

TIME RECEIVED	REMOTE CSID	DURATION	PAGES	STATUS
January 16, 2014 9:55:48 AM GMT+01: +41227910084	+41227910084	398	15	Received
16/01/2014 09:39 +41227910084		CYPRUS MISSION GVA		PAGE 01/15



**Permanent Mission of the Republic of Cyprus  
Geneva**

Ref.: 24.11.006.013 (1000/1)

The Permanent Mission of the Republic of Cyprus to the Office of the United Nations at Geneva and other International Organizations in Switzerland presents its compliments to the Office of the United Nations High Commissioner for Human Rights and with reference to the latter's Note Verbale dated 22 November 2013, concerning the Human Rights Council Resolution 24/11 on "Preventable mortality and morbidity of children under 5 years of age as a human rights concern", has the honour to enclose herewith the relevant information as received from the competent Authorities of the Republic of Cyprus.

The Permanent Mission of the Republic of Cyprus to the Office of the United Nations at Geneva and other International Organizations in Switzerland avails itself of the opportunity to renew to the Office of the United Nations High Commissioner for Human Rights the assurances of its highest consideration.

Geneva, 16 January 2013



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**REPUBLIC OF CYPRUS  
MINISTRY OF HEALTH**

**MoH: Y.Y.5.21.01.91(12)**

**Request for government wide adopted national policy/strategy/action plan aimed at reducing morbidity and mortality in children under five years of age. Please provide information on provisions that ensure that explicit attention is being paid to specific health and development needs of vulnerable and disadvantaged children and to interventions and service delivery approaches for these children.**

In Cyprus, children's health and wellbeing is set as a priority of the health policy. Children's right for health is protected and promoted through interdisciplinary / interdepartmental/ interministerial programmes and the implementation of "Health in all Policies". The aim of the health programmes is mainly to efficiently and effectively meet the health needs of all the children living in Cyprus and tackle determinants of health such as smoking, prevention of injuries, promotion of healthy eating, etc.

All children living in the country enjoy easy access to quality healthcare services while special provisions have been introduced in the law so as to ensure that children of vulnerable groups such as children from low income families, children of illegal immigrants and political refugees, have also immediate access to healthcare.

Towards the attainment of promotion of health and reduction of mortality and morbidity of children, the Ministry of Health with the active involvement of stakeholders, promoted the development and implementation of specific strategies. These strategies cover several areas of health such as smoking, prevention of injuries, protection and promotion of breast feeding, maternal and child health, immunizations programme, etc.

Examples:

- a) **Mental Health** - In relation to the psychosocial health of children in Cyprus, the Mental Health Services for Children and Adolescents of the Ministry of Health are child oriented and the right of children to health is one of the key principles underpinning their operation. Through diagnostic and therapeutic approaches mental health professionals defend the rights of the child and cooperate in this field with Social Services, Ministry of Education, other departments of the Ministry of Health, Legal Department, Court etc. Community centers and services have been developed in the community, in general hospitals of all districts, and their only dedicated clients are children - teenagers and their families.

More specific in the specialized settings of the mental health services mental health professionals provide mental health evaluation, referral, behavioral interventions, family support, psychoeducation and counselling, addressing problems such as sexual and

physical abuse, family member loss, eating disorders ,phobias ,aggression and hyper-activity.

In the cases of intervention in Paediatric inpatient settings such as an oncology paediatric ward and in the case of cancer diagnosis they provide mental health evaluation and referral, family support, and counselling.

- b) **Breast Feeding** - In the end of 2011, the Cyprus Ministerial Council approved the establishment of a "National Committee for the Protection, Promotion and Support of Breastfeeding in Cyprus". The Committee's work started in the beginning of 2012 and the 9 members of the committee come from governmental and non-governmental services, health professional bodies and NGOs. The work of the Committee is coordinated by the Ministry of Health.

The main goal of the National Committee is the implementation of the breast feeding strategy that aims at promoting and supporting b/f for all mothers in Cyprus so as to establish it as the exclusive way of nutrition for infants for the first 6months of life and it's continuation until the twelve months or as long as mother and child wish to. Various activities are organised by the Committee within the framework of the implementation of the National Strategy on b/f. These activities include the development of a written National Policy (in progress, expected to be completed within 2014), the promotion of baby – friendly hospital initiative and the implementation of the "10 Steps of Baby Friendly Hospitals" (an ongoing effort of the National Committee), education of the community and health professionals (ongoing process), development of information material (ongoing process), support of breast feeding mothers (part of the services offered to mother and child), organisation of public awareness month (yearly), etc.

- c) **Prevention of Childhood Injuries and Poisoning** -A five year Strategic Plan for the Prevention of Childhood Injuries and Poisonings in Cyprus was developed by the Advisory Committee for the Prevention of Childhood Injuries and Poisonings in 2004. The development and the implementation of the plan were done with the active involvement of all stakeholders.

Based on the strategic plan of the MOH, the following tasks were accomplished:

- The development of a surveillance system for injuries which is currently being implemented in public hospitals, in order to be able to measure the success of the whole program.
- Development of policies related to the use of helmet c during cycling by children, the use of special safety car seats, the reduction of speed in roads and additional measures assuring safe access to school and playgrounds.
- Several workshops were organised for healthcare and other related professionals.
- Health education material was developed and used by teachers and school health doctors and health visitors.

- d) **Tobacco Control** - For the purpose of protecting the rights of children, among others, the Ministry of Health has included the following provisions in the relevant National Legislation on tobacco control:

1. Smoking is completely banned in schools, including the outside grounds.
2. Smoking is completely banned in indoor public places.
3. There are punishments for anyone attempting to sell cigarettes to children under the age of 18.
4. Smoking is banned in the cars at the presence of children under the age of 16.

In support of the Tobacco Control Law and for the purpose of awareness-raising and promoting an antismoking culture in children, parents and the society at large, the State General Laboratory implemented three research programs, which included Human biomonitoring of cotinine (i.e. metabolite of nicotine) in children, assessments of the sources exposure by questionnaires and measurements of nicotine in the indoor air of the family home. The availability of experimental data on children's exposure to tobacco smoke was very influential for awareness-raising.

- e) National Immunization Programme-** The National Childhood Immunization Program in Cyprus, is defined by the Ministry of Health and is based on recommendations of WHO and EU. The programme is periodically modified and updated according to the current epidemiological and scientific data.

Immunizations are performed by both the Public (Vaccination Centres of Maternal and Child Welfare Centres) and the Private sector (Private Paediatricians). It is important that immunizations in the public sector are completely free of charge for all children residing in Cyprus, regardless of their origin or income status. Special emphasis is given for vaccinating vulnerable or hard-to-reach non-immunized children, mainly of foreign origin. This has been the case in the Republic of Cyprus for many years as immunizations are considered one of the most effective tools for prevention of serious illnesses of significant public health impact. Special emphasis is given to children from refugee families as they are more likely to need them.

As confirmed by the immunization surveys performed every three years in the Government controlled area of the island, the children population has high coverage rates for all vaccines given in the first years of life including Tetanus, Diphtheria, pertussis, polio, MMR, hepatitis B and Haemophilus influenza type B.

One of the main targets of the National Immunization Programme is to further improve the coverage rates of children with the necessary vaccines for their age, by implementing vaccination programmes especially targeting vulnerable groups of the population such as those children coming from low income families and immigrants.

- f) The National Committee on the Environment and Children's Health (NaCCEH) -**The committee was established by the Ministry of Health and aims at promoting the health of children from foetus to the age of 19 years old. Wide use of mass media is at the heart of Committee's awareness raise campaigns (Antismoking, "Nesting: create a safe environment in child's room", avoid risks from energy safe lamps containing mercury. On the Committee's website: <http://www.cyprus-child-environment.org> every month there is a concise friendly to user presentation of unsafe child products published in RAPEX. A Book for parents and Health Providers "I learn and I can protect my child from toxic chemicals and other Environmental Risks". A wide range of leaflets are continuously issued.

2) Does your government collect data on the health status of children under five, including information on vulnerable and disadvantaged groups? How is this data used in the development, implementation, monitoring and evaluation of policies, programmes and services relating to mortality and morbidity of children under five?

Monitoring of the health status of children is an important element of the health strategy implemented for the promotion of children's health. The collected data is used either for the monitoring and evaluation of the implemented programmes or for the designing of new policies.

**Examples:**

**i. Health Monitoring Unit of the Ministry of Health**

The Health Monitoring of the Ministry of Health, collects data (disaggregated by year, age, gender, ethnicity e.t.c) concerning for children age 0-17, related to the following:

- Infant and child mortality
- Perinatal Health Indicators, for the mother and the newborn Cyprus Public Hospitals from 2007-2011
- Child cancer incidences
- Fatal and non-fatal child injuries
- Causes of Death, Cyprus from 2004-2011
- Cancer, Cyprus from 1998-2008
- Injuries, Cyprus from 2006-2011

Also data is collected in relation to the following:

- Data on breast feeding in the first 48 hours after birth, Perinatal Health Indicator from all public hospitals.
- Data on genetic disabilities, by gender, age 0-4 and 5-14

**ii. Communicable Diseases**

The Unit for the Surveillance and Control of Communicable Diseases of the Medical and public Health Services of the Ministry of Health, collects data regarding the epidemiology and clinical severity in many cases of communicable diseases such as Tuberculosis, gastrointestinal illnesses, Invasive central nervous system infections, etc.

Data collected by the Unit are analysed by age, gender, ethnicity and geographic region. Therefore data on children's cases can be separately managed and draw specific conclusions on these.

We also work towards the collection of data regarding HIV in a very sensitive way so that patients' rights are respected. HIV data are managed in cooperation with the Health Monitoring Unit of the MOH.

**iii. Immunizations**

The Ministry of Health of Cyprus, performs a three-year survey at national level carried out in accordance with W.H.O recommendations and guidelines, in order to determine the immunization Coverage in children aged 17-24 months.

A second survey is performed yearly at the First and fourth year of the Elementary and at the 3<sup>rd</sup> year of the Secondary Public Schools during carried out during an assessment of children's immunization status.

iv. **Epidemiology of accidents that lead to hospitalization of children**

Research is conducted by the Paediatricians working at Government hospitals on the epidemiology of accidents that lead to hospitalization of children. This research gives valuable data on the causes and characteristics of various accidental injuries such as poisoning, aspiration of foreign bodies, etc. Conclusions are used by the Health Authorities in order to establish or modify regulations for the safety of children in various settings (eg. home).

v. **Breast Feeding**

The Ministry of Health of Cyprus, performs a three-year survey at national level carried out in accordance with W.H.O recommendations and guidelines, in order to determine the immunization Coverage and Breast Feeding status in children aged 17-24 months (combined in the Survey carried out for the assessment of immunization coverage).

The last survey that was conducted on May 2012 among 420 children, showed an increase of the number of mothers who breast-feed their children compared to previous findings of the 2009 survey.

Also, in relation to b/f, Cyprus participated in the WHO's survey of biomonitoring of POPs in breast milk.

vi. **Mental Health Services**

Data collection computerized programmes are in progress at various Mental Health Service Centers. Such computerized networks include: general data collection, analysis and monitoring, and report documentation.

vii. **Food safety and environmental health**

Annual Official National Monitoring Programs for law enforcement: Collection of data on the presence of dangerous chemicals / microbes / allergens in foodstuff, the environment, cosmetics and articles used by children.

- Annual Surveillance / Monitoring Programs for Air and Water Quality.
- Legionella pneumoniophila in Pediatric Units / Neonatal Care Units
- Restriction of the exposure of children to environmental tobacco smoke through applied research programs including human biomonitoring of children and indoor air measurements of nicotine in homes
- Participation in large-scale EU research programs aiming to
  - o create guidelines for clean indoor air in schools / kindergartens, homes and other enclosed buildings (SINPHONIE, BUMA, AIRMEX)

- o harmonize human biomonitoring in Europe for the assessment of the general population (emphasis on children and women of child-bearing age) to harmful chemicals (first harmonized data collected on Cypriots for mercury, cadmium, phthalates, cotinine)
- Small-scale, targeted human biomonitoring programs for (a) prenatal exposure to illicit drugs, (b) exposure to arsenic.

viii. **The National Strategy for illicit substances and alcohol (2013 -2016)**, under the Prevention pillar, promotes a specific action for the protection of pregnant women and the unborn child. More specifically, the action aims to identify, provide information and refer pregnant women who use alcohol to relevant services. These can be achieved through developing a network between the different services of the Ministry of Health, the development of a referral mechanism, delivery of seminars by Health Visitors, dissemination of information material, as well as the inclusion of the Foetal Alcohol Syndrome in the medical history of newborns so as to monitor its prevalence. Monitoring the prevalence as well as the frequency of the foetal alcohol syndrome among unborn children is of great significance in providing appropriate care to the child and the mother, as well as in identifying the extend of alcohol use among pregnant women for the development of further measures in the future.

~~What coordination, monitoring and redress mechanisms are in place to ensure effective implementation of the national policy/strategy/action plan at all levels? Please provide information on how such mechanisms ensure transparency, as well as participation of all relevant stakeholders, including national human rights institutions, civil society and community representation.~~

Monitoring and evaluation of policy in place is considered by the Ministry of Health as an important element of the strategies applied. They are the tools used to help to ensure that health activities are implemented as planned; to assess whether the expected results are being achieved; to measure the level of performance; and to take necessary corrective actions so as to improve health programmes.

Monitoring of policy is done using various methods depending on the programme. For example in the case of Immunizations Programme, monitoring is done through a national survey which is carried out every three years. The aim of the survey is to estimate the level of vaccination coverage of children on the necessary vaccines.

In other cases, monitoring is done through the collection of data such as child mortality, perinatal death, child cancer incidence, surveillance of communicable diseases, etc.

~~How is your government ensuring that underlying determinants such as safe drinking water and adequate sanitation, safe food and adequate nutrition, adequate housing~~

**Health, environmental conditions and gender equality are taken into consideration in the prevention of child mortality and morbidity?**

The Ministry of Health implements Official Annual Monitoring and Surveillance Programs for the control of food, water, consumer items and the environment, in collaboration with the respective Competent Authorities, according to the provisions of EU and National Law. They are based on the requirements of Regulation (EC) no.882/2004 on the frequency, categorization and prioritization of risk consumption/use vulnerable population by groups (children and pregnant women) etc. Since younger children are particularly vulnerable to chemical and biological hazards contaminants, particular attention is given to the control of food, water and other items used / consumed by them. In addition to the implementation of the law, the SGL performs applied research and additional actions in areas concerning the well-being of children.

Examples:

**Implemented programmes towards the promotion of safe water and safe food:**

1. **Safe drinking water** - Chemical and microbiological safety of drinking water (both tap water from Water Supply Network and commercial bottled water), with special provisions in place for: sampling points from schools / kindergartens and baby bottled waters.

The Cyprus legal framework which covers the quality control of drinking water is fully harmonized with the European Directive 98/83/EC of 3 November 1998 on the quality of water intended for human consumption, which is transposed into national law -The Monitoring and Control of the Quality of Water Intended for Human Consumption Law 87(I)/2001.

The Monitoring and Control of the Quality of Water Intended for Human Consumption in Cyprus is mainly in the jurisdiction of the Medical and Public Health Services of the Ministry of Health (MPHS-Health Inspectorate), the State General Laboratory (SGL) as the official laboratory and the Health Services of the Municipalities.

In detail, the competent authority for the implementation of the national law are the Environmental Health Services (EHS) that report to the Director of the Medical and Public Health Services. Environmental Health Officers of the EHS and Environmental Health Inspectors who work in Municipalities are considered authorized officers according to the provisions of Law 87(I)/2001. The Mission of the Ministry of Health is "to protect consumers' health by ensuring that water consumed, distributed, marketed or produced in the island, meets the highest standards specified in the legislation". Environmental Health Services (EHS) in cooperation with the State General Laboratory, as Official Control Laboratory for food and drinking water, prepare each year the National Control Plans for sampling and testing of drinking water, based on Cyprus and EU legislations. EHS exercises the regulatory functions and have the necessary expertise to implement the provisions of the drinking water law. A total of 91 Qualified Environmental Health Officers and Inspectors at Government level and 34 at Municipality level, enforce the implementation of the legislation on drinking water apart from the other duties on Food Safety etc.



National drinking water sampling plans cover approximately 1391 fixed sampling points. Samples of water are taken by the Officers/Inspectors from the points specified in section 10, i.e. (a) from the tap of the premises from where the owner obtains water for drinking, cooking, or for personal cleanliness;(b) for water supplied from a tanker, at the point at which it flows out from the tanker;(c) for water supplied in bottles or containers, at the point at which the water is put into the bottles or containers;(d) for water used in a food-production undertaking, at the point where the water flows out to be used for such production; and sent to the SGL for the relevant analyses. The sampling points include among others the premises that host children, such as kindergartens, primary schools and spaces where immunocompromised and vulnerable groups of people are hospitalized, such as clinics and hospitals. However, the Ministry of Health is not responsible for the quality of the underground, borehole water. This is the responsibility of the Water Development Department and/or of the Local Authorities.

According to Article 9 of Annex II Table B1 of Law L.87 (I) / 2001, the sampling frequency should be estimated according to the volume of daily water consumption per water supply zone, with 298 supply zones nationwide.

Additionally, the Environmental Health Services in collaboration with the General State Laboratory evaluate the analyses results and prepare the triennial report, which is submitted to the European Commission. For consumer information, the report is posted on the official website of the Ministry of Health. Accredited or validated methods are used and the General State Laboratory applies a Quality Assurance System in order to ensure that the results are reliable and comparable. The Greek Accreditation Body (ESYD), according to the Standard EN ISO/IEC 17025, has accredited the particular labs since 2002:2005.

The reports that cover the years 2005-2007 and 2008-2010 have been sent to the European Commission, and according to the results the chemical and microbiological quality of water is satisfactory.

The evaluation of the results for the years 2008 -2010 showed that for the cities and large distribution systems where chlorination systems exist the quality of the drinking water is very good and complies with the water directive 98/83/EC. The deviated samples concerned water supply of small water zones from small local communities, similar problems in some European countries. Chlorides, sulphates and sodium were the most problematic parameters, however these parameters belong to the indicator parameters and their duration are mainly short-term, due to hydrological changes and to water drought faced by Cyprus in recent years. Heavy metals and organic micro pollutants, i.e. pesticides, PAHs, VOCs etc ranged from not detectable to below the legal limit.

Measures taken by the Ministry of Health for the protection of public health include the prevention of water borne infections, securing adequate standards for quality and fitness of water, and adequate consumers' information. In particular, in case that a result of the analysis of any sample taken exceeds the value prescribed in the legislation the Director shall without delay: Take the appropriate actions to inform the public using the water from which the sample was taken about the potential risk to human health and

inform the water supplier or suppliers of the water about his findings and propose the taking of measures for the protection of public health, including the interruption of the supply or the restriction of use of the water.

## **2. Food safety and hygiene**

Following its accession to the European Union as a full member in 2004, the Government of Cyprus immediately implemented in full the hygiene package of the European Union, which is a set of legislation that seeks to ensure the hygiene of foodstuffs at all stages of the production process, from primary production up to and including sale to the final consumer. At the same time, all other regulations, directives, decisions and recommendations issued by the EU that directly or indirectly relate to food safety are fully transposed to the national law of the Government of Cyprus.

Under the framework of the abovementioned legislation, the Environmental Health Services of the Ministry of Health carry out regular inspections of food producing premises and of imported foodstuffs. These are based on the principle of risk analysis and particular attention is given to all practices involving the handling, storage and cooking of food, as also to the personal hygiene of food handlers and their education on food safety matters relevant to the type of food handling they carry out. It is a legal requirement in Cyprus for all food handlers involved with the handling of unprepacked food to obtain a Health Certificate on an annual basis from a governmental doctor which certifies that they do not suffer from any disease that is transmitted through food. It is also required from all food businesses to apply established procedures based on the principles of HACCP.

In parallel, the Veterinary Services of the Ministry of Agriculture inspect establishments that produce meat products and fresh milk products, while the Department of Agriculture carries out regular inspections even of the feed that is intended for breeding animals intended for food production. At the stages of primary production and downstream processing, emphasis is given not only to hygiene, but also in particular as regards the control of mycotoxins and residues of antibiotics and pesticides.

Emphasis is also given on any matters regarding food safety at kindergartens, where it is a legal prerequisite for the operators of these to fully comply with the provisions of law regarding food safety and hygiene. Kindergartens are categorised as high risk establishments as regards food safety and hygiene and are as such subject to at least three full inspections per year by Environmental Health Officers for the purpose of monitoring their compliance.

The same applies to establishments that produce pasteurised milk and milk products. Whereas there are no establishments in Cyprus that produce ready to eat foods intended for infants or dried infant formulae or dried dietary foods for special medical purposes intended for infants, it is expected that all such products imported to Cyprus from non-EU countries or distributed to Cyprus from other member states of the EU comply with the EU regulations on the hygiene and safety of foodstuffs. To that end, all such shipments from non-EU countries are inspected at the border inspection points before their release to the market. Also in relation to this matter, it is a legal requirement that all food

supplements intended for infants that are imported to Cyprus from non-EU countries undergo a procedure of authorisation prior to their release to the market.

It is a legal requirement for all physicians in Cyprus to immediately notify the Ministry of Health whenever they have diagnosed a foodborne illness. All cases of foodborne illnesses involving infants are thoroughly investigated by Environmental Health Officers in cooperation with any other departments of the Ministry of Health. In all cases, it is among others investigated whether the infant has attended any kindergarten prior to illness and if the case is so the investigation is extended to the kindergarten too. Moreover, in cases where the patient is not an infant it is investigated whether this patient is a food handler by profession and if so the investigation is extended to the premises of the involved food business. Education on the basic principles of food handling and hygiene are provided to the parents of ill infants by the Ministry of Health in all cases of investigated foodborne illnesses.

In addition to the inspection of food premises and imported foodstuffs, sampling and analysis of foods is carried out regularly in accordance to an annual national programme that is prepared on the basis of risk analysis. High priority is given to infant food and in particular dried infant formulae, dried follow-on formulae and ready to eat foods intended for infants, and these are analysed for foodborne pathogenic microorganisms, index microorganisms of public health concern, mycotoxins and residues of pesticides.

In addition to the above, the State General Laboratory, implements the following programmes towards safe food:

- 1) Safe food (including food-contact materials)
  - a. Restricted chemicals:
    - Endocrine disruptors such as bisphenol A and phthalates
    - Heavy metals such as cadmium, lead, Arsenic and mercury
    - Additives (Southampton colorants and preservatives in confectionaries, ice-cream)
    - fruit-drinks and snacks such as potato chips, and flavorants such as coumarin in breakfast cereals)
    - Mycotoxins in milk (M1) and aflatoxins in children's food (e.g. peanut butter).
  - b. Disease-causing microbiological agents e.g. *Chromobacter Sakazaki* (related to meningitis, necrotic enterocolitis in babies), *Campylobacteria* in baby food, *Listeria Monocytogens*, *Salmonella* and *E. Coli 157*,
  - c. Allergens
  - d. Radioactivity (especially in baby food)
- 2) Food Supplements (especially those bought over the internet)
- 3) Adequate Nutrition

The State General Laboratory of the Ministry of Health, within its control programmes includes examinations and analyses of the nutrition and quality of baby food and published the "Cyprus Food Composition Tables", based on in-house original laboratory chemical analyses of both micro and macro nutrients, which are available to parents, teachers, dietitians and other interested parties to assist them with the safe nutrition of children to prevent chronic diseases such diabetes.

### 3. Healthy Environment

- 1) In the area of environmental health the Ministry of Health promoted the establishment of the National Committee on the Environment and Children's Health (NaCCEH). Children from the foetus up to the age of 19 years, are in the Committee's core activities. It promotes awareness raising activities to make parents accountable for their children's health and empower them with knowledge on how to do it. The Committee was appointed by the Council of Ministers in 2004 ( Ministerial Council Decision No. 59.304 of the 28/1/04) to provide scientific support to the Minister of Health, Regulators and Decision Makers in the field of effects of chemicals on children's health, become National Focal Point for all EU, WHO and other international activities related to Children-Environment and Health and to develop, promote and coordinate the National Action Plan on "Environment and Children Health" (Cy-CEHAP) approved by Ministerial Council (decisionNo. 66.124, 4/10/2007. This Plan is based on three principles: Precaution, Prevention and Integration and is specific with Actions and timeframe.The ultimate goal is to minimize the burden of avoidable environmentally linked diseases and disabilities through the reduction of children's exposure to chemicals and physical stressors.

The Objectives of the Committee are: a)To raise awareness and bring at the highest level of the political agenda the needs for policy and regulation addressing children's vulnerability to environmental factors and to integrate prevention and precaution into health, environmental and sustainable development policies, b)To reinforce mechanisms for prompt responses to emerging threats and uncertain risks and to promote prevention and precaution in everyday life through education, knowledge dissemination, information on risks, and the training of health professionals, parents and children, c)To strengthen technical infrastructure, capabilities and knowledge for diagnosing and curing environmentally induced diseases and disabilities through the training of professionals and d) to promote surveillance and research in order to address open questions and emerging risks. Priorities for prevention are put for the following childhood diseases/disabilities is aimed: asthma, cancer, neurodevelopmental diseases, congenital malformations.

Special emphasis is given on the following environmental risk factors: endocrine disrupting and carcinogens, indoor pollution in houses, schools, gym centres, kindergartens, environmental tobacco smoke, use of chemicals in everyday products( toys, furnishing, care products, house cleaning, face painting etc), outdoor pollution from traffic, impact of pesticides from their application in rural areas, Electromagnetic fields and noise.

- 2) In addition to the above, the State General Laboratory, implements the following programmes:
  - a. Safety of articles intended to be used by children, including children toys (and textiles, shoes, marker pens, face painting etc.)
    - phthalates
    - heavy metals
    - aromatic amines
    - DMFu
    - residual solvents

– nitrosamines in Baby soothers and bottles

- b. Safety of Cosmetics - Especially those intended to be used by babies and children for several possible toxic chemicals Parabens, Phthalates, Cadmium and other heavy metals, Allergens, Nitrosamines, SPF efficiency of sun protection products.

~~The Cyprus Government has incorporated fundamental rights in planning and implementation of health coverage of primary health services for children. In particular, how have the criteria of availability, accessibility, acceptability and quality of health services been considered?~~

In order to promote easy access to quality healthcare, the Ministry of Health has incorporated relevant provisions in the implemented law/regulations which:

- Ensure that every child has access to high standard of healthcare services.
- Special provisions are implemented in order to ensure same treatment for children of illegal immigrants living in Cyprus.
- Ensures appropriate pre-natal and post-natal health care for mothers irrespective of their residence status. Special provisions have been introduced to ensure that children as well as pregnant women who belong to vulnerable groups (e.g. illegalimmigrants, roma, etc.) have access to free healthcare.

All children in Cyprus have access to high quality health services as determined by the Convention on the Rights of the Child which became Cyprus law. Therefore the access to healthcare is ensured.

The Cyprus government provides health coverage to low income Cypriot and European citizens that live in Cyprus. According to their income the coverage is full or partial, ensuring that all children have access to high quality healthcare.

In addition special provisions have been introduced to ensure that children as well as pregnant women who belong to vulnerable groups (e.g. illegal immigrants, roma, etc.) have access to free healthcare.

Also all children have free access to the Maternal and Child Welfare Centres.

**Healthcare in Cyprus** is provided by both the private and the public sectors:

**i. Primary Health Care**

Primary Health Care for children is offered at Primary Health Care Centres of the Government Hospitals and the Urban and Rural Health Centres in all districts.

Primary healthcare for children is also provided by the Paediatricians working in the Private sector.

**ii. Hospital Care**

Specialized Children and Neonatal Units operate at all district hospitals and a Central Neonatal ICU at Archbishop Makarios Hospital in Nicosia and offer high standards of care for the sick children and immature or small for gestational age neonates. The major Paediatric referral hospital Archbishop Makarios Hospital in Nicosia, is becoming child friendly as regards interior design and also by supplying a free wi-fi system in all hospital with access for all hospitalised children and the accompanying parents.

**Mental Health Services**—Mental health and psychological wellbeing are considered fundamental to promote health and wellbeing of children in Cyprus. The Mental Health Services for Children and Adolescents have been offering their diagnostic and therapeutic services to the Cypriot society since 1990. They provide outpatient services in all the major cities of Cyprus in order to render services easily accessible.

The mental health professionals provide psychological / psychiatric evaluation as well as interventions to children and adolescents as well as their families. Parental counselling/ guidance is also offered on a regular basis as a main or adjunct intervention. In the context of the outpatient services, community visits are also offered by mental health nurses. The target of the community visits is to evaluate the family environment so as to facilitate the achievement of treatment goals. Furthermore, there is a specialist mental health liaison team in Arch. Makarios III Children Hospital in Nicosia which provides care for children and adolescents with general health problems.

In the effort to provide maximum quality care for children and adolescents, the services liaise with other services or professionals that are also involved with minors and their families. These services might be educational psychologists, the school, social services, community authorities, general doctors and paediatricians, services for adults, etc.

#### **Dental Services**

At Nicosia General Hospital, there is a Paediatric dental clinic for children with special needs and children who are not cooperative.

Finally, orthodontic treatment is offered free of charge to children who fulfill certain criteria based on the income of their families and based on scientific criteria for the need of orthodontic treatment are set.

**Maternity and Child Welfare Clinics** -The Maternity and Child Welfare Clinics in Cyprus offer preventive services to mothers, infants/children and generally to the whole family aiming at protecting and promoting health situated in the Primary Health Care Departments of the Hospitals in both Rural and Urban areas.. They are provided through a network of "walk in" the rural and urban health care centers. Services provided by health visitors, free of charge to all residents aim at health promotion. The main goals of the Maternity and Child Welfare Clinics include the early detection and treatment of health problems of infants and children, the promotion of healthy behaviours and lifestyles in general and the prevention of infectious diseases.

Specifically the services provided at the Maternity and Child Welfare Clinics include general monitoring of infants and preschool age children by conducting assessment examinations

such as the normal development of the infant and child (weight, height, head circumference), the psychological and emotional development of the infant and child, vision acuity test, hearing test of the infant and child, psycho emotional development. Another important task of health visitors at these centers is also health education and counselling of mothers on several health issues such as the care of their child, breast feeding, hygienic needs of the child and the family, the psycho emotional health of the mother and child, nutrition, etc. In addition health visitors working in the Maternity and Child Welfare Clinics, perform home visiting in order to support new parents and high risk families.

At the Maternity and Child Welfare Clinics children receive free of charge, all routine vaccinations according to the Cyprus Ministry of Health vaccination schedule.

**Pre-natal and post natal health care for mothers in Cyprus** - The Nursing Services of the Ministry of Health attribute great importance to the necessity of addressing high quality midwifery care in the health care system of Cyprus. Offering services which make motherhood safer is essential for women's health and survival. Skilled attendants, midwives and obstetricians are responsible for providing midwifery care and are able to promote health, prevent, detect and manage major obstetric complications thus preventing maternal deaths.

The main aim of midwifery is to provide the highest quality of maternal and reproductive health care to women and their families. Pregnant women are supported by qualified professionals, midwives and obstetricians who attend them throughout their pregnancy birth and during the antenatal period. It aims to ensure that all mothers and babies receive high quality care. It offers equity of access to maternity services which increases the survival rates for all pregnant women taking into consideration that care and support provided for mothers and babies during pregnancy, childbirth and the post natal period has a significant effect both on mother's and children's health development. For optimum health and well being all women have access to health services, choice and control regarding the care they receive and continuity of support during their pregnancy, childbirth and the post natal period.

Ministry of Health  
10<sup>th</sup> January 2014