

Universal Periodic Review- second cycle

CAPE VERDE: UNCT's contributions

I. Background and framework

A. Scope of international obligations

1. In Cape Verde, the growing consensus at the national level and the United Nations' System support has led to the signature of the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights (ICESCR) and the Optional Protocol to the Convention Against Torture and Cruel Inhuman or Degrading Treatment or Punishment (CAT) in 2011.
2. The advocacy effort is growing towards the ratification of both Optional Protocols. Indeed, the Parliament of Cape Verde has ratified the **Optional Protocol to the International Covenant on Economic, Social and Cultural Rights** (25th July 2012, but not transmitted to the committee yet).
3. The National Commission for Human Rights and Citizenship is preparing an awareness campaign for the ratification of the **Optional Protocol to the Convention against Torture and Cruel Inhuman or Degrading Treatment or Punishment**.
4. In 2011 Cape Verde ratified the following international human rights treaties/optional protocol:
 - **Convention on the Rights of Persons with Disabilities**
 - **Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women**
 - **Convention on the Rights of Persons with Disabilities**

	<i>Status during previous cycle</i>	<i>Action after review</i>	<i>Not ratified/not accepted</i>
<i>Ratification, accession or succession</i>	ICERD (1979)	CRPD (2011)	
	ICESCR (1993)	OP-CAT (signature only, 2011)	
	ICCPR (1993)		
	ICCPR-OP 2 (2000)		
	CEDAW (1980)		
	CAT (1992)		
	CRC (1992)		
	OP-CRC-AC (2002)		
	OP-CRC-SC (2002)		
	ICRMW (1997)		
	CPED (signature only, 2007)		
<i>Reservations, declarations and/or understandings</i>			
<i>Complaint procedures, inquiry and urgent action¹</i>	CAT, art. 20 (1992)	OP-CEDAW, art. 8 (2011)	ICERD, art. 14
	ICCPR- OP 1 (2000)		ICCPR, art. 41
	CPED (signature only, 2007)	OP- ICESCR (signature only, 2011)	CAT, arts. 21 and 22 OP-CRC-IC ICRMW, arts. 76 and 77 OP-CRPD

5. In 2011, Cape Verde ratified the following other main international instruments:

-2002 Rome Statute of the International Criminal Court

- ILO Convention No. 138 on the Minimum Age for Admission to Employment

- 1948 Convention on the Prevention and Punishment of the Crime of Genocide

B. Constitutional and legislative framework UNCT

6. In 2010 there was a revision of the Constitution, approved by consensus of all political parties. Its main focus was on the judicial system, to ensure courts and judges are more independent: Supreme Court judges were appointed by Parliament or the President of the Republic; all Judges are now elected inside the justice structure by judges. The High Council for the Judiciary gained more independence. To combat slowness of justice, the court of appeal was created. Previously the extradition of cape-verdean nationals was not allowed, the revised Constitution enables foreign citizens that became cape-verdean to be extradited, if they committed a crime abroad.

7. A special law against gender based violence (GBV) was passed in 2011 (Law 84/VII/11). It is based on principles of strengthening the State's and other public powers' obligations in adopting GBV primary prevention, assistance and repression policies. GBV is now a public crime and offenses include physical, psychological, sexual, moral and patrimonial violence, as well as harassment. In terms of procedures, GBV cases are now urgent in all phases and involved professionals, especially the legal and medical ones, have specific functions and deadlines which, if not fulfilled, can lead to a disciplinary sanction. Support services are to be inter-disciplinary and decentralized.

8. The law establishes a period of one year for a range of services to be set up (support centers for victims, aiming at an integral response to their situation, treatment of the perpetrators through the implementation of psychological, psychiatric and educational programs, shelters for victims, support fund, among others).

9. The GBV law dedicates its 2nd chapter to awareness and assistance measures, including the implementation of national awareness plans; the role of education to promote gender equality; training of all professionals involved in the treatment of GBV victims; establishment of protocols between health and justice sectors, police authorities and civil society; involvement of the media.

10. The Parliament has approved in generality, by consensus, the law on Terrorism Prevention and Repression (2 November 2012)

11. The *Statute of Children and Adolescents* has been developed and submitted to the Minister of Youth, Employment and Development of Human Resources (August 2012), by the multi-sectoral *Technical Team on Legal and institutional Reform on Matters of Childhood and Adolescence*. This document is the first to gather all legislation related to children and adolescents, and foresees the restitutions of children and adolescents rights against public institutions, civil servants, private institutions or individuals that threaten or violate their rights.

C. institutional and human rights infrastructure and policy measures

12. Under the International Covenant on Civil and Political Rights, in its concluding observations (March 2012), the Human Rights Committee "*While welcoming the establishment of the National Commission for Human Rights and Citizenship (NCHRC) expressed concerns regarding the lack of information on its operations and its independence*". In 2011, with UN support, the Commission submitted to the Government, a new Statute in compliance with the Paris Principles to be approved by the Parliament (submitted October 2011). The proposed statute is expected to provide the Commission with the autonomy and independence needed

13. In addition, there is growing national consensus regarding the importance of increased assumption by the government of reporting responsibilities to Treaty Bodies, in compliance with

set calendars. With the proposed revision of the NCHRC statute, national authorities are also examining the institutional modalities to be put in place in order to reinforce governmental accountability for follow up and reporting.

14. The Government is engaged in an administrative reform program aiming at cost reductions and improved efficiency of public action. As part of these efforts, the merging of the ICIEG and the ICCA is envisaged with modalities to be defined, in search of greater impact for public interventions in favor of gender and the family.

II. Cooperation with human rights mechanisms

A. Cooperation with treaty bodies

15. Since the 1stUPR cycle, Cape Verde presented its report on the CEDAW (2010).
16. Cape Verde drafted its report to the CESCR, which was due in 2011. A validation workshop with government representatives, civil society organizations and the United Nations was organized in 2012. The report is to be officially submitted by the Government.
17. Cape Verde has started drafting its report to the CRC, which was due in 2009. To this effect a working group has been established and is drafting the first version of the report, expected to be submitted in 2013.
18. Cape Verde still has several other overdue reports: reports on the Convention Against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment (no report submitted, latest report was due in 2009), the International Covenant on Civil and Political Rights (report was due in 1994, next round to be submitted by 30 March 2013), International Convention on the Elimination of All Forms of Racial Discrimination (report was due in 2006), the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (report was due in 2004).
19. A national action plan for the follow-up on the UPR recommendations was elaborated and validated in 2012. During the process the UPR recommendations were translated into Portuguese.

B. cooperation with Special Procedures

20. There has been no visit of special mandate holders to Cape Verde.
21. No standing invitation has been issued by the government.

C. Cooperation with OHCHR

22. There has been no contribution from Cape Verde to OHCHR financing.
23. Cape Verde has received technical assistance from the OHCHR Regional Office in Dakar, implemented in partnership with the UNCT, for a training for State, non-State actors and the NHRI on the common core document to treaty bodies and reporting on the ICESCR and CAT, for the elaboration of the report on the ICESCR, the CEDAW report and the National Action Plan for the follow-up of UPR recommendations.

III. Implementation of international human rights obligations

A. Equality and non-discrimination

24. The Constitution guarantees equal rights to all citizens, including non-nationals. This however does not exclude the occurrence of discriminatory prejudice toward specific groups, such as women, disabled persons, immigrants, elderly, people living with HIV, persons with a mental illness and based on sexual orientation.

25. On gender equality, its promotion is coordinated by the Cape Verdean Institute for Gender Equality and Equity (ICIEG). The National Equality Plan, initially 2005-2009, was revised in 2009 and extended to 2011. Presently a two year interim Gender Equality Plan (2011-2012) is under implementation and the new gender plan is to be developed after PRSP III is approved.
26. The implementation of the Gender Equality Plan contributed to putting gender equality on the public agenda; strong advocacy was made for gender disaggregated data and gender specific indicators resulting, among others, in the inclusion of a domestic violence module in the Demographic Health Survey (DHS), which was key to raising awareness on this issue and the need to address it; in 2012 the National Statistics Institute and the ICIEG signed a protocol and on-going activities include: the elaboration of a specific chapter on **Women and Men** for Census data; a time use survey the establishment of a gender equality observatory.
27. Capacity building for gender mainstreaming in sectors has received attention, with trainings of key actors and the development of support tools, an effort that has to be sustained over time to ensure the effective use of a gender approach in planning and budgeting. At local level gender equality plans have been developed by 3 municipalities. Several capacity building initiatives have been implemented for specific sectors/groups (teachers, media, parliamentarians, etc.).
28. No data exists on racial discrimination; however prejudice certainly exists, especially with regard to immigrants from West Africa.
29. Although there are no reported cases of discrimination against people living with HIV (PLHIV), social prejudice exists. Nonetheless positive results have been achieved, as reflected in indicators on acceptance of PLHIV: acceptance has increased from 16%² to 24%³ (2005 to 2009), and further up 31% in 2012⁴. Awareness efforts for non discrimination have been made by Government, public sector and civil society through national campaigns (media and community level). HIV/AIDS care has been integrated in Reproductive Health Services at national level, avoiding the discrimination of women and HIV positive pregnant women. The HIV/AIDS Law (19/VII/2007) covers several aspects, including prohibition of the discrimination based on the HIV/AIDS status. The law could however better reflect human rights and gender equality, as it omits the needs of women and of specific vulnerable populations in the context of HIV.

B. Right to life, liberty and security of the person

30. The National Commission for Human Rights (CNDHC) has reported complaints of ill treatment by police. Police and prison guards have been trained in human rights, an initiative that needs to be recurrent.
31. Cape Verde still faces challenges in complying with human rights obligations in terms of prison conditions: the country has overcrowded prison facilities and inmates are not separated by age as set out by the law on special imprisonment regimes. Measures to mitigate constraints have been taken, including the construction of a new regional prison facility (island of Sal) and installation of a Video Surveillance System in the 2nd central prison (island of S. Vicente).
32. Some public policies have a direct or indirect impact on the protection of life, such as resolution 32/2008 on control of firearms circulation, or the GBV Law, already mentioned.
33. On GBV, a National Action Plan has been implemented (2008 to 2011), under the coordination of the ICIEG, ensuring a programmatic approach in this domain and involving a wide range of actors. The capacity of key sectors has been strengthened, in particular of the National Police (high level meeting with decision makers, training of an internal pool of trainers on *HR, Gender and GBV*, which has been replicated to over 250 police officers, a procedures manual for GBV cases currently being finalized). An annotated version of the GBV law was prepared, to ensure its harmonized application, and 6 workshops were conducted with magistrates and lawyers end of 2011, to discuss the Law and its practical application, and two more in November 2012.

34. The establishment of a GBV victim inter-institutional support network (providing free of charge legal and psychological counselling, medical and police attention, through a networks of public and civil society organizations), now covers 12 of the 22 municipalities (4 in 2008). The GBV network ensures support services to over 2,000 GBV victims a year.
35. In order to establish the programme for the rehabilitation of men offenders, foreseen by Law, a core group was trained in Brazil (staff from the General Direction of Penitentiary and Rehabilitation Services, ICIEG, White Ribbon Network of men), which is currently piloting 2 rehabilitation groups. The regulatory texts for the establishment of new services under the GBV law are being drafted (support centers, shelters for victims and social support fund). To note that the diploma creating the Office for Criminal Assets, establishes that 15% of income generated will revert to combating GBV (article 17). A new GBV plan is to be designed and should, among others, target sectors not fully involved as yet, such as health, education.
36. The local dissemination of the GBV Law is being conducted through local workshops and information materials. A White Ribbon Network of men against violence and for gender equality was established in 2009.
37. Homicides have increased, peaking in 2011, especially between youth, in Praia and other urban centers. Increases in criminality in cities, and the circulation of small arms remain preoccupations for the authorities and important investments are being made in capacity building of the police, mobilization of local authorities and definition of new municipal police modalities for better proximity interventions.
38. On children's registration, 2.7% of the 0-17 year olds do not have birth registry in Cape Verde (5,117 children)⁵. When data is disaggregated by age group, 81% of these children are 0 to 4 years and 1 in every 4 children under one year has not been registered yet. The Code for Civil Registry is in the process of revision, in view of improving the legal framework on this matter, and eliminating the late registry of children.
39. The Cape Verdean Institute for Children and Adolescents (ICCA) coordinates public policy for the protection of children. It has decentralized structures and is represented in all municipalities; 5 Protection and Reintegration Centers exist; 6 Centers for Day Care; 2 Emergency Centers; 5 Delegations of ICCA (islands of Sal, São Vicente, Santo Antão, Fogo and Santa Catarina of Santiago); 17 Local Committees to defend the rights of children and adolescents (in partnership with Town halls, Health and Education Delegations, National Police, Courts, public prosecutors). A real constraint to the work of the ICCA and its partners is the lack of human resources qualified for social work at all levels. Additionally little work is done at socio-community level to work with identified families, which would contribute to reduce ICCA's interventions in crisis situations.
40. The ICCA's immediate protection response against abuse and sexual exploitation is through the Child Emergency Program, which includes the 2 Emergency Centers and a National free hotline for case reporting. The inter-institutional network for the prevention, protection and combat of abuse and sexual exploitation of children and adolescents is in place since 2007. Its evaluation would enable informed decision on measures to implement for improvement.
41. Challenges to the prevention and combat of sexual abuse include: revision of the legal framework, increasing the upper limit of age at which sexual abuse is considered a public crime; consider sexual crimes as having no bail; ensure speedy processes in court, as has been achieved in the case of GBV; review severity of sentences for rape crimes; advocacy targeting public prosecutors and judges for awareness as to the gravity of this type of crime; definition of a strategy of coordination of policies, programmes, projects intervening in prevention, protection, integral attention to children and adolescents victims of abuse and sexual exploitation, or at risk.

42. The fulfillment of the rights of children and adolescents and their full development is also linked to poverty and inequities, which affect women in particular (56% of poor households are headed by women)⁶, with risks of a perpetuation of the cycles of poverty related to relatively high teenage pregnancy rates (26.2% of pregnancies occur among 15-19 year olds⁷). As women remain the principal caregivers and providers for a majority of children in Cape Verde, strengthening access and quality of services for small children (0-6) could impact positively on child protection and development. On the other hand, the further development of specific support services could contribute to improving women's employability and increasing their share in economic benefits.
43. Cape Verde does not have specific legislation on Trafficking In Persons (TIP). However, progress has been made with the drafting of a bill of law on smuggling of migrants including some provisions on the fight against TIP (mid-2012), to be approved by the Parliament. However, in order to effectively address the important risks associated with trafficking through adequate public interventions, it is increasingly imperative to invest in data collection and analysis of the situation.
44. During 2008, 2009 and part of 2010, Cape Verde experienced a wave of illegal immigrant boats with children on board. Differentiated conditions of detention were established for the children and, after investigating their country and family origin, they were repatriated based on CRC standards. These measures contributed to demobilize networks that use children as a shield for illegal immigration. Government has recognized the need for permanent mechanisms of institutional response to such situations.

C. Administration of justice, including impunity and the rule of law

45. Cape Verde enjoys a sound democracy, with strong institutions, therefore assuring the rule of law. There is a perception of impunity among the population, related to the slowness of administration of justice. For the judicial year 2010-2011⁸, 32,196 criminal cases were accumulated from the previous judicial year (2009-2010), 18,497 new cases entered in that judicial year (2010-2011) and only 8,950 were resolved. On the positive side, even though the accumulated cases show an increasing tendency, as do new cases, so do the resolved cases (up 22,5% globally and up 54,6% for the capital, Praia), as a result of measures implemented.
46. The Government has conducted a situation analysis identifying weaknesses and measures taken include institutional reform, capacity building of justice staff (including judges, prosecutors and justice officials, investments in justice infrastructure and equipment. The Parliament regularly monitors the Status of Justice. Measures for justice system reform need to continue.
47. The Government is currently working on the reform of the juvenile justice system and, taking into account the increasing levels of violence and criminality, has requested technical assistance from the UN. A needs assessment of the juvenile justice system has been conducted, including legislation, practices and institutional capacities, which has enabled the Government to see the gaps, especially in terms of an inter-sectoral response for the protection of children in its intersection with the response of the justice system. A programme to support the Government in Juvenile Justice Reform is being designed and foresees support to legal and policy reform for justice for children, so that up to 18 years they benefit from the guarantees of the justice system, namely protection, and those under 21 years that are suspects or charged with an infraction benefit from a special regime for children and youth.

D. Right to privacy, marriage and family life

E. Freedom of movement

F. Freedom of religion or belief, expression, association and peaceful assembly, and right to participate in public and political life

48. Women's presence in decision making has evolved positively in the last decade, although at a modest rate: legislative power: 11% to 21% (2001 to 2011); local power: 16% to 23% (2001 to 2012), however only a slight difference from the 2008 local election (22%). Parity has been achieved at the executive power for the 3rd consecutive cabinet: 36% to 47% (2001 to 2011)⁹.

G. Right to work and to just and favorable conditions of work

49. Unemployment is a challenge, particularly among youth and women. The 2011 unemployment rate was 12.2%¹⁰ (up from 10.7% in 2010¹¹), 11.4% for men and 13.2% for women. Young people are especially affected: unemployment was 21.3% in 2010 for 15-24 years old: 18.3% for young men and 25.5% for young women (to note additionally that women are out of the labor market for a significant amount of time: their inactivity rate is much higher than men's: 48.6% as opposed to 32,6% for men).

50. A workshop on protection of maternity was organized by the General Direction of Labor (August 2012). An action plan to raise awareness and promote protection of maternity is to be prepared.

51. In the field of public policies, in addition to the revision of the Labor Code and regulations under the law on health and safety at work, the government conducted capacity building for the General Inspection of Work (IGT), for increased supervisory capacity. In terms of inspections, the IGT has observed that security is greatly neglected in civil construction.

52. On persons with disabilities, the Law on Civil Service (Law 42/VII/2009) states «*In all open competitions for employment, there must be a fixed number of places for people with disabilities, rounded to the unit, unless the disability is incompatible with the performance of the tasks that the job or position requires*».

H. Right to social security and to an adequate standard of living

53. Data on poverty is from 2007¹²: poverty has been reduced from 49% (1990) to 26,6% and it affects particularly rural areas (44% versus 13% urban) and women (56% of poor families are headed by women).

54. There has been a significant expansion of the social security system, which has come to encompass different new occupational categories, such as government employees, self-employed and domestic workers. A minimum value has been established for the contributory basis. This measure ensures the integration of workers with low salaries, a legal provision of great importance in general and for women, those with lower incomes. Despite the obligation to contribute, this obligation does not occur during periods of proven inability to work (situation of maternity is cited). The social pension of the non-contributory system, created in 2007, has expanded coverage. It targets elderly persons above 60 and persons with a permanent incapacity. In 2010 a mutual fund was established to partially cover health expenses and a funeral subsidy. All these reflect significant progress towards universal coverage. Regulatory and supervisory aspects of the system are being developed.

55. Programs and policies to overcome serious housing and social problems are on-going, reflecting the rather limited achievements in the domain of housing and urbanism, compared to other social rights. Living in precarious and unhealthy housing is particularly common in Praia and Mindelo, the country's bigger cities, and the more touristic islands of Sal and Boa Vista.

56. As far as the right to food is concerned, at policy level the Ministry of Rural Development has a programme dedicated to "*Promotion of Right to Food and access to social services*" which will be reflected in the forthcoming Poverty Reduction Strategy Paper. At regional level, the Community

of Portuguese Speaking Countries (CPLP) presented in October 2011, a Regional Strategy for Food Security and Nutrition, which identified Cape Verde's main constraints to the Right to Food: (1) the high dependence on foreign aid, both in terms of budget and of food; (2) the lack of an adequate institutional framework and institutional restrictions in terms of human and financial resources; and (3) a low level of social participation and lack of understanding of Right to Food.

I. Right to health

57. The investments made in institutional and technical strengthening of the health sector have translated into significant reduction of child and maternal mortality, and life expectancy is approaching that of European countries. Efforts are needed to address epidemiological transition, with Cape Verde increasingly facing health problems linked to non-communicable disease and socio-behavioral illness, while still facing the challenges of communicable diseases.
58. Efforts are underway for targeted attention to adolescent and youth sexual and reproductive health, though coordinated action between public health structures, schools, youth centres and NGO initiatives.
59. Prevention is a pillar of the combat to HIV in Cape Verde and the prevention of mother to child transmission (PMTCT), integrated in reproductive health services, provides pregnant women with access to a complete package, according to needs. The coverage of the program has gone up from 13% to 98% (2004 to 2011)¹³. Health Services promote exclusive breastfeeding and a human milk bank has been established, the 1st of its kind in Africa, providing an alternative option for specific groups, such as HIV positive mothers that decide not to breastfeed.
60. A Public Health Action Plan has been developed in the context of Climate Change, to strengthen the country's response to the impacts of climate change on the populations' health.
61. Challenges persist in terms of the quality and client orientation of the provision of care. In 2011, under the proposal of the Association for Consumer's Defense (ADECO), a Statement of rights of health users was approved.
62. Other challenges include socio-community attention to target social issues, including pregnancy among teenagers, the reduction of mortality by cervical cancer (2nd cause of cancer mortality in the country), and elimination of malaria, poliomyelitis, congenital rubella syndrome and dengue control.
63. In the framework of enhancing the right to health of vulnerable groups, efforts are being made to strengthen prevention and treatment of drug dependency and HIV/AIDS in prison settings: a Protocol has been signed between the General Direction of Penitentiary and Rehabilitation Services and the National Drug Dependency Treatment Centre, to improve collaboration on drug dependency treatment in prison settings; both prisoners and prison guards have received training on the prevention of drug use at national level.

J. Right to education

64. The education indicators are among the highest in Africa and solid measures have been taken to ensure the right to education (with large and increasing access to all levels, in rural and urban settings and without sex discrimination). The issue of quality of education is now more clearly being addressed. Continuous training of teachers is being implemented, in general and specific pedagogical skills, as is the case with the strengthening of national and local capacity to address special education needs.

65. Curricula reform is focusing on quality education through a competency approach, although the reform process is taking longer than expected, due to the lack of human resources, among others constraints. The Ministry of Education has however opted for the immediate generalization of the reform process in primary education, which has started this academic year (2012/2013). This is a process that will continue to require considerable resources, as all teachers need to receive training (ongoing) to adapt to new programs, methodologies, tools and cross cutting issues.
66. The Framework Law on the education System, reviewed in 2010, is a considerable gain: it introduces greater coordination between general, technical and professional education; increases universal primary education (compulsory and free) from 6 to 8 years, among others; foresees a literacy program with a focus on citizenship, democracy and equality, especially in the context of semi or illiterate adults and those who abandoned the school system early. Although the Law is bold and generous, it is not specific in the definition of the conditions to guarantee its implementation.
67. Within education, specific aspects require attention, such as high drop-out rates for boys, the causes of which need to be better understood for adequate action (Ministry of Education plans to do such a study); regarding teenage pregnancy and alternative measures to suspension of pregnant students, the integrated approach existing in some municipalities (education, health, youth) needs to better target schools (considering the significant number of youth in school).
68. For the school year of 2008/2009, 67.7% of children attended pre-school, an increase that amounts to 0.14%, from the previous year¹⁴, which is lower than the increase in other levels of education. The challenge is that pre-school education tends to exclude children from disadvantaged families and rural areas, as these families face difficulty with costs, relative distance to residence and scarcity of kindergartens. More than half of the country's municipalities have net rates of pre-school enrollment lower than the national average. Quality of services is also uneven.

K. Cultural rights

L. Persons with disabilities

69. Civil society has been dynamic in raising awareness and action for the protection of persons with disabilities, in particular the most vulnerable. In addition, groups exist who lobby authorities on disability issues. Among them some NGOs in the following areas: children with cerebral palsy, deaf-mute children, visual impairment; physical disabilities and mental health.
70. Regulatory texts have been prepared for the Framework law on prevention, rehabilitation and integration of persons with disabilities (on physical accessibility, adjustment of the educational process to special educational needs, health care for prevention, treatment and rehabilitation, and the program for employment and qualification). There is awareness on the need to revise the framework law itself.
71. Apart from an encompassing legal framework, a national strategic plan on disability is required, with a view to a coordinated response in preventing and improving the living conditions of disabled people. Systematic data on disability is not available, including information on their socio-economic profile, which makes formulation of better targeted public policies difficult.
72. The National Health Plan identifies persons with disabilities as a priority, as specified in the constitution, but no specific measure is put forth. The lack of qualified human resources, both in education and health, constrains the implementation of policies for the disabled. There is only one disability rehabilitation center in the country, located in Praia. In terms of the education

system, special education is gaining ground, with the training of teachers and acquisition of equipments, establishment of special needs units within some schools.

M. Minorities and indigenous peoples

N. Migrants, refugees and asylum seekers

73. In 2009 a Centre for Migrant Support in the Origin Country - CAMPO was created in Praia to promote regular migration and pre-departure orientation for potential migrants going to Europe. Initially an EU funded project, it became a governmental service and now also provides the same services in relation to the USA.

74. In recent years Cape Verde has also become a country of destination (immigrants are estimated to be 4% of the population). In 2011 the Government created the Unit for Coordination of Immigration which has developed a National Policy for Immigration (March 2012) and provides services to promote the integration of immigrants.

O. internally displaced persons

P. Right to development, including environmental issues

75. Cape Verde has a fragile environmental situation, characterized by peculiar climatic, geological, geomorphologic, marine, and terrestrial ecosystems. The country has taken decisive action to combat desertification, for soil and water conservation, and to reduce greater environmental degradation while reducing poverty. The country is highly vulnerable to climate change risks and climate change is expected to impact significantly on Cape Verde's natural and social system, not least of which will be the availability of water and access to energy resources. In this regard mainstreaming climate into Cape Verde development process is quite important.

76. Key strategic document such as the PRSP were screened in 2011 for both climate risks and opportunities. Important interventions on soil conservation and surface water mobilization are underway, aimed at alleviating poverty and degradation pressure over the natural resources.

Q. Human rights and counter-terrorism

77. The recent approval of the law on terrorism will make it possible, in the future, to assess the extent to which human rights are respected in counter-terrorism provisions.

R. Situation in or in relation to specific regions or territories

² INE/Ministry of Health (2005) Demographic Health Survey (DHS)

³ INE (2009) AIDS Prevention Indicator Survey (APIS)

⁴ INE (2012) AIDS Prevention Indicator Survey (APIS)

⁵ INE (2010) Population Census

⁶ INE (2007) QUIBB – Questionário Unificado de Indicadores de Bem Estar Básico

⁷ Ministry of Health (2010) Annual Health Statistical Report

⁸ Public Ministry (2012) Annual report on the state of justice for the judicial year 2010/2011

⁹ ICIEG – data compilation of electoral results

¹⁰ INE (2011) Inquérito Multi-objetivos – Inquérito ao Emprego

¹¹ INE (2010) Population Census

¹² INE (2007) QUIBB – Questionário Unificado de Indicadores de Bem Estar Básico

¹³ Ministry of Health (2012) Presentation of PMTCT's program results

¹⁴ Ministry of Education (2010) Annual Education Report