Substantive session of 2005

IMPLEMENTATION OF THE INTERNATIONAL COVENANT ON ECONOMIC, SOCIAL AND CULTURAL RIGHTS

Second periodic reports submitted by States parties under articles 16 and 17 of the Covenant

Addendum

LIBYAN ARAB JAMAHIRIYA*

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[4 June 2004]

* The initial report submitted by the Government of the Libyan Arab Jamahiriya (E/1990/5/Add.26) was considered by the Committee on Economic, Social and Cultural Rights at its sixteenth session in 1997 (see E/C.12/1997/SR.20-21; and concluding observations: E/C.12/1/Add.15).

The information submitted by the Libyan Arab Jamahiriya in accordance with the guidelines concerning the initial part of reports of States parties is contained in the core document (HRI/CORE/1/Add.77).
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Introduction


2. In accordance with paragraph 1, article 16, of the Covenant, the Libyan Arab Jamahiriya has already submitted reports on the implementation of articles 6, 9, 11, 12, 13 and 15 (see documents E/1982/3/Add.6 and 25, E/1983/WG.1/SR.16-17, E/1990/5/Add.26, and E/C.12/1997/SR.20 and 26).

3. The present report, which contains Libya’s second and third periodic reports, was prepared in conformity with article 16 of the Covenant. It consists of two parts. The first outlines the geographical and demographic features of the Libyan Arab Jamahiriya, reviews the general state of the economy, including data on its principal sectors and its total and per capita Gross Domestic Product (GDP), and briefly describes the country’s political system and the legislative, executive and judicial powers of government. The second part details the measures that the Jamahiriya has taken to implement various articles of the Covenant, beginning with article 1 (the right of self-determination) and ending with article 15 (cultural rights).

4. The present report was prepared by a committee of experts, which made sure to include all available information on the measures taken by the Jamahiriya to implement the Covenant and to set out that information in accordance with the guidelines set forth in document HR/PUB/1991/1 and those issued by the Committee on Economic, Social and Cultural Rights in document E/C.12/1991/1.

I. GENERAL INFORMATION

A. Geographical and demographic features

5. Further to the information contained in the initial report of the Libyan Arab Jamahiriya on the implementation of the International Covenant on Economic, Social and Cultural Rights (E/1990/5/Add.26), concerning the country’s geographical, ethnic, linguistic, demographic and religious features, we should like to add the following data:

   (a) The total population amounted to 5,484,426 inhabitants in 2002, as compared with a figure of 2,939,000 in 1977;¹²

   (b) The population is entirely Muslim and everyone speaks Arabic, the official language of the State;

   (c) The population density rate, which averages 3.1 persons per square kilometre, is 615.9 persons per square kilometre in urban centres.
B. Political system

6. The political system of the Great Jamahiriya is analysed in the above-mentioned initial report, which contains a brief description of the State’s history, political structure and system of government and of the organization of the legislative, executive and judicial powers.

C. Economic features

7. The following data may be added to the information contained in the initial report:

(a) Libya’s economic policy is geared towards the realization of two interrelated goals: the promotion of social welfare and the stimulation of production;

(b) GDP at current prices rose from 2,244.2 million Libyan dinars (LD) in 1973 to LD 17,620.2 million in 2000;

(c) Public receipts, which are largely derived from oil exports, amount to LD 3,348.1 million;

(d) The physical and social infrastructure of the national economy has been developed;

(e) A national industrial base has been constructed;

(f) In 2000, the contribution to GDP at current prices made by different sectors was 37.8 per cent for the oil industry; 8.1 per cent for agriculture, forestry and fishery; 1.8 per cent for mining and quarrying; 5.5 per cent for transformation industries; 1.7 per cent for electricity, gas and water; 6.2 per cent for construction; 9.5 per cent for commerce, catering and hotels; 7.2 per cent for transport, warehousing and communications; 2 per cent for insurance and business services; 2.7 per cent for housing; 7.1 per cent for public services (excluding education and health); 5.2 per cent for educational services; 2.9 per cent for health services; and 2.3 per cent for other services;

(g) GDP per capita rose from LD 2,416 in 1998 to LD 2,433 in 1999, an increase of 7 per cent. By 2000, it had risen to LD 2,852, an increase of 419 dinars or 17 per cent. If one looks at the breakdown of GDP according to the contributions made by the petroleum and non-petroleum sectors, one can see that 37.8 per cent of GDP comes from oil and gas and 62.8 per cent from other economic activities;

(h) The Libyan economy has been subjected to an embargo on technology imports since the mid-1980s, which has made it more difficult to supply the industrial sector with modern and advanced technologies;

(i) The Treasury is the main source of funding for most economic and development activities. However, the public sector has been unable to achieve consistency and sustainability because of a number of factors, including:

− The oil crisis and oil price fluctuations; and
− The fall in Treasury receipts from domestic sources.
8. The factors mentioned in paragraphs (f), (g) and (h) above, and others, have made it necessary to:

- Optimize the use of production resources;
- Find sources of income other than oil, and diversify income sources;
- Review and reassess public sector projects; and
- Intensify efforts to expand the agricultural and industrial sectors with a view to achieving self-sufficiency in a large number of goods.

9. In addition, development plans until 2003 focused on the following objectives:

- Diversifying the economy and finding sources of income other than oil;
- Attaining higher rates of economic growth;
- Improving living standards;
- Ensuring an equitable distribution of income;
- Developing infrastructure;
- Achieving more balanced regional development;
- Expanding the industrial sector;
- Expanding agriculture;
- Achieving food self-sufficiency;
- Improving the efficiency and productivity of production factors;
- Improving educational and health services;
- Providing housing for all;
- Adopting an import substitution policy;
- Developing scientific research;
- Strengthening the administration;
- Developing the environment;
− Making greater use of local workers and reducing reliance on foreign labour;
− Establishing a social security net for all persons in need in accordance with the provisions of the Social Security Act, the Social Solidarity Act and the Promotion of Freedom Act.

10. In spite of the unprecedented economic achievements won, the economic losses that the country sustained as a result of the aerial embargo and the economic sanctions imposed between 1992 and 1998 amounted to approximately 33,838,155 billion dollars, as shown in detail in the table below.³

<table>
<thead>
<tr>
<th>Sector</th>
<th>Losses in billions of United States dollars</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and social security</td>
<td>294 000</td>
</tr>
<tr>
<td>Agriculture</td>
<td>472 155</td>
</tr>
<tr>
<td>Animal raising</td>
<td>7 187 000</td>
</tr>
<tr>
<td>Transport and communications</td>
<td>3 485 000</td>
</tr>
<tr>
<td>Manufacturing and mining</td>
<td>7 200 000</td>
</tr>
<tr>
<td>Economy and trade</td>
<td>8 200 000</td>
</tr>
<tr>
<td>Oil and electricity</td>
<td>7 000 000</td>
</tr>
<tr>
<td>Total</td>
<td>33 838 155</td>
</tr>
</tbody>
</table>

11. The Libyan economy has been faced with many obstacles and difficulties, which have further hampered its performance. These include, inter alia:
− The decline in national output volumes, which has caused job losses in several branches of the production and services sectors;
− The emergence of a parallel market, as a result of tight currency controls, together with spiralling inflation and the fall in the purchasing power of the Libyan dinar;
− A thirteen-fold increase, since 1975, in the volume of public debt, which grew at an annual compound rate of 6.2 per cent to reach LD 7,644 million by 2000, or 43.3 per cent of GDP; this is a huge percentage, which has generated strong inflationary pressures and triggered a general rise in price levels.

**II. IMPLEMENTATION OF THE COVENANT**

**Article 1 - Right of self-determination**

12. For information on this topic, please refer to the initial report of the Libyan Arab Jamahiriya on the implementation of the Covenant.

**Article 2 - Rights of citizens and non-citizens**

13. See above-mentioned initial report.
Article 3 - Equality of the sexes

14. Further to the information provided in the initial report, we should like to add that the provisions of this article have been implemented in a more effective manner and that there is greater awareness of the importance of equality between men and women. Reference may also be made to the report on women which the Libyan Arab Jamahiriya submitted to the Fourth World Conference on Women in Beijing in 1995.

Article 4 - Enjoyment of all fundamental rights

15. The laws in force guarantee all fundamental rights and the State complies with the terms of the relevant international instruments. All Libyan laws recognize these human rights without discriminating among citizens on grounds of sex, colour, religion or nationality.

16. With regard to the retroactivity of laws, there is a firmly established legal rule that a law takes effect from the date of its promulgation and shall not have retroactive effect, unless such be in the interests of the party to which it applies.

Article 5 - Primacy of the rule of international law

17. The Libyan Supreme Court established a principle which acquired the binding force of law pursuant to Act No. 6 of 1982: as soon as the Libyan Arab Jamahiriya ratifies an international instrument, that instrument becomes legally binding and takes precedence over domestic law.

Article 6 - Right to work

18. According to principle 11 of the Great Green Document on Human Rights in the Age of the Masses, society guarantees the right to work, which is a duty and a right for every individual to the extent of his or her abilities, alone or in association with others. Everyone has the right to choose the type of work that suits him or her. This principle is recognized in article 10 of the Promotion of Freedom Act, which states that: “Every citizen is free to choose the type of employment best suited to him, alone or in association with others, without exploiting the endeavours of others and without causing material or moral harm to third parties.” The right to work is regulated by a number of laws, including Act No. 58 of 1970, which consists of 186 articles on the regulation of labour relations. In recognition of the somewhat oppressive nature of the employer-employee relationship, the Jamahiriya decided to enact legislation to enable workers to share in profits (The Profit-Sharing Act). It has also ratified most international conventions that deal with employment, including:

1. The Employment Policy Convention, 1964 (No. 122);

2. The International Convention on the Elimination of All Forms of Racial Discrimination; and

19. In order to guarantee employment for all, job centres were established pursuant to section II of the above-mentioned Act No. 58 to provide assistance to job-seekers. Decree No. 77 of 2002, which contains guidelines on the placement of job-seekers, stipulates, in article 1, that: “Local people’s committees shall establish joint-stock companies and cooperatives to find employment for job-seekers which is compatible with their qualifications and professional experience and they shall take steps to prevent the exploitation of, and trafficking in, workers.” Article 2 of the decree stipulates that: “Companies and cooperatives created for the purpose of finding work for job-seekers shall register job-seekers on lists drawn up in accordance with the priorities set for them, taking due account of candidates’ professional qualifications and experience.”

20. The Public Employment Division of the Department of Public Services is responsible for overseeing the proper running of these companies and cooperatives. In view of the importance that the Libyan Arab Jamahiriya attaches to the right to work, a high-level committee has been formed to implement the provisions of the above-mentioned Decree. Similarly, the people’s committees attached to the basic people’s congress present in every sha’biyyat (region) have been mandated to devise schemes for finding work for job-seekers through the intermediary of the Basic People’s Congress and in coordination with the competent authorities. A series of policies has been implemented, as described below:

- The Economic Activities Act No. 21 of 2001 authorized private sector participation in a number of economic activities and amended the rules restricting participation in joint-stock companies;
- The role of commercial and private banks in providing loans and facilities for all kinds of economic activities has been strengthened;
- Resources have been allocated to the Conversion to Production Fund, which offers numerous facilities, in the form of machinery, fittings, etc., to help generate employment in the production sector;
- The role of specialized banks in providing low-interest loans for the purchase of means of production has been enhanced;
- The administrative formalities for obtaining permits to engage in economic activities of various kinds have been simplified and a series of procedures restricting access to certain economic activities, such as the need to have an import and export licence and the obligation to impose mandatory tariffs, etc., have now been eliminated;
- Persons running a commercial undertaking are now permitted to act as agents for manufacturing companies bringing their products to the Libyan market.

21. In order to improve the skills and knowledge of workers and job-seekers, orientation programmes and vocational and technical training courses have been set up in accordance with article 6 of Act No. 58 of 1970, which contains a section on vocational training and training conditions for workers. Training is mentioned in article 30 of the Civil Service Act No. 55
of 1976, which requires administrative departments to provide their employees with basic and
advanced training. A number of implementing decrees have been promulgated in order to
achieve these aims. They include:

− Decree No. 206 of 1999, promulgating the regulation on training, which defines
  training as follows: “Providing individuals with a technical and vocational grounding
  and imparting the technical knowledge required in different professions and areas of
  specialization.” The Decree also defines the different levels and types of, and
  prerequisites for, training, with a particular focus on programmed and advanced
  training courses designed to achieve vocational training objectives;

− Decree No. 431 of 1986, on the organization of training courses for local unskilled
  workers employed in administrative units. Every public servant and worker is now
  entitled to receive training of different kinds, which both the public sector and the
  private sector must provide. Training courses consist not only in the programmes run
  in the country: under the laws in force, workers may also be sent abroad to widen
  their knowledge, learn about technological advances and study the latest
  technologies;

− With a view to creating additional training mechanisms, Decree No. 90 of 1988
  provided for the establishment of the Training Institute for Teachers and Technical
  Trainers;

− Decree No. 96 of 1989, concerning the rules on training of liberal professionals,
  authorized individuals to set up private vocational training centres to offer women
  and men from all walks of life skills and knowledge-based training;

− Decree No. 942 of 1990 provided for the establishment of the National Training
  Centre, which helps to develop and train human resources in all sectors of the
  national workforce.

Article 7 - Right to fair remuneration

22. The Salaries and Wages Act No. 15 of 1981 regulates all matters relating to
remuneration. The people’s congresses plan to amend the Act in order to adapt it to the needs of
workers and their families and to raise their standard of living. The General Planning Council
was commissioned to carry out studies and research into ways of increasing family income,
pursuant to General People’s Congress Decree No. 20 of 2002, concerning public affairs.

23. With regard to remuneration, the Libyan Arab Jamahiriya does not discriminate among
workers on grounds of sex, origin or any other factor. The Civil Service Act establishes that men
and women are entitled to equal pay and that there can be no discrimination between them in any
financial transaction, including with regard to the criteria for recruitment and admission to
employment.

24. Libya’s laws on employment and public administration guarantee everyone, regardless of
his or her sex, the same opportunities for employment and promotion on the basis of completely
objective criteria such as competence, experience, educational qualifications and seniority.
Articles 36 to 50 of the Civil Service Act No. 55 of 1976 lay down the conditions for awarding civil servants promotions, bonuses and other rewards in accordance with totally objective criteria. Chapter 2, section III, of the Labour Act No. 58 of 1970 establishes, in articles 85 to 90, the rules on working hours and rest breaks. Under article 85, no worker may be employed for more than eight hours per day, excluding meal times and rest breaks, and the minimum age for admission to employment is fixed in accordance with the applicable international instruments. Under article 93, no child may be employed for more than six hours a day.

25. In order to guarantee the worker’s right to rest breaks and to prevent any form of exploitation, the final paragraph of article 88 of the aforementioned Labour Act makes it illegal for an employer to suspend a labour contract during weekly rest days and official holidays.6

26. The Civil Service Act No. 55 of 1976 guarantees civil servants the right to take leave (arts. 65 to 74), which it classifies as follows: “Special leave, paid leave and unpaid leave.”

27. The Jamahiriya has ratified several international conventions on the rights of workers and their relations with employers and others. These conventions include:

- The Minimum Wage Fixing Convention, 1970 (No. 131), ratified on 27 June 1971;
- The Equal Remuneration Convention, 1951 (No. 100), ratified on 20 June 1962;

**Measures relating to occupational safety and occupational health**

28. All the relevant laws emphasize the importance of protecting the occupational safety and health of male and female workers and of leaving women free to choose the employment best suited to them, without preventing them from undertaking difficult or hazardous work, if they so wish.

29. With regard to the protection of the health and safety of all workers, the Labour Safety Act No. 93 of 1976 requires public and private entities to take all necessary measures, in accordance with the terms of the Act, to protect workers and persons in the workplace against occupational hazards, injuries and diseases. Chapter IV of the Labour Act deals with the protection of workers against occupational hazards. Several implementing decrees, in particular Decree No. 8 of 1974, promulgating the regulation on the protection of occupational safety and health, stress the importance of protecting all workers.7

**Article 8 - Right to form trade unions and trade union federations**

30. Under article 9 of the Promotion of Freedom Act, citizens are free to establish and join trade unions, trade union federations, professional and social associations and charitable bodies with a view to protecting their interests and achieving their legitimate aims. This is consistent with principle 6 of the Great Green Document on Human Rights in the Age of the Masses, which states that: “All members of Libyan society are free to form associations, trade unions and federations in order to defend their professional interests.” The Trade Unions, Federations and Professional Associations Act No. 23 of 1998 guarantees all professional groups, without
distinction, the right to establish trade unions, federations and associations in order to protect the interests of their members. To give just one example, we should like to refer to the establishment, under Act No. 98 of 1976, of the Civil Servants’ Union, which is dedicated to improving the efficiency of public administration, serving the public interest, and protecting the health and material needs of members and their families through the assistance and services it provides. The Union airs its members’ grievances and helps them to resolve their problems at work by looking for appropriate solutions in concert with the entities concerned. The Union is also committed to strengthening collegial and fraternal relations among civil servants, on the basis of trust, mutual respect and cooperation. Similarly, Act No. 107 of 1973, establishing the Union of Medical Professions, declares that the Union shall endeavour to create a spirit of solidarity among its members, to raise the profession’s standards, to foster cooperation among workers, and to participate in the planning of general health and medical policies.

31. The Reorganization of Private Associations Act No. 19 of 2002 and its implementing regulation grant all citizens (male and female alike) who wish to promote civil society, improve the services it delivers and strengthen its institutions the right to set up associations in accordance with the terms of the Act. Women are not prevented from establishing or joining associations of this kind. Indeed, under the Trade Unions, Federations and Professional Associations Act No. 23 of 1998, women are fully entitled to join trade unions or federations, as indicated by the legislator’s use of the umbrella term “employees”.

32. The national Human Development Report 1999 showed that, since 1954, when the first women’s organization was established, women have consistently shown their commitment to participation in civil society. The Regulation of Women’s Associations Act No. 20 of 2001 grants women the right to establish women’s associations in order to promote the social and cultural advancement of women and their families.

33. The statistics for 1995 produced by the National Centre for Scientific Research point to the presence of 57 scientific and specialized professional associations with women members. Some of these associations are run and managed by women.

**Article 9 - Right to social security**

34. Libyan legislation guarantees all citizens the right to social security in accordance with the Promotion of Freedom Act No. 24 of 1991, which contains the following stipulation: “Every citizen is entitled to social welfare and social insurance. Society cares for everyone who has no means of support, protects the needy, older persons, disabled persons and orphans, and assures a decent life to those who are unable to work for reasons beyond their control.” Principle 14 of the Great Green Document on Human Rights in the Age of the Masses stipulates that Jamahiri society supports all those who have no means of support.

36. Act No. 58 of 1970 regulates the worker’s right to social security and to all other benefits, in cash and in kind, and prohibits the confiscation of social security contributions (art. 34). Act No. 22 of 1971, amending certain provisions of the Labour Act and the Social Security Act, established detailed rules on the worker’s right to social security.

37. Social protection is not limited solely to the government sector, but also extends to the private sector, insofar as every worker and civil servant in the public or the private sector has a guaranteed right to participate in a social security scheme.

38. In conformity with article 1 of the above-mentioned Act No. 13 of 1980, workers and civil servants are entitled to health care, to adequate compensation for harm suffered as the result of a work accident, an occupational illness, and partial or total incapacity, and to an old-age pension. The Libyan legislature has shown particular concern for the most vulnerable members of society, namely children, women, disabled persons and older persons, and has created special institutions to cater for their material and moral needs, including their physical and mental health. The National Security Fund oversees, administers and monitors these institutions, which occupy a special place among the State’s concerns.

39. Article 12 of the Basic Allowances Act No. 16 of 1985 defines the circumstances in which persons who lose all or some of their means of support are entitled to the basic allowance. Beneficiaries include: divorced women; the family of a provider who falls ill; persons hospitalized for more than two months; returning émigrés; the family of a provider who has been placed in custody or detention or who is serving a custodial sentence - for a period of more than two months - and the families of disappeared persons, missing persons or prisoners of war. The law guarantees any person who is released after serving a custodial sentence the right to collect the basic allowance until such time as he or she finds a job. It grants the same right to persons who are unfit for work and to minor children without a family provider.

40. It follows from the foregoing that the Libyan legislature grants everyone the right to receive cash benefits in the event of illness, an industrial accident or unemployment, in order to save families from destitution. Families are entitled to collect the allowance until they are able to resolve their difficulties arising, inter alia, from the death, illness or incarceration of the family provider.

41. The law recognizes the right of every citizen (both male and female) to receive not only cash benefits, but also benefits in kind, whether in the form of social welfare - in accordance with the principle that society takes care of those who have no home or provider or who, for personal or social reasons, are unable to look after themselves - or in the form of qualitative health services designed to guarantee occupational safety, provide treatment to those suffering from an occupational injury or occupational disease, offer rehabilitation and treatment for the disabled and deliver health services to persons in social institutions.

42. As confirmation of the importance of social welfare for improving citizens’ lives and raising their standard of living, a social security fund was established pursuant to Act No. 20 of 1998 to implement the policy that had been adopted.
43. It is worth noting that the Libyan Arab Jamahiriya is bound by the relevant international instruments which it has ratified, including, in particular:

- The Social Security (Minimum Standards) Convention, 1952 (No. 102), ratified on 19 May 1971;
- The Employment Injuries Benefits Convention, 1964 (No. 121), ratified on 25 May 1971;
- The Invalidity, Old-Age and Survivors’ Benefits Convention, 1967 (No. 128), ratified on 19 June 1971; and
- The Medical Care and Sickness Benefits Convention, 1969 (No. 130), ratified on 19 June 1975.

44. As indicated above, these conventions are binding on the executive and judicial authorities, since international law takes precedence over domestic law. The following table shows the total value of different kinds of pensions disbursed in 2001:

<table>
<thead>
<tr>
<th>Type of pension</th>
<th>No. of beneficiaries</th>
<th>Total in millions of Libyan dinars</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insurance pension</td>
<td>6 879</td>
<td>8 131</td>
</tr>
<tr>
<td>Social security pension</td>
<td>208 652</td>
<td>444 543</td>
</tr>
<tr>
<td>Civil retirement pension</td>
<td>4 249</td>
<td>6 872</td>
</tr>
<tr>
<td>Military retirement pension</td>
<td>24 249</td>
<td>55 169</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>242 229</strong></td>
<td><strong>514 715</strong></td>
</tr>
</tbody>
</table>

**Article 10 - Right to protection of the family and of mothers and children**

45. The word “family” generally denotes a nuclear family consisting of the father, the mother and their children. However, in the Libyan tradition, grandparents and relatives are also part of what is known as the extended family.

46. The age of majority is 18 years. At that age, children become responsible for their actions, as stipulated in article 1 of the Juveniles Act and in the provisions of the Libyan Penal Code that refer to criminal responsibility.

47. The protection of the family is one of the mainstays of Libyan society. In accordance with the precepts of Islam, society encourages people to marry and discourages divorce.

48. Further to the information provided in the Jamahiriya’s initial report to the Committee on Economic, Social and Cultural Rights, as well as in its reports on the implementation of the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women and the International Covenant on Civil and Political Rights, it is worth adding that the Libyan legislator has enacted legislation on the protection of the family and has instituted a policy aimed at guaranteeing the security and stability of family members. Chapter 2 of title III of the Penal Code, which is entitled: “Offences against the family”,
criminalizes a number of acts that violate family rights, such as failure to pay alimony or family support, dereliction of one’s duty towards the family (art. 396), and improper use of disciplinary or educational methods (art. 397).

49. Under Act No. 10 of 1984, which regulates marriage and divorce, the consent of both parties is indispensable for the conclusion of a marriage contract (art. 2). The Act furthermore stipulates that: “Legal guardians cannot oblige their wards to marry against their will, nor can they prevent them from marrying the person of their own choosing.”

50. In order to provide special protection for mothers, the Social Security Act No. 13 of 1980 established that mothers are entitled to receive benefits at special times, including maternity benefit, which is paid from the fourth month of pregnancy up to the time of delivery, and the childbirth grant. In 2002, a total of LD 37,000,178 was paid out in maternity benefits and LD 369,113,550 in childbirth grants. The following table provides a breakdown of statistics on families, according to family size and annual income, in dinars, for the year 2001.

<table>
<thead>
<tr>
<th>No. of family members</th>
<th>Annual family income</th>
<th>No. of families</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Less than</td>
<td>2 000</td>
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<tr>
<td>1-4</td>
<td>140 926</td>
<td>44 756</td>
</tr>
<tr>
<td>5-6</td>
<td>32 316</td>
<td>21 978</td>
</tr>
<tr>
<td>7-8</td>
<td>21 853</td>
<td>16 225</td>
</tr>
<tr>
<td>9-10</td>
<td>16 026</td>
<td>10 754</td>
</tr>
<tr>
<td>11-12</td>
<td>7 727</td>
<td>6 072</td>
</tr>
<tr>
<td>13-14</td>
<td>3 136</td>
<td>2 521</td>
</tr>
<tr>
<td>More than 15</td>
<td>1 665</td>
<td>1 198</td>
</tr>
<tr>
<td>Total</td>
<td>223 676</td>
<td>103 504</td>
</tr>
<tr>
<td>Percentage</td>
<td>28.8</td>
<td>13.3</td>
</tr>
</tbody>
</table>

The rights of the child

51. With regard to the protection of the rights of the children, reference is made to Libya’s initial report and to the report produced in 1997 by the United Nations Children’s Fund (UNICEF) on the situation of women and children in the Libyan Arab Jamahiriya. Attention is furthermore drawn to the following additional information:

1. The Protection of Childhood Act No. 5 1997 introduced additional benefits and safeguards designed to protect the rights of the child, as described hereunder:
   - Children of unknown parents were given full names in order to enable them to obtain travel, identity and nationality papers;
   - The Act made it illegal to employ children for purposes other than teaching them a trade;
   - The Social Security Fund was given responsibility for the welfare and protection of children without a provider and of those who, owing to personal circumstances, had become involved in deviancy and delinquency. The Fund discharges this responsibility through social welfare and reform centres, which are supervised by qualified social workers and offer an alternative to the care that would be provided by the natural family.
2. According to Act No. 20 of 1998, the Social Security Fund is responsible for protecting and rehabilitating juvenile delinquents.

3. The legislation in force prohibits any form of discrimination among children on grounds of descent or any other factor, and protects all children against economic exploitation by prohibiting child labour, child prostitution and child pornography.

4. The Libyan Arab Jamahiriya is a party to the international instruments of relevance to children, in particular:
   
   − The Convention on the Rights of the Child, ratified by Act No. 2 of 1991;
   
   − The International Covenant on Civil and Political Rights;
   
   − The International Convention on the Elimination of All Forms of Discrimination against Women;
   
   − The Maternity Protection Convention, 1952 (No. 103); and
   
   − The ILO conventions and the Arab Labour Organization Convention on the Minimum Age for Admission to Employment.

52. The Libyan Arab Jamahiriya draws on the expertise and assistance provided by the international community, working with the UNICEF office in Tripoli, the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the World Health Organization (WHO) to design mechanisms for the protection of the family, mothers and children.

**Article 11 - Right to food, clothing and housing (the right to an adequate standard of living)**

**Paragraph 1**

53. According to the report on human development in the Jamahiriya which was produced by the National Documentation and Information Office, the population has an adequate standard of living, both overall and with regard to the unemployed and retirees who have no income, since these groups are legally entitled to basic allowances that help cover their basic needs.

54. The population’s standard of living has changed for the better, as reflected in the indicator of calorie intake per capita, which is higher than the international recommended minimum. Development plans and human development investment programmes have had marked success in reducing the income disparities among different sectors of the population that obtained prior to the 1969 revolution.

* Translator’s note: The section below is based on the revised guidelines issued by the Committee on Economic, Social and Cultural Rights regarding the form and contents of State party reports (document E/C.12/1991/1).
55. According to the results of the household spending survey, which used the Gini coefficient to measure income inequality, income disparities in Libya are modest, both as a national average and for the population as a whole. The same holds true for income disparities among the different regions of the country, which do not show very marked discrepancies.

56. In order to ensure to everyone an adequate standard of living, the necessary measures have been taken to assure a continuous supply of goods via low-cost distribution channels and under the most favourable terms. All citizens benefit from subsidies that are paid for out of the public purse. Moreover, a large number of consumer associations have been formed. Numbering 5,998 in 1979, Libya had 888,229 such associations in 2003, catering for all Libyan families, i.e. 776,448 families or more than 5.7 million individuals.

57. The improvement in living standards is linked to the improvement in individual purchasing power resulting from the sharp rise in average per capita cash income, based on per capita GDP, which increased from LD 656 in 1970 to LD 3,318 in the 1980s - an annual compound rate of growth of almost 19 per cent. This is high compared with the population growth rate. Although income per capita fell after the 1980s, it was still adequate, levelling off at around LD 2,618 in 1997, as shown in the table below.

<table>
<thead>
<tr>
<th>Year</th>
<th>GDP (at current factor cost, in millions of dinars)</th>
<th>No. of inhabitants (in thousands)</th>
<th>Per capita income (in dinars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1970</td>
<td>1 288.3</td>
<td>1 963.0</td>
<td>656</td>
</tr>
<tr>
<td>1975</td>
<td>3 674.3</td>
<td>2 595.5</td>
<td>1 416</td>
</tr>
<tr>
<td>1980</td>
<td>10 553.8</td>
<td>3 180.8</td>
<td>3 318</td>
</tr>
<tr>
<td>1985</td>
<td>7 852.1</td>
<td>3 617.8</td>
<td>2 170</td>
</tr>
<tr>
<td>1990</td>
<td>7 749.6</td>
<td>4 525.0</td>
<td>1 713</td>
</tr>
<tr>
<td>1995</td>
<td>13 121.3</td>
<td>4 799.0</td>
<td>4 389.7</td>
</tr>
<tr>
<td>2000</td>
<td>17 620.2</td>
<td>5 125</td>
<td>3 438</td>
</tr>
</tbody>
</table>

58. An increase in real income per capita is reflected in the individual’s capacity to purchase goods and services and to accumulate savings, as well as in the volume of household expenditure associated with the standard of living and the availability of goods and services, an important factor in raising the population’s standard of living. According to the 1999 report on human development in the Jamahiriya, household spending on consumer goods and services, combined with an average savings capacity of 30 per cent of income, rose from LD 395.6 million in 1970 to LD 7,236 million in 1997. Public spending on consumer goods and services also increased, from LD 220.7 million in 1970 to LD 4,328.2 million in 1997.

59. Social policies have helped increase income per capita, providing free educational, health and housing services for all social groups and giving priority to the needy and to disabled persons.

60. If one looks at the State’s receipts from services, one can clearly see that the citizens pay less than the cost of those services; in other words, the services are virtually free of charge.
Subparagraph (c)

61. The poverty line in Libya is calculated on the basis of access to goods and services and whether a person has a guaranteed monthly income that is sufficient to meet his or her daily needs. Anyone living under the poverty line is covered by the basic allowances’ scheme, which exists to guarantee everyone a decent standard of living. Therefore, no sector of the Libyan population can be described as poor.

Subparagraph (d)

62. Social and economic policies in Libya are based on quality-of-life indicators which measure material and psychological welfare. In material terms, these indicators measure such factors as access to adequate housing, potable water, sanitation, primary health care, adequate food that provides the right amount of calories, transport and communications. This report contains detailed information about these indicators.

Paragraph 2 - The right to adequate food

63. Reference may be made to the information contained in Libya’s initial report on the implementation of the International Covenant on Economic, Social and Cultural Rights. Attention is also drawn to the comments and new information set out hereunder.

– According to figures produced by the United Nations Food and Agriculture Organization (FAO), average calorie intake per capita in the Libyan Arab Jamahiriya amounted to 3,333 calories in 2001, as compared with a world average of only 2,807 calories and with 3,285 calories in developed countries. This result was achieved thanks to the maintenance of Libya’s nutrition policy, which is one method for ensuring the social welfare of individuals and families. The policy applies to all members of society without distinction.

– With regard to the nutritional status of mothers and children, reference is made to the study carried out by UNICEF in 1999 on the situation of women and children in the Libyan Arab Jamahiriya. According to the available data, particularly those contained in the 1999 report on human development in the Jamahiriya, the phenomena of hunger and malnutrition do not exist in Libya, other than in pathological cases.

– With regard to paragraph 2 (b) (i)-(iii), please refer to Libya’s reports on the implementation of the Covenant and to the Human Development Report published by the United Nations Development Programme (UNDP). With regard to subparagraph (c), the Social Security Fund established at the end of the last century has succeeded in guaranteeing an adequate income for everyone without a source of income. This income is calculated to be sufficient to permit the poorest sectors of society to meet all their daily needs, including the need for adequate food.

– Adequate food is also provided to all needy groups living in social welfare institutions and to older persons, disabled persons and children without a family provider, in accordance with the principle that: “Society looks after those who have no one to look after them and cares for those who have no one to care for them.”
Paragraph (d)

64. The Libyan Arab Jamahiriya subsidizes foodstuffs with a view to making them accessible to all sectors of the population. Budgetary allocations for food subsidies amounted to LD 700 million in 2002 and LD 300 million in 2003.

65. Act No. 4 of 1996, regulating the importation of goods, establishes, in article 6, that citizens must be guaranteed access, at affordable prices, to the consumer goods that they need, in order to ensure their equitable distribution among all members of the population without exception. Basic goods are distributed by consumer cooperatives pursuant to Act No. 60 of 1976, giving every citizen access to the food that he or she needs at subsidized prices that are below cost. For example, bakeries are supplied with flour so that they can supply cheap bread to everyone in the Libyan Arab Jamahiriya.

Paragraph (e)

66. Mention has already been made of the measures taken to protect sources of food production, including the laws prohibiting the exploitation of agricultural land for the purposes of construction, e.g. the Protection of Agricultural Land Act, the legislation on livestock preservation, and the measures taken to develop methods of conserving food and storing agricultural crops.

Paragraph (f)

67. A number of vehicles are used to disseminate knowledge of nutritional principles. We refer in particular to:

   (a) Educational programmes;
   (b) Health centres;
   (c) Maternal and child health centres;
   (d) Newspapers, magazines and the audio-visual media;
   (e) Leaflets and brochures.

68. Nevertheless, the level of nutritional awareness remains low, particularly with regard to breastfeeding and certain harmful nutritional practices.

Paragraph 5 (i)*

69. As mentioned above, the measures taken by the authorities have helped reduce infant and maternal mortality rates and have curbed the spread of disease by foreigners who enter the country illegally. Groups, including illegal immigrants, suffering from infectious diseases

* Translator’s note: The information contained in this paragraph refers to article 12 of the Covenant.
receive free treatment and medicines. The report on human development published by the National Documentation and Information Office in 1999 explains the difficulties facing the health sector. These difficulties include:

- The weakness of health planning mechanisms;
- Problems with the maintenance of health structures;
- Problems relating to spending on health services;
- Problems with access to medical and health supplies;
- Problems with health personnel;
- Problems with the quality of health services;
- Problems relating to treatment abroad.

Paragraph 6

70. The issues discussed in this paragraph were addressed in the section on social security and health care. However, it is worth adding that social security institutions have been established for older persons with no means of support, guaranteeing them, wherever they live in Libya, the exercise of their legal right to health care via health programmes and health services.

Subparagraph (g)*

71. Further to the information contained in Libya’s initial report, it is worth adding that the Jamahiriya pursues a policy of protecting agricultural land from urbanization and desertification and has implemented a major project involving the transportation of water over a distance of several hundred kilometres from the remote desert areas of the south of the country to the cultivable lands of the north.

72. With regard to the laws on agrarian reform, mention should be made of the Protection of Agricultural Land Act No. 15 of 1992 and the Protection of Animals and Trees Act No. 7 of 1996.

Paragraph 2 (h)

73. The measures taken by the Libyan Arab Jamahiriya to ensure an equitable distribution of food supplies are explained in paragraph 2 (d) above.

* See article 11 of the Covenant.
Paragraph 3 (a): The right to decent housing

74. This right is discussed in Libya’s initial report on the implementation of the International Covenant on Economic, Social and Cultural Rights. In addition to the information contained therein, attention may also be drawn to the following data and facts:

- The aims of the development plan for providing decent housing for all, in quantitative and qualitative terms, have been fulfilled. The phenomena of shacks and shanty towns have disappeared and the number of modern housing units increased from 283,000 in 1973 to 556,000 in 1985 and to 635,000 in 1995;

- The incidence of overcrowding, which is measured by the number of families per housing unit, has declined; in 1995, there was approximately one family for every housing unit;

- Most of the population (85.4 per cent) are urban dwellers;

- The total number of housing units in the Libyan Arab Jamahiriya amounted to 930,870 in 2000. The following table provides a breakdown of this figure:

<table>
<thead>
<tr>
<th>Housing type</th>
<th>No. of units</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Houchs (traditional detached homes)</td>
<td>433,254</td>
<td>46.5</td>
</tr>
<tr>
<td>Houses (villas)</td>
<td>337,818</td>
<td>36.3</td>
</tr>
<tr>
<td>Apartments</td>
<td>126,209</td>
<td>13.6</td>
</tr>
<tr>
<td>Other</td>
<td>33,589</td>
<td>3.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>930,870</td>
<td>100</td>
</tr>
</tbody>
</table>


- Within the framework of the development plan for the period 2002-2006, estimated financial investments in the housing sector and infrastructure amount to LD 5,627,230,000, distributed among all the regions of the Libyan Arab Jamahiriya and covering a total population of 5,299,943 persons.

Paragraph 3 (b) (i)

75. This is not applicable: there are no homeless individuals or families in Libya.

Subparagraph (ii)

76. This does not apply to the population of the Libyan Arab Jamahiriya, since everyone lives in decent housing and has access to basic amenities such as drinking water, sanitation, electricity and gas, as confirmed by the indicators contained in the UNDP Human Development Report and in the 1999 report on human development in the Jamahiriya. Some 99.7 per cent of Libyans have access to electricity and 94 per cent of households are connected to sanitation networks.
Subparagraph (iii)

77. There are many houses in Libya which were built illegally and without any form of planning.

Subparagraph (iv)

78. Not applicable.

79. A national housing strategy to the year 2000 was put in place and a long-term plan for the period 1996-2020 was adopted. Several decrees have been issued to facilitate access to healthy, decent and affordable housing. They include General People’s Committee Decree No. 275 of 2001, introducing a scheme for distributing loans worth a total of LD 440 million, depending on the source of financing and type of loan. Under article 3 of the Decree, commercial banks in Libya are required to lend private banks approximately LD 150 million, which the private banks in turn must use to offer mortgages for the construction of 6,000 housing units in certain agricultural and pastoral areas. Under article 4 of the Decree, commercial banks are required to lend money to agricultural and pastoral banks in the sha`biyyat (regions).

80. General People’s Committee Decree No. 173 of 2001 contains a number of provisions on agricultural and pastoral loans. Under article 1, commercial banks and private banks offer citizens 25-year mortgages, worth LD 30,000 each, for agricultural and pastoral dwellings. In that connection, the General People’s Congress, in paragraph 3 of Decree No. 20 of 1999, concerning public affairs, instructed the secretariat of the General People’s Committee to take the necessary steps to increase the capital reserves of specialized banks, taking account of their turnover and size, with a view to increasing the number of recipients of production, services and housing loans.

81. In implementation of the Decree, a number of building and construction companies were established. For example, the Tahadi Building and Construction Agency was set up pursuant to General People’s Committee Decree No. 185 of 2000 to help manage housing and infrastructure construction and maintenance projects, process various kinds of commercial transaction, and invest money in Libya and abroad in accordance with the laws in force. The Agency has special responsibility for managing housing projects created to sell homes to third parties (art. 3).

Paragraph (e)

82. This paragraph, which refers to changes in national policies and laws adversely affecting the right to adequate housing, does not apply.

Paragraph 4

83. The difficulties encountered by the State in implementing article 11 include:

– The decline in public receipts resulting from the fall or fluctuations in oil prices;

– The lack of public awareness about nutrition and health;
– The scarcity of water;
– Illegal construction by some individuals;
– The fact that some housing units have been turned into places of work.

Paragraph 5

84. The Libyan Arab Jamahiriya uses the assistance provided by the United Nations, particularly WHO, FAO, UNICEF and UNDP, to fulfil the rights enshrined in article 11. In particular, it has benefited from their technical and practical expertise in order to deal with plant epidemics and protect livestock and the environment.

Article 12 - Right to the enjoyment of the highest attainable standard of physical and mental health

85. In its initial report to the Committee, the Libyan Arab Jamahiriya provided information on the health situation which answers most of the questions raised in the relevant paragraph of the guidelines. We should, however, like to add the following.

86. The general health strategy adopted in the early 1970s was based on the principle of health for all, involving the provision of comprehensive health services throughout all regions of the country and in all areas of specialization. This commitment was sustained by the successive strategies adopted until 1999. Under the Health Act No. 106 of 1973, all citizens have a recognized right to health care and medical treatment, which the State must guarantee.

87. Under article 1 of Decree No. 24 of 1995, approving the national strategy on health for all, primary health care essentially relies on proper nutrition that is feasible, socially acceptable and accessible to all families and individuals. Article 3 of the same Decree defines the elements of primary health care with regard to social and health information and awareness, physical and mental health, proper nutrition, safe drinking water, sanitation, environmental safety, maternal and child health care, family planning, immunization against infectious diseases, the eradication of infectious and non-infectious diseases, emergency treatment, first-line medicines, occupational health and safety, and social health. Decree No. 686 of 1992, amending the regulation on compulsory immunization, provides, in article 2, that children must be vaccinated in accordance with established health protocols and that anyone who fails to comply with this requirement will be prosecuted.

88. With regard to Libya’s general health strategy, the indicators have improved significantly, with men living on average until the age of 64 and women up to the age of 66. While average life expectancy (taking men and women together) was not more than 46 years in the 1970s, according to estimates for 1998, it is now close to 70 years. The infant mortality rate fell from 118 per 1,000 live births in 1973 to 24.4 in 1995. Studies clearly show that the gap between infant mortality rates in urban centres and rural areas is closing. According to the 1995 children’s health survey, the 67 per cent fall in the infant mortality rate in urban centres
was accompanied by a 62 per cent fall in the rate in rural areas. Moreover, the total fertility rate dropped from around 9.1 children per woman in 1984 to 5.1 in 1995. This all underscores the effectiveness of the national health strategy, which was designed to bring about a huge expansion in health services and a more equitable distribution of services among the regions. The national strategy also pays due attention to the provision of health care for particular segments of society (such as older persons, disabled persons and women and children). It guarantees citizens of all ages access to improved health services, on the basis of a health-care policy geared towards improving standards of care and developing the health infrastructure, which has in fact improved and expanded to an unprecedented degree, with LD 60 million having been allocated to it out of the health sector’s operating budget for 2002. The developments in the health sector over the last three decades are a tribute to the work that has been done to build up Libya’s health infrastructure.

89. As with the training of health personnel, it was during the 1970s, when the first and second development plans were put into operation, that the greatest changes occurred in terms of health infrastructure development. Around 89 primary health centres were established and, by 1988, their number had swollen to 931. Health centres followed a similar pattern: 148 centres were established in 1980 and, by 1998, they had increased in number to 163. During the first decade of the development process, 40 polyclinics were set up throughout the country. There are fewer polyclinics now, some having been turned into specialized clinics.

90. The trends in hospital capacity, measured in the number of available beds, are a clear sign of the rapid expansion that has taken place in the hospital sector over the last few decades. During the period covered by the three development plans (1973-1985), the number of beds per 1,000 inhabitants rose from 3.6 at the beginning of the period to 5.3 by the end of 1985. (This ratio is likely to fall gradually as the population grows.) The number of hospitals increased to 83 - 23 of them specialized institutions. The Libyan Arab Jamahiriya acquired two pharmaceuticals plants, the Maya and Rabita plants, to cater for the local market.

91. In order to facilitate access to better health services, the private sector is included in the State’s plan so that it can play a positive role in the implementation of the national strategy. Under Act No. 6 of 2000, concerning educational and health cooperatives, qualified persons are authorized to deliver health services through cooperatives established in accordance with the terms of the Act.

92. In recognition of the close link between the environment and the human right to health, the Environmental Protection Act No. 7 of 1982 and the Public Hygiene Act No. 16 of 1984 were promulgated. Both Acts guarantee citizens (both men and women) the right to enjoy a healthy environment that protects them against diseases that can be caused by misuse of the environment. The objectives of the laws which regulate this area are to create a healthy environment and protect it against pollution, to safeguard the quality of air, water and the natural habitat, and to address all the related problems that can jeopardize human health.

93. In addition to the foregoing, we should like to mention special health care, which focuses on the maintenance of industrial safety and occupational health, treatment for victims of industrial accidents or occupational diseases, the delivery of rehabilitation services, care for
older persons, and the provision of health services for disabled persons and persons living in welfare institutions. The legislator has not overlooked the importance of the role of social welfare in improving citizens’ lives and raising their standard of living. The Social Security Fund established pursuant to Act No. 20 of 1998 has had a positive impact on the health of the Libyan people. According to the data on demographic trends taken from the 1995 census, the mortality rate fell from 9.4 per 1,000 inhabitants in 1973 to 3.1 in 1995. The main health indicators for 2000 and 2001 are set out in the next few tables.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2000</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of inhabitants per hospital bed</td>
<td>243</td>
<td>280</td>
</tr>
<tr>
<td>No. of doctors per 1 000 inhabitants</td>
<td>1.3</td>
<td>1.3</td>
</tr>
<tr>
<td>No. of dentists per 10 000 inhabitants</td>
<td>1.3</td>
<td>0.8</td>
</tr>
<tr>
<td>No. of pharmacists per 10 000 inhabitants</td>
<td>2.3</td>
<td>1.4</td>
</tr>
<tr>
<td>No. of nurses per 1 000 inhabitants</td>
<td>4.3</td>
<td>4.3</td>
</tr>
<tr>
<td>Infant mortality rate</td>
<td>24.4</td>
<td>25.9</td>
</tr>
<tr>
<td>Under-five mortality rate</td>
<td>30.1</td>
<td>31.7</td>
</tr>
<tr>
<td>Daily calorie intake</td>
<td>3 787</td>
<td>3 333</td>
</tr>
<tr>
<td>Life expectancy at birth</td>
<td>70</td>
<td></td>
</tr>
</tbody>
</table>

Source: National Documentation and Information Office.

**Number of health institutions and staffing levels (1997-2001)**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>1997</th>
<th>1998</th>
<th>1999</th>
<th>2000</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health institutions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No. of hospitals</td>
<td>79</td>
<td>83</td>
<td>83</td>
<td>82</td>
<td>82</td>
</tr>
<tr>
<td>No. of public hospital beds</td>
<td>1 930</td>
<td>18 645</td>
<td>18 645</td>
<td>18 821</td>
<td>18 959</td>
</tr>
<tr>
<td>No. of homes for disabled persons</td>
<td>53</td>
<td>53</td>
<td>63</td>
<td>53</td>
<td>53</td>
</tr>
<tr>
<td>No. of beds in residential facilities</td>
<td>1 060</td>
<td>1 060</td>
<td>1 351</td>
<td>1 060</td>
<td>1 060</td>
</tr>
<tr>
<td>No. of clinics owned by natural persons and cooperatives</td>
<td>16</td>
<td>26</td>
<td>26</td>
<td>26</td>
<td>26</td>
</tr>
<tr>
<td>No. of beds in clinics</td>
<td>502</td>
<td>620</td>
<td>747</td>
<td>620</td>
<td>620</td>
</tr>
<tr>
<td>Health personnel</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No. of specialists and general practitioners</td>
<td>5 960</td>
<td>5 676</td>
<td>7 183</td>
<td>6 676</td>
<td>6 676</td>
</tr>
<tr>
<td>No. of dentists</td>
<td>368</td>
<td>420</td>
<td></td>
<td>420</td>
<td>420</td>
</tr>
<tr>
<td>No. of pharmacists</td>
<td>492</td>
<td>518</td>
<td>509</td>
<td>722</td>
<td>722</td>
</tr>
<tr>
<td>No. of nurses</td>
<td>22 289</td>
<td>22 951</td>
<td>30 551</td>
<td>22 951</td>
<td>22 951</td>
</tr>
<tr>
<td>No. of health assistants</td>
<td>6 633</td>
<td>6 815</td>
<td></td>
<td>6 815</td>
<td>6 815</td>
</tr>
<tr>
<td>Administrative workers</td>
<td>22 319</td>
<td>63 656</td>
<td>64 722</td>
<td>63 860</td>
<td>63 830</td>
</tr>
</tbody>
</table>
**Hospital statistics, 1996-2001**

<table>
<thead>
<tr>
<th>Year</th>
<th>No. of beds</th>
<th>No. of admissions</th>
<th>No. of surgical operations</th>
<th>No. of births</th>
<th>No. of X-rays</th>
<th>No. of blood tests</th>
<th>No. of medical examinations</th>
<th>No. of deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996</td>
<td>20 897</td>
<td>432 287</td>
<td>92 728</td>
<td>1 023 202</td>
<td>1 278 629</td>
<td>7 202 088</td>
<td>419 664</td>
<td>7 994</td>
</tr>
<tr>
<td>1997</td>
<td>20 926</td>
<td>413 802</td>
<td>108 716</td>
<td>99 079</td>
<td>1 201 166</td>
<td>7 369 294</td>
<td>468 722</td>
<td>7 716</td>
</tr>
<tr>
<td>1998</td>
<td>20 325</td>
<td>405 315</td>
<td>11 886</td>
<td>94 878</td>
<td>1 573 575</td>
<td>8 002 425</td>
<td>556 603</td>
<td>8 212</td>
</tr>
<tr>
<td>1999</td>
<td>20 743</td>
<td>416 693</td>
<td>104 045</td>
<td>79 696</td>
<td>944 240</td>
<td>569 270</td>
<td>350 985</td>
<td>7 087</td>
</tr>
<tr>
<td>2001</td>
<td>18 959</td>
<td>406 808</td>
<td>-</td>
<td>99 813</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>8 334</td>
</tr>
</tbody>
</table>

NB: Number of beds includes both beds owned by the public sector and by cooperatives.

**Number of health professionals and paramedics per 1,000 inhabitants (1999/2001)**

<table>
<thead>
<tr>
<th>Specialization</th>
<th>1999</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dermatologists</td>
<td>830</td>
<td>714</td>
</tr>
<tr>
<td>Dentists</td>
<td>11 200</td>
<td>11 354</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>9 000</td>
<td>5 020</td>
</tr>
<tr>
<td>Nurses</td>
<td>220</td>
<td>208</td>
</tr>
<tr>
<td>Paramedics</td>
<td>700</td>
<td>740</td>
</tr>
</tbody>
</table>

**Vaccination according to location**

<table>
<thead>
<tr>
<th>Vaccine (children from 12 to 23 months)</th>
<th>Urban centres</th>
<th>Rural areas</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis</td>
<td>90.7</td>
<td>98.0</td>
<td>99.2</td>
</tr>
<tr>
<td>Polio: first dose</td>
<td>98.7</td>
<td>97.1</td>
<td>98.2</td>
</tr>
<tr>
<td>Polio: second dose</td>
<td>97.6</td>
<td>96.4</td>
<td>97.2</td>
</tr>
<tr>
<td>Polio: third dose</td>
<td>95.5</td>
<td>95.6</td>
<td>95.8</td>
</tr>
<tr>
<td>Measles</td>
<td>92.4</td>
<td>91.7</td>
<td>92.2</td>
</tr>
</tbody>
</table>

**Private health institutions**

<table>
<thead>
<tr>
<th>Type</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cooperatives and private clinics</td>
<td>324</td>
</tr>
<tr>
<td>Private pharmacies</td>
<td>745</td>
</tr>
<tr>
<td>Laboratories</td>
<td>24</td>
</tr>
</tbody>
</table>

**Paragraph 2**

94. The Jamahiriya pursues the national health policy that is set out in General People’s Committee Decree No. 24 of 1995 and the Health Act No. 106 of 1973, to which reference was made above. The Jamahiriya is committed to the WHO primary health-care approach, as evidenced by its health infrastructure and the way in which it structures the deployment of its health personnel.

**Paragraph 3: Health spending**

95. The following table provides information on health spending as a percentage of the State budget and of GDP during the period 1973-1996.
<table>
<thead>
<tr>
<th>Years</th>
<th>Ordinary</th>
<th>Development</th>
<th>% total GDP</th>
<th>% General budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>1973</td>
<td>27.2</td>
<td>15.4</td>
<td>2.0</td>
<td>5.1</td>
</tr>
<tr>
<td>1975</td>
<td>52.6</td>
<td>24.7</td>
<td>2.1</td>
<td>5.6</td>
</tr>
<tr>
<td>1980</td>
<td>52.8</td>
<td>75.8</td>
<td>0.7</td>
<td>2.2</td>
</tr>
<tr>
<td>1990</td>
<td>72.8</td>
<td>22.3</td>
<td>1.3</td>
<td>2.5</td>
</tr>
<tr>
<td>1993</td>
<td>339.0</td>
<td>4.6</td>
<td>1.2</td>
<td>5.0</td>
</tr>
<tr>
<td>1996</td>
<td>456.1</td>
<td>66.0</td>
<td>3.7</td>
<td>17.1</td>
</tr>
</tbody>
</table>


Paragraph 4: Infant mortality

Subparagraph (a)

96. Infant mortality rates are mentioned in the section on general health indicators.

Subparagraph (b)

97. With regard to access to safe water, according to the 2000 *Human Development Report*, 3 per cent of the population had no access to safe water in 1998. This means that 97 per cent of the population in rural areas and urban centres did have access to safe water.

Subparagraph (c)

98. With regard to population access to adequate disposal facilities, the same report indicates that only 2 per cent of the population did not have access to sanitation services, that 98 per cent were provided with these services, and that society guarantees this right without distinguishing between rural areas and urban centres.

Subparagraph (d)

99. With regard to immunization of infants against diphtheria, pertussis, tetanus, measles and poliomyelitis, the 2002 *Statistical Yearbook* shows that the rate of vaccination against these diseases amounts to 92.4 per cent in urban centres and 91.7 per cent in rural areas, which means that total coverage amounts to 92.2 per cent.

Public endeavours, health cooperatives and the Maghreb Immunization Campaign have jointly helped to educate families about the importance of immunization. At the same time, Libyan law (the Health Act and its implementing regulations) requires legal guardians to vaccinate children and imposes penalties for failure to do so.

100. Taking account of these and other indicators on the right to food and health care, the UNDP’s *Human Development Report* ranked Libya among the countries that have achieved a good level of sustainable human development. On a scale from 0 to 1, Libya scored 0.806, placing it in sixty-fourth position out of a total of 174 States in 1998.
Paragraph (e)

101. Life expectancy at birth stood at 70.2 years in 1998, as compared with a figure of around 46 years in 1970. The national report on human development ascribes this improvement to a number of factors, including the changes made to the health infrastructure and the implementation of health policies relating to the proportion of the population with access to adequate health services. That proportion is now close to 95 per cent, as compared with 45 per cent in 1973.

Paragraph (f)

102. The available data indicate that the proportion of the population with access to care provided by trained personnel in any area of specialization is more than 95 per cent and can be as high as 100 per cent in urban centres.

Paragraph (g)

103. According to the statistics compiled by the General People’s Health Committee for 1999, the proportion of pregnant women having access to trained personnel during pregnancy was 99 per cent. The maternal mortality rate was 30 deaths per 10,000 live births in the same year.

Paragraph (h)

104. The proportion of infants having access to trained personnel for care is over 98 per cent in urban centres and around 96 per cent in rural areas.

Paragraph 5

105. The situation of drug dependents and persons infected with HIV/AIDS is much worse, although, according to the statistics contained in the 1999 national report on human development, the number of persons being treated for HIV/AIDS was not more than 500.

Subparagraph (a)

106. The policies in place can be said to respect the rights of these groups and any changes that have been made have positively affected their health situation.

Subparagraph (b)

107. The policies adopted reaffirm the rights of these groups to protection, treatment and rehabilitation services. Centres have been set up to treat drug dependents and care for persons with HIV/AIDS. The State has adopted a policy of raising awareness of the dangers of drugs and HIV/AIDS within the framework of the Health Awareness and Advice Programme, which was established for the purpose of implementing health policies and the Health Act.
Subparagraph (c)

108. Public policy provides for the implementation of a number of measures relating to the groups mentioned in paragraph 5. These measures include:

- The requirement that citizens and non-citizens produce health certificates showing them to be free of any infectious disease, particularly HIV/AIDS;
- The requirement that students in different stages of education produce certificates showing them to be free of any infectious disease;
- The requirement that foreigners, particularly illegal immigrants, undergo medical examinations;
- The conduct of inspections in bakeries and places which manufacture foodstuffs and supplies, in order to verify employees’ health;
- The stepping up of anti-drugs campaigns and border controls and the identification, arrest and prosecution of drug traffickers.

109. All the above measures have helped to curb epidemics, as well as drug abuse and drug dependency.

110. It should be noted that the highest incidence of malaria and HIV/AIDS is found among people who enter the country illegally. In the 1970s, they accounted for 65 per cent of all malaria cases. Those of them suffering from AIDS are entitled to free treatment under the same conditions as Libyan citizens, while those who pose a threat to society are returned to their country of origin, at Libya’s expense, in accordance with the treaties concluded with the relevant State. This can hardly be characterized as discrimination.

Subparagraph (d)

111. The measures taken to curb the spread of HIV/AIDS have helped to contain the infection. Moreover, a centre for infectious diseases has been established which accords priority to this phenomenon. It has intensified its efforts, in conjunction with the UNDP office in Libya, to prevent the spread of this scourge.

Subparagraph (e)

112. Maternal and child health-care centres offer regular antenatal check-ups and treat any health problems that may arise during pregnancy. According to the Human Development Report 2000, this has helped to reduce the stillbirth rate, which dropped from 105 per 1,000 births in 1970 to 20 in 1998. Between 1990 and 1998, the neonatal death rate also fell to 75 deaths per 100,000 births. Infant mortality rates likewise fell, from 160 per 1,000 live births in 1970 to 24 in 1998.
Subparagraph (f)

113. The Environmental Protection Agency, the Food and Drugs Agency, and the Health Inspections Agency monitor the implementation of environmental protection and industrial hygiene policies and verify compliance with industrial safety procedures. The Social Security Fund covers all persons afflicted by occupational illnesses and injuries.

Subparagraph (g)

114. The following measures have been taken by the Libyan Arab Jamahiriya to prevent epidemic, endemic, occupational and other diseases:

- The enactment of legislation making it compulsory to vaccinate against these diseases and criminalizing failure to do so; the enactment of laws on preventive health care and preventive treatment and on food protection and controls; the establishment of regulations on the use of pesticides; and the passing of laws on occupational health and hygiene and industrial safety;

- The delivery of training, by the Higher Institute for Occupational and Environmental Health and Hygiene, for experts in this field;

- The delivery of training, by specialized university faculties and higher institutes, for medical and paramedical personnel, in the implementation of policies on the prevention and eradication of infectious and contagious diseases;

- The implementation of the Health Awareness Programme in every sha`biyyat in the country, in order to increase health awareness, particularly about the epidemics of HIV/AIDS, hepatitis, etc. In this connection, we should like to mention the first national public awareness campaign, which was sponsored by the secretariat of the General People’s Committee for Justice and Public Security and the Faculty of Law of Fateh University and was carried out in conjunction with a number of non-governmental organizations and private associations;

- The follow-up done by the General People’s Committee for Justice and Public Security, through the General Drugs Department, on the implementation of policies aimed at combating drugs and psychotropic substances;

- The controls imposed at border points and the screening of foreigners entering the country, particularly illegal entrants, in order to prevent the spread of infectious and contagious diseases.

Subparagraph (h)

115. For fuller information, please refer to the reply provided to the questions on article 12 of the Covenant, together with the initial report.
Paragraph 7

116. According to the system of government by the people, the masses, acting through their people’s congresses, are the source of every decision taken in every district, village and town in the Libyan Arab Jamahiriya, and they play an active part in primary health-care planning. Those responsible for health and social security locally, in the people’s congresses and at the level of the sha`biyyat, are involved in primary health-care planning, and the people’s health committees in every sha`biyyat implement the decisions on primary health-care planning that are taken at meetings of the General People’s Congress. The People’s Monitoring, Follow-Up and Inspection Mechanism oversees the implementation of these decisions.

Paragraph 8

117. Reference has already been made to the role played by the people’s health committees in the sha`biyyat (formerly municipalities) in disseminating information via leaflets, bulletins, local radio, meetings, colloquia and seminars.

Paragraph 9

118. International assistance, particularly technical assistance and consultancy, plays an important role in the full realization of the right enshrined in article 12. We refer in particular to the cooperation with WHO on HIV/AIDS and hepatitis and that with UNICEF on guaranteeing the rights of children and mothers to health care and adequate food and on combating the diseases to which they are vulnerable.

Article 13 - Right to education and instruction

119. With regard to the questions on the implementation of article 13, we refer to Libya’s initial report and to the report which Libya presented at the meeting of the International Consultative Forum on Education for All, held at Dakar (Senegal) from 26 to 28 April 2000.

Article 14 - Right to education

120. The comments on article 13, concerning sources of information and the fulfilment of our obligations, also apply here.

Article 15 - The right to culture

121. This article is concerned with the recognition by every State party of the right of everyone:

– To take part in cultural life;

– To enjoy the benefits of scientific progress and its applications;

– To benefit from the protection of the moral and material interests resulting from any scientific, literary or artistic production of which he is the author.
Paragraph 1 (a)

122. The Libyan Arab Jamahiriya has mobilized the requisite funding for the promotion of cultural development and popular participation in cultural life, including support and promotion of private initiatives. The 2002 development budget allocated funds for that purpose, as the following table shows:

<table>
<thead>
<tr>
<th>Scientific and cultural activities</th>
<th>Allocations (in millions of dinars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training of human resources in the scientific and cultural domains</td>
<td>201 228</td>
</tr>
<tr>
<td>Scientific and literary research and studies</td>
<td>54 239</td>
</tr>
<tr>
<td>The Jamahiriya Media Institute</td>
<td>17 000</td>
</tr>
<tr>
<td>The National Office for Scientific Research</td>
<td>25 666</td>
</tr>
<tr>
<td>The National Tourism and Antiquities Board</td>
<td>12 078</td>
</tr>
<tr>
<td>Creative activities</td>
<td>1 985</td>
</tr>
</tbody>
</table>

Subparagraph (b)

123. The Jamahiriya has a well-developed infrastructure for promoting cultural development and popular participation in cultural life. Cultural centres have been established in all urban centres and rural areas, schools have been equipped with libraries, and the country has many museums, public libraries, exhibition halls and Internet centres. There is a dedicated policy on the promotion of traditional arts and crafts, together with a professional congress of traditional crafts and trades, which defends the rights of artisans. The Tripoli Old Town Project was created to preserve traditional arts and crafts, which are undergoing a major revival at the present time.

Subparagraph (c)

124. The Libyan Arab Jamahiriya promotes a cultural identity that is open to other cultures and fosters ties between peoples. It supports the formation of associations whose object is to cement bonds of friendship between the Libyan people and other nations. An office of the secretariat of the General People’s Congress is responsible for monitoring the implementation of this policy.

Subparagraph (d)

125. Libya’s policy on culture seeks to promote awareness of the diversity of the cultural heritage, in view of the marked cultural differences that exist between the different regions of the country.

Subparagraph (e)

126. The mass media and communication media promote participation in cultural life in accordance with their respective mandates. The reports published by the National Information and Documentation Office, which are reproduced in the Statistical Yearbook, contain data on cultural life, particularly with regard to institutions and activities.
Subparagraph (f)

127. Libya’s cultural heritage, a part of mankind’s heritage, is preserved and presented at Tripoli Museum, which domestic visitors and foreign tourists can visit every day during official opening hours.

Subparagraph (g)

128. The answer to this question is provided in an earlier paragraph.

Subparagraph (h)

129. The Faculty of Arts and Music and its various branches provide an advanced education in the fields of culture and the arts.

Subparagraph (i)

130. Annual folk festivals are held and Sufi groups are encouraged to preserve the intellectual and religious heritage. Poetry, novel-writing, drawing, music and singing competitions are organized and support is lent to popular associations dedicated to the arts, literature and the cultural heritage in general.

131. With regard to difficulties encountered, we should like to mention phenomena such as the cultural invasion that has taken place, via satellite television, in the context of the globalization and expansion of the mass communication media.

Paragraph 2 (a)

132. The legislation in force emphasizes the necessity of ensuring the application of scientific progress for the benefit of everyone, particularly in the domains of health, education, industry, agriculture, fishing, animal raising, information and culture.

Subparagraph (b)

133. The National Information and Documentation Office, the National Office for Scientific Research, the Public Broadcasting Corporation and the National Committee for Science, Education and Culture disseminate information on scientific progress and promote scientific and cultural achievements. The Internet centres set up throughout the Jamahiriya allow those who are able to use the Internet to communicate with one another electronically. One hour’s Internet access costs less than one half of a United States dollar.

Subparagraph (c)

134. The Libyan Penal Code prohibits the use of scientific and technical progress for purposes which are contrary to the enjoyment of all human rights, including the rights to life, health, personal freedom and privacy.
Subparagraph (d)

135. No restrictions are placed upon the exercise of this right, except in the event of a threat to national security or peace or where the rights of others may be violated.

136. The Libyan Arab Jamahiriya has taken steps to allocate the requisite funds and resources to improve the citizens’ cultural life and preserve their cultural heritage and history. The 2002 budget allocated LD 201,228 million for human resources development, LD 54,239 million for research, LD 17,003 million for the Libyan Media Institute and its subsidiary organs, LD 25,666 million for the National Office for Scientific Research, and LD 12,078 million for the National Tourism and Antiquities Board.

137. The operating budgets of the National Tourism and Antiquities Board, the Jamahiriya’s Media Institute and the National Office for Scientific Research amount respectively to LD 3 million, 1 million and 6 million. The amount of LD 1,985,000 is allocated to the Council for the Promotion of Culture, LD 1,515,000 is allocated to public radio (the Voice of Africa), LD 2,287,000 is allocated to the Libyan news agency (JANA), LD 28,001,000 is allocated to the Public Broadcasting Corporation, LD 700,000 is allocated to the Jamahiriya’s Media Institute, LD 2,757,000 is allocated to the Department of Archaeology and LD 453,000 to the National Committee for Education, Science and Culture.

138. These funds are allocated to promote cultural development and popular participation in cultural life by expanding and diversifying support structures. At the same time, legislation has been enacted to guarantee cultural rights. For example, Act No. 3 of 1995, concerning the protection of antiquities, museums, old cities and historical buildings, was enacted to protect the world heritage sites present in Libya and prohibit all kinds of acts likely to cause them damage as defined in the Act. The National Tourism and Antiquities Board was established pursuant to Act No. 471 of 2000. Some of its personnel have investigative powers and are able to initiate prosecutions for offences under the Act. The Board carries out a full range of activities designed to develop and promote domestic and foreign tourism, teach citizens about their heritage and contribute to economic, social and cultural development.

139. Convinced that every individual is entitled to freely choose the knowledge that he or she would like to acquire and to benefit from his or her own creative powers, a special law has been enacted to protect intellectual property rights and prevent all kinds of fraud or abuse to which the authors of original literary, artistic or scientific works of any kind, mode of expression or purpose may fall victim. In implementation of that law, Decree No. 114 of 1985 was promulgated to introduce rules on creative writing, translation, editing and publication at universities and institutes of higher education. The Creative Writing, Translation, Editing and Publishing Regulation No. 348 of 1992 established guidelines for the protection of intellectual property rights. In order to encourage creative endeavour, the National Council for the Promotion of Culture was established to encourage citizens to express themselves in creative ways and develop their talents and to help particularly gifted persons with a view to raising general cultural standards. The Council organizes festivals and colloquia at different levels.
140. One of the measures taken by the secretariat of the General People’s Congress to raise cultural standards and foster native talent was the adoption of Decree No. 166 of 2002, concerning the reorganization of the Fund for the Promotion of Creative Works, which awards prizes and incentives for creative works of particular merit and sponsors artists and writers.

141. One of the key vectors of culture is the audio-visual media, which, as already mentioned, are allocated a huge budget to enable them to play their role in the diffusion of culture. These institutions include the Jamahiriya’s Media Institute and the Public Broadcasting Corporation, which are no longer centralized, ever since the establishment of a number of local radio stations (Radio Tripoli, Radio Benghazi, Radio Al-Zawiya, Radio Jabal al-Gharbi, Radio Sirt, etc.). Local radio stations do their part to preserve the cultural identity of each region and increase awareness and enjoyment of the cultural heritage.

142. Another fundamental vector of contemporary culture is the print media, to which wide access is assured via the newspapers published by the National Press Authority and by private entities, associations or trade unions wishing to air their views, discuss contemporary issues and present their ideas. These newspapers include the Tripoli-based newspaper Al-Shatt (The Coast), the newspaper Al-Masshad (Panorama) which is the organ of the Tripoli Writers and Authors’ Club, and Al-Muntijun (The Producers), Al-Talib (The Student), Al-Mu’alim (The Teacher) and Al-Muhami (The Lawyer). All these publications offer groups that are interested in culture the opportunity to express their views and communicate with one another.

143. There is a well-known saying in the Libyan Arab Jamahiriya that peoples only coalesce around their arts and cultural heritage. Accordingly, special-purpose centres have been established to give talented individuals the chance to develop their gifts. These centres include: the Jamal al-Din al-Miladi Centre for Music; the Centre for Fine Arts; the National Centre for Research into Arab Music; and the National Centre for Popular Arts. Numerous private associations, set up to preserve the cultural heritage and cultural identity, also have a positive part to play.

144. UNESCO is to be commended for the work it does to promote the cultural rights of peoples, including in the Libyan Arab Jamahiriya. The organization has helped Libya to preserve its antiquities, offering it the specialist advice and technical expertise that it needs. The establishment of the National Committee for Education, Science and Culture has done much to strengthen cooperation with that organization and with other relevant international organizations.

145. Conscious of the importance of the ties between the peoples of the world, the Libyan Arab Jamahiriya dispatches special representatives to strengthen relations and intensify cultural exchanges with host States. A total of 21 Libyan cultural centres are found in different parts of the world (16 in Africa). These centres disseminate culture and knowledge, teach Arabic and the precepts of Islam, and offer vocational training and computer courses.
Notes


4 See, in particular, the reports of the Committee of Experts on the implementation of International Labour Organization (ILO) conventions and recommendations.

5 See the report of the Libyan Arab Jamahiriya on article 11 of the Convention on the Elimination of All Forms of Discrimination against Women.

6 For further information, see the replies provided by the Libyan Arab Jamahiriya to the ILO Committee of Experts on 27 May 2000.

7 For further information, see the replies which the Libyan Arab Jamahiriya submitted in 2000 to the Technical Committee on the observations made by the ILO Committee of Experts.


11 General People’s Health and Health Insurance Committee, Health and Social Services, 1969 to 1999, p. 65.
Sources used in the preparation of the report


5. General People’s Committee for Health and Social Security, *Thirty Years of Health and Social Services, 1969 to 1999*


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