Child Abuse & Neglect

Commentary

Implementing the 1989 United Nations' Convention on the Rights of the Child in sub-Saharan Africa: the overlooked socioeconomic and political dilemmas

Munyae M. Mulinge[*]

Department of Sociology, University of Botswana, Private Bag 0022, Gaborone, Botswana

Abstract

Objective: The aim of this article is to identify and profile some often overlooked socioeconomic and political factors that render the protection of the rights of the child, as guaranteed through the 1989 United Nations' Convention on the Rights of the Child, a distant dream in most African countries. It is argued that, in most African countries, there are other major impediments to the protection of the child's rights in addition to the frequently cited lack of adequate legislation and of political will.

Method: The paper is a review essay and utilizes existing literature from varied sources to advance its main arguments. It draws from such documents to profile the socioeconomic and political barriers to the protection of children's rights in Africa both at the family and at the national levels.

Core argument: The ratification of the United Nation's 1989 Convention and the passing of supportive legislation by most state governments, has not resulted in major improvements in the well-being of children. This is as a result of prevailing socioeconomic and political conditions such as social transformations within the family unit, poverty, and rampant corruption. The emergence of HIV/AIDS, civil wars and armed conflicts is a major impediment to the protection of children's rights across most of Africa.

Conclusion: The effective implementation of the 1989 United Nations' Convention by African governments requires more than the ratification of the Convention. Governments require the political will to implement its prescriptions by passing supportive legislation. To create the necessary enabling environments, equal emphasis should be placed on the eradication of poverty, corruption and disease; and to ending armed conflicts where they exist.
© 2002 Published by Elsevier Science Ltd.

Keywords: Child abuse; Civil war; HIV/AIDS; Rights of the Child; Poverty

---

Introduction

Early attempts to recognize the rights of children can be traced to the 1924 Geneva Declaration on the Rights of the Child and the 1959 Declaration on the Rights of Children. However, it was the adoption of the Convention on the Rights of the Child (CRC) by the United Nations' General Assembly on November 20, 1989 that constituted a major development in the recognition and the struggle for the promotion of children's rights by the international community. The Convention "positioned children squarely at the forefront of the worldwide movement for human rights and social justice" (UNICEF, 2000, p. 14). The adoption of the CRC was to be followed 1 year later, on September 30, 1990, by the first World Summit for Children during which the World Declaration on the Survival, Protection and Development of Children and the Plan of Action for Implementing the Declaration in the 1990s was signed. World leaders made a commitment to the protection of children's rights to guarantee their survival and development. The adopted Plan of Action was to become the guiding framework around which national governments, international organizations, nongovernmental organizations (NGOs), and individuals would fashion their own programs of activities.

Despite the ratification of the 1989 United Nations CRC, the recognition that the rights of children must be protected, and the passing of laws and policies to this effect by most world nations, children's rights continue to be violated. This review essay focuses on the protection of children's rights in sub-Saharan Africa. Its core argument is that the ratification of the convention, passing and adoption of supportive legal frameworks, and the existence of a political will to implement the convention are necessary but not sufficient conditions and guarantees for the protection of children's rights in Africa. Socioeconomic and political barriers to African children realizing their rights exist and are unlikely to be overcome, but in some cases are even becoming more complex. This review will analyze these issues and the complexities of the challenge to protect children. The review is a synthesis of carefully analyzed data, utilizing a varied collection of sources of existing literature to advance the argument presented. This, it is hoped, will stimulate future research in Africa.

The Rights of the Child

The United Nations (1989) CRC grants children rights relating to their civil, political, economic, and cultural lives. The Convention affords children the following rights:

Freedom from violence, abuse, hazardous employment, exploitation, abduction or sale;
Freedom from hunger and protection from diseases;
Access to free compulsory primary education;
Adequate health care;
The right to know and be cared for by both parents;
The right not to be separated from one's family;
The right to registration, a name and nationality from birth;
The right to an identity and to preserve such an identity;
Equal treatment regardless of gender, race or cultural background;

The right to express opinions and freedom of thought in matters affecting them; and
Safe exposure/access to leisure, play, culture and art (United Nations, 1989).

This review emphasizes the provision of rights as stipulated in Articles 24, 27, 28, and 29; and the protection of rights as detailed in Articles 6, 9, 18, 19, 32, 34, 36, and 37 (United Nations, 1989).

The ratification of the 1989 United Nations CRC and the recognition by most nations that the rights of children must be protected did not bring to an end the plight of the world's children. Although governments have passed laws and policies for the protection of children's rights, such rights continue to be violated. In the developing countries laws against the exploitation of children have been passed as an indication that these countries recognize the plight of the child. In Africa the member states of the Organization of African Unity (OAU) drafted their own charter on the Rights and Welfare of the Child which has been used in conjunction with the 1989 United Nations CRC. Despite these efforts, children continue to suffer violations of the very rights the laws are supposed to guarantee. Children continue to be the victims of child labor, neglect, sexual exploitation, physical and emotional abuse, and are subject to the effects of armed conflict and the lack of access to education health care and safe water and sanitation facilities.

Specific violations of the Rights of the Child

Child labor and exploitation

Child labor constitutes economic exploitation of children through the performance of any work that is likely to be hazardous or to be harmful to the child's health or to interfere with the child's education, or to hamper physical, emotional, mental/intellectual, moral, or social development. Though child labor occurs in all societies, it is most prevalent in developing countries where children provide cheap labor to Western based multinational corporations.

In Africa the practice is "unlikely to be affected by laws and regulations imposing child labor restrictions because it is not of an organized commercial nature, but it is rather perceived as a legitimate role for children" (United Nations, 1994, p. 10). The problem of child labor has been aggravated by conditions set by international financial institutions like the World Bank and the International Monetary Fund (IMF). These include Structural Adjustment Programs (SAPs) that entail the cutting of public spending on schools, health care, and real job creation, resulting in increased poverty and child labor.

Seventy-nine million children worldwide were economically active by the early 1990s (Ashagrie, 1993), of which 17 million were in Africa where the participation rate of all children aged 10–14 was as high as 22%. In eastern Africa, the proportion was approximately 33% while in western Africa it was 24%. The number of children aged between 5 and 14 who were working had risen to 250 million in developing countries by the mid 1990s and half of them worked full-time (ILO, 1996, 1999). The bulk of children laborers work for little pay and long hours in hazardous conditions (Free the Children International, 2000; ILO, 1999). Many work in the rural agricultural sector as cultivators and harvesters (ILO, 1999; Mutuku & Mutiso, 1994; Nangia, 1991). In Kenya, for example, children constitute 20–30% of the casual labor force in the agricultural sector during the mid-1990s; and 30% of coffee pickers during the

peak period were children below 15 years of age and on some rice fields, children comprised up to 90% of the transplanters (ILO, 1996). Child labor has also been reported in large coffee and cotton plantations in Zimbabwe (UNICEF, 1997). It is also prevalent in domestic service where young girls are especially vulnerable. The greatest expansion in child labor, however, appears to be occurring in the urban informal sector, which is seldom monitored statistically (Blanc, 1994; Oloko, 1991).

Limited access to education

A good basic education is central to the ability to claim and enjoy the rights of an informed and responsible citizen. The fulfillment of a child's right to education also protects him/her from hazards such as "a life consigned to poverty, bonded labor in agriculture or industry, domestic labor, commercial sexual exploitation or recruitment into armed conflicts" (UNICEF, 2000, p. 46). Although the majority of the world's children are attending school, a considerable percentage of the world's children receive very poor, or have no access to, education. In the developing countries, for example, over 130 million children—about 60% of them girls— are thought not to be attending school (UNICEF, 2000). In Africa in particular, tremendous progress has been made in terms of access to basic education, particularly primary education. Over the past decades, about 80% of children in the continent are enrolled in the first grade. However, dropout rates are high and most African countries face severe and persistent crises in the education sector in the future (Neft & Levine, 1997; United Nations Development Program, 1995; UNICEF, 2000). Most children do not complete the first basic 7 years of schooling. One in three children in Africa drop out of school before completing the fourth grade and almost two-thirds of the dropouts are girl children (Neft & Levine, 1997). UNICEF (2000, pp. 57–58) notes that children "must abandon their education when they are forced to work despite their young age or the hazards of their labor, when armed conflict and other emergencies disrupt their lives, when poverty surrounds them or when adults exploit them sexually or buy and sell them like commodities." The dropout rates are aggravated by the HIV/AIDS pandemic as children, especially adolescents, are often forced to drop out of school to care for their dying parents and/or their orphaned siblings (UNICEF, 2000).

The education crisis facing most African countries is compounded further by declining enrollments (United Nations Development Program, 1995). During 1990–1995, for example, the overall 2.3% increase in enrollment was less than the overall increase in population. Existing evidence shows that in those countries where Structural Adjustment Policies have led to privatized schools, tuition, books, and uniform costs make it impossible for parents to send their children to school. In Kenya, for example, the introduction of cost sharing in primary schools has caused a drop in enrollment of children from 95 to 75%, thus compounding the problem of child labor (Njue, 2000). It is evident that a decent free, well-staffed, accessible, and compulsory basic education is required to guarantee children this basic right.

Lack of access to health

Although Africa has made considerable strides in the provision of health care to its people, about 50% of all Africans lack access to basic health care, and life expectancy is 20 years less

than that of industrialized countries (UNAIDS & UNICEF, 1996; United Nations Development Program, 1996). In some countries, access to quality health care has been undermined significantly by the embracing of the IMF and World Bank fronted SAPs for economic recovery. These have meant reductions in government expenditure in preventive health, the purchase of medicines and equipment, the maintenance of health care facilities, and the expansion of existing health. Families have returned increasingly to traditional or religious forms of healing (Adepoju, 1997; Adepoju & Mbugua, 1997). In Tanzania, for example, SAPs are said to have reduced the proportion of women giving birth in clinics from about 90% prior to the programs to about 40% with cost being the major prohibitive factor (Adepoju, 1997). The overall effect has been increased child mortality rates and lowered life expectancy.

The problem of poor health care among children in Africa is compounded by the declining nutritional status. Extensive visible malnutrition caused mainly by armed conflicts or famine affects 3–4% of the children in Africa (UNECA & UNICEF, 1995). According to UNICEF (1998), however, invisible malnutrition affects one in every three children in Africa. Malnutrition, visible or invisible, significantly reduces the child's chances for survival. Children who are severely malnourished are eight times more likely to die than their well-nourished counterparts; those who are moderately and mildly malnourished are five and two times, respectively, more likely to die than the well-nourished (UNECA & UNICEF, 1995). Fifty-five percent of children's deaths in Africa are either directly or indirectly caused by malnutrition-related illnesses (UNICEF, 1998). It is also estimated that 42% of children aged less than 5 years are moderately or severely stunted in height due to malnutrition with resultant mental, cognitive, and physical damage.

Physical abuse and neglect

Definitions of child abuse may vary but most concur that it occurs whenever a parent or an adult who has the care or custody of a child fails to attend to the child's basic needs or harms the child in any way (Botswana Family Welfare Association, 1997; Check, 1989). Child abuse and neglect in all its forms appears to be endemic in many parts of Africa. Although domestic violence, including child abuse, is not well documented in African countries, there are indications that it is endemic in most communities. The existence of child protection agencies in some countries, such as "Childline" in Botswana, is a reflection of the magnitude of the problem and the attention it is receiving. In Table 1, the number of cases reported to Childline in Botswana for the periods 1997–2001 demonstrates the rising trends in the overall numbers of reported cases. Particularly notable is the increase in the numbers of neglected children. The swings in the number of reported cases of sexual abuse might be a reflection of the under reporting in the country.

Sexual exploitation

Children also continue to suffer sexual exploitation. Child prostitution and pornography now constitute a global growth industry driven by poverty, greed, and a demand for cheap sex. The destruction of the lives of millions of children in poor and rich nations occurs despite the existence of laws worldwide to prevent and punish sexual offenders who commit these crimes.

Table 1
Abused children reported to Childline, Botswana, 1997–2001

Type of abuse	1997		1998		1999		2000		2001	
	N	%	N	%	N	%	N	%	N	%
Physical	27	14.8	27	9.0	26	7.6	58	12.9	24	6.5
Emotional	47	25.4	16	5.3	58	16.9	83	18.6	55	14.9
Sexual	16	8.8	33	11.0	44	12.8	35	7.8	27	7.3
Neglect	47	25.4	77	25.8	88	25.6	150	33.4	129	34.9
Truancy	4	2.2	10	3.3	5	1.4	9	2.0	9	2.4
Interactional difficulties	38	20.5	46	15.3	34	9.9	40	8.9	46	12.4
Other	6	3.3	91	30.3	89	25.8	74	16.5	80	21.6
Total	185	100.0	300	100.0	344	100.0	449	100.0	370	100.0

Source: Childline, Gaborone, Botswana.

It is estimated that at least 1 million girls worldwide are lured or forced into sex work each year (UNICEF, 1997). The sexual exploitation of children affects both girls and boys. Although the problem is thought to be greatest in Asia, Africa is also affected, and child exploitation is not only reflected through child labor but also through pornography and prostitution. However, the illegal and clandestine nature of this type of activity has made the collection of reliable data in the area impossible. The problem in most countries is compounded by the poverty affecting most families. In Zimbabwe, Mupedziswa (1997, p. 43), has reported that children are lured into prostitution to earn some income while others are forced into early marriages because their parents can no longer afford to look after them.

Underlying factors preventing the implementation of children's rights

The lack of progress in the protection of children's rights in most African countries has mainly been blamed on the absence of adequate government legislation/policies to this end and lack of political will to implement the 1989 United Nations' Convention and its supportive policies where they exist. However, both passing supportive legislation for the protection of the rights of the child and having the political will for their implementation are necessary but not sufficient conditions and guarantees. Socioeconomic and political dilemmas that face many African countries are equally important. These dilemmas include poverty, rampant corrupt practices, the emergence of new diseases particularly HIV/AIDS, civil wars and other armed conflicts, and the social transformations in the family unit.

Poverty

Poverty is the inability to meet basic nutritional, health, educational, shelter, social and recreational needs (United Nations Development Program, 1996). By 2000, the number of people living in poverty worldwide had reached 1.2 billion of which more than 600 million were children (UNICEF, 2000). In Africa, in particular, widespread poverty is one of the key economic barriers to the protection of the rights of the child unemployment (Bellamy, 2000;

Blanc, 1994). A closer look at the economic situation in most sub-Saharan African countries shows rising trends in the levels of poverty (or declining economic security) for most families. Between 1985 and 1990 those living in poverty increased from 32 million and it was projected to rise to 84 million by 2000 (UNECA & UNICEF, 1995). By 1997 half the population of sub-Saharan Africa lived in poverty and with population growth surpassing economic growth, the continent was projected to be 22% poorer than it was 23 years ago (APIC, 1998).

The poverty experienced in most of Africa mainly affects women and children. As Karl (1995) indicates, there has occurred a considerable decline in the status of children's welfare across most of Africa. Children have become victims rather than beneficiaries of many of the development programs that have been initiated. In light of the fact that the poverty of children is intertwined with that of females, in Africa the feminization of poverty (or the rising concentration of poverty among female-headed households) compounds children's poverty. Female-headed households, which have become a dominant feature of the society in sub-Saharan Africa, are poorer than those headed by males or by both males and females. Overall, 35% of households in sub-Saharan Africa are thought to be female-headed (Neft & Levine, 1997). Women head about 25% of the households in Ghana, Malawi, Rwanda, and Zambia and about 47% in Botswana (UNECA & UNICEF, 1995); in rural Botswana over 50% of households are headed by females.

In some countries, the condition of poverty has been compounded by the adoption of austerity economic measures or SAPs imposed by the IMF, the World Bank, and other donor agencies as conditions for continued financial support. In some countries, these are, as a matter of fact, thought to have reversed many accomplishments in the welfare of children. SAPs have been accompanied by declining public expenditure (or subsidies) on social welfare programs such as food, education, housing, health care, water and sanitation, and the introduction of cost sharing with the already overburdened poor (Mutuku & Mutiso, 1994). By emphasizing economic growth rather than development (or improvements in the standards of living of the populace), SAPs have also eroded the economic security and well-being of many families. They have resulted in the downsizing of the public sector, which is the dominant employment sector in most African countries, with the consequent retrenchments leading to declining family incomes and rising unemployment. The impact of SAPs has been heaviest on poorer families, which constitute the bulk of populations in sub-Saharan Africa.

Generally speaking, poverty enhances the maltreatment of children by undermining the capacity of poor families to provide for their members economically. This, in turn, denies children the right to a good standard of living. A number of specific areas are important as described later.

Poverty impedes the realization of the child's right to education as free primary education has become less common in most African countries, and government expenditure on education has declined. This has been accompanied by the suspension of familial aspirations in education (Mbugua, 1997) as poor parents withdraw children from school.

Poverty has been responsible for the violation of the child's right of access to health care. The economic stagnation being experienced by some African countries has led to the decay of the health care services. Infectious diseases and malnutrition have once more become endemic particularly among poor and infant mortality, although reduced, still remains high. As government expenditure on preventive health, the purchase of medicines and other vital

hospital equipment, the maintenance of existing health care facilities and in the expansion of existing health infrastructure to cater for rising populations dwindles, so will the health status of the population. Poor families are compelled to stay away from healthcare services, and some of these are turning increasingly to traditional or religious forms of healing (Adepoju & Mbugua, 1997).

Poverty forces many children to exploitation in the workforce through child labor. Poverty, coupled with population explosion, unemployment among adults, and the exploitation of the poor, has been cited as the most powerful force pushing children into hazardous, debilitating labor in the developing countries (Blanc, 1994; Free the Children International, 2000; Myers, 1991; Nangia, 1991; UNICEF, 1997). Millions of children in developing countries are compelled to work from an early age. This situation is compounded further by declining family incomes across most of sub-Saharan Africa (Myers, 1991). For poor families the employment of children is inescapable and with worsening economic conditions in Africa, the number of child workers has been rising. Banning child labor without first raising family incomes especially among the poor is likely to be an exercise in futility because it "will invite tragedy for the poor, creating even more destitute children" (Myers, 1991).

Poverty increases sexual exploitation through child prostitution, a situation that is enhanced further by dwindling access to education, and causes emotional stress and frustrations among parents that cause them to hate/resent their children.

Poverty has been associated with the abandonment of children. Adepoju (1997) reports that the incidence of abandoned babies has reached high proportions in the African continent. There has been shift in the nurturing and socialization responsibility of parents to other children or house girls, educational institutions (daycare centers and schools), peers and the mass media, particularly the television (Hetherington & Parke, 1993).

Corruption

Corruption has become a threat to the protection of the rights of the child in most sub-Saharan African countries (Hope, 1997; Mulinge & Lesetedi, 1998, 1999). Corrupt practices include acts such as the use of public authority, office, or official position for personal or private monetary rewards or other privileges at the expense of public good and in violation of established rules and ethical considerations (United Nations, 1990). Persistent corruption has led to the total collapse of economies coupled with rising poverty and unemployment, and has undermined economic and social development by depleting the resources that are necessary for them to take root (Hope, 1997; Makumbe, 1994; Osoba, 1996; United Nations, 1994). This situation is inconsistent with the protection of the child's overall provision and protection rights. Corruption in the health care sector together with the diminishing state expenditure on health care has undermined the gains made in the provision of health care by most countries during the initial years of independence.

The emergence of HIV/AIDS

The HIV/AIDS pandemic with its related illnesses today constitutes one of the greatest social challenges to the protection of children's rights in sub-Saharan Africa. By 1999 over

34.3 million people (33 million adults and 1.3 million children under 15 years of age) were estimated to be infected by the HIV/AIDS globally (UNAIDS, 2000), of which 24.5 million (or 71%) were found in sub-Saharan Africa. This figure represented an increase of about 85% over the 1995 figures of about 13 million, which comprised about 65% of the world's total population of adults living with HIV/AIDS. Women are the most infected group; four out of five HIV positive women live in sub-Saharan Africa (UNAIDS & WHO, 1998). Botswana, which is thought to have one of the highest infection rates in the world today, offers a good illustrative case. AIDS was first diagnosed in 1985, but since then the number of reported cases of people with HIV in Botswana has been risen dramatically. By 1992, the number of infected was 59,000 persons. The figure had risen to 180,000 by 1995 and was projected to be 320,000 by the year 2000 (Botswana Government & UNDP, 1998). This trend is a reflection of the problem throughout southern Africa.

In sub-Saharan Africa, the pandemic has become both a development and a security crisis in many countries today (Bellamy, 2000; UNAIDS, 2000). The social and economic devastation caused by the pandemic is far greater than the combined destruction of war. The challenge of HIV/AIDS undermines the capacity for African nation states and families to act as custodians of the rights of the child variously. The cost of treatment for HIV/AIDS and the loss of economic input of infected individuals erodes health care budgets and undermines the ability to control diseases and provide quality of health care accessible to the rest of the population including children.

Many children themselves are infected and killed by the pandemic. The pandemic has also orphaned millions of children in sub-Saharan Africa (Brandon & Rwomire, 2001; UNICEF, 2000). HIV/AIDS has increased mortality and morbidity rates among adults in most African societies, thereby creating big numbers of orphaned children. By 1999, the number of orphans due to AIDS was estimated at 13.3 million globally (UNAIDS, 2000) of which nearly 10 million live in Africa (UNICEF, 2000). Table 2 indicates the number of children under 15 who have lost their mother or both parents to AIDS related illness in the 11 most affected countries in Africa by 1999.

Table 2
Distribution of AIDS orphans in most affected countries in Africa, 1999

Country	Number of orphaned children
Uganda	1,700,000
Nigeria	1,400,000
Ethiopia	1,200,000
Tanzania	1,100,000
Zimbabwe	900,000
Kenya	730,000
Democratic Republic of the Congo	680,000
Zambia	650,000
Côte d'Ivoire	420,000
South Africa	420,000
Malawi	390,000

Source: UNAIDS (2000).

Most orphans live in households headed by other children or by very old grandparents, thus making them vulnerable to economic conditions that deny them basic rights such as right to parents, adequate nutrition, basic education, and health care. Being orphaned through AIDS also leads children to activities that contravene other rights provided under the 1989 Convention such as child labor, prostitution, drug abuse, and street living (street children). Although some countries such as Botswana and Kenya appear to be in the process of evolving concrete programs to address the plight of HIV/AIDS orphans, the rate of growth in their numbers is likely to render such efforts ineffective. Finally, the long term care of family members who are HIV/AIDS stricken is not only emotionally draining and time-consuming, but is also a financial burden for families (Mbugua, 1992). Children have to bear the emotional and physical drain of watching especially terminally ill parents. The adverse effects of caring for the terminally sick is now being amplified by the increasing trends by most governments to advocate home based care as a method for combating the shortage in bed space in health facilities. The limited response in South Africa to the pandemic has serious implications for the subcontinent.

Civil war and armed conflict

In Africa alone over 30 wars have been witnessed in the continent since 1970 (UNICEF, 2000) and thousands of persons aged less than 18 years are participating in them. The prevalence of such civil strife and armed conflicts in the continent is the most significant political challenge to the capacity for some nation states and families to prevent the maltreatment of children. The conflict ranges from urban-based violence to civil wars that have swept through countries such as the Sudan, Uganda, Somalia, Angola, Mozambique, and the Democratic Republic of the Congo (DRC), to name but a few. Armed conflict furthers the maltreatment of children in various ways.

First, in violation of their human rights, hundreds of thousands of children are recruited or conscripted into armed conflicts as soldiers, sex slaves, or porters (Blanc, 1994; UNICEF, 2000).

Second, children's involvement in armed conflicts as combatants has been responsible for the death or physical disabling of millions of children. Estimates by UNICEF (2000) show that in the 10 years since the adoption of the CRC more than 2 million had been killed and more than 6 million injured or disabled in armed conflicts worldwide (UNICEF, 2000). Another 12 million have been left homeless and land mines kill as many as 500 children each month. In conflict-ridden African countries such as Sierra Leone, the DRC, Uganda, the Sudan, Mozambique, Angola, Liberia, and Somalia children in Africa have not suffered consequences of armed conflicts such as death, outright massacres and amputations. According to UNICEF (2000), Africa alone accounted for more than half of all war-related deaths worldwide occurring in 1996. In Rwanda, for example, about 250,000 children were slaughtered during the 1994 genocide that took close to a million lives (UNICEF, 2000). In Sierra Leone, the amputation of arms and legs was used as a common alternative to outright massacre. In other countries such as Angola, land mines resulted in extensive loss of limbs and lives.

Third, war and armed conflicts promote the maltreatment of children in Africa by denying them access to education, health care and other basic rights. They cause the closure and/or

destruction of educational and health facilities and the displacement millions of children in the continent (Brandon & Rwomire, 2001). The Eritrea–Ethiopia border conflict, for example, destroyed 34 out of the 58 schools in the eastern, central, and western zones of the Tigray region in Ethiopia displacing about 16,000 school children (UNICEF, 2000). In addition, wars cause the disruption of food production, and the loss of basic services such as immunization. This compromises children's rights to a good standard of living and to development. With specific reference to the family, the disintegration caused by the presence of civil strife and conflict has far-reaching effects (Adepoju, 1997) that promote the mistreatment of children. By causing the scattering of families, wars push children to refugee camps or even render them completely homeless altogether thus severely undermining their socioeconomic well-being. Armed conflicts also create children orphans due to the demise of parental generations. More often than not, such orphans are forced to survive "on their own in the bush for years, missing out on education and losing touch in their formative years with societal values and norms" (Adepoju, 1997, p. 13). This clearly undermines their provision and protection rights and such orphans are likely to turn to a culture of violence, drugs, and delinquency.

Social transformation of the family unit

The family performs several key functions that are essential to the protection of the various categories of children's rights envisioned by the 1989 United Nations CRC. The most important of such functions are the socialization function and social (emotional) and economic protection of children. The socialization function may be viewed as the locus of what the 1989 Convention classifies as social support and development rights of the child. Economically the family shapes the child's future destiny by providing the economic capital or a base for future development.

Over the years, the African family as a social unit, like most other institutions, has experienced tremendous changes most of them emanating from socioeconomic and political restructuring of African societies that accompanied colonization. These processes have resulted in changes such as the declining extended family, rising divorce/separation rates, and the emergence of new family forms such as the single parent family, the blended family, and the dual career family. Such transformations have not only undermined the family's position of strength as an institution but also its capacity to serve as the bedrock for the overall protection of children and their rights. The African family has moved towards nucleation. As a residential unit, the traditional African family in its extended form which incorporated married couples, their unmarried children, and often some grandparents and an assortment of members of the extended kin living together, is slowly disappearing. Its place is being taken by the emerging nuclear family in which parents and their unmarried children live together. The structure of the extended family, however, offers certain advantages over the nuclear family that improve the capacity of the family to protect children's rights. For instance, individuals in an extended family setting experience more emotional, social, and even economic support during crisis periods such as hard economic times and divorce. This reduces considerably incidences of child abuse—and its related ills such as such as runaway children, juvenile delinquency, drug abuse and prostitution (Barker, 1993)—emanating from the stress associated with such crises.

Other factors

In addition to the factors discussed above, one cannot ignore the adverse effects of natural disasters on the capacity of some nation states and families to safeguard the rights of the child. Some children experience physical loss or damage, social, and/or economic disruption due to natural disasters such as floods and droughts.

Conclusion

The 1989 United Nations CRC guarantees every child the right to survival, good health, education, and other opportunities for development as well as protection against economic and sexual exploitation and abuse and the right to participate in decisions affecting his/her future. In recognition of the rights guaranteed the child by the Convention, African governments have not only ratified the Convention but have also moved to pass laws and policies to back it up. Despite these efforts millions of children continue to be denied the rights guaranteed to them by the 1989 Convention. They suffer maltreatment manifested through substandard living conditions characterized by lack of access to health services, safe water, adequate sanitation, and other services. Children also drop out of primary school and never attend secondary school, are forced to work in exploitative settings, indulge in drug abuse and prostitution, and suffer from child abuse. They are increasingly dying from or being orphaned by AIDS and armed conflicts. Children experience a diminishing fabric of social support within the family and the community due to the changes that have taken place in the family.

In light of the above situation in sub-Saharan Africa the protection of children from maltreatment requires much more than the ratification of the 1989 United Nations Convention, the passing of supportive laws and policies, and having the political will to implement them. A much more comprehensive approach, which synthesizes, acknowledges, and deals with the socioeconomic and political dilemmas listed in this paper is necessary. Only then can state governments create enabling environments for the implementation of the laws and policies that have been put in place. More specifically, African governments must strive to alleviate poverty, create employment for adults, end economically crippling corrupt practices, socially and economically provide for AIDS orphans, and to end civil wars before they can make an impact on children's rights. This requires a major redistribution of resources to make sustainable growth a reality for all (Blanc, 1994) and a rethinking of the current trend in which governments are terminating subsidies on education, healthcare, and other social welfare services.

Despite the magnitude of the problem one must not forget the inner strengths that exist in many African countries and the potential to build on these in addressing the issue of children's rights. Africa has much to offer in this regard and one cannot take a totally negative view of the crisis that faces children. To support this potential empirical research within the context of the maltreatment of children in the continent is essential. This must focus on the dilemmas highlighted in this paper, in order to inform the development of policies to facilitate the rights of children.

References

Adepoju, A. (1997). In A. Adepoju (Ed.), *Family, population and development in Africa* (pp. 1–24). London: Zed Books.

Adepoju, A., & Mbugua, W. (1997). The African family: An overview of changing forms. In A. Adepoju (Ed.), *Family, population and development in Africa* (pp. 41–59). London: Zed Books.

APIC: Africa Policy Information Center. (1998). *Africa at the turning point: Development hinges on success in population health*. Washington, DC: Author.

Ashagrie, K. (1993). Statistics in child labor. *Bulletin of Labor Statistics*, *3*.

Barker, P. (1993). The effects of child abuse. In V. Varma (Ed.), *How and why children fail* (pp. 90–102). London: Jessica Kingsley Publishers.

Bellamy, C. (2000). *The state of the world's child 2000*. New York: United Nations Children's Fund.

Blanc, C. S. (1994). Introduction. In United Nations Children's Fund (Ed.), *Urban children in distress: Global predicament and innovative strategies* (pp. 1–54). Yverdon, Switzerland: Gordon and Breach Science Publishers.

Botswana Family Welfare Association. (1997). *Child abuse*. Gaborone: Botswana Printing and Publishing.

Botswana Government., & United Nations Development Program (UNDP). (1998). *Botswana human development report 1997: Challenges for sustainable human development*. Gaborone, Botswana: TA Publications.

Brandon, D., & Rwomire, A. (2001). Introduction. In A. Rwomire (Ed.), *African women and children: Crisis and responses* (pp. ix–xxiii). Westport, CT: Praeger.

Check, W. A. (1989). *The encyclopedia of health; child abuse*. New York: Chelsea House Publishers.

Free the Children International. (2000). *General questions and answers on child labour and related issues*. Concord, Canada: Free the Children.

Hetherington, E. M., & Parke, R. D. (1993). *Child psychology: A contemporary viewpoint*. New York: McGraw-Hill.

Hope, K. R., Sr. (1997). *African political economy: Contemporary issues in development*. London: M. E. Sharpe.

ILO: International Labor Organization. (1996). *Child labor in commercial agriculture in Africa report*. Dar Es Salaam, Tanzania: Author.

ILO: International Labor Organization. (1999, July). ILO concludes 87th conference with adoption of new instruments against child labor. *World of work, No. 30*.

Karl, M. (1995). *Women and empowerment: Participation and decision-making*. London: Zed Books.

Makumbe, J. (1994). Bureaucratic corruption in Zimbabwe: Causes and magnitude of the problem. *Africa Development*, *19*(3), 45–60.

Mbugua, W. (1992). The dynamics of family formation in Africa. In *The structure and dynamics of family formation in Africa*. Dakar: Union for African Population Studies.

Mbugua, W. (1997). The African family and the status of women's health. In A. Adepoju (Ed.), *Family, population and development in Africa* (pp. 139–157). London: Zed Books.

Mulinge, M. M., & Lesetedi, G. N. (1998). Interrogating our past: Colonialism and the birth and entrenchment of corruption in sub-Saharan Africa. *African Journal of Political Science*, *3*(2), 15–28.

Mulinge, M. M., & Lesetedi, G. N. (1999). The genesis and entrenchment of corruption in sub-Saharan Africa: A historical and international contextualization. In K. Frimpong & G. Jacques (Eds.), *Corruption, democracy and good governance in Africa: Essays on accountability and ethical behavior* (pp. 20–30). Gaborone: Lentswe La Lesedi Publishers.

Mupedziswa, R. (1997). *Empowerment of repression? ESAP and children in Zimbabwe*. Gweru, Zimbabwe: Mambo Press.

Mutuku, M., & Mutiso, R. (1994). Kenya: The urban threat to women and children. In United Nations Children's Fund (Ed.), *Urban children in distress: Global predicament and innovative strategies* (pp. 217–258). Yverdon, Switzerland: Gordon and Breach Science Publishers.

Myers, W. E. (1991). Introduction. In W. E. Myers (Ed.), *Protecting working children* (pp. 3–10). London: Zed Books in association with United Nations Children's Fund.

Nangia, P. (1991). The situation of working children in India. In W. E. Myers (Ed.), *Protecting working children* (pp. 46–61). London: Zed Books in association with United Nations Children's Fund.

Neft, N., & Levine, A. D. (1997). *Where women stand: An international report on the status of women in 140 countries, 1997–1998*. New York: Random House.

Njue, L. (2000, July 28). Four million Kenyan children in child labour. *The Standard Limited, East African standard newspaper*.

Oloko, B. A. (1991). Children's work in urban Nigeria: A case study of young Lagos trades. In W. E. Myers (Ed.), *Protecting working children* (pp. 11–23). London: Zed Books in association with United Nations Children's Fund.

Osoba, S. O. (1996). Corruption in Nigeria: Historical perspectives. *Review of African Political Economy*, *69*, 371–386.

United Nations. (1989). *Convention on the Rights of the Child*. New York: Author.

United Nations. (1990). *Practical measures against corruption*. New York: Author.

United Nations. (1994). *World social situation in the 1990s*. New York: Author.

UNICEF: United Nations Children's Fund. (1997). *The state of the world's children 1997: Focus on child labor*. New York: Oxford University Press.

UNICEF: United Nations Children's Fund. (1998). *The state of the world's children 1998: Focus on nutrition*. New York: Oxford University Press.

UNICEF: United Nations Children's Fund. (2000). *The state of the world's children 2000*. New York: Author.

United Nations Development Program. (1995). *Human development report, 1995*. New York: Oxford University Press.

United Nations Development Program. (1996). *Human development report, 1996*. New York: Oxford University Press.

UNECA., & UNICEF: United Nations Economic Commission for Africa and United Nations Children's Fund. (1995). *Atlas of the African child*. Nairobi, Kenya: UNICEF.

UNAIDS: United Nations Program on HIV/AIDS. (2000). *Report on the global HIV/AIDS epidemic*. Geneva, Switzerland: Author.

UNAIDS., & UNICEF: United Nations Program on HIV/AIDS and United Nations Children's Fund. (1996). *HIV/AIDS epidemiology in sub-Saharan Africa*. Geneva: Authors.

UNAIDS., & WHO: United Nations Program on HIV/AIDS and World Health Organization. (1998). *Report on the global HIV/AIDS epidemic*. Geneva, Switzerland: Authors.