

# **IMPLEMENTATION OF THE CONVENTION ON THE RIGHTS OF THE CHILD IN GEORGIA: AN ALTERNATIVE REPORT**

**Georgian Coalition for Children and Youth Welfare**



**2016**

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## INTRODUCTION

The report provides the views of 53 civil society organizations collaborating within scope of Georgian Coalition for Children and Youths Welfare (GCCYW). It reviews the period of 2007 – 2013 years covered by the Fourth Periodic Report on the Implementation of the Convention on the Rights of the Child (CRC) submitted by the State of Georgia. In addition, the report takes into account any changes related to the implementation of CRC if any such alterations took place into 2014-2015 as well.

According to the preliminary results of the 2014 census<sup>1</sup>, the population of Georgia is 3 729 635, constituting a 14.7% (641 900 people) drop in comparison with the previous census conducted in 2002 (4 371 535). Data from 2014<sup>2</sup> suggests that the total number of children is 780 100, which is 16.1% less than in 2012 (930 000 children)<sup>3</sup>.

## GEORGIAN COALITION FOR CHILDREN AND YOUTH WELFARE

Georgian Coalition for Child and Youth Welfare (GCCYW) is a union of international and local civil society organizations working in the field of children and youths<sup>4</sup>. GCCYW is based on principles of equality, targets the protection of rights of children and youth, and supports the advancement of the existing systems of child and youth welfare.

The goal of the coalition is the advocacy of rights of children and youth on the local and on international level. The Coalition is member of ChildPact - a regional coalition of child protection NGOs from the Wider Black Sea Area.

Since establishment in 2012, GCCYW has been focusing its advocacy work on<sup>5</sup>:

- Prevention of Child Abandonment and Family support services
- Leaving Care Services
- Protection of Children and Youths from Violence and Neglect
- Juvenile Justice

Within scope its advocacy work, GCCYW contributes to the advancement of the child and youth welfare systems according to Child Rights Convention (CRC) principles through:

- Analysis and needs assessment of the current system of child and youth welfare
- Preparation of the amendments to reflect the international standards into the Georgian legislation
- Awareness raising campaigns and ensuring society's involvement in the discussions of Child Right Issues

The GCCYW established the Youth Council in 2013 to advocate for the protection of the rights of vulnerable youths by spreading a word to the wider public and decision-makers.

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<sup>1</sup>The National Bureau of Statistics (2014), the preliminary results of the 2014 census.

[http://geostat.ge/cms/site\\_images/files/georgian/population/agceris%20cinasca](http://geostat.ge/cms/site_images/files/georgian/population/agceris%20cinasca) accessed: 25.12.2015;

<sup>2</sup> The National Bureau of Statistics, correspondence #11-224, 30 July, 2015;

<sup>3</sup> UNICEF: The state of the world's children 2014, Every child counts, 2014, pg. 61, [http://www.unicef.org/gambia/SOWC\\_report\\_2014.pdf](http://www.unicef.org/gambia/SOWC_report_2014.pdf), accessed: 25.12.2015;

<sup>4</sup> Full list of organizations, please see the Annex 1.

<sup>5</sup> <http://www.gccy.ge/en/groups.html>

## METHODOLOGY AND CHILD PARTICIPATION

The report has been prepared based on the desk research of the most reports and studies prepared by UNICEF, UNFPA, World Bank, SOS Children's Villages Georgia, World Vision International, Save the Children. Moreover, it takes into consideration the experiences/case studies of GCCYW member organizations working in the field of child and youth welfare.

In addition, several focus group discussions and in-depths interviews have been conducted with participation of the member organizations specialized in the particular (child protection, family support services, and juvenile justice) fields.

Children and youths from the Youth Council of GCCY have contributed to shape the report especially in regards of family support, child protection and alternative care services with their insights. Their diverse experiences have been used to articulate the data and analyze the trends.

**ACRONYMS**

CAN	Child Abuse and Neglect
CAP	Government's Action Plan for Children
CCG	Criminal Code of Georgia
CESCR	Committee on Economic Social and Cultural Rights
CPCG	Criminal Procedure Code of Georgia
CPRP	Child Protection Referral Procedures
CRC	Child Rights Convention
CSA	Child Sexual Abuse
CSEC	Commercial Sexual Exploitation of Children –
EDPRP	Economic Development and Poverty Reduction Strategy Plan
EU	European Union
GCCYW	Georgian Coalition for Children and Youths Welfare
GEL	Georgian Lari
Geostat	National Statistics Office of Georgia
GoG	Government of Georgia
IDP	Internally Displaced Person
ILO	International Labor Organization
IMR	Infant Mortality Rate
JJ	Juvenile Justice
MDG	Millennium Development Goals
MoES	Ministry of Education and Science
Moi	Ministry of Internal Affairs
MOLHSA	Ministry of Labor, Health and Social Affairs
NGO	Non-Governmental Organization
NPA	National Plan of Action
PRS	Poverty Reduction Strategy
SECTT	Sexual Exploitation of Children in Travel and Tourism
SSA	Social Service Agency
STD	Sexually Transmitted Disease
U5MR	Under Mortality Rate

## EXECUTIVE SUMMARY

Since the last, the third periodic review, Georgia has made a significant progress with implementation of CRC especially in regards of the rights to the family environment, protection from violence, juvenile justice, health care etc.

The state closed almost all large-scale soviet style child residential orphanages and thus children have been either reintegrated with their biological families or placed in various types of foster care or transferred in small group homes as last resort. The only remaining child institutions are Tbilisi Infant Home and Kojori orphanage for children with disabilities. In total, only 83 children with disabilities lived in those institutions (November 2015), while for that moment 442 children have been reintegrated with their families and were getting financial support<sup>6</sup>, 1,255 children lived in foster care, 189 were adopted and 326 children lived in small group homes. At the beginning of the reform (2004) there were 46 orphanages with more than 4,000 children in state care. However, despite the adopted state gate-keeping policy, there are numerous private, church and Muslim denomination run institutions operating without any state licensing regulations serving approximate 1,200 children (there are no exact data neither on number of institutions nor about children).

In 2010, the Child Protection Referral Procedures (CPRP) has been signed by the three Ministers: Minister of Labor, Health and Social Affairs (MoLHSA), Ministry of Internal Affairs (Mol) and Ministry of Education and Science (MoES). The CPRP has been defined the various forms of violence against children, responsible agencies for identification, assessment and interventions and required all involved ministers to issue the guidelines/instructions for the respective professionals. Nevertheless, not all professionals are still clear what their roles and responsibilities and lack specific knowledge and coordination even after 5 years of implementation of CPRP.

In addition, Child Sexual Abuse (CSA) requires a special attention. Although CSA is acknowledged as a problem, ways to address or prevent it are yet poor. CSA is criminalized in Georgia and Criminal Code of Georgia (CCG) provides punitive measures for sexual assaults and abuse of children and aggravated circumstances are applied, but timely referrals to relevant state structures does not often take place. Improvements are necessary in all directions, starting from proper enforcement of legislation to providing adequate treatment and compensation to child survivors.

The newly adopted Juvenile Justice Code (2015) introduces the principles of restorative justice at a broader extend, makes a diversion as the first option measure in case of child offender, mandatory specialization of all professionals involved in the process etc. However, it requires a close monitoring to ensure its smooth implementation and prevention of appearance of the “dead” norms.

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<sup>6</sup> In total, 1,316 children have been reintegrated

## 1. GENERAL MEASURES OF IMPLEMENTATION

In 1994, the Parliament of Georgia ratified the UN Convention on the Rights of the Child (UNCRC), after which the Convention prevailed over the national legislation of Georgia. Despite the fact that Article 36 of the Constitution of Georgia protects that Children's rights, still there is no one law that regulates all aspects of children's rights. Instead, children's social, education and healthcare rights are scattered throughout various legislative acts, making difficult to fulfill full implementation of protection of children's rights.

During the previous third periodic review, the committee acknowledged an advancement of the legislative framework in the field of CRC that has been improved further for this reporting period with adoption of amendments in several pieces of legislation:

- Prevention of Domestic Violence, Protection and Assistance of Victims of Domestic Violence, 2009, 2013, 2014, 2015;
- Criminal Code, 2012, 2015;
- Civil Code, 2014;
- Administrative Code, 2014;
- Civil and Administrative procedural Code, 2014;
- Adoption and Foster Care 2009, 2010, 2011, 2012, 2015;
- Child Care Standards (2009, 2012, 2014), etc.

Furthermore, adoption of **Child Protection Referral Procedures (2010)** and **Juvenile Justice Code (2015)** should be considered steps forward. However, despite those advancements, most concerns and recommendations from the committee (2008) persist unaddressed.

### Coordination:

In spite of the Ministry of Labor, Health and Social Affairs (MOLHSA) of Georgia supervises childcare and protection systems since 2009, until now they do not have mechanisms to oversee how other agencies perform within their competencies. Even though the implementation of Child Action Plans (2009 – 2011, 2012-2015) have been monitored by the Coordination (Inter-ministerial) Council led by MOLHSA, the Action Plan named not one, but several agencies responsible for action without any specific indicators making the monitoring coordination procedure complicated.

Furthermore, "The Action Plan of the Government of Georgia on the Protection of Human Rights 2014-2016"<sup>7</sup> that was developed to implement National strategy for the Protection of Human Rights in Georgia 2014- 2020<sup>8</sup> identified additional responsible agencies to monitor Protection of Child Rights. The Parliament, Office of the Prime Minister, Child Rights Council, Public Defender Office, Criminal Justice Reform Council have been identified along with MOLHSA and other ministries and even NGOs, without any formal reporting system that made coordination and monitoring of the implementation process even more complicated.

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<sup>7</sup> <http://www.coe.int/t/commissioner/source/NAP/Georgia-National-Action-Plan-on-Human-Rights.pdf>

<sup>8</sup> [http://gov.ge/files/429\\_51454\\_924779\\_STRATEGYENG.pdf](http://gov.ge/files/429_51454_924779_STRATEGYENG.pdf)

## National Plan of Action

One of the most important political documents of Georgia in the area of children's rights is the National Action Plan on Human Rights 2014-2016, which was approved in 2014 by the Government of Georgia<sup>9</sup>. It includes a separate section on children's rights. However, Georgian non-governmental organizations contend that the plan presented in the document is far from realistic, as it does not include precise quantitative and qualitative indicators, making impossible for civil society organizations to monitor the implementation of the plan.

In addition to National Action Plan on Human Rights, there is the Child Action Plan (CAP) 20012 – 2015, that has been developed for 2002-2003 and 2008 – 2011 before. Despite the previous experiences of the implementation, CAP 2012 - 2015 still lack the baseline data including but not limited to the achievements from the previous CAPs, measurable targets, specific indicators and necessary/allocated funds.

Content wise, the CAP has covered children with some specific needs (poor, at risk of abandonments, living in care, with disabilities, "children living or working on the streets", in conflict with law, victims of abuse). However, it misses other child related issues related to CRC such as education, health, youths etc. that makes the document less traceable in regards of CRC implementation.

## Independent Monitoring

The Committee recommended securing the necessary human and financial resources for the Child's Rights Centre at the Ombudsman Office to enable them perform its mandate throughout the country and ensure unhampered access to all institutions caring for children. For the reporting period, the Child Right's Center monitored the state childcare institutions and small group homes regularly and reflected on the issue on their annual reports to the Parliament<sup>10</sup>. However only in 2015, they became able to conduct assessment of situation of children at 4 Georgian orthodox Christian church and 3 Muslim denomination run child institutions where they identified violation of child care state standards and not engaging statutory social workers<sup>11</sup>. This process took place only once and it became obvious that Child Right Center shall get unhampered access not only to those 7 institutions but to all 24 hour registered institutions where children live and/or study.

Moreover, it becomes obvious that the Child's Rights Centre lack financial and human resources, as their activity reports indicate that almost all their actions are funded by donors (UNICEF, EU) demonstrating that the state allocated funds are not sufficient to fulfill their mandate fully. For instance, they became able to conduct their assessment of Child Penitentiary establishments, pre-school facilities and child right situation in mountainous regions only with support of UNICEF<sup>12</sup>.

Moreover, despite the recommendations from the committee in 2008 and several requests from the Child Right's Center<sup>13</sup> (p.4), the process to ratify the Optional Protocol 3 on a Communication Procedure (OP3 CRC) initiated by the state only in 2013, still has not finalized by December 2015.

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<sup>9</sup> Resolution # 445 dated 9 July 2014, Georgian Government's Action Plan for Human Rights (2014-2015) approval of the government's Human Rights Action Plan (2014-2015) and approval of creating the coordination council and its regulations;

<sup>10</sup> <http://www.ombudsman.ge/ge/reports/saparlamento-angarishebi>

<sup>11</sup> <https://drive.google.com/file/d/0B9BM3M8hbgAUR1Utd2o4dkZzWWs/view>

<sup>12</sup> <http://www.ombudsman.ge/uploads/other/3/3286.pdf>

<sup>13</sup> <https://drive.google.com/file/d/0B9BM3M8hbgAUS1hYMVIGaGVVWWkE/view>



### Allocation of Resources

According to the annual reports of Social Service Agency (MOLHSA), the expenses of Social Rehabilitation and Child Care Program were (thousand GEL):

- 2011: 7 510.0 – 0.48% of the social expenditure<sup>14</sup> covering 5,307 child beneficiaries
- 2012: 14 089.9 - 0.8% of the social expenditure covering 5, 573 child beneficiaries
- 2013: 14 740.7 - 0.7% of the social expenditures<sup>15</sup> covering 6,145 child beneficiaries<sup>16</sup>

The trend remained the same for last two years as well: in 2014 – 0,45% of all social expenses have been dedicated to monetary and in-kind services for children, while in 2015 the ratio became even smaller – 0.2 %.

### Data Collection

The committee recommended to the State to intensify its efforts even more to develop a comprehensive data collection system to monitor implementation of CRC. According to the National Statistics Office of Georgia, there is no precise data on the number of children (0-18) in the country as its modules count the 0-4, 5-14, 15-19 etc. population groups. Such classification does not provide the data on number of children at pre-school (<6) and school (6+) ages as well.

In addition, still there is no accurate data available on child victims of abuse/neglect (the data is collected at various agencies, and all of them use the different definitions), child victims of sexual exploitation, including prostitution, pornography and trafficking, substance abuse and children working and/or living in streets.

### Dissemination of the Convention and training

The Committee has encouraged the State party to continue to strengthen its efforts to provide adequate and systematic training and/or sensitization on children's rights of professional groups working with and for children, including law enforcement officials, as well as judges, lawyers, health personnel, teachers, social workers, school administrators and others as required.

With support UNICEF, along with the awareness raising campaigns on violence against children, several training courses have been conducted for social workers and some law enforcements working on cases of Child Abuse and neglect in 2010-2012. However, the continuity and expansion of the trainings have not ensured, as the government has not implement mechanisms for the continued professional development. Moreover, the guidelines, developed by NGOs with support of UNICEF and USAID in 2011 for social

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<sup>14</sup> Expenses for child beneficiaries of the program divided by the actual expenses of the state budget on social protection

<sup>15</sup> Public spending on all social assistance programs, was 7% of GDP (<http://datatopics.worldbank.org/aspire/indicator/social-expenditure> )

<sup>16</sup> [http://ssa.gov.ge/files/01\\_GEO/statistika/EXCEL/12/2013/2013.pdf](http://ssa.gov.ge/files/01_GEO/statistika/EXCEL/12/2013/2013.pdf)

workers, medical doctors, law enforcers<sup>17</sup> and teachers either are not adopted still of and/or not updated according to the legislative amendments in 2014<sup>18</sup>.

In addition, due to the recent high turnovers in the child protection system, the institutional knowledge and skills have been dramatically decreased among all involved professionals.

Since adoption of Juvenile Justice Code (2015), UNICEF has supported the trainings for the professionals requiring specialization in working with children. So far, within scope of this requirement the identified judges, prosecutors, attorneys, police officers, social workers and other professionals working in penitentiary and probation systems have been provided with only 3-5-day introduction trainings that shall be transformed into the continued education stream.

## 2. DEFINITION OF THE CHILD

Georgia adopts the definition of child according to CRC and thus every human being below the age of eighteen years is considered as a child. However, there is a low awareness when a child becomes an adult in general population that should be addressed. According to the National Study on Violence against Children (UNICEF, 2013), 72 % of the general public believed that a girl becomes an adult before the age of 18 and 60 % believe that a boy becomes an adult before the age of 18.

Moreover, the Civil Code recognizes children below 7 years as the legally incapable minors, while 7-18-year olds - partially incapable; full legal capability a child under 18 achieves after 16 if s/he gets married.

On the other hand, the criminal code and juvenile justice names everyone under 14<sup>19</sup> – as the minors without any criminal responsibilities and 14-18-year olds as juveniles requiring the special treatment and interventions.

## 3. GENERAL PRINCIPLES

### 3.1. NON-DISCRIMINATION (ARTICLE 2)

The Committee has recommended that the State should increase its efforts to monitor and ensure implementation of existing laws guaranteeing the principle of non-discrimination and full compliance with article 2 of the Convention and advance disaggregated data collection mechanisms to ensure efficient monitoring of discrimination against children.

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<sup>17</sup> Guideline for trainers and professionals “Tell Me What Happened”- Interviewing *Child Victims and Witnesses*, was elaborated by PHF with EU support in 2015.

<sup>18</sup> Responding to the recommendation of the Committee on the Rights of the Child: (c) “Ensure that professionals working with children (including teachers, social workers, medical professionals, members of the police and the judiciary) receive training on their obligation to report and take appropriate action in suspected cases of domestic violence affecting children”, Concluding Observations: Georgia, CRC/C/GEO/CO/3, (23 June 2008), par 41 (c)

<sup>19</sup> The minimal criminal responsibility age is defined as 14 and for administration violations – 16.

The constitution of Georgia does not precisely identifies “age”, “disability” and or “(mental) health status” as the possible reasons for the discrimination, that has been addressed in the recently adopted law on “Elimination of all forms of Discrimination” (May, 2014). The purpose of the law is to eliminate all forms of the discrimination including discrimination based on age, disability and health status. It also recognizes cases of multiple discrimination when a person has experienced a discrimination triggered of a combination of characteristics.

The law entitles the Public defender not only react at applications, but also initiate cases independently. So far, only one special report has been produced and no child cases has been discussed among revised 111 cases (September, 2015<sup>20</sup>). The report also indicates that representatives of the office have conducted 37 trainings in 31 schools with 763 students both in Tbilisi and in the regions. However, it looks like that the trainings have been carried out only during February – May period despite emphasized high interest of students on the topics. The first request to study a case on possible racial discrimination of a child at school was submitted in Nov 16, 2015; the decision is still pending by Feb.15<sup>th</sup> though.

### 3.2. BEST INTERESTS OF THE CHILD (ARTICLE 3)

The Committee recommends that the State party should fully incorporate the principle of the best interests of the child in all programs, policies, judicial and administrative proceedings, including in the implementation of national action plans.

CRC implies that as a principle, the best interests of the child shall be taken into consideration while taking any decision by the competent authorities. According to UNICEF (2015)<sup>21</sup>, the Georgian civil legislation does not contain legal definition of “the best interests of the child” and rule of procedure how to assess the best interests of the child in a specific situation. Despite “the interest of children shall be a primary consideration for Parents in all actions concerning children”, it has a general nature and its scope is limited to child-parent relationship and doesn’t extend to authorities to take decisions with regard to children in their best interests on different spheres of social life (UNICEF, 2015).

Nevertheless, the Juvenile Justice Code (2015) states the best interest of a juvenile as one of the main principle of the code and are stipulated as the interests related to security, welfare, health, education, development, resocialization-rehabilitation and other needs of the juvenile that are defined according to the international standards and individual needs of the juvenile considering his/her opinion. Despite the given description seems detailed it does not necessary guide what is “the best interest of the child” for the different professionals.

### 3.3. THE RIGHT TO LIFE, SURVIVAL AND DEVELOPMENT OF THE CHILD (ARTICLE 6)

Despite the fact that child mortality rate is decreasing for the last years, Georgia stands as the second top position with up to 13.3 infant and up to 14.9 Under-five mortality rates<sup>22</sup> among eastern European and Caucasus countries<sup>23</sup>. According to the Reproductive Health Survey (2010), neonatal deaths continued to

<sup>20</sup> <https://drive.google.com/file/d/0B9BM3M8hbgAUTUdIZXd4MFJqX2s/view>

<sup>21</sup> [http://unicef.ge/uploads/UNICEF\\_CRPD\\_ENG\\_edit.pdf](http://unicef.ge/uploads/UNICEF_CRPD_ENG_edit.pdf)

<sup>22</sup> <http://apps.who.int/gho/data/view.main.CM1320R?lang=en>

<sup>23</sup> United Nations, Department of Economic and Social Affairs, Population Division (2015). *World Population Prospects: The 2015 Revision*, custom data acquired via website. <http://esa.un.org/unpd/wpp/DataQuery/>

account for most of infant mortality and 58% of under-5 deaths in Georgia<sup>24</sup> meaning further reductions in child mortality will depend heavily on continuing the improvements in survival during the neonatal period.

Child Malnutrition is not considered as a public health issue in Georgia: the prevalence of underweight in children less than five years of age is 1.2 %, wasting - 1.6 %, stunting - 11%, overweight and obesity are much greater problems, affecting 20 % per cent of young children and 42 % of non-pregnant women (UNICEF, 2011<sup>25</sup>). In 2013, a death of a year old boy from mountainous region due to heavy malnutrition, shocked the entire nation and made the government to revise the child protection system. This case reinitiated a discussion about the definition of child neglect that was introduced within scope of the Law on Elimination of Domestic Violence, Protection of, and Support to Its Victims in 2014, but still is not reflected in Child Protection Referral Procedures. The same case helped to acknowledge that the system of patronage for infants and children under 5 (e.g. home-visits) are not widely practiced in the country leaving a lot of children without any medical and social support. Decreasing the recent immunization rate to 91% also indicates some problems with child and mother patronage<sup>26</sup>.

### 3.4. RESPECT FOR THE VIEWS OF THE CHILD (ARTICLE 12)

The Committee has recommended that the State party to promote further, facilitate and implement in practice, within the family, schools, the community level, in institutions as well as in civil, judicial and administrative procedures, the principle of respect for the views of children and their full participation in all matters affecting them, in accordance with article 12 of the Convention. Moreover, the forums for children's participation, such as the Youth Parliament and Continue to collaborate with civil society organizations, to increase opportunities for children's participation, including in the media.

Since the previous reporting period, not many things have changed regarding child participation. Children are often left out when important issues such their placement, measures and even sentences are discussed.

Just recently (application was submitted on November 2, 2012 and the decision was made on February 2, 2016), Georgia lost the case at the European Court (CASE OF N.TS. AND OTHERS v. GEORGIA<sup>27</sup>) and during the case review, the judges considered violation of the Article 3, Article 9 and Article 12 of CRC. The conclusion states: "In the view of the Court, the combination of flawed representation, and as a consequence the failure to duly present and hear the views of the boys, undermined the procedural fairness of the decision-making process in the instant case. This was exacerbated by inadequate and one-sided consideration of the boys' best interests, in which their emotional state of mind was simply ignored..." (paragraph. 84). This is just one case that once again raised an issue of child participation in public.

<sup>24</sup> [http://www.ncdc.ge/AttachedFiles/reproductive\\_health\\_survey\\_georgia\\_2010\\_0ac9423c-44f8-47a6-afa4-118953ab52de.pdf](http://www.ncdc.ge/AttachedFiles/reproductive_health_survey_georgia_2010_0ac9423c-44f8-47a6-afa4-118953ab52de.pdf)

<sup>25</sup> [http://www.unicef.org/ceecis/Unicef\\_Sitan\\_ENG\\_WEB.pdf](http://www.unicef.org/ceecis/Unicef_Sitan_ENG_WEB.pdf), p.26

<sup>26</sup> <http://data.worldbank.org/indicator/SH.IMM.IDPT/countries>

<sup>27</sup> [http://hudoc.echr.coe.int/eng#{"documentcollectionid2":\["GRANDCHAMBER","CHAMBER"\],"itemid":\["001-160313"\]}](http://hudoc.echr.coe.int/eng#{)

#### 4. FAMILY ENVIRONMENT AND ALTERNATIVE CARE

##### 4.1. FAMILY ENVIRONMENT (art. SJ separation from parents (art. 9))

The Committee has expressed its concerns related to institutionalization of children due to the lack of adequate services, as in fact those children were not orphans. The Committee was also concerned that qualified social workers and social services were in short supply. The Committee also noted that the child welfare was mainly focused on children in institutions, and had not dealt with social exclusion issues such as poverty and domestic violence. **The Committee encouraged the State party to allocate sufficient resources to provide adequate support and assistance through its social services system for all families, particularly those economically disadvantaged, up to the age of 18 years and their families, and those in rural and remote areas. The Committee further recommended that the Special Project on Poverty should be expanded so prevent child institutionalization as a result of the poverty of his/her parents.**

Since 2007, Georgia continued the process of reforming the Child welfare System. At the beginning (up to 2013), the reform targeted deinstitutionalization as a main priority and closed in total 44 large scale state institutions and just recently put more emphases on family strengthening.

Thus, the gatekeeping policy (2012) was adopted as a unity of coordinated actions to ensure access to family support services and protect children from being placed in the 24-hour care system. To accomplish the objectives of gate-keeping system, number of preventive services expanded targeting the children at risk of abandonment - social workers' service, day care centers, increased reintegration allowance, food vouchers, shelters for pregnant women and mothers in a difficult situation and their children up to 10 years, early child development and child rehabilitation subprograms. Despite of these positive advancements in the system of Child Welfare, lack of family support and prevention services and unbalanced approaches towards different groups of children remained as the main challenge of the reform (SOS Children's Villages Georgia, 2012).

Furthermore, one of the concern about to the reform is a reactive nature of social worker's institution (under the Agency of Social Services, MoLHSA), that mostly focuses on case management and reacts only referrals and is not actively involved neither in providing counselling nor outreach prevention work thus statutory social services fail to identify many children and their families at-risk. So significant number of the most vulnerable children remain invisible for the childcare system.

Today, social work is not regulated profession with no law regulating their professional standards and/or continuous education and/or on-job training schemes that even more crucial for social workers with non-social work education background and/or working in regions. Despite the fact that number of social workers has been increased recently up to 239, it does not meet any international professional standards requiring having at least one social worker working on child protection per 10,000 inhabitant. According to the minimum standards, there should be at least 370-400 social workers working in the system just for child protection (GASW, 2015) and not half of that amount working on children, family, disability, elderly etc. issues at the same time (in total they conduct more than ten roles in social protection field). Moreover, often, new roles are imposed to social workers without providing any clear guidance and trainings. For instance, just recently they became responsible to assess the legal capacity of persons with disabilities without any clear instructions and preparation.

The high caseloads (up to 70 cases), difficult working conditions (no transportation expenses, overloaded offices, low and uncompetitive salary, no possibility to hold confidential conversation etc.) have made many qualified social workers to leave child protection and move to other agencies. According to the data

from Georgian Social Work Association (GASW), 81 social workers (81% had either university certificate or academic degree in social work) left the SSA during 2013-2015 with average working years of 4.78.

It is worth to note that the social service system is still highly centralized. Municipal social services and social protection systems at local municipal levels are very underdeveloped. There are no social workers working at the departments and they provide mostly only cash support to vulnerable families upon their applications/requests thus fail to respond adequately to the needs of vulnerable families as their services are quite limited, chaotic and unequally distributed across the country. Even Tbilisi City Hall abolished its “Child Care Department” in 2008, meaning that the child protection system lost a chance to involve the richest local municipality to supplement some services to vulnerable families with children.

In addition, the role of schools in identification of children at risk and providing child/family support services such as counselling, referrals to other professional services etc. remains unrecognized. Schools and kindergartens are not still able to provide any quality services to children in need.

Another main concern regarding the family support preventive services is that they are limited and mostly not equally accessible in all regions of the country for all children. Lack of alternative services creates significant challenge especially in the deinstitutionalization process of children with disabilities. The coverage of the reform unevenly spread across the country as it is more focused in the capital and central cities, and much less in the remote areas. Services have been developed disproportionally and are not equally available in all regions, for instance early intervention and rehabilitation programs, day care centers, shelters for pregnant women and mothers in a difficult situation and their children are available only in the central cities. In addition, there are number of barriers in terms of service assess, cost of transportation, lack of other material resources, problems with documentation, language, absence of permanent residence etc. that face a lot vulnerable families with children at risk.

Furthermore, worth to mention the gaps in service delivery of almost all programs such as long waiting lists for early intervention programs, day care centers, delays in provision of feeding and crisis intervention programs. In addition, majority of vulnerable children at risk are deprived of a quality, comprehensive and adequate psychological support from statutory social service agency, as SSA has only 11 psychologists throughout the country, and these resources are not enough to respond the needs of all children at risk.

It looks like that the government does not have a detailed situation analysis of what kind of services are the most needed and does not conduct the evaluation of their programs to analyze the gaps and impact of their programs on a regular basis to promote evidence-based interventions.

#### 4.2. PARENT’S COMMON RESPONSIBILITIES, ASSISTANCE TO PARENTS AND THE PROVISION OF CHILDCARE SERVICES (art. 18)

According to the Georgian Legislation, both parents carry the same responsibilities toward their children; but there is a cultural norm binding only women/mothers to be main caregivers despite that they might be full-time employed, while fathers/men have not such a social pressure on them. The new labor code (2010) makes possible for women to be entitled to get 730-day maternity leave including 183 (200 in case of twins) and in case of adoption – 90 days paid maternity days (articles 27-30). Moreover, any caregivers might get up to twelve-week unpaid leave annually to take care of their children before the children turn five and besides, some parents might be entitled to get cash support within maximum 1,000 GEL as compensation for their maternity leave.

On the practical side, when it comes to implantation, there are still no technical regulations to protect employee parents, as the employers are not encouraging the practice of long material/care even unpaid leaves. Still, there are many cases, when pregnant women and mothers have been dismissed from their workforces due to their parental responsibilities. Georgia has not ratified yet the ILO Convention 156: concerning Equal Opportunities and Equal Treatment for Men and Women Workers: Workers with Family Responsibilities (forced in 1983).

In terms of the support services, there are huge a lack of day care centers with extended working hours especially for infants forcing the parents either quit full-time jobs or hire nannies they can't afford. 10 GEL child cash benefits are not simply enough to cover just a small part of expenses associated with childcare. For instance, there is only day care center with extended working hours established by World Vision International that has a huge waiting list as it can serve only 25 children at the same time. So far, only operational costs are funded by Tbilisi City Hall that has to take care of population of 1.4 mln.; Regular kindergartens and schools start at the same time as usual working hours (9:00 am) and are closed, even paid extended classes (by 4-5-6 pm), before the official working hours end (6-7pm).

Moreover, there are a lot of challenges that parents face on daily basis: no respite care services for caregivers of children with disabilities; food vouchers are only for children under 12 months living in the families entitled cash benefits from TSA program (for 2012-2014 used to be for children under the 18 months).

#### 4.3. ALTERNATIVE SERVICES TO CHILDREN DEPRIVED OF PARENTAL CARE (ARTICLE 20)

**The Committee has recommended that all institutions providing alternative care to children be regulated by the State and requests that the State party specifically report on its efforts to regulate all institutions and the number of children in their care. The Committee further recommends that the State party consider introducing measures to ensure and provide for follow-up and after-care to young people leaving care.**

##### **Small Group homes and child Care Institutions**

In 2013, Georgia almost finalized the deinstitutionalization process with 442 reintegrated children, 2,124 in foster, including emergency foster care and 326 children in 47 small group homes (SSA, Nov, 2015). Out of 46 state large soviet style child residential institutions, only 2 state institutions (Tbilisi Infant House and Kojori Institution for Disabled Children) exist still with 83 children with disabilities (Nov, 2015). Both of them supposed to be closed back in 2013 according to the CAP 2012-2015.

Children staying under the state welfare system are deprived of quality, comprehensive and adequate psychological support<sup>28</sup>. During 2010 – 2013 years, UNICEF and USAID assisted the state to complement the gaps in psychological support through outsourcing services from various local NGOs, whose involvement has been heavily decreased recently. State Social Service Agency has only 11 psychologists across the country (1 per region), covering children victims of violence, families at risk, families with

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<sup>28</sup> Ordinance # 291 Annex 1.9. (April 14, 2014) on 'Approval of the State Policy on Social Rehabilitation and Child Care for 2014'. <https://matsne.gov.ge/ka/document/view/2322406> accessed: 28.12.2015;



reintegrated children and children in alternative care. These resources are not enough for provision of psychological services to all the children.

According to the Ombudsmen report (2015)<sup>29</sup>, there are issues related to qualification of caregivers, health care services including psychological and psychiatric support, child education, protection from violence and preparation for independent life at licensed small family group homes. Moreover, allocated funds by the state for children living in the small family group homes is not enough to cover the actual needs of children. Service-provider NGOs has to mobilize additional resources to meet the needs of children; therefore the services failing to mobilize such funding, are not able to provide children with adequate meals, clothes, heating and other conditions and everyday items needed by children<sup>30</sup>.

Moreover, despite the State gate-keeping and deinstitutionalization policies, there are still new private and religious driven child institutions emerging without any regulations. In 2014, a new child institution/boarding school for poor children was opened in Kobuleti region with a financial support of a private person. Despite MoHLSA won the case in the court twice, the benefactor just paid fines within amount of a few thousand Laris and the institution continues its operation as there is no state mechanisms but fines to regulate the operation of those facilities. There are many other childcare facilities/institutions operating without state license funded by private and/or religious institutions and sometimes even from their local municipalities. Furthermore, there is no precise data about the children living there, who they are, what are the reasons for separation from their families, what kind of services they are getting and how their other rights are fulfilled. Such practices indicate that the state does not have efficient mechanisms to implement and regulate its child protection policies across the country.

The first attempt to monitor child right situation at some childcare institutions run by the Orthodox Church and Muslim denominations of Georgia was made by the Public defender Office in February-March 2015, when the representatives of Child Rights Center visited 5 centers<sup>31</sup>. It appears that the quality of care at various institutions is different and is not regulated by the state care standards, as most of the institutions are named as boarding schools not requiring such standards. Thus, the rights to family environment, to freedom including religious expression, to health, to quality education, protection from violence etc. might highly jeopardized. Additionally, as the children are not under state care, they, especially with mental and physical challenges face problems to acquire disability status and become entitle to health benefits. Besides, the monitors have identified the problems with documentation and assessment of educational needs of children with learning challenges that also require involvement of the state agencies.

As the state nor the religious institutions themselves have not reported the exact number of children living in their child care institutions and boarding schools, the only source of information available to civil society actors are the media and journalists' reports. According to media reports<sup>32</sup> from 15 February 2015, there are around 24 Muslim boarding schools for children in Adjara that house around 600 children. The journalist acquired this information directly from each institution. Other media sources report<sup>33</sup> that there are around 17 918 children studying in around 90 schools under the auspices of the Georgian Orthodox Church. Out of this number, 825 children stay at boarding schools and 525 children live at residential

<sup>29</sup> <https://drive.google.com/file/d/0B7johJVjupxNX05yaGITVjZxZlk/view>

<sup>30</sup> Special Report of the Public Defender of Georgia 'Report on Monitoring of Child Care Institutions' (big institutions for children and small family type houses for children), 2011, pg. 13

<http://www.ombudsman.ge/uploads/other/0/98.pdf>; Ordinance №22 (January 27, 2010) of the Government of Georgia 'Approval of the Rules and Conditions for funding (co-funding) of Placement in Special Institutions' <https://matsne.gov.ge/ka/document/view/4780>, accessed: 28.12.2015;

<sup>31</sup> <https://drive.google.com/file/d/0B9BM3M8hbgAUQ2NSMVPORUZVTGs/view>

<sup>32</sup> Dumbadze, L., „Netgazeti", Children's homes beyond the law, 15.02.2015, <http://netgazeti.ge/2015/02/12/41301/> accessed: 28.12.2015;

<sup>33</sup> Kakheti Information Centre, „Patriarchate of Georgia spreads information on spending 25 000 000 GEL", 01.04.2013, <http://ick.ge/rubrics/society/13971-i.html>, accessed: 28.12.2015;



childcare institutions. So far, only two residential childcare institutions under the auspices of the Georgian Orthodox Church are licensed, thus the state plays no role in enrolling children or ensuring their safety and does not conduct monitoring for the rest of number religious childcare institutions.

According to the Public Defender's report, some of those children who are supposed to be living in religious institutions actually live on the street and are engaged in anti-social behavior, but there is no official record of this.

### **Foster Care**

One of the achievement of childcare reform is the development of Foster Care consisting of regular/professional, kinship, emergency and specialized (for children with disabilities) foster care systems. However, there are no childcare standards and Terms of References are officially adopted for any kind of foster caregivers, who take care of almost seven times more children (2,124). Despite the selection procedure, including compulsory training completion of foster caregivers and their training modules was developed back in 2011 -2012 with support of UNICEF and USAID, none of them has been still institutionalized.

Until now, the selection/registration of foster caregivers is made only based on the assessment made by the social workers<sup>34</sup>. According to the members of the members of the Regional Council on Guardianship and Care, there is an increasing deficit of registered and trained foster caregivers even in Tbilisi. Thus, more children might face to be placed into small group homes rather into foster care.

By the Law on Adoption and Foster Care, neither specific knowledge of child development and other childcare and child right issues nor completion of specific training courses are required from the applicants.

Moreover, due to high caseloads, social workers often fail to close monitor children in foster care. According to the children, often they visit social workers at their offices to keep them updated. What happens when children are too small to initiate contacts is still questionable. In addition, there is a huge shortage of foster caregivers and there are no preparation training modules and support mechanisms, including respite care for specialized foster caregivers who have been supported by the local NGO "Children of Georgia" with financial support of Open Society Foundation Georgia until recently.

In addition, as there are no care standards for foster care still, the foster children tend to have a lack of life skills and readiness to leave the care as this type of support is not required for caregivers.

### **Leaving Care**

Another drawback of the reform is absence of leaving care policy. There is no mandatory leaving care arrangements procedure in place ensuring that children are fully prepared for independent living. However, fractional initiatives were addressing this problem, i.e. financial assistance for aged out

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<sup>34</sup> Ordinance # 291 Annex 1.9. (April 14, 2014) on 'Approval of the State Policy on Social Rehabilitation and Child Care for 2014'. <https://matsne.gov.ge/ka/document/view/2322406> accessed: 28.12.2015; Order №51/N (February 26, 2010) of the Ministry of Labor, Health and Social Affairs of Georgia on 'Approval of Foster Care Procedures and Format', <https://matsne.gov.ge/ka/document/view/1008793> accessed: 28.12.2015;

adolescent for several months; however after the end of the assistance no monitoring or further needs assessment of these adolescents was conducted<sup>35</sup>.

As the care standards require, children in small group homes are supported to get prepared for the independent life after the care. However, this kind of support is not provided by the state and fully depends on the initiatives of private foundations and/or resources of service provider NGOs that are just a few across the country. Since 2012, the “Natakhtari” foundation has been providing the monetary support and psychological counselling to youths both at the preparatory and after care stages. They served 247 beneficiaries in almost all regions of the country and provided psychological support through 10 psychologists specially hired for this particular service, assistance with employment, (vocational) education and housing issues in 2015.

Considering the situation, the children in Foster Care are the most vulnerable in terms of their preparation for independent life as well. As there are no standards, including the standard on how the children should be supported and prepared to leave the care after they turn 18. Thus, caregivers are not required and children are not supported with life skill coaching trainings and or with other means to leave the system. Despite the “Natakhtari” foundation spent 587 857 GEL in 2015; they have not able to support children in foster care within given budget.

Therefore, it is crucial to develop the state policy and programs to ensure that all youths are supported despite their placement. Moreover, there are no after care services, including housing and psycho-social assistance<sup>36</sup>, provided by the state to youths who left the care, there is higher risks of homelessness, unemployment, substance abuse, conflict with law, prostitution etc among the youths ageing out of care. Even though the State Youth Policy and Youth Action Plan recognize those youths as one of the most vulnerable group requiring the special attention, there are no specific programs or policies from neither MOLHSA nor MSY (Ministry of Sports and Youths) addressing their specific needs.

#### 4.4. ADOPTION, NATIONAL AND INTER-COUNTRY (art.21)

**The Committee has recommended that the State should provide appropriate professional and financial resources with a view to strengthening programs related to adoption, its promotion and its respective control through strengthening the central authority on adoption, to develop programs, regulations and instruments to facilitate training and monitoring the performance of all actors involved in adoption. It encouraged establishment of a system to identify children who are potentially adoptable and expedite the adoption process; to conduct public raise awareness campaigns about adoption and the conditions for adopting particularly for children who may have particular difficulties in being adopted, including: older children; groups of siblings; children with disabilities; and children belonging to minority groups.**

The adoption is regulated by the law on “Adoption and Foster Care” (2009) that defines who are considered as potentially adoptive children, requirements for adoptive parents and all parties including SSA as the central authority, involved in the process. The amendment affected in July 2015, allows authorities to appeal to the court to cancel of parenting rights of those parents who fail to fulfill their responsibilities for more 6 months despite all available preventive and reintegration cash and in-kind

<sup>35</sup> <http://www.sos-childrensvillages.ge/ResourceFiles/Publications/CRSA.pdf> accessed: 06.01.2016

<sup>36</sup> Ordinance # 291 Annex 1.9. (April 14, 2014) on ‘Approval of the State Policy on Social Rehabilitation and Child Care for 2014’. <https://matsne.gov.ge/ka/document/view/2322406> accessed: 28.12.2015

supports and identify the child as a potentially adoptive (Article 14<sup>th</sup>). This measure would lead to put the interest of children at first rather the parenting rights of people not considering putting much effort in taking care of their own children.

Despite the law clearly articulates the procedure especially for international adoption, it still misses several important points to regulate the adoption practices locally: compulsory preparation/training of adoptive families; compatibility procedures especially if the child is older, has siblings, is from minority groups, monitoring/involvement of authorities after adoption for at least during the compatibility period. It lacks incentives/supportive schemes in case of adoption of a child with disabilities.

Besides, the society is not well informed about the specifics of the procedure. Since accelerating the Child Welfare reform, 189 children have been adopted from state care institutions by November, 2015. Right now, there are almost 3,000 families on waiting list for 10-12 years and just ten times less potentially adoptive children, approximately 2/3 of them with disabilities whose adoption locally is still very problematic due to the strong stigma.

## 5. VIOLENCE AGAINST CHILDREN

### 5.1. CHILD ABUSE AND NEGLECT (arts. 19)

Considering the scare data on the extent of violence, sexual abuse and neglect within the family and lack of the prevention and other measures, including legislative framework to combat violence against children, the committee has recommended:

- (a) Reinforce mechanisms for monitoring the number of cases and the extent of violence, sexual abuse and neglect within the family;**
- (b) Ensure that professionals working with children (including teachers, social workers, medical professionals, members of the police and the judiciary) receive training on their obligation to report and take appropriate action in suspected cases of domestic violence affecting children;**
- (c) Strengthen support for victims of abuse and neglect in order to ensure their access to adequate services for recovery, counselling and other forms of rehabilitation; and**
- (d) Support the establishment of a toll-free, 24-hour and nationally accessible child helpline service with three-digit number, to be able to reach out to all children in need of care or assistance throughout the country.**

### National representative studies on scales of Violence against Children in Georgia

Since last periodic review, two national wide studies have been conducted in Georgia with support of UNICEF: “National Study on Violence against Children in Georgia” (2008)<sup>37</sup> and “Violence against Children

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<sup>37</sup> *National Study on Violence against Children in Georgia*, Commissioned by the Ministry of Education and Science (MoES) and funded by UNICEF, co-funded by ISPCAN, implemented by the Public Health Foundation of Georgia (formerly The Public Health and Medicine Development Fund of Georgia), 2007-2008; Study report available at [http://unicef.ge/uploads/The\\_National\\_Study\\_on\\_Violence\\_against\\_Children\\_in\\_Georgia\\_eng.pdf](http://unicef.ge/uploads/The_National_Study_on_Violence_against_Children_in_Georgia_eng.pdf)

in Georgia” (2013)<sup>38</sup>. While the first one covered the experiences in homes, schools and institutions, the last one focuses more on domestic violence issues and consists of two independent, yet thematically interrelated studies. The first study, entitled “Violence against Children in Georgia: National Survey on Knowledge, Attitude and Practices”, focuses on the levels of knowledge found among adult Georgian population regarding VAC, the attitudes underlying child raising and discipline methods; and the practices of reporting and reacting to child abuse cases. The second study, entitled “Violence against Children in Georgia: Analysis of the Child Protection Referral Procedures and Recommendations to the Government”, analyzes the implementation of Child Protection Referral Procedures, established in 2010.

The “National Study on Violence against Children in Georgia” (UNICEF, 2008 a) has found out that children experienced high levels of violence in schools, homes and residential institutions. In the majority of cases, perpetrators are mothers/main caregivers and/or other children. 79, 8% of children under age 11 were victims of physical abuse and 82,3% of psychological abuse; 54% of children aged 11 and over were physically abused and 59% were emotionally punished. The study results showed that despite almost all parents (90.8%) practiced some positive child rearing management methods, both physical and psychological punishments in the family started at early ages.

Moreover, according to the same study, a bullying/peer violence is a serious problem in residential care and educational institutions. 47.1% of the children reported experiencing physical violence and 47.5% reported suffering psychological violence at school during the past year despite the fact, the most students most students felt safe at school (UNICEF, 2008 b)<sup>39</sup>. The findings of the studies once again proved that the effective and immediate measures needed to be undertaken to combat violence against children.<sup>40</sup>

### Corporal Punishment of Children

**The Committee has recommended that the State party adopt legislation explicitly prohibiting all forms of corporal punishment of children in all settings, including the home, strengthen national and local commitment and actions, and promote non-violent values through awareness-raising and public education campaigns against corporal punishment. Moreover, the state should ensure to provide recovery and social reintegration services with collaboration of civil society and in particular with the involvement of children, to ensure that every child is protected from all forms of physical, sexual and mental violence.**

At the legal level, protection of children from violence is guaranteed by the Criminal Code of Georgia; the Law of Georgia on Elimination of Domestic Violence, Protection of and Support to Its Victims and the Civil Code of Georgia (Article 1198.1.<sup>1</sup>), which prohibits to use such upbringing methods that causes physical and psychological torture. None of the documents stipulates the exact definitions of corporal punishment.

Despite the general provision on prohibition of violence against children in Georgian legislation, it doesn't prohibit corporal punishment of children as provided in the international standards. That results that Civil Code stipulates that in the absence of exact written provision for the prohibition

<sup>38</sup> [http://unicef.ge/uploads/Unicef\\_VAC\\_ENG\\_final.pdf](http://unicef.ge/uploads/Unicef_VAC_ENG_final.pdf)

<sup>39</sup> *National Study on School Violence in Georgia*, Commissioned by the Ministry of Education and Science (MoES) and funded by UNICEF, co-funded by ISPCAN, implemented by the Public Health Foundation of Georgia (2007-2008), 4; Study report available at [http://unicef.ge/uploads/National\\_study\\_School\\_Violence\\_ENG1.pdf](http://unicef.ge/uploads/National_study_School_Violence_ENG1.pdf)

<sup>40</sup> *Ibid.*, 8-10

of corporal punishment and the fact that corporal punishment is not considered to be a criminal crime despite the degree of its severity.

Corporal punishment of children is not directly prohibited in any of the legislative norms ('Law of Georgia on Education', Criminal Code of Georgia, Law of Georgia on Prevention of Domestic Violence, Protection and Assistance of Victims of Domestic Violence, Law of Georgia 'Code of Custody').

The Child Protection Referral Procedures (2010) defines responsible agencies and their roles in the processes of identification, assessment, intervention and monitoring. Namely, the Ministry of Internal Affairs (Mol) guarantees protection of the child's life and safety; the Ministry of Education and Science (MoES) ensures a safe and non-violent educational environment; and the Ministry of Labor, Health and Social Affairs (MoLHSA) (village doctors and medical institutions) and its Social Service Agency (SSA) ensures identification, assessment and protection of children from all forms of violence, including emotional abuse and neglect. However, the list of responsible agencies are limited and not cover other professionals and institutions that might also face child abuse and neglect: such are kindergartens and the professionals working with families and children as psychologists, legal advisors, coaches etc.

Georgia has criminalized domestic violence in 2012, however concerns are expressed by the UN Human Rights Committee over its underreporting due to gender stereotypes as well as "lack of due diligence on the part of law enforcement officers in investigating such cases and insufficient protection measures for victims, including insufficient enforcement of restrictive and protective orders and a limited number of State-funded shelters and support services"<sup>41</sup>.

It is also reality that corporal punishment is perceived as a norm by parents and used as a form of discipline. As the latest study on Violence against Children (UNICEF, 2013) reveals, the 60% of parents still strongly believe that "harsh parenting is more effective method of raising a child than using non-violent method"<sup>42</sup>, 45% of adult population still think that the use of physical violence against children is acceptable.

### **Violence against Children: Legal Framework**

Within scope of Child Welfare and Protection reform, along with prioritizing deinstitutionalization, the attention was paid to the issue on violence against children namely to strengthen mechanisms for timely identification and response.

One of the main legislative advancement was "Child Protection Referral Procedures (CPRP)<sup>43</sup>", the inter-ministerial Decree of MoES, Mol, MoLHSA issued in 2010. CPRP aims to support the protection of children from all forms of violence within and outside the family through the establishment of a coordinated and effective protection system between Ministry of Internal Affairs (Mol), the Ministry of Education and Science (MoES) and the Ministry of Labour, Health and Social Affairs (MoLHSA). CPRP determine the rights

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<sup>41</sup> Human Rights Committee, *Concluding Observations on the fourth periodic report of Georgia*, UN doc CCPR/C/GEO/CO/4,(2014), par. 9

<sup>42</sup> UNICEF, study report, *Violence against Children in Georgia* (2013), 13

<sup>43</sup> Joint Decree №152/б-№496-№45/n of the Minister of Labour, Health and Social Affairs of Georgia, Minister of Internal Affairs of Georgia and the Minister of Education and Science of Georgia of May 31, 2010, Tbilisi, "On Approving the Child Protection Referral Procedures"

and responsibilities of the competent authorities in the case of child abuse, as well as the response mechanisms.

Authorities involved include: Patrol Police Department and Regional Offices of the territorial bodies of the Ministry of Internal Affairs of Georgia, LEPL Social Service Agency (SSA) and its structural units – local authorities of guardianship and custody, specialized institutions for children (child care institutions, day care centers, Small Group Homes), medical institutions and rural doctors. Since the CPRP obliges the involved parties to develop and adopt internal guidelines (article 6.7), the SSA (MoLHSA) and MoI have elaborated and approved internal operational instructions/procedures for their systems. However, MoES and Health sector of MoLHSA did not have any internal operational Child Protection Referral Procedures for school professionals, rural doctors, ambulatory medical service facilities and hospitals by 2013 (after three years of adoption of CPRP) when another study was conducted with support of UNICEF to analyze the implementation of CPRP. Only in 2015, the MoES instructed the schools to develop their own procedures, identify persons responsible for identification of child abuse and make referrals. In 2014, there were only 29, while in 2015 already 100 referrals from schools across the country.

### **Technical Capacity/Expertise of Professionals working with Violence against Children issues**

According to the study, the police and social workers had the highest degree of understanding regarding what constitutes violence, however the knowledge did not necessarily was transformed into responsive actions: almost one in four social workers did not think that it was their job to respond to physical violence, and to respond to child neglect. The difference of the public awareness and professional opinion on the necessity of intervention of child protection social services was the same: just 47% of professionals and 46% of public thought that intervention is required, but just only in those particular cases when the violence is a severe and has been repeated several times. There was a strong belief among all professionals that interfering in a family's affairs is a sensitive issue, and many suggested that it should be avoided. All professionals believed that more awareness-raising activities would be needed to combat the cultural norms around 'non-interference', which restricted community members from reporting violence cases.<sup>44</sup>

The reporting of the cases become even more crucial considering the scale of the violence against children. According to the National Survey on Knowledge, attitudes and Practices (UNICEF, 2013), violent forms of punishment are perceived as more effective than non-violent parenting techniques by 60% of the population, 45% of public believe that that children raised without physical punishment will be 'spoiled'. Moreover, 30% of adult population of the country openly accepted the practicing the corporal punishment toward their children.

The disparities in data also indicates that there is still issue of not having a common understanding of violence against children among various professionals and difficulties in coordinated measures. Various agencies face challenges in terms of differences in technical capacity, skills and attitudes. It appeared that the personal relationships between social workers and police were the determining factors in successful cooperation despite the fact that the representatives of police were aware of their roles and the working procedures for VAC cases, including involvement of social workers (UNICEF, 2013). In addition, the practice has shown that restrictive orders work more effectively in relation to adult victim rather in the

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<sup>44</sup> *Ibid.*, 77-79



case of child victims of domestic violence. The police tend to work with social workers and involve them frequently in the process where restrictive orders are issued to protect both mothers and children. However, the issue is that children are not identified as victims in most cases and thus the cases have not been reported to SSA. What may appear as reliable sign in terms of child abuse/neglect for social workers, does not necessary seems trustworthy for the police officer. For instance, police needs to have visible signs of physical injuries to perceive the fact as child abuse, as the presence of visible injuries is not necessary when it comes to the identification of child victims of abuse/neglect in the family. Thus, restrictive order are not issues by police and child victim cannot be removed timely from the violent environment.

In order to ensure school students' safety and protection, LEPL School Resource Officer ("Mandaturi") was established in April, 2010 under the MoES. Despite the fact that Mandaturi is not subject of the CPRP as it did not existed in 2010, it became actively involved in identification and referral of CAN cases to SSA and police. Several cases of child abuse from the side of teacher were identified by Mandaturis, which triggered conflicts between school and Mandaturi office. As still there are no clear and commonly accepted internal procedures, which shall regulate interaction between CPRP and Mandaturi office, child protection system becomes less effective to engage school professionals. Moreover, there is still gaps in recognizing CAN at school settings as not all schools have "Mandaturis" and not all of them are able to identify cases of CAN at early stages and communicate with children effectively. Despite the numerous recommendations since 2002, to develop counselling (psychological/social work) services locally at schools to address the issues of bullying, child development, child maltreatment etc, such services do not existed beyond the Mandatori services who are not able to provide cover neither all schools nor aspects of the issues related to families and children.

Capacity building of professionals on child abuse and neglect issues – recognition, respond and multi-sectorial cooperation, including cases of domestic violence – efforts were intensive with regard to law enforcers and social workers (cooperation between NGO and government sectors), however, very limited efforts, again by the non-governmental sector, were made in relation to school professionals and medical doctors. Similar to awareness raising activities, capacity building trainings were intensively carried out in 2010-2012, however continuity was not maintained and continuing professional development mechanisms have not been elaborated by the government. Due to frequent changes of personnel in the child protection system, institutional knowledge and skills has dramatically decreased in all sectors in recent years. CAN reporting guidelines for all sectors have been elaborated by NGO sector with UNICEF and USAID support in 2011. However, for smooth operation of child protection system, professional guidelines for all involved disciplines, e.g. for medical doctors, law enforcers<sup>45</sup> and teachers have not been developed yet<sup>46</sup>.

As for preschool educational system/kindergarten, that is under the subordination of Local Governments, this institution is not identified as a subject for the referral procedures and its engagement in the prevention, identification and referral of CAN is also minimal.

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<sup>45</sup> Guideline for trainers and professionals "Tell Me What Happened"- Interviewing *Child Victims and Witnesses*, was elaborated by PHF with EU support in 2015.

<sup>46</sup> Responding to the recommendation of the Committee on the Rights of the Child: (c) "Ensure that professionals working with children (including teachers, social workers, medical professionals, members of the police and the judiciary) receive training on their obligation to report and take appropriate action in suspected cases of domestic violence affecting children", Concluding Observations: Georgia, CRC/C/GEO/CO/3, (23 June 2008), par 41 (c)

A small percentage of schools and medical institutions report suspected cases of child abuse. The situation in preschools is particularly dire. Monitoring conducted by the Public Defender from May 2014 through January 2015 in 61 preschools found<sup>47</sup> the incidents of psychological violence in 70% of the monitored preschools and practice of corporal punishment in 40%. While 30% of caregivers at the preschools thought that restricting access to food, 75% agreed with limiting children's access to games and toys was an appropriate method to subdue children or regulate behavior. Moreover, 90% of preschool staff did not know the mandatory referral procedures they must follow when encountering possible cases of violence against children.

### **Coordination between various involved Agencies**

In order to respond the issue, the violence against children has been mentioned in all CAP developed since then: 2008-2011, 2011-2012 and for 2012-2015. For instance, the latest CAP for 2012-2015 intended to conduct public awareness raising activities for both public and professionals, to reflect violence against children issues in professional continued educational/on-job training for professionals (police officers, social workers, teachers, school resource officers, etc.) who work with children. Moreover, it planned activities to combat violence against children in schools, improvement of response mechanisms on case of child abuse/neglect through advancement of gradual development of primary support, counseling and rehabilitation services for child victims, increased the capacity of the child helpline etc.<sup>48</sup>.

Considering the recommendations of the committee<sup>49</sup>, number of important measures have been undertaken to Prevent and Combat Domestic Violence during this reporting period and these measures are still in progress. To name some important advancements are the amendments: to the Law from 2009 on "Prevention of Domestic Violence, Protection and Assistance of Victims of Domestic Violence" that defined the "Child Neglect" (2014) (the same definition has not been reflected into CRRP still); detailed instructions to support/simplify the procedure for restrictive and protective orders; specified the rules for questioning of child victims and witnesses in presence of parents who might be considered as a perpetrator or interested party; gave opportunities to impose mandatory training courses for perpetrators, etc. Moreover, the amendments Administrative Offences Code of Georgia imposed the individual and institutional sanctions for those institutions and professionals who would fail to act according the CPRP.

Since introduction of Child Protection Referral Procedures (May, 2010), SSA became the coordinating body to address violence against children cases. According to their data, there were only 90 referrals registered – in 2010, 144 – 2011, 208 – 2012, 320 – 2013, 362 – 2014, 693 – 2015. The data shows that the step by step, people are getting more aware of the role of social services, however the process requires immediate measures to accelerate the process.

<sup>47</sup> Public Defender of Georgia, a special report on the monitoring of pre-school establishments, 2015, <https://drive.google.com/file/d/0B7johJVjupxNbm12dUZTb3NISjQ/view>, accessed: 28.12.2015;

<sup>48</sup> Child Welfare and Protection Action Plan 2012-2015, Decree # 762 by the Government of Georgia as of April 24, 2012

<sup>49</sup> Committee on the Rights of the Child, *Consideration of the reports submitted by States Parties under Article 44 of the Convention*, Concluding Observations: Georgia, CRC/C/GEO/CO/3, (23 June 2008), par 40-41



It worth to mention that the data from various agencies differ at large scale: for instance, for the same years, police issued only 48 restrictive orders to protect 0-24-year old victims<sup>50</sup> in 2010, 28 – 2011, 32 – 2012, 12 – 2013, 19 – 2014 (January - June), and 391 – 2015. According to the analytical department of the Chief Prosecutor's Office, 59 juveniles have been identified as victims of domestic violence (11% of all crimes) in 2014 and 115 juveniles in 2015 (18% of all crimes).

Furthermore, information sharing among all involved parties (school, social services, police, pediatricians etc.) is the issue not only at the stage of the identification of the case, but at the monitoring phase as well due various reasons: low awareness on the importance of the cooperation and coordinate of actions, high caseloads, not having clear instruction, social pressure/norm not to interfere into families matters etc.

As the cooperation between police and social workers have been persisted until now, there is an idea (a project of new amendment in the law just been registered in the parliament<sup>51</sup>) to broaden mandate of social workers and make them able to make an independent decision from the police and remove a child from the family. The decision of the social worker shall be approved by the court though.

### Raising Awareness Campaigns and Helplines

Despite the several raising awareness campaigns were carried in the frame of cooperation between governmental and non-governmental sectors, which were supported by donor organizations<sup>52</sup> for last years, most of them was not repetitive and/or continuous. However, expect the activities carried out by the NGOs with donor support on *“parental guidance and counselling with a view, inter alia, to prevent child abuse and neglect”*<sup>53</sup> that do not have nationwide impact, had not taken place<sup>54</sup>.

Several hotlines operate in Georgia with countrywide coverage. These hotlines are: for victims of domestic violence with number 2 309 903 (recently changed into 116 006), MoLHSA hotline - 1505 of and 112 – for any matter of emergency.

Hotline for domestic violence victims 2 309 903 operates since October 15, 2010. Hotline operators, with legal background provide 24/7 toll free and confidential service concerning domestic violence. The service envisages legal as well as interference during the crisis situations and depending to necessity referral to relevant institution.

Hotline with number 1505 of MoLHSA offers 24/7 service. This hotline makes it possible to obtain information on state insurance from “Health Ombudsman” service, pensions, social assistance, health programs, immunization and other services of the ministry. This hotline receives reports on alleged child abuse cases. It is possible to report on child abuse and/or domestic violence to hotline 112, an Emergency and Operative Response Center that receives emergency calls from all over Georgia during 24/7. The 112

<sup>50</sup> Mol defines age groups as <17, 17-24, 25 – 44 and 44+

<http://police.ge/files/pdf/9%20%E1%83%9D%E1%83%AF%E1%83%90%E1%83%AE%E1%83%A3%E1%83%A0%E1%83%98%20%E1%83%AB%E1%83%90%E1%83%9A%E1%83%90%E1%83%93%E1%83%9D%E1%83%91%E1%83%90%202007-2014--6%20%E1%83%97%E1%83%95%E1%83%94.pdf>

<sup>51</sup> <http://parliament.ge/ge/law/11250/28983>

<sup>52</sup> UNICEF, USAID, US Embassy, Misereor, UBS Optimus Foundation, Open Society Georgia Foundation, etc.

<sup>53</sup> Committee on the Rights of the Child, *Consideration of the reports submitted by States Parties under Article 44 of the Convention*, Concluding Observations: Georgia, CRC/C/GEO/CO/3, (23 June 2008), par 41 (a)

<sup>54</sup> *Ibid.*

Operator receives processes and analyses incoming calls and transfers them to the relevant services: police, fire/rescue service and ambulance.

Hotline is periodically promoted by governmental and non-governmental sectors, however UNICEF study as of 2013 revealed that “One in five Georgians do not know what to do or to whom to appeal to when they are exposed to or witness violence. According to the study, 38 per cent of the population are aware of what to do or to whom to report an offence should the need arise”. The study also showed that “when a person knows how to react and whom to appeal in cases of violence, he/she is 80 per cent more likely to report the issue”.<sup>55</sup> Most likely this data has not improved significantly, since targeted activities to promote hotline, have not been implemented since 2012 up to date.

Despite above-mentioned available resources, there is still an acute need for ‘child helpline service with three-digit number, to be able to reach out to all children in need of care or assistance throughout the country’. A helpline service for children, which uses modern technologies like telephone services; mobile phone SMS/text messaging; postal services online services such as email, chat rooms and online bulletin boards, has to be established and most importantly helpline service must employ call center operators capable to provide response adequate to child’s age and need.

## 5.2. HARMFUL TRADITIONAL PRACTICES: EARLY AND FORCED MARRIAGES (art. 24(3))

Georgia has one of the highest rates of marriage of girls under the age of 18 among European countries, ranking between Moldova (19%) and Turkey (14%). According to a report by the United Nations Population Fund (UNFPA)<sup>56</sup>, up to 17% of Georgian women were married before the age of 18 in recent years. According to UNICEF approximate 1% of all girls have been married before 18<sup>57</sup>, babies born to adolescent mothers aged 15-19 accounted for approximately 9-10% of all births (the National Statistic Department of Georgia, 2015)<sup>58</sup>. In the region of Kvemo Kartli, which has a majority ethnic minority population, 341 girls became the victims of early marriage between the years of 2008 and 2012. That number included girls as young as 12 years old. In several cases, girls trapped in forced marriages have committed suicide<sup>59</sup>.

Child marriage is an act of sexual violence, though it is commonly not qualified as such. Traditional culture has long idealized the concept of marriage in Georgia. For women, including very young girls, getting married is considered the fulfillment of their highest moral obligation. These girls are often pushed to get married at an early age. Even though the legal concept of marriage cannot be claimed before the age of 18 (16 in exceptional cases), the abduction of girls by older men is still called “marriage” by official state representatives and the issue is not handled as a criminal offence.

The findings of the Reproductive Health Survey Georgia<sup>60</sup> (UNFPA, 2010) suggest that women who married before 18 were most likely to have not completed secondary or higher education. The same survey found that 76.6% of married women aged 15-19 used no modern method of contraception. The main reason for

<sup>55</sup> UNICEF, study report, *Violence against Children in Georgia* (2013), 13

<sup>56</sup> UNFPA, 2013, Georgia-Child Marriage, pg. 3, <http://eeca.unfpa.org/sites/default/files/pub-pdf/unfpa%20georgia%20overview.pdf>, accessed: 28.12.2015;

<sup>57</sup> <http://data.unicef.org/child-protection/child-marriage.html> last accessed on February 23, 2016

<sup>58</sup> [http://www.geostat.ge/index.php?action=page&p\\_id=1091&lang=eng](http://www.geostat.ge/index.php?action=page&p_id=1091&lang=eng) last accessed on February 23, 2016

<sup>59</sup> Kakheti Information Centre, <http://ick.ge/videogallery/20328-i.html>, accessed: 28.12.2015;

<sup>60</sup> UNFPA, „Survey on Women’s Reproductive Health”, 2012, <http://en.calameo.com/read/0007135295e5153a94688>, accessed: 28.12.2015;

this is the lack of information. In Georgia, the school curriculum does not include education on reproductive health issues and there exist no state funded family planning or counseling centers.

According to the Georgian Ministry of Education and Science, 7,367 girls dropped out of school before the age of 15 during the period of October 2011-January 2013. There is no data about the reasons for those girls' dropping out, though early marriage was a prominent factor in most cases<sup>61</sup> based on the observations referred to in reporting by the Public Defender.

While child marriage has been classified as a crime<sup>62</sup> in the Criminal Code of Georgia, this regulation is not enforced. The lack of enforcement of this article has negatively influenced not only individual victims but also society as a whole. Behind every case, there is a failed obligation on behalf of the law enforcement, social workers, teachers, doctors and others to prevent the incident or protect the victim. Not collecting statistics both reflects the state's attitude toward child marriage and impedes public understanding of the implications and extent of the problem.

Frequently, poor socio-economic conditions are the main cause of child marriages. Families living in poverty may see the early marriage of their daughters as a way to relieve them of the need to feed and clothe them, or they could benefit from a bride price. The state poverty reduction program is not gender sensitive and does not identify or prevent such cases.

Child marriage is justified by parental approval. In the majority of cases, parents are the ones who plan, organize and facilitate child marriage. There have been cases of exchanging young girls for cattle (10 cows). There have also been cases of young girls committing suicide<sup>63</sup> in protest of their parents' decision to marry them off. In these cases, law enforcement does not file charges against the parents for violating their children's rights. Moreover, despite the there is a provision/article 150<sup>1</sup> in Criminal Code of Georgia forbidding forcing marriage and even unregistered/cohabitation however, no parents/family members have been charged. According to the Women Movement, in 2015, there have been registered of 20 cases of deprivation of liberty of girls (among them 5 cases for girls under 18 and 8 cases in 2014<sup>64</sup>) to encourage them to marry and 6 cases of forced marriages. In most cases, the criminal case proceeding are stopped as the girls are changing their testimonies and accept the marriage proposals.

### 5.3. RIGHT NOT TO BE SUBJECT TO TORTURE OR OTHER CRUEL, INHUMAN OR DEGRADING TREATMENT OR PUNISHMENT (arts. 37(a) and 28(2))

**The Committee has recommended that the State party shall investigate thoroughly all allegations of torture and ill-treatment by public officials and ensure that perpetrators are rapidly brought to justice and tried; Provide adequate reparations, rehabilitation and recovery programs for victims of such abuses; Consider strengthening the existing system of independent monitoring for detention centers for juveniles; and Ensure the accessibility of the existing mechanism, with the involvement of civil**

<sup>61</sup> Annual Report of the Public Defender of Georgia, The Situation of Human Rights and Freedoms in Georgia 2012, pg. 397, <http://www.ombudsman.ge/uploads/other/0/86.pdf>, accessed: 28.12.2015;

<sup>62</sup> According to Article 140 of the Criminal Code of Georgia, sexual intercourse between an adult and a person under sixteen is a criminal offense when the adult has prior knowledge that the child was under 18. Since April of 2015, a new regulation (article 150 of the Criminal Code) was adopted by the Georgian Parliament that makes forced marriage a criminal offense.

<sup>63</sup> Annual Report of the Public Defender of Georgia, The Situation of Human Rights and Freedoms in Georgia 2013 (p.272-273), <http://www.ombudsman.ge/uploads/other/1/1934.pdf>, accessed: 28.12.2015;

<sup>64</sup> Data obtained from the Chief Prosecutors' Office

**society as equal partners in this process, to receive complaints from, or on behalf of, children of ill-treatment or abuse by members of the police.**

In August of 2012, a riot happened in the penitentiary establishment for juveniles #11 forcing to the administrators to move juveniles into various establishment. Almost 20 juveniles have been placed on trial to investigate the fact. At that moment several juveniles mentioned non-fair treatment but this issues have not been discussed widely until fall, when the scenes of the inhuman and degrading treatment including juveniles from penitentiary establishments were distributed through various tv channels. It appeared that juveniles had been subjected to torture and inhuman treatment at various settings. As the consequence, several people have been arrested and prosecuted to commit such crimes toward adults, but none was charged for what happened with juveniles.

Since that, the renovated penitentiary establishment for juveniles has been transferred into Rehabilitation Center for Juveniles. New name inclines to have very different approaches to address the individual needs and reoffending risks for the juveniles, to have specialized staff, various intervention modules and diverse educational, psychosocial, sport and cultural activities.

Despite some progresses in the field, the recent annual reports of Public Defender Office still mentions lack of seasonal clothes and shoes, personal hygienic materials and frequent facts of bullying among the juveniles (reports for 2014, 2013). Furthermore, some convicted juveniles have been transferred into the pre-trial departments where the regime does not allow the juveniles to fully enjoy their rights according to the law. The Georgian law defines different approaches for accused and convicted juveniles: at the pre-trial stage, the juveniles have limited access to the playgrounds and are allowed to leave their cells only for the particular reasons; while the convicted juveniles are placed in semi-open type establishment allowing them to leave their cells without any restrictions during day-time, attend the school, participate in various sport and cultural activities etc. Moreover, the reasons for such transfers are not often neither well documented nor time-bonded nor articulated to the juveniles that puts them in even worse situation.

While people are already sensitized to the situation in penitentiary establishments, the ill-treatment at the investigation stage/at the police stations are getting more vocal recently. A few cases of ill-treatment of juveniles and even minors have been articulated by various sources including by the Public Defender's Office (the most case from December 15, 2015 <sup>65</sup>). In November 2015, there was a case when the lawyer from state Legal Aid Service was abused after he entered the police station to defend his juvenile client<sup>66</sup>.

#### 5.4. SEXUAL EXPLOATION AND SEXUAL ABUSE (art. 34)

**The Committee has recommended that the State party shall adopt a comprehensive law to prevent sexual exploitation and prostitution of children; train all the professionals on how to receive, monitor and investigate complaints properly and implement appropriate legislative measures, policies and programs for the prevention, recovery and social reintegration of child victims, including education and**

<sup>65</sup> <http://www.ombudsman.ge/en/recommendations-Proposal/winadadebebi/proposal-to-chief-prosecutor-about-alleged-ill-treatment-of-minors-by-police.page>

<sup>66</sup> <http://www.ipress.ge/new/17016-ombudsmeni-prokuraturas-advokat-giorgi-mdinaradzis-cemis-faqtis-gamodziebisen-moutsodebs>

**training as well as psychological assistance and counselling. The committee also emphasizes the importance to collaborate with relevant NGOs and seek technical assistance from, inter alia, UNICEF.**

According to various evaluations, the Georgian legislation and policies on protecting children against violence do not meet the certain provisions of the UN Convention on the Rights of the Child. The current child protection policy does not properly include effective, specific standards and regulations for the protection of children against violence including sexual violence<sup>67</sup>. The lack of those standards undermines efforts to protect children and makes impossible for civil society to monitor the child protection system. The State accountability for the protection of children is not clear and measurable.

The system of developing and coordinating professional resources in the field of child abuse is especially weak in Georgia. Experts found that Georgia's social services fail to meet the needs of young children who suffer from sexual or emotional abuse or are at risk of such abuse<sup>68</sup>.

In March 2014, the state ratified the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse requiring to adopt and implement specific measures to establish coordination body and standards of working with victims, ensure confidentiality of the data and services for the rehabilitation of the victims etc. The implementation of the requirements in the practice requires immediate responses and **development of state policy and vision on combating CSEC**, capacity building of various professionals and coordinated cooperation of responsible bodies that remain problematic.

Moreover, nothing has been done with regard to mainstreaming CSEC manifestations in the main policy and child protection documents. What is generally lacking in Georgia Legislation and probably what also reflects public attitude toward sexual abuse of child and CSEC manifestations is that neither legislation, nor the public, look at the problem from the victim's protection perspective.

As the data shows, just in 2014, 70 child victims of abuse have been registered by Chief Prosecutor's office, while SSA agency got referral only for 23 cases and 4 of them were from the police. In 2015, the Prosecutors office registered 113 child victims of sexual abuse, while SSA got referrals for 118 cases of referrals on potential sexual abuse of children and only 20 referrals from the police among them, meaning that there is coordination between various agencies responsible to address child abuse, including sexual abuse of children. According to the CPRP, all involved parties should inform SSA on any (potential) case of child abuse/neglect.

Moreover, the state shall implement consistent policies and programs for prevention and protection the most vulnerable children such as those living and working in streets, living under the poverty line and/or close to the conflict zones, children left behind from emigrant parent(s), children of women victims of domestic violence etc.

On 28th of June 2005, the Government of Georgia has accessed the Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography. Reports have not been submitted by the States Party on the Optional Protocol so far.

### **Sex-tourism (better term – sexual exploitation of children in travel and tourism – SECTT)**

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<sup>67</sup> Guth & Penner (2015), Child Protection Index <http://www.childpact.org/wp-content/uploads/2015/06/Child-Protection-Index-Georgia.pdf>

<sup>68</sup> Guth & Penner (2015), Child Protection Index <http://www.childpact.org/wp-content/uploads/2015/06/Child-Protection-Index-Georgia.pdf>

It is extremely difficult to identify reliable source, which would describe the extent or indicate whether Georgia is a country of origin or destination for “child sex tourists”.

There are several well-known hotspots in Georgia where prostitution is exercised. Such places are located in Tbilisi (capital city) and in Batumi (cross-border region and tourism destination town) too. For the safety purposes, these hotspots are not named. However, it should be noted that number of such places, including massage parlours has significantly increased both in capital city and in Batumi. Information that children are engaged in prostitution is based on the expert’s observations, their practical experience of interacting with children that live and work on the street.

Lack of data on SECTT issue means that it is difficult to know the precise extent and scope of the problem; however an increased number of bars, hotels and massage parlors in certain districts of the capital city Tbilisi and in other major towns, including Batumi, seem to be the setting of SECTT in Georgia. The high growth rate in tourism in recent years, resulted from State’s policy on tourism development, together with positive trends connected to economic growth and development, also brings risks of SECTT.

NGO representatives working with children living and working on the streets, report that the majority of these children are involved in prostitution. They also spoke on some tendency in the conduct of these children, particularly; from time to time they tend to migrate to Adjara Region of Georgia (black sea coast), which is a tourism destination place.

According to statistics run by the Ministry of Internal Affairs of Georgia, Georgia received 5 493 492 international travelers in 2014, number of visitors is increasing each year. Statistically, the vast majority of tourists visit the country in the summertime and most of them come from the bordering countries comprising 91% of total visits.<sup>69</sup>

### **Child prostitution**

Definition of child prostitution is not available in domestic legislation. In consideration of the circumstance when a country joins particular international Convention or Treaty, with this act the country is obliged to implement requirements of given Convention or Treaty domestically either by amending existing legislations or normative acts. Also ensure implementation of required obligations. Therefore, all requirements, enshrined in CRC, its Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography, in Lanzarote Convention and in all applicable International laws and treaties must be fully implemented on the domestic level.

The Lanzarote Convention, which entered into force on 1<sup>st</sup> of January, 2015 for Georgia imposed obligations earlier, from the moment of accession and replies to the general overview questionnaire to the Lanzarote Convention were made by Georgia as early as March 2014. Another step forward made by Georgia is that Ministry of Internal Affairs, under the Article 37 (1) – Recording and storing of national data on convicted sexual offenders of the Lanzarote Convention is in the process of establishment of the data base “relating to the identity and to the genetic profile (DNA) of persons convicted of the offences established in accordance with the Convention.”<sup>70</sup>

<sup>69</sup> Statistical Information on the visitors crossing the Georgian border, Ministry of Internal Affairs of Georgia, accessed at: <http://police.ge/ge/useful-information/statistics/sazghvris-kvetis-statistika>

<sup>70</sup> Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse, (Lanzarote25.X.2007), Article 37 (1)

Note: Information of the establishment genetic profile (DNA) of convicted sexual offenders is obtained through focus group discussion with representatives from Central Criminal Police Department.



Prostitution is not legalized in Georgia. Age of sexual consent is determined at age 16 according to the Criminal Code of Georgia.<sup>71</sup> It should be emphasized that Georgian legislation does not provide punitive sanctions for those who buy sexual services from children of age group 16-18. Neither mentions it anything on redress and remedy for children under 18 who were engaged in prostitution by whatever reason.

There are no numbers available on children that are engaged in prostitution. Since it was impossible to obtain any estimated number of children engaged in prostitution, this indicates on the circumstance that law enforcement agencies are not able to identify child sex-workers. If a crime concerning child's engagement in prostitution is identified in any form even by imposing administrative fine for engagement in prostitution, thus by all means would be reflected in the statistical data base of the Ministry of Internal Affairs that runs regularly updated statistical database. One assumption that can be made in this respect is that law enforcers, according to acting legislation, on each identified case of child sex-worker, only issued warning.

### **Child pornography**

Similar to child prostitution, evidence-based information on child pornography, as one of the manifestations of CSEC, is difficult to find out today. Access to internet is increasing in Georgia from year to year and today it is available not only in major cities and towns, but also in all territorial units and also in many villages. According to world statistics, there are 2,188,311 Internet users registered in Georgia as of June 2014.<sup>72</sup>

Georgian legislation criminalized child pornography. Georgia has ratified Council of Europe Convention of Cybercrime in 2012 and thus carried out certain obligations thereof. Cybercrime Unit is functioning within Central Criminal Police Department of MIA<sup>73</sup>. Subsequently, to harmonize the child pornography legislation with international standards, amendments have been made to Criminal Code of Georgia with regard to child pornography, which entered into force on January 8, 2014.

#### **5.5. CHILD TRAFFICKING (ARTICLES 34 AND 35)**

**The Committee has encouraged that the State party should continue its cooperation with UNICEF and IOM and extend its bilateral and subregional multilateral agreements to prevent the sale, trafficking and abduction of children, strengthen efforts to prevent and combat child trafficking. It has recommended to improve the system of monitoring and evaluation of policies, programs and projects, with particular attention to vulnerable groups of children and ensure that all trafficking cases are investigated and that perpetrators are charged and punished. All child victims of trafficking shall be protected and not criminalized and provided with adequate recovery and social reintegration services.**

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<sup>71</sup> Criminal Code of Georgia, Article 140

<sup>72</sup> Internet World Stats, accessed at <http://www.internetworldstats.com/asia/ge.htm>

<sup>73</sup> Actions carried out by Ministry of Internal Affairs of Georgia, available at: <http://police.ge/en/projects/kiberdanashauli/saertashoriso-tanamshromloba-kiber-danashaultan-brdzolashi>

Child trafficking and forced labor are the issues that have not been addressed in the last Child Action Plans and there is no common understanding what constitutes child trafficking, there is a lack of awareness on the issue, competencies and scared coordination between various responsible agencies on various issues including data sharing. The data from the Interior Ministry, there were 10 cases of child trafficking for sexual purposes in the last five years on which investigation started. Unfortunately, it was not possible to find out how many convictions took place. Just in 2014, Mol revealed two cases of child trafficking and no cases of forced labor of children<sup>74</sup>. (This is contradicted by information provided by the Social Service Agency for the same period, according to which there were two cases of forced child labor in 2014)<sup>75</sup>.

On the other hand, the international reports, assessments and recommendations consistently mention the high risk of trafficking and forced labor of children, especially children living and working on the street. The US State Department's report on human trafficking for 2014 emphasizes that Georgia is a source, transit, and destination country for men, women, and children subjected to trafficking in persons, specifically the forced prostitution of women and the forced labor of men, women, and children... Some street children may be subjected to forced begging or coerced into criminality<sup>76</sup>.

Despite the Action Plan of the Government of Georgia on the Protection of Human Rights 2014-2016 has a special chapter on Trafficking, there is mention of special programs/policies that should be introduced in regards to prevent child trafficking. Although the government is trying to identify and protect the victims of trafficking in general, some gaps are observed in regards of prevention of children's involvement in begging, sexual exploitation of children living and/or working on the streets. According to the WV International data, approximately 25% street children are citizens of neighbor countries who are brought to Georgia to be engaged in begging. However there is no precise data on number of children crossing the borders, who are the adults accompanying them and what measures are taken by the state to prevent child trafficking and abduction.

The situation is not much different in respect of forced child labor is similar. Even though the official data do not show any cases of forced child labor in Georgia in 2014, the latest report by the US Department of Labor from 2014 articulates 29.1% (172,378) who are engaged in farming/agricultural, street work, including (forced) begging and collecting scrap metal<sup>77</sup> and even in commercial sexual exploitation, sometimes as a result of human trafficking<sup>78</sup>. According to the same report, "...Although children are not commonly found working in agriculture in Georgia—except on family-owned farms—a labor trafficking expert in the country indicated that children working in agriculture and in the informal urban economy are highly vulnerable to forced labor..." (paragraph 1).

These data suggest that child trafficking and labor exploitation and forced labor may constitute a more serious problem in Georgia than is reflected in the state reports. The fact that only international reports cover these issues indicates that the problem is so much not recognized that it not planned to be explored further.

There is no mechanism for the identification and reaction on cases of labor exploitation of children living and working on the streets. The mechanism developed for protection of children from the

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<sup>74</sup> Ministry of Internal Affairs, correspondence #873731, 24.04.2015;

<sup>75</sup> Social Service Agency, correspondence #04/17971, 13.03.2015;

<sup>76</sup> US State Department, Trafficking in Persons 2014 Trafficking in Persons Report, 2014, pg. 182, <http://www.state.gov/documents/organization/226844.pdf>, accessed: 25.12.2015;

<sup>77</sup> [http://www.dol.gov/ilab/reports/child-labor/georgia.htm#\\_ENREF\\_34](http://www.dol.gov/ilab/reports/child-labor/georgia.htm#_ENREF_34)

<sup>78</sup> <http://www.state.gov/j/tip/rls/tiprpt/countries/2013/215467.htm>



violence<sup>79</sup> is not effective and practically fails to identify the labor exploitation of children living and working on the streets<sup>80</sup>.

#### 5.6. PHYSICAL AND PSYCHOLOGICAL RECOVERY AND SOCIAL REINTEGRATION OF CHILD VICTIMS (art. 39)

The special chapter of CAP 2012-2015 is dedicated to the development of the services. Until 2013 services for child victims of abuse and neglect were not in place in Georgia with the exception of state shelters for victims of trafficking and domestic violence.

Despite the fact that with the help of UNICEF, child friendliness of the shelters was improved, this service is not effective for unaccompanied children. As a result of partnership of non-governmental organizations and SSA (with UNICEF support), the child friendly units were established at all regional SSA centers (11). Psychologists were hired and became part of multidisciplinary teams. Indeed a positive step forward, however units cannot cover the whole regions as they have many responsibilities and high workload, staff is underpaid, mainly participate in child's assessment and partly in respect of counseling components.

Moreover, there are no specific rehabilitation services for abused and neglected children especially for child victims of sexual abuse but very limited rehabilitation and counseling services that are provided by NGOs (PHF, GCRT) in Tbilisi. The services that are funded by the foreign donor organizations lack the persistency and fail to meet existing needs countrywide including counseling and rehabilitation services for children in alternative care settings (foster care, small group homes).

The 239 social workers in Georgia are not enough to address the needs of most vulnerable populations (all vulnerable children, child victims of abuse/neglect, elderly, people with disabilities) of the country. The statutory social workers are not given resources for transportation and communication and thus they are limited in their ability to act on complaints from people living in remote (mountainous) regions properly due to high transportation costs and time constraints. As a rule, they are expected to accumulate complaints over several months until they can get to multiple remote locations at one time and at their own expense. In many cases, social workers do not have an office space in order to ensure the privacy or confidentiality of victims of sexual violence. In some regions, social workers do not have their own desks or computers. Instead, they must take turns using a shared computer and other equipment.

The high caseloads<sup>81</sup>, poor working conditions and uncompetitive salary make a lot of qualified social workers leave the child protection field.

Moreover, only 11 psychologists are not simply enough to support the needs of all clients of statutory services to complement the services provided by social workers.

As the both psychology and social work are not among the regulated professions, there are no licensing/certification requirement to ensure the quality of services they provide. Moreover, as even

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<sup>79</sup> Joint Order №152/N-№496-№45/N, of the Ministry of Labor, Health and Social Affairs of Georgia; the Ministry of Internal Affairs of Georgia and the Ministry of Education and Science of Georgia, on 'Approval of the Child Protection Referral Procedure', 2010, <https://matsne.gov.ge/ka/document/view/1021481>, accessed: 25.12.2015;

<sup>80</sup> Report of the Public Defender of Georgia on Protection of Human Rights and Freedoms in Georgia, Rights of Children. (2011); <http://www.ombudsman.ge/uploads/other/1/1152.pdf>, accessed: 25.12.2015;

<sup>81</sup> In Adjara region, a representative of the Social Service Agency reported that one social worker is assigned to 265 cases, <https://www.youtube.com/watch?v=qBjvLY6-SSw>, accessed: 28.12.2015;

NGOs are not required to get licensed if they provide just counselling (fulfillment of the child care standards are required for day care centers, 24 hour services), there are no special guidelines or protocol for any services for children and families including child victims of sexual abuse.

## 6. DISABILITY AND BASIC HEALTH

### 6.1. CHILDREN WITH DISABILITIES (ARTICLE 23)

**The Committee has recommended that the State should ratify the convention on the Rights of Persons with Disabilities and its Optional Protocol and ensure implementation of the Standard Rules for Equalizing the Possibilities for Persons with Disabilities, make sure that children with disabilities may exercise their right to education to the maximum extent possible. It urges the state to make available the necessary human and financial resources, especially at the local level and to promote and expand community-based rehabilitation programs. Moreover, it emphasizes the importance of awareness-raising campaigns to sensitize the public, and parents in particular, on the rights and special needs of children with disabilities, including those with mental health concerns and establish services, including parent support groups at local community levels.**

On 23 December, 2013 Georgia ratified the Convention of the Rights of the Persons with Disabilities (CRPD) and it entered into force on 12 April, 2014. The Government of Georgia temporarily refrained from ratification of the optional protocol to CRPD until analyzing the country's capacities for CRPD's implementation (as recommended by MoLHSA). On October 27, 2014 the government nominated the Public Defender of Georgia as an independent monitoring agency on implementation of the CRPD.

According to the Legal Framework Analysis of Georgian Legislation in Regards of CRPD and CRC (UNICEF, 2015), the status for disability is being granted based on the medical conditions and does not consider the social and functional abilities of the person. The report emphasizes the gaps in policies and programs in regards of prevention of stigma and discrimination toward children with disabilities, lack of individual needs assessment procedures, capacity-building measures for teachers and all staff and education institutions including kindergartens and schools to ensure the right to inclusive education of children with disabilities at these levels.

Moreover, the report reveals that the principle of the evolving capacities of the child is not implemented in the legislation. The existing legislative framework does not provide disability and age-appropriate assistance to ensure the participation of the children with disability in discussions on all matters affecting them. In addition, it appears that the legislation lacks the special safeguards to ensure protection of children with disabilities from abuse and maltreatment and well-defined procedures on early intervention and family support services to prevent child abandonment and institutionalization. As so far only children with disabilities remain in state large-scale residential institutions, the legal framework on alternative family care also requires some improvements to secure the right to a family (environment) for the child with lack of parental care.

The legislation gaps might be seen as huge, but they do not cover all the aspects why children with disabilities are not visible in Georgia: There are only 9,010 children with disabilities registered as recipients of state subsidy in February 2015, which is about 1% of children in Georgia (compare with 6% worldwide).

The reasons could be many, but one of the main reasons is the use of the medical model rather than the social model of granting people the status of disabled. For instance, according to the current system, children under 5 years with autism and Down syndrome are not granted the status of disabled as the procedure requires children to meet certain medical conditions. Therefore, they do not have access to programs that require the status of disabled and are not able to receive any cash benefits from the state. According to psychiatrists, some parents refuse to continue treatment for child behavior management, since improvement in the child's health can lead to a reduction in symptoms and therefore the loss of the cash benefit that is frequently the only source of income for poor families<sup>82</sup>.

Another reason why children with disabilities are not very visible is a stigma as social norm. For instance, The National Youths Survey (UNICEF, 2014) has revealed that 43.3% of young people perceive the stigma of disability as a social norm: 19.8 % believe that a family would have a concern about disclosing the fact that one of their children has a disability and more than 55 % of them believe that having a family member with a disability would pose a problem for a person plans to get married etc...

The state medical-social rehabilitation services for children with disabilities are only available in five major cities. Families living in other villages and regions do not have access to services, which violates the right of children with disabilities to necessary and appropriate care.

The situation for children who are diagnosed with psychiatric disabilities is especially difficult, since there are only 10 beds and up to maximum 20 days in the entire country assigned for the inpatient care of children under 15<sup>83</sup>. After the abolishment of the child psychiatry departments established during the Soviet period 20 years ago, children between the ages of 15 and 18 no longer have access to adequate services.

Community-based services for children with disabilities are underdeveloped. At present, day care centers function only in large cities and regional centers. The operations of the state-funded Early Intervention Program is limited to seven cities, meaning that children with disabilities living in rural areas do not have access to any services.

Despite the fact that Georgia has introduced inclusive education in the last few years, in practice it is implemented mostly in big cities. The schools in small regions and villages have not been provided with the staff and other resources that are needed for inclusive education. For this reason, the children with disabilities who should be receiving an inclusive education are actually only receiving perfunctory inclusion. Inclusive pre-school education is only provided in large cities and cannot be found in other villages and regions.

In 2013, Disability Rights International called the situation a child trafficking threat; however, the issue has not been addressed as of September 2015<sup>84</sup>.

Moreover, the data shows that the impact of poverty is particularly conspicuous on children with disabilities. Therefore, the corresponding poverty reduction and special support programs and counselling for children with disabilities and their families need to be accordingly developed.

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<sup>82</sup> Berukashvili, A., „Netgazeti“, Disability statistics that do not reflect reality, 2012,

<sup>83</sup> Makhashvili, N., Global Initiative on Psychiatry, Mental health reform in Georgia, [http://www.mls.ge/hrh/pictures/dftcontent/gallery/108\\_1.pdf](http://www.mls.ge/hrh/pictures/dftcontent/gallery/108_1.pdf), accessed: 28.12.2015;

<sup>84</sup> Mathews, E., Ahren, L., Rosenthal, E., Kaplan, L., Levy, R., McGowan K., G., 2013, Disability Rights International, Left Behind 2013, <http://www.driadvocacy.org/wp-content/uploads/Left-Behind-final-report1.pdf>, accessed: 28.12.2015;

## 6.2. HEALTH

### Health and medical services

**The Committee has recommended that the State should allocate increased resources to address the high rates of neonatal deaths and premature births, to improve ante- and post-natal care and develop campaigns to inform parents about basic child health and nutrition, advantages of breastfeeding, hygiene and environmental sanitation, family planning and reproductive health. In addition, the development of fully subsidized health care the system has been recommended to ensure highest standard of health for all children, paying special attention to the most vulnerable families, including those in rural and remote areas.**

The current government introduced the universal health care system for uninsured people in 2013 that substituted state health insurance program that provided only those with certain TSA score (< 100,000). The actual expenses in thousands for the universal care look like this: 69,916.9 in 2013, 338,473.1 in 2014, 566,000.0 in 2015 and 570,000.0 is planned for 2016<sup>85</sup>.

Universal health care program covers all expenses associated with outpatient care for children and families including home visitations by family doctors and/or nurses if the family requests so, planned vaccinations for children, up to 70% of specific doctor consultations, child delivery up to 500 GEL (800 GEL in case caesarian intervention), some medical tests etc. However, there are no certain schemes adopted how the infants and toddlers should be monitored including the frequency of home visitations by the nurses and/or doctors and there are no schools for mothers to assist them with child bearing.

Despite the fact that child mortality rate is decreasing for the last years, Georgia stands as the second top position with up to 13.3 infant and up to 14.9 Under-five mortality rates<sup>86</sup> among eastern European and Caucasus countries<sup>87</sup>. According to the Reproductive Health Survey (2010), neonatal deaths continued to account for most of infant mortality and 58% of under-5 deaths in Georgia<sup>88</sup> meaning further reductions in child mortality will depend heavily on continuing the improvements in survival during the neonatal period.

Child Malnutrition is not considered as a public health issue in Georgia: the prevalence of underweight in children less than five years of age is 1.2 %, wasting - 1.6 %, stunting - 11%, overweight and obesity are much greater problems, affecting 20 % per cent of young children and 42 % of non-pregnant women (UNICEF, 2011<sup>89</sup>). In 2013, a death of a year old boy from mountainous region due to heavy malnutrition, shocked the entire nation and made the government to revise the child protection system. This case reinitiated a discussion about the definition of child neglect that was introduced within scope of the Law on Elimination of Domestic Violence, Protection of, and Support to Its Victims in 2014, but still is not reflected in Child Protection Referral Procedures. The same case helped to acknowledge that the system of patronage for infants and children under 5 (e.g. home-visits) are not widely practiced in the country

<sup>85</sup> <https://matsne.gov.ge/ka/document/view/3108373>

<sup>86</sup> <http://apps.who.int/gho/data/view.main.CM1320R?lang=en>

<sup>87</sup> United Nations, Department of Economic and Social Affairs, Population Division (2015). *World Population Prospects: The 2015 Revision, custom data acquired via website.* <http://esa.un.org/unpd/wpp/DataQuery/>

<sup>88</sup> [http://www.ncdc.ge/AttachedFiles/reproductive\\_health\\_survey\\_georgia\\_2010\\_0ac9423c-44f8-47a6-afa4-118953ab52de.pdf](http://www.ncdc.ge/AttachedFiles/reproductive_health_survey_georgia_2010_0ac9423c-44f8-47a6-afa4-118953ab52de.pdf)

<sup>89</sup> [http://www.unicef.org/geecis/Unicef\\_Sitan\\_ENG\\_WEB.pdf](http://www.unicef.org/geecis/Unicef_Sitan_ENG_WEB.pdf), p.26

leaving a lot of children without any medical and social support. Decreasing the recent immunization rate to 91% also indicates some problems with child and mother patronage<sup>90</sup>

### 6.3. MENTAL HEALTH

**The Committee has recommended that the State party formulate a modern, evidence-based child mental health-care policy, and invest in the development of a comprehensive system of services, including mental health promotion and prevention activities, out-patient and in-patient mental health services, with a view to ensuring effective prevention of violence, suicidal behavior and institutionalization of children.**

There is still no child mental health-care policy adopted and the system lack both human and financial resources to develop diverse prevention and intervention services to meet the needs of children and youths.

Mental health services, financed within the framework of the State programs, mainly cover the assessment of health condition, diagnostics, and inpatient service for acute and long-term treatment. Psycho-social rehabilitation is available only in case of a long-term inpatient treatment<sup>91</sup>. Therefore the significant part of children and youth with mental health problems remain without rehabilitation services. Moreover, significant problems arise in relation to child suicide, since children do not have access to proper mental health services. Even when there is an obvious risk of suicide, the possibility of a child to receive the proper state run/funded services does not actually exist. Some services are provided by NGOs, but these are far and between.

State funding does not provide assistance for conditions not requiring inpatient treatment: such as ADHD, behavior conduct disorders, specific developmental impairments, etc.<sup>92</sup>

One of the serious gaps in mental health services are the lack of qualified professionals. According to the data of 2011, the number of psychiatrists engaged in this field is 242<sup>93</sup> (only 15 out of them are child psychiatrists), that is two times less compared to the European countries. Moreover, there is a serious gap in an actual and recommended number of mental health nurses. According to the GASW (2015), the main interventions are treatment oriented and not cover psychosocial capacity building activities.

### 6.4. ADOLESCENT HEALTH

<sup>90</sup> <http://data.worldbank.org/indicator/SH.IMM.IDPT/countries>

<sup>91</sup> Ordinance #279 (October 31, 2013) of the Government of Georgia on 'Approval of the State Health Care Program for 2013', Annex # 11, Article 3, <https://matsne.gov.ge/ka/document/view/2066026>, accessed: 28.12.2015;

<sup>92</sup> Ordinance #279 (October 31, 2013) of the Government of Georgia on 'Approval of the State Health Care Program for 2013', Annex # 1, Article 11, <https://matsne.gov.ge/ka/document/view/2066026>, accessed: 28.12.2015;

<sup>93</sup> Mental Health Reform in Georgia: Brief description Nino Makhashvili, Global Initiative on Psychiatry, [http://www.mls.ge/hrh/pictures/dfltcontent/gallery/108\\_1.pdf](http://www.mls.ge/hrh/pictures/dfltcontent/gallery/108_1.pdf), accessed: 28.12.2015;

**The Committee has urged the State to promote an improve access to reproductive health services for all adolescents, including sex and reproductive health education in schools as well as youth-sensitive and confidential counselling and health-care services. In this regard, the Committee urges the State party to take legislative measures to ensure to all children under the age of 16 free and confidential access to medical counsel and assistance with or without parental consent.**

According to the amendments from May 28, 2015<sup>94</sup> to the Law on Right of the Patients, 14-18 old youths can get services including related to the reproductive health and abortion without consent from the parents if they can judge their health condition properly. However, there are no modules on reproductive health integrated in school curriculum still.

As the data from the National Statistics Office<sup>95</sup> indicates that despite the number of registered abortions among 15-19 old and younger girls has been decreasing as well as their ration in total number of abortions, there are still high: 6,97% (1,784) - 2010, 5,54% (1,696) - 2011, 5,03% (1,974) - 2012 4,95% (1,883) - 2013, 4,20% (1,407) – 2014. Considering the fact that 82.6 % of young people think that girls should do not have sex before marriage while 64.7 % of them think that the same before behavior is normal for boys (UNICEF, 2014), the girls are more stigmatized to get reproductive counselling.

The National Youth Survey (UNICEF, 2014) has reviled that while 52.2 % of youths received medical services in 2013, however, 26.6% of them who needed to but could not attend medical facilities due to the high cost of medical services. While 21.6 % of 15- to 29-year-olds are regular smokers smoking average 14.3 cigarettes per day in 15-19 age group, 63.4% - had drunk alcoholic beverages over the past 12 months. 60.5% of 15- to 19-year-old people who consumed alcohol over the past 12 months with more than 30 % of them with more than several times in a month.

According to the National HIV surveillance database (2010)<sup>96</sup>, the percentage of PWIDs living with HIV, among all screened PWIDs, is 3.91% (male-3.95% and female-2.08%) with prevalence being 0.32% in the younger group (below 25) and 4.44% in the older group (above 25). Between July 2012 and June 2013, 126 new cases of HIV/AIDS infection were identified among 15- to 29-year-old people; 31 % of these cases were identified among girls and 69 % among boys (UNICEF, 2014). Despite the fact that most young people (89%) have heard of HIV/AIDS, but only 17.4% have correct knowledge about the ways HIV is transmitted, and 17.2 % still believe that HIV can be transmitted by mosquito bite (UNICEF, 2014).

Despite, several restrictions in the legislation to limit access of youths to alcohol and cigarettes, it is very common to see children drinking spirits in public spaces and cafes. The country lacks programs and policies promoting healthy life styles: there are no extra-curriculum activities widely implemented at schools and many youths have unorganized sphere time. There are only 41 state funded youth programs across the country supporting just less 3% of 15-29 youths in 2013 (UNICEF, 2014).

## 7. CHILD POVERTY

**The Committee has recommended that the State party should take steps to improve the standard of living of children as a matter of priority and allocate sufficient funds to counteract the persistent inequality and improve the extremely low standard of living of families with several children, refugee**

<sup>94</sup> <https://matsne.gov.ge/ka/document/view/16978>

<sup>95</sup> [http://www.geostat.ge/index.php?action=page&p\\_id=197&lang=eng](http://www.geostat.ge/index.php?action=page&p_id=197&lang=eng)

<sup>96</sup> collecting country-wide data on HIV/AIDS and functioning only during 2010 at NCDC



**and internally displaced families, and families living in rural and remote areas. The Committee has suggested prioritizing the needs of children in its poverty reduction strategy to ensure the implementation of programs that specifically promote the full development of children and protect them against detrimental effects of growing up in poverty and extreme poverty. In addition, the committee has emphasized importance of regular monitoring of the poverty situation of children and implementation of the proper measures to address all negative indicators.**

To eradicate the poverty in the country and ensure social assistance to households living in extreme poverty, the government introduced the household scoring system in 2005. Social agents rank households according to a range of information on household living conditions, habitat, and demography (based on proxy means tests). Depending on the scores, the people living in the household might be eligible to cash transfers (Targeted Social Assistance (TSA)) and other social services (health insurance, food vouchers, access to free food catering, day care services etc.) with scores less than <57,000, full social services with scores less 70,000 and limited social package for households with scores <100,000. The program's regulation has been undergone to several revisions in following years (2005, 2006, 2008, 2010, 2011, 2012, 2013, 2014), however the most important amendments to scoring mythology has been implemented in 2015, where new scoring module has been developed with support of UNICEF. According to the recent scoring system, having children in households affect the total scores of the family at greater extend (UNICEF, 2015).

UNICEF Georgia has evaluated the impact of the program on the households and children living in (extreme) poverty through analysis the data of a multi-stage Welfare Monitoring Surveys (WMS) from 2009, 2011 and 2013 years. According to the WMS 2013 survey, TSA reduces extreme child poverty significantly, by more than half from 12.8 to 6.0 %, however the coverage of the program is still questionable (nearly 30 % of the poorest decile and 75 % of the second poorest decile of households get no TSA). The data shows that despite the measures of absolute poverty has dropped dramatically, especially among adults and pensioners in 2013, the percentage of children living in poor households rose to 27.1 percent, by 1.9 percentage points from 2011. In all three rounds of the survey poverty rates were significantly higher in households with children than in those without. 18% of children live in households suffering by housing deprivation. Even though almost the same proportion of population (24 % of the population, 23 %all children and 26 % of all pensioners live in subjectively poor households, households that have fallen below the relative poverty threshold since 2011 are, on average, significantly more likely to live in rural areas and have more children. Children were not adequately represented in existing social protection schemes.<sup>97</sup>

In addition, the majority of the extremely vulnerable population are members of a household with children (78%). The main problem for more than half of households with children (52%) is unemployment, while 11% are unable to pay debts or loans. Almost two-thirds of the children who live in poverty (64%) come from families where none of the members have a regular income.

According to the same survey, households with children are more likely to suffer from extreme poverty, particularly when there are three or more children. In households with three or more children, the extreme poverty rate is 8.3% higher than those who do not have children. Each additional child in the household increases expenses spent on childcare. The person responsible for childcare may be forced to

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<sup>97</sup> Baum. T. et al., *Georgia: Reducing Child Poverty – A discussion paper*, UNICEF (July 2012), 3

reduce his or her work hours or even to stay away from work, which decreases total household income. As a result, per capita consumption levels are reduced.

A new methodological approach for evaluating the socio-economic status of poor households was introduced in January 2015<sup>98</sup> that resulted in special measures for supporting households with children living below the poverty line (scoring 100 000) through granting 10 GEL (approximately 4 USD) per child under 16.

In total, 389 650 people received Targeted Social Assistance (TSA) in Georgia out of which 108 530 were children in December, 2015 (SSA, 2016)<sup>99</sup>.

## 8. EDUCATION

**The Committee has recommended to increase budget allocations to the educational sector, focus on an overall improvement of the quality of education provided, particularly in rural and minority regions, and take further measures to facilitate the accessibility to education of children from all groups in society. Moreover, the state has been asked to take measures to increase school attendance and reduce dropout and repetition rates, including by providing assistance and counselling to children and encourage to increase enrolment in early childhood development programs and pre-school institutions, in particular with regard to children growing up under economic hardship and deprivation.**

Despite several attempts to monitor the school dropout rates and implement preventive measure to decrease number of long-term truancies, there are not comprehensive mechanisms implemented yet in schools. According to the media, for 2011–2015 years, 6,277 girls dropped the school before completion of basic education (9 grades) across the country<sup>100</sup> and the early marriages was the named as one of the main reason. However, there was no data available about dropouts among boys that should be also a case considering at least of the high rate of child labor in home running farms.

Moreover, there are very scare opportunities for older children to attend the classes at the evenings or during the weekends to get support to pass the exams and get secondary school diplomas since they have either to be enrolled in the classes with younger children or prepare for the exams independently.

### Rights to Education of LGBT Children

Bullying generally and especially towards LGBT youths at school remains a problem in Georgia. Attitudes towards LGBT persons and issues at schools and universities echo general societal patterns and are under strong influence from traditional stigmas, taboo and values promoted by the Georgian Orthodox Church<sup>101</sup>.

<sup>98</sup> Decree # 758 from 31 December 2014, Government of Georgia approval of the methodology for evaluation of the socio-economic condition of the households under the poverty line;

<sup>99</sup> [http://ssa.gov.ge/index.php?lang\\_id=GEO&sec\\_id=770](http://ssa.gov.ge/index.php?lang_id=GEO&sec_id=770)

<sup>100</sup> <http://www.ick.ge/articles/25911-i.html>

<sup>101</sup> Study on Homophobia, Transphobia and Discrimination on Grounds of Sexual Orientation and Gender Identity. Sociological Report: Georgia, COWI.2010. Paragraph 67.



Teachers' attitude and knowledge regarding gender equality, their awareness of LGBT issues is extremely low<sup>102</sup>. Considering the above mentioned attitudes from the teachers, it is not surprising that according to the study conducted by Women's Initiatives Supporting Group in 2014, the group that the LGBT community trusts the least and comes out to very rarely be teachers and professors (11%)<sup>103</sup>. In another study, all the participants (in the age group 16-18) of WISG's research on LGBT discrimination and indicated to have experienced bullying at school.

No special programs (awareness, psychological counseling, etc.) are run at schools or in higher education institution to meet the needs of LGBT pupils/students. The demand of diversity-oriented and intercultural teaching is addressed to publishers of school textbooks and those wanting to obtain a textbook license: "The textbook will not be evaluated and will be cancelled from the licensing process if its content, design or any other feature includes discriminatory or/and discrediting elements (language, nationality, sex, membership ethnic and social groups etc.)"<sup>104</sup>. State reports say that school textbooks are free from stereotypes. It is not enough that the textbooks are not discriminatory; they must actively promote tolerance and broad-mindedness, including non-discrimination based on sexual orientation and gender identity<sup>105</sup>.

## 9. SPECIAL GROUPS OF CHILDREN

### 9.1. JUVENILE JUSTICE (ARTICLE 37, 39, 40)

**The Committee has recommended to the state to establish juvenile courts and the appointment of juvenile judges in all regions, ensure specialization of all professionals involved, protect the rights of children deprived of their liberty and monitor their conditions of detention. Moreover, the state has been urged to take a holistic and preventive approach to addressing the problem of juvenile crime and use alternative measures to detention such as diversion, probation, counselling, community service or suspended sentences, wherever possible etc.**

While many recommendations have been addressed by the new Juvenile Justice Code (specialization of professionals, diversification of alternative measures, special procedures with interviewing of a child, etc.), the practice has already shown some challenges with implementation of certain requirements. For instance of specialization not only legal professionals such police, lawyers, prosecutors, judges, who so far got only several day trainings, but also specialization of social workers and psychologists who should be involved at various stage of criminal proceedings. Furthermore, those specialized paralegal professionals shall be available in all regions across the country that requires mobilization of great human and financial resources. Moreover, the specialization shall be consisted of continued education modules and not be stopped after the first several day trainings.

<sup>102</sup> They believe that hatred and violence towards 'this kind of people' is unacceptable because homosexuality is 'an abnormality, a deviation' and it is not acceptable to 'oppress those who are sick'. At the same time, the study revealed that teachers do not see the marginalization and isolation that LGBT teens face in school as bullying or violence. Exploring knowledge and attitude of teachers towards gender equality, Gvianishvili N., Training and Research Group, 2013

<sup>103</sup> Aghdgomelashvili E., Needs of LGBT people in Health Care. Technical analysis. WISG 2015;

<sup>104</sup> Situation of LGBT Persons in Georgia. WISG. Tbilisi, 2012. [http://women.ge/wpcontent/uploads/2012/12/WISG\\_situation-of-lgbt-persons-in-Georgia\\_ENG-www.pdf](http://women.ge/wpcontent/uploads/2012/12/WISG_situation-of-lgbt-persons-in-Georgia_ENG-www.pdf)

<sup>105</sup> Materials for preparation of CEDAW shadow report concerning LBT women's situation in Georgia. WISG. 2012

In addition, the professionals should be supported with specific guidelines and professional supervision to ensure smooth implementation of the code and strength the coordination of various involved agencies and professionals. The children should be supported with individual based approaches taking into consideration of the best interest of them and they shall be a common understanding of “the best Interest of Child” among different agencies.

As there are no special services for child victims and witnesses and the links with criminal and child protection services are very weak, the new protocols and services should be developed.

### Children as complainants

Georgian legislation<sup>106</sup> does not set forth special provisions that allow young adults to bring cases about the violations of their rights that occurred when they were children<sup>107</sup>. The legislation of Georgia<sup>108</sup> does not provide specific provisions regarding the timeframe when the child is involved in a case<sup>109</sup> in case the child is not detained at pre-trial stage. In that case the decision should be made in 6-month period according to new Juvenile Justice Code (used to be 9 months).

In addition, there are certain defects in enforcing the court judgments related to the determination of the residence of the child during civil code proceedings. In particular, when a qualified psychologist is not involved in the process and the lack of essential services that are necessary to comply with the principle of the best interests of the child.

Child victims of sexual crime (and their parents) prefer not to engage in the justice system<sup>110</sup> as the adversarial system, particularly due to stigma, confidentiality issues and the cross-examination of children that is not deemed to be victim-friendly<sup>111</sup> as well.

Despite several year negotiations, the Optional protocol 3 is not still ratified by the government of Georgia and thus children are not able to enjoy the right to initiate legal proceedings internationally. The concept of child friendly justice system implies that children should be able to initiate legal proceedings directly, through a parent or guardian, and through a chosen or appointed legal representative<sup>112</sup>.

## 9.2. STREET CHILDREN

**The Committee has recommended that the State should provide street children with recovery and social reintegration services, including but not limited to shelters, adequate nutrition, and necessary healthcare and educational opportunities across the country in collaboration with UNICEF and NGOs. It should carry out a comprehensive study to assess the scope, nature and root causes of the presence of street children in the country in order to develop a national policies for prevention and for family**

<sup>106</sup> Civil Code of Georgia, Article 129, 128, 1008; Code of Administrative Procedure, Article 22; Criminal Code of Georgia, Article 71

<sup>107</sup> Access to Justice for children: Georgia, Child Rights International Network (CRIN), pg. 8, 2015

<sup>108</sup> Organic Law of Georgia on Constitutional Court of Georgia, Article 22; Code of Criminal Procedure, Article 103

<sup>109</sup> Access to Justice for children: Georgia, Child Rights International Network (CRIN), pg. 9, 2015

<sup>110</sup> Code of Criminal Procedure, Chapter X; Code of Civil Procedure, Article 152

<sup>111</sup> Access to Justice for children: Georgia, Child Rights International Network (CRIN), pg. 8-9, 2015

<sup>112</sup> Child Rights International Network, Examples of Child-Friendly Justice Practices

## **reunification where possible and conduct public awareness campaigns to address the stigma attached to street children.**

While the problem of children living and working on the street has existed for years in Georgia, the GoG has not gathered data on the issue. The only survey ever conducted on children living and working on the street was undertaken in 2008 by the International Organization Save the Children<sup>113</sup> in cooperation with other partners. That survey, which covered only four cities in Georgia, counted more than 1 500 children living on the street. Unfortunately, these data have not been updated since 2008, despite the visible increase in the number of children living on the street in recent years.

It is suggested that the growing number of children living and working on the street is a natural outcome of the ineffective reform of child welfare. For example, in 2005-2012, children under state care were released from institutions but provided no alternative or community-based services and, being unable to integrate into a family environment, found themselves on the street<sup>114</sup>. The government did not conduct any in depth assessment of the reform, since releasing negative information could undermine the positive image of the reform.

In 2013-2014, the European Union and UNICEF funded a project to support highly vulnerable children in Georgia with a specific focus on children living and working on the streets. This project included the creation of four mobile groups of social workers, psychologists, teachers and peer educators and established four day-care centers for children living and working on the street and three 24-hour transitional centers. The project so far has reached around 400 children on the street. While the project has been a success, it is still not enough to solve the needs of this population.

The inefficiency of the Georgian state policy regarding street children is directly linked to the lack of social policy documents. The state, which is unable to offer families the necessary elements of social protection and has extremely limited resources to rehabilitate these children, is unwilling to reveal the full extent of its problems. The lack of acknowledgement of this problem makes it difficult to address even more serious crimes like child trafficking and forced labor. Children living and working on the street are particularly vulnerable to those crimes.

Non-discrimination, guaranteed by the law, is not fulfilled in terms of the children living and working on the streets. Elaboration of additional mechanisms and the action plan, directed at the practical eradication of discrimination against these children is needed.

The Articles 1198 and 1198<sup>1</sup> of the Civil Code of Georgia, defining the duties of parents towards their children and the right to the protection of the juvenile's rights are not fulfilled.

Article 171 of the Georgian Criminal Code<sup>115</sup> regulates 'Involving Minor into Anti-Public Activities' is not adequately enforced. In practice, Street children frequently become involved in anti-social activities and are under constant risk of becoming victims of abuse.

<sup>113</sup> Wargan, K., Dershem, L., Save the Children, ACT Research, Don't call me a street-child, 2008, [http://pdf.usaid.gov/pdf\\_docs/Pnado657.pdf](http://pdf.usaid.gov/pdf_docs/Pnado657.pdf), accessed: 25.12.2015;

<sup>114</sup> Ombudsman of Georgia, Report on the monitoring of residential child-care institutions, 2011, pg. 76, <http://www.ombudsman.ge/uploads/other/0/98.pdf>, accessed: 25.12.2015;

<sup>115</sup> Criminal code of Georgia, Article 171: '1. Involving a minor into prostitution or other sexual perversion or persuading thereof into any other anti-public action, - shall be punishable by socially useful labor for the term of one hundred and seventy to two hundred and forty hours or by corrective labor for the term not in excess of two years or by detention for three-month term or by imprisonment for up to two years in length. 2. Involving a minor into abuse of intoxicant or any other medical substance, - shall be punishable by restriction of freedom for up to three years in length or by detention for the term not in excess of four months or by imprisonment for up to three years in length.' <https://matsne.gov.ge/en/document/view/16426>, accessed: 25.12.2015;

## 10. RECOMMENDATIONS:

### Family Support Services:

- The state should carry out child-friendly budgeting and appropriate allocation of resources, as well as increase the budget for the social protection measures of children, i.e. invest in and develop national standards and mechanisms on protection, recovery and reintegration programs for those affected by CSEC and CSA
- The State should ensure that both monetary and in-kind services are available in all regions across countries
- The state should ensure that children and their families have access to the psycho-social and rehabilitation services provided by NGOs not only in Tbilisi but also in the rest of the country
- The State should ensure that professionals working in child protection services are specialized accordingly and the statutory social workers provide quality services to children in need

### Child protection from Violence and Neglect

- The state should report on the second Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography; as well as join the Stockholm Declaration and Agenda for Action and further global commitments
- The state should acknowledge the problem of Commercial Sexual Exploitation of Children and child labor are the issues in Georgia that requires interventions.
- The state should ensure better enforcement of legislation and employ child-sensitive approaches in order to ensure proper protection of all children and avoid their further victimization and traumatization
- The state should strengthen support for victims of abuse and neglect in order to ensure their access to adequate services for recovery, counselling and other forms of rehabilitation
- The state should establish a toll-free, 24-hour and nationally accessible child helpline service with three-digit number, to be able to reach out to all children in need of care or assistance throughout the country

### Juvenile Justice

- The state should ensure continued education modules for all specialized professionals involved in the process including police, prosecutors, lawyers, judges, probation officers, professionals working in penitentiary system, and psychologists and social workers and implementation of guidelines and supervision schemes
- The state should ensure strengthen inter-agency cooperation of various, including child criminal and social service agencies
- The state should ensure that child friendly infrastructure and approaches are in place at any stage of proceedings across the country.

## ANNEX 1: MEMBERS OF THE GEORGIAN COALITION FOR CHILDREN AND YOUTH WELFARE

- Anti-Violence Network of Georgia
- Association of Helping Children with hearing and Speaking Disorders
- Association Anika
- Association of Disabled Women and Mothers of Disabled Children “Dea”
- Association of Small Group Homes Service Providers
- Breath Georgia
- Caritas Georgia
- Charity Humanitarian Center Abkhazeti
- Child and Environment
- Child and Family Association
- Children of Georgia
- Civitas Georgika
- First Step Georgia
- GCRT – Georgian Centre for Psychosocial and medical Rehabilitation of Torture Victims
- Georgian Alliance for Safe Roads
- Georgian Association of Child Neurologists and Neurosurgeons
- Georgian Association of Social Workers (GASW)
- Georgian Autism Society
- Georgian Union of People Living with HIV “Real People – Real Vision”
- Georgian Young Lawyers’ Association (GYLA)
- Global Initiative on Psychiatry – Tbilisi, Foundation
- Human Rights Priority
- Institute of Non-violent Communication
- International Association for Aid to Children Suffering from Leukemia
- International Support Fund for the Children Suffering from Leukemia
- Juvenile Justice Research Center
- Life Chance
- McLain Association for Children
- Mtskheta-Mtianeti Committee of AVN of Georgia
- Our Home Georgia
- Partnership for Children
- Partnership for Human Rights
- People in Need
- Public Health Foundation of Georgia (PHF)
- Rehabilitation Initiative for Vulnerable Groups
- Right for Health
- Save the Children International Georgia
- Society “Biliki”
- SOS Children’s Villages Georgia
- Studio “A D C”
- Tanadgoma – Center for Information and Counseling on Reproductive Health
- The Union “Parent’s Support”

- Union “Child, Family, Society”
- Union “Imedi +”
- Union “Oriony”
- Union “Sapari”
- Welfare and Development Center
- Women’s Information Center
- WorldVision Georgia
- Young Partners