



Latin America and the Caribbean  
**30 years** after  
the **adoption** of  
the **Convention** on  
the **Rights of the Child**



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Latin America and the Caribbean  
30 years after  
the adoption of  
the Convention on  
the Rights of the Child



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## Foreword

The adoption of the Convention on the Rights of the Child by the United Nations General Assembly on 20 November 1989 was a major global landmark: a clear international commitment to protect, promote and ensure the rights of children and adolescents to develop and reach their full potential and to be heard.

The Convention on the Rights of the Child is the first binding agreement on the fulfilment of the civil, political, social, economic and cultural rights of children and adolescents and it is the human rights treaty most widely ratified around the world. It acknowledges children and adolescents as subjects of law and not merely objects of protection. Following the ratification of the Convention, States have fulfilled the obligation to adopt children's and adolescents' codes or child protection legislation that recognizes the rights of children and adolescents. This legislative commitment has underpinned visible achievements, transforming the status of children through clear progress in the form of free, mandatory education, falling illiteracy rates and declining infant mortality.

Economic and social conditions are complex for the Latin American and Caribbean countries today. The region is challenged by a series of emerging transformations, including rapid technological change and its implications for labour and employment; the demographic transition, characterized by population ageing and shifts in migratory dynamics; climate change, pollution and environmental degradation; the increased frequency of disasters; and the necessary transition towards an environmentally sustainable economy. These changes are in addition to persistent structural bottlenecks and gaps in the region, such as low productivity, high levels of inequality and social exclusion. This difficult context threatens to block the path towards the great aims of ending poverty in all its forms and leaving no one behind, which are commitments enshrined in the 2030 Agenda for Sustainable Development adopted by the 193 countries represented at the United Nations General Assembly in September 2015. These complex conditions and bottlenecks complicate the context in which the region's children and adolescents are growing up and in which their families function. It is thus an imperative to identify and tackle pending debts in the full exercise of rights and to anticipate possible risk areas that need to be addressed in order to ensure their well-being.

Almost 30 years after the signature of the Convention on the Rights of the Child, the Economic Commission for Latin America and the Caribbean (ECLAC) and the Regional Office for Latin America and the Caribbean of the United Nations Children's Fund (UNICEF) now offer this study as an account of the achievements made towards ensuring children's and adolescents' rights, together with the challenges that governments—and Latin American and Caribbean communities more broadly—still need to address in order to guarantee the full development of children and adolescents. This attempt also reviews the public policies that have supported progress towards fulfilling the rights of the region's children and adolescents to life and development, to a decent life, to health, to social protection, to food and housing, to education, to protection, to participation and to an identity. It sheds light on remaining challenges to ensuring the real application of children's rights which, as human rights, are interdependent and must be universal.

Although many advances have been made in Latin America and the Caribbean, as this study describes, inequalities persist that make it more difficult for certain groups of children to access and exercise these rights. Understanding the structural gaps that mark Latin American and Caribbean societies requires broader recognition and analysis of the nature of inequality, and it is essential to

continue progressing with fulfilment of the Convention on the Rights of the Child. Social inequality in the region is heavily shaped by its structurally uneven production matrix, which results in inequality being determined basically at the level of the household. However, the inequality matrix also has other axes —such as gender, ethnicity, race and territory— whose intersection and interaction are crucial in explaining the magnitude and reproduction of the gaps identified in the exercise of children's and adolescents' rights in the region.

The spotlight on these debts still owed to Latin American and Caribbean children represents a call for concerted action and for the design and implementation of universal and inclusive social policies, so that all children, regardless of the conditions of their birth, may exercise the same inalienable rights. Almost 30 years on from the landmark adoption of the Convention on the Rights of the Child, ECLAC and UNICEF ratify their commitment to support the States and communities of the Latin American and the Caribbean region in progressing towards its fulfilment.

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## Introduction

The adoption of the Convention on the Rights of the Child<sup>1</sup> on 20 November 1989 was a major landmark in international legislation on ensuring, protecting and promoting the rights of children and adolescents.

By contrast with previously adopted standards and rules on the rights of children and adolescents, the Convention represented the first binding international treaty on the fulfilment of the civil, political, social, economic and cultural rights of this age group. The Convention acknowledges children and adolescents as subjects of law and recognizes the family as a subject of law requiring protection and assistance from State institutions in order to be able to fully discharge its responsibilities.

The Convention on the Rights of the Child is structured around three fundamental principles: (i) that rights are universal and must therefore be ensured and protected for all children equally, (ii) that rights are indivisible, and there is thus no hierarchy among them, and (iii) rights are interdependent, that is, to ensure fulfilment of one right, fulfilment of the others must also be ensured. As well as these principles, the Convention establishes four others to guide the interpretation of its provisions: the best interests of the child, the right to freedom from discrimination, the right to life, survival and development, and lastly, the right to freedom of expression and to be heard.<sup>2</sup>

All the Latin American and Caribbean countries have ratified the Convention on the Rights of the Child. This means that the region has accepted both the principle that all children and adolescents have rights and should be able to have them fulfilled and the obligations to respect and protect those rights and create conditions in which children and adolescents can enforce them.

Although those commitments are a necessary condition for progressing towards the fulfilment of children's and adolescents' rights, they are by no means sufficient. A report published jointly by the Economic Commission for Latin America and the Caribbean (ECLAC) and the United Nations Children's Fund (UNICEF) in 2014 shows achievements and outstanding challenges in the Latin American countries in this regard, with lights and shadows (ECLAC/UNICEF, 2014a).<sup>3</sup> Today, almost 30 years after the landmark adoption of the Convention, and five years on from the ECLAC/UNICEF report, it is time for another stock-taking of progress, challenges and tasks still pending, as these will shape the agenda of priorities on which the countries must make progress in the next few years.

This also requires analysing the context for implementation of the Convention in the region, the status of Latin American and Caribbean children in relation to each right and a map of government policies on childhood and adolescence taking into account not only the range of measures put in place to ensure rights, but also the action taken to build capacities that will enhance the impact of those measures.

This document takes as an input and starting point the panorama of the region 25 years after the adoption of the Convention on the Rights of the Child and identifies highlights of achievements in the past 30 years for a selection of the children's and adolescents' rights recognized under the Convention. Based on the information already existing in the statistics, and in research and studies on childhood, this document aims to contribute to informed discussion on the progress and remaining obstacles regarding fulfilment of the rights of children and adolescents in Latin America and the Caribbean.

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<sup>1</sup> The words "child" and "adolescent" are gender-neutral and they are used in this report in the spirit of gender-inclusive language that is intended to avoid discrimination of any kind between the sexes and age groups covered by the Convention.

<sup>2</sup> In General Comment No. 5 (2003): General measures of implementation of the Convention on the Rights of the Child, the Committee on the Rights of the Child explicitly recognizes these articles of the Convention as general principles.

<sup>3</sup> See "América Latina a 25 años de la aprobación de la Convención de los Derechos del Niño" [online] [http://repositorio.cepal.org/bitstream/handle/11362/37318/4/S1420868\\_es.pdf](http://repositorio.cepal.org/bitstream/handle/11362/37318/4/S1420868_es.pdf).

The first section summarizes salient features of the context in which the Convention has been applied in the past 30 years in Latin America and the Caribbean. The aim is to show how certain processes have operated as “allies” and how other transformations pose potential obstacles to governments in terms of making progress towards the rights established in the Convention. The second section—the heart of this work—presents the main indicators that reflect progress and outstanding debts in Latin America and the Caribbean for a selection of rights set forth in the Convention. For each of the rights selected, the analysis is accompanied by a brief summary of policies that could, together with other factors, explain what the empirical evidence is showing. The policy review does not lose sight of the guidelines represented by the rights-based approach and the Convention: all children and adolescents have rights, all of which governments are duty-bound to fulfil. The third section offers conclusions and recommendations.

## **A. The context for implementation of the Convention on the Rights of the Child in Latin America and the Caribbean**

In the past three decades, the Latin American and Caribbean region has undergone profound transformations that shape the context in which the Convention on the Rights of the Child is implemented in the countries. Some of these transformations have improved the abilities of the countries to ensure the rights of children and adolescents, while others have tended to throw up obstacles by increasing inequalities between different population groups.

In addition, in the course of these three decades, important conceptual approaches have been developed that contribute significantly to improving the design, implementation and assessment of policies aimed at fulfilment of certain rights in childhood and adolescence: the rights to education, health, nourishment, housing, life, healthy development from the early years, a life free of violence, protection from child labour, a decent standard of living, social security, an identity, participation, and adolescent well-being. This section briefly addresses both these matters.

### **1. Context**

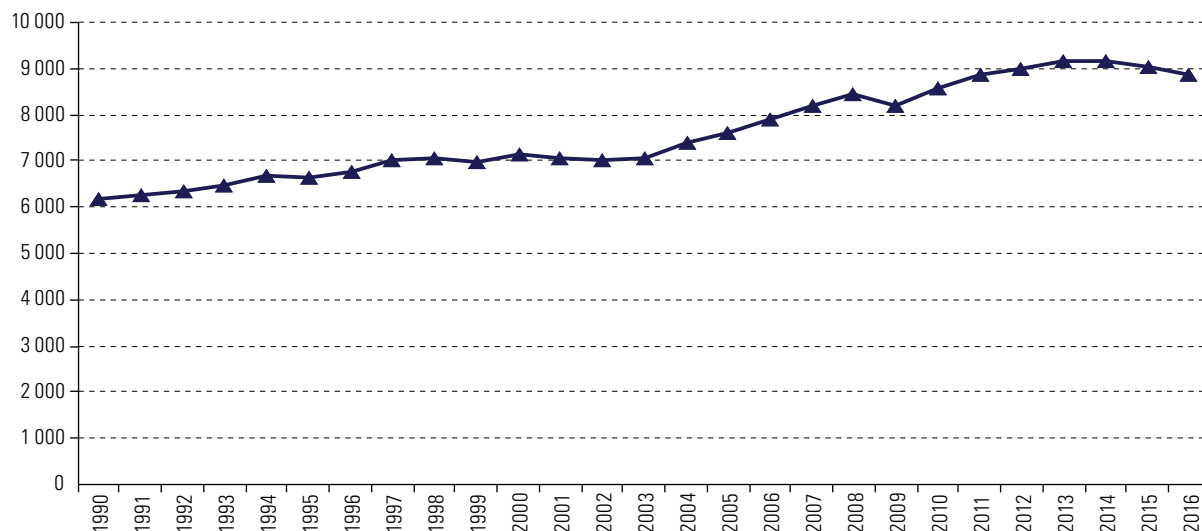
#### **(a) Macroeconomic context and growth**

The macroeconomic context is a central variable for analysing the rights of children and adolescents. Since 1990, the countries in the region have undergone a process of economic growth that augurs well for government action to improve the situation of these age groups. According to ECLAC estimates, annual per capita GDP in the region rose from US\$ 6,186 (at constant prices) in 1990, to US\$ 7,126 in 2000 and US\$ 8,870 in 2016 (see figure 1). Although the trend over the period overall has been an upward one, the first few years of the 2000 decade were especially significant. During those years, the commodities boom underpinned a major leap in income terms in the region, which translated into unprecedented gains in the economic context (Kosacoff and Campanario, 2007).

However, it is important to bear in mind that the region’s growth has seen significant swings (one such occurred in the late 1990s and another during the global economic crisis of 2008) and that the recent upswing on the back of the commodities boom appears to have come to an end (Gruss, 2014). It must also be recalled that the average trend in the region masks inequalities between countries. In recent decades, GDP levels and trends have both been very uneven, in addition to disparities within countries, all of which has direct implications for the aim of ensuring that all children and adolescents

can exercise their rights. This new scenario could heavily constrain the room for manoeuvre available to governments in Latin America and the Caribbean—which currently devote 5% of their public investment, on average, to childhood and adolescence—to continue making progress with policies and measures aimed at improving the situation of children and adolescents.

**Figure 1**  
Latin America and the Caribbean (33 countries<sup>a</sup>): per capita gross domestic product, 1990–2016  
(Dollars at constant 2010 prices)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of CEPALSTAT [online database] <http://estadisticas.cepal.org/cepalstat/portada.html>.

<sup>a</sup> Average of estimates for: Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay and Venezuela (Bolivarian Republic of).

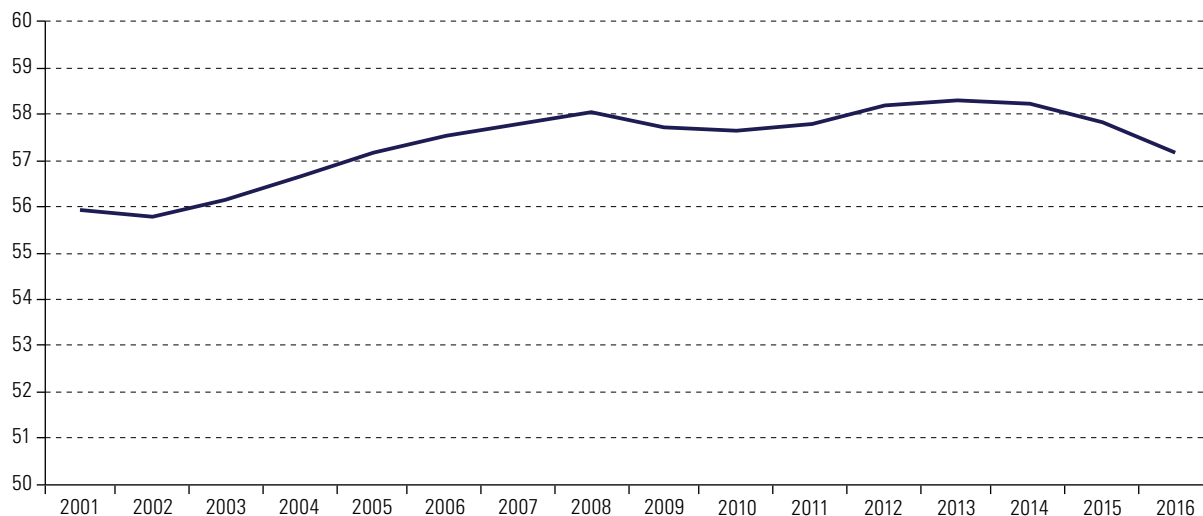
## (b) Changes in labour markets

Changes in labour markets impact on child and adolescent well-being in multiple ways, insofar as labour income is the main source of household income. Economic growth and certain key labour policies have contributed to notable improvements in the region's labour markets. The employment rate rose slightly from 2000 until 2008, when it fell somewhat, with this decline partially reversed around 2013–2014. Between 2014 and 2016 the employment rate dropped slightly, to 57%, just above the levels of the early 2000s (see figure 2).

Meanwhile, the unemployment rate is at historically low levels, having fallen from a high of 11.2% in 2002 to 6.0% in 2014 (see figure 3). However, it must be recalled that there is a close relationship between unemployment and economic cycles and that external shocks or crises impact rapidly on this indicator. When this happens, certain population groups are worse affected than others. In particular, families with children and adolescents tend to be more vulnerable to these ups and downs.<sup>4</sup>

<sup>4</sup> Economic crises often have significant impacts on child and adolescent well-being. Although there are few specific studies on this for Latin America and the Caribbean, international data confirm this hypothesis. See, for example, UNICEF/CONEVAL (2010) for the case of Mexico and ECLAC/ILO (2009), Kittiprapas, Sanderatne and Abeysekera (2010), Bibi and others (2010), Rajmil and others (2014), and Garfinkel, McLanahan and Wimer (2016) for international cases.

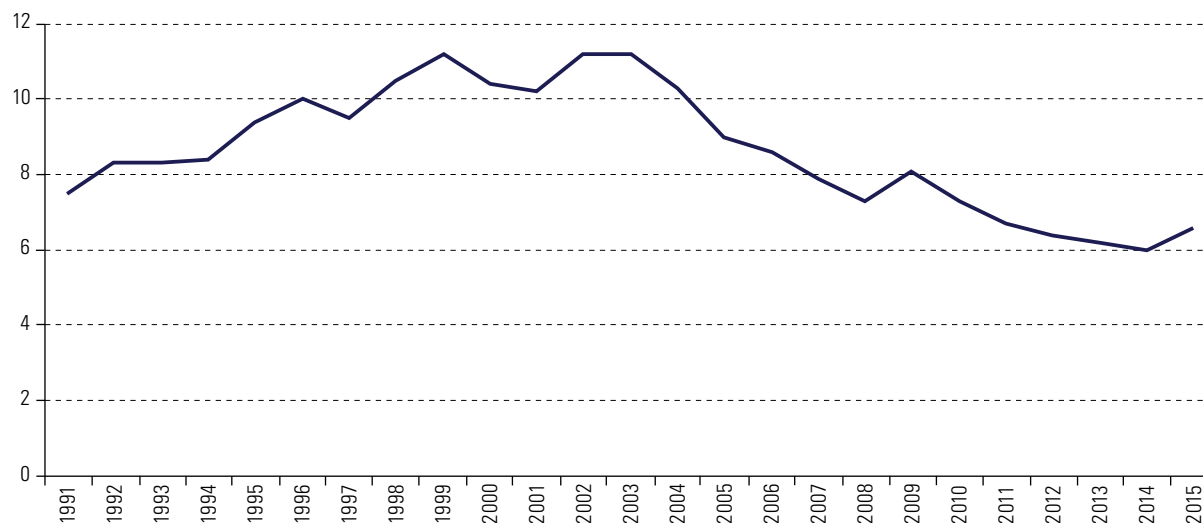
**Figure 2**  
Latin America and the Caribbean (24 countries<sup>a</sup>): employment rate, 2001–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of CEPALSTAT [online database] <http://estadisticas.cepal.org/cepalstat/portada.html>; and official data from the respective countries.

<sup>a</sup> Weighted average for: Argentina, Bahamas, Barbados, Belize, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, Trinidad and Tobago, Uruguay and Venezuela (Bolivarian Republic of).

**Figure 3**  
Latin America and the Caribbean (22 countries<sup>a</sup>): unemployment, annual average rate, 1991–2015  
(Percentages)

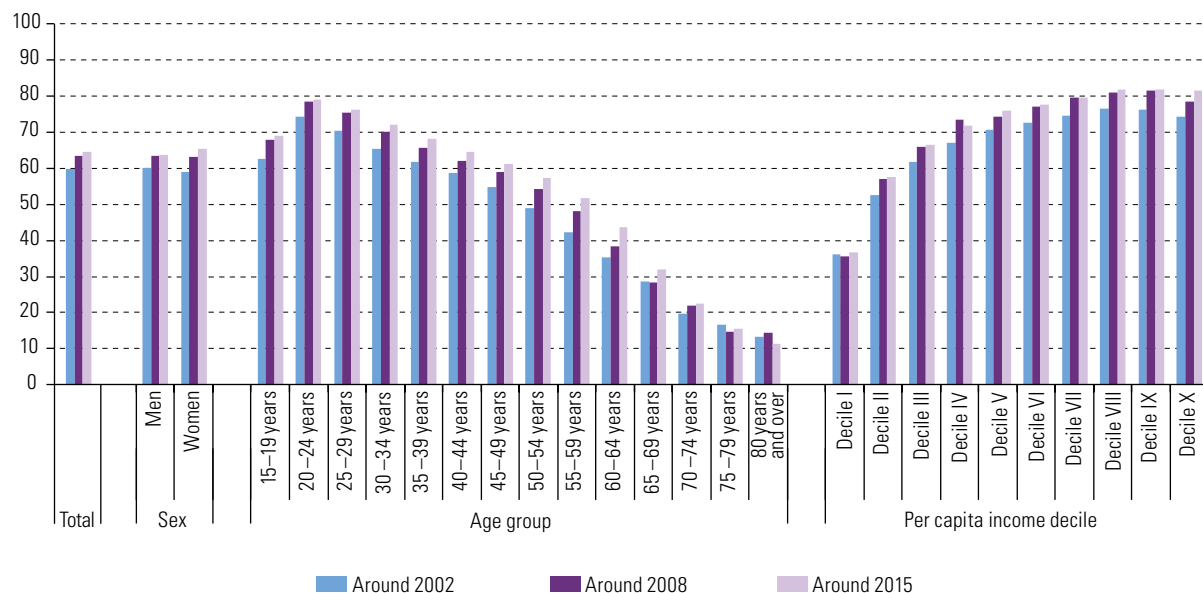


**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of CEPALSTAT [online database] <http://estadisticas.cepal.org/cepalstat/portada/html>.

<sup>a</sup> Average of data for: Argentina, Barbados, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, Uruguay, Trinidad and Tobago, and Venezuela (Bolivarian Republic of).

There has also been a slight fall in employment in low-productivity sectors (ECLAC, 2012b) and a rise in wage work. Between 2002 and 2015, the proportion of wage earners rose from 59.7% to 64.5% of all employed. This rise was strongest among women and workers aged over 50 years (see figure 4).

**Figure 4**  
Latin America (17 countries<sup>a</sup>): wage earners as a percentage of all employed by sex, age group and per capita income decile, around 2002, 2008 and 2015



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), Social Panorama of Latin America, 2017 (LC/PUB.2018/1-P), Santiago, 2018; on the basis of Household Survey Data Bank (BADEHOG).

<sup>a</sup> Weighted average for: Argentina (urban areas), Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Panama, Paraguay, Peru, Uruguay (urban areas) and Venezuela (Bolivarian Republic of).

Notwithstanding these achievements, the fact remains that Latin American production structures have changed little in recent decades and remain highly uneven. A predominant share of employment in the region is still concentrated in low-productivity, low-skilled sectors with poorer working conditions, stability and employment protection than in other sectors. This heterogeneity translates into heavy segmentation of the labour market which, in turn, goes a long way towards explaining the region's persistent income inequalities (ECLAC, 2012a).

Another important transformation in labour markets that shapes the context for implementation of the Convention on the Rights of the Child in Latin America and the Caribbean is the medium-term shift that has occurred in women's participation in the labour market and its link with the care crisis. ECLAC estimates show that the participation rate for women aged 15 or over in the region rose from 35.5% in 1980 to 54.5% in 2018.<sup>5</sup> Although this process has called into question the traditional model of men out at work and women at home taking care of children and other dependent family members—given by the unequal sexual division of labour and naturalized association between women and caregiving—Latin American households have not progressed sufficiently with the redistribution of work within the household (Filgueira, Espejo and Rico, 2010). As a result, the burden of unpaid domestic and care work falls mainly

<sup>5</sup> See Economic Commission for Latin America and the Caribbean (ECLAC), "Estimaciones y proyecciones de población total, urbana y rural, y económicamente activa: América Latina, revisión 2017", Santiago, 2017 [online] <https://www.cepal.org/es/temas/proyecciones-demograficas/estimaciones-proyecciones-poblacion-total-urbana-rural-economicamente-activa>.

to women (ECLAC, 2010b, 2012b and 2016a).<sup>6</sup> The scant progress made on the redistribution of these burdens has contributed to engendering a “care crisis” (ECLAC, 2010a; Rico, 2011b), which highlights the many obstacles faced by families (and their female members) in reconciling productive life and paid work with motherhood and childrearing. It is not only a matter of the gender wage gap, but also of the fact that the balance between working life and childrearing directly affects women’s labour market participation and employment record. The role of public policies and employers in retaining women needs to be supported by a family-friendly culture that offers flexible working modalities; policies in this direction have also been shown to increase productivity (Bloom, 2014).

In addition, this process does not unfold in the same way across all the social sectors. Poor women have less support and resources to delegate care work, which reduces their possibilities of working outside the home and of entering more stable, better paid jobs (ILO/UNDP, 2009; ECLAC, 2012b, 2016a).<sup>7</sup>

### (c) Demographic changes

Another long-term trend that has shaped a favourable context for the implementation of the Convention on the Rights of Child in Latin America and the Caribbean is demographic change. In a region of 193 million children and adolescents, child mortality rates have been falling significantly for several decades and life expectancy has been rising. Fertility rates have also fallen quite sharply (ECLAC, 2008a).

These trends have consolidated a process of change in the Latin American population age structure. The available estimates show that, at the regional level, the population aged under 15 years came down from 40% of the entire population in 1950 to 28% in 2010 (ECLAC, 2011a). Whereas in 1975 people aged 60 years or older represented just 5.6% of the total Latin American and Caribbean population, in 2017 the proportion tripled (17%), and by 2040 this age group is expected to represent a fifth (21%) of the region’s total population (ECLAC, 2018a).

As a result of this change, the region is at a privileged stage of the demographic dividend in which the dependency ratio —i.e. the ratio between the dependent and economically active populations— is at an all-time low. In the average for Latin America and the Caribbean, the dependency ratio fell sharply between 1970 and 2010–2015: this is the stage at which returns can be gained most easily from the demographic dividend. The ratio stabilizes at a low level between 2010–2015 and 2021, when it begins to rise again as the demographic dividend comes to an end (see figure 5). At this stage the demand for care also begins to rise, basically because of the increase in the older adult population (Rossel, 2016).

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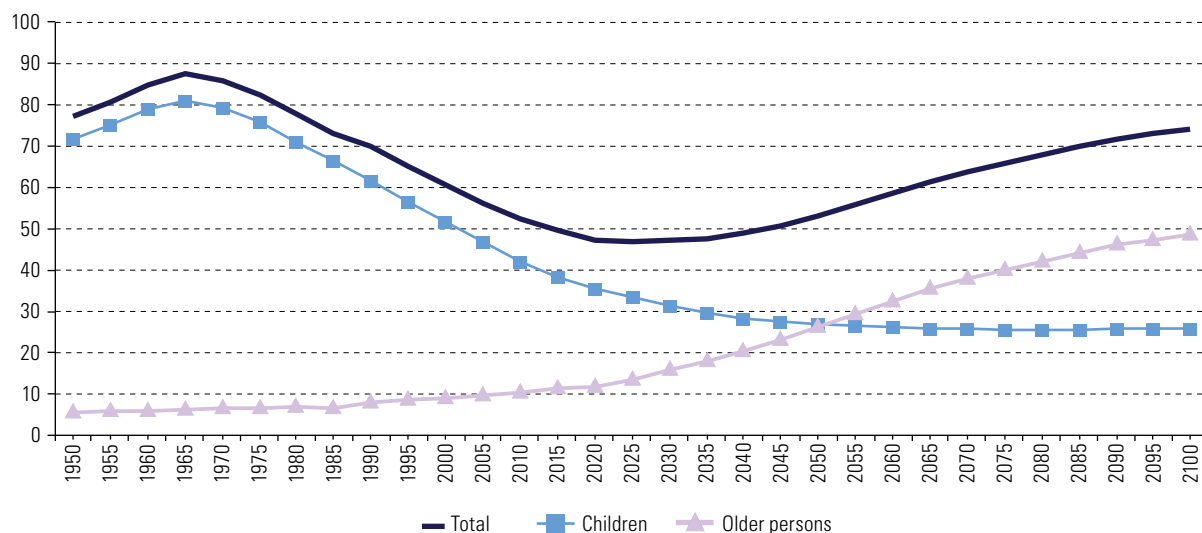
<sup>6</sup> According to ECLAC, in Argentina women aged 20–59 years devote 46.6 hours per week to unpaid work, compared with just 15.7 hours for men. In Brazil, the respective figures are 23.8 hours compared with 5.4; in Colombia, 33.9 versus 9.2; in Costa Rica, 55.2 compared with 20.1; in Ecuador, 45.2 versus 10.0; in Guatemala, 36 compared with 4.7; in Mexico, 59.9 versus 19.9; in Panama, 35.9 versus 14.1; in Peru, 44.9 compared with 16.3; and, in Uruguay, 38.3 compared with 15.1 (ECLAC, 2016a, p. 60).

<sup>7</sup> The evidence shows that the decline in informality, for example, has taken place mainly among men and in the middle- and upper-income segments. As a result of these shifts, women’s overrepresentation in low-productivity sectors has worsened, alongside “an ever-larger wedge between the higher and lower quintiles that, while affecting both sexes, impacts women more” (ECLAC, 2012a, p. 112).



**Figure 5**

Latin America and the Caribbean (selected countries and territories<sup>a</sup>): demographic dependency ratio, by dependent group,<sup>b</sup> estimates 1950–2100



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of CEPALSTAT [online database] <http://estadisticas.cepal.org/cepalstat/portada/html>.

<sup>a</sup> Anguilla, Antigua and Barbuda, Argentina, Aruba, Bahamas, Barbados, Belize, Bolivia (Plurinational State of), Brazil, British Virgin Islands, Cayman Islands, Caribbean Netherlands, Chile, Colombia, Costa Rica, Cuba, Curaçao, Dominica, Dominican Republic, Ecuador, El Salvador, French Guiana, Grenada, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Falkland Islands (Malvinas), Jamaica, Martinique, Mexico, Montserrat, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Martin (French part), Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Turks and Caicos Islands, United States Virgin Islands, Uruguay and Venezuela (Bolivarian Republic of).

<sup>b</sup> Reflects the number of persons of inactive age per 100 persons of working age. Calculated as:  $(0-14) + (60+) / (15-59)$ .

Because cohorts of children and adolescents are becoming ever smaller, there are opportunities for public policies through saving and investment in different areas that foster the well-being of these age groups, such as health or education (ECLAC, 2005, 2009a and 2010a). Although the region still has possibilities of tapping the opportunities offered by the demographic dividend (Bertranou, 2008; ECLAC, 2009a and 2016b), in some countries<sup>8</sup> the stage at which the fruits of the dividend are most easily harvested is ending (ECLAC, 2010a). The period of falling dependency rates will come to an end within the next 10 years in the countries that are furthest ahead in the demographic transition and around 2050 in the countries that are furthest behind in the process.

Lastly, the demographic transition is not experienced in the same way by all countries or indeed evenly within countries, but has a differentiated impact in different social sectors, with highly stratified patterns (see box 1).

<sup>8</sup> Not all countries are at the same stage of the demographic transition. ECLAC (2010a) identifies four major groupings in Latin America. The first group comprises countries that are less advanced in the demographic transition (Guatemala, Haiti and the Plurinational State of Bolivia). These countries still have relatively high fertility rates and life expectancy below the regional average. The second grouping has intermediate fertility rates, but with different patterns. Some countries (Bolivarian Republic of Venezuela, Colombia, Dominican Republic, Ecuador, El Salvador, Panama and Peru) achieved early reductions in fertility rates, while others have done so more recently (Honduras, Nicaragua and Paraguay). A third group (consisting of Argentina, Brazil, Mexico and Uruguay) shows greater convergence in fertility rates —although from different starting points and at different speeds— combined with high levels of life expectancy (generally above the regional average). Lastly, Cuba, Costa Rica and Chile form the group that is furthest ahead in the demographic transition, with fertility rates below replacement level and average life expectancy over 78.5 years (ECLAC, 2010a).

### Box 1

#### Stratified processing of demographic changes

In Latin America and the Caribbean, the demographic changes of the past few decades have been processed in a stratified manner.

On the one hand, fertility rates have declined much more significantly among women with higher incomes and educational levels (ECLAC, 2012b). In most of the Latin American and Caribbean countries, less educated women have doubled the number of children on average than more educated women. Fertility rates in Latin America are also higher among the indigenous and Afrodescendent populations. What is more, far from closing over the past few decades, these gaps appear to be widening (ECLAC, 2012b). As a result, children have a higher likelihood of being born into a poor household, which entrenches the association between poverty and younger generations.

At the same time, fertility rates among adolescents aged 15–19 have fallen more slowly over the past 30 years than the rate for adult women (over age 18) and there has been a rise among adolescents under age 15<sup>a</sup> (WHO/UNFPA/UNICEF, 2018). This situation impacts heavily on adolescents living in rural areas and those from poor households or indigenous communities, reinforcing the cycle of poverty and exclusion suffered by these households.

Another demographic change that has stratified impacts on society is the assumption of adult roles by young people. As in other parts of the world, adolescents (aged 10–17) and young adults (18–29), on average, are tending to delay the assumption of adult roles (in other words, they are tending to prolong their youth). This trend, however, does not affect all adolescents equally. The stratification of this impact is associated with structural conditions (Filgueira, 1996) linked to equality gaps. At the same time, for many adolescents, adult roles in terms of maternity are being brought forward, shifting the family structures and dependency ratios of the adolescents involved and their children, all of which is linked to structural and cumulative inequalities (Caffe and others, 2017).

The differences in emancipation trajectories in different socioeconomic strata are huge. In the wealthiest sectors, the tendency is to delay maternity, conclusion of education, entry to the labour market and emancipation from the household of origin. By contrast, these milestones occur much earlier for young people from a low-income background. As well, among wealthier youth, labour market participation rates between men and women appear to be converging, whereas among lower-income youth the pattern is different, as gender inequalities hinder young women's entry to productive employment owing to a variety of constraints and lack of support for child care (ECLAC, 2012b; Ullmann, 2015).

A third demographic process that occurs in a stratified manner is the change in family structures. Although most household in the region are still two-parent families, there has been a significant rise in single-parent and female-headed households. The changes in the patterns surrounding marriage bring new risks, such as the fact that one adult is responsible for caring and providing for the household. These risks are all the larger given that such households increased from 8% of the total in 1990 to 12% in 2010 in the lowest income quintile, but just from 7% to 9% in the wealthiest quintile (Rico and Maldonado, 2011).

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of C. Filgueira, *Sobre revoluciones ocultas: la familia en el Uruguay* (LC/MVD/R.141/Rev.1), Montevideo, Economic Commission for Latin America and the Caribbean (ECLAC), 1996; Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2010* (LC/G.2481-P), Santiago, 2011; *Social Panorama of Latin America, 2011* (LC/G.2514-P), Santiago, 2012; H. Ullmann, "Health and young people in Latin America and the Caribbean", *Youth: realities and challenges for achieving development with equality*, ECLAC Books, No. 137 (LC/G.2647-P), D. Trucco and H. Ullmann (eds.), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2015; M. N. Rico and C. Maldonado, "¿Qué muestra la evolución de los hogares sobre la evolución de las familias en América Latina?", *Las familias latinoamericanas interrogadas: hacia la articulación del diagnóstico, la legislación y las políticas*, Seminars and Conferences series, No. 61 (LC/L.3296), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2011; Pan American Health Organization/United Nations Population Fund/United Nations Children's Fund (PAHO/UNFPA/UNICEF), *Accelerating progress toward the reduction of adolescent pregnancy in Latin America and the Caribbean*, Washington, D.C., 2018.

<sup>a</sup> While the fertility rate has fallen significantly for all age ranges of adult women (over age 18), it has done so less among adolescents aged 10–14 years, from 88.2 to 66.1 per 1,000 live births.

The demographic shift is also expressed in changes in migratory flows. At the regional level, emigration still exceeds immigration, i.e. in net terms cumulative immigration is still a smaller process than emigration (Martínez and Orrego, 2016). The largest proportion of emigration is accounted for by Mexico, followed by Colombia, El Salvador and Cuba. In addition, the situation of the countries in the northern part of Central America is fuelling these flows towards Mexico and the United States, which has led to a highly negative migratory balance in that subregion (10.2% of emigrants versus 1.1% of immigrants) (Canales and Rojas, 2018). The Caribbean countries also register high levels of emigration, which hurts their development possibilities, as a larger proportion of migrants from this subregion tend to be individuals with higher levels of education. Conversely, remittances sent home by emigrants contribute significantly to the GDP of these countries.<sup>9</sup>

At the same time, immigration has changed from being mostly from extraregional in origin to being mostly intraregional. New migration corridors have become significant in Argentina, Belize, Brazil, the Dominican Republic, Chile, Costa Rica, Panama, and Trinidad and Tobago (ILO, 2016). These changes in migratory patterns are important because they pose major challenges in terms of supporting inclusive social development and dealing with situations of irregular migrant status, migrant trafficking and mixed flows. Notably, the past few years have seen growing numbers of requests for asylum by citizens of Latin American countries, especially from the northern part of Central America and from the Bolivarian Republic of Venezuela.

In the American continent alone, 6.3 million migrants and refugees are aged under 18 years. For this population group, the decision to migrate can be devastating, owing to the interaction of factors that include poverty, violence, lack of educational opportunities and the desire to join family members who have already migrated. Vulnerable, detained, unprotected and often alone, young migrants are easy prey for criminal groups, smugglers or others ready to exploit or abuse them. Children who are forced to return to their countries of origin often face stigmatization by the community, social exclusion, violence, internal displacement and poverty. Between January and July 2018, the Mexican authorities identified over 16,000 migrant children travelling irregularly. Almost 12,000 were returned to Guatemala, El Salvador and Honduras between January and June. According to the latest data available, 68,409 migrant children were detained in Mexico between 2016 and April 2018 and 82,566 migrant children and adolescents were detained on the southern border of the United States between October 2016 and September 2017.

In the context of growing emigration from the Bolivarian Republic of Venezuela, it is estimated that at least 30% of the 1.5 million people who have migrated to six main destination countries are children and adolescents who need assistance and protection. In addition, the number of asylum requests made by Nicaraguans has grown significantly in the past few months, with an average of 200 requests presented daily in Costa Rica, according to current data from the Office of the United Nations High Commissioner for Refugees (UNHCR). Panama, Mexico and the United States are also receiving growing numbers of asylum applications from Nicaraguan nationals.

The migratory panorama is thus becoming increasingly complex and poses challenges in terms of addressing the risks and vulnerabilities associated with different stages of migration (Maldonado, Martínez and Martínez, 2018). It is key to identify the risks involved. On arrival at the destination, and especially during the settling-in period, inclusion-related risks can translate into more limited access to the formal labour market, employment overqualification, poverty, segregation and isolation, overcrowding, and discrimination (Carrasco and Suárez, 2018). There are risks in relation to the inclusion of migrants'

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<sup>9</sup> In Jamaica, for example, they represented 14% of GDP in 2013. See United Nations Population Fund (UNFPA), "Thematic brief: Population dynamics: data availability and analysis", 2017 [online] <https://caribbean.unfpa.org/en/news/thematic-brief-population-dynamics-data-availability-and-analysis>.

children, especially in terms of participation, development of a sense of belonging and recognition as equals by locals (Maldonado, Martínez and Martínez, 2018). The return stage (whether voluntary or not) also presents risks in terms of social, family and institutional reintegration, with various possibilities and difficulties. During transit, children migrating irregularly face multiple risks because of their lack of visibility: different forms of violence, exploitation, kidnapping and smuggling, among other things. In the region, unaccompanied children are migrating every year, which implies risks and particular needs in terms of care and attention.

Lastly, the reorganization of care work and, possibly, the lower income of households split between origin and destination countries generate major risks, especially for children and adolescents. In addition, the overlapping of at least two legal systems in situations of transnationality can cause disconnects in social protection in countries of origin and ultimately loss of benefits. In particular, payments into health and pension systems and access to social protection for household members who remain behind in countries of origin may suffer.

The countries of the region have made some progress in protecting the rights of migrant children. Most of the Central American countries have developed protocols and standards for the protection and care of migrant children and a technical forum for collaboration on children's affairs has been established under the aegis of the Regional Conference on Migration. However, there are still considerable gaps in the region in terms of ensuring that children and adolescents cannot be detained on the grounds of migratory status; preventing the separation of children from their families; providing access to and adapting social services, regardless of status; protecting children against all forms of violence in countries of origin, destination, transit and return; and putting in place rigorous processes to ensure that the best interests of migrant children and adolescents are identified and they are not returned to situations in which their lives or well-being may be at risk.

#### (d) Expanding systems of social protection

Systems of social protection contains institutional arrangements and an integrated and consistent battery of policies and programmes to ensure an adequate standard of living for the development of individuals throughout their life cycles, especially the poor and vulnerable and, in particular, children and adolescents.<sup>10</sup> The region has made significant progress with such systems. Almost by definition, and in the light of the multidimensional nature of the socioeconomic risks facing the population, they require a multisector approach and effective mechanisms of coordination in order to operate.

Advances in social protection in the region have also, generally speaking, been good news for the implementation of the Convention on the Rights of the Child. In fact, adequate social protection for children revolves around tackling patterns of poverty and vulnerability affecting children and recognizing the benefits of investing in this age group. Under this approach, measures need not necessarily target children directly in order to be child-friendly (UNICEF, 2012b; Yates, Chandan and Lim Ah Ken, 2010), but should foster family capacity-building to care and provide for their children, eliminate barriers to access to services, and tackle vulnerability with an emphasis on children.

Social spending has been expanding for over 15 years in the region. In 2000, social spending represented 11% of GDP in the average for 19 Latin American and Caribbean countries; by 2015 this figure had risen to 14.5%<sup>11</sup> and had even withstood the impact of the international financial crisis of a decade

<sup>10</sup> There is general recognition that, just as monetary and non-monetary dimensions should be taken into account in the measurement of poverty, risk must be understood not only in economic terms but also multidimensionally: environmental, economic and social. In addition, the intensity and distribution of risks vary by age group, gender, social class and ethnicity (Rubio, 2017).

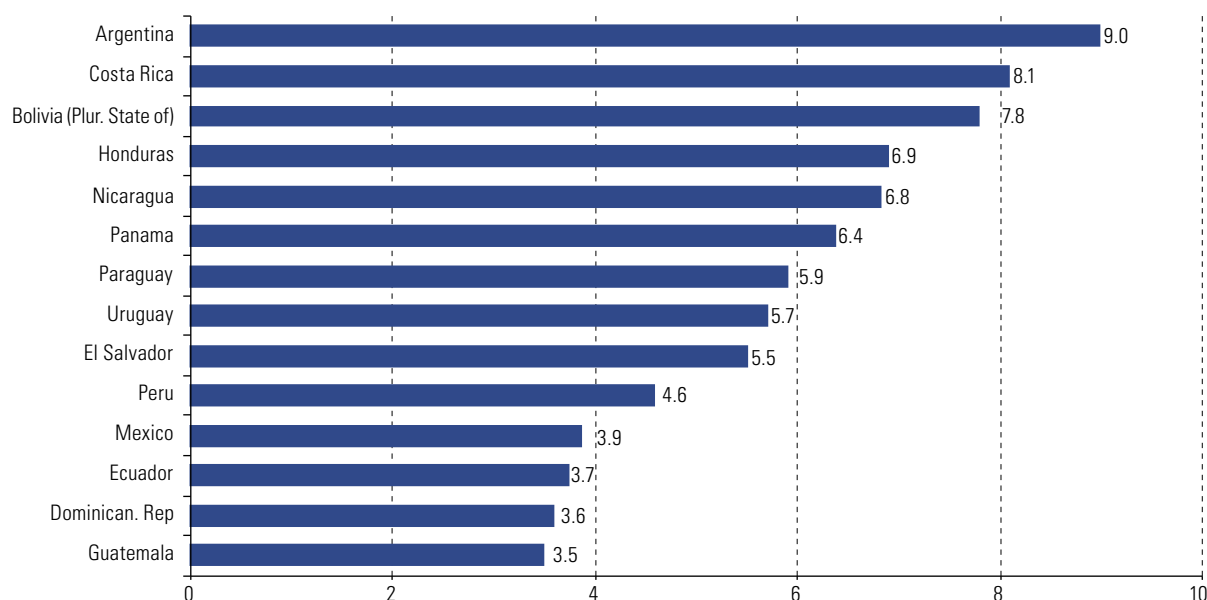
<sup>11</sup> See Economic Commission for Latin America and the Caribbean (ECLAC), CEPALSTAT [online database] <http://estadisticas.cepal.org/cepalstat/portada.html>.

ago. The efforts made by most of the countries to increase financing for social services and transfers to households in real terms are encouraging and a key factor in achieving inclusive social development.

Social investment is one of the most important means of implementation for attaining the Sustainable Development Goals, as it conditions achievements in access to basic services such as sanitation, housing, education, health care and social protection systems, all areas in which the 2030 Agenda aims for guaranteed universal access. Nevertheless, levels of social investment are very uneven across Latin America and the Caribbean today.

In the past few years, UNICEF has supported measurement of public spending on childhood in the various countries of Latin America, which has become a pioneering region in the measurement of public investment in children's rights (an average of 5% of GDP). Albeit with due caution regarding the data, owing to methodological discrepancies and differences in the years examined, it may be seen that Argentina and Costa Rica invested over 8% of GDP in children in 2013, compared with under 4% of GDP invested by Mexico in 2015, Ecuador in 2016, the Dominican Republic in 2013 and Guatemala in 2017.

**Figure 6**  
Latin America (14 countries<sup>a</sup>): public investment in children  
(Percentages of GDP)



**Source:** V. Tromben and A. Podestá, "Las prestaciones familiares públicas en América Latina", *Project Documents*, Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2018, in press; United Nations Children's Fund (UNICEF), *The State of the World's Children 2016: A fair chance for every child*, New York, 2016; Central American Institute for Fiscal Studies, *Centroamérica: análisis regional de la inversión en niñez y adolescencia*, Guatemala City, 2016; Ministry of Economy and Public Finance/ Parliamentary Network for Children and Adolescents/United Nations Children's Fund (UNICEF), *Presupuesto público para niñas, niños y adolescentes en Bolivia: documento metodológico para la clasificación de recursos asignados a la infancia, niñez y adolescencia*, La Paz, 2017; H. Rodrich, "Presupuesto público orientado a niños, niñas y adolescentes en el Perú 2013-2015", Lima, Ministry of Economic Affairs and Finance, 2015 [online] [https://www.mef.gob.pe/contenidos/presu\\_public/ppr/GPNNA\\_2015.pdf](https://www.mef.gob.pe/contenidos/presu_public/ppr/GPNNA_2015.pdf); M. Colacce, P. Manzi and V. Tenenbaum, "Gasto público social en la infancia y adolescencia en el Uruguay", *Studies and Perspectives series-ECLAC office in Montevideo*, No. 29 (LC/TS.2017/82-LC/MVD/TS.2017/4), Montevideo, Economic Commission for Latin America and the Caribbean (ECLAC), 2017.

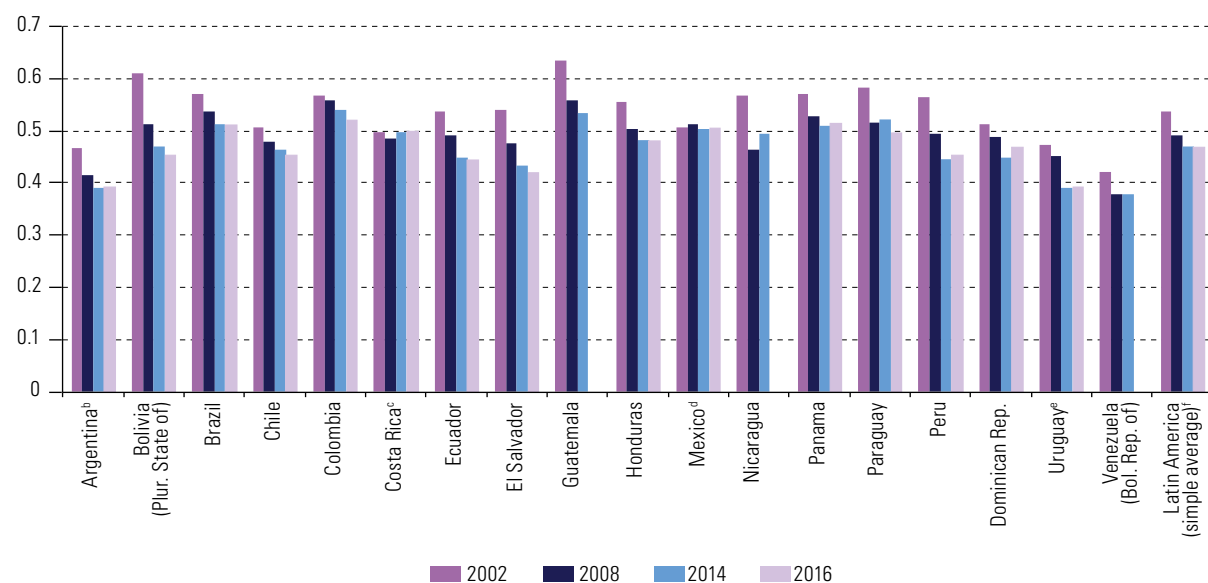
In particular, as will be discussed later, the countries of the region have improved the coverage of key social policies, such as education and health, for the population overall. They have also taken significant steps in strengthening labour institutions and regulations and pension systems (Cecchini, Filgueira and Robles, 2014; Cecchini and others, 2015). Although many of these advances have not targeted children and adolescents directly, they have contributed to significant improvements in their families' access to services and basic benefits.

### (e) Reduction in poverty and economic inequality

Recent estimates by ECLAC show that between 2002 and 2014 income-based poverty and extreme poverty both came down significantly, although the rate of this decline slowed towards the end of the period. The aggregate figures for the region show that the number of poor rose slightly in 2015 and 2016, to 186 million (30.7% of the population) in the second of these two years, and the number of extremely poor rose to 61 million (10%) (ECLAC, 2018a).

There has also been a marked decrease in inequality in terms of income concentration. Between 2002 and 2016, the Gini index (average for 18 countries) fell from 0.54 to 0.47. In the last few years, however, that downtrend has lost strength compared to earlier years (ECLAC, 2018a). It is also important to bear in mind that although this reduction has occurred in every country, the achievements have been uneven from one to another (see figure 7).

**Figure 7**  
Latin America (18 countries): income inequality (Gini index<sup>a</sup>), 2002, 2008, 2014 and 2016



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2017* (LC/PUB.2018/1-P), Santiago, 2018; National Institute of Statistics and Geography (INEGI), "Modelo estadístico 2016 para la continuidad del MCS-ENIGH", Aguascalientes, 2016 [online database] <http://www.beta.inegi.org.mx/proyectos/investigacion/eash/2016/>.

<sup>a</sup> The Gini index is calculated on the basis of income equal to zero.

<sup>b</sup> Urban total.

<sup>c</sup> Figures not comparable with previous years.

<sup>d</sup> Figures for 2016 are estimated on the basis of INEGI (2016).

<sup>e</sup> Figures for 2002 refer to urban areas.

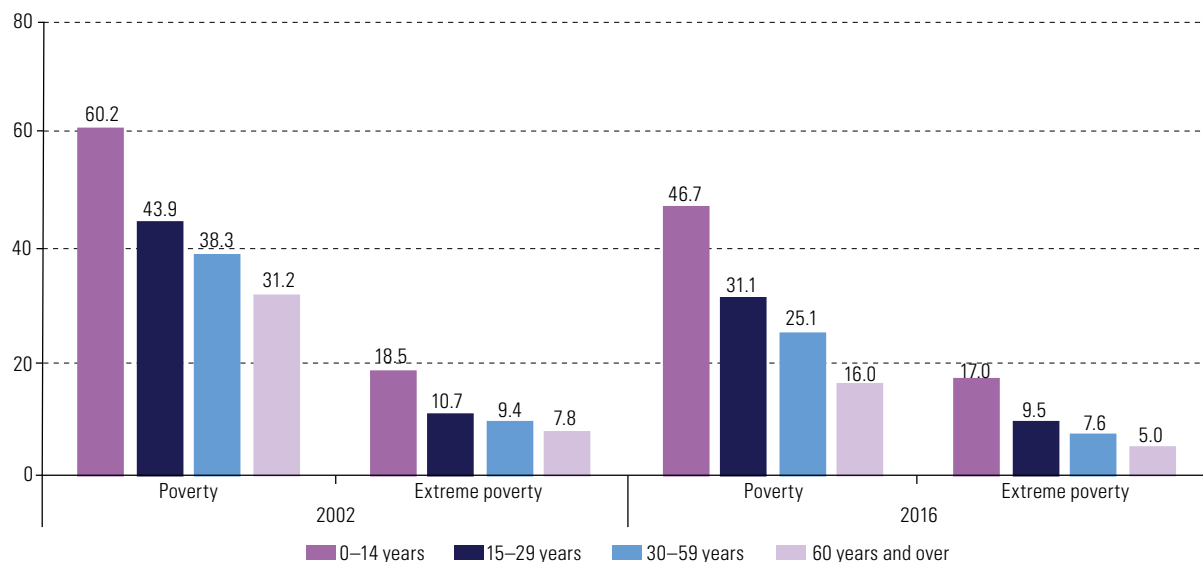
<sup>f</sup> Average calculated on the basis of the most recently available data for each of the 18 countries.

### (f) Age-based imbalance in well-being levels

While the region has made great strides in addressing social issues in recent years, its achievements have been unevenly distributed among different groups within the population, as was noted by ECLAC in a recent study when it observed that “Poverty and extreme poverty affect children, adolescents and young people more than other age groups, something that represents major risks for the development of individuals and the region” (ECLAC, 2018a, p. 12). These figures are a clear sign that the age-based imbalance in the well-being of the region’s population that has been in evidence for decades (ECLAC, 1994, 1999 and 2000) has not changed to any significant degree. In fact, children and adolescents are even more overrepresented in the poor segment of the population than they were in the early 1990s (Rossel, 2013a). Evidence gathered from other countries around the world indicates that this is not an inevitable side-effect of the economic and social development process (Rossel, Rico and Filgueira, 2015; Filgueira and Rossel, 2017). In fact, “the infantilization of poverty taking place in all of the countries of the region is not necessarily unavoidable for them. While in some industrialized countries there is a clear pattern of infantilization of poverty (albeit less markedly so than in Latin America and the Caribbean), in others the proportion is reversed because there are stronger protections for children than for the general population” (Rossel, Rico and Filgueira, 2015, p. 88).

**Figure 8**

Latin America (18 countries): poverty and extreme poverty rates, by age group, 2002 and 2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2017* (LC/PUB.2018/1-P), Santiago, 2018, on the basis of data obtained from the Household Survey Data Bank (BADEHOG).

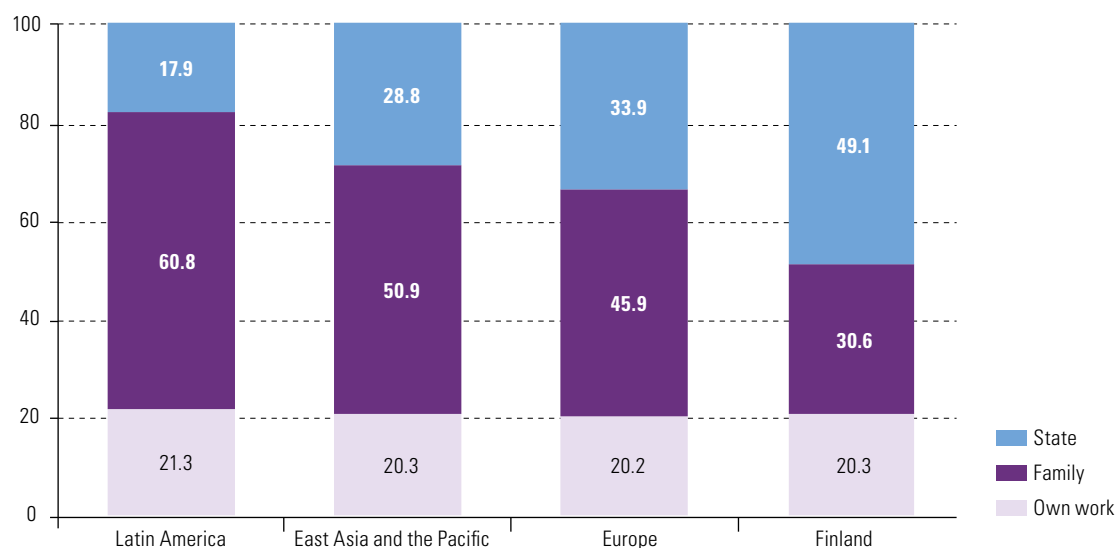
<sup>a</sup> Weighted average for the following countries: Argentina, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Uruguay and Venezuela (Bolivarian Republic of).

This situation is compounded by the fact that, in the world’s most unequal region and where a disproportionate number of children are living in poverty or extreme poverty, children’s and adolescents’ consumption levels are largely determined by the resources available to their families, since the State provides very little funding of this type for these age groups (see figure 9). More specifically, only 17.9%



of the consumption levels of those between the ages of 0 and 24 years is financed by the State (in the form of health care, education, cash transfers to families with children, maternity and paternity leave, etc.), while over 60% of their consumption levels are funded by their own families (in the form of housing, food, out-of-pocket educational and health-care expenses, etc.) and slightly over 20% is self-financed, mainly in the case of adolescents and young people who are able to find gainful employment. The distribution of the financing of consumption expenditures for this age group is radically different, for example, in the Scandinavian countries. Finland may provide the clearest illustration of this difference. In that country, nearly 50% of the consumption expenses of this group is funded by the State and just 30% by the respective families. The social protection policies under which benefits are provided to families with children and key education and social policies constitute an effective system for investing in the younger generations in these countries and a powerful mechanism for equalizing opportunities (Tromben and Podestá, 2018) (see box 2).

**Figure 9**  
 Selected regions: sources of financing to cover average consumption expenditures of children, adolescents and youth between the ages of 0 and 24, 2000 and 2015  
 (Percentages)



**Source:** V. Tromben and A. Podestá, “Las prestaciones familiares públicas en América Latina”, 2018, unpublished, and on the basis of National Transfer Accounts, 2017 [online database] <http://www.ntaccounts.org/web/nta/show/Browse%20database>.

**Note:** The data used correspond to the latest year between 2000 and 2015 for which statistics were available. The figures shown for Latin America represent the simple average of the figures for Brazil, Costa Rica, Chile, Ecuador, El Salvador and Peru.



**Box 2****Outstanding debts in relation to the rights of children, adolescents and young people with disabilities in Latin America and the Caribbean**

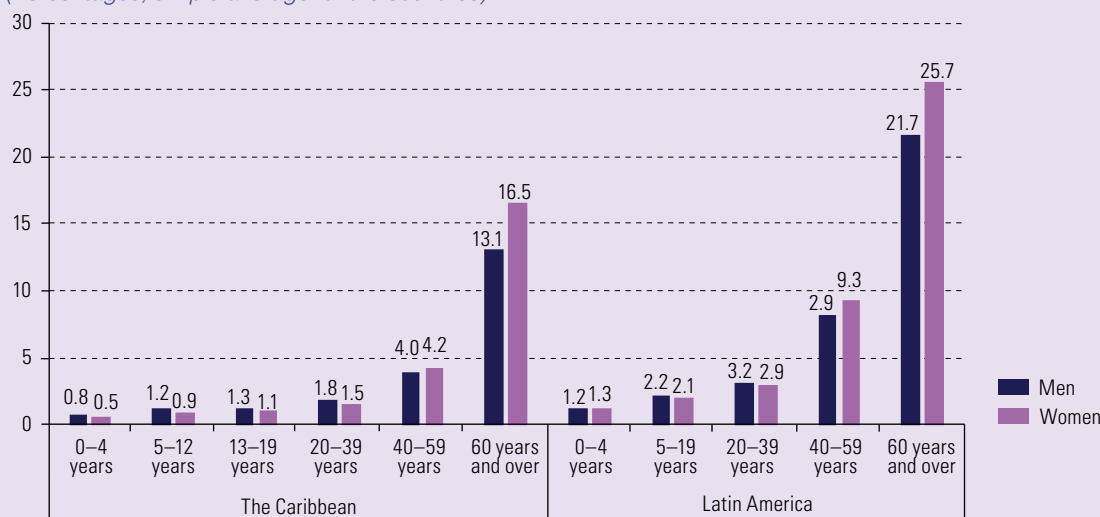
The principles enshrined in the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities establish a clear framework for the rights of children and adolescents with disabilities. These instruments have been broadly ratified by the Latin American and Caribbean countries. Accordingly, achieving the inclusion and participation of children and adolescents with disabilities on an equal footing in all spheres of society, as set forth in these instruments, remains an unfulfilled commitment.

Although there are major difficulties involved in measuring disability, it may be estimated on the basis of the data available that there are 8.5 million children and adolescents with disabilities in Latin America and the Caribbean. In the region, millions of children and adolescents with disabilities experience discrimination and severe violations of their rights, including the denial of access to education, health, recreation and participation, and this prevents them from attaining full development and reaching their maximum potential. They can also be victims of violence, including sexual violence, at the hands of family members or other persons (ECLAC, 2017b).

One of the main challenges faced by society in ensuring the rights of the child population with disabilities is moving beyond the traditional concept of disability. In this assistance-based and disempowering view, children and adolescents with disabilities are seen as objects of charity and not as bearers of rights. That shift in perspective requires a far-reaching cultural transformation founded on truly valuing human diversity (Ullmann, 2017). Latin American and Caribbean societies have begun that process of transformation, but action is needed to combat discrimination, broaden accessibility, increase opportunities and fundamentally change the way in which we approach differences. It is also important to bear in mind that the child and adolescent population with disabilities in Latin America and the Caribbean is very heterogeneous. In particular, the intersection of disability with other factors of discrimination on the basis of age and gender, as set forth in article 6 of the Convention on the Rights of Persons with Disabilities, exposes girls with disabilities to multiple forms of exclusion and violence.<sup>a</sup>

All children and adolescents with disabilities should have the opportunity to attend school and develop their potential on an equal footing with other children. To make this a reality, there is an urgent need to step up efforts to provide an inclusive school system, as a crucial element to foster tolerance and contribute to creating fairer and more equitable societies in the framework of rights.

**Latin America and the Caribbean (26 countries<sup>a</sup>): prevalence of disability by age and sex, around 2010**  
(Percentages, simple average for the countries)



**Source:** H. Ullmann and others, "Information and communications technologies for the inclusion and empowerment of persons with disabilities in Latin America and the Caribbean", *Project Documents* (LC/TS.2018/48), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2018.

<sup>a</sup> Antigua and Barbuda, Argentina, Aruba, Bahamas, Barbados, Belize, Bermuda, Bolivia (Plurinational State of), Brazil, Cayman Islands, Chile, Costa Rica, Cuba, Ecuador, Grenada, Guyana, Honduras, Jamaica, Mexico, Montserrat, Panama, Peru, Dominican Republic, Trinidad and Tobago, Uruguay and Venezuela (Bolivarian Republic of).

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Linkages between the social and production spheres: Gaps, pillars and challenges* (LC/CDS.2/3), Santiago, 2017; H. Ullmann, "Discapacidad y políticas públicas: avances y desafíos institucionales en América Latina", *Institucionalidad social en América Latina y el Caribe*, ECLAC Books, No. 146 (LC/PUB.2017/14-P), R. Martínez (ed.), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2017; H. Ullmann and others, "Information and communications technologies for the inclusion and empowerment of persons with disabilities in Latin America and the Caribbean", *Project Documents* (LC/TS.2018/48), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2018.

<sup>a</sup> See Committee on the Rights of Persons with Disabilities, *General Comment No. 3 on women and girls with disabilities* (CRPD/C/GC/3), New York, 2016.

## (g) Violence

Violence is a multidimensional phenomenon that can take many different forms and has many different types of negative impacts on people's lives (Soto and Trucco, 2015). In Latin America and the Caribbean, the large number of violent incidents that take place have a strong influence on day-to-day life in ways that also shape the context for the application of the Convention on the Rights of the Child and the chances for its successful implementation.

The fact that the region is one of the most violent and crime-ridden regions in the world is a cause of deep concern: the region has only 8% of the world's population but accounts for nearly 40% of all homicides worldwide (Chioda, 2016). A number of the world's most violent countries are in Latin America and the Caribbean and, each and every day, an average of 67 adolescents (10–19 years of age) are murdered. Violence and the lack of security have, accordingly, come to be one of the main concerns of the region's population (Chioda, 2016). Above and beyond the direct infliction of violence to which the above figures attest, the region also suffers from the structural violence<sup>12</sup> embodied in mechanisms for the inclusion or exclusion of certain groups that then, in turn, discriminate against yet other groups, and this is coupled with symbolic violence that legitimizes its more direct and structural forms (Trucco and Inostroza, 2017).

## (h) Disasters

Natural disasters are thought to be becoming more frequent. They have significant adverse impacts on the population as a whole, but they hit the more vulnerable population groups with particular force, and a number of countries in the region are among those most at risk of natural disasters in the world. In addition, the region is feeling the effects of climate change more and more as time passes. Children and adolescents, and especially smaller children, are particularly exposed to the effects of these phenomena (Cecchini, Sunkel and Barrantes, 2017). In 2017, some 8.2 million children and adolescents in Latin America and the Caribbean were affected by natural disasters. The impacts of climate change are becoming increasingly evident, and efforts to mitigate those impacts must be pursued. Since children rely on adults to care for them, the extent of their vulnerability is influenced by their families' income and levels of education, the presence or absence of caregivers in the home, the material conditions of the dwelling in which they live and a range of other factors. This is why children who live in households with fewer economic and other kinds of resources are more vulnerable, are at greater risk and are less able to withstand the shocks associated with disasters.

In the late 1990s it was estimated that, worldwide, some 66.6 million children were affected each year by disasters. Forecasts that take climate change into account indicate that this figure could climb to 175 million per year in the coming decades (Tarazona and Gallegos, 2010). Some 13.4 million Latin-American and Caribbean children and adolescents live in drought-prone or extremely drought-prone areas, and 13.1 million live in areas that are at extreme risk of flooding (UNICEF, 2015).

Disasters appear to be happening more and more frequently in Latin America and the Caribbean. In fact, since 1960, the frequency of disasters has increased by a factor of 3.6 to an average of 68 disasters per year in the 2000s (Vargas, 2015).

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<sup>12</sup> Structural violence arises from the inequalities embedded in the fabric of society which exclude and may even gradually do away with certain groups by refusing them opportunities to obtain food, housing, health care, employment, safety and recreation, among other things. This form of violence is manifested in exclusion from society, social and economic inequality, racism and sex discrimination or any other type of discrimination that undermines people's well-being (Galtung, 1990).

## 2. Relevant approaches for analysing the status of children and adolescents 30 years after the adoption of the Convention on the Rights of the Child

### (a) A life cycle approach

The classification of the life cycle into the basic stages of early childhood, childhood, adolescence, youth, adulthood and old age is nothing new. There is a long tradition in age-related sociological and demographic studies of using these categories to attribute differentiated roles, linkages and positions to individuals based on how they interact with their social environment. Thus, for example, early childhood and childhood are periods during which there is a great deal of reliance on adult care, and the individual's interaction with his or her surroundings is mediated by the care that the individual receives. The family lays the foundations for healthy growth, learning and the development of social skills that will allow the individual to move forward, as well as for reducing or narrowing the disparities that are encountered and fostering both personal development and the advancement of society in general. Adolescence and youth are stages involving the acquisition of greater autonomy and transitions (albeit not always linear) that will mark the person's adult life, such as those involved in leaving school, breaking ties of dependence on the family, entering the workforce, leaving the family home, finding a partner and embarking on the reproductive stage. Adulthood is the stage around which the pillars of society's safety nets have primarily been structured and is marked by autonomy and the peak development of ties with the individual's social surroundings. Finally, old age is a stage marked by a loosening or termination of ties with the workplace and, at the same time, a greater need for income and health care.

The life cycle approach recognizes the differences in the roles and risks associated with each stage in that cycle and posits that those roles and risks should be key considerations in the formulation of public policies designed to guarantee individuals' rights and ensure their well-being. This is why policies targeting children and adolescents should not focus solely on the provision of goods and services directly to them but should also provide assistance to their families so that they can protect their children, as well as guidance for parents within the family setting (Cecchini and others, 2015).

### (b) Intersecting and interlocking inequalities throughout the life cycle

Given the specific features of each stage in the life cycle in terms of norms, roles, responsibilities, challenges and risks, it is important to consider how different types of gaps and inequalities are interconnected with one another—and how they intersect—throughout the life cycle. As noted in the preceding section, as disadvantages accumulate as a person transitions from one stage in life to the next, they can soon crystallize into lasting inequalities and discontinuities that then help to reinforce social stratification.

The disparities that arise out of the inequalities embedded in different individuals' or groups' paths through life are closely tied to historical patterns of social segmentation and stratification in the region that encompass territorial, ethnic and racial divides, gender- and income-based gaps, differences in access to social benefits and services—and divisions between age groups. It is essential for public policies to keep in step with people's needs in the different stages of their lives and for that policy progression to be smooth and steady (Martínez, 2017). However, in designing those policies, policymakers must also recognize the structural disadvantages historically faced by certain groups within the population and that those disadvantages intersect and are superimposed upon one another throughout a person's life (ECLAC, 2016b).

### (c) The 2030 Agenda for Sustainable Development and the Sustainable Development Goals

The 2030 Agenda for Sustainable Development that was adopted in 2015 by the 193 States Members of the United Nations establishes 17 Sustainable Development Goals. The Agenda is structured around five core elements. The first —sustainability— relates to the three intertwined pillars of development —social, economic and environmental— and the quest for lasting achievements (ECLAC, 2017b). The second —equity— entails coupling reductions in inequalities with the gains that are made. The third —the integrated and indivisible nature of the Agenda— is based on an awareness of the fact that all the Goals are interconnected and that the changes that need to be made to attain them must be multidimensional and simultaneous.

The fourth core element, which distinguishes the 2030 Agenda from previous initiatives such as the Millennium Development Goals, is that it entails a firm commitment on the part of all countries around the world to incorporate concrete, action-oriented measures into their national agendas. The fifth and final component is reflected in the fact that the 2030 Agenda sets out 169 specific targets as a road map for attaining these ambitious Goals.

Achieving gender equality is an essential part of the 2030 Agenda for Sustainable Development, which calls for gender equality as a crucial contribution to progress across all the Goals and targets. The quest for gender equality is not confined to Goal No. 5; it is also integrated into all the other Sustainable Development Goals. This was done in response to the mounting body of evidence that sheds light on the ways in which gender equality generates multiplier effects that speed progress towards the other Goals (see box 3). In fact, if gender inequalities and discrimination against women and girls are not forcefully addressed, efforts to achieve the Sustainable Development Goals will be greatly hindered or —worse still— blocked entirely.<sup>13</sup>

#### Box 3

##### The interconnection between the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women

Applying these two conventions in combination with one another is a more effective way of upholding the rights of girls and women at every stage in their lives. Both conventions establish that:

- Girls and young women have a right to education, health and nationality.
- An end must be put to all forms of violence against girls and women.
- An end must be put to discrimination against girls and to the unfair treatment of girls because of their gender.
- Both parents are responsible for the upbringing of their daughters and sons.
- Play, rest and recreation are important for all children.
- Governments must protect the rights of girls.

**Source:** United Nations Children's Fund (UNICEF), "Breve reseña de la Convención sobre la Eliminación de todas las formas de Discriminación contra la Mujer para adolescentes", New York, 2011 [online] [https://www.unicef.org/gender/files/UNICEF-CEDAW\\_SP\\_Web.pdf](https://www.unicef.org/gender/files/UNICEF-CEDAW_SP_Web.pdf).

<sup>13</sup> See United Nations Development Group (UNDG), "Compromisos y ruta hacia un planeta 50-50 al 2030", 2017 [online] <https://lac.unfpa.org/sites/default/files/pub-pdf/final%20espa%C3%B1ol.pdf>.

The Sustainable Development Goals are a fundamental tool for promoting the rights of all persons, without discrimination of any kind, and they have very real implications for the promotion of the rights of all children and adolescents. In fact, the realization of the rights set forth in the Convention on the Rights of the Child is a precondition for the achievement of the Sustainable Development Goals set forth in the 2030 Agenda (UNICEF, 2018b). It is hard to see how the global goals framed by the 2030 Agenda can be attained if the living conditions of the persons who will be leading that world forward tomorrow cannot be improved.

## **B. Latin America and the Caribbean 30 years after the entry into force of the Convention on the Rights of the Child: main achievements and policies**

A brief overview will be provided in this section of how the Latin American and Caribbean countries have been implementing the Convention on the Rights of the Child and the progress they have made in ensuring children's and adolescents' enjoyment of their rights. The research undertaken for this study focused on a subset of the fundamental rights enshrined in the Convention and, on that basis, this overview paints a broad picture of: (i) the indicators that provide the most accurate information about the inroads made by Latin America and the Caribbean in these past few decades; and (ii) the core policies that have paved the way for those advances, with emphasis on the ones implemented in the past decade.

This discussion will cover the following rights: the right to education, the right to health, the right to nutrition and housing, the right to life and to healthy development from early childhood onward, the right to live free from violence, the right to protection from commercial exploitation and child labour, the right to an adequate standard of living, the right to social security, the right to an identity and adolescents' right to well-being and to participation.

### **1. The right to education**

Articles 28 and 29 of the Convention on the Rights of the child recognize the right of all children and adolescents to an education and urge the States parties to adopt a number of different measures, including those of making primary education compulsory and available free of charge to all, promoting the development of different forms of secondary education and taking steps to encourage regular school attendance and reduce dropout rates. The tenet underlying these two articles of the Convention is that education is one of the fundamental pillars for the development of strategies for addressing and putting an end to the exclusion of children and adolescents and that it is essential if they are to enjoy other human rights, such as the right to health or the right to participation.

The fourth Sustainable Development Goal also represents a commitment on the part of States, first, to ensure that all children have access to early childhood care and developmental support and to quality preschool instruction to prepare them for primary school (see box 4) and, second, to ensure that all girls and boys complete free, equitable and quality primary and secondary educations leading to relevant and effective learning outcomes.

#### Box 4

##### Progress and challenges in the fulfilment of the rights of the child during early childhood in Latin America and the Caribbean

Thirty years after the Convention on the Rights of the Child entered into force, States parties have redoubled their commitment and their efforts to place priority on social policies for early childhood in order to ensure the realization of the rights of the child. The legal framework in each country and each country's social policies for early childhood are the foundation for the region's integrated systems for the protection of rights in early childhood. The Convention should be implemented in a holistic manner, as should policy action in order to attain optimum levels of child development, growth and well-being. To this end, it is essential to coordinate and link the measures undertaken in the fields of health and nutrition, early childhood stimulation, loving care that is sensitive to the needs of the child, protection from violence and the provision of learning opportunities from early childhood onward.

The region has made a great deal of headway in these areas:

- Early childhood issues have gained greater visibility on the public policy agenda.
- Policy and regulatory frameworks and comprehensive child development plans are now more fully developed, and some countries have made progress in furthering intersectoral and inter-agency linkages.
- Considerable advances have been made in the development of child survival and health indicators, but much remains to be done in addressing disparities, neonatal mortality, the double burden of malnutrition and chronic non-communicable diseases.
- Most of the countries have incorporated the expansion of early childhood education into their action plans.

These advances notwithstanding, nearly 4 million children in the region between 3 and 4 years of age are falling behind and are at risk of failing to realize their full development potential.<sup>a</sup> Those who live in marginalized, remote communities are the ones who are most likely to lack developmental services and opportunities. The evidence<sup>b</sup> shows the following:

- Nine out of every 10 children between the ages of 3 and 4 years are exposed to at least one developmental risk factor.
- In all, 6 million of the region's children under 5 years of age still suffer from chronic undernutrition (stunting), which makes them twice as unlikely as their peers to develop adequate literacy and mathematics skills.
- Investment in quality early childhood educational services improves children's learning outcomes, but only 6 out of every 10 children between 3 and 4 years of age are in early education programmes.
- Children who are subject to severe forms of corporal punishment are 2.4 times less likely to reach an appropriate stage of development during early childhood; 2 out of every 3 children under 5 years of age are subject to violent forms of discipline in the home.

In the light of this situation, the agenda for the coming years in the region must include the following:

- Increasing the number of early childhood programmes for children belonging to the most vulnerable groups in the population, which include children living in poverty and in rural communities, indigenous children, children with disabilities, migrant children and children living in violent or emergency situations.
- Consolidating cross-sectoral policies, inter-agency coordination and linkages between different stakeholders and levels of government while also scaling up early childhood programmes in order to ensure the availability of comprehensive services and building partnerships with different sectors and allies in the public and private sectors.
- Stepping up the work done with families, since children's ability to exercise their rights hinges on the capabilities and resources of their principal caregivers, together with heightened advocacy and communication efforts aimed at cultivating a greater demand for quality services.
- Improving the compilation of statistics and conducting research and assessments that will generate the type of information needed as a basis for sound decision-making, as well as monitoring programme quality.
- Boosting investment in comprehensive early childhood services and achieving an equitable redistribution of human, material and financial resources.

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Information System on Early Childhood in Latin America, "El itinerario de la CIDN en los sistemas jurídicos y las políticas latinoamericanas", 2016 [online] <http://www.publicaciones.siteal.iipe.unesco.org/eventos-del-siteal/30/el-itinerario-de-la-cidn-en-los-sistemas-juridicos-y-las-politicas>; United Nations Children's Fund (UNICEF), "Identificar las desigualdades para actuar: resultados y determinantes del desarrollo de la primera infancia en América Latina y el Caribe", Panamá, 2016 [online] [https://www.unicef.org/peru/spanish/Identificar\\_desigualdades\\_para\\_actuar\\_Desarrollo\\_Primeria\\_Infancia\\_America\\_Latina\\_y\\_Caribe\\_UNICEF.pdf](https://www.unicef.org/peru/spanish/Identificar_desigualdades_para_actuar_Desarrollo_Primeria_Infancia_America_Latina_y_Caribe_UNICEF.pdf).

<sup>a</sup> See UNICEF (2016c).

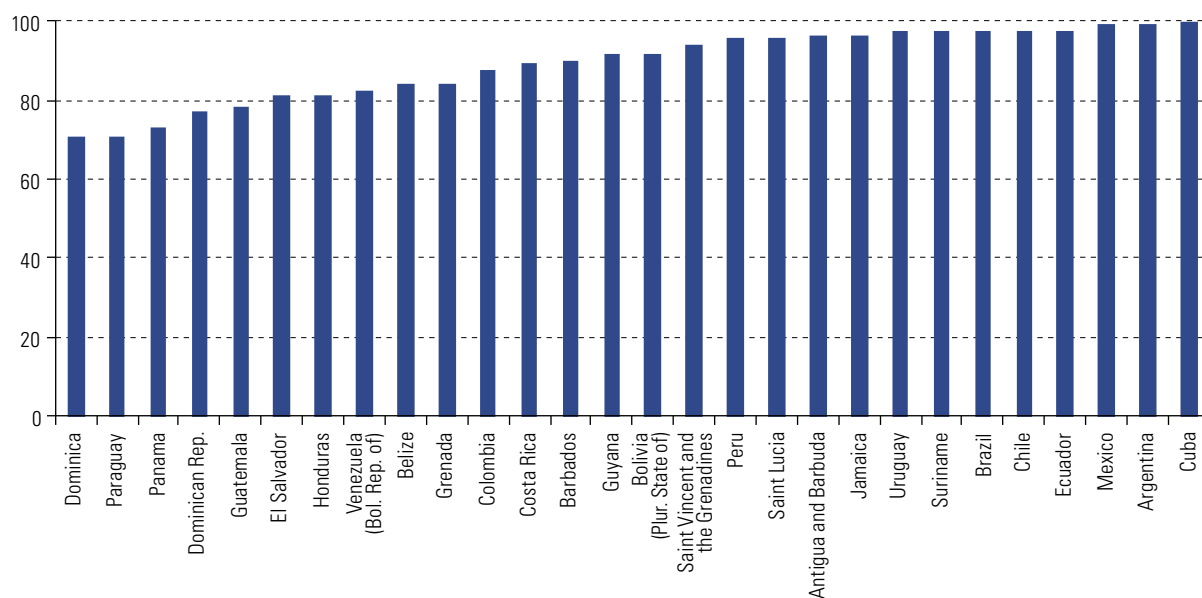
<sup>b</sup> Ibid.

The Latin American and Caribbean region has taken great strides towards the full realization of the right to education, but there are still a number of areas in which it has lagged behind. Access to early education is one of the areas in which major inroads have been made. Over the past two decades, various countries in the region have made a determined effort to expand preschool enrolment. While differences across countries of the region persist, the regional averages indicate that nearly nine out of every ten 5-year-olds attend preschool (see figure 10). Attendance rates for 4-year-olds and 3-year-olds are considerably lower (64.6% and 38.2%, respectively), however (see figures 10 and 11), according to the data for eight countries of the region that have updated attendance statistics (see figure 11), and children from wealthier homes are 2.5 times more likely to be attending preschool than children from poorer homes are (UNICEF, 2016c).

Although these figures indicate that there is still a way to go before universal preschool attendance is a reality in the region (ECLAC, 2011), the current rates are higher than they were just a decade ago and coverage is noticeably higher than in other developing regions (see figure 12).

Although, generally speaking, a great deal of headway has been made, the distribution of these advances differs markedly from one social sector to the next. The differentials in access to preschool education and caregiving services for children from higher- and lower-income households are particularly striking. Children who take part in early learning activities are three times more likely to achieve an appropriate level of development during early childhood (UNICEF, 2016c). These differentials between income quintiles are also apparent in the figures on adult learning support for children in this age group (see figure 13).

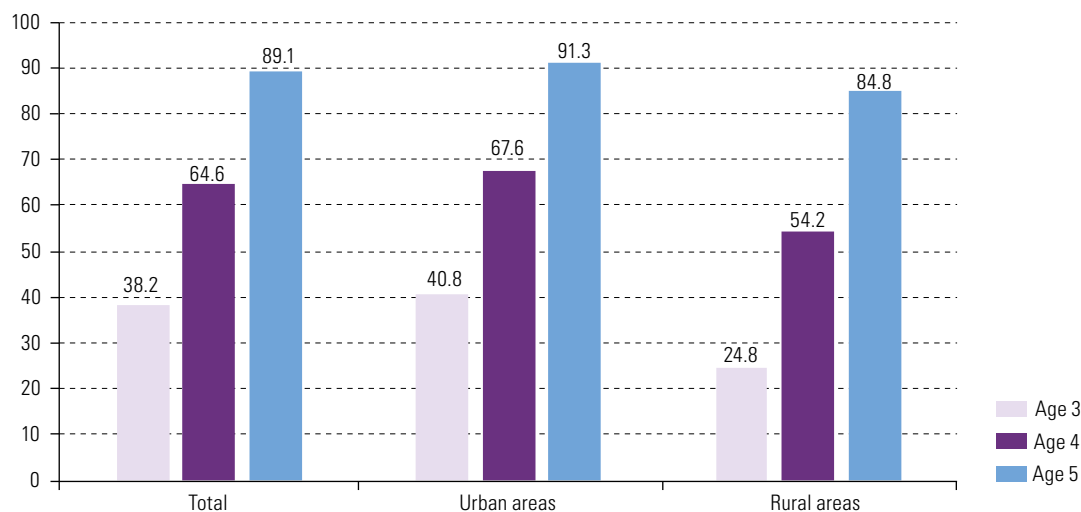
**Figure 10**  
Latin America and the Caribbean (28 countries): net adjusted pre-primary enrolment rate for children one year before they reach the age for entry into primary school, around 2017  
(Percentages)



Source: United Nations Educational, Scientific and Cultural Organization (UNESCO), UIS.Stat [online database] <http://data.uis.unesco.org/>.

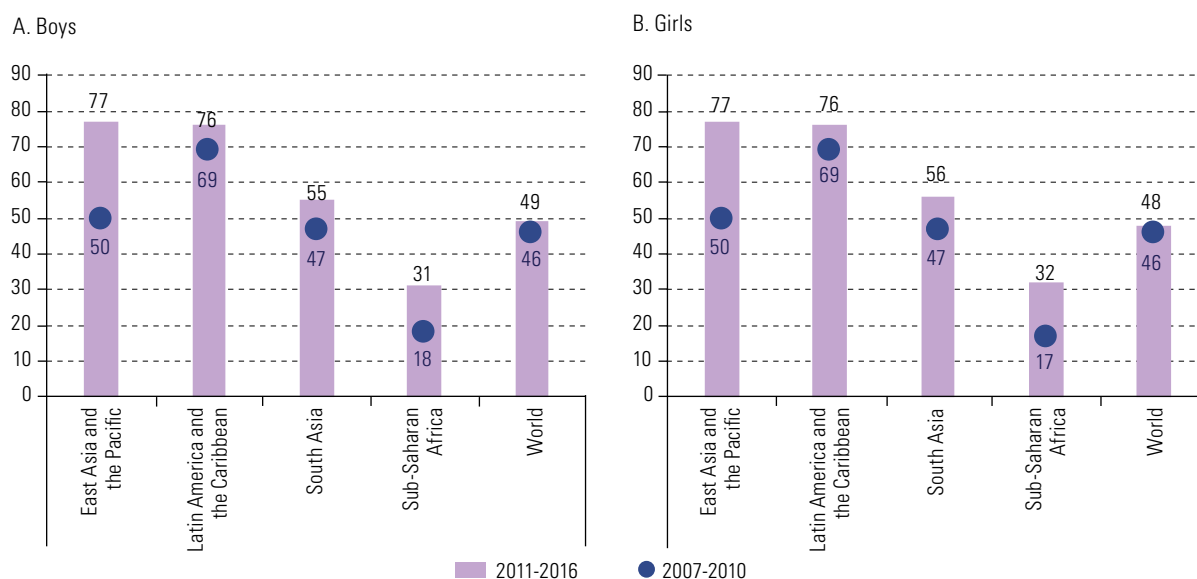


**Figure 11**  
Latin America (8 countries): preschool attendance among children aged 3–5, by area of residence, around 2014  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2016* (LC/PUB.2017/12-P), Santiago, 2017; on the basis of Household Survey Data Bank (BADEHOG).

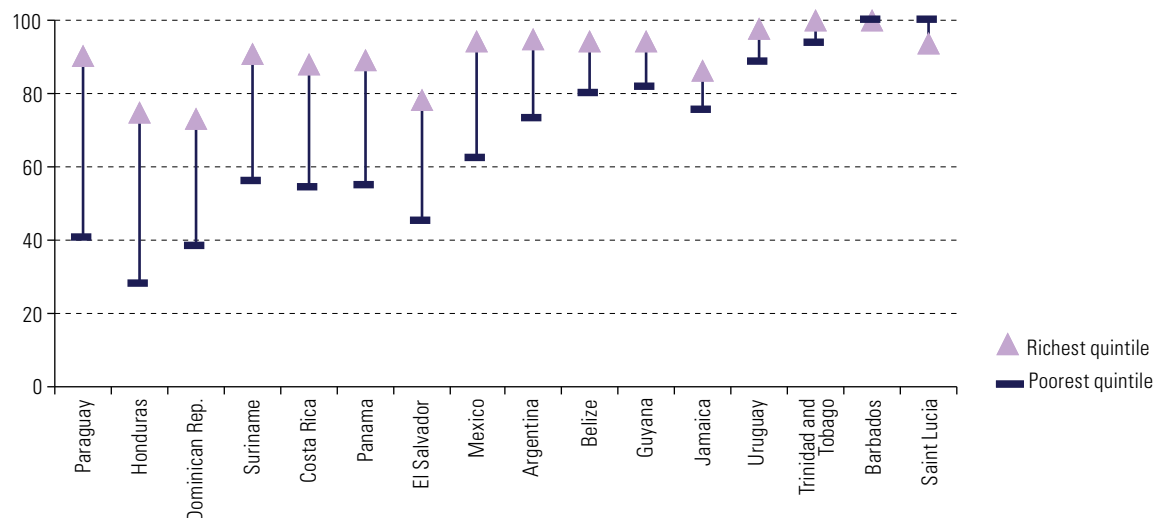
**Figure 12**  
Latin America and the Caribbean and other selected regions: gross pre-primary enrolment rates, 2007–2010 and 2011–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2012: Children in an Urban World*, New York, 2012; *The State of the World’s Children 2013: Children with Disabilities*, New York, 2013; *The State of the World’s Children 2017: Children in a Digital World*, New York, 2017.



**Figure 13**  
Latin America and the Caribbean (16 countries): parental learning support, by income level, around 2005–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2017: Children in a Digital World*, New York, 2017; multiple indicator cluster surveys (MICS) and demographic and health surveys (DHS).

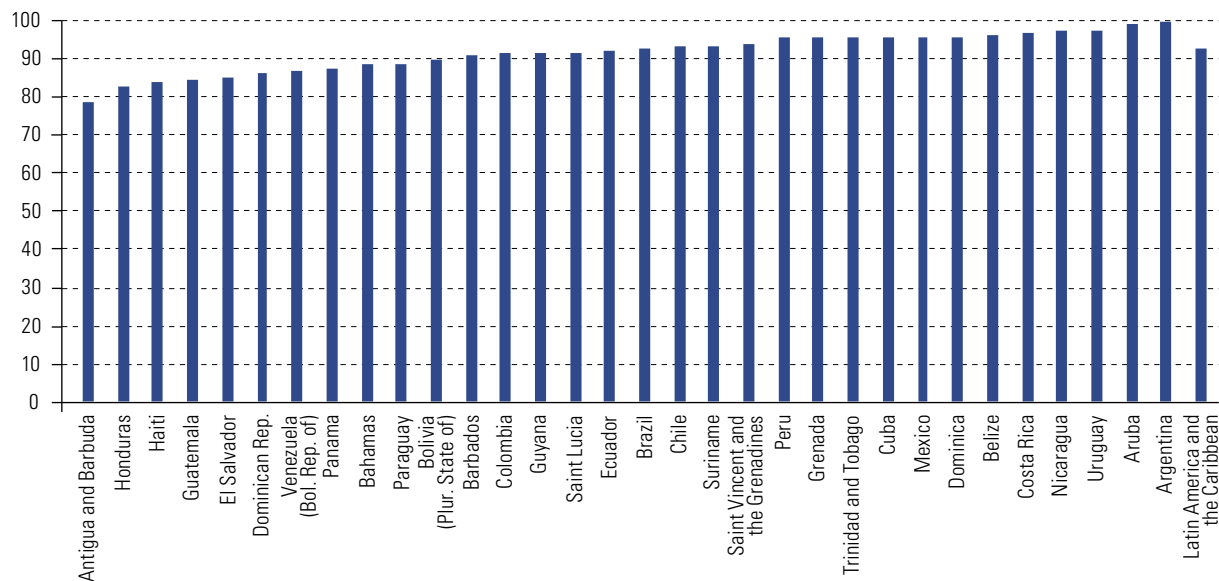
**Note:** The data on Guyana, Jamaica, Paraguay, Saint Lucia, Trinidad and Tobago, and Uruguay were drawn from reports on the results of multiple indicator cluster surveys. Uruguay’s figures are based on a comparison of the poorest 40% of the population with the richest 60%. The indicator for parental learning support measures the percentage of children between 36 and 59 months of age whose father and/or mother has taken part in one or more of the following activities during the last three days in order to foster learning and help the child to be ready for school: (a) read books to the child; (b) tell stories to the child; (c) sing songs to the child; (d) take the child out somewhere; (e) play with the child; and (f) name, count or draw things with the child.

The target of providing a complete primary education for all has practically been achieved in almost all of the countries, but there are still 3.6 million children who are not attending primary school.<sup>14</sup> The region has made major inroads in the provision of access to primary education over the past 20 years, as the percentage of children of the appropriate age who are not in primary school has plunged by 43% during that time. The pace of progress has stalled in the last 10 years, however, with no further change being seen in the percentage of children who are not in school (around 5%) as estimated by the United Nations Educational, Scientific and Cultural Organization (UNESCO, 2017). Of course, the situation varies sharply across countries, and over 10% of the children of the corresponding ages are not in school in Antigua and Barbuda, the Dominican Republic, El Salvador, Haiti, Honduras and Guatemala, among others (see figure 14).

Despite the efforts that the countries of the region have devoted to achieving this target, disparities persist in the coverage of primary education services between urban and rural areas and in the attendance rates of indigenous and non-indigenous children (UNICEF, 2012a). In addition, children and adolescents with disabilities continue to face a particularly severe degree of exclusion in the region, with their average length of school attendance amounting to no more than about three years (Trucco and Ullmann, 2015). Special attention must also be devoted to migrant children, who often run up against entry barriers in their host communities having to do with such matters as the validation of courses that they have already completed and differences in the language of instruction.

<sup>14</sup> See United Nations Educational, Scientific and Cultural Organization (UNESCO), UIS.Stat [online database] <http://data.uis.unesco.org/>.

**Figure 14**  
 Latin America and the Caribbean (32 countries): net primary school enrolment rates, around 2017  
 (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), CEPALSTAT [online database] <http://estadisticas.cepal.org/cepalstat/portada.html>.

In terms of learning outcomes, the scores of students in the third and sixth grades on the Third Regional Comparative and Explanatory Study (TERCE)<sup>15</sup> indicate that students in the region continue to face learning challenges and problems with basic skills acquisition at the primary school level in the areas of reading, writing, mathematics and natural sciences. A detailed analysis of the TERCE results<sup>16</sup> demonstrates that learning outcomes are directly related to students' socioeconomic level and that repeating a grade has a strong negative impact on academic attainment. Preschool attendance between the ages of 4 and 6 years is positively correlated with learning in all grades and in all subject areas. Finally, in terms of equity, students who self-identify as indigenous generally have poorer marks than non-indigenous children throughout the region. When statistics on academic achievement are disaggregated by gender, the results vary from one country to another, but the most common pattern is one in which girls score higher on reading tests and boys score higher on mathematics tests.

Major changes have also been seen in secondary education since the Convention entered into force in 1989. Over the past 30 years, secondary school enrolment has risen sharply in many countries of the region. School attendance has increased, and improvements in learning outcomes have also been seen, although the results vary (see box 5). What is more, the secondary education completion rate in the 20–24 age group had jumped from 26% in 1990 to 60% by 2016 (see figure 15).

<sup>15</sup> See United Nations Educational, Scientific and Cultural Organization (UNESCO), *Informe de Resultados Tercer Estudio Regional Comparativo y Explicativo (TERCE): Logros de Aprendizaje*, Paris, 2015.

<sup>16</sup> See United Nations Educational, Scientific and Cultural Organization (UNESCO), *Informe de Resultados Tercer Estudio Regional Comparativo y Explicativo (TERCE): Logros de Aprendizaje*, Paris, 2015.

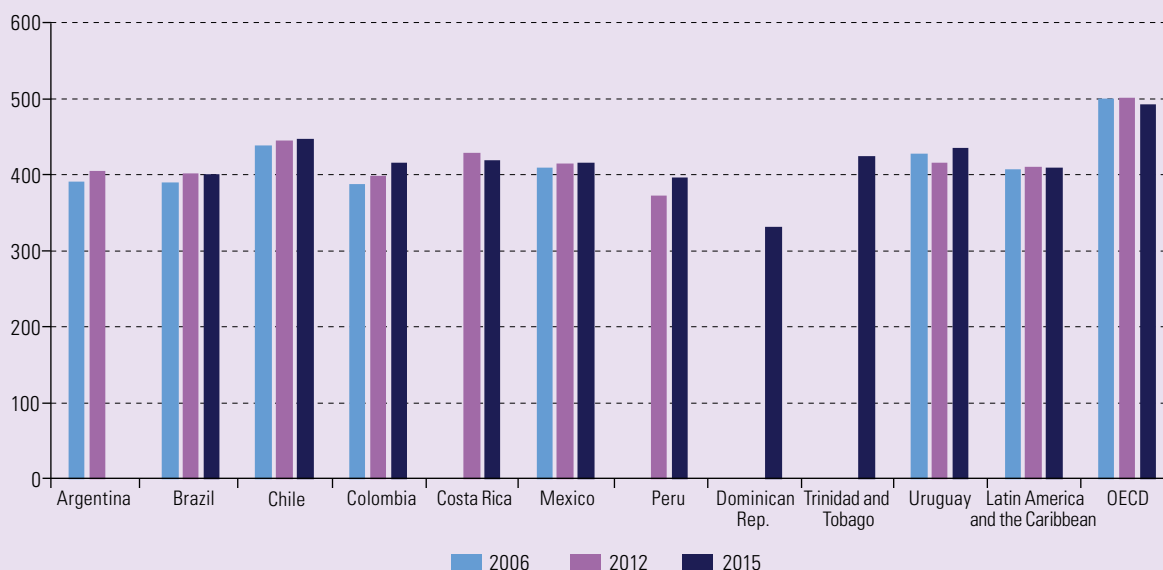
### Box 5

#### Learning outcomes as measured by the Programme for International Student Assessment (PISA)

Between 2000 and 2009, the results on the tests administered to 15-year-olds by the Programme for International Student Assessment (PISA) improved somewhat in the five countries for which historical data are available.<sup>a</sup> With the exception of Argentina, the percentage of very low-scoring students decreased between 2000 and 2009, and two countries (Chile and Peru) in the region marked up some of the largest improvements in absolute terms in reading scores of all the countries in which the PISA tests were administered (OREALC, 2013).

In the more recent assessments (2012 and 2015), the average scores of students in the region on the science test put the region near the bottom of the international ranking (Bos and others, 2016). Chile had the highest scores in the region in 2015, followed by Uruguay and Trinidad and Tobago (see the figure).

Latin America and the Caribbean (10 countries) and the Organization for Economic Cooperation and Development (OECD): average scores on the science test of the Programme for International Student Assessment (PISA), 2006, 2012 and 2015



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Inter-American Development Bank (IDB), CIMA Education Statistics Portal [online database] <https://www.iadb.org/en/sector/education/cima/home>.

Latin American and Caribbean students' scores on the reading test have improved, but are still low in the international ranking (Bos and others, 2016). The scores of students in some countries, such as Costa Rica, have improved significantly in this area, however. Out of the three subject areas covered by the PISA exams, mathematics continues to be the one in which the region's students have the worst scores, and those scores were slightly lower in 2015 than they had been in 2012 in a number of countries (Brazil, Colombia and Costa Rica).

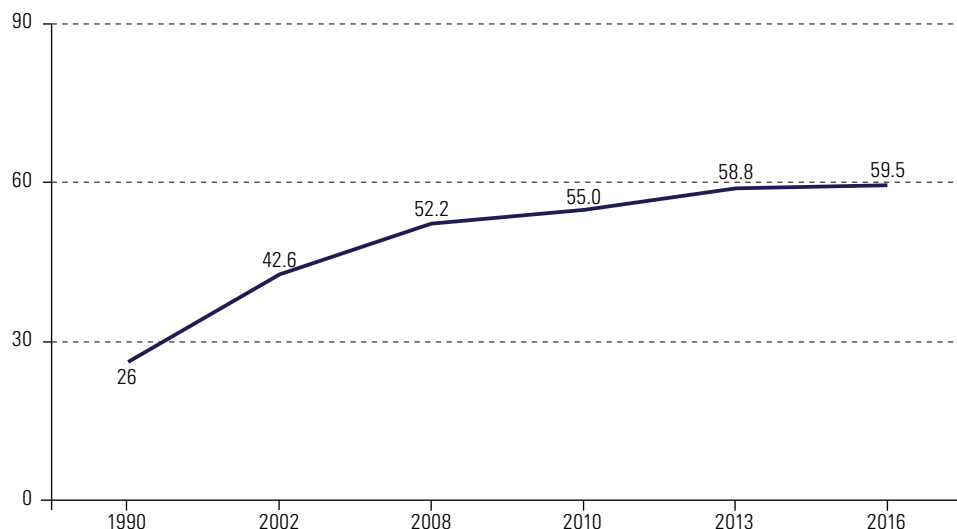
The PISA scores vary a great deal, however, both across and within the countries of the region. For example, even though, on average, girls complete more years of schooling than boys do, the scores reveal wide gender-based gaps. Girls tend to score higher on the reading test, while boys score higher on the math and science tests. This skewed distribution is reflected in areas of specialization in school and in the future careers of men and women, with women exhibiting a greater tendency to move into lower-paid careers than men.

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Inter-American Development Bank (IDB), CIMA Education Statistics Portal [online database] <https://www.iadb.org/en/sector/education/cima/home>; M.S. Bos and others, "PISA América Latina y el Caribe: ¿cómo le fue a la región?", *Nota 1*, Washington, D.C., Inter-American Development Bank (IDB), 2016; UNESCO Regional Bureau for Education in Latin America and the Caribbean (OREALC), *Situación Educativa de América Latina y el Caribe: Hacia la educación de calidad para todos al 2015*, Santiago, 2013.

<sup>a</sup> Argentina, Chile, Mexico, Peru and Uruguay.

**Figure 15**

Latin America (18 countries): young people aged 20–24 who have completed secondary education, around 1990, 2002, 2012 and 2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of special tabulations from household surveys conducted in the respective countries.

These results are in step with the progress that the region appears to have made in terms of both school enrolment and school attendance. Between 2007 and 2016, the average school attendance rate in Latin America and the Caribbean for the 12–14 age group rose from 87% to 95%, while, for the 15–17 age group, it climbed from 77% to 82%.<sup>17</sup> Nevertheless, 10.4 million Latin American and Caribbean adolescents are still not exercising their right to a secondary education. More specifically, 8% (2.9 million) of the adolescents who are of the age when students are usually in the first cycle of secondary school are not attending school, while the corresponding figure for the second cycle of secondary education is 34% (7.5 million).<sup>18</sup>

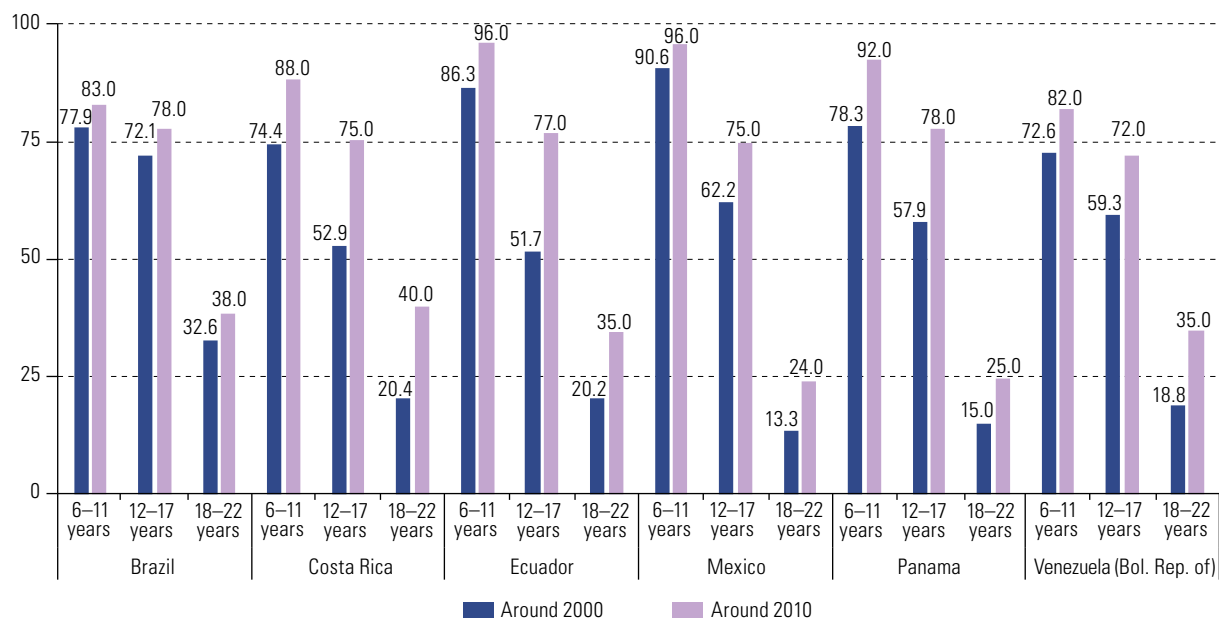
More indigenous and Afrodescendent children and adolescents tend not to be in school than their non-indigenous, non-Afrodescendent peers (see figures 16 and 17), and, in the latter group, enrolment rates are lower among boys than girls. Indigenous children are faced with sizeable hurdles which often prevent them from enrolling or staying in school but which do not show up in national averages (ECLAC/UNICEF, 2012). The region also must meet the challenge of ensuring that children and adolescents with disabilities are able to avail themselves of their right to education (Colamarco and Delamónica, 2013).

<sup>17</sup> See Inter-American Development Bank (IDB), CIMA Education Statistics Portal [online database] <https://www.iadb.org/en/sector/education/cima/home>.

<sup>18</sup> See United Nations Educational, Scientific and Cultural Organization (UNESCO), UIS.Stat [online database] <http://data.uis.unesco.org/>.

**Figure 16**

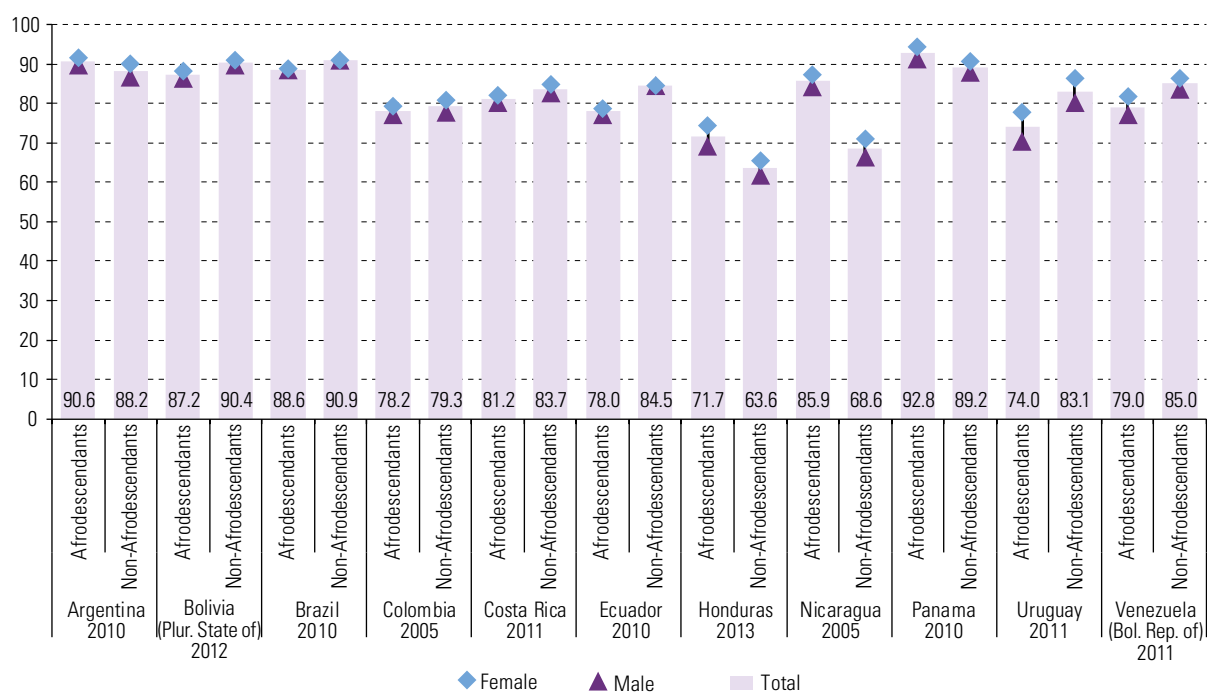
Latin America (6 countries): members of indigenous peoples aged 6–22 years attending an educational establishment, by age group, around 2000 and 2010 (Percentages)



Source: F. Del Popolo (ed.), *Los pueblos indígenas en América (Abya Yala): desafíos para la igualdad en la diversidad*, ECLAC Books, No. 151 (LC/PUB.2017/26), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2018.

**Figure 17**

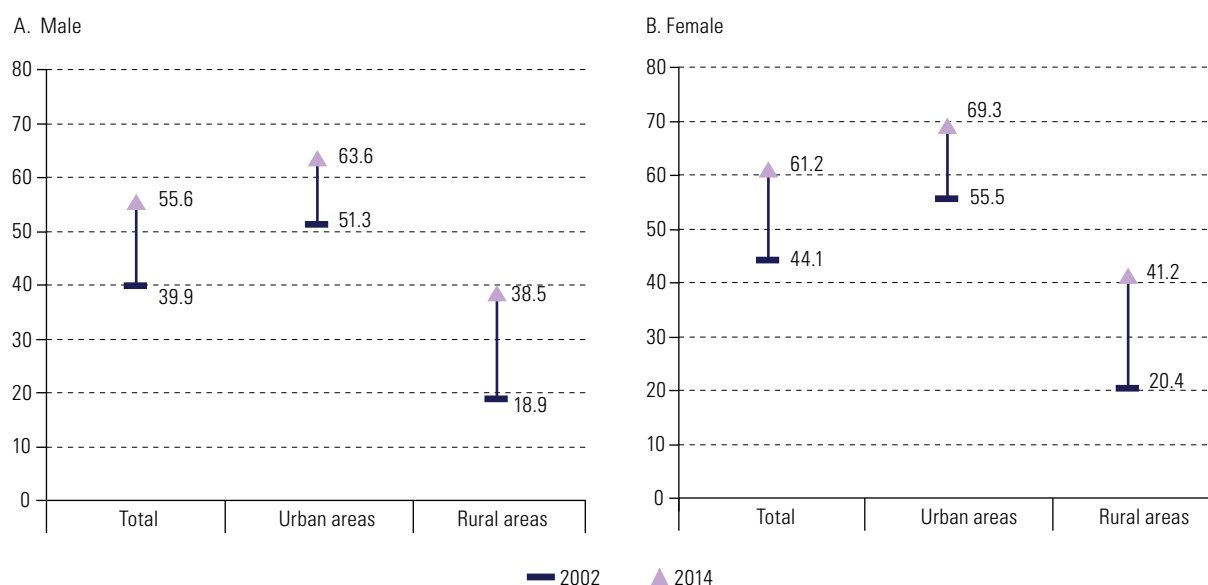
Latin America (11 countries): proportion of Afrodescendent and non-Afrodescendent boys, girls and adolescents aged 12–17 attending an educational establishment, around 2010 (Percentages)



Source: Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America*, 2016 (LC/PUB.2017/12-P), Santiago, 2017; on the basis of special processing of census microdata using the retrieval of data for small areas by microcomputer program (REDATAM).

Between 2002 and 2014, the average secondary education completion rate for 14 Latin American countries rose from 39.9% to 55.6% for males and from 44.1% to 61.2% for females. Although the figures have certainly improved, the gender gap and the differential between urban and rural residents have persisted (see figure 18). The high secondary school dropout rate for young men is a serious problem which mainly has to do with economic considerations, although those are not the only factors. The result is that many young men in lower-income sectors of the population end up entering the labour market at a younger age than they otherwise would. This situation also has to do, however, with an exclusionary secondary education system that is not succeeding in holding on to its students and making it meaningful to them to complete their schooling.

**Figure 18**  
Latin America (14 countries): young people aged 20–24 who have completed their secondary education, by sex and area of residence, around 2002 and 2014 (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2016* (LC/PUB.2017/12-P), Santiago, 2017; on the basis of Household Survey Data Bank (BADEHOG).

Significant gender-based differences to be taken into consideration in an analysis of secondary education completion rates include differentiated male/female participation in gainful employment and in caregiving activities, since 63% of female adolescents in rural areas who are not attending school are performing unpaid work.<sup>19</sup> The results of time-use surveys indicate that adolescent girls spend nearly twice as much time per week performing unpaid domestic work (more than half of a 40-hour work week) than adolescent boys, regardless of whether or not they are also engaged in some other activity. Motherhood and early marriages or early entry into consensual unions are some of the main factors that prompt adolescent girls to leave school. As a result of these factors, the average number of adolescent girls who are neither employed nor in school is almost twice as high as the average number of adolescent boys in that situation.

<sup>19</sup> See C. Céspedes and C. Robles, C. (2016). "Niñas y adolescentes en América Latina y el Caribe: deudas de igualdad". *Asuntos de Género series*, No. 133 (LC/L.4173), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2016.

This situation poses a challenge for the countries of the region, which, in line with the Sustainable Development Goals, have made a commitment to ensure, by 2030, that all children complete free, inclusive, equitable and high-quality primary and secondary schooling.

The countries of the region have deployed a wide array of policies in an effort to ensure the enjoyment of the right to education. A number of Latin American countries have either created childcare services for children between the ages of 0 and 3 and preschools for those in the 3–6 age group or have expanded the coverage of existing services (see box 6).

## Box 6

### Early childhood care and preschool education policies

Although it is not yet being done everywhere in the region, in recent decades a number of countries have either set up childcare services for children up to 3 years of age and established preschools or early education services for those in the 3–6 age group or have expanded the coverage of existing services for those age groups (Vegas and Santibáñez, 2009; Rossel, Filgueira and Rico, 2015; Araujo, López-Boo and Puyana, 2013; and Mateo and Rodríguez-Chamussy, 2016).

Perhaps one of the most outstanding examples is Chile, which has succeeded in greatly expanding the supply of (mostly all-day) public care services for children in the 0–2 and 2–3 age brackets in the poorest sectors of the population by combining the services provided by the National Board for Nursery Schools (JUNJI) and the Chile Crece Contigo (“Chile grows with you”) programme. Even so, however, the model still suffers from glaring inequalities (Staab, 2010; Staab and Gerhard, 2010). The Chile Crece Contigo programme was launched in 2007 and mainly works with families with children between the ages of 0 and 4 years. Its aim is to coordinate the different dimensions (primarily health and education) that influence a child’s development. The services included in this system are based on universal yet targeted health and education policies and policies designed to provide priority access to certain other social services. This initiative is thus making headway in linking up various components of the social protection matrix for the country’s children (Staab, 2012).

Mexico has also managed to expand the day-care and preschool education services offered by the Mexican Social Security Institute (IMSS) by subsidizing individuals and organizations that provide home day-care facilities. These services are primarily intended for low-income working mothers who were not previously covered by the IMSS network. The model provides for both supply and demand subsidies: individuals and organizations are paid to adapt the services they provide so that they fit in with the model, and a per-child subsidy is paid whereby the families have to cover only 35% of the cost of the service. This initiative has made it possible to greatly expand the use of childcare services—for example, the coverage of IMSS services soared from 59,000 to almost 215,000 children in the years between 1996 and 2007 (Staab and Gerhard, 2010)—although it has also sparked a debate about the quality standards of these services, with some quarters contending that it is replicating the same inequalities in terms of access and quality seen in the country’s larger education system (Staab and Gerhard, 2010; Staab, 2010).

More recently, Uruguay has expanded the coverage of its childcare services by strengthening its Childcare and Family Centres Plan (the CAIF Plan). In the CAIF model, services are managed and run by social organizations but are wholly funded by the State. This initiative targets low-income families and generally operates in centres located in socially vulnerable areas. The combination of the fact that preschool education is compulsory starting at age 4 and the effort that has been made to expand the capacity of the public system has resulted in a substantial increase in school attendance for this age group (Rico, 2011a).

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of M. Araujo, F. López-Boo and J. Puyana, *Overview of Early Childhood Development Services in Latin America and the Caribbean*, Washington, D.C., Inter-American Development Bank (IDB), 2013; M. Mateo and L. Rodríguez-Chamussy, *Cashing in on Education: Women, Childcare, and Prosperity in Latin America and the Caribbean*, Washington, D.C., 2016; C. Rossel, F. Filgueira and M. Rico, “Early childhood and childhood”, *Towards universal social protection: Latin American pathways and policy tools*, ECLAC Books, No. 136 (LC/G.2644-P), S. Cecchini and others (eds.), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2015; P. Sauma, “Protección social y trabajo no remunerado: redistribución de las responsabilidades y tareas del cuidado. Estudio de caso Costa Rica”, *Women and Development series*, No. 116 (LC/L.3519), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2012; S. Staab, “Social investment policies in Chile and Latin America: towards equal opportunities for women and children?”, *Journal of Social Policy*, vol. 39, No. 4, Cambridge, Cambridge University Press, 2010; S. Staab, “Análisis de la matriz de protección social a la infancia y la adolescencia en Chile: informe final de consultoría”, Santiago, Economic Commission for Latin America and the Caribbean/United Nations Children’s Fund (ECLAC/UNICEF), 2012, unpublished; S. Staab and R. Gerhard, “Childcare service expansion in Chile and Mexico: for women or children or both?”, *Gender and Development Programme Paper*, No. 10, Geneva, United Nations Research Institute for Social Development (UNRISD), 2010; E. Vegas and L. Santibáñez, *The Promise of Early Childhood Development in Latin America and the Caribbean*, Washington D.C., World Bank, 2009; M. Rico (coord.), “El desafío de un sistema nacional de cuidados para el Uruguay”, *Seminars and Conferences series*, No. 66 (LC/L.3359), Santiago, Economic Commission for Latin America and the Caribbean/ United Nations Population Fund (ECLAC/UNFPA), 2011.

Efforts are also being made to expand the coverage of secondary education and to encourage adolescents to stay in school as a way of promoting the inclusion in society of members of the most disadvantaged sectors of the population. A number of countries have instituted scholarship programmes coupled with companion strategies to keep students from dropping out of school and boost student retention rates (Robles, 2011). Examples include the secondary education scholarships offered by Chile's National Student Assistance and Scholarship Board (JUNAEB), the "Mi Beca Segura" scholarship programme in Guatemala, the National Scholarship 18 Programme of Peru, Uruguay's Commitment to Education Programme and the Primary and Secondary Studies Completion Plan (FINES) in Argentina (Rossel and Filgueira, 2015a).

## 2. The right to health

Articles 24 and 25 of the Convention on the Rights of the Child establish the right of all children and adolescents to enjoy the highest attainable standard of health and to receive proper care. States parties to the Convention are also urged to strive to reduce infant mortality, combat disease and malnutrition, to ensure appropriate prenatal and postnatal health care for mothers, to provide health education and to develop preventive health-care services.

One key indicator for measuring the region's progress towards these goals is the rate of infant mortality, which has fallen thanks to improvements in access to proper nutrition, immunization, medical treatment and basic infrastructure.

The region's achievements in reducing infant mortality, as was also shown in the regional assessment prepared on the occasion of the twenty-fifth anniversary of the Convention, are attributable to the advances in disease prevention brought about by immunization campaigns (ECLAC/UNICEF, 2014a). The proportion of government-funded vaccinations conducted by the Expanded Immunization Programme (PAI) has been climbing, with an increase from 83.2% in 2002 to 89.3% in 2011 (ECLAC/UNICEF, 2014a). Nonetheless, an examination of the coverage rates for the three main vaccines administered under the countries' immunization programmes shows that, while the coverage rate for tuberculosis immunization is 95%, the rates for the diphtheria and polio vaccines are lower, and a greater effort will therefore have to be made to achieve comprehensive coverage for these vaccines (see figure 19).

These advances notwithstanding, the region still lags behind in the delivery of health care to disadvantaged households, such as poor households and those whose members are less educated and have substandard housing.

The total rate of HIV incidence in Latin America and the Caribbean is below the world average, but the incidence rate for adolescents in the region is the second-highest in the world, after Africa's (see figure 20). The incidence rate for children under 5 years of age is also a cause of concern, since it shows that efforts to halt vertical transmission (which, as has been seen in developed countries, is completely preventable) have not been as effective as they should be (ECLAC/UNICEF, 2008a). While the region has made a great deal of headway in expanding care and treatment for adults, it is lagging behind in terms of treatment and care for children. Thus, the Latin American and Caribbean region is still not making satisfactory progress in the area of HIV prevention and diagnostic services for children.



**Figure 19**

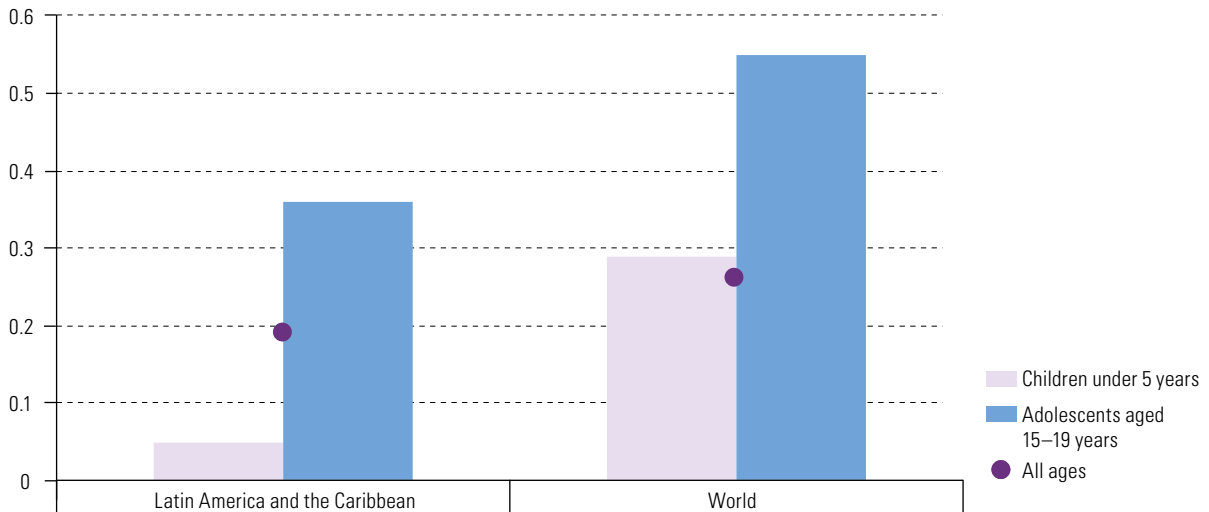
Latin America and the Caribbean and other selected regions: immunization coverage, 2003 and 2016  
(Percentages)



**Source:** United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2003*, New York, 2002; *The State of the World’s Children 2016: A fair chance for every child*, New York, 2016; multiple indicator cluster surveys (MICS) and demographic and health surveys (DHS).

**Figure 20**

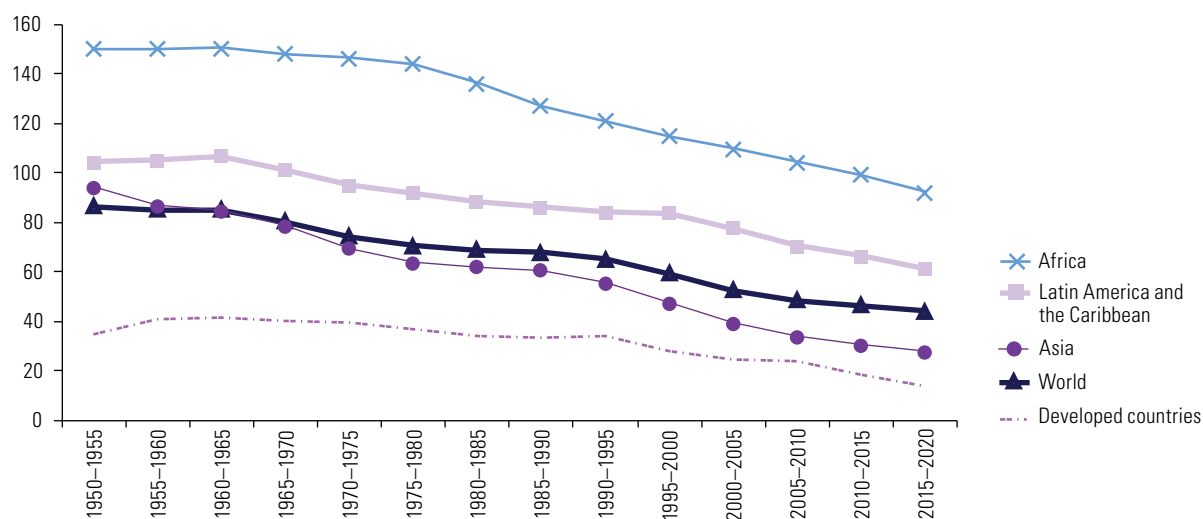
Latin America and the Caribbean and the world: incidence of HIV, 2016  
(Number of cases per 1,000 uninfected persons)



**Source:** United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2017: Children in a Digital World*, New York, 2017; on the basis of Joint United Nations Programme on HIV/AIDS (UNAIDS).

The important issue of teenage pregnancy has yet to be tackled effectively. Addressing this problem is essential if the region is to fully realize the right to health. Motherhood during adolescence entails a series of risks —health risks for both the mother and the child, risks of reduced educational attainment and of occupying a less advantageous position in the labour market, a greater risk of having experienced any of the many forms of gender-based violence or of experiencing such violence in the future and a heightened risk of child marriage or of premature entry into a consensual union, among others— that take on special meaning in a region that is relatively far along in its demographic transition (Rodríguez, 2017). Some 11% of all adolescents and young people between the ages of 15 and 24 first engaged in sexual relations before they were 15 years old.<sup>20</sup> As may be seen from figure 21, although the adolescent fertility rate has been declining over time in Latin America and the Caribbean, it is still the second-highest in the world, after Africa's. Thus, the fertility rate among the adolescent population in Latin America and the Caribbean is higher than it would be expected to be, given its classification as a middle-income region with its urbanization rates and the extent of women's presence in the school system and labour market.

**Figure 21**  
Latin America and the Caribbean and other selected regions: fertility rates for women aged 15–19, 1950–1955 and 2015–2020  
(Per 1,000 births)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations, World Population Prospects [online database] <http://esa.un.org/wpp/>.

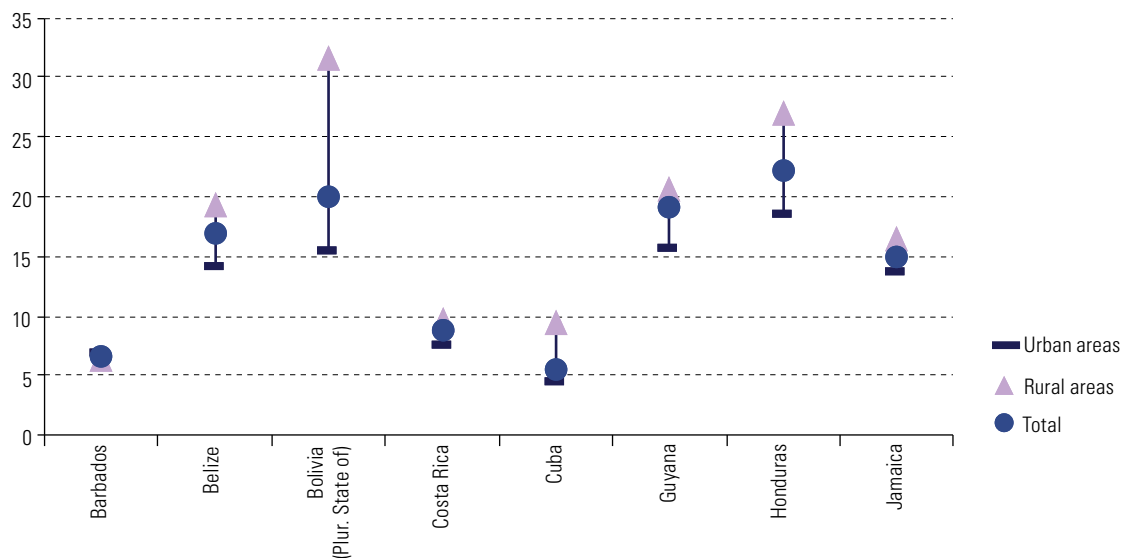
Sharp variations in adolescent fertility rates are also seen in different socioeconomic groups, with adolescents who are living in poverty having much higher rates than other adolescents (PAHO/UNFPA/UNICEF, 2018; ECLAC/UNICEF, 2014a; ECLAC/OIJ, 2008; ECLAC/UNFPA, 2011; ECLAC, 2012a). The rates for adolescents living in rural and urban areas also differ significantly. As is shown in figure 22, these differentials are particularly marked in countries such as Honduras and the Plurinational State of Bolivia.

Figure 23 illustrates another factor of key importance in accounting for differentials in fertility rates, as the teenage pregnancy rates are, on average, higher for women of African descent than for the rest of the population.

<sup>20</sup> See C. Céspedes and C. Robles, “Niñas y adolescentes en América Latina y el Caribe: deudas de igualdad”, *Gender Affairs series*, No. 133 (LC/L.4173), Santiago, Economic Commission for Latin America and the Caribbean (ECLAC), 2016.

**Figure 22**

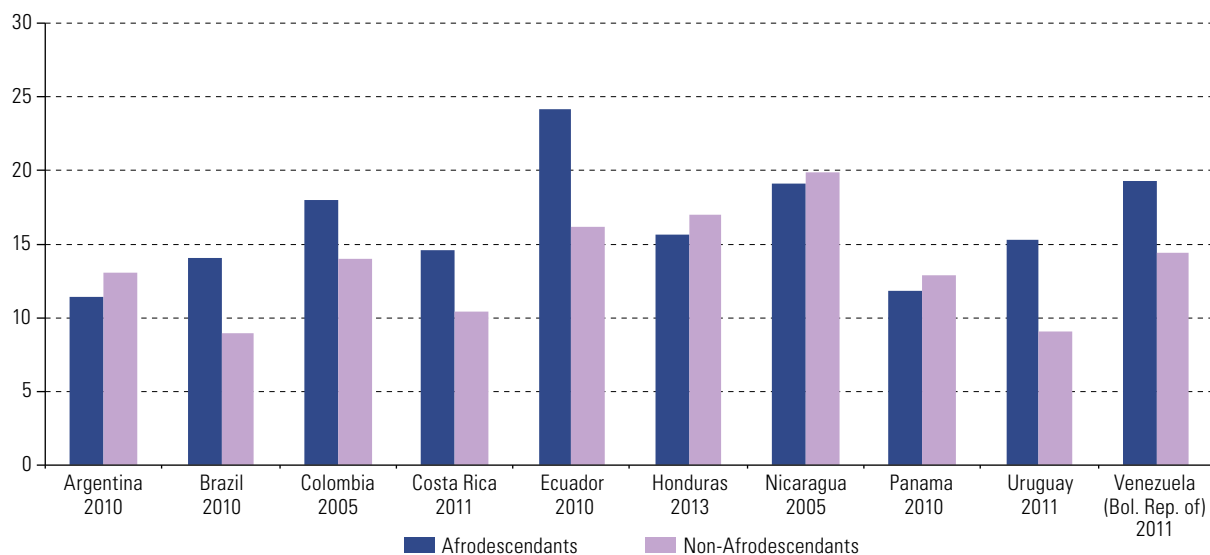
Latin America and the Caribbean (8 countries): women aged 20–24 who had their first child before turning 18, by area of residence, 2006–2012  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children's Fund (UNICEF), UNICEF Data [online database] <https://data.unicef.org/>; multiple indicator cluster surveys (MICS), demographic and health surveys (DHS) and other representative national surveys.

**Figure 23**

Latin America and the Caribbean (10 countries): proportion of Afrodescendant and non-Afrodescendant adolescent girls aged 15–19 who are mothers, by ethno-racial status, around 2010  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2016* (LC/PUB.2017/12-P), Santiago, 2017; on the basis of special processing of census microdata using the retrieval of data for small areas by microcomputer program (REDATAM).

**Note:** The figures for the non-Afrodescendant population do not include people who self-identify as indigenous or whose ethno/racial status is unknown.

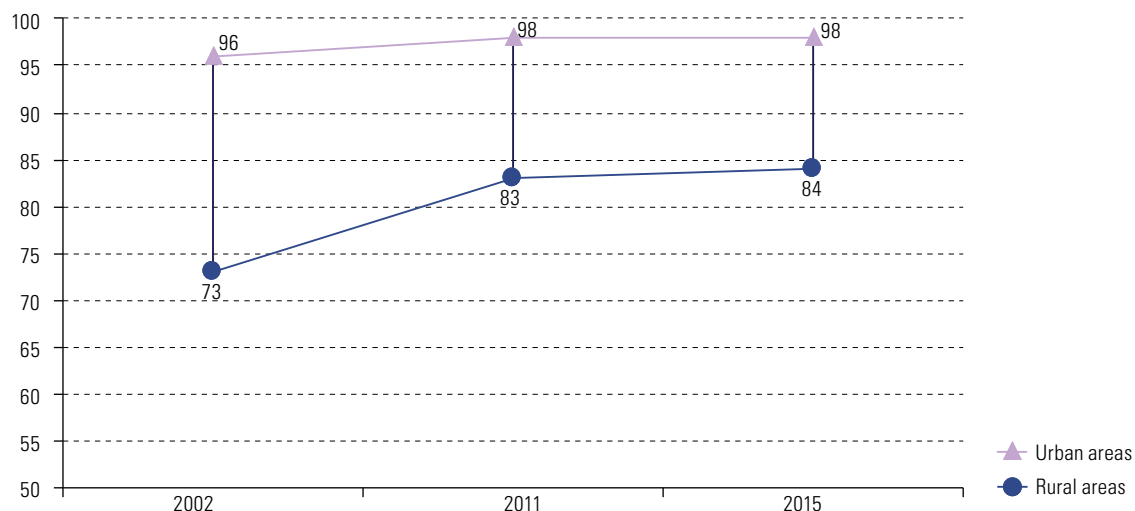
The percentage of Afrodescendent girls between 15 and 19 years of age who are mothers remains high and, in 7 of the 10 countries for which data are available, is higher than the percentage of non-Afrodescendent mothers of the same ages. In those 10 countries, between 14% and 25% of adolescent girls of African descent have had at least one child. In some countries, the differentials are truly alarming. This shows that even countries that have implemented universal, integrated health policies for youth, including policies aimed at reducing unwanted teenage pregnancy, have not been able to put an end to ethno/racial inequalities in this respect.

Insufficient government action to combat violence, the fact that very few of the sex education services offered at health centres incorporate an ethno-racial dimension and the deterioration of public services in areas that have large Afrodescendent populations are some of the critical factors that have extremely negative impacts on the lives of women, girls, adolescents and young people of African descent (ECLAC, 2017a). For all girls and adolescents as a whole, 25% of the demand for family planning services goes unmet.

The Convention states that governments must strive to ensure that all children have access to the services they need in order to enjoy the highest attainable standard of health. This involves providing access to health care, but it also entails creating the types of conditions required for people to enjoy good health and for preventing disease, such as access to clean drinking water, sanitation services, a healthful environment and relevant information on health care and disease prevention.

Between 2002 and 2015, the proportion of the population residing in homes having access to improved drinking water sources rose from 89% to 96% (see figure 24) and, most importantly, the bulk of the increase in this indicator corresponded to rural areas, where children and adolescents tend to be more exposed to diseases attributable to a lack of clean drinking water.

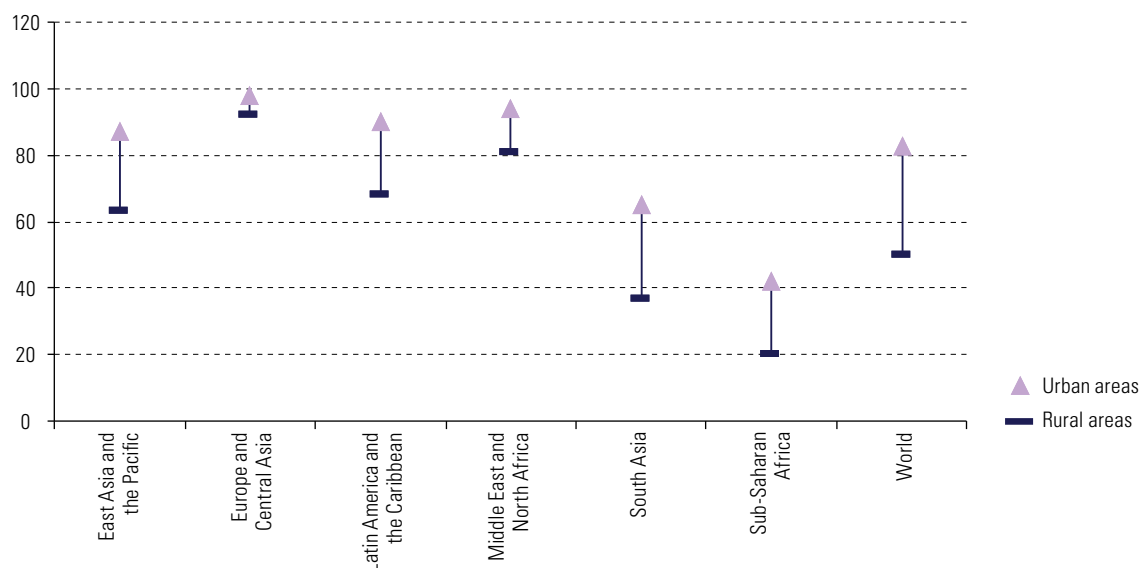
**Figure 24**  
Latin America and the Caribbean: people residing in households having access to improved drinking water sources, by area of residence (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children's Fund (UNICEF), *The State of the World's Children 2014 In Numbers: Every Child Counts*, New York, 2014; *The State of the World's Children 2016: A fair chance for every child*, New York, 2016.

A regional comparison of the use of improved sanitation facilities shows that Latin America and the Caribbean and Asia are the regions where the sharpest urban/rural differentials in access to such facilities are seen (see figure 25).

**Figure 25**  
Latin America and the Caribbean and other selected regions: use of improved sanitation facilities by area of residence (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2017: Children in a Digital World*, New York, 2017.

In recent decades, the region has made a major effort to deploy public policies designed to improve the health care available to children and adolescents, and a number of countries have managed to lower access barriers to health services for the child and adolescent population (Cecchini, Filgueira and Robles, 2014). The recent health reform initiative in Uruguay, which led to the creation of the Integrated National Health System, did away with health system co-payments for mother and child services and set up a comprehensive information and monitoring system covering the services required during pregnancy, birth and the first years of life. Chile and Mexico have also made great strides in establishing basic systems to provide guaranteed health-care services to sectors of the population that are not covered by the contributory health insurance system. Chile’s System of Universal Access with Explicit Guarantees (the AUGÉ Plan) and Mexico’s People’s Insurance (which, with 41 million members, has had a highly significant impact in expanding coverage) have made a real difference in providing greater access to health care for children and adolescents.

The early childhood policies developed by a number of countries have also made a great deal of progress in upholding the right to health (Rossel, Filgueira and Rico, 2015). These initiatives (with two of the most prominent examples being the Newborn Support Programme (PARN) of the Chile Crece

Contigo System<sup>21</sup> and its counterpart in Uruguay, Uruguay Crece Contigo<sup>22</sup>) use a wide array of tools to promote sound child-rearing and early child stimulation practices which combine methods that have been in use in the region for decades with more recent policies that seek to take an integral approach to the care required during this stage of life.

Steps have also been taken to address the unmet demand for family planning services (Rodríguez, Di Cesare and Páez, 2017, p. 41), with special emphasis on adolescent women in the lower socioeconomic strata. These efforts aside, a need exists for determined action to put in place policies and programmes that will uphold the sexual and reproductive rights of all adolescents and help to prevent gender-based violence by offering services that are tailored to the needs of today's adolescents and the changed conditions under which they express their sexuality (Rodríguez, Di Cesare and Páez, 2017). It is also essential for integrated policies to be advanced that will address the phenomenon of motherhood during adolescence in all its complexity, rather than simply as a sexual and reproductive health issue. By the same token, there is an urgent need to devise policies and programmes for adolescent mothers; the prevention of premature motherhood is certainly important, but the adolescents who are already mothers and living in highly vulnerable situations must not be overlooked or forgotten. As one example, forestalling early marriages, which in some of the countries of the region are still legal, is another policy route that can be taken. In the Caribbean subregion, Trinidad and Tobago has set an example for the entire region by amending its laws to prohibit any and all forms of child marriage (ECLAC, 2018c).

It is important to note that increases in coverage do not necessarily translate into improvements in quality. Many health systems in the region are highly segmented in terms of the quality of care that they provide. "Health systems that are highly segmented between public and private supply tend to reflect the same segmentation as to quality. And even in systems that are less segmented in terms of institutions and providers, it is very common to find significant differences in quality between urban and rural areas and between [different] subregions and provinces" (Rossel, Filgueira and Rico, 2015, p. 95).

### 3. The right to nutrition and housing

The right to nutrition and housing is established in article 27 of the Convention, which also enjoins States parties to provide support to families so that they can ensure that their children have nutritious food, clothing and housing.

The continuing burden of malnutrition borne by women and children in the region interferes with the countries' ability to achieve the Sustainable Development Goals. The Standing Committee on Nutrition (2014a) has undertaken a systematic analysis of the question and has traced direct and indirect linkages between this problem and eight of the Goals, including those of ending poverty in all its forms everywhere (Goal 1), given its connection with losses of productivity, and ensuring healthy lives for all at all ages (Goal 3). Chronic undernutrition, or stunting, is a problem in most of the countries of the region, with more than 7 million children suffering from this condition.

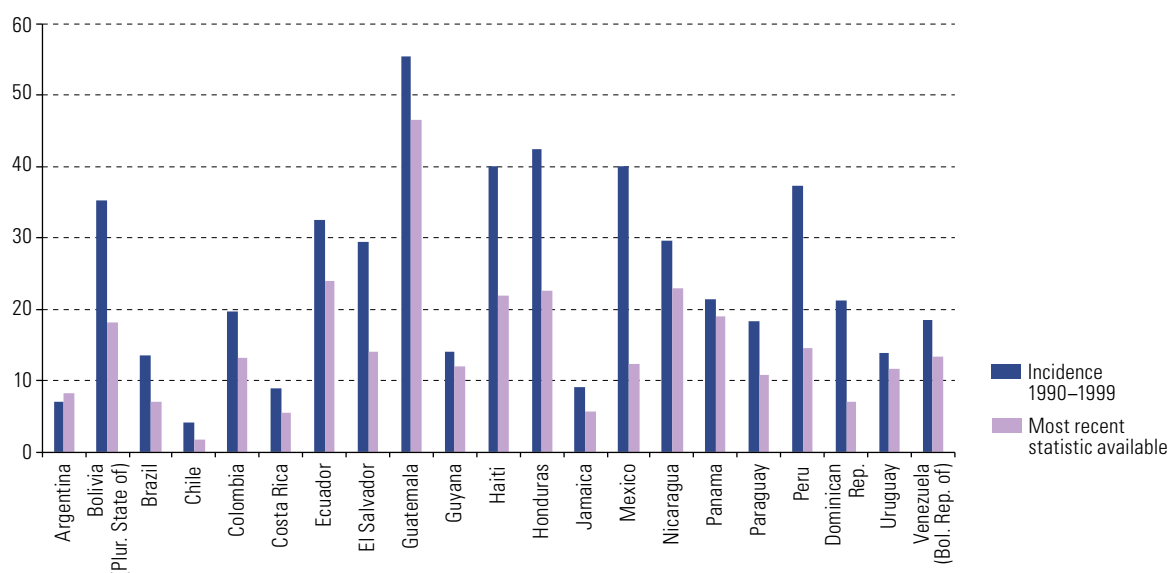
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<sup>21</sup> The aim of this programme is to provide new parents with practical assistance and educational materials that will help them welcome their newborn child (Staab, 2013). Each beneficiary family receives a layette that includes a package of accessories and clothing, a basic care and stimulation kit, and a combination crib and playpen. Infants who are hospitalized receive comprehensive care, and there is a protocol for well-baby care covering breastfeeding support, home visits, monitoring of potential problem areas, and educational and stimulation materials for the different stages of child development. The programme also provides for regular child development evaluations, combined with group and/or individual sessions designed to promote the development of parenting guidelines and skills.

<sup>22</sup> Programme activities include the delivery of a welcome kit to all the families, the provision of dietary guidance by social assistance workers, inclusion in social protection networks (family allowances, prenatal and health-care payments and housing programmes), the establishment and support for the establishment of information systems and universal policy action designed to increase the programme's intake capacity and enhance the quality of care for the most vulnerable segments of the population.

The study done on the occasion of the twenty-fifth anniversary of the entry into force of the Convention showed that substantial progress had been made with regard to nutrition, and the information that has become available since that time corroborates this trend. On average, the extent of chronic undernutrition, or stunting, in the region has been reduced by 40% since 1990 (see figure 26) (ECLAC/UNICEF, 2018), and the Dominican Republic, Mexico and Peru have cut their levels of stunting by over 60%. The country that is currently facing the greatest challenges in this respect is Guatemala, where more than 46.5% (around 900,000) of the country's children suffer from chronic undernutrition (stunting) (see figure 26).

**Figure 26**  
Latin America and the Caribbean (21 countries): incidence and changes in levels of stunting, 1990–1999 and the most recent measurement (Percentages)

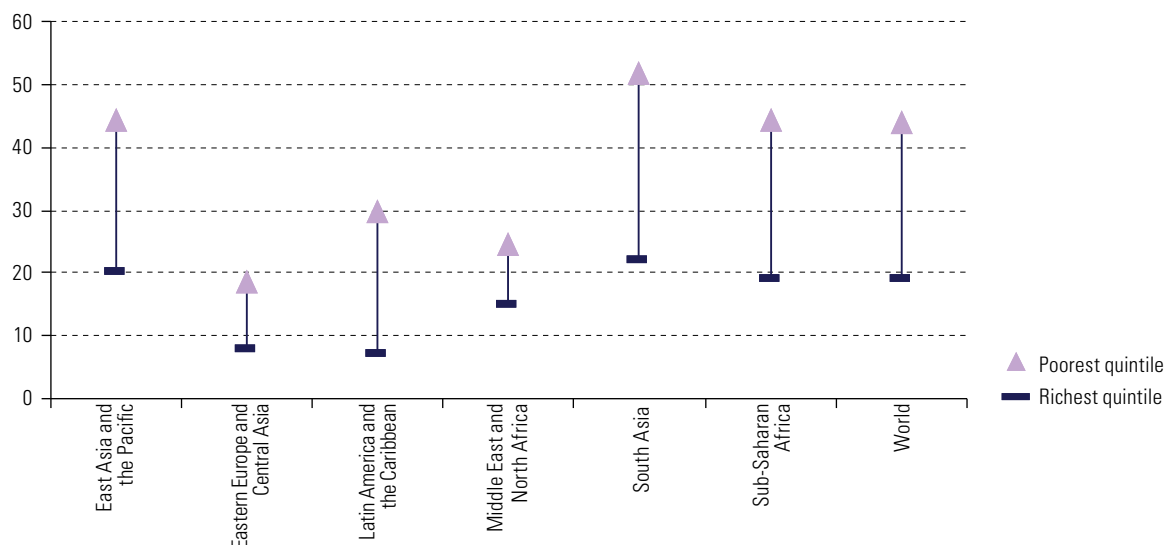


**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), “Seguridad alimentaria y nutricional: América Latina y el Caribe” [online database] <https://dds.cepal.org/san/estadisticas>, and on the basis of World Health Organization (WHO) and official reports from the respective countries.

The distribution of chronic undernutrition, or stunting, among children below the age of 5 years is skewed towards children in lower-income households in all the regions of the world. In Latin America and the Caribbean, the distribution is similar to the world average but is more unequal than it is in Eastern Europe and Central Asia and in the Middle East and North Africa (see figure 27).

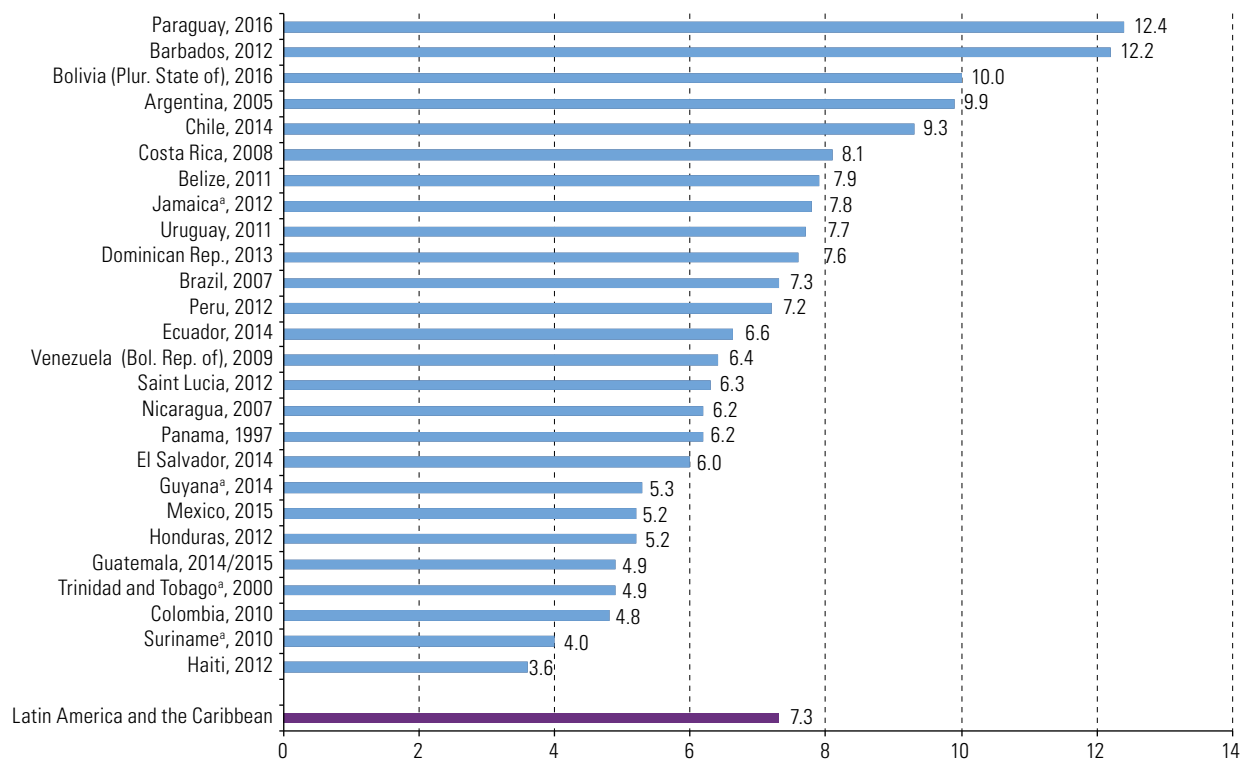
Another aspect of nutrition that is becoming more and more of an issue is overweight and obesity (ECLAC/UNICEF, 2018; Fernández and others, 2017). Obesity and overweight in children is an alarming situation because the consequences and effects of this problem are seen while the child is growing but also after he or she reaches adulthood. On average, about 7% of children in the region (nearly 4 million) under the age of 5 are overweight or obese (see figure 28).

**Figure 27**  
Latin America and the Caribbean and other selected regions: stunting in children under 5 years of age, by income level, 2011–2016



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2017: Children in a Digital World*, New York, 2017.

**Figure 28**  
Latin America and the Caribbean (26 countries): incidence of overweight or obesity in children under 5 years of age, most recent information available (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), “Seguridad alimentaria y nutricional: América Latina y el Caribe” [online database] <https://dds.cepal.org/san/estadisticas>; United Nations Children’s Fund/World Health Organization/World Bank (UNICEF/WHO/World Bank), “Joint child malnutrition estimates 2018” [online database] <http://datatopics.worldbank.org/child-malnutrition/>.

<sup>a</sup> Calculated on the basis of global undernourished population figures from the United States National Center for Health Statistics (NCHS).



The additional efforts needed to put an end to hunger and to all forms of malnutrition by 2030 is a crucial element in the achievement of the Sustainable Development Goals. As noted by Galasso and Wagstaff (2017), the current pace at which stunting is being reduced is too slow to allow the region to reach the Goals, and an assessment is therefore urgently needed of the impact of the policies and programmes that will be needed in order to speed up progress in this respect.

The policies that have been used in the region to attack this problem have focused on seven main areas: food production and access to food; infrastructure; commerce; food quality and food safety; food assistance; information about nutrition and knowledge about nutrition and health; and health care (Martínez and Palma, 2015). Other policies have also been formulated in an attempt to address the underlying causes of undernutrition, such as a lack of access to adequate sanitation facilities and improved drinking water sources, which are also closely linked to the right to health.

Special mention should be made of the conditional cash transfer programmes designed to bring about improvements in child nutrition by providing their households with additional funds for use in purchasing more nutritious foods and by ensuring that both mothers and their children get regular medical check-ups (Galasso and Wagstaff, 2017; Martínez and Palma, 2015; Ruel and Alderman, 2013) (see box 10).

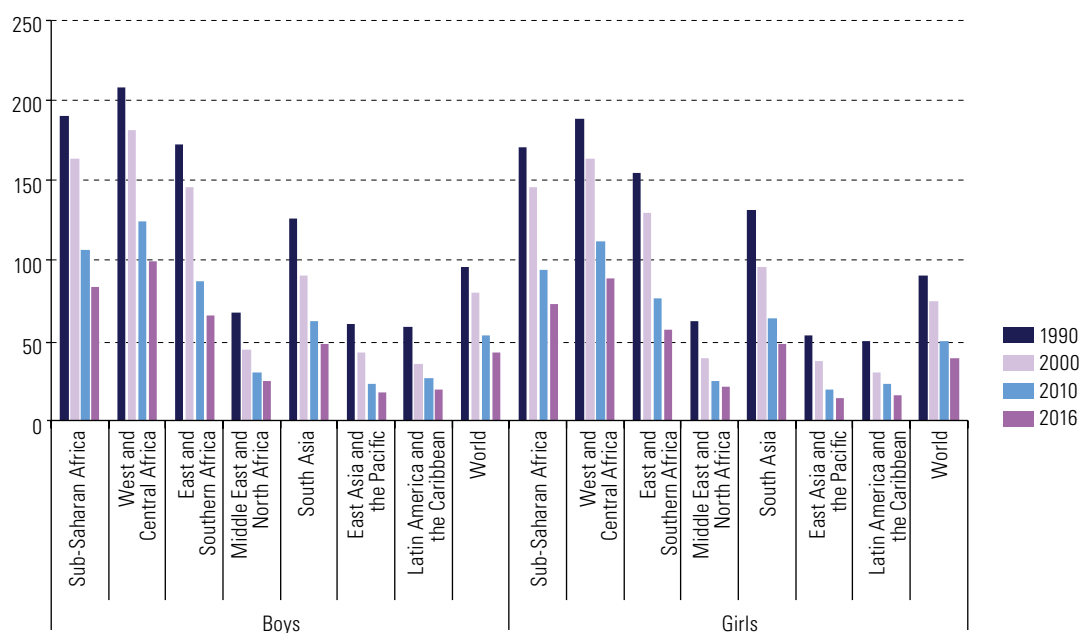
One of the policies that has been developed to tackle the problem of excess weight among children is set out in Mexico's National Agreement on Nutritional Health, which establishes general guidelines for the sale or distribution of food and beverages in primary school cafeterias in Mexico. The school nutritional health programme has three components: (i) modifying curricula in order to improve nutrition education; (ii) promoting regular physical activity in school by introducing physical exercise sessions during the school day; and (iii) controlling the types of foods and beverages that are available at school. Mexico, along with Chile, Ecuador, Uruguay and other countries of the region, is developing regulations that require labels to be placed on the front of processed foods and beverages in order to make it easier for consumers to identify products that are high in calories, sodium and saturated fats and products that are highly processed. Regulations on advertising are another way to reduce children's exposure to unhealthful foods and beverages (Fernández and others, 2017).

Finally, it is also important to assess the housing conditions and surroundings in which the region's children and adolescents live. The available studies indicate that the region suffers from a number of shortcomings in terms of basic amenities and that land is also a strategic consideration. The available estimates indicate that there are numerous towns in which many amenities are unavailable but, because their populations are small, they are not seen as a priority in terms of targeted public policies (ECLAC/UNICEF, 2011). Substandard housing conditions and infrastructure result in higher morbidity rates for such ailments as acute diarrhoea which have a direct impact on a child's nutritional status (ECLAC, 2013b). The negative impact of poor housing conditions on the development of children's human capital, and particularly on educational attainment, has also been documented (Kaztman, 2011).

## 4. The right to life and to healthy development from early childhood onward

The right to life is recognized in article 6 of the Convention as an inherent right. The study that was done to mark the twenty-fifth anniversary of the entry into force of the Convention identified a number of areas in which the Latin American and Caribbean region was making great strides, and child mortality was one of them (ECLAC/UNICEF, 2014a). The updated figures corroborate that trend: between 1990 and 2016, the total number of children under 5 years of age in the region who died plunged by 71%, from 652,000 to 187,000 (Inter-Agency Group for Child Mortality Estimation, 2018). In 1990 the under-5 child mortality rate was 54 deaths per 1,000 live births, but by the year 2000, the rate had dropped to 32 deaths per 1,000 live births and by 2016, it had fallen to 17.5 (see figure 29). This steep decrease in under-5 child mortality puts Latin America and the Caribbean among the world regions that have made the most progress, together with East Asia and the Pacific.

**Figure 29**  
Latin America and the Caribbean and other selected regions: under-5 mortality rate (boys and girls), by region, 1990–2016  
(Number of deaths per 1,000 live births)

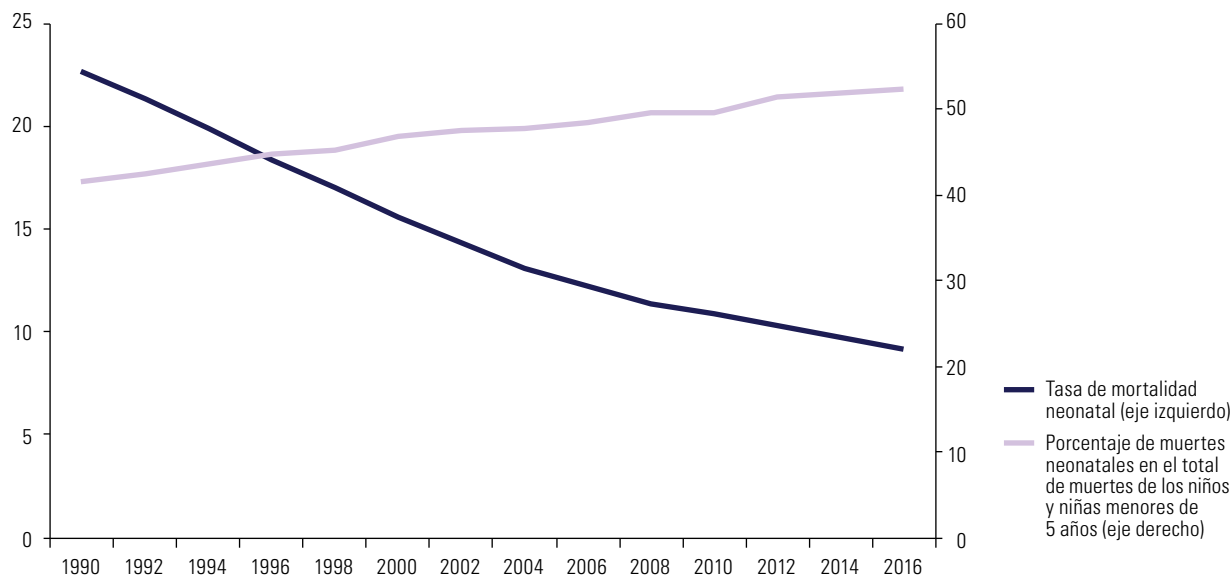


**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Inter-Agency Group for Child Mortality Estimation, CME Info [online database] <http://www.childmortality.org/>.

As noted by ECLAC and UNICEF (2014a), however, the problem of neonatal mortality should be accorded priority on the policy agenda, given how much the trend in this indicator differs from the one seen in child mortality. While rates have clearly fallen in the last 30 years in the countries of the region, neonatal mortality still accounts for a very high proportion of total deaths of children aged under 5 years. Although neonatal mortality rates fell considerably between 1990 and 2016 in the countries of the region, the proportion of the total number of deaths of children under 5 years of age represented by neonatal deaths rose from 41% in 1990 to 52% in 2016 (see figure 30). The most common causes of neonatal deaths in the region are premature births, asphyxia, sepsis and birth defects.

**Figure 30**

Latin America and the Caribbean: neonatal mortality rates and proportion of deaths of children under 5 years of age accounted for by neonatal deaths, 1990–2016  
(Number of deaths per 1,000 live births and percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Inter-Agency Group for Child Mortality Estimation, CME Info [online database] <http://www.childmortality.org/>.

Although the long-term trends certainly reflect progress in this area (ECLAC/UNICEF, 2008), differentials between child mortality rates in different segments of the population continue to exist, including differentials corresponding to area of residence and ethnicity (see box 7).

There is a close correlation between causes of death and the stage in the life cycle concerned. The main causes of death among children under 5 years of age are communicable diseases, whereas, in the 5–19 age group, non-communicable diseases and injuries are much more common causes (see figure 31).<sup>23</sup>

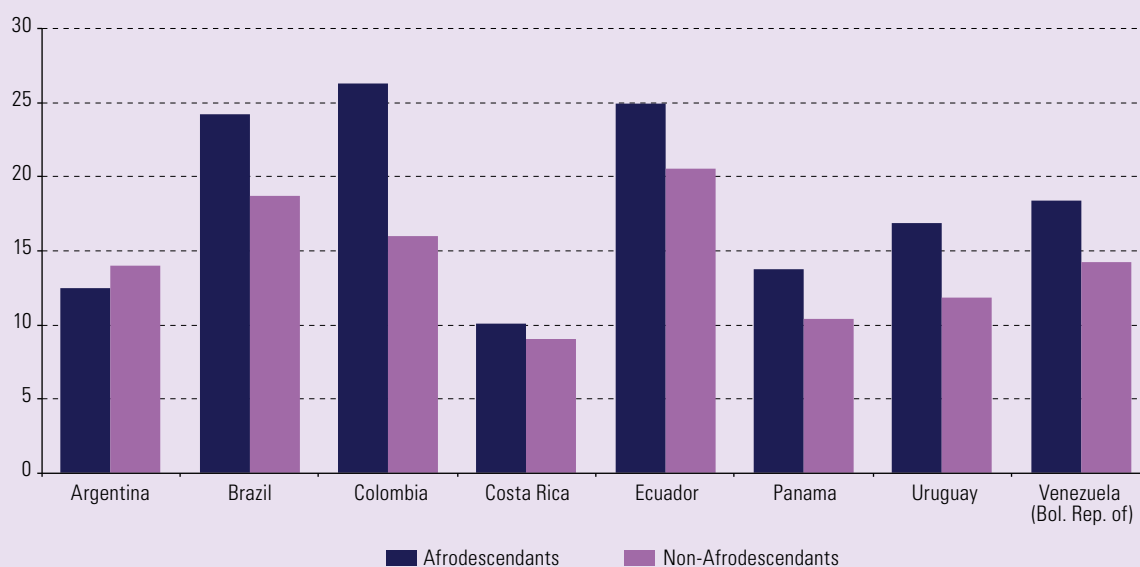
<sup>23</sup> Communicable diseases (also called infectious diseases) are caused by microorganisms or bacteria, viruses, parasites or fungi that can be spread, directly or indirectly, from one person to another. Some are transmitted through bites from insects while others are caused by ingesting contaminated food or water. Non-communicable diseases, also known as chronic diseases, tend to be of long duration and are the result of a combination of genetic, physiological, environmental and behavioural factors. The main types of non-communicable diseases are cardiovascular diseases, cancers, chronic respiratory diseases and diabetes. Finally, the category of injuries includes those resulting from traffic accidents, drownings, falls and burns, as well as the different types of violent acts, such as intentional interpersonal violence, self-inflicted wounds and acts of war. See World Health Organization (WHO), “Noncommunicable diseases”, Geneva, 2018 [online] <http://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>; “Communicable Diseases”, Geneva [online] y <http://afro.who.int/health-topics/communicable-diseases>.

**Box 7**  
**Child mortality and the Afrodescendent population**

In a group of eight countries for which estimates for 2010 are available, the child mortality rates for Afrodescendants in that year ranged from 10 per 1,000 live births in Costa Rica to 26 per 1,000 live births in Colombia. Although the rates vary, the chances that an Afrodescendent child will die before his or her first birthday are higher than those of non-Afrodescendants in every country except Argentina. The largest gaps are found in Colombia, Uruguay, Panama and Brazil, where an Afrodescendent child is between 1.6 and 1.3 times more likely to die before his or her first birthday than a non-Afrodescendent child is.

**Latin America (8 countries): estimated child mortality rates for the Afrodescendent and non-Afrodescendent populations, around 2010<sup>a,b</sup>**

(Number of deaths per 1,000 live births)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2016* (LC/PUB.2017/12-P), Santiago, 2017; on the basis of census microdata; "Population projections", *Demographic Observatory of Latin America and the Caribbean*, No. 17 (LC/PUB.2017/3-P), Santiago, 2017.

<sup>a</sup> The estimates were obtained using indirect demographic methods; the resulting mortality rates were then adjusted on the basis of the countries' official totals.

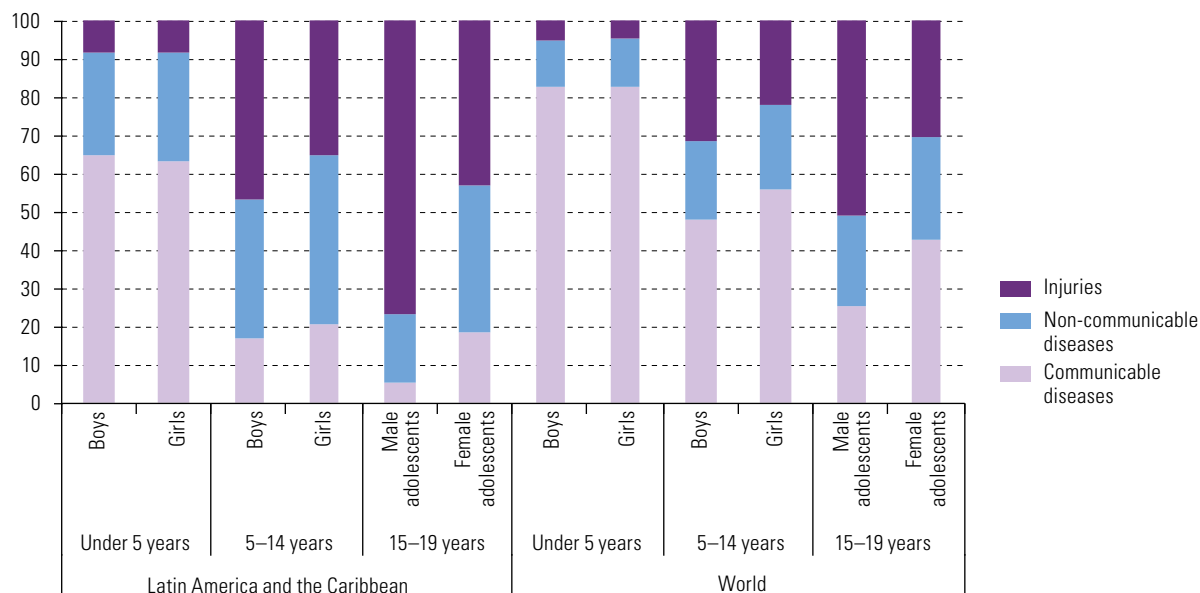
<sup>b</sup> Does not include the indigenous population.

These inequalities persist even when the area of residence is controlled for. In every case except for the urban areas of Argentina, infant mortality rates are higher for Afrodescendants than for non-Afrodescendants, both in cities and in the countryside. Although urban areas generally have lower levels of infant mortality than rural areas, in some cases (as in Brazil, Costa Rica and Panama), the relative ethnic/racial disparities are wider in the cities (ECLAC, 2017a).

The impact on the Afrodescendent population of discrimination and risk concentration is also reflected in the neonatal mortality rates for this population group. Afrodescendent women receive less prenatal care than their non-Afrodescendent counterparts (ECLAC, 2017a). Nonetheless, the differences in that respect are not large enough to explain the disparities in infant mortality rates in these countries. The situation with respect to the percentage of childbirths that are attended by qualified personnel is fairly similar.

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2016* (LC/PUB.2017/12-P), Santiago, 2017; "Population projections", *Demographic Observatory of Latin America and the Caribbean*, No. 17 (LC/PUB.2017/3-P), Santiago, 2017.

**Figure 31**  
Latin America and the Caribbean and the world: distribution of causes of death among boys, girls and adolescents, 2016  
(Percentages)



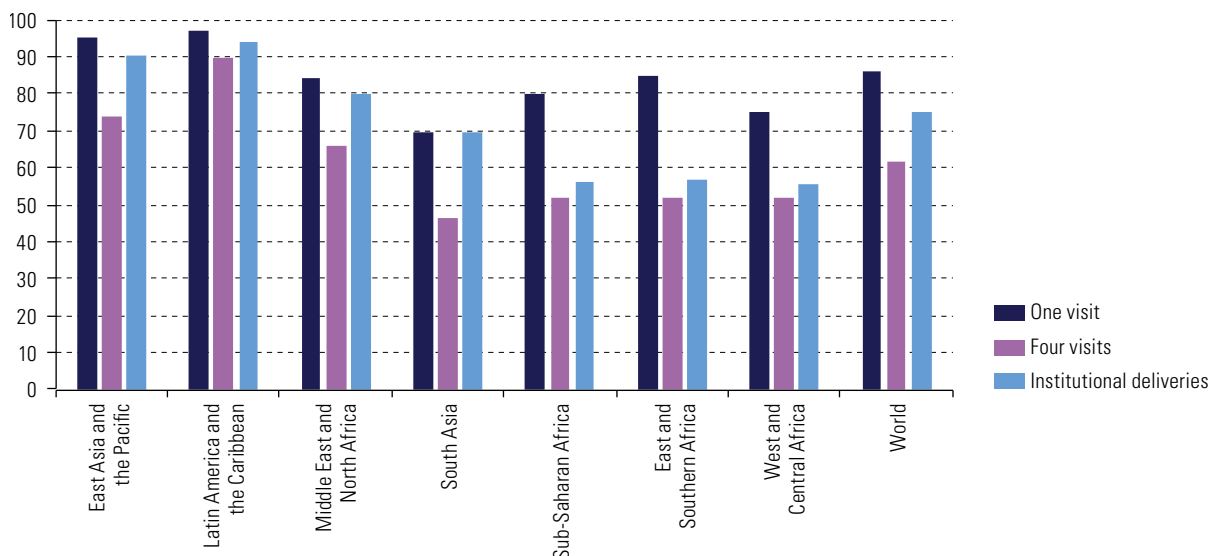
**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Global Burden of Disease Collaborative Network, “Global Burden of Disease Study 2016 (GBD 2016) data resources”, Seattle, Institute for Health Metrics and Evaluation (IHME), 2017 [online database] <http://ghdx.healthdata.org/gbd-2016>.

This figure shows that, in addition to the stage in the life cycle, gender is also a crucial factor in the distribution of causes of death, as injuries are a much more frequent cause in the case of boys and older adolescents than they are in the case of girls. This is especially true for Latin America and the Caribbean, as this differential is much smaller in the world averages than it is for the region. A closer examination of these statistics reveals that the number of deaths caused by interpersonal violence (homicides, sexual violence, etc.) is one of the main reasons why such a large percentage of the deaths of boys and adolescents are attributable to injuries in Latin America and the Caribbean (WHO/UNODC/UNDP, 2014; UNICEF, 2014b).

The percentages of women in Latin America and the Caribbean who have had at least one or at least four prenatal health checks are higher than the world averages and the averages for most of the other world regions: 97% of women in the region had at least one prenatal health check and 90% had at least four such visits (see figure 32). The situation is similar for the indicator of institutional deliveries, with 94% of the women in the region, on average, giving birth in medical institutions.

**Figure 32**

Selected regions and the world: proportion of women who gave birth in medical institutions and proportions who had at least one and at least four prenatal health checks, around 2011–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children's Fund (UNICEF), *The State of the World's Children 2017: Children in a Digital World*, New York, 2017.

Finally, breastfeeding plays a fundamental role in early child development and is closely associated with lower child morbidity and mortality rates (UNICEF, 2018a), as well as having long-term benefits in people's lives (Victora and others, 2016). Babies have a right to health and healthy food, and women have the right to receive unbiased information and the right to a supportive environment for breastfeeding in any place at any time. Mothers need to be provided with support before and after giving birth, but regulations and standards also need to be put in place to promote these practices, including appropriate medical protocols, training for health-care personnel and the provision of parental leave. It is also important to regulate the advertising and sale of artificial milk and other breastmilk substitutes so that these products do not undermine breastfeeding mothers' confidence in what they are doing and so that artificial milk is a last resort rather than a common alternative to mother's milk.

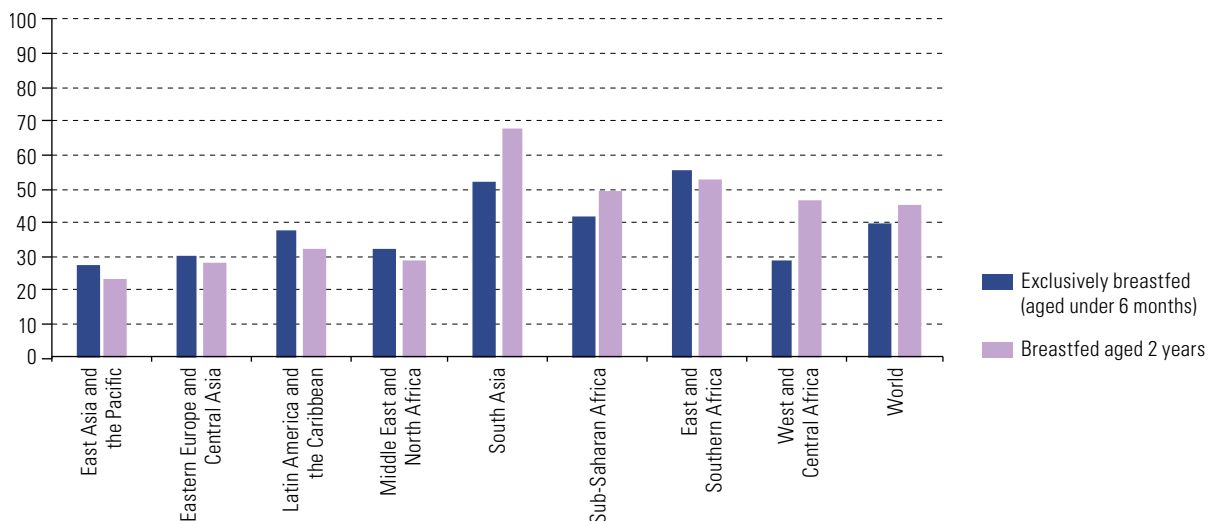
Breastfeeding is less prevalent in Latin America and the Caribbean than it is in the world on average, as may be seen from both the indicator for breastfeeding up to the sixth month of life (38%) and the indicator for breastfeeding until the child reaches two years of age (32%) (see figure 33).

In the countries of the region for which the relevant data are available, most of the children appear to be progressing through the various developmental stages normally (as measured by the Early Childhood Development Index (ECDI), which is used to assess the developmental progress of children in the areas of literacy and numeracy, physical development, socio-emotional development and learning).<sup>24</sup> The situation in this respect varies a great deal across groups and countries, however (see figure 34) (Loizillon and others, 2017).

<sup>24</sup> This index is used to assess and compare how well children are progressing or developing in different areas. It is based on children's skill level in performing such tasks as identifying or naming 10 letters of the alphabet, picking up small objects from the ground with two fingers, interacting with other children without hitting them and following simple instructions.

**Figure 33**

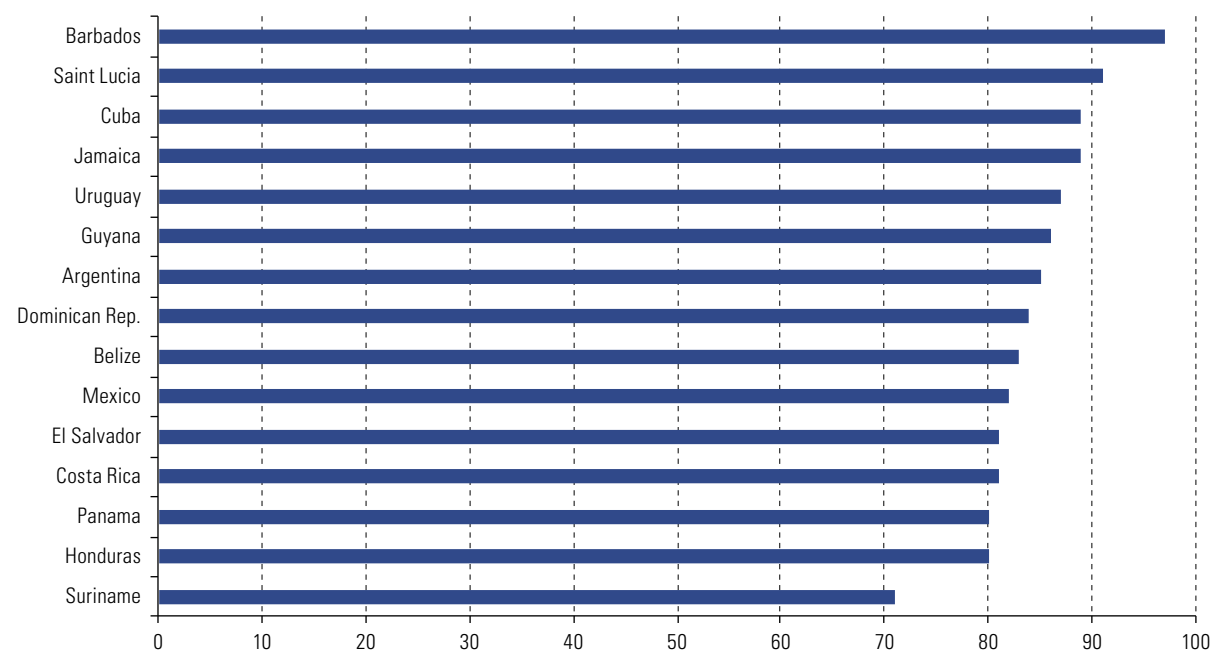
Selected regions and the world: proportion of infants under 6 months of age who are breastfed exclusively and proportion of children of 2 years of age who are breastfed, 2011–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), *The State of the World’s Children 2017: Children in a Digital World*, New York, 2017; multiple indicator cluster surveys (MICS); demographic and health surveys (DHS), and other representative national surveys.

**Figure 34**

Latin America and the Caribbean (15 countries): children between the ages of 36 and 59 months who have reached an appropriate level of development in at least three of the areas included in the Early Childhood Development Index, around 2009–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), UNICEF Data [online database] <https://data.unicef.org/>; multiple indicator cluster surveys (MICS) and demographic and health surveys (DHS).

A number of countries have developed policies aimed specifically at reaching pregnant women earlier on in their pregnancies and ensuring that they receive the proper care, which is seen as the first link in the chain of policy tools for helping to forestall risks that may result in the infringement of children's right to health (Rossel, Rico and Filgueira, 2015). Examples include the Plan Nacer ("childbirth plan") in Argentina (Gertler, Martínez and Celhay, 2011) and the Programa Embarazo Saludable ("healthy pregnancy programme") in Mexico (Valencia Lomelí, Foust Rodríguez and Tetreault Weber, 2013).

## 5. The right to live free from violence

Article 19 of the Convention establishes that all children have the right to be protected from all forms of violence, and many other articles refer to the child's right to live a life free from violence, including violence at the hands of the child's parents or caregivers.<sup>25</sup> The supporting documentation for the Sustainable Development Goals shows that violence directed at children is an impediment to sustainable development and that early childhood development can be of key importance in preventing violence (Berthelon and others, 2018). This is the first time that violence against children and gender-based violence in situations that have an impact on girl children and adolescents have been explicitly included in internationally accepted goals. This opens up a valuable opportunity for the governments of Latin America and the Caribbean to move ahead with the modification of their nations' laws and protection systems and to allocate more resources for use in countering violence directed at children and adolescents in the region.

The situation in Latin America and the Caribbean in terms of the fulfilment of this right is one of both light and shadow. Each day, on average, 67 adolescents are murdered in the region; the adolescent murder rate in Latin America and the Caribbean is five times higher than the world average. The five countries in the region with the highest adolescent murder rates (the Bolivarian Republic of Venezuela, Honduras, Colombia, El Salvador and Brazil) are home to only 1 out of every 20 adolescents in the world, but 1 out of every 3 murders of adolescents take place in those countries. These figures are clearly alarming and are even more so in relation to some countries, such as El Salvador, the Bolivarian Republic of Venezuela, Brazil, Colombia, Guatemala and Honduras, where the number of murders of male adolescents far exceeds the regional average (see figures 35 and 36).

The Latin American and Caribbean region is the only region in the world in which the relative number of child marriages and early unions has not declined in the past 10 years. The incidence of child marriages and especially early unions<sup>26</sup> in Latin America and the Caribbean has held fairly steady at about 25% of the female population in the corresponding age group, whereas it has fallen off sharply in other areas of the world, particularly in South Asia, where it has dropped from 50% to 30% in the past 10 years (see figure 37). In the region, the incidence of child marriages and early unions involving indigenous girls, girls living in rural areas and girls in middle- and low-income sectors of the population is higher than it is in the case of girls residing in urban areas and those in the higher-income quintiles. Early non-marital unions are more frequent than formally constituted, legal marriages of girls in this age group as well.

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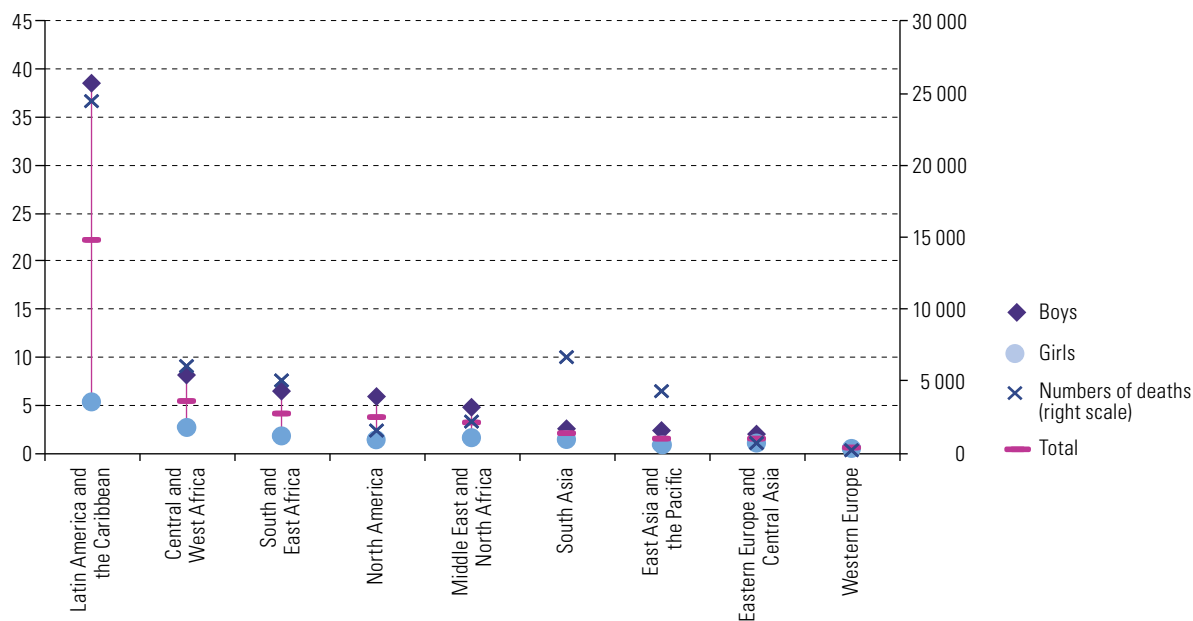
<sup>25</sup> Article 2: the right to be protected from discrimination; article 9: the right to be protected from abuse, including abuse at the hands of the parents; article 11: the right to be protected from illicit transfer; article 19: the right to be protected against all forms of violence; article 22: the right to protection of refugee children; article 34: the right to protection from sexual exploitation and sexual abuse; and article 36: the right to be protected from all other forms of exploitation.

<sup>26</sup> Child or early marriage is understood to mean those cases in which one or both spouses is still considered a child or adolescent, i.e. a formal marriage or informal union before the age of 18 years.



**Figure 35**

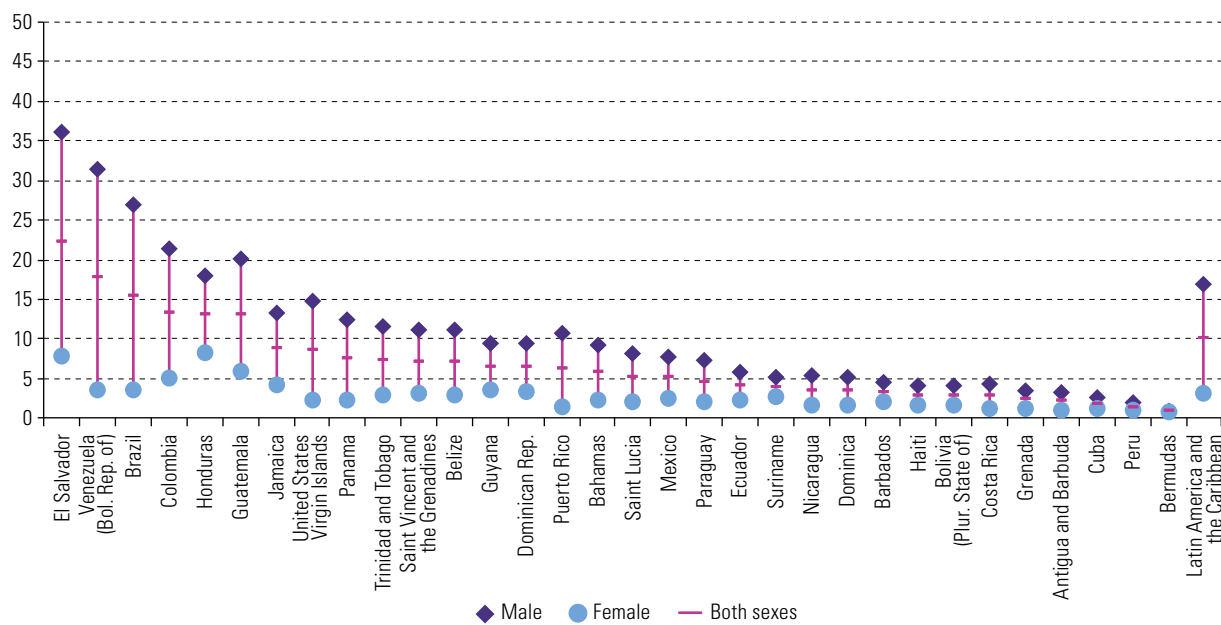
Selected regions and the world: deaths of male and female children and adolescents (0–19 years of age) caused by interpersonal violence, 2016  
(Number of deaths per 100,000 persons)



Source: United Nations Children’s Fund (UNICEF), *Children in Latin America and the Caribbean: Overview 2017*, Panama City, 2017.

**Figure 36**

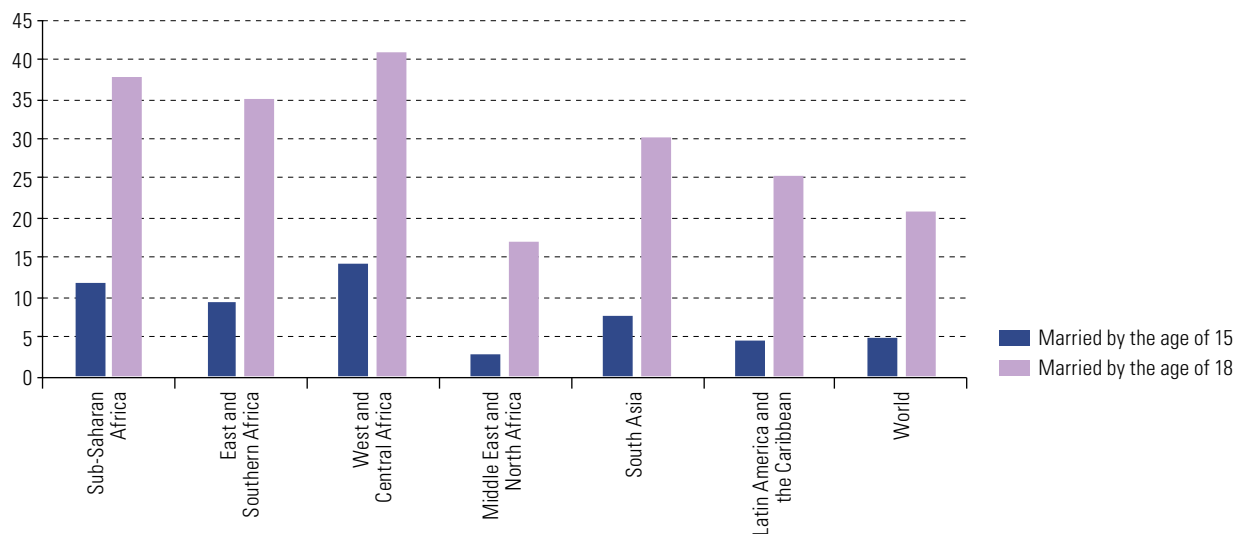
Latin America and the Caribbean: deaths of male and female children and adolescents (0–19 years of age) caused by interpersonal violence, by country, 2016  
(Number of deaths per 100,000 persons)



Source: Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Global Burden of Disease Collaborative Network, “Global Burden of Disease Study 2016 (GBD 2016) data resources”, Seattle, Institute for Health Metrics and Evaluation (IHME), 2017 [online database] <http://ghdx.healthdata.org/gbd-2016>.

**Figure 37**

Selected regions and the world: proportions of women aged 20–24 who were married by the time they were 15 and by the time they were 18, 2010–2017  
(Percentages)

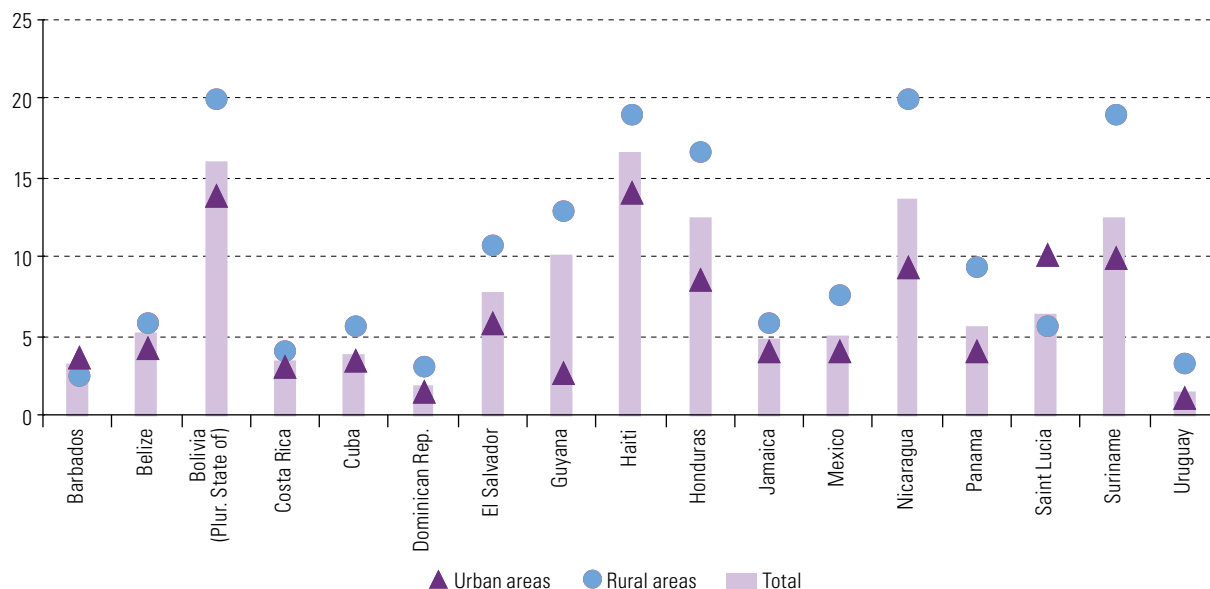


**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children’s Fund (UNICEF), UNICEF Data [online database] <https://data.unicef.org/>; multiple indicator cluster surveys (MICS), demographic and health surveys (DHS) and other representative national surveys.

Another aspect of the problem that must be addressed is the risk that violent acts can come to be seen as a natural part of daily life and behaviour (Berthelon and others, 2018), which can have an especially severe impact on children and adolescents. In a number of Latin American and Caribbean countries (such as Haiti, Honduras, Nicaragua, the Plurinational State of Bolivia and Suriname), a disturbingly large percentage of women between the ages of 15 and 49 believe that it is normal for a husband to hit his wife (see figure 38), and that percentage tends to be higher in rural areas. The percentage of children between the ages of 2 and 14 who are subject to some violent form of discipline is also a cause of great concern and, since this kind of conduct is more prevalent in lower-income sectors, it heightens the disadvantages and risks for the children in those sectors (see figure 39).

**Figure 38**

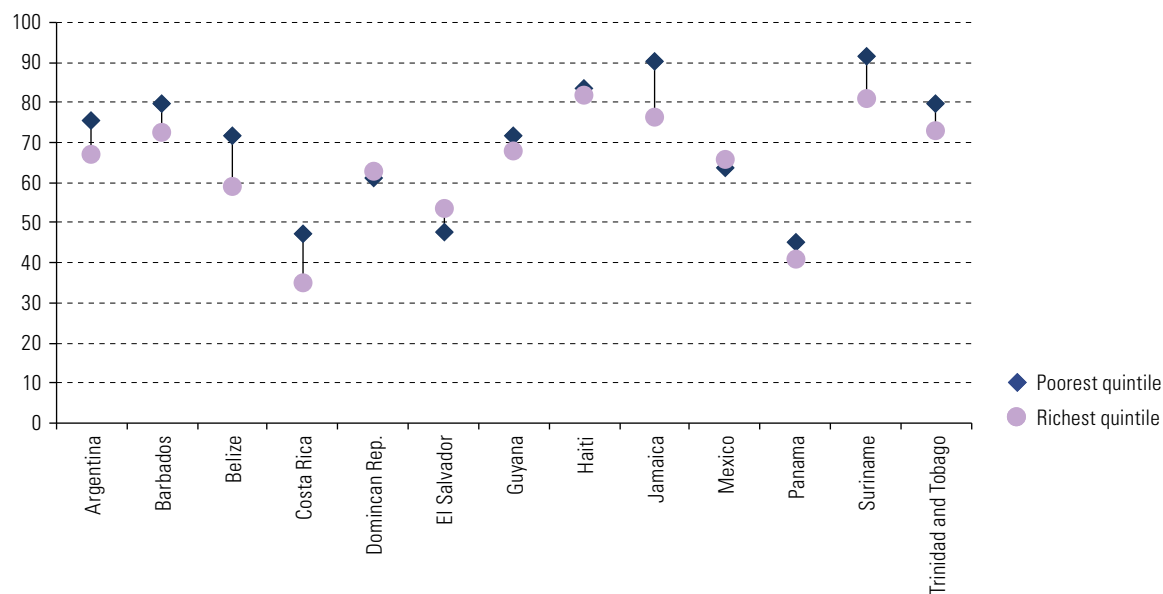
Latin America and the Caribbean (17 countries): proportion of women aged 15–49 who think that it is all right for a man to hit his wife, by area of residence, 2010–2016 (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children's Fund (UNICEF), UNICEF Data [online database] <https://data.unicef.org/>; multiple indicator cluster surveys (MICS), demographic and health surveys (DHS) and other representative national surveys.

**Figure 39**

Latin America and the Caribbean (13 countries): proportion of children aged 2–14 who are subjected to some violent form of discipline, by income level, 2006–2015 (Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC) on the basis of United Nations Children's Fund (UNICEF), UNICEF Data [online database] <https://data.unicef.org/>; multiple indicator cluster surveys (MICS), demographic and health surveys (DHS) and other representative national surveys.

The prevention of violence must be accorded priority on the regional and national agendas if the rising level of violence in Latin America and the Caribbean is to be reversed (UNICEF, 2017c):

- Approximately 66% of children below 15 years of age (two out of three) regularly experience some form of violent discipline in the home (psychological or physical aggression).
- Some 48% children below 14 years of age (one out of every two) are subjected to corporal punishment in the home, and 7% to severe forms of corporal punishment, such as being struck in the face or on the head forcefully or with an object.
- The use of violent disciplinary methods and corporal punishment is even more common in the case of children under 5 years of age (69% and 56%, respectively).
- This sort of toxic stress and exposure to violence, abuse and neglect in the early years of life has a long-term impact on the children who experience it. Children who are victims of violent disciplinary methods have lower levels of socio-emotional development and are more likely to act out violently with other children and with adults.

The figures that illustrate this critical state of affairs underscore the urgent need to frame public policies that will put a halt to these trends (Berthelon and others, 2018) and then reverse them. Although the region still faces enormous challenges in this regard, it has made some headway towards passing legislation and establishing coordinated policies and strategies for protecting children and adolescents from various forms of violence. Mechanisms for filing reports of child abuse have also been developed, as have integrated information systems for dealing with this problem (Morlachetti, 2013). Nevertheless, the studies done in this area have shown the policies developed for this purpose to be extremely ineffective and indicate that insufficient financial and human resources have been made available for tackling the problem (Morlachetti, 2013). Moreover, the efforts that have been made fall far short of what is needed to establish genuine systems for providing comprehensive protection against violence (Morlachetti, 2013).

There are a number of different aspects of the situation in the region that need to be addressed, taking into account the different types of violence to which children are subjected (physical, psychological and sexual violence, neglect and abandonment), the different settings in which violence occurs (the household, school, the community, institutions, online) and the different life stages at which it happens (early childhood, school age and adolescence).

Efforts also have to be made to consolidate juvenile criminal justice systems that are in keeping with the Convention and other relevant international legal standards. The available information is quite limited and varies a great deal across countries, but the few statistics that are available are quite worrisome, such as those on the use of deprivation of liberty, which indicate that it is used as a matter of course rather than on an exceptional basis (Vernaza, n.d.).<sup>27</sup> The unnecessary institutionalization of children must also be prevented, and steps must be taken to put an end to the violent abuse of children who are already institutionalized, who are four times more likely to be victims of sexual abuse than children who are cared for in family settings (Palummo, 2013). Latin America and the Caribbean have made a commitment to work towards halting the institutionalization of children and adolescents, particularly in the case of those under 3 years of age, in order to protect them from the short-, medium- and long-term consequences of living in an institutional setting rather than a family environment. Special emphasis must be placed on safeguarding the rights of migrant and displaced children and adolescents by tackling the structural causes of forced migration; ensuring that they have access to health care and education and can avail themselves of all of their rights regardless of their migration status; protecting migrant children from violence, abuse and exploitation; putting a stop to the detention of migrant children and to the practice of separating migrant children from their families; and combating xenophobia and discrimination.

<sup>27</sup> A recent study found that the number of juvenile offenders who were serving a non-custodial sentence exceeded the number who were deprived of their liberty in Costa Rica, Chile, Brazil, Colombia and Argentina, but that the ratio was more or less even or just the opposite in Mexico, Uruguay, Peru, Ecuador and the Plurinational State of Bolivia (Vernaza, n.d.).

Finally, it is important to underscore the importance of working on a multisectoral basis to combat violence against children and adolescents. A number of countries in the region (thus far, Brazil, El Salvador, Jamaica, Mexico, Paraguay and Peru) have made a formal commitment to intensify their efforts to reach the Sustainable Development Goal targets for the reduction of violence as part of the Global Partnership to End Violence against Children.

## 6. The right to protection from commercial exploitation and child labour

Article 32 of the Convention establishes the right of children and adolescents to be “protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child’s education, or to be harmful to the child’s health or physical, mental, spiritual, moral or social development” and directs that States parties shall take the legislative measures to uphold this right.

As has been documented in the regional assessment prepared on the twenty-fifth anniversary of the Convention (ECLAC/UNICEF, 2014a), child labour is a widespread, long-standing problem in Latin America and the Caribbean (Diallo, Etienne and Mehran, 2013; ILO, 2017; Espejo, 2018) which is directly linked to violations of the fundamental rights of children and adolescents and has a profoundly negative impact on them throughout their life (ECLAC, 2017a).

According to estimates of the International Labour Organization (ILO, 2017), the use of child labour has been declining in Latin America and the Caribbean, as well as in other regions and in the world as a whole (see figure 40). Yet while its decreasing prevalence can be seen from a comparison of 2016 figures with those for 2008 (a period which saw the incidence of child labour drop from 10.8% to 7.3%<sup>28</sup>), it is also evident that the pace of progress in this respect has been slow.

**Figure 40**  
Selected regions and the world: children aged 5–17 engaged in labour, 2008, 2012 and 2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Y. Diallo, A. Etienne and F. Mehran, *Global child labour trends 2008 to 2012*, Geneva, International Labour Organization (ILO), 2013 (for 2008); and ILO, *Global Estimates of Child Labour: Results and Trends, 2012-2016*, Geneva, 2017 (for 2012 and 2016).

**Note:** The figures for 2008 are not comparable with the figures for 2012 or 2016 because different sources of information and methodologies were used in their compilation.

<sup>28</sup> Approximately 4 million children and adolescents.

As may be seen from table 1, Brazil, Mexico, Peru, the Plurinational State of Bolivia and Colombia are the countries with the largest numbers, in absolute terms, of child workers; in percentage terms, the countries where child labour is the most prevalent are the Plurinational State of Bolivia (26%), Paraguay (22%) and Peru (19%) (ILO/ECLAC, 2018).

**Table 1**  
Latin America and the Caribbean (18 countries): children and adolescents engaged in child labour, 2008–2017<sup>a</sup>  
(Numbers and percentages)

Country	Year	Number	Percentage of the total age group
Bolivia (Plurinational State of)	2008	800 180	26.4
Paraguay	2011	416 425	22.4
Peru	2015	1 619 200	21.8
Guatemala	2014	731 115	16.9
Honduras	2017	382 931	15.2
Dominican Republic	2010	304 062	12.2
Uruguay	2010	68 100	9.9
El Salvador	2015	140 700	8.9
Mexico	2015	2 217 648	7.5
Colombia	2017	796 000	7.3
Chile	2013	219 624	6.6
Brazil	2015	2 671 893	6.5
Ecuador	2016	290 325	6.5
Argentina	2017	522 706	5.8
Jamaica	2016	37 965	5.8
Belize	2013	3 528	3.2
Panama	2016	23 855	2.5
Costa Rica	2016	20 896	2.1

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of special tabulations from child labour surveys conducted in the respective countries.

<sup>a</sup> The definition of child labour and the official child labour statistics used are those reported by each country; accordingly, the data are not comparable. Guatemala includes the age group 7–17 years in the analysis.

The inequalities reflected in patterns of child labour include disparities in terms of gender, ethnic origin and area of residence. The sexual division of labour is very apparent in child labour patterns: child labour is more prevalent among boys and male adolescents than it is among girls, and most of the former work in production activities outside the home, especially in the agricultural sector.<sup>29</sup> By contrast, most of the girls who work are employed as paid domestic workers.<sup>30</sup>

Another salient feature of child labour in the region is its geographic variability and its concentration in rural areas, since many children are employed in agricultural activities.<sup>31</sup> Moreover, a large percentage of child labour is performed in the informal sector, and a majority of these children are unpaid family

<sup>29</sup> In El Salvador, for example, 76% of all child labour is performed by males, with the main sectors using such labour being the farming, stock-raising and forestry industries (ILO, 2013).

<sup>30</sup> In Brazil, for example, some 214,000 children and adolescents are engaged in domestic work, and 94.2% of these workers are female. The stark sexual division of labour in this occupation is also apparent in the adult population, as the percentage of adult domestic workers who are women is quite close to that figure as well (ILO/ECLAC, 2018).

<sup>31</sup> In Ecuador, for example, the results of the 2012 Child Labour Survey show that 71% of children who work are employed in the farm sector, while 21% are employed in the service sector and 8% in industry.

workers.<sup>32</sup> In many countries, furthermore, working children are not paid at all, and those who are paid receive far less than their country's legal minimum wage. National reports also indicate that child labour rates are higher among indigenous and Afrodescendent populations.<sup>33</sup>

The countries of the region are aware of the negative consequences of child labour and have been striving for over 20 years now to eradicate it. As part of this effort, many of them have ratified international treaties—notably the ILO Minimum Age Convention, 1973 (No. 138) and the ILO Worst Forms of Child Labour Convention, 1999 (No. 182)—and have made great strides in terms of the passage of domestic laws, the development of a database on child labour and the promotion of policies and programmes designed to prevent and eradicate child labour (ILO/ECLAC, 2018). This has resulted in a significant reduction in child labour and has made Latin America and the Caribbean well placed to become the first developing region to be free of child labour (ILO, 2013).

### Box 8

#### The Regional Initiative: Latin America and the Caribbean Free of Child Labour within the framework of the 2030 Agenda for Sustainable Development

There is concern that the region is not making fast enough progress in its bid to eradicate child labour to allow it to fulfil its national and international commitments in this respect, including the targets set for the 2030 Agenda for Sustainable Development. In order to achieve the ambitious goal of eliminating all forms of child labour by 2025, action will be called for on a number of different fronts, including poverty reduction, improvements in access to education and in its relevance and quality, the creation of decent employment opportunities for adults (men, women and young people of working age), the promotion of gender and ethnic/racial equality, and the reinforcement of social protection policies, with special attention being devoted to the population groups that are most at risk of child labour and to the geographic, gender-related and ethnic/racial dimensions of the problem.

Given the complexity of this phenomenon and of the economic situation in the region, the countries will not only have to redouble their efforts in order to keep from losing ground on this front but will also have to find ways of speeding up the decline in the prevalence of child labour (Regional Initiative: Latin America and the Caribbean Free of Child Labour, n.d.). In an effort to do just that, 27 countries in the region have joined together with unions and employers associations to launch the Regional Initiative: Latin America and the Caribbean Free of Child Labour, whose objective is to speed progress towards the eradication of child labour by 2025, in line with a global road map for the elimination of child labour, the objectives of the Decent Work Agenda for the Hemisphere and the Sustainable Development Goals, which have identified the elimination of child labour as a priority objective to be attained by 2025 (target 8.7).

In order to achieve the ambitious objective of ending child labour in all its forms by 2025, the Regional Initiative has developed a policy accelerator framework (Regional Initiative: Latin America and the Caribbean Free of Child Labour, n.d.) composed of a series of strategies for maximizing the scope and effectiveness of social protection and education systems in preventing and eradicating child labour. This effort is being coordinated by the participating countries' labour ministries (ILO, 2017). This policy accelerator framework encompasses two different approaches to the problem: a protective approach that focuses on removing children from the workplace and reinstating their rights, and a preventive approach that focuses on identifying children who seem to be on a path that will lead to their involvement in child labour and intervening in time to prevent them from entering the labour market prematurely.

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of Regional Initiative: Latin America and the Caribbean Free of Child Labour, "Estrategia para acelerar la reducción del trabajo infantil en América Latina y el Caribe al 2025" [online] [http://www.iniciativa2025alc.org/sites/default/files/estrategia-para-acelerar-la-reduccion-del-trabajo-infantil-en-alc-al-2025\\_0\\_0.pdf](http://www.iniciativa2025alc.org/sites/default/files/estrategia-para-acelerar-la-reduccion-del-trabajo-infantil-en-alc-al-2025_0_0.pdf); International Labour Organization (ILO), *Global Estimates of Child Labour: Results and Trends, 2012-2016*, Geneva, 2017, and Economic Commission for Latin America and the Caribbean (ECLAC), *The social inequality matrix in Latin America* (LC/G.2690(MDS.1/2)), Santiago, 2016.

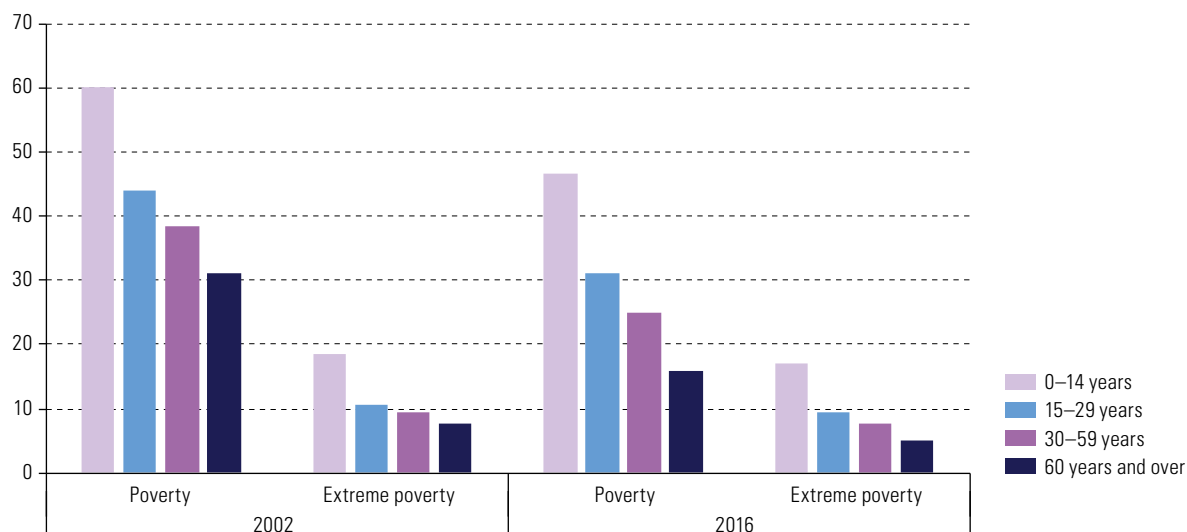
<sup>32</sup> In Guatemala, for example, over half of all working children are employed in the informal sector and more than 95% are employed as unpaid family workers, according to the 2016 National Employment and Income Survey (ENEI).

<sup>33</sup> In the Plurinational State of Bolivia, nearly half of all child labourers are members of indigenous groups, and many of them work in hazardous occupations. In Brazil, nearly 60% of all children between the ages of 5 and 13 who are involved in child labour are of African descent.

## 7. The right to an adequate standard of living

One of the pillars of the Convention is the right of all children and adolescents to have a decent standard of living and to grow and develop in a healthy environment. Latin America has made a great deal of progress in this respect. Poverty, measured in monetary terms, has dropped sharply in the last 15 years, with the poverty rate for the population between 0 and 14 years of age falling from 60% in 2002 to 47% in 2016 (see figure 41).

**Figure 41**  
Latin America (18 countries): monetary poverty and extreme poverty rates, by age group, 2002–2016<sup>a</sup>  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), *Social Panorama of Latin America, 2017* (LC/PUB.2018/1-P), Santiago, 2018; on the basis of Household Survey Data Bank (BADEHOG).

<sup>a</sup> Weighted averages for the following countries: Argentina, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Uruguay and Venezuela (Bolivarian Republic of).

Yet the level of extreme poverty in this age group has held fairly stable, edging down from 18% in 2002 to 17% in 2016. And, despite the advances made in terms of poverty levels, a larger percentage of children and adolescents are poor than is true of any other age group – a fact that demonstrates that the age distribution of poverty in Latin America continues to be skewed towards the younger generations.

The situation is also a disturbing one when these figures are looked at in conjunction with the evidence on multiple deprivations in childhood and adolescence. An analysis of these figures sheds light on the structural nature of deprivations of fundamental rights such as the right to food, education or health (see box 9). As was also noted during the assessment undertaken on the occasion of the twenty-fifth anniversary of the Convention’s entry into force, it is estimated that around 41% of all children and adolescents in Latin America are experiencing multidimensional poverty and that around 17% are experiencing extreme deprivation. And these deprived children and adolescents are heavily concentrated in the indigenous (ECLAC/UNICEF, 2012) and rural populations.



**Box 9**

**Monetary poverty and multidimensional poverty**

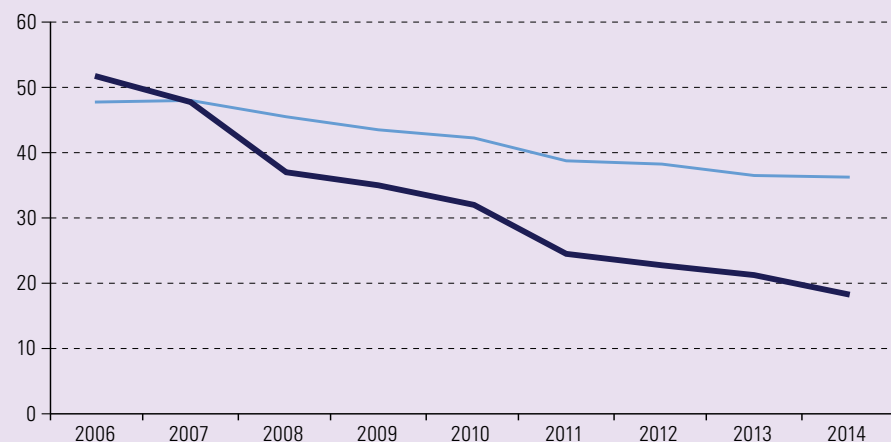
Combining an examination of official monetary poverty figures with an analysis of supplementary estimates covering other dimensions of the situation provides new perspectives on child and adolescent poverty and well-being. A study conducted by the Economic Commission for Latin America and the Caribbean (ECLAC) and the United Nations Children's Fund (UNICEF) for Uruguay illustrates the contrasts and complementarities of the two approaches. Between 2006 and 2014, the monetary poverty rate for children and adolescents plunged from 52% to 18%. The rate of poverty as measured as the sum total of different types of deprivations fell (from 48% to 36%), but much less sharply.

The differences between the two measurements, which are depicted in the following figures, tell experts a great deal about how monetary poverty measurements are sensitive to economic cycles and about why deprivation indicators are less so.

The multidimensional approach makes it possible to identify the most vulnerable groups—whose members have various types of unmet needs—and provides a basis for the design of policies that specifically target those groups (ECLAC/UNICEF, 2016).

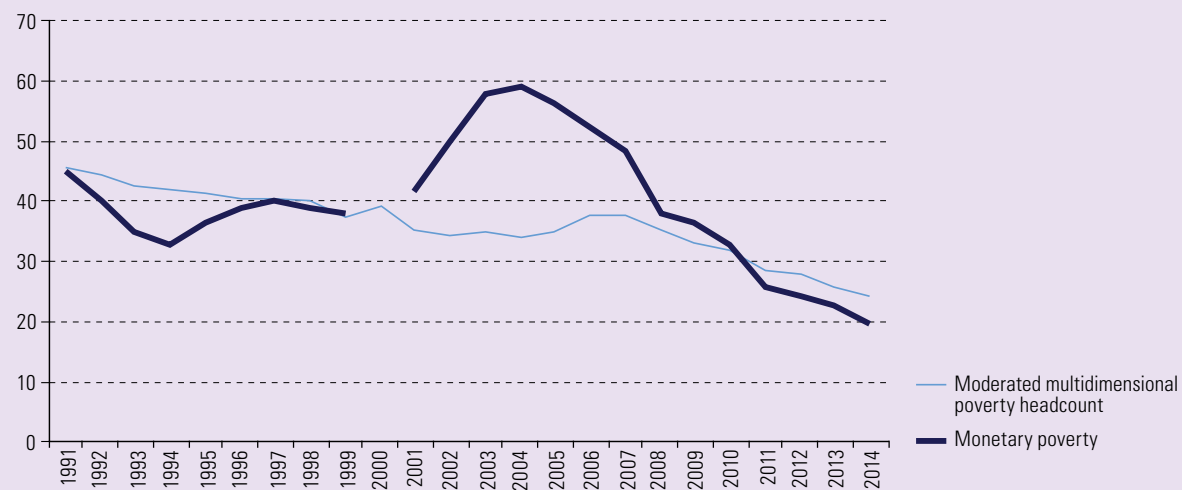
**Uruguay: trends in the moderated multidimensional poverty headcount and monetary poverty rate (2006 line) for persons under 18 years of age, entire country, 2006–2014**

(Percentages)



**Uruguay: trends in the multidimensional poverty headcount and monetary poverty rate (1997 and 2006 lines) for persons under 18 years of age, urban areas, 1991–2013**

(Percentages)



Source: Economic Commission for Latin America and the Caribbean (ECLAC)/United Nations Children's Fund (UNICEF), *Pobreza y privaciones múltiples en la infancia en Uruguay*, Montevideo, 2016.

Many different policies have helped the countries to become more effective in protecting children's and adolescents' right to a decent standard of living. Some have been part of Latin America's social protection matrix for a long time now, such as those focusing on the education and health-care systems, which have been discussed in other sections of this study. Other policies target heads of household or workers but have an indirect impact on the well-being of children and adolescents.

Conditional cash transfer programmes warrant special mention as a tool for combating poverty in households with children and adolescents. The monetary transfers made under these programmes have a direct impact on these households' incomes, but the programmes also help to safeguard the fundamental rights of children and adolescents by promoting school attendance and helping to ensure that they get regular health check-ups (Cecchini and Madariaga, 2011; Cecchini and Martinez, 2011). Some of these programmes also provide food baskets, food supplements or other forms of food aid, in addition to the cash transfers, and some of them ensure access to basic health services.

The basic design of the cash transfer programmes is fairly standard, but their coverage varies a great deal from country to country. In the Plurinational State of Bolivia, for example, these programmes reach 60% of all households, whereas the corresponding figure in Chile is around 2% (Cecchini and Atuesta, 2017). The amount of the transfers also differs substantially across countries, with the basic benefit for households with children ranging from almost US\$ 100 per child to less than US\$ 20 per child per month. In some countries, such as Ecuador, the amount of the benefit is per household and thus does not rise according to the number of children. In others, such as Uruguay, the amount rises according to the number of children, but not proportionally (Filgueira and Rossel, 2017).

The fiscal effort that these programmes entail for the countries concerned are determined by both the coverage and the size of the benefits that they provide. Argentina and Ecuador are the countries that make the biggest fiscal effort, followed by Mexico and Uruguay. In the case of Argentina, this is due more to the size of the benefits than to the programmes' coverage, although the latter is quite extensive. In Ecuador, the size of the benefit is rather small, but coverage is broad; in Mexico and Uruguay, the coverage is fairly extensive and the benefits are quite substantial (Filgueira and Rossel, 2017).

There are a wealth of assessments and studies that provide quite a good picture of the usefulness of conditional cash transfer programmes in different areas. The evidence shows that these programmes have had a substantial impact in terms of reducing poverty, and particularly extreme poverty, especially in rural areas (Fiszbein and Schady, 2009; Carneiro, Galasso and Ginja, 2009; Veras Soares, Perez Ribas and Guerreiro Osório, 2007). It is important, however, to look closely at the results that these programmes are having in key areas of well-being and to consider them in the context of the debate surrounding the role that conditionalities have played in these achievements (see box 10).

### Box 10

#### The results of conditional cash transfer programmes in terms of basic aspects of well-being and the debate surrounding their use of conditionalities

Transfer programmes have had an impact in terms of the protection of fundamental rights during early childhood and later childhood. More specifically, these programmes have been shown to boost primary school enrolment and attendance, facilitate the transition between primary and secondary school, reduce behavioural problems and raise scholastic test scores. Studies have also shown that they promote regular school attendance and help to reduce the dropout rate (Veras Soares Perez Ribas and Guerreiro Osório, 2007).

Some programmes have also had modest but nonetheless significant impacts on early childhood development indicators (SEDESOL, 2008; Paxson and Schady, 2010) and on various health indicators, such as haemoglobin levels, child mortality, growth, nutrition and the probability that births will be attended by skilled medical personnel. Impacts in terms of health check-ups and immunization were also found, although with mixed results in the case of anthropometric and nutritional indicators. Finally, these programmes have proven to be valuable tools for improving food quality and promoting the consumption of more nutritious foods (Bastagli and others, 2016; Cecchini and Martinez, 2011).

These achievements notwithstanding, there is an ongoing normative and empirical debate about the degree to which these programmes' conditionalities (which are the main way in which they link the transfers to access to basic services) are in keeping with a rights-based approach (Rossel, Courtoisie and Marsiglia, 2014).

At the normative level, some experts advance the argument that the conditionalities restrict the right to survival that is established in the Convention on the Rights of the Child, that the transfers are actually a basic human right (Künnemann and Leonhard, 2008) and that this is all the more so when the behaviours that the transfers are made conditional upon are also fundamental, inalienable rights. Viewed from this standpoint, the programme conditionalities are seen as a factor that undermines the principle of equality and non-discrimination (Sepúlveda, 2011; Freeland, 2007). When these programmes are considered from an empirical vantage point, the discussion turns on the extent to which these conditionalities actually enable children and adolescents to enjoy their fundamental rights more fully or whether, on the contrary, they cause some beneficiaries to end up being more vulnerable than before if, for reasons beyond their control, they cannot meet the programme requirements and cease to receive the monetary transfers provided under the programme (Rossel Courtoisie and Marsiglia, 2014).

**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of F. Bastagli and others, *Cash Transfers: What does the Evidence Say? A rigorous review of programme impact and of the role of design and implementation features*, London, Overseas Development Institute, 2016; S. Cecchini and A. Madariaga, "Conditional cash transfer programmes: the recent experience in Latin America and the Caribbean", *Cuadernos de la CEPAL*, No. 95 (LC/G.2497-P), Santiago, ECLAC, 2011; C. Rossel, D. Courtoisie and M. Marsiglia, "Programas de transferencias, condicionalidades y derechos de la infancia: apuntes a partir del caso del Uruguay", *Social Policy series*, No. 215 (LC/L.3927), Santiago, ECLAC, 2014; F. Veras Soares, R. Perez Ribas and R. Guerreiro Osório, "Evaluating the impact of Brazil's Bolsa Família: cash transfer programmes in comparative perspective", *IPC Evaluation Note*, No. 1, International Poverty Centre, December 2007; Secretariat of Social Development (SEDESOL), "Oportunidades, un programa de resultados", Mexico City, 2008; C. Paxson and N. Schady, "Does money matter?: The effects of cash transfers on child development in rural Ecuador", *Economic Development and Cultural Change*, vol. 59, No. 1, Chicago, The University of Chicago Press, 2010; R. Künnemann and R. Leonhard, *A Human Rights View on the Potential of Social Cash Transfers for Achieving the Millennium Development Goals*, Stuttgart, Bread for the World Institute (BFWI)/Evangelischer Entwicklungsdienst/FIAN International/Medico International, 2008; M. Sepúlveda, "PTC: análisis y recomendaciones para la consolidación del enfoque de derechos", paper presented at the expert workshop Los Programas de Transferencias Condicionadas desde un Enfoque de Derechos, Santiago, 17–18 March 2011; N. Freeland, "Superfluous, pernicious, atrocious and abominable?: The case against conditional cash transfers", *IDS Bulletin*, vol. 38, No. 3, 2007.

## 8. The right to social security

The right to social security is established in article 26 of the Convention. The recognition of this right is one way in which society can provide protection to children and adolescents, taking into consideration the available resources and the situation of the child and the adults who are responsible for his or her well-being.

The countries of the region have made great strides in recognizing all children's and adolescents' right to social security within the overarching context of their social protection systems (Morlachetti, 2013). However, because of the way in which social security coverage is distributed and the biases present in the family structures of employed persons, the contributory scheme affords less protection to children

and adolescents than it does to the rest of the population. Nonetheless, the available evidence for the region points to a significant upswing in the percentage of children and adolescents living in households where at least one of the members is affiliated with the health-care system because he or she pays social security contributions (see figure 42). The increase in this indicator has been particularly large in the poorest quintile of the population, where health-care coverage for children and adolescents based on social security contributions jumped from 29% in 2002 to 43% in 2010 and to 45% in 2015. This improvement notwithstanding, it is clear that children's and adolescents' access to the social security system is highly stratified by income level.

**Figure 42**

Latin America (10 countries): population between the ages of 0 and 17 residing in households where at least one member is affiliated with the health-care system, by income level, around 2002, 2010 and 2015<sup>a</sup>  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC) on the basis of special tabulations of data from household surveys conducted in the respective countries.

<sup>a</sup> Simple average for the following countries: Chile, Colombia, Costa Rica, Ecuador, El Salvador, Honduras, Mexico, Peru, Paraguay and Uruguay.

In order to address this problem, some of the countries have modified the eligibility requirements for social security benefits for households with children or adolescents. Some of the countries in the region have been providing family allowances for many years now, and those allowances constitute a key component of the social protection systems for families and their children that are now being developed (ILO, 2014; Filgueira and Rossel, 2017). Argentina, Chile and Uruguay set up contributory family benefit systems early on, and those systems have made it possible to meet the needs of workers who have children. For a time, these policies coexisted with the conditional cash transfer programmes that came on stream in the last few decades but, recently, Uruguay and Argentina have been linking up parts of their family allowance systems with the newer income transfer schemes (Arcidiácono and others, 2014; Filgueira and Hernández, 2012; Pautassi, Arcidiácono and Straschnoy, 2013).

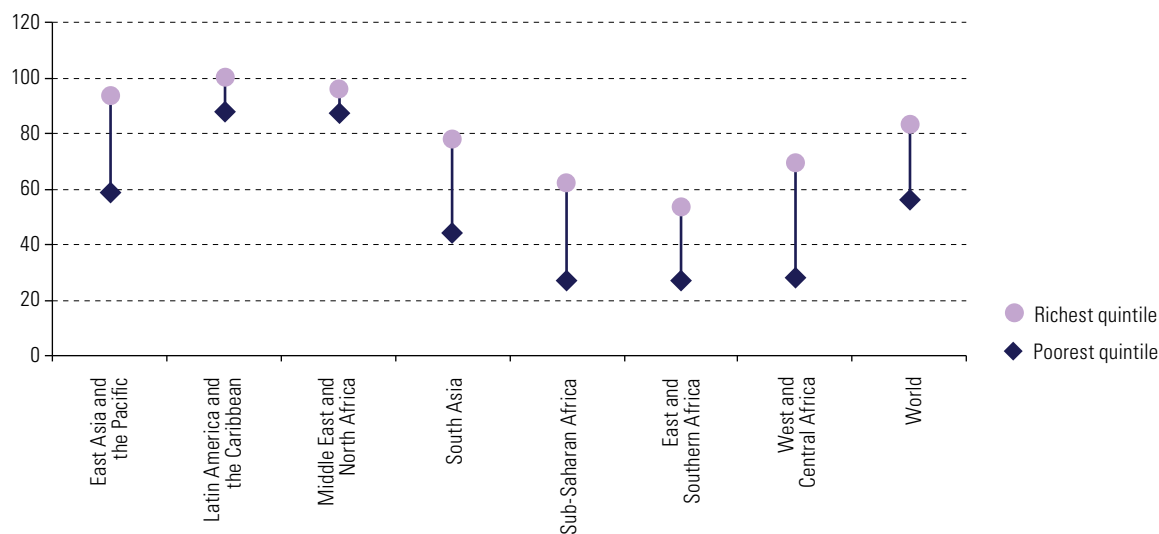
A number of countries are attempting to extend maternity leave and to introduce paternity leave provisions so that fathers can play a more active role in caring for their children during their early years of life (Rossel, 2013b). To date, three Caribbean countries (Bahamas, Dominica and the Cayman Islands) provide postnatal leave for both parents so that they can divide up their domestic tasks more equitably.

## 9. The right to an identity

Articles 7 and 8 of the Convention recognize the right to an identity and establish that all children should be registered at birth and that they all have the right to a name, to acquire a nationality and to know their parents. These articles also provide that children's identities should be protected and that States parties should develop the necessary legislation and regulations to safeguard that right and to provide appropriate assistance if a child is illegally deprived of some or all of the elements of his or her identity with a view to re-establishing that identity.

Notable advances have been made in safeguarding the right to an identity in the region in the 30 years since the Convention on the Rights of the Child entered into force. Latin America and the Caribbean are in the vanguard in terms of the percentage of children whose births are registered, both as regards the percentage of registered births and as regards the differential in birth registration rates between children in high-income and low-income sectors (see figure 43). Even so, it is estimated that there are still some 2.7 million children under 5 years of age whose births have never been registered. And that group tends to include more children who are experiencing other deprivations because of their ethnicity, area of residence, income level or some other factor.

**Figure 43**  
Selected regions and the world: children who are registered at birth, by income level, 2010–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children's Fund (UNICEF), *The State of the World's Children 2011. Adolescence: An age of opportunity*, New York, 2011, and UNICEF, *The State of the World's Children 2017: Children in a digital world*, New York, 2017.

With the exceptions of the Bolivarian Republic of Venezuela and Guyana, the percentages of children who are registered at birth has risen in all the countries for which historical statistics are available and, in some cases, the rates have reached 100% (see figure 44).

**Figure 44**  
Latin America and the Caribbean (27 countries): children who are registered at birth, by country, 2000–2016  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC), on the basis of United Nations Children's Fund (UNICEF), *The State of the World's Children 2011. Adolescence: An age of opportunity*, New York, 2011, and UNICEF, *The State of the World's Children 2017: Children in a digital world*, New York, 2017.

Children residing in rural areas and the children of migrant families are more likely than others to be deprived of their right to an identity (IPU/UNICEF, 2013; UNICEF, 2013c). This deprivation interferes with their enjoyment of their fundamental rights, since an identity document continues to be required in order to enrol in school and sign up with a health-care system in most of the countries of the region (ECLAC/UNICEF, 2011).

The countries of the region have been devising an array of different strategies for upholding the right to an identity. As noted by ECLAC and UNICEF in a recent study (2014a), new technologies and the creation of electronic birth registries may be one of the factors that have helped to boost registration rates.

## 10. Adolescents' right to participate and to well-being

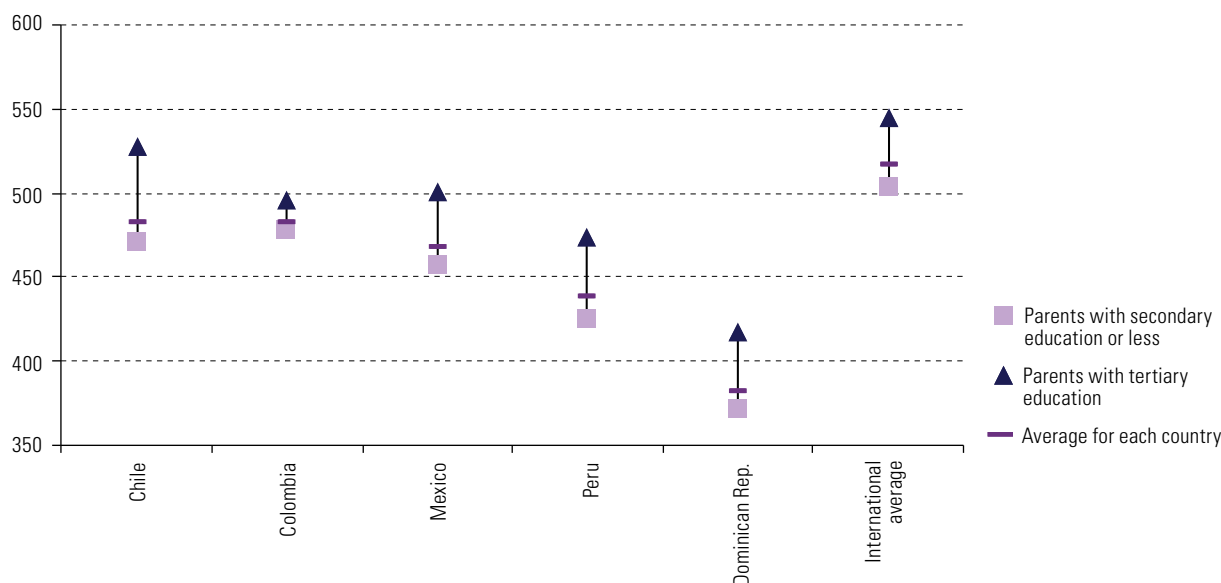
A number of different articles in the Convention on the Rights of the Child<sup>34</sup> set out the right to participation in its various forms. This was the first time that this right was recognized in an international legal instrument such as the Convention, which underscores how important it is for all children and adolescents to be heard, to have their opinions taken into account and to play an active part in shaping their own lives.

By establishing this right, the Convention upholds the principle that the views of children and adolescents should be respected when strategies that would have a direct impact on their well-being are being designed and implemented. In addition, children's participation has been recognized as a fundamental factor in the promotion and protection of the rights of children and adolescents in the region.

<sup>34</sup> Articles 12–16 and implicitly in article 29.

Instruction in the rights and obligations of citizenship and democracy is of crucial importance in enhancing their participation. The available evidence on children’s and adolescents’ level of civic education in five Latin American countries points to a substantial degree of variation in this respect, as well as a certain degree of stratification in line with the parents’ levels of education (see figure 45).

**Figure 45**  
Latin America (5 countries): scores on civic knowledge questionnaires, by parents’ educational level, 2016  
(Scores)



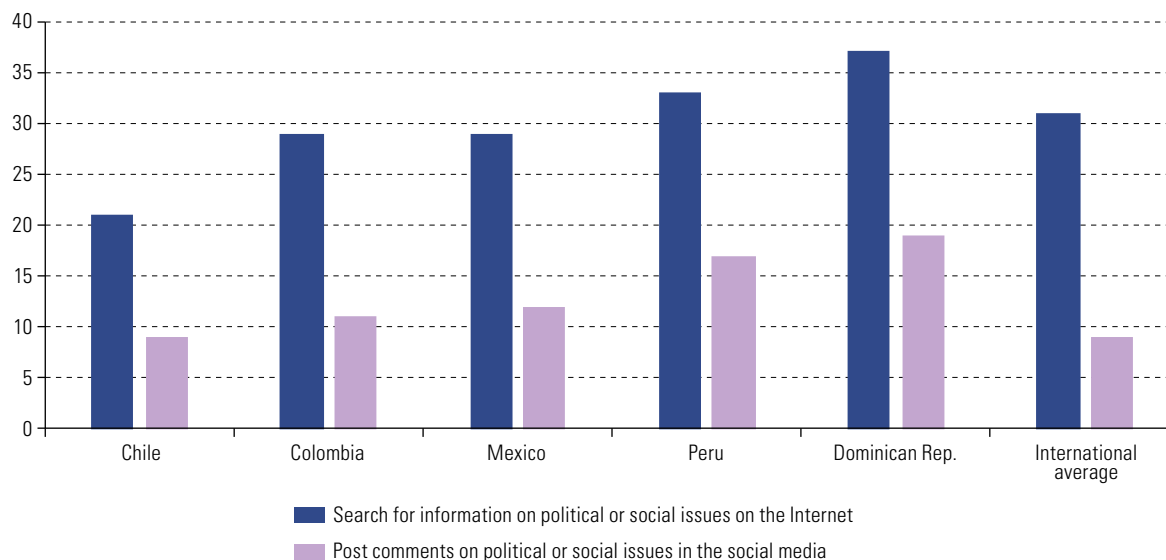
**Source:** Economic Commission for Latin America and the Caribbean (ECLAC, on the basis of Schulz and others, *Becoming Citizens in a Changing World. IEA International Civic and Citizenship Education Study 2016 International Report*, Cham, Springer International Publishing, 2018).

The openness of the Internet and the ready access to information that it provides has given children and adolescents an unprecedented opportunity for socialization, participation and expression. The available data indicate that a sizeable percentage of children under 14 years of age use the Internet to search for and to post material about political and social issues (see figure 46). It is important to realize, however, that this does not necessarily provide a guarantee for the right to participate and actually may result in the violation of children’s and adolescents’ rights in this respect if the adults around them do not mentor them and help to guide them in its use (ECLAC/UNICEF, 2014b).

It is important for policies to strike a balance between the online protection and empowerment of children, adolescents and young people and to provide age-appropriate guidance on the use of information and communications technologies (ICTs) in a safe environment. In order to accomplish this, ICT access needs to be broadened and extended beyond school settings, steps need to be taken to make sure that the Internet environment is a safe one, and the importance of peer-to-peer learning and exchange needs to be recognized by policymakers (Pavez, 2014).

**Figure 46**

Latin America (5 countries): percentage of 14-year-olds who search for and post material on political and social issues on the Internet, 2016<sup>a</sup>  
(Percentages)



**Source:** Economic Commission for Latin America and the Caribbean (ECLAC, on the basis of Schulz and others, *Becoming Citizens in a Changing World*. IEA *International Civic and Citizenship Education Study 2016 International Report*, Cham, Springer International Publishing, 2018.

<sup>a</sup> The indicator used here is students' engagement with political and social issues through the Internet and other social media at least once per week.

## C. Concluding observations

### Context and approach

The context for the application of the Convention in Latin America and the Caribbean has undergone major changes in the past 30 years in macroeconomic and sociopolitical terms and with regard to the growth of the countries' economies. These changes enabled the region's governments to introduce measures aimed at improving social conditions, in general, and conditions for children, in particular, especially during the early 2000s. The situation in the region's labour markets were also conducive to advances in the application of the Convention, given the generally low unemployment rates seen during that time, together with a slight shift in employment away from low-productivity sectors, all of which made it possible to devote more resources to building up the countries' social protection systems. Demographic changes have also been of key importance, and this is particularly true of the countries' declining fertility rates, which have translated into lower dependency rates and greater opportunities for saving and investment.

### The right to education

Advances in the enjoyment of the right to education have been reflected in significant improvements in the coverage and completion rates of the different educational cycles in the region. Much remains to be done, however, in terms of the universalization of pre-primary education and in narrowing gaps identified in the different axes of the inequalities matrix. Thus, for example, stark disparities are evident in the amount of learning support that is provided to students in households having different income levels, in primary



school attendance rates for different ethnic groups and in the secondary education completion rates of males and females and of rural versus urban residents. These disparities attest to the challenges that have yet to be overcome in order to build a truly inclusive society — challenges that can only be met if class, gender and geographic inequalities are addressed, along with the inequalities affecting specific groups, such as persons with disabilities, persons of African descent and indigenous peoples.

In order to make headway in the full realization of the right to education, steps need to be taken not only to expand coverage but also to address the problem of delayed school entry, reduce grade repetition rates, improve retention and enhance the learning process.

## The right to health

An overall assessment of children's and adolescents' enjoyment of their right to health in Latin America and the Caribbean points up substantive progress in expanding the coverage of health-care services and reducing access barriers to health-care services for the child and adolescent population. In order to achieve universal access to health, however, the persistence of gaps and inequalities along ethnic, income-level and geographic lines must be acknowledged and dealt with.

Greater efforts have to be devoted to improving the quality of health-care systems, with special emphasis on the elimination of inequalities between different geographical locations. One aspect of particular concern is the close association between investment in infrastructure and the right to health. The expansion of coverage and improvements in the quality of care have to be coupled with increased access to safe drinking water and sanitation facilities, since their availability is directly related to reductions in child morbidity. In addition, emerging child and adolescent health issues, including the growing burden of non-communicable diseases, need to be addressed, and adolescent health services in the region must be strengthened.

## The right to nutrition and to housing

In order to uphold this right, the region will have to deal with the problem of malnutrition, which includes undernutrition, micronutrient deficiencies, and overweight and obesity. While inroads have been made in reducing undernutrition in recent decades, this problem not only persists in some countries but also exists in parallel with increasing overnutrition (overweight and obesity) at the various stages of the life cycle.

Nutrition is a cross-cutting issue that has a substantial bearing on the pace of progress towards the Sustainable Development Goals. In order to attain those Goals that are directly related to malnutrition, improvements are called for in the design and implementation of comprehensive nutrition policies that address, among other aspects, geographic or habitat-related factors as strategic considerations.

## The right to life and to healthy development from early childhood onward

The region has made considerable progress in protecting the right to life and to healthy development from the first years of life on, and this is reflected in an encouraging decrease in mortality rates for children under 5 years of age. The most recent studies have shown, however, that differentials exist that match up with existing inequalities, such as ethnic/racial inequalities, and these disparities have not received the attention they warrant, nor has sufficient corrective action been taken to close these gaps.

To overcome the challenges that stand in the way of the full realization of this right, child development, starting in early childhood and continuing on as the child grows, has to be accorded greater importance and seen as a specific area of action. Accomplishing this will call for targeted policies to address such

issues as infectious diseases among children under 5 years of age. Special attention must also be devoted to promoting exclusive breastfeeding – an area in which the region is lagging behind other parts of the world. An effort also has to be made to devise policies to ensure that all pregnant women are monitored by medical personnel from early on in their pregnancy.

## The right to live free from violence

The Latin American and Caribbean countries have to make up for serious failings in safeguarding the right of all children and adolescents to live a life free from violence. The number of murders of children and adolescents that take place, the percentage of women who marry before they reach 15 years of age and the prevalence of the belief that violent behaviour and violence in the home are acceptable are all causes of great concern.

There is an urgent need for policies that will enable the countries to mount an all-out attack on child abuse and ill-treatment. This will entail the development of policy tools focusing on the victims of violence in all its forms, on bringing about a reduction in the use of the deprivation of liberty by the juvenile criminal justice system and in putting a stop to the violence experienced by the nearly 240,000 children and adolescents in the region who are institutionalized and by unaccompanied migrant children. Ending violence against children will require a comprehensive, multidisciplinary approach to the causes and effects of the different types of violence, along with a deeper understanding of these phenomena and better information systems so that violence against children can be detected and reported. This kind of multidisciplinary approach will involve reinforcing social protection, health, education, justice and other systems in order to put a stop to violence before it happens and to provide victims with satisfactory services when it does. Action also has to be taken to change people's attitudes and behaviour by engendering a lasting change in the way that the Latin American and Caribbean societies raise, educate, discipline and treat their boys and girls. This comprehensive, multidisciplinary approach will serve as a foundation for action-oriented strategies for implementing and enforcing existing legal frameworks for the protection of children from violence, for changing negative societal norms and values and replacing them with ones that uphold the principle of peaceful coexistence, for creating safe environments for children, helping parents and caregivers to raise children properly, supporting families' economic empowerment, providing responsive support services for children and educating them and teaching them life skills.

## The right to protection from commercial exploitation and child labour

The determined efforts made over the past 20 years in the region to do away with child labour have succeeded in reducing the incidence of child labour to a rate of 7.3% for children between the ages of 5 and 17. That overall rate breaks down unevenly at the country level, however, and the rate is disturbingly high in some countries. Child labour violates children's and adolescents' rights and is more prevalent among males, children of African descent, indigenous children and boys and adolescents living in rural areas. The Regional Initiative: Latin America and the Caribbean Free of Child Labour, along with the policy accelerator framework that it has developed, can play a critical role in speeding up progress towards the Sustainable Development Goals relating to the eradication of child labour and towards its complete elimination by 2025.

## The right to an adequate standard of living

The region has made great strides in realizing children's' and adolescents' right to a decent standard of living thanks to its success in lowering the poverty rate over the past 15 years. But less progress has been made in reducing poverty among children and adolescents than in the rest of the population, and the age-related imbalance in the distribution of well-being thus remain in evidence. Above-average poverty levels are also found in the Afrodescendent and indigenous populations and among people residing in rural areas.

Advances have been made in the development of policies and programmes to uphold children's and adolescents' right to a decent standard of living, which include those aimed at expanding the coverage of health care and education and conditional transfer programmes. These programmes have had a particularly powerful impact because they both help to boost household income and contribute directly to the fulfilment of fundamental rights of the child, such as the right to attend school and the right to have regular check-ups.

In order to ensure that all children can live in a region that is free from poverty, coordinated action must be taken to design and implement universal, inclusive yet difference-sensitive social policies that will work hand in hand with newly created or reinforced comprehensive social protection systems. Governments must also continue to strive to increase their investment in their nations' children, which will only be possible if they achieve the political stability necessary to generate sufficient tax revenues.

### The right to social security

The income-based stratification of the child population's access to social security is closely linked to inequalities in the labour market. Contributory social security systems provide less protection to children and adolescents than to the rest of the population primarily because of the imbalance in the distribution of well-being among different age groups which was discussed earlier in this study. Increased access to health-care systems by reason of a parent's social security coverage is one of the major benefits of social security systems.

Policies that should be promoted in order to move forward with the realization of this right include policies designed to remove barriers to access for social security benefits for families with children, the long-standing family allowance schemes that have served as a central component of many countries' social protection systems and policies that will expand the scope of maternity or paternity leave for new and other parents.

### The right to an identity

The Latin American and Caribbean region is more advanced than other parts of the world in its protection of the right to an identity, as can be seen from its high rate of birth registration and the much smaller income-based differentials that exist in this connection. Yet while these advances are encouraging, stark disparities exist in terms of the progressive realization of this right in the case of rural residents and migrants that diminish these population groups' chances of availing themselves of social protection systems.

Information and communications technologies are helping to heighten the effectiveness of the strategies being developed in this area.

### Adolescents' right to participate and to well-being

In addition to a substantial degree of variation in different people's knowledge about the rights and duties of citizenship in the countries of the region where this factor was analysed and a degree of stratification that is associated with the parents' level of education, the extent of the respondents' knowledge of civics was below the international average. On the other hand, another analysis in the countries of the region where the relevant information was available showed that those children's use of the Internet to search for and to post material on political and social issues was above the international average. Clearly, a larger number of countries and indicators will have to be studied in order to obtain a better picture of the status of the region's child and adolescent population's right to participation.

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The United Nations General Assembly adopted the Convention on the Rights of the Child on 20 November 1989. It was the first binding agreement at the national and international levels on the fulfilment of the civil, political, social, economic and cultural rights of children and adolescents. All the Latin American and Caribbean countries have ratified the Convention, thereby undertaking a commitment to ensure, protect and promote these rights and create conditions in which children and adolescents can enforce them.

Almost 30 years after the signature of the Convention on the Rights of the Child, the Economic Commission for Latin America and the Caribbean (ECLAC) and the Regional Office for Latin America and the Caribbean of the United Nations Children's Fund (UNICEF) offer this document summarizing salient features of the context in which the Convention has been applied in the region. It also presents indicators that reflect progress and outstanding debts in Latin America and the Caribbean for a selection of rights: the rights to education, health, nutrition, housing, life, healthy development from the early years, a life free of violence, protection from exploitation and child labour, a decent standard of living, social security, an identity, and adolescent participation and well-being.

The challenges the region faces in relation to fulfilling the rights of all children and adolescents spring from the aspiration to achieve the Sustainable Development Goals and, by 2030, to be able to justly affirm that steady progress has been made towards the aim of leaving no one behind.

