezira | Khartoum |
| | University of Juba | Bahr al-Jabal |
| New universities | Sudan University of Science and Technology | Khartoum |
| | University of the Two Niles | Khartoum |
| | University of the Holy Quran and the Islamic Sciences | Khartoum |
| | Al-Za'im al-Azhari University | Khartoum |
| | University of Kordofan | North Kordofan |
| | Dilling University | South Kordofan |
| | University of Kassala | Kassala |
| | Red Sea University | Red Sea |
| | University of Gedaref | Gedaref |
| | Wadi al-Nil University | River Nile |
| | Shendi University | River Nile |
| | Dongola University | Northern |
| | Fashir University | North Darfur |
| | Nayala University | South Darfur |
| | Zalingi University | West Darfur |
| | University of Bahr al-Ghazal | Bahr al-Ghazal |
| | Upper Nile University | Upper Nile |
| | Imam al-Mahdi University | White Nile |
| | University of Sennar | Sennar |
| | Damazun University | Blue Nile |
| | Duwaym University | White Nile |
| | University of West Kordofan | West Kordofan |

This expansion in the number of higher education institutes was accompanied by a higher intake. The table below shows the intake in higher education institutes during the period 1989/90-1995/96.

| | 89/90 | 90/91 | 91/92 | 92/93 | 93/94 | 94/95 | 95/96 |
|--|-------|--------|--------|--------|--------|--------|--------|
| Government universities and Institutes | 5 087 | 11 425 | 19 285 | 21 267 | 25 170 | 26 535 | 25 823 |
| National institutions | 933 | 1 945 | 4 194 | 5 521 | 5 050 | 7 305 | 7 340 |
| Total | 6 080 | 12 370 | 23 474 | 26 788 | 30 220 | 3 284 | 23 193 |

281. In order to create a balance in educational opportunities for children in the states and rural communities, it was decided that:

(a) 20 per cent of places in the state universities should be earmarked for children in the state where the university is located;

(b) Places in the more unusual specialist fields should be allocated to students from the least developed states. The number of these places amounted to a total of 4,556, divided among medicine, pharmacology, dentistry and engineering.

On the above basis, the opportunity to enter higher education is available to anyone properly qualified to do so.

Encouraging school attendance and retention

282. The school expansion policy aimed to make schools accessible by bringing education services closer to the vicinity of pupils' homes.

283. Retention is one of the problems encountered in education, as the school environment is worsening in terms of the accompanying services and the inability to supply sufficient numbers of trained teachers owing to the shortfall in the education budget. Increased grass-roots efforts and further international assistance are therefore required in order to put into practice the resolutions of the Jomtien Conference and give effect to the Convention on the Rights of the Child.

284. In accordance with Sudanese laws, regulations and customs, no one is denied the opportunity to enrol in education for whatever reason.

285. The administrative system includes the following:

- The Basic and Secondary School Regulations of 1992, which govern the school administrative system and have the interests of the child entirely at heart;
- The Parent-Teacher Association Regulations, which are designed to regulate and promote action in the field of education.

Respect for the views of children

286. Under the School Regulations, the morning parade and the school radio broadcast are regarded as major activities, as they provide the full opportunity for pupils to express their views and develop their abilities and talents (art. 12). The students' union deals with issues of shared concern with the school administration.

Freedom of religion

287. The religions of Islam and Christianity are taught in Sudanese schools, where Muslims and Christians alike study their faiths.

Freedom of association

288. The School Regulations stipulate and encourage the establishment of associations with a view to developing pupils' abilities and bringing out their talents. Such activities are practised daily throughout every stage of school.

Corporal punishment (flogging)

289. The Basic School Regulations of 1992 prohibit flogging as a punishment to be given in a reaction of anger. They do, however, permit flogging in cases of utmost necessity, when it must be limited to four lashes which must not be such as to cause intense pain. The Regulations also prohibit flogging as a punishment for girls and further stipulate the following measures whenever the punishment of flogging is carried out:

- (a) The punishment must be carried out in segregation;
- (b) Flogging is prohibited as a collective punishment, as are verbal insults and abuse. In boys' schools, any punishment of flogging that it is found necessary to impose must not exceed four lashes, although the matter must first be taken up with the school principal and consideration given to the pupil's state of health;
- (c) It is categorically forbidden to cane or kick pupils or strike them on the face or head;
- (d) Punishment must be graded and the name of the pupil must be entered in the register, together with the punishment and the reasons for it. If the misdeed is repeated, the guardian of the pupil must be summoned;
- (e) Teachers must refrain from inflicting punishment when provoked by anger.

290. In regard to article 28, paragraph 3, detailed information on the measures adopted to promote and encourage international cooperation in matters relating to education was previously transmitted to the Committee in the Sudan's initial report of 1993. The changes which have taken place in the period intervening between the two reports include the fact that the Sudan is preparing several programmes in conjunction with United Nations organizations, specifically UNESCO, WFP, UNICEF, UNDP and UNFPA. Cooperation is also continuing with the Islamic Educational, Scientific and Cultural Organization (ISESCO), the Islamic Development Bank in Jeddah, the African Development Bank (ADB) and the Arab Organization for Agricultural Development. These organizations have been involved in the following projects:

- (a) Restoration of the school nutrition project in six states;
- (b) The funding of school equipment projects;
- (c) The education of nomads;
- (d) The construction of schools;
- (e) The financing of conferences and regional or international school seminars;
- (f) Education-related studies and research.

291. The efforts to eliminate ignorance and illiteracy are covered by the information provided in this report concerning the projects to educate young people, assist displaced persons, educate nomads and provide access to education for all villagers, as well as by the information on illiteracy, adult education and non-formal systems of education, all of which contribute to the elimination of ignorance and illiteracy. The activities and programmes developed are referred to in the above paragraph.

B. Aims of education
(art. 29)

292. The aims of education have been developed and furthered in line with the ongoing developments taking place in the theoretical and applied sciences and in conformity with international standards, conventions and obligations, in particular the Convention on the Rights of the Child. The effectiveness of education depends on its absorption of this rapidly developing technical progress in the light of free and compulsory basic education accessible to all. The aims of education focus on educational principles and guidelines and on the educational strategy referred to below.

Principles and guidelines

- (a) The dignity and status of human beings in society should be affirmed by raising their awareness of their rights, their duties and their role;
- (b) Balance and integrity of character should be achieved in students;
- (c) The national spirit should be developed and attention paid to the basic Sudanese principles of civilization, in addition to which peace and an awareness of the cultural and historic relations of the Arab, African and Islamic peoples should be built;
- (d) Scientific thought should be established as an approach and should also constitute a basis for life and overall development, form part of the cultural structure and be linked with work;
- (e) Self-reliance should be encouraged in individuals and in society at large so that needs can continue to be satisfied independently of the State.

Education policies

293. The National Conference on Education Policies of 1990 produced the following recommendations:

- (a) The curricula should be revised;
- (b) Basic education should be accessible to all by the year 2000;
- (c) Teachers should receive academic and vocational training and efforts made to ensure that they enjoy job stability;
- (d) Education bodies should be developed, such as the National Council for Education and parent-teacher associations;
- (e) The Conference also discussed questions of education and stated the view that:

- The period of basic education should be increased to eight years;
- The sources of funding for education should be diversified;
- Efforts should be made to provide textbooks for every pupil.

The education strategy

294. The education strategy embodies the policies emanating from the Conference, which identified seven critical areas of concern. Four years after work had begun on the main areas of concern, a review was conducted and the subjects of peace-building and external relations were added. The critical areas of concern are:

- (a) To adopt the principle of education planning and promote education management, monitoring and evaluation;
- (b) To ensure that basic education in the wider sense is accessible to all;
- (c) To develop and diversify secondary education;
- (d) To develop curricula and promote educational research;
- (e) To select teachers with care, provide them with training and enhance their professional and social status;
- (f) To improve the publication of school textbooks and widen the use of education techniques;
- (g) To diversify the sources of financing for general education;
- (h) To build peace and take due regard of diversity, suitability, the curriculum, the development of local languages and the revival of education in the war zones;
- (i) To trigger external relations.

General aims of Sudanese education

295. As articulated in the Public Education Act of 1992, the general aims of education are as follows:

- (a) To instil religious faith and morals in young people, impart to them the teachings and heritage of religion and lead them to embrace the right path in order to build faithful, God-worshipping, liberated and responsible individuals, with emphasis on social values motivated by devoutness and piety;
- (b) To exercise the minds of young people, educate them in the sciences, infuse them with experience, develop their bodies through exercise, further their integrity through customs and morals and teach them to be scrupulous in their thoughts, actions and treatment of others;
- (c) To strengthen the spirit of community and devotion to the homeland, develop a willingness to cooperate and a sense of duty, create the desire to do public good and build love of country, nation and humanity;

(d) To construct the elements needed to create a society in which there is independence, trust in God, self-reliance, an outpouring of spiritual and physical energies, a mobilization of social and material forces and the spread of ambition for a pioneering and sublime ideal of civilization;

(e) To encourage creativity, develop abilities and skills, provide opportunities for training in modern technology and develop and adapt that technology in order to further good, justice and probity through the optimum use of resources with a view to the achievement of overall development;

(f) To develop environmental awareness in young people and familiarize them with the physical components of water, air, earth and sky so that they become aware of the things bestowed by God, save them from perishing and develop and use them for the good of humankind.

296. In this connection, it is essential to state that the aims of education in the Sudan are entirely consistent with the guidelines contained in article 29 concerning the full development of the child's abilities and potential, respect for the child's culture and for the values of freedom, tolerance, equality, self-reliance, as well as the development of an environmental sense on the basis of equal opportunities and due regard for the abilities and inclinations of the child and for scientific and technical development.

Special features of the aims of education

297. These special features have a number of characteristics which can be articulated as follows:

(a) Comprehensiveness and diversity

These aims include all areas of a child's life and all stages of growth, refinement and welfare. Nor do they neglect the mind, body and soul, since they are concerned with spiritual, moral, scientific and physical education.

(b) Interaction and solidarity

These aims are not fragmented or mutually repellent; on the contrary, they interact as one and in a single direction. They demand thought, contemplation, cultural tolerance and an openness to civilization, as well as respect for the exploratory approach and all fields of science. They also emphasize the guarantee of basic education for all children, a commitment which ranks permanently on the scale of educational priorities.

(c) Mediation and moderation

The above features go hand in hand with the trend towards steering a middle ground between physical needs, the demands of intellectual development and the callings of the spirit. It is a fully harmonious education in which children can easily develop their strengths, round out their personalities and evolve their talents and their mental and physical abilities to form well-proportioned human beings.

(d) Dissemination

These aims are not confined to any particular religion, race, culture, tribal group, state, locality, colour or segment of society but are directed at all Sudanese children of different races, cultures, colours, areas and living environments, taking into account that very diversity.

Standard of teaching (education content)

298. Teaching is to education as the heart to the body. Teaching is a means of education that should convey information, trends, values, skills and knowledge which might be referred to as tools of learning or curricula or syllabuses, bearing in mind that there are fine shades of meaning which separate these terms.

299. Children are naturally inclined to seek new knowledge and therefore turn to the teacher who already has that knowledge or who supplies them with information. In the Sudan, the teaching process takes its cue from a set of standards and principles which turn it into a technical, educational, social and scientific process referred to as a body of teaching principles or the teaching method, or, in other words, the means by which the teacher performs his work. Its intention is to consider the inclinations, abilities, innate willingness and natural instincts of the child, since every stage of education has its own objective and method of gradual implementation, taking into account the power of the mind, its receptiveness and the importance of setting an example, since the teacher is like father to son. Education methods are therefore firmly linked with the liveliness of the presentation, the power of the imagination, the strength of the depiction and preparation for the decisive moment when communication reaches such depth as to create fusion. It is no secret that children have various problems which education should address by offering different methods of guidance, direction and evaluation, as well as kindness and fairness.

300. Education is a right for all, each according to his abilities and receptiveness. A look at the education shows that it has a unique form; it is a mixture of grass-roots and official efforts which are integrated and coordinated for all to see. The official efforts predominate in the field of education, although the Government never stands in the way of anyone wishing to set up a school, university or college and never prevents benefactors from reaching out to help with the expenditure on schools, pupils and so on.

301. The basic message of the above is that the Sudan is committed to education as a right of every citizen and to the conclusions of the Jomtien World Declaration on Education for All, since the quest for knowledge is a duty of every Muslim. With a view to making education accessible to all children, the plans of the Ministry of Education included the following measures:

(a) The provision of a sufficient number of school buildings for each stage and type of education to accommodate all children of school age by the year 2000 in such a way as to keep pace with scientific and technical developments with a view to developing the child's mental, physical and spiritual capacities, in addition to the provision of laboratory equipment and essential facilities, the practice of educational and social activities and the regular maintenance and upkeep of all buildings, equipment and machinery;

(b) In the field of literacy, implementation of the national literacy campaign as follows:

- (i) Teacher preparation and training;
- (ii) Curriculum development;
- (iii) Supply of school textbooks;
- (iv) Equipment of literacy centres and places;
- (v) Linkage between literacy, vocational training and promotion of adult education programmes;
- (vi) Conduct of research and experiments in the field of literacy.

Opportunities for the establishment of private schools

302. Opportunities are provided for the establishment of private schools in order to further the State's objective of fully accommodating all those of school age by the year 2000. Mechanisms are also in place to ascertain that these schools respect the above-mentioned aims of education, observe the general principles designed to guarantee the best interests of the child, particularly in the areas of safety, health,

numbers and suitability of staff, as well as competent supervision, and conform with the standards laid down by the competent authorities.

Services

303. Services for children with special needs have been expanded; various disability aids are provided, as is medical, psychological, educational and social care, and teachers capable of assuming responsibility are trained both prior to and during their employment. Graduates are also monitored to ensure their social integration.

Improved quality of education

304. The programmes implemented in order to strengthen and develop the information needed to build the personality, talents and mental and physical abilities of the child include the following activities:

- (a) Curriculum development, design and testing, with special focus on human rights, the rights of the child, environmental rights, harmful traditional practices and pre-school education;
- (b) The development and better printing of school textbooks;
- (c) The production of sophisticated educational materials in line with technological advances.

305. Activities have been devised to promote the physical and mental development of students, as well as improve their health, their emotional and spiritual lives and their creativity. Sporting, cultural, social and vocational activities have also been increased (see annex 2).

306. In regard to improving the examination system, evaluation is the key to the development of education, as it reveals the extent to which curricula, teaching and administrative methods and training are effective. A special department has therefore been set up for the purpose of evaluating education.

307. Efforts are being made to implement cultural exchange programmes, hold international conferences, enhance information systems and develop field monitoring methods.

308. The curricula in public education cover everything aimed at achieving basic human and child rights principles, basic educational freedoms and an effective teaching strategy which enables the learner to acquire knowledge, values, directions, skills. This is strengthened by all the subjects on the curriculum, particularly those involving the focal area of the human being and covering issues such as the diversity of the human race, tolerance and fanaticism, together with social subjects which develop international understanding based on freedom and equality.

Difficulties in education

309. In the Sudan, a number of difficulties are encountered in the field of education that clearly have repercussions on the efficiency of the education process. These difficulties include:

- (a) The school intake and consequent problems such as drop-out and illiteracy;
- (b) School premises and equipment;

(c) Curriculum development and teacher training;

(d) The gap between the male and female intake, even though it has begun to narrow in recent years as a result of the efforts which the Sudan has made to that end; in 1996, the percentage of females to males stood at 82 per cent in basic education and 89 per cent in secondary education.

310. Legislative measures aimed at realizing the right of every individual to cultural life are based on protection and promotion of the Sudanese cultural heritage as represented by a variety of cultures, sound customs and traditions, creditable behaviour and the guidance provided by lofty human values and principles and by the national options.

311. The Government encourages the private initiatives of grass-roots institutions and adopts projects which contribute to their advancement. The funds used to develop cultural activities are included in the general budget of the State.

312. As for the cultural involvement of all groups in society, including children, a number of institutions intended to give effect to this right and provide the facilities needed to encourage cultural creativity have been established, as follows:

1. The Sudanese Cultural Centre;
2. The Sudanese National Museum;
3. National theatre groups;
4. The National Library;
5. The National Theatre;
6. The National Centre for Calligraphy;
7. The Central Office for Publishing, Distribution and Advertising;
8. The Centre for the Recording and Documentation of Sudanese Life;
9. The Sudan Museum of Anthropology;
10. The Sudanese-Chinese Hall of Friendship Cinema;
11. The Palace Children's and Youth Cinema;
12. The State Cinema Institution.

There are also a number of foreign cultural centres, including:

1. The British Council;
2. The French Cultural Centre;
3. The German Goethe Institute;
4. The Iranian Cultural Centre;
5. The Libyan Cultural Centre;
6. The Iraqi Cultural Centre.

313. International music and singing festivals are organized on an annual basis, as are other displays of the cultural heritage of the different tribes of the Sudan and exhibitions of school coursework.

314. The Government of the Sudan devotes particular attention to raising awareness of the culture of the country's different communities and minorities, as clearly demonstrated by the establishment of national and state cultural centres and the national troupe for the popular arts, the membership of which includes the different tribes and minorities of the Sudan.

VIII. SPECIAL PROTECTION MEASURES
(arts. 22, 38, 39, 40, 37 (b) – (d), 32-36)

A. Children in situations of emergency

1. Refugee children (art. 22)

315. The Sudan's clear-cut policy towards refugees and the positive manner in which it treats them do not stem from a vacuum; it is the religious and social heritage of the Sudanese that constitutes a solid foundation for both. The preachings of Islam and Christianity advocate mercy, sympathy and support for fellow human beings. At the same time, Arab and African customs demand that refugees and all other new arrivals must receive a positive welcome, based on the dictum for which the Sudanese are renowned, namely that guests must be treated with respect. Moreover, the historical relations of society between the different refugee elements take precedence over any political situation when refugees are taken in at the border regions where they head in search of sanctuary. The fact that the Sudan is constituted from a number of ethnic and racial groups, some of which are recent newcomers to the country, has helped to create a mutually tolerant social mix that remains unperturbed by the presence of one or two new elements. As a result, the practices adopted by the country when taking in refugees have developed into a so-called open-door policy, based not only on the religious and social heritage but also on international commitments of a political and legal nature.

316. The Sudan also affirmed its commitment to the global definition of the word "refugee" contained in international and regional instruments and incorporated into the Sudanese Asylum Act of 1974 (annexed hereto). As a result of this commitment, the country continued to shoulder the burden of taking in over one million refugees who, in recent decades, particularly between the early 1960s and the late 1980s, had fled from the harsh conditions in neighbouring countries, such as Ethiopia, Eritrea, the Democratic Republic of the Congo (formerly Zaire), Chad and Uganda. All of these refugees were granted the right of asylum and received a civilized and humane welcome; despite their own meagre resources and hardships, the people of the Sudan shared their bread, their water and their medicine with them. The refugees are now concentrated in the country's eastern states of Gedaref, Kassala and Red Sea, in the central states of Gezira, Sennar and Blue Nile, in border states such as Bahr al-Jabal and in the state of West Darfur. There are also large numbers of refugees in the national capital of Khartoum. The assistance provided by the Sudan was not restricted to taking in refugees but extended to keen cooperation with the international community, in the form of UNHCR, and with neighbouring States and the refugees themselves with a view to permanently resolving this humanitarian problem through voluntary repatriation of the refugees in a manner that preserves their dignity and humanity.

317. The care which the Sudan offers to refugees and its cooperation with UNHCR to ensure their successful repatriation are based on the mandate vested in UNHCR by the General Assembly of the United Nations to provide international protection and endeavour to create permanent solutions to the problem of asylum in general.

318. The Sudan also endeavours to encourage voluntary repatriation in conformity with the provisions of the Charter of the Organization of African Unity (OAU) concerning refugees in Africa, specifically article 5 relating to voluntary repatriation. Furthermore, the Sudan emphasizes that voluntary repatriation must be based on the true desire of the refugee, particularly since the said article stipulates that the refugee's choice must be respected and that in no circumstances must any refugee be repatriated against his will.

319. Refugee groups include a substantial number of children, who are directly affected by the causes and consequences of asylum. Children aged between one and eight years of age account for 55.5 per cent of the total number of refugees in the camp. Children under the age of five years account for 15.5 per cent.

320. Affirming the attention which the Sudan devotes to refugee children and the need to protect them, article 2 of the Asylum Act of 1974 (annexed hereto), which is the national legislation regulating the situation of refugees in the Sudan, defines the word "refugee" as including "any person who leaves the country of which he or she is a national owing to fear of persecution or exposure to danger for reasons of race, religion, membership of a political or social group or owing to fear of acts of war, foreign aggression, foreign occupation or domination or internal disturbances and who, on account of that fear, cannot or does not wish to return to his or her country, or any person who is stateless but who, because of such incidents, leaves the country in which he or she normally resides and cannot or does not wish to return on account of that fear. The term "refugee" includes children who are unaccompanied or whose guardians have disappeared and who are outside the countries of which they are nationals."

321. As this definition shows, the Asylum Act of 1974 expressly includes an additional new group that was perhaps implicitly included in the definition of the word "refugee" in the Geneva Convention and the OAU Charter, namely children and war orphans. This is an indication of the Sudan's genuine concern to provide protection for refugee children. With a view to achieving that objective, the Sudanese Government has gradually provided services for the child in the field of education, health and legal protection. As for permanent solutions to the problem of the refugee child, assistance is provided by voluntary non-governmental organizations, both local and foreign, in accordance with agreements signed with each individual organization concerning the provision of services to children. The assistance provided to the Sudan by UNHCR, however, has been continuously diminishing year after year, even though the number of refugees in the country remains more or less unchanged.

Education services

322. With the support of UNHCR, voluntary non-governmental organizations and the European Economic Community, as well as support provided by international organizations on the basis of bilateral agreements with the Government of the Sudan, a number of schools have been set up to educate refugee children. The Sudanese Government also permitted refugee communities to establish their own schools in order to enable their children to follow the curricula studied in their home countries, thus facilitating their social integration at such time as they are voluntarily repatriated.

323. The Sudanese Government has also given refugee children the opportunity to be taught in government schools alongside their Sudanese peers. For the past five years, students have been supplied with school items such as textbooks, exercise books and mathematical instruments, in addition to school uniforms. Pupils having successfully completed what was previously the sixth year were admitted to the basic stage, while those having successfully completed what is currently the eighth year of the basic stage were admitted to government secondary schools. All teachers who work in refugee schools are trained in special teacher training institutes. Several kindergartens were also specifically established for children under school age.

324. The table below shows the numbers of schools, school pupils and children in kindergarten for the past five years in the states of Khartoum, Gezira, Gedaref, Kassala, Red Sea and Sennar (Source: Office of the Commissioner for Refugees, Ministry of Internal Affairs).

(a) Basic stage

| <i>School year</i> | <i>Number of schools</i> | <i>Number of pupils</i> | <i>Number of children in Kindergarten</i> |
|--------------------|--------------------------|-------------------------|---|
| 1992 | 27 | 14 339 | 1 695 |
| 1993 | 33 | 14 811 | 1 791 |
| 1994 | 33 | 15 151 | 1 805 |
| 1995 | 33 | 16 235 | 1 757 |
| 1996 | 31 | 13 701 | 1 920 |

Source: Office of the Commissioner for Refugees.

(b) Secondary stage

| <i>School year</i> | <i>Number of students</i> |
|--------------------|---------------------------|
| 1992 | 660 |
| 1993 | 640 |
| 1994 | 610 |
| 1995 | 600 |
| 1996 | 384 |

Source: Office of the Commissioner for Refugees.

(c) Universities and higher institutes

| <i>Academic year</i> | <i>Number of students</i> |
|----------------------|---------------------------|
| 1992 | 109 |
| 1993 | 109 |
| 1994 | 85 |
| 1995 | 85 |
| 1996 | 55 |

Source: Office of the Commissioner for Refugees.

(d) Community schools

- (i) The Ethiopian Nile School in Khartoum state, attended by 1,200 pupils;
- (ii) Seven private schools in Red Sea state belonging to the Eritrean education system and attended by a total of 10,640 pupils.

The education support budgets provided by UNHCR over the past five years are as follows:

(a) Basic and secondary stages

| <i>Year</i> | <i>Budget (US\$)</i> |
|-------------|----------------------|
| 1993 | 1 016 474 |
| 1994 | 945 852 |
| 1995 | 1 164 818 |
| 1996 | 719 757 |
| 1997 | 577 670 |

(b) Universities and higher institutes

| <i>Year</i> | <i>Budget (US\$)</i> |
|-------------|----------------------|
| 1992 | 13 107 550 |
| 1993 | 82 784 552 |
| 1994 | 98 090 540 |
| 1995 | 159 374 200 |
| 1996 | 123 900 050 |

325. Conclusive evidence of the Sudan's compliance with international instruments is provided by the issuance, on 16 June 1993, of a ministerial ordinance (annexed hereto) by the Ministry of Higher Education and Scientific Research, pursuant to which refugee children pay the same school fees as all Sudanese children, in accordance with the Geneva Convention of 1951 and its Additional Protocol of 1967 and the Sudan Asylum Act of 1974.

Health

326. Maternal and child health services are regarded as a major part of any health programme; given that such services cater to the vulnerable social group of mothers and children, they receive priority attention and are closely monitored.

327. The health services provided to refugee children in Kassala state over the past five years (1993-1997) are as follows:

(a) Immunization

| | <i>Inoculation</i> | <i>Number of children inoculated</i> |
|----|--------------------|--------------------------------------|
| 1. | Poliomyelitis | 20 899 |
| 2. | Tuberculosis | 5 311 |
| 3. | Measles | 3 933 |
| 4. | Tetanus | 18 645 |

(b) Children treated for disease

| | <i>Disease</i> | <i>Number of children treated</i> |
|----|----------------|-----------------------------------|
| 1. | Malaria | 2 093 |
| 2. | Tuberculosis | 306 |
| 3. | Diarrhoea | 104 536 |
| 4. | Other diseases | 88 907 |

(c) Supplementary nutrition

A total of 190,820 children benefited from the supplementary nutrition programme in the states of Kassala, Gedaref and Gezira.

(d) Maternal and child health

| <i>Year</i> | <i>Budget (US\$)</i> |
|-------------|----------------------|
| 1993 | 998 467 |
| 1994 | 931 205 |
| 1995 | 967 131 |
| 1996 | 705 275 |
| 1997 | 782 026 |

328. The provision of identity cards for refugee children under 18 years of age is commonly recognized as a measure that is instrumental to ensuring their legal protection, as it helps to legitimize their status as refugees. An identity card is usually issued to any refugee child who so requests.

329. In relation to long-term solutions to the problem of refugee children, during the years 1993-1997, the Sudanese Government facilitated measures for the voluntary repatriation of refugee children, accompanied either by their guardians or by persons caring for them under the kafalah system. This included measures for the repatriation of orphaned Eritrean children being cared for by the United States organization Lamba until they could be repatriated. Overall, 6,631 children, 3,266 of them males and 3,355 of them females, were repatriated, in addition to 40 orphans who were repatriated to Eritrea.

2. Children in armed conflicts (art. 38), including physical and psychological recovery and social reintegration (art. 39)

330. The civil conflict has eroded the basic service structures in the war zones and caused entire communities to flee from their home areas in search of safe havens, both inside and outside national boundaries. Children and women make up a large percentage of these migrants.

331. This demographic shift drastically altered the family and community care networks which prevailed among families and tribes in their home areas, as the fact of being in large towns encouraged breakdown of the support systems in which children were the focus of the extended family. The civil conflict also destroyed the structure of child communities in the war zones, as well as their homes, schools, health systems and cultural and religious institutions.

332. The war also violated rights such as the rights to life, health, character development, a proper upbringing and social protection. The prolonged conflict has had profound and adverse material, psychological and emotional consequences.

333. In order to remedy this situation, the Sudan acceded to the main human rights instruments in general and to the Convention on the Rights of the Child in particular as a source of the effective principles and standards to be applied in dealing with the situation of children affected by war, bearing in mind its multifaceted specialist approach to child protection and development.

334. The main instruments to which the Sudan has acceded are as follows:

1. The International Covenant on Civil and Political Rights (1976);
2. The International Covenant on Economic, Social and Cultural Rights (1976);
3. The International Convention on the Elimination of All Forms of Racial Discrimination (1977);
4. The Convention relating to the Status of Refugees (1977);
5. The Protocol relating to the Status of Refugees (1977);
6. The Slavery Convention (1926-1927);

7. The Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery (1956-1957).

335. The Sudan's accession to these instruments stemmed from the fact that the rights which they articulate are already firmly entrenched as part of its cultural heritage, its customs and its existing laws. In some instances, the Sudan enacted new laws guaranteeing to safeguard those rights, such as the Asylum Act of 1974, the Convention on the Rights of the Child of 1989, which is now a Sudanese legislative enactment, the Seventh Constitutional Decree of 1993, the Fourteenth Constitutional Decree of 1997, the Khartoum Peace Agreement and the Peace and Transitional Measures for the Southern States Act of 1997. These laws fostered the conditions needed to ensure a safer and brighter future for the children affected by armed conflict in the south of the country and to enhance opportunities for application of the World Declaration on the Survival, Development and Protection of Children, for human development and for alleviation of the effects of poverty. It should be noted that the draft permanent constitution of 1998 includes a provision pursuant to which the Khartoum Peace Agreement and the Fourteenth Constitutional Decree of 1997 are to be regarded as integral to the constitution subsequent to its approval by the popular referendum scheduled to take place next June.

336. The administrative bodies and measures introduced to implement the Khartoum Peace Agreement include the following:

1. The Southern States Coordination Council;
2. The Joint Military Technical Commission;
3. The Military Ceasefire Committee;
4. Additional security measures during the transitional period;
5. A general amnesty;
6. The General Amnesty Commission and Tribunal;
7. The Development Programme Fund;
8. The Relief and Resettlement Organization;
9. The Public Service Commission.

337. The policies and programmes developed to provide humanitarian assistance were covered in detail in the initial report submitted to the Committee in 1992. Operation Lifeline Sudan is still in progress and the efforts to help displaced persons are likewise continuing. The initial report stated that the rebel movement abducted large numbers of children, some of whom it recruited as soldiers and some of whom it employed to carry out support functions and work as porters, weapons carriers, fighters and so on. These minors still form part of the rebel forces today.

338. In accordance with the Khartoum Peace Agreement, the Fourteenth Constitutional Decree and the Peace and Transitional Measures for the Southern States Act, utmost priority is accorded to dealing with pressing matters such as displaced child soldiers, unaccompanied children and mine clearance. Budgets have also been allocated to provide domestic water, food, shelter and health services with a view to rehabilitating such children on the basis of the overriding social and cultural values in their communities.

339. The priority measures adopted in favour of displaced, homeless or unaccompanied children, refugee children and children who are abducted or recruited as soldiers by the rebel movement include the preparation of programmes aimed at reunifying them with their immediate families or relatives and at providing alternative care prior to reunification, together with assistance for the families providing such care and for the reception centres, in addition to support to enable families involved in productive programmes to care for such children. The war had the effect of disrupting regular food supplies and diminishing the production and purchasing capacities of citizens. Support for programmes involving

agriculture, livestock and fisheries is therefore vital with a view to ensuring that children and their families have sufficient food.

340. By the same token, the programme to supply clean water has received the highest priority in the interests of building the capacity of families for self-reliance, whether using their own resources or those of the local community. The areas of child therapy and social reintegration also acquired particular significance in the context of the rehabilitation and development programme, as the war affected the elements essential to the physical, mental and emotional development of the child.

341. The psychological treatment programme comprises best practices which affirm a knowledge of local cultures and traditions and guarantee consultation with local communities. Typically, the programme is sufficiently flexible to be adapted to circumstance. There are also separate programmes for mental health, rehabilitation and development as part of daily family and community life with a view to providing opportunity for expression, for the pursuit of organized activities such as sports and for school enrolment, taking care to ensure that children are not placed in institutions. The mine clearance programme has started by providing training in mine removal and raising awareness of mine hazards. Landmines and unexploded projectiles are particularly dangerous to children in view of their tendency to pick up unfamiliar items which they stumble upon. Moreover, they may not recognize written warning signs if they are unable to read. In many cultures, children take care of livestock in areas planted with mines or where there are undetonated bombs. If an exploding mine does not cause death, it can, for example, sever limbs and thus cause serious disability, which is a problem for the child, even when prosthetic limbs are fitted. Prolonged medical treatment is also costly for the victim's family and for society in general. The programme has taken into consideration the cost of mine clearance and rehabilitation for the victims, particularly since mine injuries can destroy families; a situation in which a father receives a mine injury and loses his capacity to work has adverse consequences for the welfare of his children. Landmines and undetonated bombs also have implications for reconstruction and development, as they affect the safe return of individuals and their families to their homes, in addition to which mined land is unsuitable for agriculture, grazing or wood-gathering. Moreover, the presence of mines hinders road construction and the movement of goods and services.

342. The programme devotes great attention to maximizing the capacity for mine clearance and to raising awareness of the danger of mines, all of which requires substantial financial support. It is also vital to develop the local capacity for artificial limb production, which would provide economic opportunities for the victims and promote their psychological treatment and social therapy.

343. The war-affected communities in the Sudan face enormous challenges in their attempt to rebuild their lives. In many cases, they have few resources on which to rely in the reconstruction effort, particularly if the humanitarian aid is such as to encourage dependence instead of strengthening self-reliance in the family and society.

344. It is an immense task to ensure that a family is self-reliant. At the initial stage, the rehabilitation programme included a close-knit social network and aimed to support women and children by encouraging small projects. Education also helps to promote peace, social justice, respect for human rights, the assumption of responsibility and the development of negotiating and contact skills, thus making it possible to resolve problems in furtherance of the country's peace and stability. Multilateral, bilateral and private sources of funding should help to finance the programme in the light of article 4 of the Convention on the Rights of the Child, which stipulates an undertaking of assistance to poor countries within the framework of international cooperation. Civil society organizations can also provide considerable help in implementing this programme in view of their capabilities and expertise in connection with children's rights. Given their importance, it is essential to activate dialogue and cooperation among such organizations, regional bodies and the international community and encourage

them to use the common criteria for child rights as a framework for their activities. On that score, organizations involved in work with women, children and local communities play an important role. Women also play a vital role in peace-building. The programme should therefore make use of the ideas and experiences of women in connection with protecting their children, safeguarding their families and supporting their local community. It is hoped that this programme will enhance the status of the human being as the most important element and that children will be accorded a recognized place.

345. This programme is a call for action to eliminate the effects of war, which have a negative impact on children. Such action is the responsibility of all governments, international organizations and civil society organizations. International mobilization should be strengthened with a view to ensuring that Sudanese children are the focus of peace and that they are assured of freedom and justice in their enjoyment of peace, which is the right of every child.

B. Children involved with the system of administration of juvenile justice
(art. 40)

346. The legislative measures relating to the administration of juvenile justice are as follows:

(a) The relevant laws are the Criminal Code of 1991, the Criminal Procedures Act of 1991 and the Juvenile Welfare Act of 1983. In the Criminal Code of 1991, the main principles relating to children are that minors have no criminal responsibility insofar as they lack the awareness and mental understanding required to constitute criminal behaviour;

(b) The penal philosophy is to reform and educate the juvenile, rectify his conduct and shield him from the administration of criminal justice applied to adults;

(c) In all departments of criminal justice, the treatment of juveniles has a social rather than criminal focus;

347. In that regard, a major legal provision is contained in article 9, which provides that “a minor below legal age shall not be deemed to have perpetrated an offence, although the welfare and reform measures contained in this Code shall apply to any person over seven years of age, as deemed appropriate by the court.” Article 47 of the Code also stipulates that, in the case of juveniles who were over seven and under 18 years of age at the time of committing the offence, the court may apply measures such as “reprimand during the hearing and in the presence of his guardian, flogging as a disciplinary punishment for any person having attained 10 years of age, although not more than 20 lashes of the whip may be administered, surrender of the juvenile to his parent or a trustworthy person who has undertaken to provide proper care, or placement of the juvenile in a correctional institution for the purpose of reform and education for a period of not less than two years and not more than five years.”

348. Article 4 of the Criminal Procedures Act of 1991 stipulates that the following principles must be observed when applying its provisions:

(a) All persons have a duty to prevent the commission of an offence;

(b) No person may be incriminated or punished except on the basis of an existing legislative provision;

(c) An accused person is innocent until proven guilty and has the right to be investigated and tried fairly and impartially;

(d) Any infringement of the person or property of the accused is prohibited and the accused may not submit evidence which incriminates him or be compelled to swear oath except in offences involving no doctrinal punishment (*hadd*) and relating to private third party rights;

(e) Any form of interference with witnesses is prohibited;

(f) Care must be taken to exercise clemency, expedite the procedures for investigation and summons and avoid the use of measures of restraint unless necessary;

(g) The Office of the Criminal Prosecutor shall act as the guardian of a victim who has no guardian.

349. The Juvenile Welfare Act was also promulgated in 1983. It is a law which covers all matters relating to children and juveniles insofar as it provides definitions for a juvenile, an offender and a homeless person. Chapter II also provides for a juvenile police force and stipulates that every police station must have a section competent to perform the duties stipulated in the Act. Article 4 further defines the areas of competence of the juvenile police and criminal procedures. Chapter III determines the method for formulating the overall juvenile welfare policy and specifies the tasks to be performed by welfare institutions in their efforts to provide their juvenile inmates with various vocational skills and ensure their education and reform. It also specifies that such homes should be staffed by specialists qualified to work in this particular field and that a sound administrative system of running the homes should be developed.

350. Chapter IV deals with probation; the probation officer is competent to furnish the court with the information which it needs in order to take an appropriate decision which accommodates the interests of the juvenile by taking into consideration all social and psychological aspects. The Act provides for the establishment of social relationships with the juvenile on probation and his family and for assistance in resolving his problems or those of his family. Chapter V also covers matters relating to the establishment and functions of remand homes, the main purpose of which is to hold juveniles until they are presented for trial. Juveniles may not remain in a remand home for more than 30 days without leave from the court. Bearing in mind the requirement to complete juvenile procedures, chapter VI stipulates that juveniles must be tried by a competent juvenile court that differs from the courts stipulated in the Criminal Procedures Act, being a special court in terms of its composition, jurisdiction and procedures and in its powers to hand down sentences and impose reform measures. The Act also regulates the treatment of juvenile offenders, who must be placed in a correctional home for a period of not more than five years. The administration in charge of running the home may, on the recommendation of the competent authorities, release the offender before expiration of the period specified if it is in the interests of the juvenile to do so.

351. With a view to following up all matters relating to juveniles, chapter VIII of the Act provides for juvenile boards whose task it is to visit correctional institutes and remand homes and submit regular reports to the competent minister comprising such proposals and other matters as it deems fit in regard to helping juveniles to earn a decent living for themselves.

352. The National Council for Child Welfare ran several training and information seminars on the Convention on the Rights of the Child and relevant Sudanese laws. These seminars targeted judges, legal advisors, lawyers, parents and all other concerned parties, including public servants assigned to implement the Convention on the Rights of the Child and other pertinent international instruments, such as members of the police force, welfare home supervisors, doctors, teachers and so on. They also targeted all state

authorities, such as the state councils. A number of seminars were also held in the different states, in which connection it should be noted that the essential difficulty lies in obtaining the necessary finance.

353. The State also took conclusive steps to implement the Convention on the Rights of the Child on all fronts, bearing in mind that it is part of domestic law. Each state and federal authority devotes the necessary attention to this matter on the basis of its own child-related programmes.

354. Children in the Sudan are not deprived of their liberty except in accordance with the provisions of the law, as discussed above in connection with legislative measures. In addition, the provisions of article 27, paragraph 2, of the Criminal Code of 1991 provide that, with the exception of offences of doctrinal punishment (*hadd*) or retribution (*qasas*), persons under the age of 18 and over the age of 70 may not be sentenced to death. Article 193, paragraph 2, of the Criminal Procedures Act of 1991 also stipulates that, if it is demonstrated to the prison warden before the death penalty is carried out that the convicted person is an expectant or nursing mother, there shall be a stay of execution, which must be notified to the presiding court judge in order to defer enforcement until after delivery and thereafter, if the newborn lives, until two years of nursing are complete. In all cases, there is no discrimination in conformity with the principles of the Convention and the best interests of the child and in order to guarantee the child's right to life, survival and development to the maximum extent possible. In view of their importance, these provisions, which are designed to afford special treatment to and protect the welfare of children, elderly persons, nursing mothers and pregnant women, are included in the draft constitution of the Sudan of 1998.

355. Article 47 of the Criminal Procedures Act of 1991 stipulates the following measures in connection with depriving persons of their liberty:

“The court may apply the following measures to a juvenile suspect who, at the time of the perpetration of the criminal offence, was over seven and under 18 years of age:

- (a) Reprimand during the hearing and in the presence of his guardian;
- (b) Surrender of the juvenile to his parent or a trustworthy person who had undertaken to provide proper care;
- (c) Placement of the juvenile in a correctional institution for the purpose of reform and education for a period of not less than two years and not more than five years.”

356. The Juvenile Welfare Act also stipulates the same measures for depriving children of their liberty and moreover creates the appropriate mechanisms for that purpose, as discussed in previous paragraphs.

357. The amount of data available on the number of children deprived of their liberty varies over different periods of time. The example given here is based on the type of deprivation; some are deprived of liberty through placement in welfare homes and others through placement in correctional homes, as shown below. No person in any of these homes, however, is illegally or arbitrarily deprived of liberty.

| <i>No.</i> | <i>Name of home</i> | <i>Date of establishment</i> | <i>Age group</i> | <i>Number of juveniles</i> |
|------------|---------------------------------|------------------------------|------------------|----------------------------|
| 1. | Correctional home for juveniles | 1950 | 15-18 | 160 |
| 2. | Ashbal correctional home | 1951 | 10-14 | 73 |

Source: General Department of Reform and Prisons.

358. The principles on which the treatment of juveniles in welfare homes is based are as follows:

- (a) The principle of correction and reform is observed in the treatment of juveniles;
- (b) Young people sentenced to placement in homes are fully segregated from other adult prisoners by age and are treated in accordance with their legal status and age;
- (c) Petitions and appeals in regard to juveniles must be prepared after the juvenile has entered the home and must be submitted together with case studies from the Office of Social Services.

Public health

359. The Prisons Act provides that: "In accordance with the provisions of the law and regulations, prisoners must maintain the cleanliness of their bodies, their clothing and any utensil or container issued to them for use. The chief prison officer must also provide them with the apparatus and materials needed for such purpose. Items of food must be kept in such a manner as to ensure that they do not perish."

Imposition of penalties

360. At trial, all prisoners are given the opportunity to hear the charge against them and to defend themselves. The regulations on the treatment of prisoners stipulate that the duties of the prison officer are to ensure that:

- (a) No prison is used for a private purpose;
- (b) Every prisoner is treated firmly, with due regard for humanitarian considerations.

Health care

361. The regulations provide that the duties of prison doctors include the provision of health care for inmates through the supply of clean drinking water and water for the purposes of bathing and washing clothes.

Sports

362. Juveniles engage in sports activities, such as football, basketball, softball and gymnastics. The law prohibits the employment of juveniles in physically arduous work. The duties of the chief prison office include ensuring that the orders of imprisonment in connection with all prisoners are issued by a competent authority in accordance with the law.

Correspondence

363. Every prisoner is permitted to send one letter on entering prison and thereafter one letter per month at the prison's expense. He may seek the permission of the chief prison officer to send a further letter during the month at his own expense.

Visits

364. Juveniles are permitted one visit from relatives following the end of the medical testing period and a once-weekly visit thereafter. Juveniles are also permitted to visit their families once every three months.

Permission to study

365. Prisoners are permitted to pursue their studies and sit examinations wherever possible.

Preaching and religious guidance

366. As much as possible, prisoners are offered preaching, spiritual guidance and social services.

Treatment

367. If treatment facilities are not available to the prisoner in the prison hospital, he is transferred to a public hospital on the recommendation of the prison doctor.

Education of prisoners

368. Prisoners must be educated and informed as much as possible, bearing in mind the level of the prisoner and the term of imprisonment.

Establishment of libraries

369. A library of books on religion, science and culture should be established for prisoners, who should be encouraged to benefit from them during their spare time. Prisoners may have books, newspapers and magazines sent to them at their own expense in accordance with the orders issued by the prison warden in this respect.

Social integration and psychological recovery

370. Sudanese reformatories and juvenile welfare homes have a unique system of safeguard, which emanates from Sudanese social customs and traditions and the commitment to the word of honour. At the time of writing this report, the Reformatory Department has taken steps to instil confidence in over 40 juveniles by permitting them to move about in unguarded freedom both inside and outside the home with a view to their psychological recovery and social reintegration. The staff in each home also offer comfort and condolences to juveniles who are bereaving a relative. The Department provides a form of after-care for juveniles by approaching various official and voluntary bodies and asking them to provide assistance to juveniles after their release. It also endeavours to establish bonds between juveniles and their families during their term of imprisonment in the home by going to see the families of juveniles and urging them to visit their children in the home. The administration of the home respects freedom of religion by permitting the different religious denominations to practice their religious ceremonies in complete freedom.

371. The Office of Social Services offers any psychological and social assistance which juveniles might require, under the supervision of specialists, social workers and psychologists. The administration of the home also organizes educational courses for juveniles in a number of fields and awards them certificates accordingly.

372. A committee comprising representatives of the administration, as well as juveniles and the resident doctor, supervises the receipt of foodstuffs.

373. Such is the progress achieved in the field of the necessary safeguards and accompanying arrangements to ensure that children are not deprived of their liberty. Covering the years until 2001, the plan of action endeavours to achieve the following objectives:

(a) To reunify and rehabilitate homeless children, return them to their relatives or alternative families and provide them with subsequent care;

(b) To restore the values of religion and solidarity in the different groups in Sudanese society and draw support from the international community, given that the displacement and homelessness of children is a global phenomenon;

(c) To study the roots of the problem as a first step in the process of devising preventive measures to address the origins of the problem;

(d) To intensify all the available financial, human and technical efforts under way in order to achieve the said objectives.

374. Concerning welfare homes, the competent authorities endeavoured to:

(a) Renovate existing homes;

(b) Establish homes for the welfare and rehabilitation of juveniles;

(c) Establish probation homes at the state level;

(d) Establish homes for delinquent girls;

(e) Provide a body of personnel in the field of juvenile welfare.

375. Increased support and concerted local and international efforts are needed in order to implement the rehabilitation programmes and activities in these institutions, as the support currently provided by a number of international and local organizations and government authorities, while valuable, is nevertheless insufficient.

376. The sentencing of children has been addressed by prohibiting capital punishment and life imprisonment for children (see paras. 346-355 of this report). Children are protected against all forms of violence and neglect by Sudanese legislative acts, including the Criminal Code of 1991, chapter XIV of which protects children against cruel treatment and harm and guarantees their health care. As for flogging, it is a light punishment which is carried out within reasonable boundaries so that parents can teach their child a lesson and never reaches the point of causing harm. Punishment of the child must be appropriate; any parent who resorts to violence forfeits legal guardianship of the child as a result.

Recovery and social reintegration (art. 39)

377. The Juvenile Welfare Act of 1983 provides for the protection of children who are victims of misdemeanours or offences and lays down all the necessary safeguards in that connection, ranging from a special police force and special procedures to essential measures in terms of welfare homes and probation. At this juncture, it should be pointed out that, despite the will clearly expressed by the authorities, the

number of structures specializing in juvenile protection remains inadequate owing to the lack of material resources. The Attorney General has established a committee to review all child-related laws in order to harmonize them with the provisions of the Convention.

C. Children in situations of exploitation, including physical
and psychological recovery and social reintegration
(art. 39)

1. Sexual exploitation and sexual abuse (art. 34)

378. Offences in which children are used to perpetrate immoral acts are a rare occurrence in the Sudan owing to the religious background of Sudanese society and the upright conduct which prevails as a matter of course. In some instances, children are encouraged or used to perpetrate theft or assist in its perpetration. In terms of protection, Sudanese legislation endeavours to tackle sexual abuse and the handling of drugs through personal consumption, trafficking, cultivation, distribution or transport. This legislation includes:

- Laws which combat prostitution and immoral behaviour in general without any specific reference to children;
- Laws which prohibit the production, publication, distribution or use of indecent books and photographs with a view to safeguarding the morality of children and the public. They also prohibit the possession of indecent materials of various types, including videotapes, films, newspapers, magazines and books. The relevant laws are:
 - (a) The Criminal Code of 1991;
 - (b) The Press and Publications Act of 1996;
 - (c) The Artistic Censorship Act of 1993.

379. There are also other laws which regulate the censorship of artistic works and television productions in order to prevent harm to morals and public decency, namely:

- (a) The National Television Corporation Act of 1991;
- (b) The National Broadcasting Corporation Act of 1991.

380. Owing to the existence of preventive and deterrent laws, the incidence of sexual abuse and exploitation is immaterial and has no evident impact on society. Consequently, no detailed data on the phenomenon are available.

2. Sale, trafficking and abduction (art. 35)

381. Chapter XVI of the Criminal Code of 1991 deals with sentences for offences involving attacks on personal liberty. Article 161 provides that enticement is a criminal offence and stipulates that any person who offers enticement to an individual who is under age or mentally defective with a view to removing him from or inducing him to remove himself from the safekeeping of his guardian without the latter's consent shall be sentenced to a term of imprisonment of not more than seven years and a fine. Article 162 also stipulates punishment for the offence of abducting an individual, including a child, providing as it does for the sentencing of "any person who abducts an individual by using deception of any form in order to entice him away from a place with intent to perpetrate an attack on his person or his freedom". Article 163 also prohibits forced labour by providing that any person who exploits another by illegally forcing

him to work against his will must be punished in accordance with the law in force. It should be stated that the aforementioned provisions prohibit the sale, trafficking and abduction of children and the perpetration of such offences for the purpose of inducing the child to perpetrate acts against the law.

382. The measures taken in connection with this matter include the establishment of an advisory human rights council, under the auspices of the Minister of Justice, composed of all government bodies and voluntary organizations working in the field of human rights. The council endeavours to safeguard and ensure respect for human rights and has made field visits to numerous places in the different states of the Sudan in order to ascertain that there are no instances of the above-mentioned phenomena and no allegations of child abductions, that any movement of children from one state to another occurs of their own accord and that it is the rebels who carry out forced abductions of children.

383. As an additional measure, Sudanese legislative enactments provide for the protection of children if they travel outside the country, in which connection the necessary legal safeguards have been established in the Passport and Immigration Act of 1992 and the regulations issued pursuant thereto, as well as in the personal status laws.

3. Economic exploitation of children, including child labour (art. 32)

Sudanese child labour legislation

384. In the early 1980s, the first efforts to devote attention the phenomenon of child labour were launched. Initial legislation regulating child labour was promulgated in 1930, followed by the Domestic Servants Act of 1955, the Workforce Act of 1974, the Industrial Security Act of 1976, the Self-Employment Act of 1981, the School Health Act of 1974, the Juvenile Welfare Act of 1983, the Child Welfare Act, the Industrial Apprenticeship Act of 1974 and the Education Regulation Act of 1992. Some of the general laws also contained special provisions on children. More recently, the Labour Act of 1997 was promulgated, pursuant to which the Workforce Act of 1974, the Self-Employment Act of 1981 and the Industrial Security Act of 1976 were abolished in order to unify the labour legislation and promulgate a single law comprising all the relevant provisions, as well as develop those provisions in order to harmonize them with the countrywide system of federal government and ensure conformity with the Convention on the Rights of the Child and other regional agreements on the subject. All the laws in question endeavour to set the minimum age at which the child may be employed and the maximum number of hours which the child may work. They also lay down the health and administrative checks required for employment, determine the wages payable for child labour and specify the jobs and industries in which children may not be employed. The laws also endeavour to strike a balance between the child's need to work in order to train or earn an income and the child's physical, mental, behavioural, educational, health, mental, spiritual and social needs.

385. The Labour Act of 1997 lays down conditions to protect the child against harmful activities, as follows:

Hazardous occupations

386. The concept of risk or hazard is relevant to health and to issues of an organic, behavioural and moral nature. In that connection, the competent laws comprise a series of rules which specify the occupations hazardous to young people and prohibit their employment in such occupations (art. 21 of the Labour Act of 1997). The employment of juveniles in hazardous activities is therefore forbidden. The competent minister is vested with the authority to specify those activities in accordance with article 27, paragraph 2 of the Act, which allows for greater flexibility in that it permits the addition of activities deemed hazardous by the competent authorities.

Child employment conditions

387. Article 1, paragraph 1, stipulates that children may not be employed in any of the following activities, which are considered to be hazardous:

- (a) The carriage of heavy loads;
- (b) The operation of steam boilers and pressure containers;
- (c) The operation of iron furnaces and foundries;
- (d) Mining, quarrying and activities carried out underground or underwater;
- (e) Activities entailing exposure to lead and lead derivatives;
- (f) Activities entailing exposure to toxic or harmful substances, both organic and non-organic, such as lead, mercury, cyanide, calcium, benzene and benzene derivatives;
- (g) Activities involving X-rays and radiation;
- (h) The maintenance of machines and machine belts.

388. Subject to the provisions of the above article 1, paragraph 1, children may not generally be employed in industries or activities which are dangerous or hazardous to health or which are physically demanding or in activities or occupations which are detrimental to their moral behaviour. The minister may determine that specific industries should be included within that category of industries or activities.

389. Children may not be employed at night between the hours of 8 p.m. and 6 a.m., although the competent authority may exclude from this provision any young person in the 15-16 age group.

390. Children under 12 years of age may not be employed, except:

- (a) In government-run training schools;
- (b) In non-profit-making workshops;
- (c) In a business owned by the child's family and employing only family members in which he or she works under the owner's supervision;
- (d) Under a contract of industrial apprenticeship.

391. The minister or his delegate may, after consultation with the relevant committee, prohibit the employment of children under 15 years of age in such industries and establishments as he specifies by ordinance.

392. Subject to the provisions of paragraph 5, no child under 15 years of age may be employed unless he has a guardian who remains with him in the workplace. Complaints may not be lodged against the child in connection with a contract of employment unless the guardian consented to the child's employment and presented the child's employer with proof of his guardianship and address, together with a statement of his willingness to remain with the child in the workplace.

393. Children may not be employed overtime or on weekly or official holidays, nor may their annual leave be forfeited, deferred or curtailed.

Medical examination of children

394. Article 22 stipulates that all children must undergo a full medical examination prior to employment and thereafter at regular intervals by such means as are determined by the competent authority on the basis of the nature of the work undertaken by the child. Doctors working at government hospitals must conduct the necessary examination and issue the required medical certificates.

Children's working hours

395. Article 23 stipulates the normal working hours for children as seven hours, interspersed with a one-hour period of rest with pay. Children may not be employed for more than four hours continuously.

Posting of the child employment regulations in a visible site

396. Article 24 stipulates that employers must post a copy of the legal regulations on child employment in a visible site in the workplace, together with a list showing the hours of work and periods of rest.

Requirement to report early signs of delinquency

397. Article 25 stipulates that any young person manifesting early signs of delinquency, such as unusual violence, the attempted destruction of items and equipment, repeated or deliberate negligence and recurrent absence from work without valid excuse, must be reported to the competent authority or the competent labour office by the employer.

Termination of the child's contract of employment

398. Article 26 stipulates that the child's contract of employment must be terminated if it is established by way of a medical certificate issued in accordance with the provisions of article 22 that he or she is unfit for the job.

399. Additional to the above measures to protect children against economic exploitation and the performance of work that is likely to be hazardous or harmful to them are measures at the legislative and administrative levels having regard to the international instruments on this subject, including the following:

(a) Age limits

400. The Labour Act of 1997 prohibits the employment of children under 16 years of age and also provides for the exceptions mentioned in the preceding paragraphs. Under the Industrial Apprenticeship and Vocational Training Act, the question of determining the minimum age of admission to vocational training schools is left to the discretion of the management board in the interest of a regular review of the admission age.

(b) Health regulations

401. The health regulations are extremely important and form the next link in the chain after the limitation on the age of employment. Through these regulations, the child's fitness for employment is determined and his or her health is subject to regular checks, as are the standards of cleanliness and hygiene in the workplace. In this respect, the Labour Act of 1997 provides that the child must undergo a preliminary medical examination prior to employment and thereafter at the regular intervals determined by the competent authority in accordance with the nature of the work (article 22).

(c) Administrative regulations

402. The child employment legislation contains a body of legal provisions constituting administrative regulations which must be observed in the interest of regulating employment.

403. Pursuant to article 7 (a) of the Domestic Servants Act of 1955, the police are authorized to issue the certificate of identity which is a basic condition of employment as a domestic servant. The issuance of a certificate to any person under 15 years of age is prohibited. Article 16 of the Industrial Apprenticeship Act provides that an industrial apprentice is not regarded as a labourer and that he cannot be taken on until he, or his guardian if he is under 21 years of age, has signed the contract of industrial apprenticeship with the employer. The law also gives the competent authorities the right to enter and inspect any establishment or question any person responsible for its management. Under the Labour Act of 1997, employers are required to report to the competent authority or competent labour office any young person who manifests early signs of delinquency, such as attempting to destroy items, repeated negligence or recurrent absence without valid excuse (art. 25). The preventive procedure outlined in this article is designed for the protection of young people. It also stipulates that it is forbidden to employ any young person under 15 years of age unless he has a guardian who remains with him in the workplace. Employers have no right to lodge any complaint against the child in connection with a contract of employment unless the guardian has consented to the child's employment and submitted proof of his guardianship, together with a statement of his willingness to remain with the child in the workplace (art. 21, para. 6).

404. This article necessarily provides some degree of protection for children. Moreover, the employer bears full responsibility if he engages the child other than in the presence of the child's guardian. The law also includes a provision which requires the employer to post the employment regulations, working hours and rest periods applicable to children in a clearly visible site in the workplace. This is deemed to be an important procedure, since it ensures that children and guardians are aware of their rights and duties. Any condition of contract which is contrary to the law is deemed to be legally invalid, even if it preceded the entry into force of the law in question, unless it offers more benefit to the worker than would otherwise be the case. This proviso is considered to provide a broad framework of protection. The law also accords to the competent authority the right to enter any place where there cause to believe that work employing one worker or more is being carried out (article 69 of the Labour Act of 1997). The Juvenile Welfare Act comprises administrative measures designed to prevent the exploitation of children; it stipulates the establishment of a juvenile police force and specifies its areas of responsibility (art. 3), one of which in particular is to combat the illegal employment of children. It represents the missing link in the applicable child employment laws, since it offers a significant measure of protection against exploitation. The law also stipulates the right of the child to a decent livelihood through work performed on the basis of skills acquired by the child in accordance with the legislative enactments regulating the work concerned. The competent minister is called upon to assist such young people in obtaining work commensurate with their skills (article 6 of the same Act).

405. The minister is further required to establish welfare homes for young persons and ensure that they acquire a variety of skills. The National Council for Child Welfare Act includes various administrative rules which amply protect the child against exploitation of numerous kinds and ensure the welfare of the child by endeavouring, for instance, to ensure fulfilment of the obligations of the Sudan under the international instruments which it has signed. The Act also includes an important provision concerning coordination among the official authorities and voluntary children's organizations and the conduct of scientific studies on childhood problems so that such problems can be tackled from a considered scientific viewpoint.

(d) Working hours

406. All the legislative enactments relating to child employment attach great importance to working hours; they set a maximum number which may not be exceeded and specify the evening hours during which children cannot be employed, the aim of which is to strike a balance between the needs of the child and the requirements of his or her age in life. Pursuant to the Industrial Apprenticeship Act, the question of determining working hours is left to the discretion of the National Council (article 7 (g) of the Act). This is deemed to be a valid measure, bearing in mind the different types of industry which exist. The Labour Act of 1997 stipulates that the child may not work overtime or during holidays and also provides that the child's annual leave may not be forfeited, deferred or curtailed. Official working hours are fixed at seven hours, interspersed with a one-hour period of rest with pay. Children may not be employed for more than four hours continuously.

(e) Financial regulations

407. The laws relating to child employment include financial regulations which govern the working wages paid to children in order to ensure that they are not exploited. The Industrial Apprenticeship and Vocational Training Act of 1976 (article 7 (d)) stipulates that the National Council for Industrial Apprenticeship is competent to set the minimum allowances and other expenses paid to apprentices, while the Labour Act of 1997 stipulates that wages must be set when the contract of employment is drawn up. It also stipulates that wages must be paid in cash. The minister has the right to form special committees for any industry or occupation with a view to determining the conditions of service for children, including conditions of pay.

(f) Legal responsibility

408. After articulating in numerous laws the necessary child employment controls, the legislature introduced legal provisions shedding light on the litigation procedures and penalties to be imposed in the event of any contravention of the laws or the regulations issued thereunder. The Domestic Servants Act of 1955, for example, includes a provision which stipulates the penalty to be imposed on anyone who contravenes the provisions of the law (article 25). The Industrial Apprenticeship Act of 1997 also includes penalties which apply in the event that its provisions or those of the regulations issued thereunder are contravened. The contravention of its provisions is an offence punishable by imprisonment or a fine, or both.

National employment policies

409. Child employment cannot be eradicated through legislative means and official measures alone. On the contrary, legal measures must always go hand in hand with policies and programmes, both long-term and short-term, which are designed to eliminate the motives for employment.

Short-term policies

410. Undeniably, there is a group of children who enter the employment market. The fact is that this group is deprived of social and health services and of the benefit of development efforts. As a short-term solution to this problem, there are proposals afoot to:

- (a) Develop and channel occupational health services to include all sectors;
- (b) Improve social welfare;
- (c) Organize training courses for working children during which they receive theoretical and practical lessons organized in such a way that takes into account their work situation.

Long-term policies

Education

411. Educational failure is one of the main reasons why children drop out and enter the employment market. Consideration should therefore be given to what such children gain from the education system.

Vocational training

412. Vocational training is regarded as an essential complement to the initial component of education, as it furthers the preparation of a trained workforce in line with the needs of the labour market.

Family need for support

413. There is a firm link between a family's need of support and early entry to the labour market by the children in those families. Comprehensive programmes have therefore been devised to examine the circumstances of these families and provide them with material support.

414. The legislative aspect

- (a) The Sudan has ratified the international conventions relating to the rights of the child;
- (b) The labour legislation was reviewed and developed in order to keep pace with the changes apparent in the labour market and to expand the base of protection;
- (c) Efforts are under way to enhance the efficiency of the agencies responsible for supervising child welfare and employment;
- (d) Efforts are under way at the grass-roots and voluntary levels, as well as in employers' organizations, to implement policies relating to child programmes and devote attention to statistics and studies as an indispensable means of sound planning;
- (e) The National Council for Child Welfare coordinates the units, ministries and voluntary organizations concerned with children;
- (f) One of the functional roles of the Khartoum Peace Agreement is to ensure that the population, particularly children, obtains sufficient food and clean water and is protected from disease.

415. Priorities include the care of deprived children, the release of children recruited as soldiers by the rebel movement, measures to address the effects of war on children, the reopening of schools and the establishment of principles to ensure education for peace. The Agreement includes plans for a comprehensive census of the south, followed by special surveys on health, education and the workforce. Human development is now a core concern of the Government and an activity which must be supported by a solid statistical information base provided by a wide-ranging assessment and special surveys that facilitate programme development, monitoring and follow-up.

416. In this context, one of the major challenges is how to integrate regional planning into the overall national human strategy, whether in regard to education, poverty reduction or health. The aims of the transitional stage in the south of the country are to ensure that figures for the south progress towards the national averages, with strategic objectives such as universal basic education forming long-term objectives. Generally speaking, there are several options for the incorporation of regional planning into the national strategy. The same process may also later be necessary in the northern states. These are some of the preliminary measures which it is intended to add to the subsequent stages of preparing plans and programmes for child employment.

The following tables show relevant data on child employment:

| <i>Age (years only)</i> | <i>Percentage within the workforce</i> | <i>Total number of children</i> | <i>Percentage of all children</i> |
|-----------------------------|--|-------------------------------------|---------------------------------------|
| 6 | 2.7 | 615 800 | 10.8 |
| 7 | 3.7 | 731 884 | 12.9 |
| 8 | 3.9 | 696 169 | 12.3 |
| 9 | 5.9 | 575 832 | 10.1 |
| 10 | 11.5 | 780 143 | 13.7 |
| 11 | 8.7 | 422 334 | 7.4 |
| 12 | 18.7 | 805 230 | 14.2 |
| 13 | 17.9 | 522 117 | 9.2 |
| 14 | 17.7 | 532 335 | 9.4 |
| Age group: | | | |
| 6-9 years | 4 | 2 619 685 | 46.1 |
| 10-14 years | 10.2 | 3 062 159 | 53.9 |
| Gender: | | | |
| Males | 9.9 | 2 932 251 | 51.6 |
| Females | 10.1 | 2 749 593 | 48.4 |
| Area of residence: | | | |
| Urban | 2.5 | 1 634 916 | 28.8 |
| Rural | 13 | 4 046 928 | 71.2 |
| Total | 100 | 5 681 844 | 24 |

Source: Ministry of Labour, Survey of Migration and the Workforce, 1996.

| <i>Name</i> | <i>Members of the workforce</i> | <i>Number of children</i> | <i>Their percentage of the total number of children</i> |
|------------------------------|---------------------------------|---------------------------|---|
| Northern region | 7.1 | 323,820 | 5.7 |
| Eastern region | 16.8 | 790,498 | 13.9 |
| Khartoum | 3.6 | 855,159 | 15.1 |
| Central region | 3.2 | 1,376,679 | 24.2 |
| Kordofan | 13.3 | 910,462 | 16.0 |
| Darfur | 15.2 | 142,526 | 25.0 |
| <i>Tribe</i> | | | |
| Baggara | 9.3 | 825,323 | 14.6 |
| Dar Hamid | 19.5 | 179,248 | 3.2 |
| Jawama'ah / Badiriyah | 12.4 | 285,175 | 5.1 |
| Ja'alín | 2.9 | 1,024,095 | 18.2 |
| Juhayinah | 3.6 | 400,767 | 7.1 |
| Arab tribes in the centre | 12.6 | 202,868 | 3.6 |
| Arab tribes in the north | 3.1 | 15,667 | 2.8 |
| Arab tribes in the east | - | 25,558 | 0.5 |
| Other Arab tribes | 3.7 | 27,363 | 0.5 |
| Other Arab groups | 7.7 | 184,690 | 3.3 |
| Nuba | 17.0 | 127,995 | 2.1 |
| Bishariyin | 25.0 | 4,184 | 0.1 |
| Hadandawah | 15.0 | 104,009 | 1.8 |
| Bani Amir | 11.7 | 50,993 | 0.9 |
| Beja | 14.0 | 280,224 | 5.0 |
| Nubian (Mahas, Halfa, Sokot) | 0.4 | 230,175 | 4.01 |
| Dinka | 10.9 | 23,569 | 0.4 |
| Funj | | | 0.6 |
| Nilotic tribes | | 34,119 | 0.4 |
| Others | - | 20,371 | 0.01 |
| Bary | - | 963 | 0.1 |
| Bango Baka | 22.7 | 3,736 | 0.1 |
| Andoto Sri | - | 4,851 | 0.1 |
| Zandi | | 6,741 | 0.1 |
| Other Nubian tribes | - | 3,422 | 0.1 |
| Darfur tribes | 16.6 | 1,196,558 | 21.2 |
| Nigerian tribes | 19.6 | 237,078 | 4.2 |
| Total | 10.0 | 5,681,844 | 24.0 |

Source: Ministry of Labour, 1996.

4. Drug abuse (art. 33)

417. The legislative measures adopted by the Sudan to protect children from the illicit use of narcotic and psychotropic substances, as defined in relevant international treaties, include the following:

- (a) The Sudanese Criminal Code of 1991;
- (b) The Narcotic Drugs and Psychotropic Substances Act of 1994 (annexed hereto).

418. These laws stipulate severe penalties for cultivators, distributors, traffickers, users and transporters of narcotic drugs and psychotropic substances. The penalties are heavier if children are enticed into and used in the cultivation, trafficking or transport of narcotic drugs. The protection which children enjoy is based on criminal responsibility, full knowledge and choice. Lacking in awareness and choice, children who have not attained legal age benefit from this principle. When the child is used or criminally exploited to perpetrate any act against the law, responsibility for the consequences lies with the person who exploited or used him or her.

419. On that score, the punishment under the law is more severe, as clearly demonstrated by article 16, paragraph 2 (c), of the Narcotic Drugs and Psychotropic Substances Act of 1994, which stipulates the death penalty or life imprisonment for the enticement and exploitation of children in connection with the crime of transporting, delivering and operating premises for the sale of narcotic drugs. This article closes the loopholes which made it possible to turn the child's lack of criminal responsibility to advantage.

420. Application of the law has proved its effectiveness. In that connection, a precedent was set in the town of Atbara (Report No. 146 of 17 September 1996), where a hashish dealer had exploited a nine-year old child by using him to carry a quantity of hashish from one venue to another. The judge applied the provision of article 16, paragraph 2 (c), of the Narcotic Drugs and Psychotropic Substances Act of 1994 and handed down the death penalty to the individual who had exploited the child.

421. The Sudan is a party to the United Nations Convention to Combat Narcotics of 1961, as amended by the 1972 Protocol, the Convention on Psychotropic Substances of 1971 and the United Nations Convention to Combat Illegal Trafficking of 1988.

422. At the regional level, the Sudan is a party to an Arab agreement on illicit trafficking, concluded in 1994. At the bilateral level, the Sudan is a party to a Sudanese-Saudi cooperation agreement to combat narcotic drugs, concluded in 1992.

Administrative measures

423. In the Ministry of Internal Affairs, a general department was established and a national committee of specialists and experts formed to combat narcotic drugs. The main focuses of the fight against narcotic drugs are as follows:

- (a) To combat narcotic drugs in the areas where the Indian hemp plant is cultivated in South Darfur and south-eastern Sudan on the borders with Ethiopia by waging seasonal campaigns to eliminate cultivation and increase awareness among farmers by informing them that such cultivation is illegal and encouraging them to grow alternative cash crops, such as rice, sugar cane and sorghum, and establish aviaries for the production of honey. Finance in the form of non-repayable grants was attracted in order to provide funding for the farmers who embarked on this project. Hitherto, children have not been conspicuously involved in drug cultivation and production in these areas;

(b) To combat smuggling, the Sudan being a transit zone where branch offices and border inspection points operated by the Anti-Narcotics Department have now been established;

(c) To impose punishment for the consumption, trafficking, transport, distribution and cultivation of narcotic drugs whereby any person found in possession of large quantities is sentenced to death or life imprisonment;

(d) To raise awareness by holding seminars and lectures in residential districts, universities, schools and national service camps and by using the audio-visual and print media. An annual conference is also held to raise awareness of the danger of narcotic drugs and plans have been made to develop a curriculum at the Ministry of Education with a view to protecting children from such danger in accordance with the resolutions of the conference held on drug prevention in schools;

(e) To implement social measures through the Anti-Narcotics Department, which has a section dealing with rehabilitation, social integration and psychological, medical and spiritual therapies aimed at combating addiction. The legislative enactments stipulate that a drug addict has a right to treatment and social integration on the occasion of a first offence. If he re-offends, the penalty for addicts will be enforced against him;

(f) To conduct studies and research, which are one of the most important measures in the fight against narcotic drugs and psychotropic substances. Studies of some of the substances used in certain industries have been conducted among homeless children in particular.

424. Alcoholic substances are prohibited by law, even for adult Muslims (articles 78, 79 and 80 of the Criminal Code of 1991 (annexed hereto) and articles 15-20 of the Narcotic Drugs and Psychotropic Substances Act of 1991). Non-Muslims are not entitled to indulge in alcohol other than in accordance with the law. The opportunity to imbibe such substances is therefore extremely narrow as far as children in the Sudan are concerned. The use of tobacco is dependent on the supervision provided by family and school; as such, the rate of consumption is low.

Sexual exploitation and sexual abuse (art. 34)

425. Offences in which children are used to perpetrate immoral acts are a rare occurrence in the Sudan owing to the religious background of Sudanese society and the upright conduct which prevails as a matter of course. From the preventive point of view, Sudanese legislation deals with and endeavours to address matters of sexual deviancy and the consumption, trafficking, cultivation, distribution and transport of narcotic drugs.

426. Sudanese laws categorically prohibit prostitution and immoral behaviour, without specific reference to children. The laws also prohibit the production, publication, distribution or use of indecent books and photographs with a view to safeguarding children. They also prohibit the possession of indecent materials of various types, including videotapes, films, newspapers, magazines and books. The relevant laws are:

- (a) The Criminal Code of 1991;
- (b) The Press and Publications Act of 1996;
- (c) The Artistic Censorship Act of 1993.
- (d) The National Broadcasting Corporation Act of 1991.

427. Owing to the preventive and deterrent laws in place, sexual abuse and exploitation are non-existent in the society. Consequently, no detailed data on the phenomenon are available.

Sale, trafficking and abduction (art. 35)

428. Chapter XVI of the Criminal Code of 1991 deals with sentences for offences involving attacks on personal liberty. Article 161 provides that enticement is a criminal offence and stipulates that any person who offers enticement to an individual who is under age or mentally defective with a view to removing him from or inducing him to remove himself from the safekeeping of his guardian without the latter's consent shall be sentenced to a term of imprisonment of not more than seven years and a fine. Article 162 also stipulates punishment for the offence of abducting an individual, including a child, providing as it does for the sentencing of "any person who abducts an individual by using deception of any form in order to entice him away from a place with intent to perpetrate an attack on his person or his freedom". In addition, article 163 prohibits forced labour by providing that any person who exploits another by illegally forcing him to work against his will must be punished in accordance with the law in force. It should be stated that the aforementioned provisions prohibit the sale, trafficking and abduction of children and the perpetration of such offences for the purpose of inducing the child to perpetrate acts against the law.

429. The measures taken in connection with this matter include the establishment of an advisory human rights council, under the auspices of the Minister of Justice, composed of all government bodies and voluntary organizations working in the field of human rights. The council endeavours to safeguard and ensure respect for human rights and has made field visits to numerous places in the different states of the Sudan in order to ascertain that there are no instances of the above-mentioned phenomena and no allegations of child abductions, that any movement of children from one state to another occurs of their own accord and that it is the rebels who carry out forced abductions of children, as stated in the initial report.

430. As an additional measure, Sudanese legislative enactments provide for the protection of children, as stated in this report, if they travel outside the country, in which connection the necessary legal safeguards have been established in the Passport and Immigration Act of 1992 and the regulations issued pursuant thereto, as well as in the personal status laws.
