

ORIGINAL: ENGLISH

CHILD SEXUAL ABUSE: A SILENT HEALTH EMERGENCY
(document AFR/RC54/15 Rev.1)

The Regional Committee,

Alarmed by the increasing reports of child sexual abuse in Member States and the culture of silence that surrounds it;

Convinced that child sexual abuse constitutes a major violation of the rights of the child;

Concerned by the increasing occurrence of child trafficking and sexual abuse, especially involving those children living in difficult circumstances, such as street children, children affected by HIV/AIDS, orphans, those internally displaced and those living in refugee camps;

Aware that stigma and inadequacies in reporting mechanisms, law enforcement and clinical care and management are deterrents to reporting child sexual abuse;

Recalling existing international and regional treaties and legal instruments, in particular article 19 of the United Nations Convention on the Rights of the Child and article 16 of the African Charter on the Rights and Welfare of the Child which provide for protection of children from all forms of torture and inhuman or degrading treatment, including sexual abuse or exploitation perpetrated by parents or others responsible for their care;

Conscious of the seriousness of the immediate and long-term consequences on child survivors of sexual abuse, including sexually transmitted infections, HIV/AIDS, unwanted and high-risk pregnancy, abortion, depression, suicide and other psychosocial problems;

Appreciating the efforts of Member States to provide relevant services to improve the health and well-being of children;

1. **COMMENDS** the Regional Director for identifying child sexual abuse as a public health concern and breaking the silence surrounding it in the African Region;
2. **APPROVES** the document, “Child Sexual Abuse: A Silent Emergency” (AFR/RC54/15 Rev.1) and the agenda for action which provides orientation and strategic direction for the prevention and management of child sexual abuse through coordinated multidisciplinary efforts;

3. URGES Member States:

- (a) to break the silence surrounding child sexual abuse through open national and subnational dialogue using all available channels;
- (b) to create or strengthen institutions that are responsible for the social needs of children, including prevention and management of child sexual abuse;
- (c) to establish multisectoral, multidisciplinary and coordinated responses involving health professionals, social scientists, law enforcement agencies and the community to prevent child sexual abuse and provide quality care and support to those affected;
- (d) to develop national actions plans for the prevention, care and management of child sexual abuse and integrate these into the national child and adolescent health agenda;
- (e) to mobilize the public and private sectors, nongovernmental organizations, communities and trained professionals to improve surveillance and reporting on child sexual abuse;
- (f) to strengthen capacity of health professionals to use standardized protocols for clinical care and management and forensic investigations;
- (g) to strengthen national mechanisms for implementing and reporting on ratified United Nations conventions and treaties related to child sexual abuse and exploitation;
- (h) to strengthen national capacity for research to better understand the contributory factors to child sexual abuse.

4. REQUESTS the Regional Director:

- (a) to continue to play a leadership and advocacy role for integrated prevention, care and management of child sexual abuse;
- (b) to provide technical support to Member States for reporting on ratified United Nations conventions and treaties related to child sexual abuse and exploitation;
- (c) to support Member States in their efforts to adapt the agenda for action on child sexual abuse for implementation at national and subnational levels;
- (d) to mobilize resources and encourage partnerships with relevant United Nations agencies, especially UNICEF, UNESCO and UNIFEM, for the implementation of this agenda for action, including the development of special child care and community surveillance centres;
- (e) to report on progress made by Member States in the implementation of the agenda for action during the fifty-sixth session of the Regional Committee, and every two years thereafter.