



Convention on the Rights of the Child

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Committee on the Rights of the Child Sixty-fourth session

Summary record of the 1837th meeting

Held at the Palais Wilson, Geneva, on Monday, 30 September 2013, at 3 p.m.

Chairperson: Ms. Sandberg

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The meeting was called to order at 3.10 p.m.

Consideration of reports of States parties (continued)

Combined third and fourth periodic reports of Luxembourg on the implementation of the Convention on the Rights of the Child (continued) (CRC/C/LUX/3-4; CRC/C/LUX/Q/3-4; CRC/C/LUX/Q/3-4/Add.1)

1. *At the invitation of the Chairperson, the delegation of Luxembourg took places at the Committee table.*
2. **The Chairperson**, speaking as a member of the Committee, asked how the State party was meeting the challenges associated with multilingualism, what were the causes of school dropout and how long compulsory education was. She wished to know more about the education and protection of young children and if the State party intended to limit the duration of placements in institutional care or introduce measures to monitor them.
3. **Mr. Hoscheit** (Luxembourg) said that the issue of children in armed conflict was of great concern to his country, which currently chaired the Security Council Working Group on Children and Armed Conflict. It was, in fact, willing to receive children from war-torn countries, particularly unaccompanied Syrian children.
4. **Ms. Sevenig** (Luxembourg) said that her Government saw multilingualism as more of an asset than a source of difficulties. To promote the use of Luxemburgish, which was currently the mother tongue of only one in two families, optional courses were offered for children from 3 years of age. Under the Act of 2009 on the organization of elementary education, newcomer classes had been introduced to enhance the integration of foreign children, mostly from Portugal and the Balkans, who spoke none of the State party's official languages. Those children thus learned German in small groups, as that was the first language of instruction. However, given the initial difficulties German posed to speakers of Romance languages, the authorities were considering teaching those children to read and write in French, the language of instruction in secondary schools, but were afraid of the negative impact such a move could have on social cohesion. Upon arrival in Luxembourg, foreign children of secondary-school age were placed in classes for foreigners according to their level of education; there they were taught French so that they could enter regular schools the following year. Children from families requiring international protection who arrived during the school year were placed in one of the two specially created classes pending determination of their status. It went without saying that for some children the language barrier was a cause of school dropout, which was particularly high in Luxembourg. However, students who dropped out of school still had the option of returning to education by enrolling for "second-chance learning", which had been established in 2011. It should be noted that schooling was compulsory for all children between the ages of 4 and 16. Preschool education, for children between the ages of 3 and 6, focused on logical reasoning, mathematics, linguistic ability and the psychomotor development of children.
5. **Mr. Meisch** (Luxembourg) said that the childcare service voucher system had helped to increase the number of nursery places fivefold. The number of teachers had increased by a similar amount and, in order to recruit qualified personnel, Luxembourg had focused on training and drawn on the workforce of neighbouring countries. New institutions providing early childhood care were required to comply with very strict health and safety standards in order to receive approval.
6. **Ms. Wagener** (Luxembourg) said that a programme of contraception for women under 25 had been launched in January 2012 to reduce the number of unwanted pregnancies and journeys abroad for abortions. The Act on the voluntary termination of pregnancy was undergoing revision and, within the framework of the national programme for the promotion of emotional and sexual health, emphasis was being placed on awareness-raising

and information, training and recruitment, and cooperation with maternity wards and hospitals to promote early care for at-risk pregnancies.

7. Since 2005, Luxembourg had worked tirelessly to improve its provision of psychiatric care services, as demonstrated by the creation of a psychiatric platform. A review of the mental health of children and adolescents by the relevant ministries and partners on the ground had led to the establishment of mechanisms to gather more data on certain conditions and suicide, particularly with regard to contributing circumstances and risk factors. That had made it possible to quickly identify at-risk profiles and utilize the network of professionals in contact with young persons to prevent suicides within that population group.

8. **Ms. Wijemanne** asked if the State party was making efforts to identify the underlying causes of suicide and behavioural problems among young people, such as self-harming, and if it planned to introduce appropriate support and prevention systems.

9. **Ms. Wagener** (Luxembourg) said that her country had child and juvenile psychiatry services which worked with school medical services to enhance prevention. A number of associations, including the national associations of midwives and paediatricians, were participating in the implementation of the five-year plan for the period 2011–2015, which sought to promote breastfeeding and had provided for an awareness-raising initiative among unions and employers on the health benefits of breastfeeding for mothers and children. Nevertheless, much remained to be done in that area.

10. **Ms. Wijemanne** expressed regret that baby-friendly hospitals had not conducted any audits of the statistical indicators that they were required to keep. She asked if the low breastfeeding rate in the State party could be attributed to the large number of Caesarean births or the distribution of breast-milk substitutes in maternity wards.

11. **Ms. Wagener** (Luxembourg) said that the health authorities planned to monitor the relevant indicators at baby-friendly hospitals, which would serve as a guarantee of quality for the maternity wards concerned. A recent survey had shown that the breastfeeding rate among women who had undergone Caesarean sections (30 per cent) was virtually identical to the rate among women who had had natural births, which reflected the awareness-raising efforts in maternity wards. Campaigns should be held to encourage young mothers to continue breastfeeding their children for the first six months.

12. **Mr. Nogueira Neto** wished to know how the State party ensured that the needs of young transgender and transsexual people were taken into consideration.

13. **Ms. Wagener** (Luxembourg) said that there were no specific provisions for transsexual and transgender people; rather, the new national programme for the promotion of emotional and sexual health required that the individual needs of each person be taken into account.

14. Internationally, Luxembourg's youth suicide rate was at times high. However, the fact that statistics could be skewed in the case of smaller countries must not be ignored. Even a slight rise in the number of suicides could lead to a sizeable increase in the corresponding rate.

15. The State party had put in place a support network drawing on school medical services and on-site psychologists to help to prevent suicides. It was essential that efforts continued to be made to raise awareness among general practitioners and enhance cooperation among the different professionals involved.

16. **Mr. Hoscheit** (Luxembourg) said that two hotlines had been set up, one for children and the other for adolescents and adults.

17. **The Chairperson** asked if psychologists were present in schools every weekday.

18. **Ms. Wagener** (Luxembourg) said that psychologists were present at all times in secondary schools, while members of the multidisciplinary teams initially set up to assist with the integration of children with disabilities could act as confidants in primary schools.

19. Like suicide, road accidents, were the subject of various prevention campaigns. In addition, anti-obesity projects were under way in most schools and communes, and a comprehensive anti-obesity programme had been launched in 2006 by the various ministries responsible for education, agriculture, sport, health and the family. It was encouraging to note that obesity figures had fallen three years in a row.

20. **Mr. Hoscheit** (Luxembourg) said that his comments on the skewed nature of suicide statistics for small countries also applied to alcohol consumption. A large proportion of the alcohol sold in Luxembourg was actually purchased by cross-border workers and consumed abroad.

21. **Ms. Sevenig** (Luxembourg) said that the final word on whether children with disabilities were educated in regular or specialized schools rested with the parents. However, the Act of 2009 sought to promote the integration of all students into regular education and, to that end, multidisciplinary teams from the Department of Differentiated Education had been deployed in all schools. If necessary, an individual care programme was drawn up by a commission, in cooperation with parents, to allow children to learn at their own pace. During the 2012/13 school year, 629 children with disabilities had attended regular schools while 578 had gone to specialized institutions.

22. **Mr. Cardona Llorens** considered that the proportion of children in regular schools was still too low. Leaving the choice of the type of school to the parents was not necessarily in the best interests of the child, as parents were often overprotective.

The meeting was suspended at 4.30 p.m. and resumed at 4.45 p.m.

23. **Ms. Wagener** (Luxembourg) said that experience had shown the opposite to be true: parents tended to favour attending the local school, at least for the first few years. Most children in specialized schools required a level of care that would be difficult to integrate into regular schooling. Those schools were often close to regular schools with which they could carry out joint activities, such as holding special classes there. An awareness-raising campaign on inclusive education should be launched in the near future. Lastly, the Act on practical arrangements guaranteed the right of sick children or children with disabilities to certain arrangements when taking examinations, including allowing them more time or providing a computer, documents in Braille or a separate room.

24. **Mr. Cardona Llorens** asked for more information on measures to promote the integration of persons with disabilities in settings other than schools.

25. **Mr. Thyges** (Luxembourg) said that, to the best of his knowledge, the only obligation provided for by law was that all public buildings must be accessible to persons with disabilities.

26. **Mr. Meisch** (Luxembourg) said that the status of minors in conflict with the law had been the subject of democratic debate in his country for some 20 years. The prevailing position and the fundamental stance of the Luxembourg system was that offenders under the age of 18 should be treated as victims, which was why Luxembourg had been loath to build closed facilities for a long time. However, several cases had seen minors receiving custodial sentences in recent years. Thus, the decision had been taken to build a security unit for minors, which would soon be operational. It would be under the jurisdiction of the Ministry of the Family and Integration and could accommodate up to 12 boys and girls. Open and semi-closed facilities were also available for minors. While solitary confinement was theoretically possible there for a maximum of 6 days, it had only been imposed once – in the case of a youth who had been extremely violent towards other youths and teachers.

27. **Ms. Winter** (Country Rapporteur) asked if the law set a minimum age under which a child could not be placed in detention.
28. **Mr. Meisch** (Luxembourg) said that that was not yet the case, but it was one very possible outcome of deliberations on the matter. A recommendation from the Committee would help in that regard.
29. **Ms. Ney** (Luxembourg) said that, as her country had no juvenile criminal law, minors in conflict with the law were never considered criminals and, consequently, were not convicted as such. If they were deprived of their liberty, the focus was placed on their re-education and reintegration, after evaluation of their family and school situation, and the drafting of a “road map for the future” in cooperation with a juvenile court judge. When in institutional care, minors were monitored by teachers, who provided them with support on their way towards reintegration.
30. **Ms. Winter** asked if it was possible to bring a 16-year-old before an ordinary court.
31. **Mr. Gastaud** asked who drafted the “road map for the future” and what the reoffending rate was among minors.
32. **Ms. Oviedo Fierro** asked if the family was involved in the reintegration process.
33. **Ms. Ney** (Luxembourg) said that, in practice, very few minors were placed in detention; non-judicial measures, such as mediation, were preferred. Minors placed in institutional care maintained close contact with the judge concerned and were monitored by a teacher assigned by the National Office for Childhood. The family was very much involved in the reintegration of the minor and could call on the help of social services if necessary.
34. **Ms. Herczog** asked what was the average length of placement in institutional care and why foster families were not used more often.
35. **Mr. Meisch** (Luxembourg) said that placement varied in length according to the age of the child. There were an increasing number of foster families, but it was occasionally difficult to match a family to the child’s needs and cultural background.
36. **Ms. Herczog** asked if the young offender facilities took cultural diversity into account and enquired about training given to foster families.
37. **Mr. Meisch** (Luxembourg) said that teachers, educators and school psychologists were responsible for identifying family problems at an early stage and directing families and children to the appropriate services. The Act of 2008 on support for children and the family had enabled greater resources to be devoted to risk reduction and providing early care for vulnerable children. Foster families were recruited on the basis of their linguistic and cultural background to ensure the optimum environment for the children.
38. **Ms. Ney** (Luxembourg) said that a young person over the age of 16 could exceptionally be tried as an adult in serious cases. However, it was very rare for a prosecutor to request that a minor be brought before an ordinary court.
39. **Mr. Thyges** (Luxembourg) said that his country had ratified the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict in 2002, and that the recruitment of minors to fight in armed conflict was criminalized under the Penal Code and considered a war crime. The Code of Criminal Procedure provided for Luxembourg courts to exercise extraterritorial jurisdiction in the prosecution of perpetrators of offences covered by the Optional Protocol, including cases where an offence had been committed by a private security firm.
40. **Mr. Hoscheit** (Luxembourg) said that his country had raised the age of recruitment to its armed forces from 17 to 18.

41. **Mr. Gúran** (Country Rapporteur) asked if mechanisms had been introduced to identify unaccompanied minors likely to have been used as child soldiers.
42. **Mr. Thyès** (Luxembourg) replied that, to the best of his knowledge, such a scenario had never arisen. Nevertheless, the issue, though theoretical, warranted consideration.
43. **The Chairperson**, speaking as a member of the Committee, asked if measures had been taken to prevent the turning back of unaccompanied minors.
44. **Mr. Meisch** (Luxembourg) said that, on the basis of the European Directive laying down standards for the reception of applicants for international protection (Directive 2013/33/EU), his Government would establish a facility for the reception of unaccompanied minors, which would help to accommodate the increasing number of migrants in the best conditions possible.
45. **The Chairperson**, speaking as a member of the Committee, asked if the State party was indeed planning to compile a list of sexual offenders. Also, she wished to know more about services for struggling families.
46. **Mr. Meisch** (Luxembourg) said that the Act on support for children and the family allowed social services to put struggling families in contact with specialized services or social support agencies.
47. **Ms. Ney** (Luxembourg) said that the police compiled statistics on complaints received, which meant they could distinguish between sexual and other offences; however, to the best of her knowledge, there had never been any question of compiling a list of sexual offenders.
48. **Mr. Mezmur** asked what the time bar was for the sexual abuse of minors and whether the State party had considered prosecuting parents who had subjected their daughters to genital mutilation abroad.
49. **Ms. Ney** (Luxembourg) said the Crime Victims Act of October 2009 provided that the limitation period for indecent assault or rape committed after 1 January 2010 began to run only when the victim came of age.
50. **Ms. Wagener** (Luxembourg) said that international migration was a recent phenomenon in her country and instances of female genital mutilation were not common. Nevertheless, an information booklet on the practice had been produced in 2011 and distributed widely among health professionals and at-risk families. To the best of her knowledge, the law did not yet provide for the prosecution of parents of children subjected to such mutilation abroad.
51. **Mr. Meisch** (Luxembourg) said that his Government had launched the Bee Secure Stopline and website under a European Commission programme; it allowed the public to report illegal Internet content anonymously. As part of the initiative, over 50 training sessions had been held for young people and many information sessions had been organized for parents and teachers.
52. **Ms. Winter** said that the situation of children in Luxembourg was very satisfactory overall, but called on the State party to follow the best practices of other countries in order to resolve certain problems, particularly those relating to juvenile justice.
53. **Mr. Hoscheit** (Luxembourg) said that the discussion had been very informative and beneficial; the questions and suggestions had contributed to an assessment of the situation in the country. The competent authorities would study the Committee's recommendations very carefully.

The meeting rose at 5.55 p.m.