December 18, 2000

The Committee on the Rights of the Child

Re: Supplementary information on Lithuania
Scheduled for review by the Committee on the Rights of the Child on January 17, 2001

Dear Committee Members:

The purpose of this letter is to provide some independent information regarding Lithuania, which is scheduled to be reviewed by the Committee on the Rights of the Child during its 26th session. Non-governmental organizations, such as the Center for Reproductive Law and Policy (CRLP) can play a central role in providing the committee with information that is reliable, accurate and independent concerning the rights covered by the Convention on the Rights of the Child (Children’s Convention). This letter will highlight several particular areas of concern related to laws and policies on the reproductive health and lives of young girls and adolescents in Lithuania.

Adolescent reproductive health and rights are an integral part of the Committee’s mandate under the Children’s Convention. Article 24 of the Children’s Convention recognizes young girls and adolescents’ right “to the enjoyment of the highest standard of health and to facilities for the treatment of illness and rehabilitation of health.” It also requires States Parties to take appropriate measures “to develop family planning and education services.” Further, the Children’s Convention explicitly recognizes sexual violence and abuse as a violation of young girls and adolescents’ rights. Yet, despite these protections, the reproductive rights of young girls and adolescents in Lithuania continue to be neglected and, at times, blatantly violated.
CRLP has identified for the Committee the following issues of concern, which directly affect the reproductive health and rights of girls and adolescents’ in Lithuania:

1. **Access to Medical Care for Reproductive and Sexual Health Matters and Family Planning (Articles 6 and 24)**

   a. Insufficient governmental attention has been paid to the issue of adolescent’s sexual and reproductive health. While reproductive and sexual health care consultations are readily available through doctor’s offices and contraceptives are available for purchase adolescents are often reluctant to take advantage of these services.

   b. Adolescents’ have a limited knowledge of contraceptive methods and tend to avoid modern methods of contraception. Indeed, of sexually active couples between the ages of 18 and 19, only 43.2% use contraceptives. The most popular methods are condoms, used by 18.9% of adolescents and coitus interruptus, which was used by 10.8%. Statistics are nonexistent on contraceptive use for adolescents under the age of 18.

2. **Education on Sexuality and Family Planning (Article 24)**

   There is no unified sexual education program in Lithuania and it is usually integrated into other subjects, such as biology or physical education and often taught within the context of abstinence-only programs.

3. **Abortion (Articles 6 and 24)**

   Approximately 7.2% of all abortions in 1998 were performed on women under the age of 19, and 0.02% for women under 14 years of age. Abortions for women less than 16 years of age require parental consent. Although there are no statistics available regarding the prevalence of unsafe abortion, young women are more likely to undergo such procedures to avoid parental involvement.

4. **Sexual Violence and Trafficking (Articles 19 and 34)**

   a. The incidence of rape and sexual assault has been increasing in Lithuania in the past four years. In 1996, 168 women reported such crimes, while 225 reported them in 1999. 50% of the victims of rape were women under the age of 18. It is estimated that only 10.6% of victims of sexual violence in Lithuania report these crimes to the police. The government provides no consultative centers, phone lines offering psychological help, or other services specifically dedicated to victims of rape and sexual crimes.

   b. The figure of missing persons has risen from 796 in 1995 to 402 in the first quarter of 1998 alone. Most of the missing persons are young girls. It is believed that many have been forced to work abroad as prostitutes and have had their travel documents confiscated by their traffickers. While trafficking is considered a crime in Lithuania,
often it is the women who are trafficked, rather than the traffickers, that are prosecuted and punished.

The Committee should also consider addressing the following questions to the Lithuanian government:

1. What legislation and policies have been adopted to address the barriers adolescents face in accessing reproductive health and family planning services, and information about these services? Specifically, what efforts has the national government made to ensure that healthcare providers are sensitized to the unique needs of adolescents in the provision of such services? (Articles 6 and 24).

2. What measures have been taken to institutionalize and ensure the quality of sexual education programs in public schools beyond simply recognizing their importance and mandating the inclusion of these programs in school curricula? (Articles 6 and 24)

3. Being aware that the requirement of parental involvement may deter adolescents from seeking safe and legal abortion services, what has the Lithuanian government done to remove this barrier, or at the very least, lessen its impact on adolescents’ rights to health and privacy? (Articles 6 and 24)

4. What government-sponsored programs or initiatives exist to provide support and counseling to adolescent victims of sexual crimes and to increase awareness about and reporting of such crimes? (Articles 19 and 34)

5. What efforts are being made to reduce the number of young girls and adolescents trafficked out of Lithuania and what legislative measures have been taken to halt the criminal prosecution and punishment of these adolescents and instead target traffickers for punishment? (Articles 19 and 34)

Enclosed please find the following supporting documentation for the Committee’s reference:


There remains a significant gap between the provisions contained in the Children’s Convention and the reality of adolescents’ reproductive health and lives. We appreciate the active interest that the Committee has taken in the reproductive health and rights of adolescents’ and the strong concluding observations and recommendations the Committee has issued to
governments in the past, stressing the need for governments to take steps to ensure the realization of these rights.

CRLP hopes that this information is useful during the Committee’s review of the Lithuanian government’s compliance with the provisions contained in the Children’s Convention. If you have any questions, or would like further information, please do not hesitate to contact the undersigned.

Very truly yours,

Katherine Hall Martinez
Deputy Director – International Program