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Consideration of reports of States parties

List of issues in relation to the combined third to fifth periodic reports of Ghana

Addendum

Replies of Ghana to the list of issues*


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Abbreviations

ACERWC	African Committee of Experts on the Rights and Welfare of the Child
ACRE	Action for Children's Rights
ACRWC	African Charter on the Rights and Welfare of the Child
AGD	Attorney-General's Department
ARH	Adolescent Reproductive Health
ARHP	Association of Reproductive Health Professionals
ART	Anti-Retroviral Therapy
ARV	Anti-Retrovirals
BDR	Births and Deaths Registry
BECE	Basic Education Certificate Examination
CAMFED	Campaign for Female Education
CBOs	Community-Based Organisations
CCG	Christian Council of Ghana
CFWP	Child and Family Welfare Policy
CHPS	Community-based Health Planning and Services
CHRAJ	Commission for Human Rights and Administrative Justice
CLFZS	Child Labour Free Zones
CMA	Central Management Agency
CPRP	Community Population Registry Programme
CSOs	Civil Society organisations
DA	District Assembly
DACF	District Assemblies Common Fund
DCD	Department of Community Development
DHS	Demographic and Health Survey
DOC	Department of Children
DOVVSU	Domestic Violence and Victim Support Unit
DSW	Department of Social Welfare
ECCD	Early Childhood Care and Development
EI	Executive Instrument
FA	Finance and Administration
FAQ	Frequently Asked Question
FBOs	Faith Based Organisations
FCUBE	Free Compulsory Universal Basic Education
FGM/C	Female Genital Mutilation/Cutting
GAC	Ghana AIDS Commission
GER	Gross Enrolment Ratio

GES	Ghana Education Service
GETFUND	Ghana Education Trust Fund
GEU	Girls Education Unit
GHS	Ghana Health Service
GLAS	Ghana Legal Aid Scheme
GLSS	Ghana Living Standard Survey
GNECC	Ghana National Education Campaign Coalition
GRB	Gender Responsive Budgeting
GRB	Ghana Refugee Board
GRSCDP	Gender Responsive Skills and Community Development Project
GSFP	Ghana School Feeding Programme
GSGDA	Ghana Shared Growth and Development Agenda
HMIS	Health Management Information System
HRAC	Human Rights Advocacy Centre
HTC	HIV Testing and Counselling
IE&C	Information, Education & Communication
IGF	Internally Generated Funds
ILO	International Labour Organization
IPEC	International Programme on the Elimination of Child Labour
IRAD	Information, Research and Advocacy Division
JfCP	Justice for Children Policy
JHS	Junior High School
JJPG	Juvenile Justice Project Ghana
LEAP	Livelihood Empowerment against Poverty
LESDEP	Local Enterprise and Skills Development Programme
LIPW	Labour Intensive Public Works
MDAs	Ministries Departments and Agencies
MDGs	Millennium Development Goals
MESP	Ministry of Education, Science and Sports
MESW	Ministry of Employment and Social Welfare
MICS	Multiple Indicator Cluster Survey
MLGRD	Ministry of Local Government and Rural Development
MMDAs	Metropolitan, Municipal and District Assemblies
MoGCSP	Ministry of Gender, Children and Social Protection
MOH	Ministry of Health
MOJ	Ministry of Justice
MOWAC	Ministry of Women and Children's Affairs
MTCT	Mother to Child Transmission
NACP	National Aids Control Programme

NACS	National Assessment and Counselling Support
NCPD	National Council on Persons with Disability
NDPC	National Development Planning Commission
NGOs	Non-Governmental Organisations
NHIS	National Health Insurance Scheme
NTS	National Targeting System
NVTI	National Vocational Training Institute
NYEP	National Youth Employment Programme
OHCS	Office of the Head of Civil Service
OVC	Orphans and Vulnerable Children
PEP	Post-exposure Prophylaxis
PLHIV	People Living with HIV/AIDS
PMTCT	Prevention of Mother to Child Transmission of HIV
PNC	Pre-natal Care
PP	Programmes and Projects
PPAG	Planned Parenthood Association of Ghana
PPME	Programmes Projects Monitoring and Evaluation
PTA	Parents-Teachers Association
PTR	Pupil-Teacher Ratio
PWD	Persons with Disability
RCH	Reproductive and Child Health
SEIP	Secondary Education Improvement Project
SEN	Special Educational Needs
SGBV	Sexual and Gender Based Violence
SPED	Special Education Division of the Ghana Education Service
TB	Tuberculosis
UNCRC	United Nations Committee on the Rights of the Child
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VAT	Value-Added Tax
WFCL	Worst Forms of Child Labour
WFP	World Food Programme

Foreword

1. In May 2012, Ghana submitted its consolidated third to fifth periodic reports (CRC/C/GHA/3-5) to the Committee on the Rights of the Child.
2. After reviewing the report, the Committee made some observations and raised them as a list of issues (CRC/C/GHA/Q/3-5) to be answered by the Government of Ghana. This report provides concise responses to the matters raised by the Committee.
3. This report does not only seek to respond to issues raised by the Committee, but also highlights significant efforts made in addressing important needs and concerns of children in Ghana within the reporting period.
4. The report provides comprehensive insights into steps taken to strengthen the legislative framework, develop policies, implement plans and programmes aimed at enabling children to realize their potentials. In carrying out these important initiatives, we have had many challenges, we are however committed to creating a conducive environment in Ghana that addresses inequalities, discrimination, mainstreams gender and empowers children.
5. The Ministry of Gender, Children and Social Protection (MoGCSP) is poised to work with other stakeholders, including civil society to address the issues raised in the report.
6. It is hoped that the issues raised will be useful in guiding national policies, government and non-governmental development programmes, academic and other research work that relates to children's welfare and development.

Hon. Nana Oye Lithur

Minister: Gender, Children And Social Protection

Acknowledgements

7. The Ministry of Gender Children and Social Protection (MoGCSP) acknowledges all persons who in diverse ways contributed to drafting this Report. We are grateful to the Acting Director and staff of the Department of Children (DOC) of MoGCSP. We thank Honourable Nana Oye Lithur, our Minister for editing the Report.
8. MoGCSP would like to express its gratitude to the United Nations Children's Fund (UNICEF) for funding mock session, the validation workshop and printing of the Report, and participation of some Ghana's delegation to present the Report at the 69th Session of the Committee on the Rights of the Child.
9. Our final acknowledgement goes to all other officers at MoGCSP and other Institutions who have supported this process in diverse ways. We appreciate them for their dedication and hard work in ensuring the successful completion of the Report.
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Part I – Replies to the issues raised in paragraphs 1–16 of the list of issues (CRC/C/GHA/Q/3-5)

Introduction

12. The Government of Ghana recognizes issues that affect children as important so are considered as priority on government’s policy agenda. Pursuant to article 4 of the Convention on the Rights of the Child, Ghana has made great efforts to bring national legislation and other measures into full conformity with the principles and provisions of the Convention. This Report supplements the combined third to fifth periodic report by responding to questions posed by the Committee on the Rights of the Child, following its initial review of the Report.¹ The first part of this Report covers the responses to the questions. The second part provides information on current bills, legislation and institutions. The third part covers statistical data on specific areas requested by the Committee on the Rights of the Child.

Paragraph 1: Measures to guarantee implementation

13. Guided by general comment No. 5 (2003) on general measures of implementation of the Convention on the Rights of the Child, issued by the Committee on the Rights of the Child, the Government has undertaken the following in respect of ratification of key international human rights treaties, legislative measures, administrative and other measures, and publicising the rights protected in the Convention:

14. Ratification of key instruments: Ghana has ratified the following international human rights instruments:

- Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict;
- Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography;
- Optional Protocol to the Convention against Torture;
- Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime;

¹ See Committee on the Rights of the Child, list of issues in relation to the combined third to fifth periodic reports of Ghana (CRC/C/GHA/Q/3-5).

- International Convention for the Protection of All Persons from Enforced Disappearances;
- Convention on the Rights of Persons with Disabilities.

15. Ghana has also begun the process of ratifying the Hague Convention of 29 May 1993 on Protection of Children and Co-operation in Respect of Intercountry Adoption. The State also signed the Optional Protocol to the Convention on the Rights of the Child on a communications procedure in 2013.

16. Legislative Measures: Ghana has also strengthened its legal framework for the protection of children by enacting these laws:

- Human Trafficking Act, 2005 (Act 694);
- Disability Act, 2006 (Act 715);
- Whistle Blowers Act, 2006 (Act 720);
- The Domestic Violence Act, 2007 (Act 732);
- Criminal Code (Amendment) Act, 2007;
- Criminal Offences (Amendment) Act, 2012 (Act 849);
- The Education Act, 2008 (Act 778);
- The Ghana National Commission On Children (Repealed) Act, 2006 (Act 701).

17. Other Bills which affect children and which are at various stages of the legislative process include:

- Property Rights of Spouses Bill, 2009;
- Affirmative Action Bill, 2009;
- Intestate Succession (Amendment) Bill, 2009;
- Law Reform Commission Bill, 2010.

18. New Regulations:

- Legislative Instrument (LI) on Human Trafficking Act 694;
- Legislative Instrument (LI) on Domestic Violence Act 732.

19. Administrative and Other Measures: The policy framework for child protection and welfare has also been strengthened with the adoption of a Child and Family Welfare Policy (CFWP), which will guide the establishment of a child and family welfare system, as the foundation of child protection in Ghana. The CFWP is complemented by a Justice for Children Policy (JfCP), currently being developed, to guide the interaction of children with the justice system. Other policies adopted which have a bearing on children include:

- Health Sector Gender Policy (2009);
- National Policy and Plan of Action on Domestic Violence (2009–2019);
- National Human Resource Development Policy (2011);
- National Employment Policy (2012–2016);
- National HIV/AIDS, STI Policy (2013);
- National Policy Guidelines on Orphans and Other Children made Vulnerable by HIV/AIDS;
- Early Childhood Care and Development Policy (2004);

- Gender and Children Policy (2004);
- National Disability Policy (2000);
- Adolescent Reproductive Health Policy (2000);
- Child Labour Policy;
- ICT in Education Policy, (2006);
- Technical and Vocational Education and Training (TVET) Policy;
- Inclusive Education (IE) and Special Educational Needs (SPED) Policy;
- Tertiary Education Policy;
- Pre-Tertiary Teacher Professional Development and Management;
- Capitation Grant (2005);
- Free School Uniform and Exercise Book Programme/Policy (2009);
- Ghana School Feeding Programme, 2005;
- National Gender Policy;
- Free Mass Transit Ride for School Children (2009);
- The Education Strategic Plan (ESP) 2010–2020;
- Under-5 Child Health Policy (2007–2015);
- National Neo-natal Health Care Strategy (2014–2018).

20. Policy Fairs: The Government of Ghana instituted Policy Fairs in 2010 to showcase its policies, legislation and plans to the public. It has become one of the avenues through which Government provide information to the public regarding the discharge of its responsibilities regarding laws and policies.

21. Key Programmatic Interventions: Notable successes chalked by Ghana in education, social protection and health are noted below. Other interventions are presented in this Report under the respective questions posed by the Committee:

- Ghana achieved 100% Gross Enrolment Ratio (GER) in 4 out of the 10 Administrative Regions meeting the MDG Goal on education in 2010 ahead of the 2015 deadline. The 6 other regions are below the national average but working steadily towards achieving the 100% mark. The success has been due to initiatives such as the Capitation Grant, School Feeding Programme and Free School Uniform Programme.
- The Livelihood Empowerment against Poverty (LEAP) has been the nation's flagship social intervention programme. MoGCSP provided cash grants to a total of 411,990 beneficiaries across the country under the programme, of which 131,348 are children. Of the 169,790 vulnerable persons on the LEAP Register, 60,294 are children. Out of the total payment, 7,616 beneficiary households in 9 districts and 7 Regions received electronic payments of the LEAP Grants in 3 piloted ecological zones for the purposes of ensuring timely and efficient transfer of cash to beneficiaries. The pilot is completed and electronic payments will be rolled-out for all beneficiary households in 2015.

- Prevention of Mother-To-Child Transmission of HIV (PMTCT) services have been integrated into sexual and reproductive health services.² This has ensured wider access to women in reproductive ages. It is also recorded that, in 2012, 70% of all HIV-positive pregnant women received Anti-Retroviral (ARV) medication to prevent MTCT, an increase from the 2011 coverage of 50%. The 2013 Global AIDS Report further notes that in Ghana, the risk of a woman living with HIV transmitting the disease to her child has reduced from 31% in 2009 to 9% (7%–11%) in 2012.³ In addition, the Report finds that in Ghana, the coverage of services for women living with HIV to prevent MTCT increased dramatically from 32% (27%–38%) to more than 90% in 2012. Worthy of note is also the fact that there is a 76% reduction in new infections among children.⁴ Registration of children for the NHIS has also been delinked from that of their parents.
- The 1992 Constitution provides that basic education shall be free, compulsory and available to all.⁵ Secondary education—including technical and vocational education—shall be generally available, accessible and progressively free. Section 8 of the Children’s Act also guarantees to every child, the right to education.⁶ In this regard, Government initiated the Free, Compulsory, Universal, Basic Education (FCUBE) Programme in 1996 to give effect to this constitutional provision. The FCUBE programme has been enhanced through the National Education Reform Programme initiative in 2007 and the passage of the Education Act, 2008 (Act 778). The Government of Ghana is responsible for funding the FCUBE Programme. Accordingly, Act 778 requires District Assemblies to build, equip and maintain schools, and support parents of needy children with a poverty allowance from the District Assemblies Common Fund (DACF). Other initiatives by Government in furtherance of FCUBE include the Capitation Grant, and the Ghana Education Trust Fund (GETFUND). The DACF is financed by 5% of the total national revenue generated, while the GETFUND is obtained from 2.5% of the prevailing Value Added Tax (VAT) rate.

22. Strengthened institutional framework: In 2013, the Ministry of Gender, Children and Social Protection (MoGCSP) was created by an Executive Instrument (E.I.), to succeed the Ministry of Women and Children’s Affairs (MOWAC) established in January 2001 by E.I.8. The new Ministry was thus a merger of MOWAC, the Department of Social Welfare (DSW), the National Council on Persons with Disability (NCPD) and the Social Protection Division of the Ministry of Employment and Social Welfare (MESW). MoGCSP is mandated to coordinate and ensure gender equality and equity, promote and protect the welfare and rights of children, the vulnerable and excluded and persons with disability, and empower them to fully participate in national development. The functioning of the Ministry is discussed in further detail in the response to question 3 on the mandate of MoGCSP. The Department of Children (DOC) is the main coordinating agency under MoGCSP with the mandate to coordinate child rights implementation in Ghana. It plays a significant leading role in the effective formulation and implementation of child-related policies, as well as the enforcement of child-related legislations.

23. Publicising Legislation: Translated versions of some Acts have been produced and distributed nationwide as resource materials in various programmes at national, regional and district levels. Child-friendly and comic versions of The Children’s Act, The Human

² GAC, (2013) “Achievements and Challenges with respect to MDG 6”, p. 3.

³ UNAIDS (2013), p. 37.

⁴ Ghana AIDS Commission (2013), p. 3.

⁵ Article 25(1)(a).

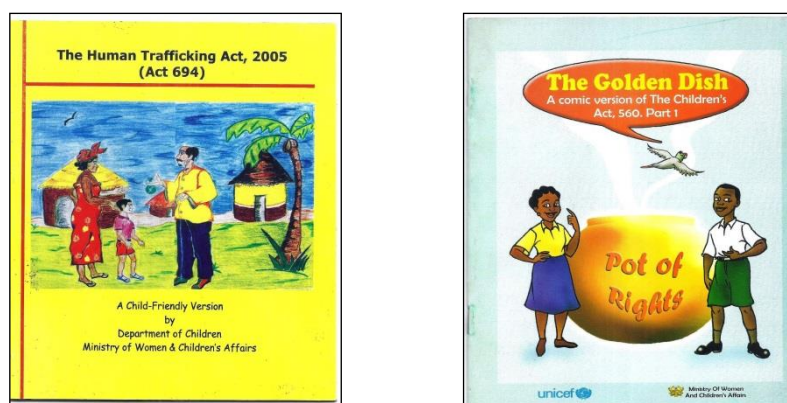
⁶ Section 6(2).

Trafficking Act, the Domestic Violence Act and the Disability Act have been produced for the benefit of children. Some examples are illustrated in figure 1 below. About 5,000 copies each of these laws have been distributed throughout the country by the regional offices of the Department of Children (DOC) to academic institutions, libraries and selected child-focused institutions.

24. **Media Programmes:** Media programmes are undertaken to explain contents of legal texts to make legislations widely known to community members including traditional leaders, district assembly members, parents and children.

25. **Strengthening the judiciary:** The Judiciary has sought to bridge the gap between law and practice in response to one of the concerns raised by the Committee on the Rights of the Child. There has also been an emphasis on training of members of the Judiciary in a bid to sensitise judges and magistrates to equip them with requisite skills in the discharge of their duties focusing on child rights issues. Judges and magistrates have undertaken study tours to other jurisdictions to observe best practice on child rights implementation. There is a plan to construct a Juvenile Justice Centre specifically to deal with juvenile cases be it psychological, economic etc. which relate to the proper growth of the child. The Judiciary has already set up specialized domestic violence courts in a bid to promote the rights of women and children. This approach by the Judiciary would create a “one stop shop” for child rights issues. It will also demystify its role in society thus bridging the gap between populace and the Judiciary.

Figure 1
Child-friendly versions of selected legislation



Paragraph 2: Content of key national policies on children

26. Ghana Shared Growth and Development Agenda (2014–2017) (GSGDA) II: The GSGDA II is the fifth in the series of medium-term national development policy frameworks prepared over the past two decades. It is the operational framework of the President’s Coordinated Programme of Economic and Social Policies, 2014–2020 – An Agenda for Transformation. The President therefore submitted GSGDA II to Parliament in November 2014 in fulfilment of Article 36(5) of the Constitution, which requires him to present such a programme within two years of being in office.

27. The GSGDA II is anchored on 7 priority themes, namely: Ensuring and sustaining macroeconomic stability; Enhancing competitiveness of Ghana’s private sector; Accelerated agriculture modernisation and sustainable natural resource management; Oil and gas development; Infrastructure and human settlements development; Human

Development, Productivity and Employment; and Transparent, Responsive and Accountable Governance.

28. The direct focus on children in the GSGDA II is captured under Key Focus Area 10 on “Child Development and Protection”⁷ under theme 6 on Human Development, Productivity and Decent Work. The key strategies for children include the following:

- Promote advocacy and create public awareness on the rights of children;
- Formulate and implement key policies and appropriate programmes to enhance child protection and development;
- Mainstream children’s issues in development planning at all levels especially those of children with special needs;
- Enhance capacity to enforce laws protecting children;
- Creating public awareness on children’s rights;
- Improve human, material and financial resources for child development, survival and protection;
- Review and implement the Early Childhood Care and Development Policy;
- Promote alternative forms of education, including transitional programmes to mainstream out-of-school children, particularly in the most deprived areas for children withdrawn from the worst forms of child labour (WFCL);
- Promote alternative forms of education, including transitional programmes to mainstream out-of-school children, particularly in the most deprived areas for children withdrawn from the WFCL;
- Establish clear institutional arrangements for identification, withdrawal, rehabilitation and social integration of children engaged in unconditional WFCL;
- Promote and implement programmes and policies on integrated area-based approaches towards child labour-free zones (CLFZS);
- Provide adequate education facilities, health care, nutrition and recreation to enhance children’s physical, social, emotional and psychological development;
- Establish a well-resourced continuum of care services at all levels for prevention of response of and reintegration of victims of violence abuse and exploitation;
- Develop, adopt and implement National Child Protection Policy.

29. Child and Family Welfare Policy (CFWP): The Government adopted the Child and Family Welfare Policy (CFWP) on 19th February 2015 through a Cabinet approval. The CFWP seeks to establish a well-structured and coordinated Child and Family Welfare System that promotes the wellbeing of children, prevents abuse and protect children from harm. The overall goal of the CFWP is to establish an effective child and family welfare system. The main objectives of the Policy are to:

⁷ Government of Ghana (National Development Planning Commission (NDPC)), *Medium-Term National Development Framework: Ghana Shared Growth and Development Agenda* (2013), p. 108–109, 238–239. Available at www.mofep.gov.gh/sites/default/files/docs/mdbs/2010/final_draft_mtdpf.pdf (Last accessed on 7 April 2015).

- Design child and family welfare programmes and activities to more effectively prevent and protect children from all forms of violence, abuse, neglect and exploitation;
- Ensure effective coordination of the child and family welfare system at all levels;
- Empower children and families to better understand abusive situations and make choices to prevent and respond to situations of risk;
- Build capacity of institutions and service providers to ensure quality of services for children and families in urban and rural areas;
- Promote reform of existing laws and policies to conform with the Child and Family Welfare System;
- Ensure provision of adequate human, technical and financial resources required for the functioning of the Child and Family Welfare System at all levels;
- Design an effective monitoring and evaluation system for the implementation of the Policy.

30. Justice for Children Policy (JfCP): The Justice for Children Policy (JfCP) seeks to establish a well-structured and coordinated Justice for Children System that promotes the wellbeing of children, prevents abuse, protects children from harm and promotes justice for children. The JfCP focuses on all categories of children in contact with the justice system as victims of crimes, witnesses, offenders and other crimes involving children. The Policy also addresses both criminal and civil cases involving children. A series of national consultations were held throughout 2014, leading to the first draft of the Policy being completed in February 2015. A National Advisory Committee overseeing the Policy's development reviewed the draft in March 2015. The Policy is expected to be adopted and approved by Cabinet in June 2015.

31. The policy statement is guided by internationally recognized principles, as well as values, beliefs and practices specific to the country, ensuring that the Justice System is "fit" for the context of Ghana. The overall goal of the JfCP is to reform the existing child justice system to ensure that all children enjoy equal access to quality justice through the formal and community justice systems. The JfCP has the following as its objectives:

- Prevent juvenile offending, and recidivism;
- Strengthen programmes for rehabilitation;
- Strengthen formal and community justice system to enhance access to justice with children in conflict with the law;
- Ensure the protection for children as witnesses and victims of crimes;
- Ensure protection for children involved in family and other civil proceedings;
- Guide the reform of laws, policies and procedures to improve access to justice for children and to inform the necessary changes to the regulatory framework;
- Ensure the provision of financial and human resources for implementation of the policy.

32. Mechanisms for Monitoring and Evaluation: The National Development Planning Commission (NDPC) is responsible for the overall planning, monitoring and evaluation of all government policies and programmes. In addition, various policies and programmes being implemented by Ministries, Departments and Agencies also have monitoring and evaluating components, which are monitored by the various Programmes Projects Monitoring and Evaluation (PPME) Directorates/Divisions. The MoGCSP is specifically

responsible for monitoring the implementation of the CFWP and JfCP. Periodic national surveys such as the Multiple Indicator Cluster Survey (MICS), Demographic and Health Survey (DHS), and Ghana Living Standards (GLSS) Survey are all instruments used to evaluate progress made by various sectors. MoGCSP is also responsible for periodic reporting to the Committee on the Rights of the Child and the African Committee of Experts on the Rights and Welfare of the Child (ACERWC) on the implementation of the Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child (ACRWC).

Paragraph 3: Mandate and capacity of the Ministry of Gender, Children and Social Protection

33. Mandate of MoGCSP: As previously noted, the MoGCSP was established by E.I 1 of 2013 to succeed the MOWAC with a three-fold mandate, namely: ensure gender equality and equity; promote the welfare and protect the rights of children; and empower the vulnerable, excluded, aged and persons with disability for sustainable national development. The Ministry's mandate is implemented in the light of the following objectives:

- Promote Gender Mainstreaming and Gender Responsive Budgeting (GRB) in MDAs and MMDAs through capacity building;
- Improve the socio-economic status of the vulnerable and the excluded through targeted interventions;
- Enhance evidence based decision making on gender equality, the empowerment of the vulnerable and excluded by collecting disaggregated data;
- Protect and promote the development and the rights of children, the vulnerable and the excluded through awareness creation and effective implementation of National and International Policy frameworks and legislations;
- Assess progress on implementation of gender related programmes and projects and evaluate policy outcomes and impacts through effective monitoring and evaluation framework to provide inputs for gender, children and social protection policy review and planning; and
- Integrate and coordinate the rights of the vulnerable, the excluded and persons with disabilities into National development through social protection programmes.

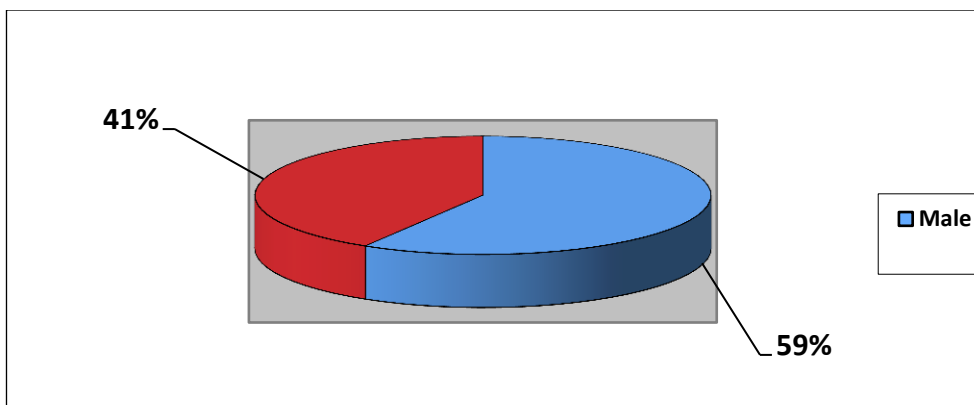
34. To ensure the effective implementation of its expanded mandate, MoGCSP has engaged the services of the Management Services Division (MSD) in the Office of the Head of Civil Service (OHCS) to undertake a restructuring exercise involving the development of a new organisational structure and performance management framework to improve the operations of MoGCSP. The Ministry has also developed an "Agenda for Change" document, which sets out its new vision and direction and how it fits into the national developmental agenda. Currently, MoGCSP is developing a five-year Strategic Development Plan. These measures are collectively expected to enhance staff performance and delivery on MoGCSP's outputs and enable it to meet its targets. A new organogram has also been developed to facilitate the revision of job descriptions for staff and ensure that each directorate, department and division of the Ministry has competent staff to carry out its functions.

35. Capacity of MoGCSP to coordinate child rights implementation: The Department of Children (DOC) is the main coordinating agency under MoGCSP with the mandate to coordinate child rights implementation in Ghana. It plays a significant leading role in the

effective formulation and implementation of child-related policies, as well as the enforcement of child-related legislations. In the area of child rights promotion, DOC undertakes activities aimed at fostering behaviour change of all actors in charge of child welfare and protection at the national, regional and district levels. Information management and documentation of relevant child-related information is key to DOC’s work. In line with this, the DOC also carries out research, coordinates the collation and compilation of all relevant child-related information, which allows periodic evaluation of the status of child rights promotion in the country.

36. The DOC has three main organisational divisions. These are: Programmes and Projects (PP), Information Research and Advocacy (IRAD), and Finance and Administration (FA). The DOC also has regional offices in all the ten administrative Regions, but not decentralised at the districts. The current staff strength of the DOC is 70, comprising 41 (58.6%) males and 29 (41.4%) females as shown in figure 2 below. The national office has 42 staff and the regions, 28. The DOC’s major sources of finance are the Government, private sector, international social partners and Internally Generated Funds (IGF). The main beneficiaries of the DOC’s programmes are children.

Figure 2
Distribution of DOC Staff by sex



37. Even though the DOC has offices at the national and regional levels, it does not have district offices, and this poses a challenge to effective coordination, monitoring and evaluation of child rights implementation at the local level. Owing to this administrative incapacity, the DOC relies on the Ministry of Local Government and Rural Development (MLGRD) through the various District Assemblies to implement child rights at the local level.

Paragraph 4: Elimination of de facto discrimination against children in vulnerable situations

38. Girls: In response to girls falling behind boys in access to education, the Ministry of Education established a Girls’ Education Unit (GEU) within the Basic Education Division of the Ghana Education Service (GES). The GEU gave new impetus to the removal of barriers to education for girls. The GEU has a Girls’ Education Officer in every Region and District in the country.⁸ Some of the interventions of the GEU include the provision of

⁸ United Nations Girls Education Initiative (UNGEI), “Ghana”. [Online] Available at www.ungei.org/infobycountry/ghana.html (Last accessed on 16 April 2015).

scholarships and bicycles to girls, training and posting of female teachers to rural areas, promoting girls' clubs and camps, capacity-building for Regional and District Girls' Education Officers, and the publication of a national status report on gender parity in education.⁹ The DSW collaborates with the GEU in respect of programmes for enhancing girl's access to education.

39. The "Take Home Ration" initiative by the Ghana Education Service (GES) and the World Food Programme (WFP) in the three northern regions of the country has helped to bridge the gender disparity in education in deprived communities. Currently, food rations have been provided to 90,000 girls in the Upper West, Upper East and Northern Regions. Due to the initiative, the Upper East and Upper West Regions of the country were the first two out of the ten Regions to attain gender parity in education in Ghana. UNICEF and Plan Ghana also have operational districts where they provide all forms of assistance to entice girls to school.

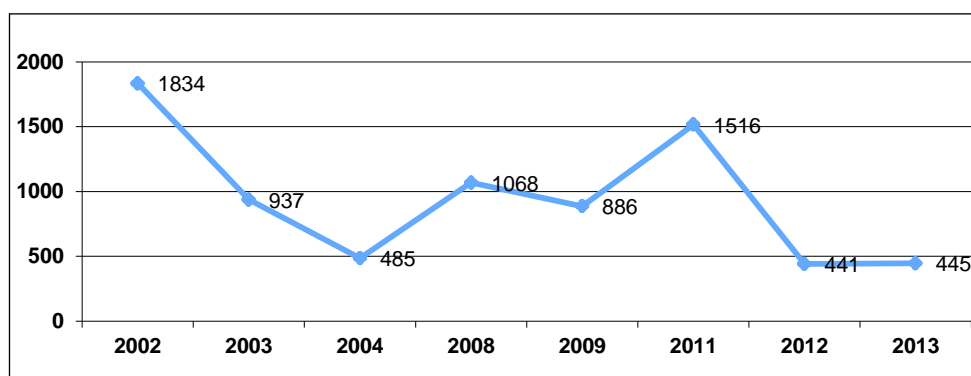
40. The Ministry of Education scholarship package under the Secondary Education Improvement Project (SEIP) approved by Parliament on 3rd July, 2014, will also grant 10,400 Senior High School children scholarships to complete their schooling, beginning 2015. Of this number, 60% will be girls and this is to ensure they are supported to remain in school and complete their secondary education successfully.

41. Other initiatives include the Participatory Approach to Student Success, which granted a total of 15,700 girls from Junior High School (JHS) educational scholarships. The Gender Responsive Skills and Community Development Project (GRSCDP), which was run by MoGCSP with support from the African Development Bank, also granted scholarships to 668 girls during the 2011/2012 and 2012/2013 academic years. The GRSCDP also presented equipment to government vocational institutions in 59 districts, including 25 Department of Community Development-run institutions and 8 institutions under the National Vocational Training Institute (NVTI). 53,486 girls are receiving bursary support from the Campaign for Female Education (CAMFED), an NGO. The comprehensive bursary support covers everything from school fees, uniforms, shoes, books to pencils and bags for the full duration of the girls' education.

42. Children with Disabilities: The most prevalent child disabilities in Ghana are mobility, sight, speech and hearing difficulties. Data from the DSW indicates a reduction in the number of registered children with disabilities from 1,834 in 2002 to 937 in 2003, and 485 in 2004 and 1,068 in 2008. In 2009 it came down to 886, rose again to 1,516 in 2011, dropped to 441 in 2012 and rose to 445 in 2013 as presented in Figure 3 below.

⁹ Uniterra, "Girls' Education Unit of the Ghana Education Service – GES" [Online] Available at www.uniterra.ca/who-are-we/partners-profiles/GES/ (Last accessed on 16 April 2015).

Figure 3
Number of registered children with disabilities (2002–2013)



43. The Special Education Division of the Ghana Education Service (SPED) has a mandate of providing equitable educational opportunities for children with special needs and disabilities. There are 13 special schools and 24 units (integrated schools) for children with intellectual disabilities, and these are run by SPED. Some private institutions such as the New Horizon basic school in Accra also exist to assist government to provide learning opportunities for children with special needs.

44. The Government has also directed the MLGRD to allocate 5% of the District Assembly Common Fund to support persons with disabilities and other vulnerable children in every district with basic assistance.

45. Children of Asylum Seekers: The Ghana Refugee Board (GRB) is the government agency in charge of refugee and asylum-seeking issues. Under the 1992 Ghana Refugee Law, PNDC Law 305 D, the GRB is mandated to receive and consider applications for refugee status; register and keep a register of persons (including children) recognized as refugees, seek co-operation with non-governmental organizations on matters relating to refugees, assist in seeking employment or education for refugees and members of their families, and also endeavour to ensure the provision of adequate facilities, advice and services for the reception and care of refugees in Ghana.

46. In the last three years, the GRB has ensured that all refugee children granted refugee status and children of asylum-seekers are issued identity cards (in the prescribed form), Residence Permit, a United Nations Travel Document (where appropriate) and other relevant documents respectively in a timely and efficient manner. It has also taken several steps to eliminate de facto discrimination in various forms against children of refugees and asylum seekers in the various refugee settlements as well as the urban communities. These efforts include the provision of educational and health facilities, and addressing cases of Sexual and Gender Based Violence (SGBV) against refugees in the country.

47. The GRB has collaborated with the Christian Council of Ghana (CCG) to establish schools at the various refugee camps and in the host communities. For example, at the Egyeikrom Refugee Camp an 8-classroom facility with offices for basic school and additional 2-classroom block for nursery school has been built. A 5-unit classroom block has been constructed in the Egyeikrom community to absorb basic school graduates from the Camp school. Teachers' quarters have also been built in Egyeikrom for the teachers posted to the various schools in the refugee community. Other already established schools in the communities have also been renovated to support the community's efforts in accommodating the enrolment of some refugee children in the schools of the local communities.

48. Education for children of asylum seekers and refugees at the basic school level is free of charge. This is to ensure that they get access to education without any financial constraint and in accordance with Free Compulsory Universal Basic Education (FCUBE) Policy in Ghana. Learning materials provided to the school are equitably distributed among children and other charges like Parents Teachers Association (PTA) dues are also catered for with the support of funding from other partners like the Office of the United Nations High Commissioner for Refugees (UNHCR) and CCG.

49. Periodic training programmes are often organized for teachers to better understand the refugee situation so as to ensure better service delivery to these vulnerable children. As part of efforts to prevent discrimination against these children by their Ghanaian counterparts, they are made to sit and learn under the same roof with children from the host community and taught by the same teachers using the same curriculum.

Figure 4

The Ampain Refugee Camp School



50. Table 1 below presents some data on children of refugees and asylum-seekers from the Ampain and Egyeikrom Refugee Camps who have been enrolled in various schools between 2011 and 2014.

Table 1

Number of children enrolled in schools in selected refugee camps

<i>Camps</i>	<i>Academic Year</i>							
	<i>2011-2012</i>		<i>2012-2013</i>		<i>2013-2014</i>		<i>2014-2015</i>	
	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>	<i>Boys</i>	<i>Girls</i>
Ampain Refugee Camp	497	486	397	396	298	333	303	247
Egyeikrom Refugee Camp	172	162	172	162	174	162	168	171
Sub-Total	669	648	569	558	472	495	471	418
Total		1,317		1,127		967		889

Source: Ghana Refugee Board, 2015.

51. In relation to sexual and gender based violence (SGBV), the following have been done in collaboration and with the support of organisations, notably the CCG and UNHCR for refugee children and children of asylum-seekers:

- SGBV Committees are in place in the various camps and they embark on sensitization activities in the refugee communities;
- Child protection committees have also been established to respond to reports of child abuse at the community level;
- There are established Regional SGBV task forces in place for effective stakeholder management;
- There are referral mechanisms for cases of SGBV;
- There are also established reporting mechanisms including a helpline;
- GES teachers have been trained to be able to do case identification and response;
- The DSW has a strong presence in the various refugee settlements and provides the necessary assistance when needed;
- The assistance of the Legal Aid Board has been sought to provide legal assistance to victims of SGBV.

52. Children of Immigrants: Other separated and unaccompanied migrant children, when found, are handed over to the Ghana Immigration Service, who take them through the necessary immigration procedures and refer them to the DSW. The DSW collaborates with other agencies to provide shelter, food, counselling and other emotional support services to immigrant children. In extreme cases the DSW helps to settle these children in homes of fit persons.

53. Children Infected and/or Affected by HIV/AIDS: The Ghana AIDS Commission (GAC) and the National AIDS Control Programme (NACP) have carried out various interventions to address the needs of children and families infected and affected by HIV and AIDS.¹⁰

54. Children living and/or working on the streets: The street children phenomenon is still a problematic issue in Ghana. The causes of the phenomenon include rural-urban drift, poverty, difficult economic conditions prevailing in deprived areas, and harmful socio-cultural factors. Some of the initiatives undertaken to address the concerns of children in street situations include equipping them with livelihoods skills, re-integrating them into families, placing them in formal and non-formal education as well as granting them business training and micro-grant support to their families.

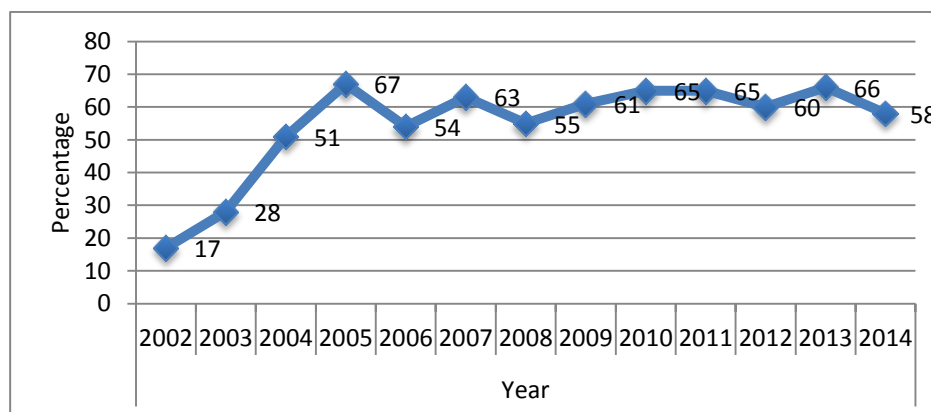
55. The Government has enjoyed significant partnership from Civil Society Organisations (CSOs), Non-Governmental Organisations (NGOs), Community-Based Organisations (CBOs), Faith Based Organisations (FBOs), and Traditional Authorities to address the problem through the identification, rehabilitation and reintegration of street children in the country.

¹⁰ The impact of HIV/AIDS is further addressed under the response to question 11 of this Report.

Paragraph 5: Measures to increase birth registration

56. The Births and Deaths Registry (BDR) reports that births registration has improved since the last decade at the national, regional and district levels since 2002 as indicated in figure 5 below.

Figure 5
Trends in birth registration (2002–2014)



Source: Births and Deaths Registry, August 2014.

57. The improvement in births registration from 17% in 2002 to 66% in 2013 was due to the following measures taken:

- Free registration of new born babies within twelve months of delivery;
- Recognition of a “Birth Registration Day” every 1st September and child health promotion weeks every May as annual calendar events to educate the public on the importance of registering infants;
- Intensification of public education at national, district and community levels to sensitize and also encourage Ghanaians to register their births and deaths;
- Production of Information, Education & Communication (IEC) materials (T-Shirts, stickers, leaflets, posters etc.) for community level sensitization;
- Involvement of the media in all publicity activities;
- Modernization of the births and deaths system; and
- Implementation of the “Community Population Registry Programme” (CPRP) to sensitize community residents, take baseline demographic data, build a population register, which is updated periodically.

58. The major challenges confronting the BDR in achieving its goals are: inadequate staff and logistics, lack of motivation on the part of the public to register births and deaths, low coverage of registration, inadequate funding of activities of the BDR, and the adherence to traditional and socio-cultural practices in certain parts of the country that tend to affect registration of children at birth. The following measures have thus been recommended to improve birth registration in Ghana:

- Availability of funds for programme implementation;
- Intensification of public education on the importance of births and deaths registration at the national, regional, district and community levels;

- Development of advocacy, information, education and communication materials for community level sensitization activities;
- Involvement of civil society organisations (including the media and non-governmental organisations) in promotion and publicity; and
- Improvement of the data registration system.

59. A draft Bill on Birth Registration has also been prepared by Government and is being considered by Cabinet for approval. The registration process has been documented under the Bill.

Paragraph 6: Prohibition of corporal punishment and protection from abuse

60. Addressing corporal punishment: The Government of Ghana has instituted measures to address corporal punishment in schools and other childcare institutions. The GES has developed a Code of Conduct for Teachers, which defines physical violence to include corporal punishment. Teachers are consequently prohibited from inflicting any form of corporal punishment on a child.¹¹ Schools in Ghana generally, have codes of conduct for pupils and students, which prescribe corrective measures when children misbehave. Although corporal punishment in schools is strictly prohibited, it has been observed that it is still being used in some schools, with the most common corrective measure being the use of the cane.

61. Consequently, within the last decade, the Ghana Education Service taken a number of significant measures aimed at abolishing corporal punishment within the context of Child Friendly School Programming. The Head-teachers' Handbook has been revised and teachers are being made aware of likely prosecution where children are brutalized.¹² UNICEF and other stakeholders of the educational sector including MoGCSP, the Domestic Violence and Victim Support Unit (DOVVSU) of the Ghana Police Service, the Commission for Human Rights and Administrative Justice (CHRAJ) and civil society groups such as the Human Rights Advocacy Centre (HRAC) and the Ghana National Education Campaign Coalition (GNECC) have also worked in partnership with government for the enforcement of the code of conduct for teachers which cautions teachers on the use of corporal punishment.

62. Since 2012, Government agencies including DOC, DSW and CHRAJ have held community forums aimed at sensitizing the population on the negative effects of corporal punishment on children. The DSW and DOC alone have had interactions with over 250,000 people in about 250 communities across the entire country on violence against children. There have also been prosecutions in some cases of corporal punishment.

63. The Child and Family Welfare Policy is also aimed at eliminating corporal punishment and other forms of abuse against children in both home and school settings. Violence against children is one of the priority areas of concern for the Policy.¹³ The key strategic interventions under the Policy to address violence and abuse of children include:¹⁴

- Strengthening of community structures (chiefs, queen-mothers, community leaders, religious leaders and faith-based organisations);

¹¹ GES, *Teachers' Code of Conduct: Rules of Professional Conduct for Teachers in Ghana* (2008).

¹² UNICEF (2013).

¹³ See Child and Family Welfare Policy, 2014 sect. 3.2.

¹⁴ Child and Family Welfare Policy, 2014 chapter 4.

- Early interventions to address child protection cases;
- Improvement in child and family welfare services;
- Empowering children and young people to understand situations of abuse and violence and report to the relevant authorities;
- Empowering families and communities to better understand abuse and violence against children and make better choices to prevent and respond to situations of risk.

64. Mechanisms to seek remedy and protection from perpetrators of abuse: There are mechanisms in place for children to seek remedies and protection from perpetrators of abuse and violence. Complaints procedures exist in schools to enable children to report cases of abuse. The DOVVSU, CHRAJ and other child rights NGOs also assist in the investigation and prosecution of cases of assault and grievous bodily harm committed against children. However, due to the cultural inhibition that prevents children from reporting adults, these mechanisms are hardly used. This makes cases of household abuse difficult to monitor. To improve collaboration among state institutions to address these and other challenges, DOVVSU and GEU of GES have signed a memorandum of understanding to, among others:

- Create a school culture and environment that supports “zero tolerance” for violence;
- Impart values and skills to pupils;
- Promote school-based/school community violence against girls’ prevention programmes in educational institutions in Ghana; and
- Strengthen reporting and referral systems.

Paragraph 7: Measures for children deprived of a family environment

65. The main approach to addressing the needs of children deprived of a family environment is through the country’s social protection system. Recognising the important role that the extended family and community play in child welfare and development, the first step is to strengthen the capacity of families—especially vulnerable ones—to address the needs of their children. This is a preventive measure to avoid children falling out of the family environment as well as a support mechanism for families who have taken in children deprived of a family. According to the DSW, at the end of 2014, a total number of 175 children had been adopted. Of this number, 103 were inter-country adoption cases, while 72 were local adoptions. A total of 788 children were also reunited with their families.

66. The DSW is also tasked with monitoring the operation of both state-run and privately-run residential care institutions for children. Accordingly, the DSW registers such facilities and ensures that they are managed for the benefit of the children in them. In this vein, the DSW closed down 81 homes between 2010 and February 2014, 69 of which have been closed since 2012. The children in these homes have been reunited with their families, in a bid to ensure that they are well catered for in a safe family environment. In collaboration with UNICEF, the DSW established the Care Reform Initiative (CRI) in 2007. The objective of the CRI is to implement a targeted approach to the management of residential homes. As a result of the CRI, the DSW has been able to achieve success in ensuring that the needs of children in each home are adequately met. The DSW prefers foster care by close family members in the community and uses adoption as a last resort.

67. Family support initiatives: The Child and Family Welfare Policy recently adopted by Ghana is geared towards empowering families and strengthening them through social dialogue to protect children. The Department of Community Development (DCD) also is given the mandate to work in communities to initiate project for empowering individuals,

families and communities with sustainable employable skills to enhance and improve their income levels. The DCD provides communities with skills in soap/detergent production, flour confectionery making, textile production, body care product manufacturing and handicraft making. It also links them to micro-credit facilities. These initiatives lift many households from poverty as they become employed and are able to take adequate care of their families. It also revives informal foster care, as more people are able to support other less endowed family or community members. Other programmes such as the Labour Intensive Public Works (LIPW) of Ghana Social Opportunities Project (GSOP) under the MLGRD and the Local Enterprise and Skills Development Programme (LESDEP), all of which provide support to families to better care for children.

68. Other important measures include the strengthening of the country's social protection system. In line with this, MoGCSP, in conjunction with the Ministries of Health, Education, Food and Agriculture, and Local Government and Rural Development are developing a National Targeting System (NTS) to be used by all Government agencies in identifying, prioritising and selecting households living in vulnerable conditions.

69. The NTS has a two-stage process of first developing a national registry of households, collecting key data such as number of persons in a household and their living conditions. The second stage involves national social intervention programmes using the registry in their programming. The NTS is targeting the following social intervention programmes:

- Livelihood Empowerment Against Poverty (LEAP) programme managed by MoGCSP;
- Labour Intensive Public Works (LIPW) being implemented by MLGRD;
- The Exempt Category under the National Health Insurance Scheme (NHIS) implemented by the Ministry of Health;
- Pro-Poor interventions for poor peasant farmers including block farming under the Ministry of Food and Agriculture;
- Free School Uniform and Exercise Books programme implemented under Ministry of Education;
- School Feeding Programme under MLGRD;
- The Local Enterprise and Skills Development Programme (LESDEP); and
- The National Youth Employment Programme (NYEP) and Ghana Youth Employment and Enterprise Development Programme.

70. There is strong evidence to indicate that these social protection interventions would improve living conditions of vulnerable persons. For example, LEAP, which is the nation's flagship social intervention programme has currently covered a total of 411,990 beneficiaries across the country under the programme, of which 131,348 are children. The World Bank supports the LEAP programme. Another component of LEAP is the LEAP 1000 Project, being sponsored by the USAID. This component focuses on preventing stunting in children aged 0–3 years within the three Northern regions. 8,000 women will benefit from the project. There is also free registration for children under the National Health Insurance Scheme (NHIS). 90% of LEAP beneficiaries are registered under the NHIS.

Paragraph 8: Measures for children with physical disabilities

71. Special Education: The DSW under MoGCSP is the state agency in charge of all issues that relate to children with disabilities, but in matters of education the Special Education Division (SPED) has a specific mandate to ensure that such children receive the requisite education. SPED has therefore instituted measures to include children with disabilities and special needs into the regular education system and in society through the following:

- District and regional special education officers/coordinators identify children with disabilities and special education needs and screen them for various types and level of impairment. After screening, those who fail the test are referred to medical facilities for medical interventions care and treatment. SPED has officers in charge in all regions and districts. The Division also collaborates with the Ghana Health Service to do basic screening. UNICEF supports the division with basic screening materials to assist on going screening exercises;
- SPED has attached Resource Teachers in schools to provide both teachers and pupils with Special Educational Needs (SENs) to manage pupils with disabilities. Other children thought to have impairments are screened and referred for medical assistance;
- Heads and staff of schools have also been trained to identify signs, symptoms and characteristics so has to support such children to learn through the use of certain strategies such as corporative learning, and peer-mediated approaches;
- SPED also organises sensitisation workshops for parents and guardians to enable them identify children with impairments and provide them the necessary support they need;
- As part of the inclusive education implementation, Regional, Municipal, District Directors and senior staff, Heads and Teachers in school have been sensitised on how to include all children in school.

72. NGOs such as Action Aid Ghana have also carried out training of teachers to better address the needs of children with disabilities. Accordingly, in May 2012, under the Action for Children's Rights (ACRE) Project, Action Aid conducted a three-day training workshop for 40 teachers on detection of hearing and visual impairments in children and how to help the children concerned in school.¹⁵ Monitoring visits by Action Aid showed that head teachers who were trained had rolled out the training to their staff, resulting in 136 teachers both within and outside the Project schools using the skills gained to assist children with disabilities.

Paragraph 9: Measures for children with mental disabilities

73. The SPED has a mandate of providing equitable educational opportunities for children with special needs and intellectual disabilities. Currently, SPED runs 13 special schools and 24 units (integrated schools) for children with intellectual disabilities. Some private institutions such as the New Horizon Basic School in Accra also exist to assist Government to provide learning opportunities for children with special needs.

¹⁵ Action Aid Ghana, "Attending to pupils with special needs" [Online]. Available at www.actionaid.org/ghana/2013/10/attending-pupils-special-needs (Last accessed on 8 April 2015).

74. As part of efforts aimed at improving the welfare of children with disabilities and other vulnerable children, Government has directed the MLGRD to allocate 2% of the District Assembly Common Fund to support persons with disabilities and other vulnerable children in every District.

75. Even though legislation and the policy environment provide the framework for protection and guaranteeing the rights of the persons with disabilities to special treatment, there is still a lot more to be done to change the attitudes of parents and society towards recognizing the child with disabilities as an individual with equal rights.

Paragraph 10: Measures to provide access to quality health services

76. Articles 28(4) and 30 of the 1992 Constitution provide the right to medical treatment to all Ghanaian children. Similar provisions are made in section 8 of the Children’s Act, emphasizing that no person shall deprive a child of access to health, medical attention or any other thing required for his or her healthy development.

77. The Ministry of Health (MOH) is the main government body that is responsible for the health needs of every Ghanaian. It exists to ensure equitable provision and access to healthcare delivery and implementation of public health programmes in Ghana. The main implementing body that ensures the delivery of healthcare and health services under the MOH is the Ghana Health Service (GHS).

78. Within the period under review, the 2011 Multiple Indicator Cluster Survey (MICS) indicates an improvement in the nutritional status of children in the country as seen from table 2 below. The measures put in place to improve the nutritional status of children by the GHS include improving maternal nutrition and health staff capacity building in skills and competencies for counselling, essential nutrition actions and community Infant and young child.

79. Since 2008, the Community-based management of acute malnutrition has been implemented and is currently in 97 Districts. It had begun in 2 Districts in 2008 and now in 97. It helps with early identification and treatment of severely malnourished children in their communities.

80. Other measures include staff training and supportive supervision on Growth Monitoring and Promotion and appropriate use of Growth Charts to ensure correct plotting and classification of children, Behaviour Change Communication and support, caregiver counselling and support for optimum infant and young child feeding practices during Pre-natal Care (PNC) and Child Welfare outreach clinics, home visit and other community mobilization activities, and making NHIS affordable.

81. As further evidence of the reach of health care services across the country, the GLSS 6, reports that less than 2% (1.7%) of children 5 years and below in the country had not received any vaccination at the time of the survey.

82. The 2011 MICS indicates that in terms of nutrition, the rates of underweight children have reduced marginally as can be seen below.

Table 2
Child malnutrition in Ghana by sex

<i>Type</i>	<i>Underweight (w/a below -2sd)</i>	<i>% Stunting (H/a below -2sd)</i>	<i>% Wasting (W/h below -2sd)</i>	<i>Overweight/Obesity (W/h above +2sd)</i>
Male	15.4	25.3	7.2	2.7

Type	Underweight (w/a below -2sd)	% Stunting (H/a below -2sd)	% Wasting (W/h below -2sd)	Overweight/Obesity (W/h above +2sd)
Female	11.3	20.3	5.2	2.5

Source: Multiple Indicator Cluster Survey 2011, GSS.

83. Ghana has recently benefited from the affordable medicines for malaria facility, greatly reducing the cost of malaria treatment. The Integrated Community Case Management for malaria, diarrhoea and pneumonia, and introduction of malaria-free zones have also contributed to the decline in malaria cases in the country. A model for community-based service delivery known as the Community-based Health Planning and Services (CHPS) in communities has taken care closer to the people. There has been a significant increase in the number of functional CHPS nationwide following the relatively slow start in CHPS implementation over the previous years. Implementation of functional CHPS, for instance, doubled from 868 in 2009 to 1,675 in 2011. This increase has also been met with a correlated increase in the number of community health officers, most of whom have already had training in CHPS service delivery as part of their pre-service training.

84. Other initiatives taken for increasing children's access to health include the School Health Education Programme (SHEP), automatic registration of LEAP households on the NHIS. The SHEP Policy establishes a policy and institutional framework for implementing school health programmes and provides direction for achieving effective school health delivery.

85. Ghana has also strengthened its health-care services for adolescents focusing on reproductive and mental health programmes (as well as adolescent-sensitive mental health counselling services) and made them known and accessible to adolescents. According to the GHS, there has been remarkable improvement in adolescent health care services in Ghana, with focus on adolescent reproductive and mental health issues. The efforts of the GHS are also complemented by the Association of Reproductive Health Professionals (ARHP) and Adolescent Reproductive Health (ARH) Units. The current adolescent reproductive health programme has the under-mentioned as its strategic objectives:

- Improve access to appropriate health information by adolescents and young people;
- Improve access to and utilisation of quality health services by adolescents and young people;
- Enhance the social, legal and cultural environment for the health of adolescents and young people;
- Improve community participation (adolescents, parents, community leaders, traditional and religious leaders etc.) in adolescents and young people's health programme implementation to increase the demand and utilization of services; and
- Improve the management of adolescents and young people's health programmes including resource mobilization;
- Adolescent Reproductive Health Policy and structure.

86. The Planned Parenthood Association of Ghana (PPAG) also plays a key role in addressing sexual and reproductive health (SRH) issues affecting the youth. Presently, PPAG uses a number of innovative strategies to provide SRH information and services for the youth. These include peer education, social franchising, a national network of youth in action called the Youth Action Movement (YAM), Young & Wise centres, radio, community listening clubs, Life Planning skill training, condom promotion, livelihood skill training and apprenticeship. PPAG is also implementing an all girls initiative known as the

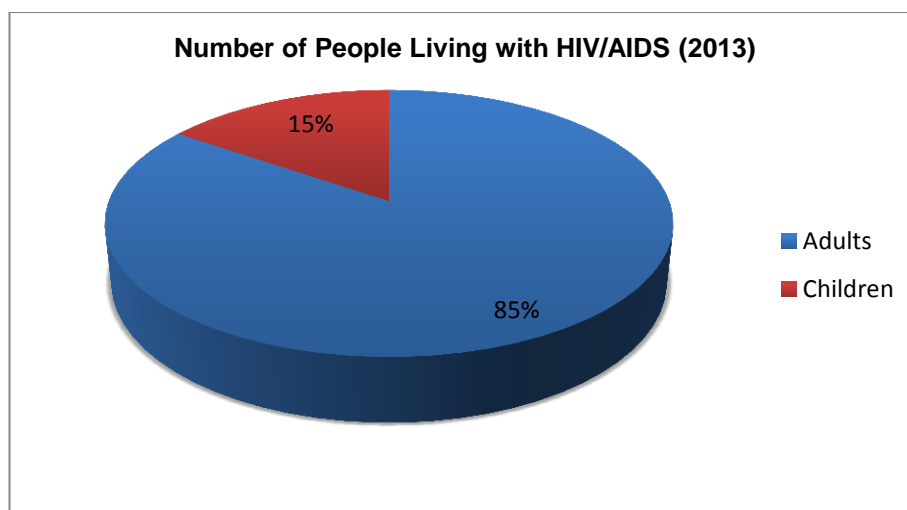
Sista’s initiative aimed at mobilizing and building the capacity of adolescent girls with sexual and reproductive health information for informed decision making and life skills that will ensure they are not abused and take advantage of sexually. The youth programme is implemented nationwide in 27 districts and over 400 communities. To support its youth programme, PPAG has developed a number of Behaviour Change Communication (BCC) materials including trigger videos, documentaries, Peer Educator’s Handbook and Training Manuals. All materials are conceptualized and designed by PPAG.

87. Some of the PPAG’s current projects for the youth include Access, Service and Knowledge (ASK) Project, National Strategic Plan (NSP) Project (supported by the Ghana AIDS Commission), Comprehensive Adolescent Sexual Reproductive Health and Rights (CASRHR) Project, and Increasing Access to SRHR services among Young people in two districts in the Northern and Brong-Ahafo Regions of Ghana. As at 2014, the PPAG’s SRH interventions had covered 1,115,579 youth from 196,743 in 2010.

Paragraph 11: Measures to combat the spread of HIV/AIDS

88. The HIV/AIDS epidemic in Ghana is classified as a generalised epidemic with a prevalence of more than 1% in the population.¹⁶ According to the 2013 HIV Sentinel Survey Report¹⁷ prepared by the Ghana AIDS Commission, the National HIV Prevalence is 1.3%. The Report states that an estimated 224,488 people are living with HIV/AIDS made up of 189,931 adults and 34,557 children. The percentage breakdown is shown in figure 6 below. New infections as at 2013 were 7,812 of which 5,405 were adults and 2,407 were children. Further disaggregated data from UNAIDS puts the figure of children 0 to 14 years living with HIV at 35,000 as at 2013. The number of children orphaned due to AIDS aged 0 to 17 years is put at 180,000 as at 2013.¹⁸

Figure 6
Percentage breakdown of people living with HIV/AIDS



¹⁶ The World Health Organization (WHO) classifies a prevalence rate of 1 percent or more in the general population as a generalised epidemic.

¹⁷ See a summary of the 2013 Sentinel Survey at http://ghanaidc.gov.gh/gac1/aids_info.php (Last accessed on 8 April 2015).

¹⁸ See UNAIDS Countries – Ghana. Available at www.unaids.org/en/regionscountries/countries/ghana/ (Last accessed on 8 April 2015).

89. Of the estimated 10,074 AIDS-related deaths, 2,248 are children aged 0 to 14 years, while 7,826 are adults. The need for anti-retroviral treatment (ART) is estimated to be 125,396 of which 18,621 are children aged 0 to 14 years. An estimated 11,682 mothers will also require prevention of mother to child transmission (PMTCT) services. HIV prevalence among pregnant women attending antenatal clinic for has dropped from 2.1% in 2012 to 1.9% in 2013, the first recording below 2% in two decades.

90. PMTCT services have been integrated into sexual and reproductive health services¹⁹. This has ensured wider access to women in reproductive ages. It is also recorded that in 2012, 70% of all HIV-positive pregnant women received Anti-Retroviral (ARV) medication to prevent MTCT, an increase from the 2011 coverage of 50%. The 2013 Global AIDS Report further notes that in Ghana, the risk of a woman living with HIV transmitting the disease to her child has reduced from 31% in 2009 to 9% in 2012.²⁰ In addition, the Report finds that in Ghana, the coverage of services for women living with HIV to prevent MTCT increased dramatically from 32% to more than 90% in 2012. Worthy of note is also the fact that there is a 76% reduction in new infections among children²¹.

91. Ghana is noted by the Joint United Nations Programme on HIV/AIDS (UNAIDS) as one of five countries in West Africa whose prevalence declined by more than 25% between 2001 and 2011. The successes chalked by the nation in reducing the prevalence of HIV/AIDS can be attributed to a number of policy and programme interventions whose impact can be noted as follows:²²

- The “Know-your-status” campaign has provided an opportunity for community mobilisation and demand creation for HIV services, including PMTCT;
- The involvement of the mass media in national HIV response through community education, mobilisation and involvement;
- The “Models of Hope” and “HIV Ambassadors” involved in the anti-stigma campaigns are of great benefit to the PMTCT programme;
- Free testing and counselling services under the “Know-your-status” campaigns are encouraging more people to get tested;
- The use of Pharmacists and Pharmacy Technologists has ensured that the non-availability of medical doctors does not impede the introduction of post-exposure prophylaxis (PEP) in a health facility that has the capacity to carry out PEP;
- Pre-service training for health care workers on universal precautions has been helpful;
- Strengthening linkages through sharing of information on ART facilities and contact details of service providers across regions has ensured that PEP is available and accessible in any part of the country;
- Strategic task shifting through which Physician Assistants and Senior Nursing Officers are trained to prescribe anti-retroviral drugs (ARVs) in areas where there are no medical officers has ensured that ART is available in remote and deprived areas;

¹⁹ GAC (2013) “Achievements and Challenges with respect to MDG 6”, p. 3.

²⁰ UNAIDS (2013), p. 37.

²¹ Ghana AIDS Commission (2013), p. 3.

²² For a detailed discussion of the success factors, see Ghana AIDS Commission, *Country AIDS Response Progress Report – Ghana* (March 2014), p. 105–107.

- The use of simplified screening tools, which would ensure that people living with HIV (PLHIV) among TB infections are detected early;
- Success in carrying out continuum of care for PLHIV for the over six years in both public and private ART facilities through the use of treatment “monitors” introduced as part of the adherence strategies under the National AIDS Control Programme (NACP);
- The “Heart-to-Heart Media Campaign” launched in 2011 to achieve “zero discrimination” and ultimately “zero infection” has recorded significant success;
- The payment of conditional caregivers’ grants for orphans and other vulnerable children (OVC) which ensures that OVC benefit from health and educational programmes and are not subjected to the worst forms of child labour;
- The LEAP programme also provides assistance to children orphaned by HIV/Aids are target for monthly grants to cater for their wellbeing. The LEAP grants are aimed towards their education, basic health and to prevent their involvement in labour activities;
- The introduction of a National Assessment and Counselling Support (NACS) system which integrates quality nutritional assessment and counselling as part of the regular care and treatment of PLHIV and TB clients. The programme involves providing specialised food products to PLHIV and TB clients, based on agreed criteria;
- Currently a new Programme of Work/HIV & AIDS National Strategic Plan 2011–2015 is being implemented. As part of the processes for rolling out the Plan the following programmes and activities have been undertaken:
 - 560 health care workers trained for early infant diagnosis/Prevention of Mother to Child Transmission (PMTCT) in Eastern, Ashanti, Western, Upper West and Upper East regions;
 - Lab quality assurance training for 40 lab personnel;
 - Basic Lab Information System established with training for Anti-Retroviral Treatment facilities;
 - Data verification training for 60 Health Management Information System (HMIS) Officers;
 - District HMIS training for all data managers;
 - Continuous medical training for 200 doctors;
 - Lecture for schools of Nursing and Public Health;
 - HIV/AIDS Sentinel Survey 2014 orientation for 160 health workers.

Paragraph 12: Measures to eliminate harmful traditional practices

92. Strengthened legal framework: Article 26(2) of the 1992 Constitution prohibits all customary practices that dehumanise or are injurious to the physical and mental wellbeing of any person. To ensure the effective application of this constitutional provision, the Criminal Offences Act, 1960 (Act 29), has been amended to include section 69A, which criminalises female genital mutilation or cutting (FGM/C). To emphasise the seriousness of the offence, the punishment is a term of imprisonment of not less than 5 years and not more than 10 years. A further amendment in section 69B makes it an offence—among others—to remove any body part without lawful authority. The offence is also punishable by a term of imprisonment of not less than 5 years and not more than 25 years. Article 88A of Act 29

also makes it an offence to compel a bereaved spouse or any relative of the spouse to undergo a custom or practice that is cruel in nature. Cruelty is constituted by assault as defined under the Act. Section 101A also makes sexual exploitation an offence and defines it as “the use of a person for sexual activity that causes or is likely to cause serious physical and emotional injury or in prostitution or pornography.”²³ Sexual exploitation is punishable in the case of a child to a term of imprisonment of not less than 7 years and not more than 25 years.²⁴

93. The definition of “domestic violence”²⁵ under the Domestic Violence Act, 2007 (Act 732) also covers the scope of physical, sexual, economic and emotional abuse, harassment (including sexual harassment) and any act, behaviour or conduct which harms or may harm any person, or endangers the safety, health, wellbeing, privacy, integrity, security or dignity of any person. A threat of harm under the Criminal Offences Act is considered domestic violence under the Domestic Violence Act.

94. The Children’s Act, 1998 (Act 560) prohibits forcing a child to be betrothed, subject to a dowry transaction or to be married²⁶ and makes it an offence as well, punishable by a fine or a term of one year imprisonment or both.²⁷

95. The customary practice of trokosi has also been criminalised in section 314A of Act 29. The section covers sending a person to a place or participating in any ritual or customary activity for the purpose of subjecting the person to any form of ritual or customary servitude or force labour. The offence is punishable by a term of imprisonment of not less than 3 years.

96. Cumulatively, these provisions provide legal protection for children against harmful social and cultural practices, which detract from their dignity, worth, and overall growth and development.

97. Closure of Witch Camps: On 15th December 2014, the MoGCSP closed down the Bonyase witch camp in the Northern Region. 55 inmates were integrated into their communities and social protection support under LESDEP, LEAP and NHIS are being extended to them. The Ministry is currently working to close down two more camps, which have children as part of the inmates. A National Conference on Witchcraft Accusations was also held in Accra in 2014 to develop a national consensus on the underlying issues surrounding the phenomenon of witchcraft accusations and to chart a way forward to eliminating the practice.

98. Female Genital Mutilation/Cutting: The 2011 MICS indicates that 4% of women aged 15-49 years in Ghana have had any form of FGM/C. Among girls aged 0–14 years, FGM prevalence is less than 1%. The practice is found to be most prevalent in the Upper West (41%) and Upper East (28%) Regions. The survey findings indicate that 2% of women aged 15–49 years approve of FGM practice, while 94% of them believe that it should be discontinued. The survey also found FGM to be highest in older women and lower in women aged 15–49 years with some level of education. This may suggest a decline in the practice due to enforcement of law and awareness creation. The practice of FGM is believed to be on the decline in Ghana as a result of legislation, strong government commitment, extensive community outreach by both government and non-governmental organizations (NGOs), and a general receptivity to abandoning the practice.

²³ Section 101A(1) of Act 29.

²⁴ Section 101A(2)(b) of Act 29.

²⁵ Domestic violence is defined in section 1 of the Act.

²⁶ Section 14 of Act 560.

²⁷ Section 15 of Act 560.

99. Early and Forced Marriage: From the 2006 and 2012 MICS respectively, early and forced marriages appear to be increasing nationwide from 25.9% in 2006 to 27% in 2011. This increase may be attributed to poverty, which is compelling parents to give off their girl-children in particular to marriage.

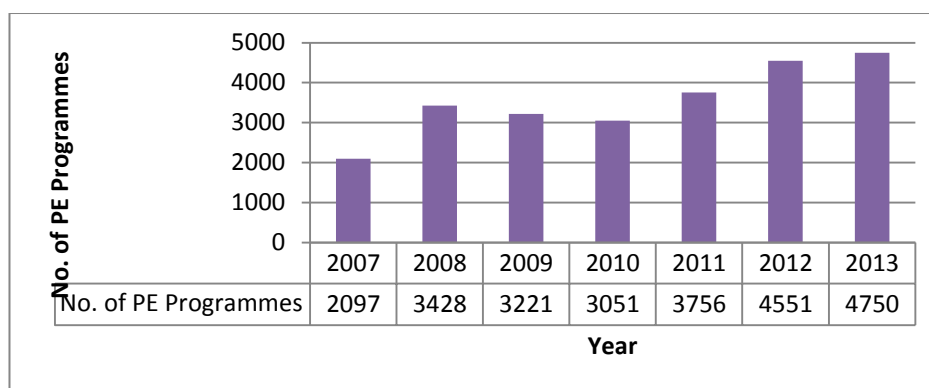
100. Trokosi: The Commission for Human Rights and Administrative Justice (CHRAJ) observes that the number of trokosis has reduced significantly over the past few years, however it still remains prevalent in parts of the country.

101. Awareness-raising activities and other national interventions: The DOVVSU, CHRAJ and MoGCSP have carried out a number of public awareness programmes to curb the incidence of harmful social and cultural practices against children. A number of civil society organisations have also been involved in awareness-raising programmes and assistance to victims of these practices. Some of the notable interventions include the following:

- Public Education Campaigns by CHRAJ to sensitise the population on the ills of harmful social and cultural practices. Figure 7 below, shows the number of public education activities organised by CHRAJ over the last six years;

Figure 7

Number of Public Education Programmes organised by CHRAJ (2007–2013)



Source: CHRAJ, 2014.

- Periodic data collection by DOVVSU, CHRAJ and MoGCSP to assess the status of prevalence and practice in Ghana and thus facilitate the designing of appropriate strategies and interventions;
- Establishment of child protection teams in endemic communities. These teams served as surveillance groups to ensure the total protection and development of the child and thus contribute to the reduction in the space of child marriages and FGM;
- Inclusion of FGM issues in the monthly reports from clinics to the hospitals for monitoring purposes;
- Increased education through the primary health care programmes and the use of community health nurses in door-to-door contact campaigns.

102. MoGCSP in conjunction with UNICEF has established a Child Marriage Coordinating Unit under the Domestic Violence Secretariat of the Ministry in September 2014. Under the Ending Child Marriage Initiative, the Unit has carried out these activities:

- Development of factsheets, frequently-asked-questions (FAQs), training packets and a resource guide on child marriage to enhance the efficiency of stakeholders and service providers in responding to cases of child marriage;
- Engaging the media to effect behaviour change through talk-shows and other media programmes. Radio and TV jingles coupled with documentaries on survivors and escapees from child marriage have been produced;
- Regular updates of information on social networking platforms created by the Unit on child marriage;
- Establishment of a 13-member Committee of Experts to serve as an advisory body to the Unit and its Project. The Committee is composed of representatives from traditional and religious institutions, development partners, Anti-Human Trafficking Unit and DOVVSU of the Ghana Police Service, and other government agencies. The President of the National House of Chiefs is the Chairperson of the Committee.

Paragraph 13: Reasons for increasing income distribution and child poverty

103. Generally, there is a reduction in poverty in Ghana, and a reduction at the household level has indirect effects on childhood poverty. Ghana is noted as the first country in sub-Saharan Africa to have achieved the Millennium Development Goal (MDG) 1 target of halving the population living in extreme poverty ahead of 2015. The Ghana Living Standards Surveys (GLSS6) results show a progressive decline in the levels of poverty in Ghana. The report on the 6th and latest round of the GLSS shows that the current extreme poverty rate has reduced from 16.5% in 2005/2006 to 8.4% in 2012/2013. This significant reduction has been possible as a result of a number of policy and programme interventions by Government such as LEAP, MASCLC, GSOP, and LESDEP, to name a few. In spite of the achievement in the reduction of poverty, inequalities exist and these are due to illiteracy, ignorance, adherence to old practices that tend to retard socio-economic progress, and unequal distribution of resources. These translate into impediments and sources of income inequalities among many Ghanaians, which impact directly on children as well.

Paragraph 14: Reasons for increase in private education

104. In the Education Strategic Plan (2010–2020), the Government recognises the contribution of the private sector to education in Ghana, noting that at all levels, nearly one in five children is educated in a private institution. That is not to suggest that the education sector in Ghana is being rapidly privatised. The Government still plays a major role in the provision of education. On the contrary, the Government has instituted a number of measures to increase access to education and enrolment in schools. The Ministry of Education has established a Unit on private education in furtherance of its private-public partnership, to oversee and monitor the establishment and operation of private schools. Some of the measures taken to improve access to education include:

- Capitation Grant: The Ministry of Education, Science and Sports (MOESS), now Ministry of Education (MOE) in 2005 introduced the Capitation Grant scheme as an intervention for realising the Free Compulsory Universal Basic Education Policy (FCUBE). The introduction of the Grant abolished the payment of school fees for pupils in public basic schools. For the 2012/13 academic year, the Ministry of Education has provided Capitation Grant amounting to GH¢24,472,840.00 for 5,741,198 pupils in basic schools. The Ministry of Education has also subsidised the

registration cost of 391,079 candidates for the Basic Education Certificate Examination (BECE) to the tune of GH¢9,031,338.00.

- Free School Uniform and Exercise Book Programme, 2009: The Free School Uniform and Exercise Book Programme was initiated in 2009 in fulfilment of the Government's commitment to ensuring that no child is denied access to quality basic education. According to the 2012 State of the Nation Address by the President, 1,258,690 school uniforms and 39,536,199 exercise books were distributed in the 2010–2011 academic year. The introduction of the programme has helped increase enrolment and retention of children in many needy communities. The Ministry of Education is working with MoGCSP on the common targeting mechanism to be employed for managing all forms of social intervention programmes and ensure that the interventions targets the most needy.
- Ghana School Feeding Programme: The Ghana School Feeding Programme (GSFP) was introduced in 2005 as a social intervention project to provide one hot, nutritious meal to school children during every school day. The long-term goal of the project was to contribute to poverty reduction and food security in the country. The three key objectives are to reduce hunger and malnutrition among school children; increase school enrolment, attendance and retention; and boost domestic food production. Strategically, the programme focuses on spending about 80% of the feeding cost in the local economy by procuring local foodstuffs directly from the farmers in the community. Under the Programme, over 1.6 million pupils are fed with one hot nutritious meal on every school going day. This has increased school enrolment, attendance and retention by 80%.
- To bridge the gender gap in access to education, a total of 15,700 girls from Junior High School (JHS) have benefited from scholarships through the Participatory Approach to Student Success. Under the Gender Responsive Skills and Community Development Project (GRSCDP), MoGCSP granted scholarships to 668 girls from 2011/2012 and 2012/2013 academic years, and presented equipment to government vocational institutions.
- To improve ICT in education, 60,000 laptops have been provided to Basic Schools in all ten regions of Ghana under the Basic School Computerisation Program. 50,000 Basic School teachers have also benefited from ICT training.

Paragraph 15: Measures to eradicate the worst forms of child labour

105. Ghana's laws prohibit children's engagement in exploitative and hazardous labour, however, there are still instances of children being engaged in such labour across the country, primarily fuelled by poverty. Some steps taken to combat worst forms of child labour include the following:

- The express prohibition of forced or bonded labour in the 1992 Constitution and the Labour Act, 2003 (Act 651). The Children's Act also sets the minimum age for general employment at 15 years;
- Government's collaboration with ILO-IPEC and international NGOs in pursuing institutional capacity building effort under the National Plan of action for the elimination of child labour in Ghana;
- The Ministry of Employment and Labour Relations (MoELR), in collaboration with the MoGCSP and other child-focused MMDAs have specifically worked in partnership to enhance the fight against children working and/or living on the streets.

106. In the mining sector, the following measures have been taken to eliminate worst forms of child labour:

- The adoption of a Mining Policy which also prohibits child labour in mining;
- The requirement under section 83 of the Minerals and Mining Act, 2006 (Act 703) that only Ghanaians aged 18 years and above can acquire and operate a mining concession;
- The requirement in the Minerals and Mining Regulations, 2012 (L.I. 2182) that “a person shall not work in an underground unless that person is at least 21 years old.”
- The establishment of District Offices of Minerals Commission to ensure compliance of these laws and regulations.

Paragraph 16: Measures to protect children in conflict with the law

107. Provision of legal assistance to children in conflict with the law: The Ghana Legal Aid Scheme (GLAS), the State-mandated Agency under the Ministry of Justice (MOJ) to provide legal assistance, has provided legal assistance to children in conflict with the law to ensure that their cases are resolved speedily in accordance with section 33 of the Juvenile Justice Act, 2003 (Act 653). Thus from 2013 to 2014, the Legal Aid Scheme—working in collaboration with the Juvenile Justice Project Ghana (JJPG), an NGO working on children in conflict with the law—implemented a project called “Access to Justice for Children in Conflict with the Law” to provide legal assistance to children aged 13 to 17 years charged with offences including assault, stealing, defilement and murder. A breakdown of the cases is provided in table 3 below.

Table 3
Number of children provided with legal aid (2013–2014)

<i>Year – Period</i>	<i>2013 – Total</i>	<i>2014 – Total</i>
Cases Reported	50	43
Cases Resolved	17	8
Cases Pending	33	35

Source: Ghana Legal Aid Scheme, 2014.

108. In 2014, the theme for the Annual Week Celebrations of The Legal Aid Scheme was, “The Deviant Child is a Victim”. In this vein, the Scheme held a number of activities including visits by lawyers and paralegals to some detention facilities and correctional centres to provide legal assistance to children in those facilities.

109. In spite of efforts to ensure that children in conflict with the law are detained as a last resort and for the shortest possible time, Ghana still faces some challenges with reducing pre-trial detention of children. Statistics from the Ghana Police Service show that between 2005 and 2010 a total of 1,748 children were held in pre-trial detention at Police Stations with older children more likely to be detained in adult detention facilities, contrary to the Juvenile Justice Act and related laws.

110. As part of measures to address children being detained in both pre-trial and post-trial instances, the Government is currently developing a comprehensive Justice for Children Policy (JfCP) which will guide child justice administration and legal reform to ensure that children’s access to justice in line with national and international standards is realised. As previously noted, the JfCP seeks to establish a well-structured and coordinated Justice for

Children System that promotes the wellbeing of children, prevent abuse, protect children from harm and promote justice for children. To this end, the Juvenile Justice Act, among other key legislation, will be amended. Recommendations made by the Judicial Service of Ghana for amendment of the Act and improving the juvenile justice system include the following:

- Strengthening the capacity of probation officers, social workers police officers and other stakeholders working with children in conflict with the law through training and preparation and use of practice guidelines and protocols which would enhance professionalism and adherence to the welfare principle in the Children's Act and other legislation on children;
- Amending the sections of the Juvenile Justice Act dealing with non-custodial measures such as diversion with a view to ensuring the effective rehabilitation of children in conflict with the law and to prevent recidivism; and
- Broadening the range of non-custodial options in the Juvenile Justice Act including remand foster placement, curfew, doorstep supervision, electronic tagging and routine reporting to the police and a probation officer.

111. Within the period under review, a total of 1,409 children were placed in probation programmes of special rehabilitation, thus reducing the incidence of children being detained or handed down custodial sentences as a punitive measure with no real prospect of rehabilitation. Table 4, below, gives a breakdown of the relevant data.

Table 4

Persons under 18 years placed in probation programmes for special rehabilitation (2005–2010)

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2005	296	82	378
2006	98	0	98
2007	76	39	115
2008	138	73	211
2009	369	154	523
2010	51	33	84
Total	1028	381	1409

Source: DSW, 2011.

112. The number of children held in pre-trial detention in Police Stations between 2005 and 2010 is also provided below:

Table 5

Children held in pre-trial detention in Police Stations (2005–2010)

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2005	214	33	2252
2006	240	27	2273
2007	229	27	2263
2008	278	50	2336
2009	296	42	2347

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2010	265	47	2322
Total	1522	226	1748

Source: Ghana Police Service, 2011.

Part II – New laws, bills and human rights instruments

Introduction

113. The following laws, bills, policies and programmes, which offer protection to children in various ways, have been passed and adopted during the period under review.

New laws

114. New laws are as follows:

- (a) Human Trafficking Act, 2005 (Act 694)
- (b) Disability Act, 2006 (Act 715)
- (c) Whistle Blowers Act, 2006 (Act 720)
- (d) The Domestic Violence Act, 2007 (Act 732)
- (e) Criminal Code (Amendment) Act, 2007
- (f) Criminal Offences (Amendment) Act, 2012 (Act 849)
- (g) The Education Act, 2008 (Act 778)
- (h) The Ghana National Commission On Children (Repealed) Act, 2006 (Act 701)
- (i) New Regulations:
 1. Legislative Instrument (LI) on Human Trafficking Act 694
 2. Legislative Instrument (LI) on Domestic Violence Act 732

New bills

115. New bills are as follows:

- (a) Property Rights of Spouses Bill, 2009
- (b) Affirmative Action Bill, 2009
- (c) Intestate Succession (Amendment) Bill, 2009
- (d) Law Reform Commission Bill, 2010

New institutions

116. Ministry of Gender, Children and Social Protection, 2013: the Ministry of Women and Children's Affairs (MOWAC) was restructured in 2013 and re-designated as the

Ministry of Gender, Children and Social Protection (MoGCSP) by Executive Instrument (E.I) 1. The new Ministry was thus a merger of MOWAC, the Department of Social Welfare (DSW), the National Council on Persons with Disability (NCPD) and the Social Protection Division of the Ministry of Employment and Social Welfare (MESW). In consonance with the Ghana Shared Growth and Development Agenda (GSGDA), MoGCSP has a new and expanded mandate to ensure gender equality, promote the welfare and protection of children, and empower the vulnerable, excluded, aged and persons with disability for sustainable national development.

117. In addition to the main government Ministry in charge of Children, the under mentioned agencies, committees and networks also exist to play key roles by rendering services related to children's rights:

- (a) Domestic Violence and Victim Support Unit (DOVVSU) of the Ghana Police Service
- (b) Ghana AIDS Commission (GAC)
- (c) Shelter for Abused Children
- (d) Shelter for Trafficked Children
- (e) Multi-Sectoral Committee on Child Protection
- (f) Child Protection Networks
- (g) Child Abuse Network
- (h) Community Child Protection Teams
- (i) National Migration Unit
- (j) Human Trafficking Secretariat of MoGCSP
- (k) Domestic Violence Secretariat of MoGCSP
- (l) Early Childhood Secretariat of MoGCSP

New policies

118. New policies are as follows:

- (a) Health Sector Gender Policy (2009)
- (b) National Policy and Plan of Action on Domestic Violence (2009–2019)
- (c) National Human Resource Development Policy (2011)
- (d) National Employment Policy (2012–2016)
- (e) National HIV/AIDS, STI Policy (2013)
- (f) Child and Family Welfare Policy (2014)
- (g) National Policy Guidelines on Orphans and Other Children made Vulnerable by HIV/AIDS
- (h) Early Childhood Care and Development Policy (2004)
- (i) Gender and Children Policy (2004)
- (j) National Disability Policy (2000)
- (k) Adolescent Reproductive Health Policy (2000)

- (l) Growth and Poverty Reduction Strategy II (GPRS) (2006–2009)
- (m) Ghana Shared Growth and Development Agenda (2009)
- (n) Child Labour Policy
- (o) ICT in Education Policy, (2006)
- (p) Technical and Vocational Education and Training (TVET) Policy
- (q) Inclusive Education (IE) and Special Educational Needs (SPED)
- (r) Tertiary Education Policy
- (s) Pre-Tertiary Teacher Professional Development and Management
- (t) Capitation Grant (2005)
- (u) Free School Uniform and Exercise Book Programme/Policy (2009)
- (v) Ghana School Feeding Programme, 2005
- (w) Free Mass Transit Ride for School Children (2009)
- (x) The Education Strategic Plan (ESP) 2010–2020

Instruments ratified

119. The following instruments have been ratified:

- (a) Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict
 - (b) Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography
 - (c) Optional Protocol to the Convention on the Rights of the Child on a communications procedure (signed).
 - (d) Optional Protocol to the Convention against Torture
 - (e) Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime.
 - (f) International Convention for the Protection of All Persons from Enforced Disappearances
 - (g) Convention on the Rights of Persons with Disabilities
 - (h) Hague Convention of 29 May 1993 on Protection of Children and Co-operation in Respect of Intercountry Adoption. (Ratification process currently underway).
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