States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.

You CAN Make a Difference!

Help Save the Life of HIV-Positive Children through Advocacy with the United Nations Committee on the Rights of the Child.
| The “HAART for Children” campaign and the UN Convention on the Rights of the Child | Pg. 1 |
| Safeguarding the Right to Health of Children Living with HIV and HIV/TB co-Infection | Pg. 3 |
| Questionnaire to Gain Helpful Information | Pg. 7 |
The “HAART for Children” campaign and the UN Convention on the Rights of the Child

Do you know that, in 2009, Caritas Internationalis launched its “HAART for Children” campaign?

In 2009, the international community observed the 20th Anniversary of the Convention on the Rights of the Child (CRC). On that occasion, Caritas Internationalis launched “HAART for Children: Greater Access to Paediatric HIV and TB Testing and Treatment”. This is an advocacy campaign that urges governments and pharmaceutical companies to live up to the Convention by facilitating greater access to medicines that treat and thus save the lives of children living with HIV or HIV/TB coinfection. HAART stands for Highly Active Anti-Retroviral Therapy (HAART), the term given to treatment regimens to aggressively suppress viral replication and slow the progress of HIV disease. Through this Campaign, Caritas also promotes efforts to scale up programmes designed to prevent mother-to-child transmission of HIV. Thus Caritas aims to eliminate all barriers that exclude women or children from HIV diagnosis and treatment.

What is the UN Convention on the Rights of the Child?

The United Nations Convention on the Rights of the Child is a comprehensive instrument that recognizes well-defined rights for children and sets out norms in order to respect and promote such rights. It provides children with fundamental human rights and freedoms but also takes into account their need for special assistance and protection due to their vulnerability. The Convention was adopted unanimously by the United Nations General Assembly on 20 November 1989 and entered into force on 2 September 1990. It is presently the most widely ratified international human rights instrument.

When a State ratifies the Convention, it assumes a legal obligation to implement the rights recognized in the treaty. This is only the first step since the recognition of rights on paper is not sufficient to guarantee that they will be enjoyed in practice. For this reason, countries that are signatories to the Convention incur an additional obligation to submit regular reports to the monitoring Committee (the CRC Committee) on how the rights are being implemented. Governments collect relevant information from their respective ministries and administrative units in order to draft the initial and subsequent periodic reports. This exercise prompts governments to take stock and analyze their legislation and practices in relation to this treaty. It also helps them to make important progress in various other areas related to children’s rights.
Can NGOs contribute to the work of the CRC Committee?

The CRC Convention expressly gives NGOs a role in monitoring its implementation¹. The Committee encourages NGOs to submit reports, documentation or other information in order to provide it with a comprehensive picture of how the Convention is being implemented in a particular country.

The Committee on the Rights of the Child seeks specific, reliable, and objective information from NGOs in order to obtain a serious and independent assessment of the progress and difficulties encountered in the implementation of the Convention. This is due to the fact that the reports submitted by national governments tend to present their legislative frameworks but often do not consider whether or not such laws or policies have implemented. It can be difficult for the Committee to obtain a complete picture of the situation of children in the concerned State. NGO information, therefore, is an essential element in the monitoring process.

What kind of information does the Committee seek from NGOs?

In order to effectively monitor implementation of the Convention in a particular country, the Committee seeks information related to the wide range of issues covered by the Convention. The Committee also is interested in receiving information on areas of concern not covered, or, in the opinion of the NGOs, covered incorrectly or misleadingly² by governmental reports to the Committee. Furthermore, due to particular national contexts, NGOs could ask the Committee to maintain confidentiality related to the information that they provide in this regard.

NGOs, in their various roles as service providers, or as research and advocacy organizations, have first-hand experience of the situation of children in a specific country, and of the nature of human rights violations they suffer. Governments inevitably may be tempted to divert attention to, or worse yet to deny, problem areas. Likewise, governments often report on policies and measures adopted, but more rarely on actual practice and implementation.

¹ Under Article 45(a) of the Convention on the Rights of the Child, the Committee may invite specialized agencies, UNICEF, and “other competent bodies” to provide expert advice on the implementation of the Convention. The term “other component bodies” include non-governmental organizations.

² NGOs that wish to provide input on the situation of children’s rights in their respective country can either follow the same format as described above or can choose to focus on one or more of these issues - e.g., “basic health and welfare”.


Safeguarding the Right to Health of Children Living with HIV and HIV/TB co-Infection

What about the child’s right to health of children living with HIV and HIV/TB co-infection?

The Convention on the Rights of the Child includes the obligation for national governments to protect and promote the child’s right to health. Article 24 of the CRC, in fact, states:

1. States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.

2. States Parties shall pursue full implementation of this right and, in particular, shall take appropriate measures:
   (a) To diminish infant and child mortality;
   (b) To ensure the provision of necessary medical assistance and health care to all children with emphasis on the development of primary health care;
   (c) To combat disease and malnutrition, including within the framework of primary health care, through, inter alia, the application of readily available technology and through the provision of adequate nutritious foods and clean drinking water, taking into consideration the dangers and risks of environmental pollution;
   (d) To ensure appropriate prenatal and postnatal health care for mothers;
   (e) To ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents;
   […]

3. States Parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children.

4. States Parties undertake to promote and encourage international cooperation with a view to achieving progressively the full realization of the right recognized in the present article. In this regard, particular account shall be taken of the needs of developing countries.
The CRC Committee is very interested to learn how well national governments fulfil this obligation. However, most governments do not give information about children living with HIV and with HIV/TB co-infection - especially with regard to early diagnosis and access to testing and treatment - and/or on implementation of programmes to prevent transmission of HIV from mother to child (PMTCT).

Therefore, your organization could play a key role in identifying and reporting to the Committee any obstacles to early diagnosis and treatment experienced by children living with HIV or HIV/TB co-infection and on the issues related to PMTCT in your country.

**How can your organization and Caritas Internationalis be involved in this process in order to protect the rights of children living with HIV or HIV/TB co-infection in your country?**

In view of its ECOSOC status granted by the United Nations\(^3\), Caritas Internationalis could present and explain your report to the Committee on the Rights of the Child. Hopefully, such advocacy will convince the Committee to make recommendations to the respective national government on how to improve and prolong the lives of their HIV-positive children.

With your help, Caritas Internationalis is collecting information on one or more of the following areas:

- A comprehensive description of your experience in responding to the needs of HIV-positive children in your country, included goals, targets, successes, and challenges;
- Data on children living with HIV and AIDS and HIV/TB co-infection and on mother-to-child transmission, such as: number of children living with HIV; number of children in need of treatment or having access to diagnosis and treatment; number of women living with HIV and those having access to HAART and PMTCT;
- Obstacles encountered in achieving the child’s right to health due to legislative measures or the failure to implement national legislation;
- Your recommendations, based on direct experience, on how the problems could be solved.

Please complete the attached questionnaire (see addendum) and send your response to Rev. Msgr. Robert J. Vitillo (rvitillo@caritas-internationalis.com) and Mr. Stefano Nobile (snobile@caritas-internationalis.com) before the deadline scheduled in the cover email.

Caritas then will forward to the Committee on the Rights of the Child the important information, experience, and insight provided by your organization. This material will

---

\(^3\) The Economic and Social Council (ECOSOC) General Consultative Status is reserved for those large international NGOs whose area of work covers most of the issues on the agenda of ECOSOC. It allows to engage in advocacy before most agencies and offices of the United Nations.
will help the Committee to obtain an independent assessment of the progress and difficulties encountered in the implementation of the Convention. In addition, it will be used by the Committee to make recommendations to the respective national governments on how to improve and prolong the lives of HIV-positive children; of children co-infected with HIV and TB; and on measures to prevent the transmission of HIV from and HIV-positive mother to her child. Your government, in turn, will be expected to take action on those recommendations in order to make progress on attainment of the right to health by children in your country.
States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.

You CAN Make a Difference! You CAN Make a Difference! You CAN Make a Difference! You CAN Make a Difference!

QUESTIONNAIRE

Fill it out and send it back to Rev. Msgr. Robert J. Vitillo (rvitillo@caritas-internationalis.com) and Mr. Stefano Nobile (snobile@caritas-internationalis.com).
Questionnaire

Organization:

Name of Specific Programme (Service):

Complete Address:

Name and Surname of Contact Person:

Email Address:

Direct Telephone Number:

Direct Fax Number:

1. Please provide a detailed description of programme(s) and service(s) offered by your organization to promote and facilitate the right to health that should be attained for all children. Please specify the level of action (local, regional, or national).

2. Please provide the most updated data related to the above-mentioned programme(s), specifying the year during which you collected them.

3. To your knowledge, do these data differ from these provided by your government to the United Nations and other international organization?

4. Please provide detailed information related to funding sources for the above-mentioned programme(s).

5. In relation to these programme(s), is your organization engaged in networking with other organizations with similar mission/activity? If yes, please identify and describe the activity of such networks.

6. In your experience, are there any obstacles to the enjoyment of the child’s right to health being caused by laws or governmental policies where your programme(s) are in operation? In this regard, topics of particular interest are access to testing and treatment for HIV-positive children and children living with HIV/TB co-infection, and/or Prevention of Mother-to-Child Transmission of HIV (PMTCT). Please provide detailed information about any obstacles that you identify.

7. Please identify any national trends, policies, or laws, that, in your opinion, are undermining the full realization of the child’s right to health. Please
remember that article 24 of the UN Convention on the Right of the Child refers to, among others, such factors as: access to health care services; infant and child mortality; medical assistance; food and drinking water security; application of readily available technology; health care for mothers; health education for all; international cooperation.

8. Finally, please provide any suggestions and/or recommendations, based on your direct experience, that could improve attainment of the child’s right to health in your country, and, in particular, access to testing and treatment for HIV-positive children and children living with HIV/TB co-infection, and improved uptake of Prevention of the Mother-to-Child Transmission (PMTCT).

NOTE WELL: Please advise if you wish to maintain confidentiality with regard to the source of the information that you are sharing with us.

Thank you!