

# Palestinian Central Bureau of Statistics Child Statistics Series (No. 14)

## Palestinian Children –Issues and Statistics Annual Report, 2011

**April, 2011** 

This document is prepared in accordance with the standard procedures stated in the Code of Practice for Palestine Official Statistics 2006

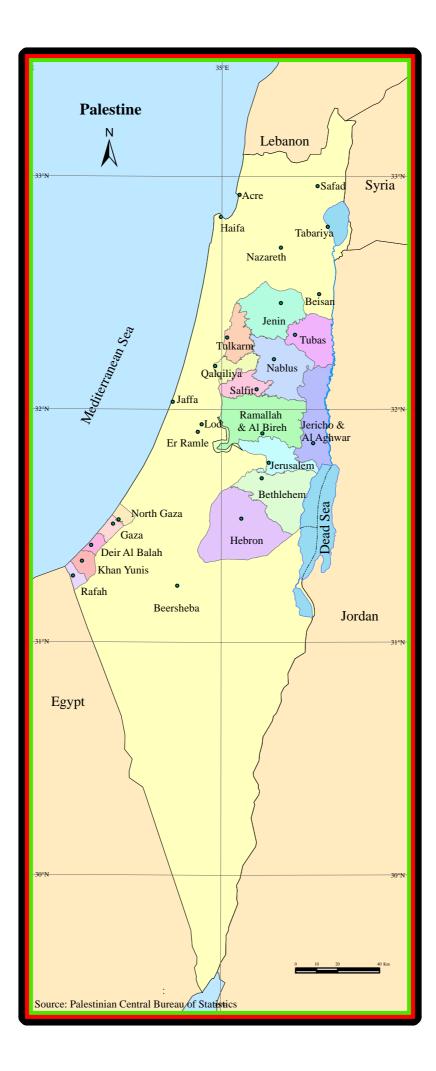
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Moreover, PCBS much appreciates the distinctive efforts of the Core Funding Group (CFG) for their valuable contribution of funding the project.

### Preface

The availability of statistics on children in the world has improved since The United Nations reemphasized the concerns of the international community regarding children's rights by making it an objective to provide a statistical database on the conditions of children and to measure progress achieved to meet their needs. The Convention, signed and approved by almost all member countries, constitutes a reference and an international legal framework for monitoring progress made in meeting children's needs and requirements. The different countries translate their commitment to protect child rights through development of their own reports. The Palestinian Central Bureau of Statistics took on itself the task of providing an enabling atmosphere, and to promote awareness among policy makers, planners, and other parties engaged in defending children rights and interested in bringing about sustainable and comprehensive developments for children.

The Palestinian Central Bureau of Statistics is pleased to introduce its thirteen annual report on the socio-economic situation of the Palestinian child, as part of the activities of the Child Statistics Program. This report is significant as it is issued after fifteen years from the inception of the Palestinian National authority (PNA). The Palestinian Central Bureau of Statistics (PCBS) attempts through statistics to give specialists, concerned parties and decision makers an opportunity to identify the extent of progress achieved by the PNA, local and international Non Governmental Organizations (NGOs), and private sector, in the protection and development of children in the Palestinian Territory.

The report presents available statistics on the socio-economic environment of the Palestinian child and sheds light on the immediate deficiencies and gaps in the child's reality, especially in the fields of health, education, culture, recreation, poverty, and child labor.

Developing the status of the child and commitment to enforce child rights can not be attained without the accumulation of the efforts of all parties interested in childhood. It is necessary in this context to point out that the database we have developed, in terms of framework and content, is based on the nature of our own understanding of the monitoring role assigned to us by the principles of collective participation in defining work priorities. This effort is to be enhanced through coordination with Palestinian, regional and international institutions to ensure harmony with the tools used in measuring indicators pertinent to child rights, as adopted by the General Assembly of the United Nations, and to ensure the fulfillments of these requirements in light of the peculiarities of the Palestinian reality and the unique conditions of our children.

PCBS hopes that this report will be utilized in planning, policy making and strategic decision making in the child sector in Palestine. No doubt, the continuous flow of data for the main indicators about children is one of the basic pillars for monitoring changes in this regard.

April 2011

Ola Awad President of PCBS

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### **Concepts and Definitions**

### Acute Respiratory Infections (ARI):

Acute respiratory infections are the most common illness suffered by children, no matter where they live. ARI are caused by a wide variety of disease agents; these include forms of vaccine-preventable tangent diseases: diphtheria, pertussis and tuberculosis. ARI are traditionally divided into two main categories: those of the upper respiratory tract (the common cold) and those of the lower respiratory tract (primarily pneumonia). The principal transmission factors are high population density, crowded conditions and seasonal changes that favor the spread of disease.

### Age at Marriage:

The age of the individual in years at the time of his/her actual marriage.

### **Basic Stage:**

The first ten scholastic years of schooling on which other stages of education depend.

### **Crude Death:**

Referring to deaths among a population in a given period, Crude Death Rate refers to the number of these deaths per 1,000 persons in a given year.

### **Crude Birth:**

Referring to new births, the Crude Birth Rate refers to the number of new births per 1,000 persons in a given year.

### **Death Causes:**

A state of illness, infirmity, incidence, or poisoning that directly or indirectly leads to death.

### **Employed Child:**

The child performing a certain work for the other in return for a wage or for him / herself, or unpaid family work.

### **Employer:**

A person who works in an establishment that is totally or partially belonging to him/ her and hires or supervises the work of one or more waged employees. This includes persons operating their projects or contracting companies provided that they employ a minimum of one waged employee. Shareholders are not considered employers even if they are working in it.

### **Economic Activity:**

Economic activity refers to the main activity of the establishment in which the employed person works or the kind of work done previously for unemployed ever worked person.

### **Growth Rate:**

The average increase or decrease in the number of population during a certain year, due to natural increase and net migration. It is expressed by a percentage of the base population.

### **Governmental Schools:**

Any educational institution run by Ministry of Education and Higher Education (MOEHE) or any other ministry or governmental instrument.

### Health:

Many definitions exist. As defined by the World Health Organization: "A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity".

### **Infant Mortality:**

Refers to infant deaths (infants who are less than a year old), the infant mortality rate refers to the number of infant deaths in a given year per 1,000 live births during the year.

### Kindergarten:

Any educational institution licensed by MOEHE offering education to four or five year olds. Kindergarten consists of the first and second grades.

### Malnutrition:

Malnutrition means "badly nourished" but it is more than a measure of what we eat or fail to eat. Clinically, malnutrition is characterized by an inadequate intake of protein, energy and micronutrients and by frequent infections or disease. Nutritional status is the result of the complex interaction between the food we eat, our overall state of health and the environment in which we live – in short, food, health and caring, the three "pillars of well-being".

### **Occupation:**

Occupation refers to the kind of work done during the reference period by the employed person, or the kind of work done previously if unemployed, irrespective of the Economic Activity or the employment status of the person. Occupations are grouped together mainly on the basis of the similarity of skills required to fulfill the tasks and duties of the job.

### **Poor Child:**

The child belongs to a poor household (whose income is below the national poverty line).

### **Primary Health Care:**

First contact and continuing comprehensive health care, including basic or initial diagnosis and treatment, health, supervision, management of chronic conditions and preventive health services. The provision of primary care does not necessarily require highly sophisticated equipment or specialized resources.

### **Private Schools:**

Any licensed local or foreign non-governmental educational institution.

### Weight for Age:

This parameter is influenced by both the height and weight of the child. It reflects the long and short-term health of an individual or population. Lightness and underweight have been used to describe normal and pathological processes. High weight for age is not used to describe obesity.

### Self\_Employed:

A person who works in an establishment that is totally or partially belonging to him/her (partner) and who does not hire any wage employees. This includes self employed persons who are outside establishments.

### **Secondary Stage:**

The stage consists of two scholastic years following the basic stage. that is, years 11 and 12 of schooling.

### Student/Pupil:

Any one attends an educational institution.

### School:

Any educational institution excluding kindergartens, regardless of students' number and grade structure.

### **Teacher:**

A person with specialized qualification who is responsible for teaching students at an educational institution.

### **Total Fertility Rate:**

The average number of children that would be born alive to a woman (or group of women) during her life time if she were to pass through her childbearing years conforming to the age-specific fertility rates of a given year. The sum of age specific fertility rates multiplied by 5.

### **Unemployment:**

Underemployment exists when a person's employment is inadequate in relation to alternative employment, account being taken of his/her occupational skills. The underemployed persons are classified into two groups(1) Visible Underemployment: which refers to insufficient volume of employment: Persons worked less than 35 hours during the reference week or worked less than the normal hours of work in their occupation were considered as visibly underemployed; and (2) Invisible Underemployment: refers to a misapplication of labour resources or fundamental imbalance as between labour and other factors of production, such as insufficient income.

### **Under-5 Mortality:**

The probability of dying between birth and the fifth birthday (per 1,000 live births).

### **UNRWA Schools:**

Any school run or supervised by UNRWA.

### Wage Employee (Paid- Employee):

A person who works for a public or private employer or under its supervision and receives remuneration in wage, salary, commission, tips, piece rates or in kind ...etc. This item includes persons employed in governmental, non \_ governmental and private institutions along with those employed in a household enterprise in return for a specific remuneration.

Worked Hours: Worked Hours: time spent by employed person in his/her main occupation.

### Chapter One

### **Demographic Status**

A child means every human being under the age of eighteen years unless, under the law applicable to the child, majority is attained earlier. (Convention on the Rights of the Child,, Article 1)

Childhood is an important stage when the future life of the child is defined, so it has prompted many states to ensure that children are provided care for their integrated balanced growth in all aspects of mental, psychological and social health.

The Convention on the Rights of the Child, adopted by the United Nations General Assembly in 1989, constitutes the highest standard of attention to children, since this declaration includes a number of principles aimed at providing guarantees for survival, development and protection of children. The implementation of this convention requires a supportive environment to meet and cater for the rights of the child that is rich with incentives to encourage decision and policy makers, and all workers in the childhood sector, to work for achieving the goals of the declaration.

The environment surrounding children is a key element in the evolution and development of the child's physical, mental, and psychological development, and affects the circumstances surrounding the way the child is raised, including the formation of ideas and beliefs, perceptions and attitudes towards the core issues relating to his life. This chapter presents the basic statistics about the environment surrounding the Palestinian child in the Palestinian Territory, including the demographic composition of the population as well as the social and environmental status in which a Palestinian child lives.

### 1.1 Growth Rate

The study of age and gender contributes to understanding the demographic changes. The data showed that the population in the Palestinian Territory in mid 2010, is 4.05 million of whom 2.51 million are in the West Bank; 62.1%, and 1.54 million people in Gaza Strip; 37.9% in 2010.

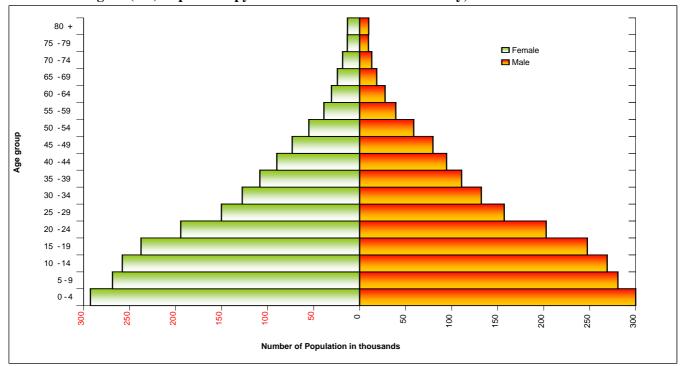


Figure (1-1) Population pyramid in the Palestinian Territory, mid 2010

**Source: Palestinian Central Bureau of Statistics, 2011.** Revised estimate based on the final results of Population, Housing and Establishment Census 2007. Ramallah-Palestine

The Palestinian population pyramid showed a high proportion of individuals under the age of 15 years 41.3%, while the proportion of elderly individuals is low. These percentages indicate high fertility rates and the fact that Palestinian society is a young society with a broad, young pyramid base.

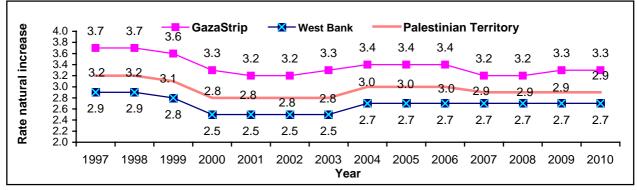


Figure (1-2) Estimated natural increase rate of population, 1997-2010

**Source: Palestinian Central Bureau of Statistics, 2011.** Revised estimate based on the final results of Population, Housing and Establishment Census 2007. Ramallah-Palestine

The decline in the rates of mortality and the stability of high fertility rates lead to a high natural increase rate of population, which requires appropriate economic and social policies to confront the implications of this increase. It has been estimated by the PCBS that the rate of natural increase in the population of the Palestinian Territory was about 2.9% in mid 2010. This is one of the highest rates in the world, since the average annual rate does not exceed

1.2%. The growth in the West Bank was estimated mid-2010 at 2.7% versus 3.3% in the Gaza Strip.

### **1.2 Birth Rates**

The child shall be registered immediately after birth and shall have the right from birth to a name, the right to acquire a nationality and, as far as possible, the right to know and be cared for by his or her parents.

(Convention on the Rights of the Child,, Article 7)

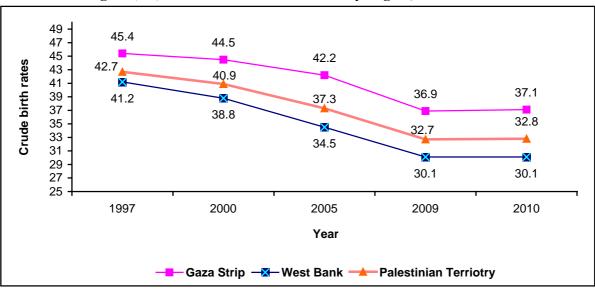


Figure (1-3): Estimated crude birth rates by Region, Selected Years

**Source: Palestinian Central Bureau of Statistics, 2011.** Revised estimate based on the final results of Population, Housing and Establishment Census 2007. Ramallah-Palestine

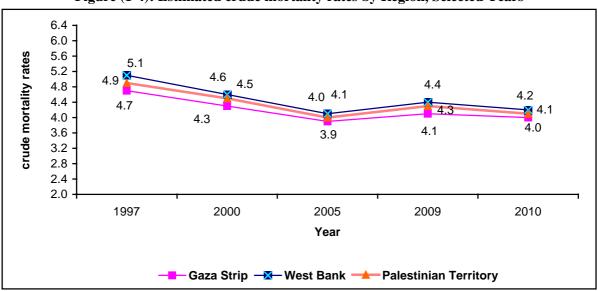
Birth rates are affected by many factors directly or indirectly such as: levels of fertility and birth, developed health services, the country's role in maternal and child health care. The total number of children, less than eighteen years old, reached 1.97 million in the Palestinian Territory in 2010. The estimates point to a decline in the crude birth rate during the last decade in the Palestinian Territory. The birth rate had been estimated at 42.7 births per one thousand of the population in 1997 and declined to 32.8 in 2010. This decline is greatly correlated with the decline in fertility levels, in addition to the beneficial application of the health programs concerning reproductive health. There is discrepancy in the crude birth rate in 2010 in both the West Bank and Gaza Strip, which was 30.1 and 37.1 respectively.

### 1.3 Mortality

State Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. State Parties shall strive to ensure that no child is deprived of his or her right to access to such health care services.

(Convention on the Rights of the Child,, Article 24)

The available data point out that the mortality level is relatively low compared with the current mortality rates in the Arab countries. The crude mortality rate has declined in the Palestinian Territory from 4.9 per one thousand in 1997 to 4.1 per one thousand in 2010, while there is a difference in the crude mortality rate for each of the West Bank and Gaza Strip. The estimated rate of crude mortality in the West Bank reached 5.1 per one thousand in 1997 and declined to 4.2 per one thousand in 2010; while the crude mortality rate was estimated in the Gaza Strip at 4.7 per one thousand in 1997 and declined to 4.0 per one thousand in 2010. This indicates improvement in the quality of life, opportunities for receiving medical services, improvement in health awareness among the population and improvement in health services.





**Source: Palestinian Central Bureau of Statistics, 2011.** Revised estimate based on the final results of Population, Housing and Establishment Census 2007. Ramallah-Palestine

### **1.4 Early Marriage**

Marriage in any society has social and economic dimensions as well as dimensions reflecting the level of civilization. Data on marriage and divorce in West Bank in 1997 showed a widespread phenomenon of early marriage especially among females. The median age of females at first marriage was 18.0 years, and 23.0 years for males in 1997, whereas the median age at first marriage in the West Bank was 19.9 and 25.4 years for females and males respectively, in 2009. The mean age of marriage among those who have a bachelor or higher degree was 24.5 years for females and 27.4 years for males in the West Bank in 2009. This reflects the role of education in reducing early marriage among Palestinians. The mean age of marriage for those who have a preparatory certificate only was 17.4 for females and 24.8 for males.

Of all women who got married in 2009, about 22.9% were under the age of eighteen years compared with 0.8% for males.

### **1.5 Fertility**

### **Current fertility levels**

Data showed the age specific and total fertility rates (per thousand women) during the three years preceding the Family Survey in 2010, as is evident from the table and in accordance with current levels of birth, the Palestinian woman gives birth to 4.2 children throughout her reproductive life. As expected, the rates will not change significantly (decrease) during the coming period as the determinants of fertility interlace between levels of social and economic life in the Palestinian society and inter cultural concepts and traditions. The table indicates that the total fertility rate is higher in Gaza Strip than in the West Bank.

### Table (1-1): Age specific and total fertility rates using the direct method by region, 2010\*

_		Region		
Age group	Palestinian Territory	West Bank	Gaza Strip	
15-19	38.4	34.8	44.1	
20-24	194.0	184.6	209.5	
25-29	240.4	217.3	278.9	
30-34	182.1	163.9	214.0	
35-39	132.9	119.1	158.6	
40-44	39.7	28.7	58.0	
45-49	4.2	2.1	8.5	
Total Fertility Rate	4.2	3.8	4.9	

\* Preliminary, unpublished data

### 1.6 Refugee Children

State Parties shall take appropriate measures to ensure that a child who is seeking refugee status or who is considered a refugee in accordance with applicable international or domestic law and procedures shall, whether unaccompanied or a companied by his or her parents or by any other person, receive appropriate protection and humanitarian assistance in the enjoyment of applicable rights set forth in the present Convention and in other international human rights or humanitarian instruments to which the said States are Parties.

(Convention on the Rights of the Child, Article 22)

Refugee status refers to Palestinians who were forced out of their lands which Israel occupied in 1948. The 2010 data showed that the proportion of refugees in the Palestinian Territory was 44.0% of the total population in the Palestinian Territory. On the other hand, the percentage of refugees in the West Bank is approximately 29.7% of the total population of the West Bank, while in the Gaza Strip, refugees comprise 67.3% of the total residents of the Gaza Strip. Refugee children comprise 44.4% of the total children in the occupied Palestinian Territory; distributed to 29.0% in the West Bank and 67.0% in the Gaza Strip. It is worth mentioning that these ratios and distribution of refugee children conform with the distribution of refugees in general.

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### Chapter Two

### **Health Status**

States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.

### (Convention on the Rights of the Child, Article 24-1)

Understanding the significance of children is necessary in building the future of any society. The ongoing development of the child renders them the impact of surrounding internal and external factors. All UN international conventions have addressed healthcare for every human, child or adult, as a human right; furthermore, the Convention on the Rights of the Child (CRC), considered to be the universal constitution for child rights, addressed the rights of the child to healthcare.

Although the Palestinian National Authority is not a sovereign state, which means that it cannot sign international conventions, it has adopted all aspects of the Convention on the Rights of the Child. The strategy of the National Plan for the Palestinian Child was drafted based on the CRC as a general framework for that strategy. The program focuses on a number of services provided to children, which include areas such as health, education, youth, culture and social affairs. Regarding health, for instance, the program proposes developing the health system to better improve the Palestinian child's health and to make that system accessible to all children and mothers as well. The program further adopts the principle of strengthening health through schools, clinics and the media.

The National Health Plan 1999-2003 addresses the need to improve the quality of health care services for mothers and children at all levels, ensuring equal distribution and optimum access to all levels of care. In addition, it takes into account the Millennium Development Goals, especially those amendments which were added to the fourth and fifth goals, to reduce child mortality by two thirds between 1990 and 2015, and to improve maternal health by reducing maternal mortality by three quarters in the period between 1990 and 2015.

The health status of children can be measured and evaluated through the use of indicators which include infant mortality rate, under five child mortality rate and nutritional status. child's health status is affected by certain factors or direct determinants (factors associated with age and education of the mother and some other background characteristics at birth) and indirect factors (including social and economic situation of the child's family and the availability of health services in general).

### 2.1 Malnutrition

The second target of the first goal of the MDGs points out to reducing by half the proportion of people who suffer from hunger by improving two key indicators: Prevalence of underweight among children under five years of age and proportion of the population below minimum level of dietary energy consumption.

### Eleven out of one hundred of the under-five children suffer chronic malnutrition

Malnutrition in children often begins at birth and is associated with retarded physical and cognitive development. This, in turn, yields serious implications for the overall national development agenda.

Palestine is an exception as malnutrition is on the rise among children under-five. Between the years 2000 and 2010, prevalence of malnutrition rose by 41.3% on the national level while Gaza Strip demonstrated a huge increase of 60.0%.

Currently, 11 out of 100 children under-five suffer chronic malnutrition including 11.3% in the West Bank and 9.9% in Gaza Strip. Hebron governorate had the highest rate at 16.9% compared to the rest of the governorates.

Within this context and as malnutrition in Palestine was largely determined by the worsening political and socio-economic conditions in the country, it is highly relevant to refer to international literature suggesting a strong link between prevalence of chronic malnutrition exceeding 5.0% among the under-fives and the overall national malnutrition profile which in turn is a key poverty/development indicator.

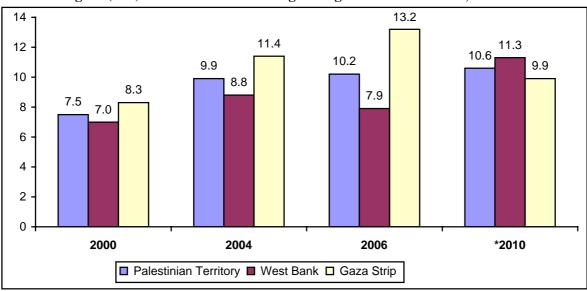


Figure (2-1): Prevalence of stunting among children under five, 2000-2010

\* Preliminary, unpublished data.

### 2.2 Underweight

Underweight is a significant indicator for measuring the prevalence of severe malnutrition rates. Although a decline in underweight rates had occurred between 2000 and 2010, the rates climbed in 2006 and dropped back in 2010 reaching a national rate of 3.7%; 3.8% for the West Bank and 3.5% in Gaza Strip. The rate reached 5.6% for Hebron governorate, 4.8% for Ramallh & Al-Bireh governorate, and 3.9% for Jerusalem governorate. Underweight in Deir Al- Balah and North Gaza and Rafah governorates was; 4.4%, 4.3%, 4.2%, respectively.

Although a drop in underweight rates occurred between 1996 and 2000, the rates climbed up again in 2004 and dropped back in 2010 to reach 3.7% in the Palestinian Territory.

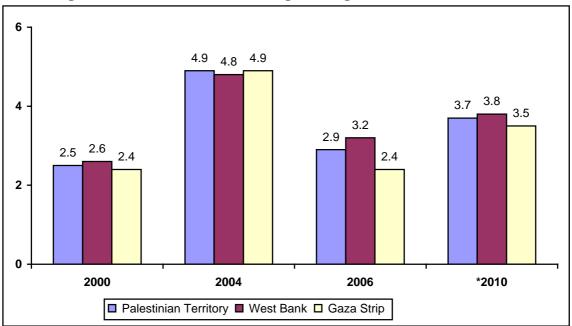


Figure (2-2): Prevalence of underweight among children under five, 2000-2010

\* Preliminary, unpublished data

### 2.3 Infant and Child Mortality

The second item of Article 24 of the Convention on the Rights of the Child indicates the need for Member States to take appropriate measures to reduce infant and child mortality. The Millennium Development Goals and aspirations of societies to a better life are reflected through a series of selected targets that are specified in numbers and clear time frames, during the period between 1990-2015. The countries agreed to reduce rates of poverty and hunger by half, to ensure primary education at a global level, promote gender equality, reduce the mortality rate among children under five years by two thirds, as well as reduce maternal mortality rate by three quarters. Indicators associated with these objectives contribute in monitoring and evaluating national plans and programs. For example, indicators associated with the reduction of child mortality contribute to the process of evaluating the plans and health programs, as well as contribute to designing necessary health policies.

### **Goal 4: Reduce child mortality**

*Reduce by two-thirds, between 1990 and 2015, the mortality rate among the under-fives. In order to achieve this goal, the following targets were defined:* 

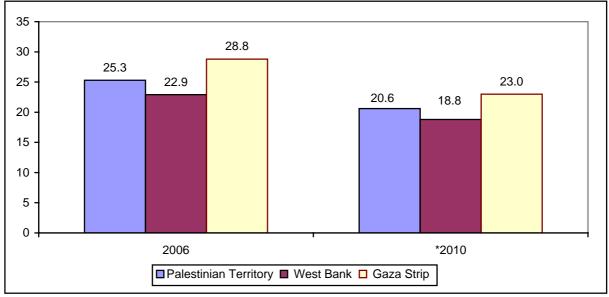
- Infant Mortality Rate (IMR)
- Under-five mortality
- Proportion of one year old children immunized against measles

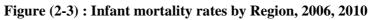
### High mortality rates among infants and the under-fives

Child mortality rates over the last decade in Palestine are comparable to those in upper middle-income countries. However, closer examination of the trends reveals that this is not the true case. From 1994-1999, a drop of 6.6% in the under-five mortality rate occurred, down to 28.7 per 1000 live births from 33.2/1000.

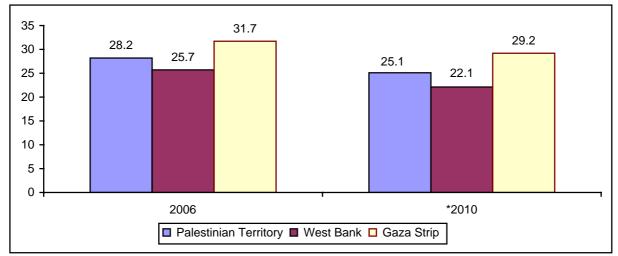
Noticeably, the levels of infant and the under-five child mortality rates were on the decline until 2000 when they started to rise again during the period 2005-2010 due to the high rates of neonatal mortality, which affected the infants' mortality rates in general and reflected higher risk during pregnancy. Infant mortality rate in Palestine reached 20.6 per 1000 live births between 2005 and 2010. While Gaza Strip has the highest of these rates at 23.0 per 1000 live birth.

The under-five mortality rate was 25.1 per 1000 live births between 2005 and 2010. Gaza Strip had the highest rates at 29.2 per 1000 live births compared to the West bank at 22.1 per 1000 live births .





\* Preliminary, unpublished data.





\* Preliminary, unpublished data

### Respiratory infections are main leading causes of infant mortality in the West Bank; Conditions in the perinatal period is main leading cause of deaths among children under five years

Based on Ministry of Health data in 2009, the main leading cause of infant mortality in the West Bank was respiratory tract infections with 34.5%; 35.2% for male children and 33.5% for female. This was followed by congenital anomalies with 16.3%; 16.9% for male children and 15.6% for female children. Infant mortality caused by premature and low birth weight was 13.4%; 13.9% for male children and 12.6% for female children. Infectious diseases were the cause for 9.4% of infant mortality; 14.1% for male children and 3.0% for female children.

According to the data from Ministry of Health in 2009, the main leading cause of deaths among children under five years in the West Bank was conditions in the prenatal period, totaling 36.1%; 37.6% for male children and 34.0% for female children. Causes related to congenital anomalies was 16.8%, and related to infectious diseases was 11.4%.

### About fifth of the children (6-59 months) have anemia<sup>1</sup>

19.4% of children 6-59 months have anemia; 25.6% in the West Bank and 13.4% in Gaza Strip. Qalqilya governorate reported the highest rate of anemia among children; 32.3%, followed by Salfit and Nablus governorate; 19.7 and %19.4% respectively. On the other hand, Deir AL-Balah governorate reported the highest rate of anemia; 41.4%, followed by Gaza and Khan Yunis governorates; 31.3% and 21.8%, respectively.

Regarding degree of anemia, 7.5% of children suffer moderate anemia<sup>2</sup>; 4.4% in the West Bank and 10.7% in the Gaza Strip, while 11.8% have mild anemia<sup>3</sup>; 8.8% in the West Bank and 15.0% Gaza strip.

### 2.4 Differential indicators for child survival (indicators related to maternal health)

### Goal 5: Improve maternal health

*Reduce by three quarters the maternal mortality ratio by 2015 through addressing the following key indicators:* 

- maternal mortality rate and
- proportion of births attended by skilled health personnel.

### High coverage of antenatal care, however, quality of such care is questionable

The data indicate that the majority of women received health care by qualified staff during their pregnancy, the data did not show variation at the level of the West Bank and Gaza Strip.

<sup>&</sup>lt;sup>1</sup> Children with hemoglobin level less than 11.0 g/dl according to World Health Organization (WHO).

Children with hemoglobin level 7.0 g/dl - 9.9 g/dl according to World Health Organization (WHO).

<sup>&</sup>lt;sup>3</sup> Children with hemoglobin level 10.0 g/dl - 10.9g/dl according to World Health Organization (WHO).

Despite the rise in this ratio, still remains the question of quality of service as the episode that needs further research.

# A high proportion of pregnant women (15-49 years) suffer from anemia in spite of high coverage of health care during pregnancy

26.7% of pregnant women aged 15-49 years have anemia; 15.4% in the West Bank and 39.1% in Gaza Strip. Jericho and Al- Aghwar governorate reported the highest rate of anemia among pregnant women; 50.0%, followed by Salfit and Qalqilya governorates; 28.6% and 26.7%, respectively. On the other hand, Khan Younis governorate reported the highest rate of anemia among pregnant women in Gaza Strip; 55.9%, followed by Gaza and Deir el-Balah governorates; 45.1% and 36.8%, respectively.

Regarding the degree of anemia, 12.0% of pregnant women have moderate anemia<sup>5</sup>; 4.1% in the West Bank and 20.6% in the Gaza strip; while 14.7% have mild anemia<sup>6</sup>; 11.2% in the West Bank and 18.7% in the Gaza Strip .

### High rate of safe deliveries but access to the service remains a serious challenge

99.4% of deliveries in 2010 occurred under safe conditions where the West Bank recorded the highest rates; while there is no significant variations between governorates. Rates of deliveries occurring at health facilities rose by 4.9% between 2000 and 2010.

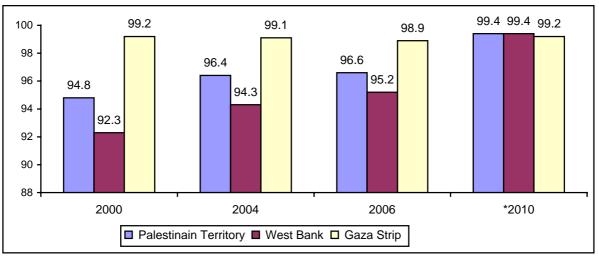


Figure (2-5): Percentage of deliveries occurred at health institutions 2000-2010

\* Preliminary, un published data

Women with hemoglobin level less than 11.0 g/dl according to World Health Organization (WHO).

Women with hemoglobin level 7.0 g/dl - 9.9 g/dl according to World Health Organization (WHO).

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Women with hemoglobin level 10.0 g/dl - 10.9 g/dl according to World Health Organization (WHO).

Tubas governorate has the highest percentage of unsafe deliveries with 2.0% of deliveries occurred under questionable conditions at home or on the way to hospital, followed by Qalqiliya governorate1.4%.

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### Chapter Three

### **Educational Status**

States Parties recognize the right of the child to education, and with a view to achieving this right progressively and on the basis of equal opportunity, they shall, in particular:

A- Make elementary education compulsory and available free to all; B-Encourage the development of different forms of secondary education, make them available and accessible to every child, and take appropriate measures such as the introduction of free education and offering financial assistance in case of need. (Convention on the Rights of the Child, Article 28-1)

The educational sector is one of the most important sectors in the society, which is given special attention by governments since it represents real investment in the future of nations. Educational indicators are used to measure the government and society's performance in providing a suitable environment for children and youths' right to education.

Such concern has had an unequivocal impact in bridging the educational gap between male and female students in basic and secondary education stages since both have recorded approximate comprehensive enrollment of basic school (from first grade to tenth grade). Compulsory education has been expanded from nine years to ten years and the new Palestinian curriculum reform plans were gradually introduced for implementation during the scholastic years 2000-2006. There has also been widening of educational facilities, which have reached areas where they were never before available. Despite the achievements in children's education, we cannot underestimate the future challenges of the educational process.

Educating children occupied a high priority in many national, regional, and international conferences such as Jumetian Conference on Societal Education in 1990, Dakar Conference on Evaluating Education for All in 2000, and the Convention on the Rights of the Child in 1989, which is the most comprehensive convention in the world on human rights. Moreover, human rights conventions have all emphasized providing quality education to children and gave such matters high priority.

Articles 28 and 29 of the Convention on the Rights of the Child stipulate that "State Parties shall make primary education compulsory and available free to all' and that "education of the child shall be directed to the development of the child's personality, talents, and mental and physical abilities to their fullest potential." Therefore, school attainment and receiving good quality education are main factors to achieving such goal. Moreover, four more Articles in the Convention on the Rights of the Child reinforce the comprehensive legal principles of the child's education including: Article 2, which stipulates that "State Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind;" Article 3, which states, "The best interest of the child shall be a primary consideration;" Article 6 states, "That every child has the inherent right to

life...survival and development;" and Article 12, which stipulates, "The child who is capable of forming his or her own views (has) the right to express those views freely."<sup>1</sup>

### 3.1 Students

At the outset of the scholastic year 2009/2010, the number of students enrolled in the basic and secondary stage was 1,113,802 students. Female students constitute around 50.0%. Female percentage varies from one stage to another: in the basic education stage, females constitute 49.4%, compared to 54.1% in the secondary education stage.

In the scholastic year 2009/2010, 13.7% of all students were enrolled in the secondary education stage, and 86.3% were enrolled in the basic stage; 59.4% of all students were enrolled in the basic education stage in the West Bank and 40.6% in Gaza Strip. As for students enrolled in the secondary education stage, this percentage was 58.5% in the West Bank and 41.5% in Gaza Strip.

68.8% of total students were enrolled in governmental schools; 23.4% were enrolled in UNRWA schools, and 7.8% in private schools. The relatively large number of refugee students in Gaza Strip made the educational role of UNRWA in Gaza Strip larger than its role in the West Bank.<sup>2</sup>

There had been a steady increase in the numbers of school students between 1994/1995 and 2009/2010, whereas the percentage of increases in the basic and secondary education stage was 80.3%; 92.9% in Gaza Strip and 72.5% in the West Bank.

### 3.2 Pre-School Enrollment (Enrollment in Kindergarten) in the West Bank

Kindergartens are run by the private sector excluding two kindergartens, which are run by the Ministry of Education. One third of children aged 4-5 joined kindergarten in the scholastic year 2006/2007.

Kindergartens are run by the private sector with the exception of two kindergartens, which are operated by the Ministry of Education. However, according to effective rules and regulations, kindergartens must be licensed by the Ministry of Education.

The increase and decrease of number of kindergarten in the Palestinian Territory is affected by the political situation. The number of kindergarten in the West Bank was 731 in scholastic year 2009/2010; 729 private and 2 are governmental.

The number of kindergarten students in the West Bank was 56,728 students in scholastic year 2009/2010; 48.6% males and 51.4% females.

According to the supervising authority, 56,609 students supervised by private kindergartens, and 119 supervised by governmental kindergartens.

<sup>&</sup>lt;sup>1</sup> UNICEF, *Education for All*, 1999.

<sup>&</sup>lt;sup>2</sup>52.7% of basic education stage children in Gaza Strip were enrolled in UNRWA schools while 9.7% in basic education stage students in the West Bank were enrolled in UNRWA schools during the scholastic year 2009/2010.

The classroom density was 23.9 child per classroom in scholastic year 2009/2010, while the care taker ratio was 18.5 child per care taker.

The number of teachers in the kindergartens was 3,064; 99.5% females and 0.5% are males in scholastic year 2009/2010.

## **3.3 Basic School Enrollment**

Students at the basic stage had increased from 572,529 in the scholastic year 1994/1995 to 961,654 in the scholastic year 2009/2010, marking an increase rate of 67.9%. Females and males constituted 49.4% and 50.6% respectively.

Female enrollment ratio in the basic education stage in the scholastic year 2009/2010 was 97.5 female students per 100 male students among basic school stage; there were 98.9 female students per 100 male students in the West Bank and 95.5 per 100 male students in Gaza Strip.

## 3.4 Secondary School Enrollment

Students at secondary education stage had increased from 45,339 in 1994/1995 to 152,148 students during the scholastic years 2009/2010, reflecting an increase of 235.5%. Female students constituted 54.1% of the total number students in the secondary stage in the scholastic year 2009/2010, compared to 45.5% in 1995/1996.

Academic education is still more attractive than vocational education. The number of students enrolled in vocational high school reached 9,319 in the scholastic year 2009/2010 representing 6.1% of the total number of secondary school students. Female students constituted only 35.6% of vocational high school students. On the other hand, they constituted 55.3% of academic secondary school students.

# 3.5 Schools

The number of schools was 2,577 in 2009/2010: 1,697 basic stage and 880 secondary schools. About 74.4% of schools are in the West Bank and 25.6% are in Gaza Strip.

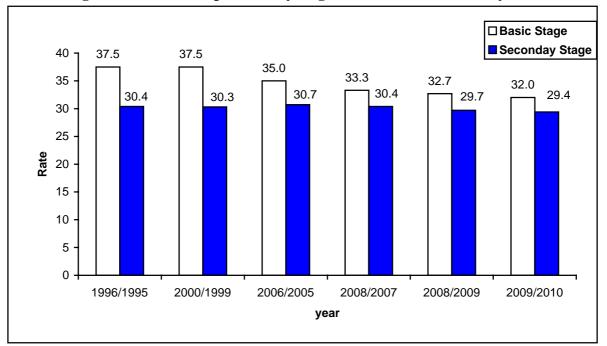
Governmental schools constituted 74.6% of schools in 2009/2010, compared to 12.6% as UNRWA-run schools , and 12.8% as private schools .

The number of schools have increased since the PNA took control over education in 1994. There has been an emphasis on increasing school capacity to accommodate more students. The number of basic schools in 2009/2010 was 1,697, whereas the number of schools in 1995/1996 was 1,098. The number of secondary schools in 2009/2010 was 808, whereas the number of schools in 1995/1996 was 372.<sup>3</sup>

# 3.6 Crowdedness Rate

Classroom density (number of students per classroom) is a good indicator of having the right educational environment. The average number of students per classroom in the scholastic year 2009/2010 was 32.0 at basic stage and 29.4 at secondary stage.

<sup>&</sup>lt;sup>3</sup> Includes schools that have both basic education and secondary school education as well as secondary schools.



Figure(3-1):Students per class by stage and selected scholastic years

**Source: Palestinian Central Bureau of Statistics 2011.** *Education Survey Database. Ministry of Education and Higher Education.* Ramallah-Palestine.

Comparing classroom density according to region, it is noticed that classroom density in basic schools is higher in Gaza Strip than in the West Bank (36.8 students per classroom in Gaza Strip and 29.3 students per classroom in the West Bank in 2009/2010). At the secondary stage, class density was 38.7 in Gaza Strip and 25.1 in the West Bank in 2009/2010.

The case worsens at UNRWA schools where classroom density in the basic stage was 37.0 compared with 32.5 students at governmental schools. However, the figure for private schools was 25.6 students per classroom in 2009/2010 (UNRWA does not provide secondary stage education).

#### **3.7** Teachers in Schools in the West Bank

The number of teachers in schools in the West Bank was 29,390 in the scholastic year 2009/2010 (12,162 male teachers and 17,228 female teachers).

78.1% of teachers teach at governmental schools, 7.1% teach at UNRWA schools, 14.8% teach at private schools in the West Bank.

The number of students per teacher at governmental schools was 23.2 in 2009/2010; in UNRWA schools, the figure was 26.7, while in private schools it was 16.9.

In 2009/2010, about 21.2% of teachers at basic and secondary schools have associated diploma, 78.3% have BA degree and above, 0.5% have secondary school certificate.

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Chapter Four

### **Children In Need of Special Protection**

This chapter attempts to analyze data and information on a specific age group referred to as "children in need of special protection." This group comprises a variety of children subgroups experiencing difficult life circumstances hampering their mental and physical wellbeing. Sub groups are usually identified according to the type of difficulty they encounter or due to:

- Children's separation from their parents due to institutionalization, hospitalization, family de-unification, adoption, or deprivation from family environment (CRC, Articles 9, 10, 20, and 21).
- Other subgroups in need of special protection are children subject to all kinds of physical, sexual and mental/emotional abuse (CRC, Articles 19 and 34).
- Disabled children (CRC, Articles 23).
- Poor children (CRC, Articles 26 and 27).
- Employed children (CRC, Article 32).
- Children exploited to the use, sale and trafficking of drugs (CRC, Article 35).
- Children deprived of their liberty or receiving juvenile institutional care (CRC, Articles 37 and 40).
- Children afflicted by violence and armed conflicts (CRC, Articles 38 and 39).

Though many countries make serious efforts to ensure children's full enjoyment of their rights, as stated in the United Nations Convention on the Rights of the Child-1989, this convention has not yet been implemented anywhere. This is very hard to accomplish especially given the number of uncontrollable political, economic and social factors involved. Undoubtedly all these factors have negative effects on children in general, and those in need of special protection, in particular. Furthermore, children experience a number of dramatic events resulting from individuals belonging to their environments such as negligence, abuse, exploitation, and violence from persons who should be their caretakers.

## 4.1 Children Living in Poverty

19.9% of Palestinian households are childless, while the vast majority of Palestinian households; 80.1% are with children. Hence, meaningful comparisons in poverty status should be carried out for households with a different number of children rather than merely between childless households and the rest.

The poverty rate in 2010 indicated that the rate of the total distribution of poverty among Palestinian households in the Palestinian Territory was 21.4% in 2010 (using consumption data), of which 22.8% is among households with children and 15.8% is among households without children.

More significant is the fact that the poverty data indicated that 16.0% of the households in the West Bank were suffering from poverty in 2010 (16.4% among households with children and 14.6% among households without children), while 31.9% of households in Gaza Strip were suffering from poverty in 2010 (34.4% among households with children and 18.8% among households without children).

# Table (4-1): Likelihood of being poor among households according<br/>to households monthly consumption by region, 2010

Region	With C	Children	With out Children Total		Total	
rtegion	Value	Contribution	Value	Contribution	Value	Contribution
Palestinian Territory	22.8	100	15.8	100	21.4	100.0
West Bank	16.4	46.2	14.6	66.4	16.0	49.1
Gaza Strip	34.4	53.8	18.8	33.6	31.9	50.9

**Source: Palestinian Central Bureau of Statistics**, **2011**. *data base of Palestinian Expenditure and consumption survey*, 2010. .(*unpublished data*)- Ramallah- Palestine.

26.9% of children in the Palestinian Territory were poor in 2010; 19.0% in the West Bank, and 38.4% in Gaza Strip.

Table (4-2): Percentage of children	n in poverty by region, 2010
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Region	Poverty	Deep poverty
Palestinian Territory	26.9	14.6
West Bank	19.0	8.8
Gaza Strip	38.4	23.1

**Source: Palestinian Central Bureau of Statistics**, **2011**. *data base of Palestinian Expenditure and consumption survey*, 2010. .(*unpublished data*)- Ramallah- Palestine.

## 4.2 Number of Childen in the household

With the exception of childless households, the incidence of poverty increases consistently by the additional number of children among households. Households with the least incidence of poverty are those with 1-2 children. The picture remains essentially the same when other poverty indexes are used to reflect the depth of poverty.

Number of Childen	Р	Poverty		
Number of Childen	Value	Contribution		
0	15.8	14.6		
1-2	16.4	19.4		
3-4	20.6	29.2		
5-6	28.2	23.8		
7+	43.0	13.0		
Total	21.4	100		

 Table (4-3): Likelihood of being poor among households according to households monthly consumption by number of children in the household, 2010

**Source: Palestinian Central Bureau of Statistics, 2011**. data base of Palestinian Expenditure and consumption survey, 2010. .(unpublished data)- Ramallah- Palestine.

## 4.3 Child Labor

Children in the age group (10-17) years in the Palestinian Territory during the year 2010 accounted for 20.4% of the total population. The results of the Labor Force Survey, 2010 show that paid or unpaid employed children comprise 3.7% of all children, 6.3% males and 1.1% females (5.7% in the West Bank and 0.6% in Gaza Strip) in 2010.

#### The Concept of Child Labor

It has recently been acknowledged to differentiate between two kinds of child labor, 'acceptable' and 'unacceptable' kinds because an overall and general look at all child labor distorts the problem. This view leads to extra difficulties concerning ending the violations. The extent of the impact of child labor on a child's growth is the main criterion to decide when it becomes a problem. For example, safe work for adults may be harmful for children. The following are the main growth characteristics of children which are affected by child labor: physical growth, including general health, physiological growth, sight and hearing, knowledge development ability, reading, writing, calculating and gaining necessary knowledge for daily life, emotional development; self esteem, family unity, love and accepting others, and social and moral development; being a member of a group, cooperation and distinguishing between wrong and right.

The prevalence of the child labor phenomenon in Palestinian society has become a cause for concern which demands greater interest and effective procedures to stop it from expanding. Many studies in different countries highlighted the negative impact of this phenomenon on the political, social and economical structure of the society and the future of the young. It is also a severe violation of the most basic of children's rights. The argument in this area has two main dimensions: using laws and legislation to overthrow this phenomenon, and an indepth understanding of the social, cultural, economical and political factors causing, reinforcing and controlling it.

Background characterstics	employed	Un-employed	Total
Palestinian Territory	3.7	96.3	100
West Bank	5.7	94.3	100
Gaza Strip	0.6	99.4	100
Sex			
Males	6.3	93.7	100
Females	1.1	98.9	100
Age			
10-14	2.3	97.7	100
15-17	6.1	93.9	100

Table (4-4): Percentage distribution of children 10-17 years by employment status and selected
characterstics, 2010

**Source:** Palestinian Central Bureau of Statistics, 2011. Labor Force 2010 - Labor Force Database.(unpublished data)- Ramallah- Palestine.

#### The Educational Status of Children in Labor

There is a relationship between employed children and their educational level and attainment, the family economic conditions, and the social position concerning education because working entails leaving school. About 24.3% of children not attending school are employed. Consequently, their earning continues to be continuously low even in adult age. In some cases, some parents consider education a waste of time. They sometimes 'sacrifice' by having one or two sons leave school and contribute to the family income for educating their brothers. Expenses of education, to some families, are considered a direct loss (fees, stationery and clothes) and indirect loss (losing children's supposed income) all of which makes children's learning a heavy burden on parents. It sometimes happens that some children do not go to school or drop out for many reasons: failing in the class which is harmful to children's psychology or costly to poor families, physical punishment and continuous beating, unsuitable timing of study for children working in agriculture, distant studying place (mainly for girls) and the absence of transportation.

In addition, 2.3% of children students are employed (of which 3.6% in the West Bank and 0.1% in Gaza Strip; 3.6% males and 1.0% females); while 24.3% don't go to school (of which 33.4% in the West Bank and 7.8% in Gaza Strip; 33.1% males and 3.2% females).

Table (4-5): Percentage distribution of children 10-17 years by school attendence, Labour Force
Status, Region and sex, 2010

Region and Sex	Attendi	ding school Not-attend		ding school	
	work	Not work	work	Not work	
Palestinian Territory	2.3	97.7	24.3	75.7	
West Bank	3.6	96.4	33.4	66.6	
Gaza Strip	0.1	99.9	7.8	92.2	
Sex					
Males	3.6	96.4	33.1	66.9	
Females	1.0	99.0	3.2	96.8	

**Source: Palestinian Central Bureau of Statistics**, **2011**. Labor Force Survey 2010 - Labor Force Database.(unpublished data)- Ramallah- Palestine.

#### Children Who are Unpaid Family Workers

Working in agriculture is the most familiar job for such children. They participate in carrying water, grazing animals, picking crops, and eventually even more tiring jobs. Such jobs may be useful if confined to that work or income-generating activities. Such jobs create self- reliance

and importance. But children's participation in family work is of no value. It takes their time away from their studying and halts the growth of their delicate bodies and deprives them from enjoying their rights and chance for growth.

About 63.0% of working children in Palestinian Territory work for their families as unpaid workers; 94.2% females and 57.9% males, 31.4% are paid and work outside the family; 3.0% females, 36.1% males, and 5.6% are employers or self employed. Moreover, 47.6% of working children in Palestinian Territory work in agriculture (49.0% in West Bank and 24.7% in Gaza Strip); while 27.1% work in commerce, restaurants and hotels (24.9% in West Bank and 62.1% in Gaza Strip). Additionally, 25.3% work in other economic activities such as (recycling industry, construction, transportation, services); 26.1% in West Bank and 13.2% in Gaza Strip.

	region, 2010		
Economic Activity	West Bank	Gaza Strip	Palestinian Territory
Agricultural, hunting & foresting	49.0	24.7	47.6
Commerce & restaurants & Hotels	24.9	62.1	27.1
Other economic activities	26.1	13.2	25.3
Total	100	100	100

 Table (4-6): Percentage distribution of employed children 10-17 years by economy activity and region, 2010

**Source: Palestinian Central Bureau of Statistics, 2011**. Labor Force Survey 2010 - Labor Force Database.(unpublished data)- Ramallah- Palestine.

The average daily wage for children (10-17) years was 48.0 shekels with average weekly working hours of 44.4 hours in 2010.

## 4.4 Detained children

No child shall be deprived of his or her liberty unlawfully or arbitrarily. The arrest, detention or imprisonment of a child shall be in conformity with the law and shall be used only as a measure of last resort and for the shortest appropriate period of time. (*Convention on the Rights of the Child, Article 37*).

The Israeli occupation deprives detained Palestinian children from their basic rights awarded by international agreements regardless of their religion, race or ethnicity. These rights prohibit random imprisonment, and guarantee knowing the reason of imprisonment, the right of having a lawyer, informing families about the reason and place of their children's imprisonment, connections to the outside word, refuting the allegations and having human and dignified treatment. Many international charters state that torturing children is taboo in prisons and jails:

"Torturing, severe punishment, inhuman and undignified treatment are prohibited. "(*International Declaration of Human Rights, Article 5*).

"Every member country undertakes that all kinds or torturing are war crimes in its criminal law including any person involved in torturing."

(Convention Against Torture, Article 4).

"No exceptional conditions such as war condition or threatening by war or any political instability or crises and emergency cases are excuses for torturing." *(Convention Against Torture, Article 2-2).* 

"Each is prohibited from taking any measure of such a character as to cause the physical suffering or extermination of Protected Persons in their hands. This prohibition applies not only to murder, torture, corporal punishments, mutilation, and medical or scientific experiments not necessitated by the medical treament of a Protected Person but also to any other measures of brutality whether applied by civilian or military agents."

(The Fourth Geneva Convention, Article 32)

Despite these charters and international agreements, Israel violates these norms and practices by using extreme types of psychological and physical punishment against Palestinian children in jails not only during interrogations but during other stages.

These quotations talk about young and old individuals. But the Convention on the Rights of the Child, Article 37-d, states that: "Every child deprived of his or her liberty shall have the right to prompt access to legal and other appropriate assistance...before a court or other competent, independent and impartial authority..."

In many cases, lawyers do not have easy access to their clients who are also judged in courts for adults. Moreover, children of Jerusalem are jailed with Jewish criminals who threaten their lives. It is worth mentioning that Israel is a signatory to all treaties and international charters for children.

Israel practices racial discrimination against Palestinian children. It has a double-standard law when dealing with Jewish children who receive a fair judgment. Furthermore, Israel considers Jewish children to be those under18 while Palestinian children are those under 16 years old.

According to the data of the Ministry of Detainees Affairs in 2011, the Israeli occupation authorities are holding 221 child in the age group13-18 years, amid harsh conditions and flagrant violations of all rights. The Ministry of Detainees Affairs had also revealed that among these children, there were more than 34 child under the age of 16 years. Detained children constitute about 3.7% of the total detainees in Israeli jails.

According to the same source, the Israeli occupation authorities exercise harsh methods of arrest and interrogation of Palestinian children in Occupied Palestinian Territory. Furthermore, the Israeli occupation authorities deprive detained children of the most basic rights granted by international and human rights conventions, specifically the right to not be subjected to arbitrary arrest, the right to know the reason for the arrest, the right to have an attorney, the right of families to know the cause and place of detention, the right to appear before a judge, the right to object to charges and challenge them, the right to communicate with the outside world, and the right to humane treatment that maintain the dignity of the detained child.

#### **Torture of Children in Israeli jails**

According to the Ministry of Detainees Affairs in 2011, the Israeli occupation authorities use detention and interrogation methods against children in the same manner as with adult detainees. Children detainees are subjected from the moment of arrest to varying types of

torture, humiliation, and cruel treatment. Children detainees are forcefully and brutally taken away from their homes in late night hours and are subjected to degrading treatment while being transported to detention centers. In addition, these children are usually subjected to various methods of investigation along with unfair arbitrary court procedures.

Interrogation methods with children include the beating with focus on the upper body parts and head, body burning with cigarette, threat to deport their families, head sacking, blowing up homes, cuffing hands and legs, blindfolding, the use of electric shocks, and ghosting (forced to stand up against the wall with hands up for long period of time). In addition, the Israeli authorities exercise inhumane interrogation methods that include deprivation of sleep for several days, applying psychological stress, insults and verbal abuse, as well as violent shaking (carrying the child and shake him frequently till the child loses conscious).

Detained children are also subjected to torture methods such as spraying them with cold and hot water for long periods, forcing them to eat ice cubes, in addition to applying loud noise to the ears causing great harm and psychological stress to the detained child.

According to the same source, the most serious type of torture and interrogation that children suffer is to confine them in same detention room notoriously known as "disgrace rooms" with collaborators in order to extract confessions deceptively, as well as to threaten detained children with imprisonment for long periods, demolition of their homes as well as the arrest of members of the family, if they do not cooperate with Israeli intelligence.

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