



INTERNATIONAL LEAGUE
FOR HUMAN RIGHTS

**AREAS OF PARTICULAR CONCERN IN THE COMPLIANCE OF THE REPUBLIC
OF UZBEKISTAN WITH THE UNITED NATIONS CONVENTION ON THE
RIGHTS OF THE CHILD**



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**Prepared by the
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The International League for Human Rights (the League) has worked to keep human rights at the forefront of international affairs and to give meaning and effect to the human rights values enshrined in international human rights treaties and conventions. The League's special mission for 62 years has been defending individual human rights advocates who have risked their lives to promote the ideals of a just and civil society in their homelands.

Based in New York, with representation in Geneva and dozens of affiliates and partners around the world, the League is a non-governmental, non-profit organization now in its 62nd year. The League has special consultative status at the United Nations, the Council of Europe, and the International Labor Organization, and also contributes to the Africa Commission and the Organization for Security and Cooperation in Europe (OSCE).

With the UN Universal Declaration of Human Rights as its platform, the League raises human rights issues and cases before the UN and other intergovernmental regional organizations in partnership with our colleagues abroad, helping to amplify their voices and coordinate strategies for effective human rights protection.

INTRODUCTION

The present document outlines the areas of particular concern in Uzbekistan's protection of children's rights and is a critique of the periodic report of Uzbekistan that is scheduled for review during the 42nd session of the United Nations Committee on the Rights of the Child (CRC).

This list of issues provides the findings of the League on the most troubling aspects of Uzbekistan's compliance in providing children with basic medical care, welfare, education, and certain protective measures for particularly vulnerable groups. The League would like to encourage the Committee members to consider issues, which are not explicitly covered in this document, but which present a growing concern: growth of HIV/AIDS infections, drug usage among children and adolescents, sexual exploitation of children, as well as other issues brought forth by relevant international NGOs.

The League's effort is directed towards a greater accountability of the Uzbekistan Government to its people, who have experienced a drastic reduction in the quality of life and health care since the fall of the Soviet Union in 1991, and to the international community, which must hold Uzbekistan to its international obligations.

BASIC HEALTH AND WELFARE

Survival and Development (Art. 6, para. 2)

Art. 6, para. 2 states:

States Parties shall ensure to the maximum extent possible the survival and development of the child.

The Government of Uzbekistan has concentrated its limited financial resources on the reduction of infant mortality, which has dropped significantly since 1992 (para. 137). But the overall state of the health care system does not support the optimistic statements of the government report. Since 1992, national expenditures on healthcare have fallen from 5.5% of the gross domestic product (GDP) to only 2.9% in 1999.¹

Clinics that are financed from the state budget do not have necessary means to hire an adequate number of specialists. Doctors with narrow areas of specialization are required to examine and assess the overall health of as many as 150 children and adolescents a day during annual medical examinations, which are required for children under the age of 14.² Under these conditions, it is highly unlikely that “a comprehensive health profile,” which the government report claims is prepared for every child on the basis of such examinations, accurately reflects the state of a child’s health or detects the initial stages of an illness.

Disabled Children (Art. 23)

Art. 23 of the Convention states the rights of disabled children to “a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate ... participation in the community”; “to special care”; and “to education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities, ... including his or her cultural and spiritual development.”

The state of disabled children in Uzbekistan remains an area of particular concern, despite the government’s assurances of carefully considering the Committee’s concluding observations in 2000 (para. 4 and 5). The official report does not appear to provide a complete and accurate overview of the situation in regards to disabled children. While referring to medical, social, educational and vocational services available to disabled children through various government programs (para. 150-151), the report does not list the impact these programs have had on the improvement of conditions for children with limited capabilities, nor does it provide data on the number of children benefiting from such services. 1,400 children with psychological disorders, who reside at state-organized specialized *Murravat* homes and have access to medical, social and educational facilities

¹ Жолдасов А.А. «Бедность и предпосылки распространения ВИЧ/СПИДа в Узбекистане». (Zholdasov, A.A. Poverty and Pre-conditions for the Spread of HIV/AIDS in Uzbekistan) *Международная Организация Труда*. (International Labor Organization) PP. 2. <http://www.ilo.ru/aids/docs/dec02/Zholdasov.pdf>

² From an anonymous NGO source in Uzbekistan that has monitored the state of health care since the late 1990s. It collects information from government sources, including official statistics, as well as conducts independent surveys of patients and doctors, particularly outside of Tashkent. This NGO has documented numerous irregularities in the implementation of official government policies, including denials of disability applications. For personal safety reasons and due to continuing pressure on the civil society in Uzbekistan, the source cannot be named. This NGO will be referred to as “the Medical NGO” in this report.

(para. 149 and 150), constitute a small percentage of the more than 65,000 officially registered disabled children. It should be noted that the official figure is disputed by independent health experts in Uzbekistan who estimate the number of children with limited capabilities to be approximately 120,000. Such discrepancies, experts maintain, are due to complicated and lengthy procedures to establish disability, as well as the intentional denial of legitimate applications by government officials as a way of reducing expenditures. Furthermore, parents of children living at *Murravat* homes (para. 149 and 150) disputed the government's claim that "care [for their children was] fully underwritten by the State" and stated that they had paid for routine visits to specialists as well as physical therapy procedures.

Poor enforcement of existing laws and social protections leads to widespread complaints about the denial or withholding of benefits guaranteed to disabled children and their parents. An independent survey confirmed that at least 65% of women were forced to stop working to care for disabled children full-time. Many of these women were unable to collect leave benefits from their employers.

According to an independent survey of schools in the Bukhara region of Uzbekistan and contrary to the government's claims (para. 151), almost 35% of school age disabled children are not receiving any form of education. Throughout Uzbekistan, the total number of disabled children who are unable to exercise their constitutional right to education is estimated by independent experts at 15,000-30,000.

Contrary to para.151 of the government report, an independent survey of nine institutions of higher education in Uzbekistan showed that only 1.2% of admitted disabled students were able to complete their studies and find post-graduation employment. To date, no university or specialized secondary school provides full wheelchair access to its campus.

Since May 2005, the Government of Uzbekistan has used administrative and oversight authority to crack down on civil society. Non-governmental organizations (NGOs) are pressured by local authorities and the Ministry of Justice to close down. The international NGO community, including the League, has documented dozens of such cases, but actual figures are believed to be much higher. The case of the non-governmental organization *Zhizn* (Life), based in Termez in the Surkhandarya region, is illustrative of this practice. *Zhizn* provided direct assistance to thirty-five children suffering from oligophreny (retardation), but in October 2005 suddenly informed the Justice Department of the Surkhandarya region that it was shutting down and ceasing operations. Anonymous sources in the Termez NGO community insist that it has been done under pressure from the Justice Department.

Health and Health Care (Art. 24)

Art. 24 of the Convention affirms the right of children to "the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health." It also outlines specific steps that State Parties should take to ensure compliance.

The Government of Uzbekistan devotes ten paragraphs to article 24 (paras.158-167) and provides detailed data, primarily on the pre- and post-natal care of mothers and infants, where favorable statistics do exist. However, the report fails to mention multiple problems pertaining to the health of young children and adolescents.

According to the official report, infant mortality has decreased steadily since 1992 (para.137), as has the number of abortions. This is attributed in large part to measures listed as government accomplishments: the creation of the Republican Center for Reproductive Health (para.159) and the installation of modern equipment at regional centers of reproductive health (para.162).

However, the government report does not address the fact that 89% of elementary school children have health problems, as do 93% of secondary school children and 94% of children studying at specialized secondary schools, professional colleges and lyceums.³

Students are displaying growing rates of cardio-vascular diseases and health problems associated with a sedentary lifestyle. These problems are further exacerbated by the lack of adequate medical facilities at the majority of nation's education institutions. School administrations often ask parents to provide financial and/or material support to equip nurses' stations. During vaccination campaigns, for example, children are frequently asked to bring their own syringes.

Children's health is further jeopardized by the long-standing practice of involving students in cotton harvest campaigns. During 2004-2005, independent experts documented 45 instances of work-induced trauma and illness which eventually led to partial or full disability among children working in the cotton fields. Child labor in the cotton industry also poses serious long-term health risks for children, including respiratory, dermatological, digestive and other illnesses associated with farming under poor conditions. A higher incidence of such health problems is reported among the residents of rural areas with intensive cotton farming: Kashkadarya, Djizak, Bukhara and Surkhandarya regions.

In November 2005, seven students of the Bukhara Medical College died and seventeen more were injured in an accident, when an open truck, in which they were being transported to the cotton fields, turned and rolled over.⁴ Exploitation of children is illegal in Uzbekistan under the Labor Code, but economic and administrative pressures on local administrations (*hokimiyats*) have led to the eventual re-introduction of the Soviet practice of using student labor for harvest campaigns. In urban areas children from the ninth grade and older are targeted, while in rural areas children as young as nine years (third grade and up) are used for labor. Central government and local administrations are careful not to issue direct orders to schools and universities, and these are presented as "volunteering." The scale of such "volunteer work" is estimated to involve hundreds of thousands of children annually. The majority of secondary schools

³ *Ibid.*

⁴ Medical colleges are vocational schools providing specialized training for students of the 9th-12th grades. These students were 15-18 years old.

and higher education institutions in regional and district centers, with the notable exception of Tashkent, were closed at the peak of the harvest season between September 10 and November 15, 2005, for this reason.

Social Security and Childcare Services and Facilities (Art. 26 and Art. 18, para. 3)

Art. 26 and Art. 18 (para.3) of the Convention guarantee the right of the child to “benefit from social security” and benefits prescribed by national laws, as well as the ability of working parents to use child-care facilities. Major problems, rooted in weak and often corrupt institutions, exist in this area of Uzbekistan’s compliance with the Convention.

Non-payment of social security benefits affects not only the parents of disabled children (as discussed in the section on disabled children). Uzbekistan NGOs have documented hundreds of cases where socially vulnerable groups, such as non-working mothers and pensioners, were unable to collect their benefits for up to two years. An independent survey of women employed in the state health care system in the Bukhara region of Uzbekistan revealed that 94% experienced at least one missed payment or a delay of up to four months in the payment of pregnancy and child-care leave. After women complained to the regional health care department about this problem, they were advised by officials to stop pursuing their case, if they wanted to return to work after the leave.⁵

There is also little chance of redress in the judicial system as even determined citizens rarely succeed in exercising their rights. Of the 276 cases filed by private citizens with the help of a Bukhara NGO, which requested anonymity for the purpose of this publication, in 2000-2004, only fifteen were taken into consideration by lower courts, and only three cases resulted into a full reimbursement of withheld benefits.

EDUCATION, LEISURE AND CULTURAL LIFE

Aims of education (Art. 29, para. 1)

Art. 29, para.1 (a) states:

States Parties agree that the education of the child shall be directed to the development of the child’s personality, talents and mental and physical abilities to their fullest potential.

Despite the proclamations of the Education Act of 1997, many children lack opportunities to develop their capabilities to the fullest extent. This is attributed to a number of factors:

1. The lack of reform in the methodology and subject composition of primary, secondary and specialized secondary education has led to an increase in the study

⁵ *Ibid.*

burden of students. New classes are being constantly introduced, but few adjustments have been made to compensate for the increase in study time. As a result, students have less time for rest, physical development through sport and other extracurricular activities.

2. Academic programs at the majority of specialized secondary and vocational schools (grades 9-12) do not allow for an adequate student preparation for entrance examinations to higher educational institutions. According to an independent survey, 85% of applicants to such institutions either hire private tutors or attend paid preparatory courses at universities, beginning as early as the eighth grade.
3. Inaccessibility to higher education for the vast majority of children. Only 10% of students receive financial assistance from the state, and the overwhelming majority must pay for their education up to US \$800/year. It is virtually impossible for families to do so, considering that the average family income in urban areas rarely exceeds US \$50/month and is smaller in rural areas.

In addition to the academic burden, children are often required to perform work on various municipal projects apart from the above-mentioned cotton harvest campaigns. Based on interviews with teachers from the city of Syrdarya, in 2005 there were 75 instances of high school student labor in work projects throughout the city, as well as on their school campuses. Students are required to clean city streets, assist on construction sites, plant trees and flowers in public areas, among other tasks. Under conditions of anonymity, teachers were eager to state that senior school and city officials use free student labor to misappropriate funds that were allocated for specific infrastructure and beautification projects.⁶

SPECIAL PROTECTIVE MEASURES

Children Belonging to a Minority or an Indigenous Group (Art. 30)

Art. 30 states:

In those States in which ethnic, religious or linguistic minorities or persons of indigenous origin exist, a child belonging to such a minority or who is indigenous shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practice his or her own religion, or to use his or her own language.

In its periodic report the Government of Uzbekistan reports positively on its compliance with Art. 30 of the Convention, which guarantees the rights of children belonging to ethnic, cultural and religious minorities. Para. 109 states that “secondary education in Uzbekistan is offered in seven languages: Uzbek, Karakalpak, Russian, Kazakh,

⁶ From an anonymous group of experts that monitor the state of elementary, secondary and higher education in Uzbekistan. Their research has been used by a number of international agencies and organizations. For personal safety reasons and due to a continuing government pressure on the civil society, the source cannot be named. Further on in this publication, this group will be referred to as “Educational Expert Group.”

Turkmen, Tajik and Kyrgyz.” According to the report, there are 762 schools with Russian as the language of instruction; 581 schools with the Kazakh language; 318 schools with the Tajik language; 56 schools with the Kyrgyz language and 64 schools with the Turkmen language. However, an independent survey of these schools in November 2005 by an unnamed NGO from the Bukhara region revealed that these figures were inflated. In fact, only approximately 70% (525) of the declared number of Russian-language schools provided instruction in that language, and Turkmen-language and Tajik-language schools showed even more discrepancy – 3% (2) and 58% (185) respectively. No data was available on Kazakh-, Kyrgyz- and Karakalpak-language schools.

In Bukhara and Samarkand, areas of a Tajik speaking majority, Tajik-language schools have significantly reduced in number 1995. Today, only six of the eighteen Tajik-language schools that were open in 1995 continue to operate in Samarkand. All six Tajik-language schools in Bukhara have been closed.

Even though the Government declares its commitment to providing minority-language schools with “teaching programs, textbooks and other teaching aids purchased in [minorities’] historical homelands,” no practical steps in that direction have been taken. And while the Russian Federation possesses the financial resources to assist the Russian-speaking minority in Uzbekistan, most of Uzbekistan’s neighbors do not have such capabilities. Moreover, educational materials from Turkmenistan, where the personality cult of President Niyazov is all-pervasive, would carry little value for Uzbekistan’s ethnic Turkmen who would only be put at a disadvantage by their introduction.

The 2000 resolution of the Ministry of Education authorizing the destructions of books that contradict the national ideology hardly supports the government’s claim in para.109. In November 2005, more than 24,000 materials in Tajik and Russian from the *Ibn-Sina* library of Bukhara were destroyed, despite protests from the local Tajik community. Earlier reports from local NGOs spoke of the destruction of Tajik-language textbooks on technical and natural sciences in Samarkand’s schools in 2001.⁷

Lack of action by the Ministry of Education in supplying minority-language schools with teaching materials, coupled with the discriminatory practices of regional authorities, effectively makes secondary education in minority languages irrelevant. Students and their parents prefer to switch to the Uzbek language that would guarantee them better post-secondary education prospects.

⁷ Bakhtiyor Ergashev. [Uzbeks evict Tajik citizens](http://www.eurasianet.org/resource/tajikistan/hypermail/200105/0004.html). Tajikistan Daily Digest/Eurasia.org. 02/05/2001 <http://www.eurasianet.org/resource/tajikistan/hypermail/200105/0004.html>

RECOMMENDATIONS

Following the review by the Committee, the League recommends the following areas of concern with regard to the rights of the child to be raised with the State Party:

1. Take immediate steps towards abolishing child labor in the cotton industry.
2. Take steps to promote minority-language secondary and higher education through allocating resources *on par* with Uzbek-language schools and institutions. Investigate allegations that regional authorities, particularly in Bukhara and Samarkand, are implicated in efforts to undermine Tajik-language secondary education by the destruction of teaching materials and closing down of schools.
3. Improve access to education for disabled children.
4. Allow non-governmental organizations, including those working with disadvantaged children or promoting the rights of the child, to operate freely as to ensure an independent oversight over the implementation of laws.
5. Create effective mechanisms for the timely and fair distribution of social benefits and take measures against government officials responsible for illegal benefits' withholdings.
6. Make higher education more available to underprivileged children and youths, particularly from rural areas, through increased government financing of university and scholarships.
7. Provide specific information about violations, citizen complaints, and court cases related to the social, economic, and cultural rights of children; as well as concrete steps that the government has taken to address these specific issues.
8. Cooperate actively with international organizations, both inter- and non-governmental, on the subject of HIV/AIDS and tuberculosis prevention, especially among at-risk youths and children.