United Nations Human Rights Council
Universal Periodic Review
40th Session (January-February 2022)

UPR of Haiti

Introduction

1. This submission of Edmund Rice International (an NGO in consultative status with ECOSOC) is made on behalf of the Mission Frère-Haiti program, a program of the Edmund Rice Christian Brothers North America Province that was created in 2015 to financially support programs in and advocate for human rights in Haiti, and in conjunction with the Religious of Jesus and Mary (RJM), a community of religious women working in 28 countries with two missions located in Haiti that support a variety of needs including educational, agricultural and healthcare programs.

2. **Edmund Rice International (ERI)** is an international non-governmental organization, founded in 2005 and with Special Consultative Status with ECOSOC since 2012. ERI is supported by two Catholic Religious Congregations, the Christian Brothers and the Presentation Brothers. It works with networks of like-minded organizations and in the countries where the two Congregations are present. ERI has a special interest in the rights of the child, the right to education and in eco-justice.

3. The **Edmund Rice Christian Brothers North America Province** [http://www.ercbna.org/](http://www.ercbna.org/) in response to the 2014 Congregation Chapter in Nairobi, Kenya created the Mission Frère Initiative, which included a focus in Haiti. The Mission Frère-Haiti program has included a number of visits to Haiti to interact and partner with various organizations whose programs support the Haitian people in a number of different areas of concern. This work includes advocacy efforts to increase awareness of human rights concerns and fundraising efforts to support partner programs such as those run by the Religious of Jesus and Mary, The Center of Hope-Haiti, and Hôpital Sacré Cœur.

4. The **Sisters from the Religious of Jesus and Mary** [https://rjmusa.org/contact](https://rjmusa.org/contact) opened a mission in Gros Morne, Haiti in 1997 to support pastoral work, education, health care, community organizing, and agricultural, artisan and ecological projects. Since 1997, their work has expanded to include a number of different mission sites that work to support the people of Haiti. The work of RJM includes the efforts of the religious women who have created a variety of programs there, as well as the efforts of lay volunteers who travel to work with RJM’s missions in Haiti. RJM’s presence in Haiti allows them to be in a unique position to both address immediate concerns and crises affecting Haitian residents, and to share human rights concerns with various organizations around the world.
Children’s Right to Education in Haiti

5. Children’s access to quality education in Haiti has suffered for years. A significant portion of the child population in Haiti lacks access to regular schooling and schooling is often interrupted due to violence and instability in the state, including violence against children and educational workers, or labor strikes by educational workers, who are often underpaid and must resort to find additional income in other industries. Due to national lockdowns caused by civil unrest between September and November of 2019 and a four-month closure of schools due to the COVID-19 pandemic, nearly 1.2 million children dropped out of school and children in Haiti lost nearly a year of schooling.

6. Primary school enrollment in Haiti is roughly 85 percent, which represents an improvement in recent years, yet the average Haitian aged 25 years or older has only completed 5 years of schooling. While primary school enrollment has improved in recent years, government oversight of the education system is weak as are inspection of schools. School costs are often prohibitive and 85 percent of primary schools are privately managed and operated by NGO’s, religious communities or for profit groups. While the Ministry of Education in Haiti (MENFP) has made quality education a top priority and has made large investments into education, the lack of oversight allows for the persistence of substandard education, and abuses within schools.

7. Our partners in Haiti have described children’s testimonies of mistreatment and abuses in schools, including physical violence against students and sexual violence against students, particularly against young women, who are forced to perform sexual acts to complete academic requirements. Violence against children in schools in Haiti has been well documented, despite being banned by Haitian law in 2001.

8. Recommendations

It is recommended that the state fully implement the following recommendations a number which were accepted by Haiti at its previous review as indicated:

(i) Adopt a Child Protection Code that includes physical, emotional and sexual abuse (Recommendation 115.29, Portugal).

(ii) Proceed with international cooperation and with the United Nations specialised agencies to enhance the government efforts in providing free education and eliminate illiteracy (Recommendation 115.156, Syria).

(iii) Take necessary measures to put into practice free education for the first six years of primary education and eradicate all discrimination, including class, gender and between rural and urban populations in the education system (Recommendation 115.159, Austria).

(iv) Continue to amend and update (criminal and civil) legal codes to protect women from sexual exploitation, gender-based violence and discrimination (Recommendation 115.63, Maldives).
(v) Improve and ensure the safety of citizens to improve access to regular education.

(vi) Increase expenditures for educational programs to increase affordability of school fees.

(vii) Increase expenditures for educational spending on salaries to promote teacher retention.

(viii) Improve and formalize school oversight and inspection by MENFP to ensure fidelity of implementation of curriculum and to ensure student safety and welfare.

**Child Servitude and Trafficking**

9. Human trafficking and exploitation of children remain a major concern in Haiti. The practice of having child servants still persists, as more than 300,00 Haitian children are still in domestic servitude and families will often send their children to live with other families for survival. Oftentimes these children are mistreated, sexually abused, and/or are forced to work and don’t attend school.

10. As economic stagnation and low incomes persist, this presents low prospects of employment within Haiti. Large portions of the youth population lack prospects of gainful employment, which has only been exacerbated by the COVID-19 pandemic. The state of the Haitian economy and low job prospects has been exacerbated by gang violence, which has displaced thousands of citizens across the country and often disproportionately affects children.

**Recommendations:**

11. It is recommended that the state fully implement the following recommendations a number which were made to/accepted by Haiti at its previous review as indicated:

(i) Ensure the systematic enforcement of laws eliminating child-labour, including the establishment of a clear minimum age for domestic work (Recommendation 115.100 Austria).

(ii) Take further steps to combat child domestic labour and child abuse (Recommendation 115.101, Armenia).

(iii) Eradicate domestic child labour and economic exploitation of children (Recommendation 115.107, Panama).

(iv) Vigorously investigate, prosecute, convict and sentence traffickers, including those responsible for domestic servitude and child sex trafficking (Recommendation 115.111, USA).

(v) Step up efforts to systematically address exploitation of and violence against children, including by introducing and effectively implementing legislation criminalizing the practice of placing children from poor families in domestic services (Recommendation 116.3, Czechia).
(vi) Create a more robust vocational training program for youths.

Access to Healthcare

12. In the wake of the 2010 earthquake, tremendous humanitarian support poured into Haiti, particularly medical support. One of the unintended consequences of this support was the closing of many private, non-government funded medical providers. ix

13. The current state of the healthcare system in Haiti prevents most Haitian citizens from accessing adequate and affordable healthcare. Families are often hesitant to attempt to receive care in a hospital because of high costs in hospitals. If they are able to afford it, many Haitians will opt to pay a fee for an unlicensed medical healer in the local community. x As of 2017, 38% of total health expenditure was dedicated to the hospital sector, which despite the large expenditures, failed to provide adequate services or expand access. xi Because of the lack of funds among patients, high costs of service and non-uniform funding and payment structures of medical facilities, the Haitian healthcare system struggles to stay solvent.

14. A 2017 report by the World Bank found that primary care is significantly lacking and that annual, per capita spending on healthcare has plummeted in recent years and in 2017 was 13 USD, roughly 4.4% of the 2017 budget. xii This lack of access to primary and preventative care leaves Haitians vulnerable to preventable diseases and ailments.

Recommendations:

15. It is recommended that the state fully implement the following recommendations a number which were accepted by Haiti at its previous review as indicated:

(i) Work towards improving people’s basic rights such as the right to food and the right to the highest attainable standard of health (Recommendation 115.149, Thailand).

(ii) Continue to strengthen its public healthcare system and improve access to healthcare services, particularly for women, children and older persons (Recommendation 115.154, Singapore).

(iii) Engage further efforts in protection of public health, namely to undertake systematic review of the health situation and to take all necessary measures in order to prevent and combat transmissible diseases, including cholera (Recommendation 115.155, Serbia).

(iv) Consult with local, private and religious groups involved in the healthcare system to understand and implement effective and best practices to increase patient access to healthcare.

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