



**Palestinian Central Bureau of Statistics
Child Statistics Series (No. 15)**

**Palestinian Children –Issues and Statistics
Annual Report, 2012**

April, 2012

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Preface

The availability of statistics on children in the world has improved since 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 dish its fifteen 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 2012

**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.

Anemia among children:

Children aged 6-59 months with a hemoglobin level of less than 11.0 g\dl, according to WHO.

Anemia among women:

Women aged 15-49 with a hemoglobin level of less than 12.0 g\dl, according to WHO.

Basic Stage:

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

Breast feeding:

Refers to the method of feeding infants and children and is defined as a child fed breast milk directly from the breast or expressed.

Communication disability/difficulty:

Inability to exchange information and ideas with others and engage with them through the use of speech, or use signs, or write the information they want to share with others. This may be due to the result of a deficiency in hearing or speech, or lack of intellectual capacity to interpret and understand others.

Computer Use:

For the purposes of this survey, defined as the basic use of the computer (during the last twelve months), such as opening the computer and files, creating, copying, pasting, and saving files

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.

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.

Death Causes:

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

Diarrhea:

The passage of loose or liquid stools more frequently than is normal for the individual. Diarrhea may be defined as it is understood by respondents or mothers. The interviewers used the mother's definition in this survey.

Disability/difficulty:

Individuals with disabilities include those who have long-term physical, mental, intellectual, or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others.

Domestic violence:

Violence is any act or failure to act of a household member against another member in the household for the purpose of causing physical, sexual or psychological abuse, or the threat of physical, sexual or psychological abuse, or generates fear. It also includes the deprivation of basic rights such as shelter, food, drink, clothing, education, freedom of movement and loss of self-determination and self security.

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.

E-mail:

A means for the exchange of messages, texts, and attached files among Internet or intranet users.

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.

Governmental Schools:

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

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.

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".

Hearing disability/difficulty:

The question determines individuals who have some hearing difficulties that contribute to the reduction of their ability to perform any part and aspect of their day, such as difficulty

hearing someone talking in a busy place or with noise, or cannot hear someone speak directly and at normal volume (without shouting or higher volume), and determine whether they are unable to hear with one ear or both.

Height for Age:

This parameter reflects the achieved linear growth and its deficit. indicates long-term cumulative inadequacies of health or nutrition. Two related terms are used when describing this parameter: length and stature. Length is the measurement while in a recumbent position and is used for children under 2 years of age, while stature refers to standing height. For simplification, the term height is used for both measurements in this report. Low height for age (below $-2SD$ of the NCHS/WHO reference) ranges from 5 to 65% among less-developed countries. In low prevalence countries, it is most likely due to normal variation, i.e. shortness: in less-developed countries it is likely to be due to a pathological process, resulting in stunting. A pathological process can be from the past or a continuous process.

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.

Internet Use:

For the purposes of this survey, defined as the basic uses of the Internet (during the last twelve months), such as access to certain sites, reading newsletters, and downloading files or programs from the Web.

Kindergarten:

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

Learning disability/difficulty:

Inability to understand things or deal with others. It includes difficulty with intellectual functions due to a condition such as an acquired brain injury, Downs Syndrome, brain damage at birth, difficulty with interpersonal skills due to any condition such as autistic spectrum disorders, or difficulty in learning everyday skills such as reading, writing, and using simple equipment.

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”.

Mental disability/difficulty:

Individuals who suffer from stress, anxiety, uncertainty, and depression, as well as those with difficulties performing daily activities because of drug or alcohol abuse and addiction.

Mobility disability/difficulty:

Individuals who have difficulties to navigate and walk on foot, which may limit or not the performance of daily activities. For example, may find it difficult to walk a short distance, or a problem going up and down stairs or uneven terrain, or cannot walk any distance without a break or stop, or cannot walk without relying on a stick, or crutch, or walking device, or cannot stand on their feet for more than a minute and need a wheelchair for movement from

one place to another. It covers disabilities or difficulties that people with disability face inside or outside homes. It also covers difficulties that people face during walking for more than 15 minutes.

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.

Physical violence:

A behavior directed against the body. Physical violence is practiced through punching, hair-pulling, arm-twisting, pinching, slapping, kicking, strangling, scorching, pulling, dragging, killing, and beating. It is used to express physical power. The victim of physical violence is usually the weaker person.

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.

Psychological violence:

It is a type of violence reflected in a psychological behavior or bad treatment, disdain, and despise of people. It is done through the use of cursing and insults by the person who practiced violence., breaking things that belong to the person, shouting and yelling at, name-calling, mocking using demeaning names, forcing to do specific acts, throwing out of the house, locking up in the house, terrorization, continuous threatening, and forcing. Psychological violence is used to cause anxiety fear, psychological damage, degrading, making one feel negative, weaken physical and mental capacities, harming other people and destroy capabilities, shaking self-confidence, undermining self-respect,. Psychological violence destroys self-confidence, causes body harm, loss of self-confidence.

Remembering and concentrating disability/difficulty:

Includes difficulties in the following: memory, concentration, decision-making, understanding speech, reading, identifying individuals, directions and using a map, calculations, reading and thinking, such as individuals who have difficulty in understanding and performing daily activities. For example, finds it difficult to find locations, cannot focus on work, or forgets where they are or forgets which month it is, forgets to take medication or to eat, lacks understanding and knowledge of what is going on around him. It also includes the person's inability to understand things or deal with others. It includes forgetting to do something important, people who suffer from lack of memory like where things have been put in the house, as well as difficulty in concentration on doing things for more than 10 minutes.

Repeater:

A student who fails one or more subjects and therefore is not promoted to the following grade.

Satellite:

A satellite stationed in geosynchronous orbit that acts as a microwave relay station, receiving signals sent from a ground-based station, amplifying them, and retransmitting them on a different frequency to another ground-based station. Satellites can be used for high-speed transmission of computer data.

School:

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

Secondary Stage:

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

Seeing disability/difficulty:

Individuals who have some difficulties in vision that limits their ability to perform their daily duties, for example, may not be able to read, or see road signs while driving a car, may not be able to see well with one eye, or tunnel vision, or problem with vision that they perceive to be a problem. All individuals are asked whether they wear glasses or not, and must be reminded to wear glasses or contact lenses.

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.

Student/Pupil:

Any one attends an educational institution.

Suspected Pneumonia:

Children aged 0-59 months who suffer from coughing during the two weeks preceding the survey, who are short of breath or have difficulty breathing due to a problem in the chest or in both the chest and a blocked nose.

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.

Under-5 Mortality:

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

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.

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.

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.

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 a 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.

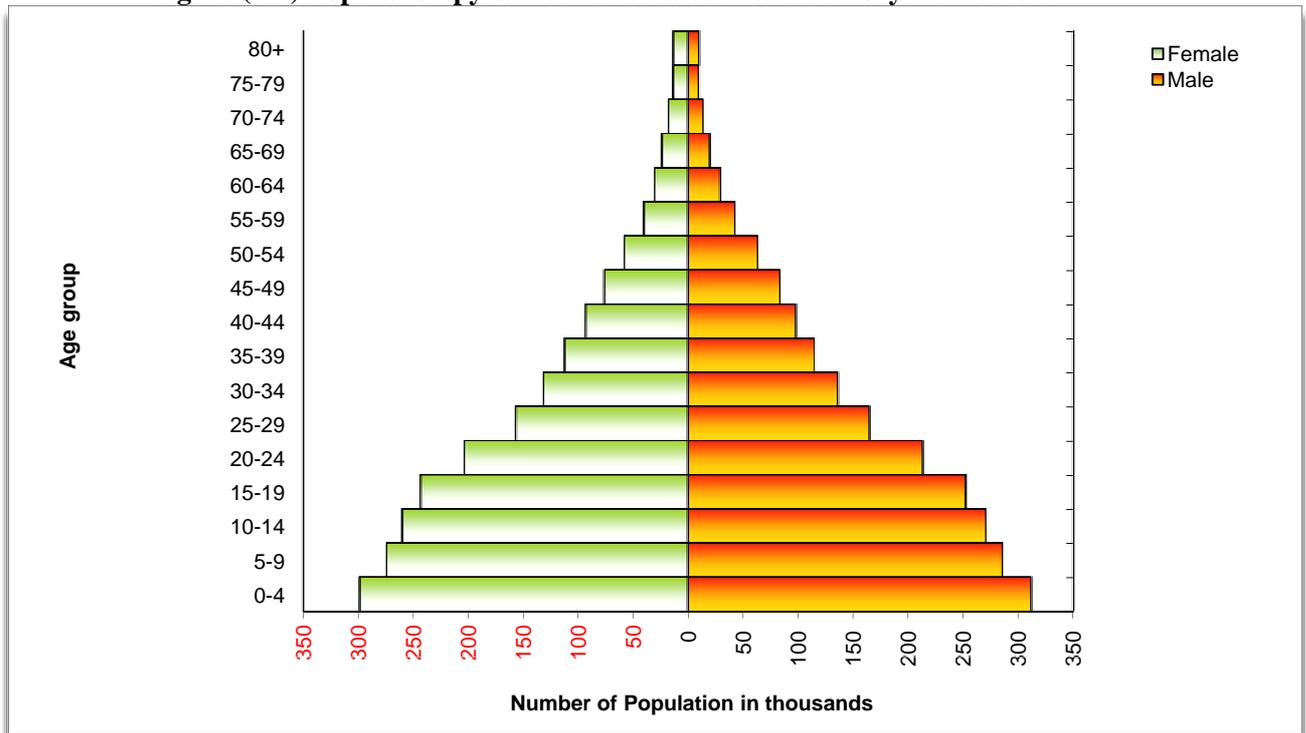
The Convention on the Rights of the Child, adopted by United Nations General Assembly in 1989, constitutes the highest standard of attention to children, since this declaration includes a number of principles aimed at providing guarantees for survival, development and protection of children. The implementation 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 2011, is 4.17 million of whom 2.58 million are in the West Bank; 61.9%, and 1.59 million people in Gaza Strip; 38.1% in 2011.

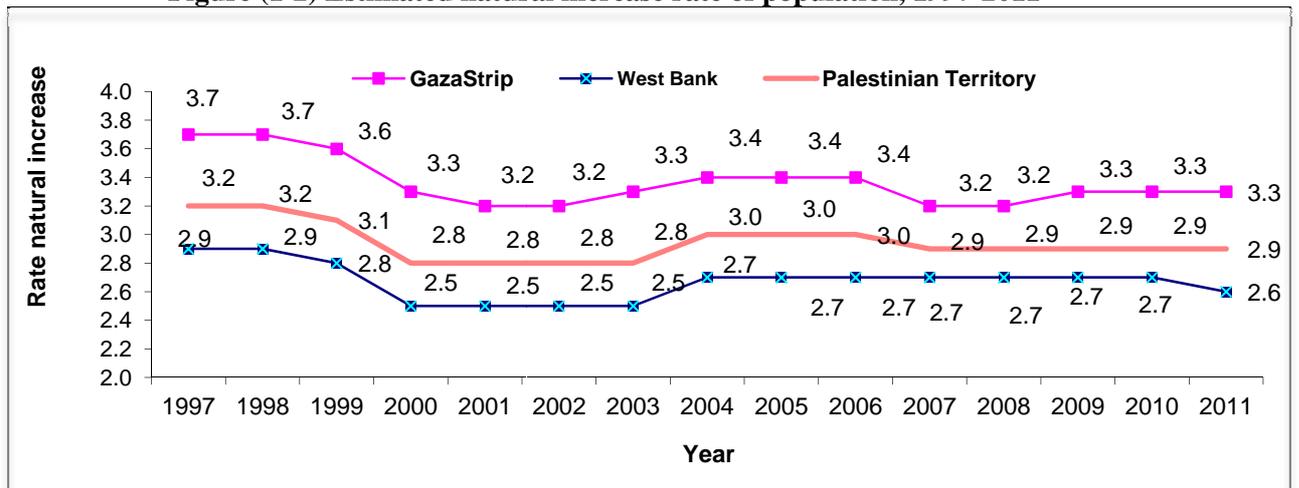
Figure (1-1) Population pyramid in the Palestinian territory in mid 2011



Source: Palestinian Central Bureau of Statistics, 2012. 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 18 years 48.2%, 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, 1997-2011



Source: Palestinian Central Bureau of Statistics, 2012. 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

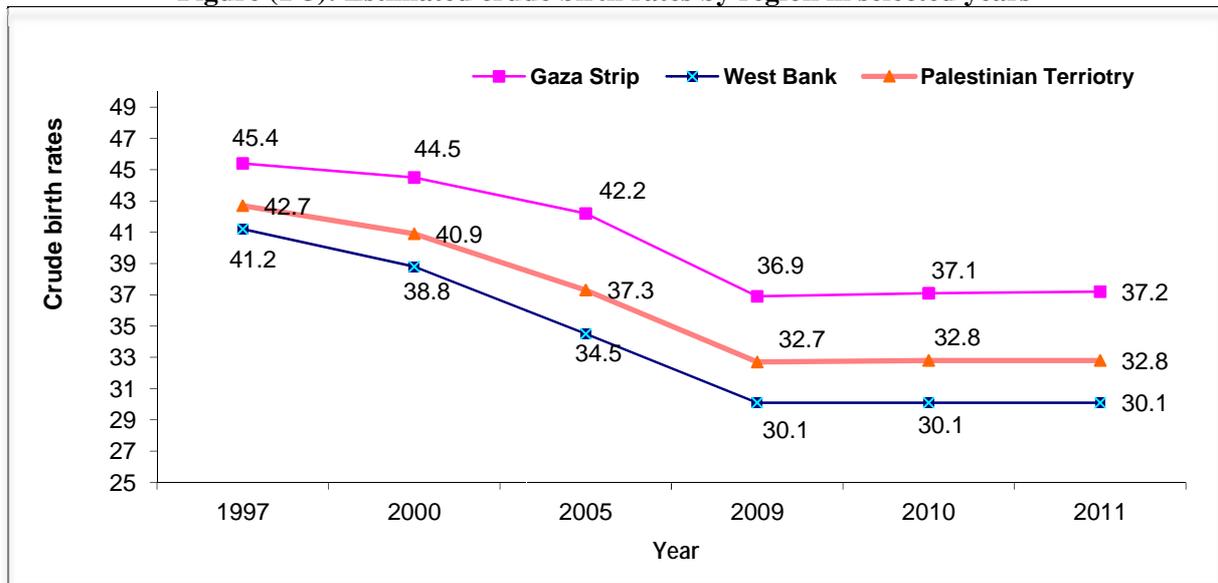
natural increase in the population of the Palestinian Territory was 2.9% in mid 2011. This is one of the highest rates in the world, since the average annual rate does not exceed 1.2%. The growth in the West Bank was estimated mid-2011 at 2.6% versus 3.3% in the Gaza Strip.

1.2 Birth Rates

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Figure (1-3): Estimated crude birth rates by region in selected years



Source: **Palestinian Central Bureau of Statistics, 2012.** 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 2.01 million in the Palestinian Territory in 2011. 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 2011. 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 2011 in both the West Bank and Gaza Strip, which was 30.1 and 37.2 respectively.

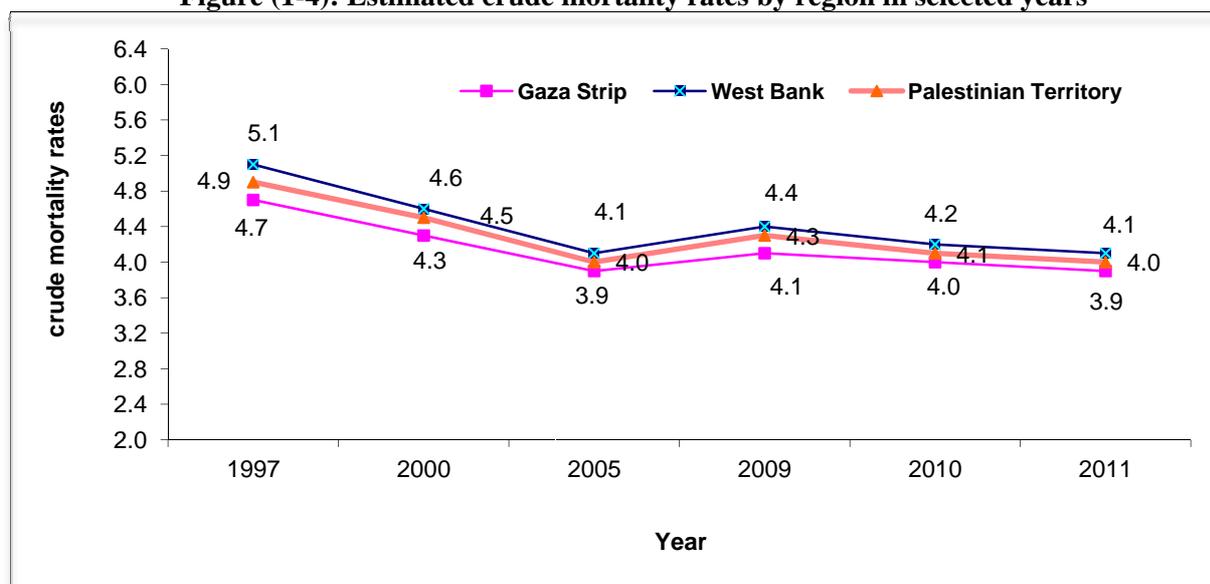
1.3 Mortality

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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 4.0 per one thousand in 2011, 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 4.1 per one thousand in 2011; while the crude mortality rate was estimated in the Gaza Strip at 4.7 per one thousand in 1997 and declined to 3.9 per one thousand in 2011. 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.

Figure (1-4): Estimated crude mortality rates by region in selected years



Source: Palestinian Central Bureau of Statistics, 2012. Revised estimates 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 20.1 and 25.4 years for females and males respectively, in 2010. The mean age of marriage among those who have a bachelor or higher degree was 23.7 years for females and 26.8 years for males in the West Bank in 2010. 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 16.9 for females and 24.5 for males.

Of all women who got married in 2010, 21.8% were under the age of eighteen years compared with 0.9% for males.

1.5 Fertility

Current Fertility levels

Data showed specific age 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

Age group	Region		
	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

Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine.

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 accompanied 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 2011 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 West Bank was 30.0% of the total population of the West Bank, while in the Gaza Strip, refugees comprise 67.0% of the total residents of Gaza Strip. Refugee children comprise 44.0% of the total children in the occupied Palestinian Territory; distributed to 29.0% in the West Bank and 66.0% in Gaza Strip. It is worth mentioning that these ratios and distribution of refugee children conform with the distribution of refugees in general.

References

- **Palestinian Central Bureau of Statistics, 2011.** Palestinian Family Survey 2010, Main Report. **Ramallah -Palestine.**
-

- **Palestinian Central Bureau of Statistics, 2012.** Data Base, marriages and divorces, 2010. **Ramallah-Palestine.**
-

- **Palestinian Central Bureau of Statistics, 2012.** Revised estimate based on the final results of Population, Housing and Establishment Census 2007. **Ramallah-Palestine .**
-

- **Palestinian Central Bureau of Statistics and Ministry of Social Affairs, 2011.** Data Base, *disabled Individuals Survey, 2011, Main Findings Report.* **Ramallah - Palestine.**

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.

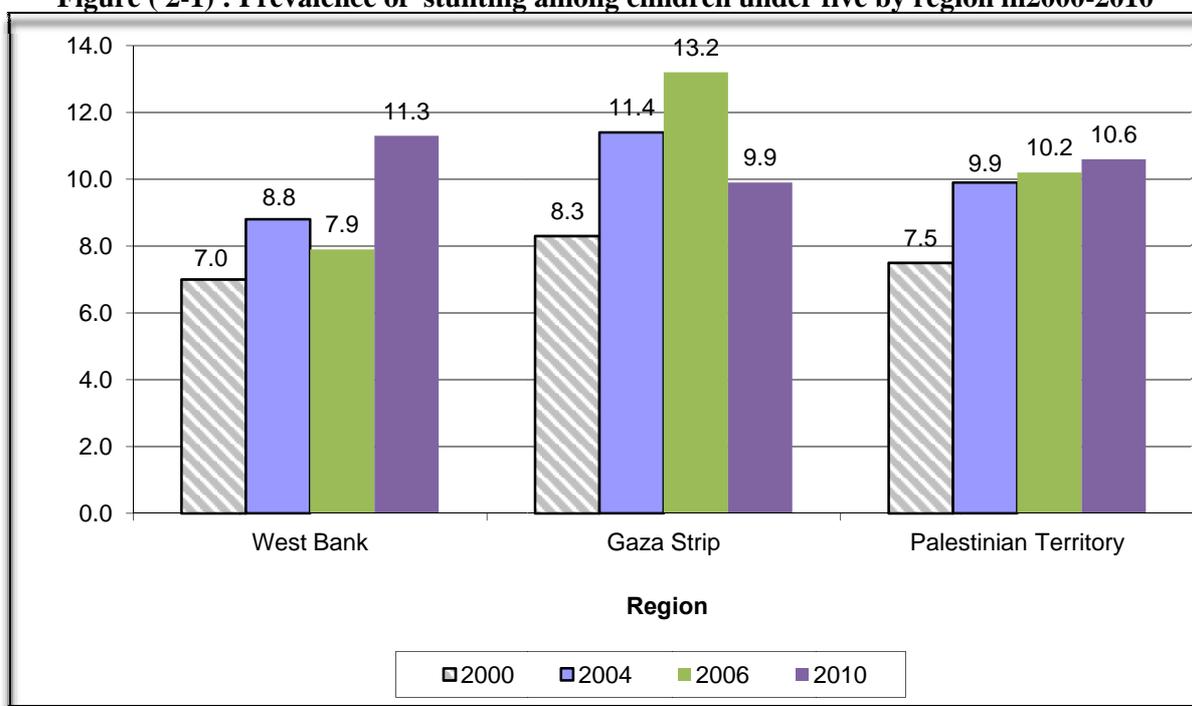
Eleven Out of One Hundred of the Under-Five Children Suffer of Chronic Malnutrition

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.

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 by region in2000-2010

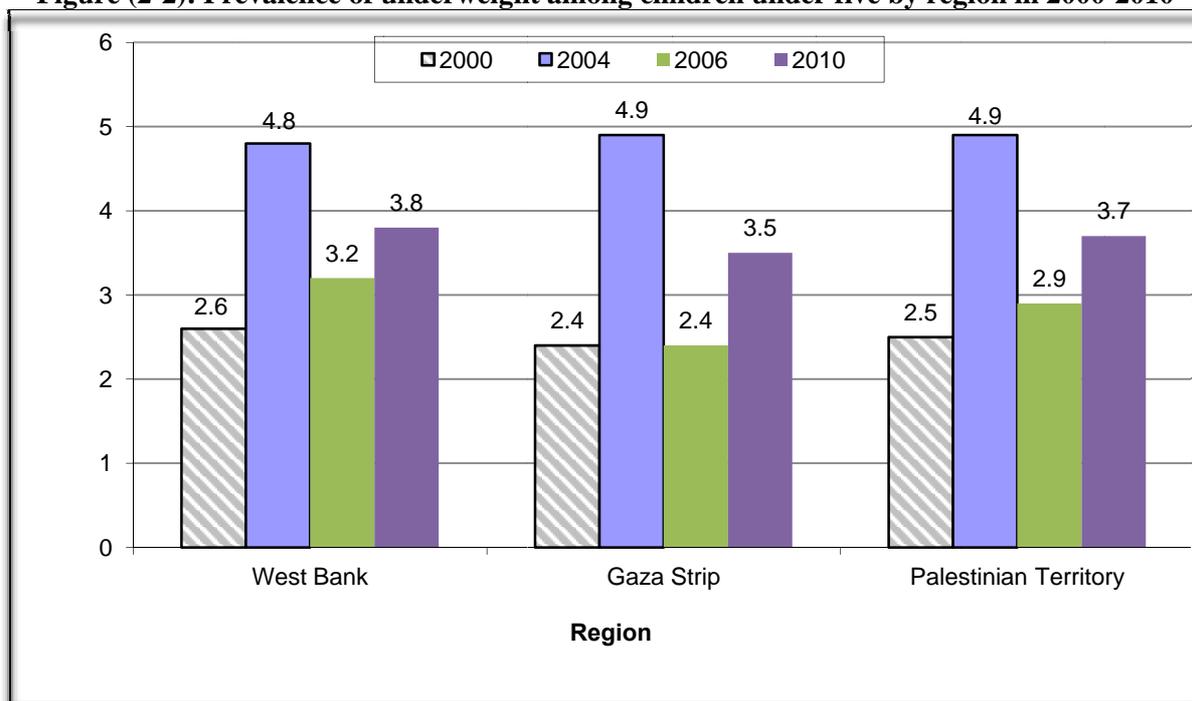


Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine.

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 Ramallah & 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 climbed in underweight rates occurred between 2000 and 2004, the rates decline again in 2006 and climbed up in 2010 to reach 3.7% .

Figure (2-2): Prevalence of underweight among children under five by region in 2000-2010

Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

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

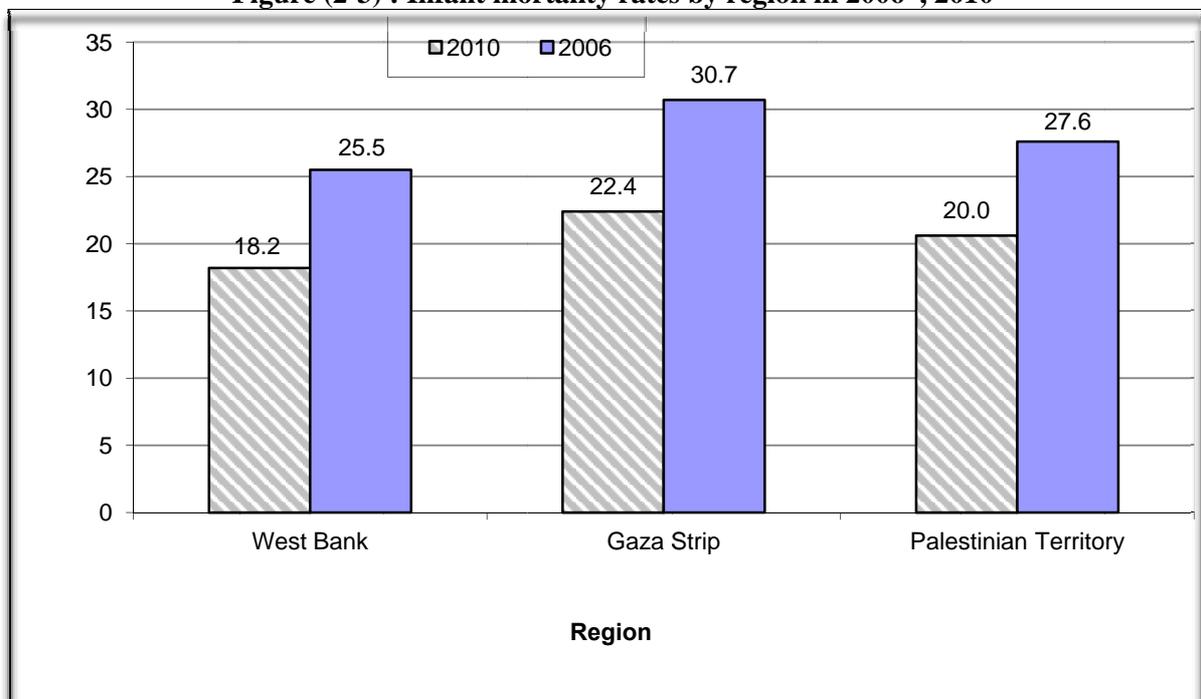
Child mortality rates over the last decade in Palestine are comparable to those in upper middle-income countries. However, closer examination of the trends reveals that this is not

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 2006-2010 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 20.0 per 1000 live births between 2006 and 2010. While Gaza Strip has the highest of these rates at 22.4 per 1000 live birth.

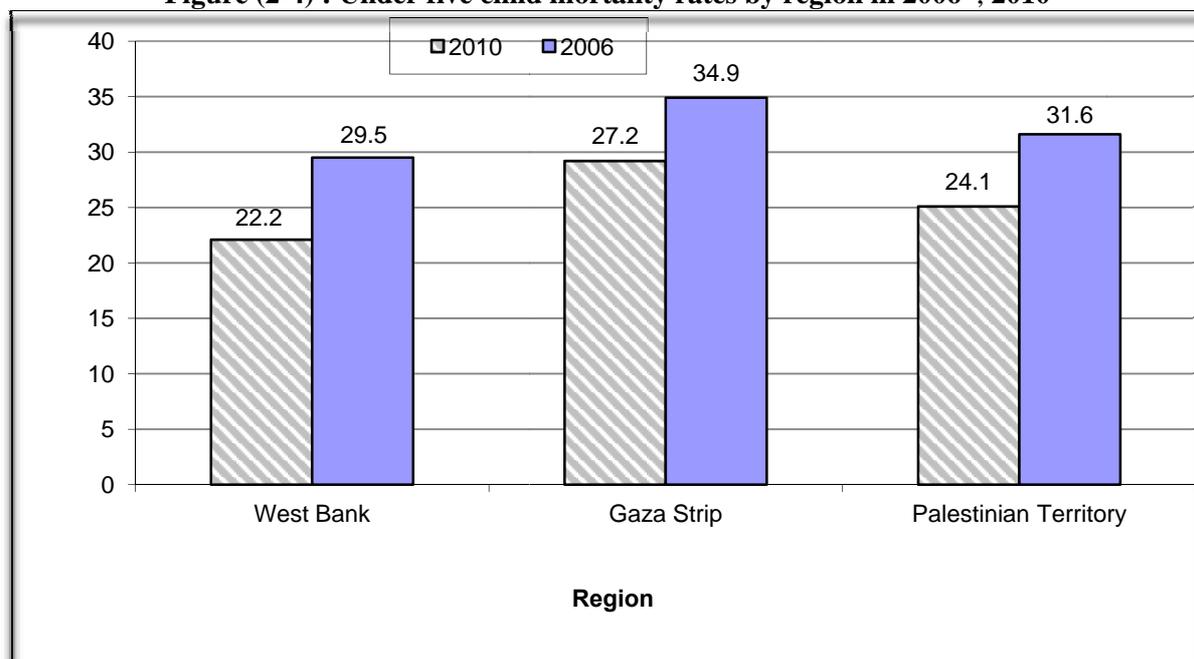
The under-five mortality rate was 24.1 per 1000 live births between 2006 and 2010. Gaza Strip had the highest rates at 27.2 per 1000 live births compared to the West Bank at 22.2 per 1000 live births .

Figure (2-3) : Infant mortality rates by region in 2006*, 2010



Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

- Represents the period 2002-2006

Figure (2-4) : Under five child mortality rates by region in 2006*, 2010

Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

- Represents the period 2002-2006

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

Based on Ministry of Health data in 2010, the main leading cause of infant mortality in the West Bank was respiratory tract infections with 37.6%; 37.5% for male children and 37.7% for female. This was followed by congenital anomalies with 19.0%; 18.7% for male children and 19.3% for female children. Infectious diseases were the cause for 12.2% of infant mortality; 12.7% for male children and 11.5% for female children. Infant mortality caused by premature and low birth weight was 11.3%; 11.6% for male children and 10.9% for female children.

According to data from Ministry of Health in 2010, the main leading cause of deaths among children under five years in the West Bank was conditions in the prenatal period, totaling 38.0%; 34.6% for male children and 42.3% for female children. Causes related to congenital anomalies was 18.0%, and related to Septicaemia was 11.1%.

About fifth of the children (6-59 months) have anemia¹

19.4% of children of 6-59 months have anemia in 2010 ; 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.

¹ Children with hemoglobin level less than 11.0 g/dl according to World Health Organization (WHO).

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

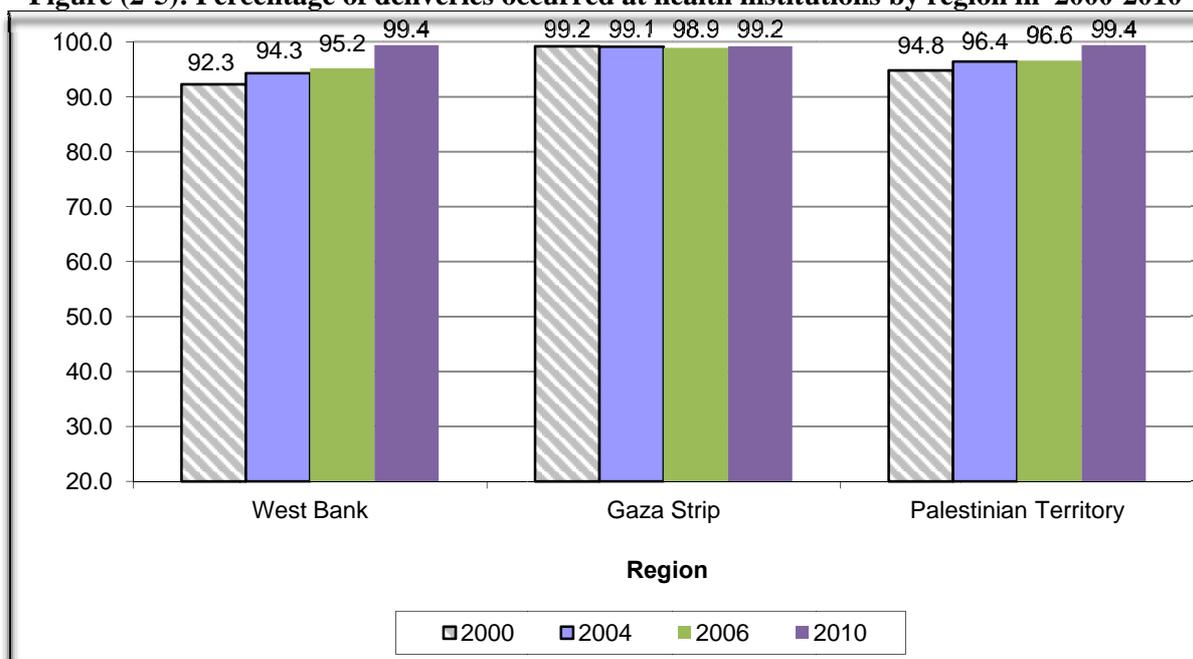
A high proportion of pregnant women (15-49 years) suffer from anemia² in spite of high coverage of health care during pregnancy

26.7% of pregnant women aged 15-49 years have anemia in 2010 ; 15.4% in the West Bank and 39.1% in 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 by region in 2000-2010



² Women with hemoglobin level less than 11.0 g/dl according to World Health Organization (WHO).

Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

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 governorate 1.4%.

2.5 Breast Feeding Trends

To ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents.

Child Rights Convention (24-2-h)

Prevalence of breastfeeding among children

96.3% of children were breastfed in 2010; 96.3% in West Bank and 96.2% in Gaza Strip. And 26.5% of children at the age group of (0-5) months were exclusively breastfed; 27.4% in the West Bank and 25.3% in Gaza Strip.

One should note that the average of breastfeeding in the Palestinian territory is good, where the average of continuation in breastfeeding reached 13.0 months in 2010, and 62.8% of the children had begun their breastfeeding within the first hour of birth.

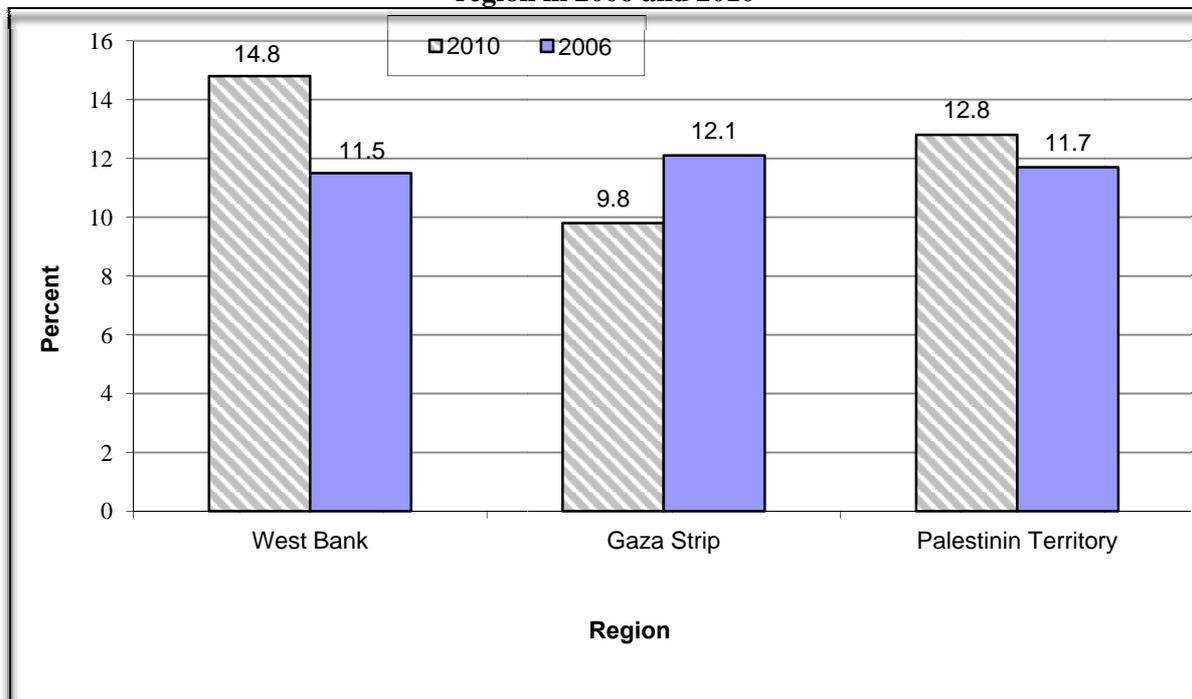
2.6 Child's Weight at Birth

8.8% of the children were weighing less than 2.5 kg at birth; 9.4% in the West Bank, and 8.1% in Gaza Strip. While 2.8% of them, their weight at birth reached more than 4 kg; 2.6% in the West Bank, and 3.1% in Gaza Strip in 2010.

7.2 Prevalence of Diseases Among Children

The average of incidence of infectious diseases among children is considered a diagnosis of and reflection to health current status and an indication of the safety and purity of the environment. As well as a measuring tool of social progress and the social status of households and communities. Prevalence of diseases is associated with different agents and factors of the pollution of the environment and quality of child food and how it is prepared. The frequent incidence of disease had a negative impact on the child, not only in increasing the risk of death, but also through its impact on public health of the child and possibly exposed to malnutrition and weak immune system. The following are indicators of some childhood diseases:

Figure (2-6): Percentage of children under five who had diarrhea by region in 2006 and 2010



Source: Palestinian Central Bureau of Statistics, 2007. Palestinian Family Health Survey, 2006. Final Report. Ramallah – Palestine

Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

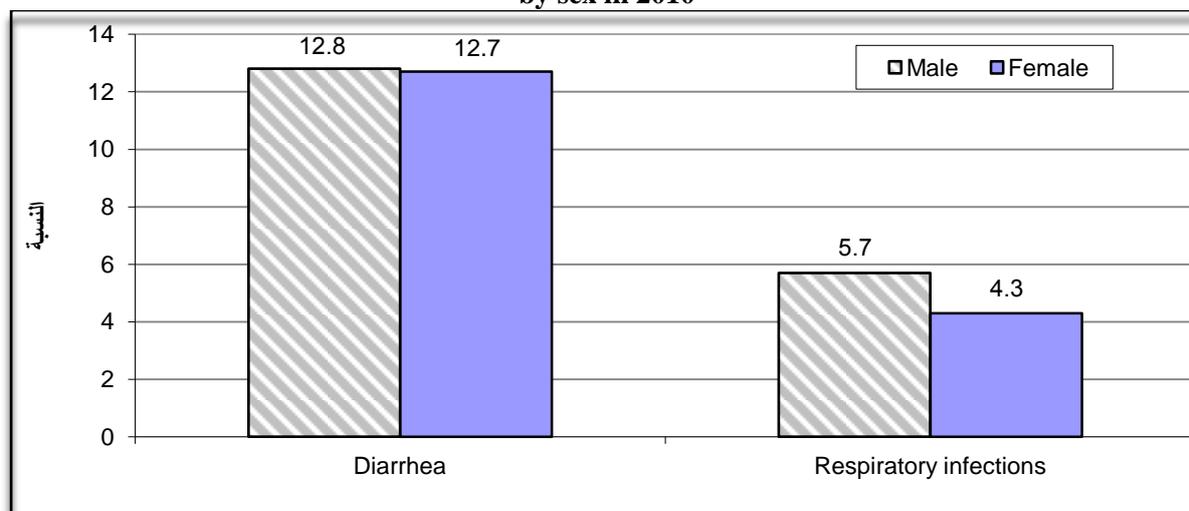
Diarrhea

It was clear that there was an increase "clearly have occurred in the percentage of children under five years of old who had diarrhea in the period between 2006 - 2010, while the percentage was 11.7% in 2006 and increased to 12.8% in 2010. At the region level, the percentage of children who had diarrhea was 14.8 % in the West Bank and 9.8% in Gaza Strip in 2010, while these percentages were 11.5% and 12.1% respectively in 2006. It is noted that children in the age group of 12-23 months were more susceptible to diarrhea than others as it reached 21.3 % and it may be attributed to and due to the launching of providing children with household and processed foods at this age.

With regard to treatment results, results showed that 31.3% of the children who had diarrhea were treated with a rehydration solution (ORS) and 44.6% of children who had diarrhea received more quantities of fluids during diarrhea. It should be noted that the Palestinian Ministry of Health dropped dehydration and diseases of the digestive system from the list of diseases that cause death among infants and children under age of five.

The data showed that the incidence of respiratory infections was 5.0% and the percentage was the highest in Gaza Strip compared to West Bank and in Salfit governorate at (10.2%) compared to the rest of governorates. Figure (2-7) shows percentages of cases of diarrhea and respiratory infections among females were less compared to males.

Figure (2-7): Percentage of children under five infected of diarrhea and or respiratory infections by sex in 2010



Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

2.8 Children With Disabilities

1.5% out of children in Palestinian Territory with disabilities in 2011; 1.6% in the West Bank and 1.4% in Gaza Strip, concerning the disability percentage distribution according to sex it was 1.8% among males children 1.3% females children.

Congenital causes are the most common reasons behind disability among children

The main cause for disability was congenital at 29.6%; 31.4% in West Bank and 26.5% in Gaza Strip, comes after diseases causes at 24.0%; 25.3% in West Bank and 21.6% in Gaza Strip .

Table (2-1): Percentage distribution of disabled individuals 0-17 years by reason of disability and region in 2011

Reason of Disability	Region		Palestinian Territory
	Gaza Strip	West Bank	
Congenital	26.5	31.4	29.6
Birth related	14.4	15.6	15.2
Illness	21.6	25.3	24.0
Physical and psychological abuse	[2.8]	[0.6]	[1.4]
Traffic accident	[1.9]	[1.1]	[1.4]
Other Kind of accidents	[5.2]	[3.9]	[4.4]
Israeli measures	[1.7]	[1.5]	[1.6]
Stress	[1.1]	[0.1]	[0.4]
Hereditary	12.1	12.3	12.2
Pregnancy related	[7.0]	[2.7]	[4.3]
Other	5.7	5.5	5.5
Total	100	100	100

Figures in parentheses [] indicate percentages based on small numbers and are therefore subject to a large marginal error

Source: Palestinian Central Bureau of Statistics and Ministry of Social Affairs, 2011. *Disabled Individuals Survey, 2011, Main Findings Report*. Ramallah - Palestine.

Adaptations Needed in Schools by Disabled 10-17 Years Currently Enrolled in Education

Seeing (Visual) disabilities:

24.5% of individuals with Seeing disabilities require adaptations to transportation in their schools in order to continue their education; also, one-quarter require adaptations to school buildings, 38.5% require adaptations in classrooms, while 11.5% require adaptations to toilet facilities in 2011 .

Hearing disabilities:

15.2% of individuals with hearing disability require adaptations to transportation to continue their education; 12.5% require adaptations to school buildings, 24.2% require adaptations in classrooms, while 3.1% require adaptations to toilet facilities in 2011 .

Mobility (Physical) disabilities:

50.0% of individuals with mobility disabilities require adaptations to transportation in their schools to continue their education; 46.3% require adaptations to school buildings, half of individuals require adaptations in classrooms, while 52.8% of individuals require adaptations to toilet facilities in 2011 .

Table (2-2): Percentage of disabled individuals aged 10-17 years needing modified features to continue education by main disability in 2011

Variables	Main Disability					
	vision	Hearing	Communication	Mobility	Remembering and concentrating	Learning
Transportation	24.5	15.2	12.5	50.0	25.0	3.8
Building	25.0	12.5	6.3	46.3	20.0	1.9
Classrooms	38.5	24.2	12.5	50.0	21.1	5.8
Bathrooms	11.5	3.1	12.5	52.8	10.5	1.9

Source: Palestinian Central Bureau of Statistics and Ministry of Social Affairs, 2011. *Disabled Individuals Survey, 2011, Main Findings Report.* Ramallah - Palestine

References

- **Palestinian Central Bureau of Statistics, 2007.** *Palestinian Family Health Survey, 2006.* Final Report. **Ramallah – Palestine.**

- **Palestinian Central Bureau of Statistics, 2011.** *Palestinian Family Survey 2010, Main Report.* **Ramallah - Palestine**

- **Palestinian Central Bureau of Statistics, 2005.** *Demographic and Health Survey 2004. Main Findings.* **Ramallah – Palestine.**

- **Palestinian Central Bureau of Statistics, 2011.** *Annual Report 2011. Palestine Children – Issues and Statistics. Child statistics series (No.13) .* **Ramallah – Palestine.**

- **Palestinian Central Bureau of Statistics and Ministry of Social Affairs, 2011.** *Disabled Individuals Survey, 2011, Main Findings Report.* **Ramallah - Palestine.**

- **Ministry of Health, PHIC, Health Status in Palestine 2010, April 2011.**

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 Jumentian 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."¹

3.1 Students

At the outset of the scholastic year 2010/2011, the number of students enrolled in the basic and secondary stage was 1,116,991 students. Female students constitute around 50.4%. Female percentage varies from one stage to another: in the basic education stage, females constitute 49.7%, compared to 54.8% in the secondary education stage.

In the scholastic year 2010/2011, 13.4% of all students were enrolled in the secondary education stage, and 86.6% were enrolled in the basic stage; 59.6% of all students were enrolled in the basic education stage in the West Bank and 40.4% in Gaza Strip. As for students enrolled in the secondary education stage, this percentage was 60.2% in the West Bank and 39.8% in Gaza Strip.

68.6% of total students were enrolled in governmental schools; 23.4% were enrolled in UNRWA schools, and 8.0% 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.²

There had been a steady increase in the numbers of school students between 1994/1995 and 2010/2011, whereas the percentage of increases in the basic and secondary education stage was 80.8%; 91.7% in Gaza Strip and 74.1% in the West Bank.

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

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 782 in scholastic year 2010/2011; 780 private and 2 are governmental.

The number of kindergarten students in the West Bank was 60,134 students in scholastic year 2010/2011; 48.4% males and 51.6% females.

According to the supervising authority, 60,013 students supervised by private kindergartens, and 121 supervised by governmental kindergartens.

The classroom density was 23.1 child per classroom in scholastic year 2010/2011.

¹ UNICEF, *Education for All*, 1999.

²53.2% of basic education stage children in Gaza Strip were enrolled in UNRWA schools while 9.3% in basic education stage students in the West Bank were enrolled in UNRWA schools during the scholastic year 2010/2011.

3.3 Basic School Enrollment

Students at the basic stage had increased from 572,529 in the scholastic year 1994/1995 to 967,300 in the scholastic year 2010/2011, marking an increase rate of 68.9%. Females and males constituted 49.7% and 50.3% respectively.

Female enrollment ratio in the basic education stage in the scholastic year 2010/2011 was 98.9 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 98.9 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 149,691 students during the scholastic years 2010/2011, reflecting an increase of 230.1%. Female students constituted 54.8% of the total number students in the secondary stage in the scholastic year 2010/2011, 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 9,621 in the scholastic year 2010/2011 representing 6.4% of the total number of secondary school students. Female students constituted only 35.7% of vocational high school students. On the other hand, they constituted 56.2% of academic secondary school students.

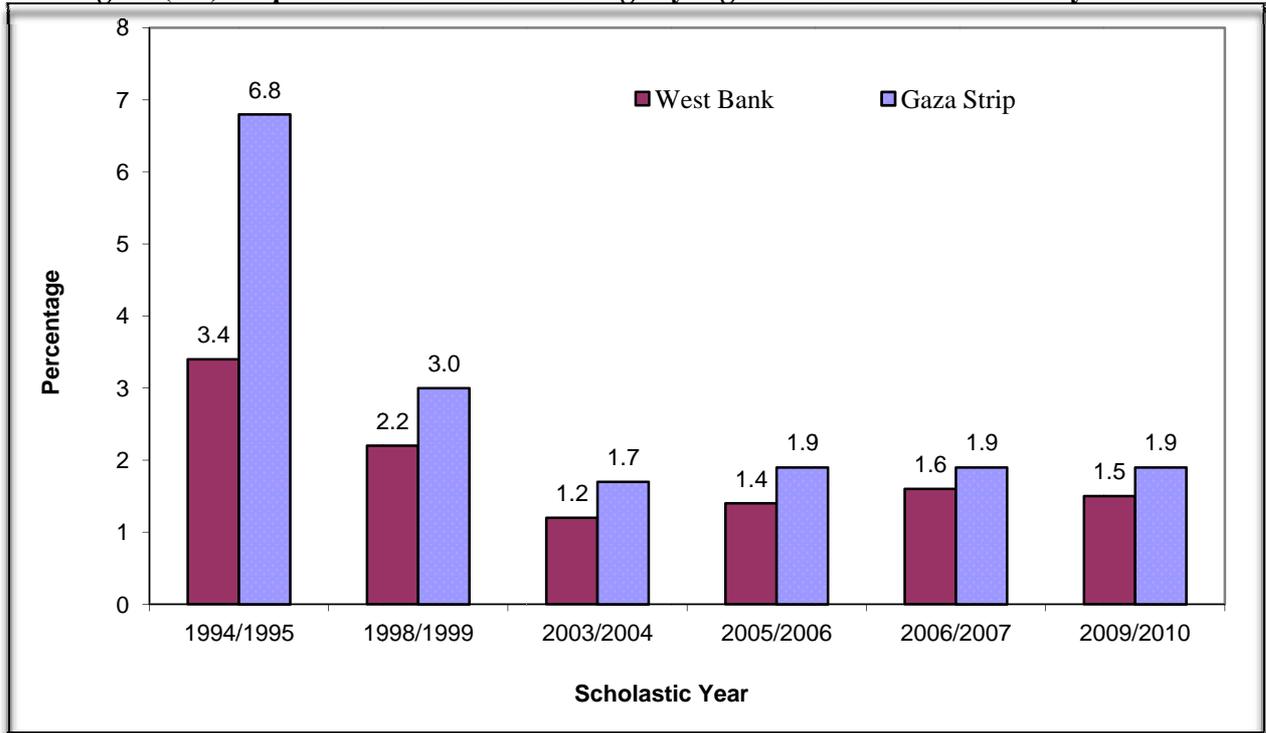
3.5 Repetition

The percentage of repetition at basic stage in the scholastic year 2009/2010 stood at 1.8% for males and 1.6% for females compared to 1.2% and 1.0% at secondary stage for males and females respectively. Indicators revealed that there was no significant difference between Gaza Strip and the West Bank for the two stages, (1.5% for the West Bank and 1.9% for Gaza Strip in the basic stage and 0.9% for the West Bank and 1.4% for Gaza Strip in the secondary stage).

The percentages of repetition among male and female students at basic and secondary stages in the Palestinian Territory dropped significantly during the scholastic years 1994/1995-2009/2010. For instance, female students who failed during basic stage dropped from 4.4% in 1994/1995 to 1.6% in 2009/2010. At secondary stage, female students who failed dropped from 1.3% in 1994/1995 to 1.0% in 2009/2010.

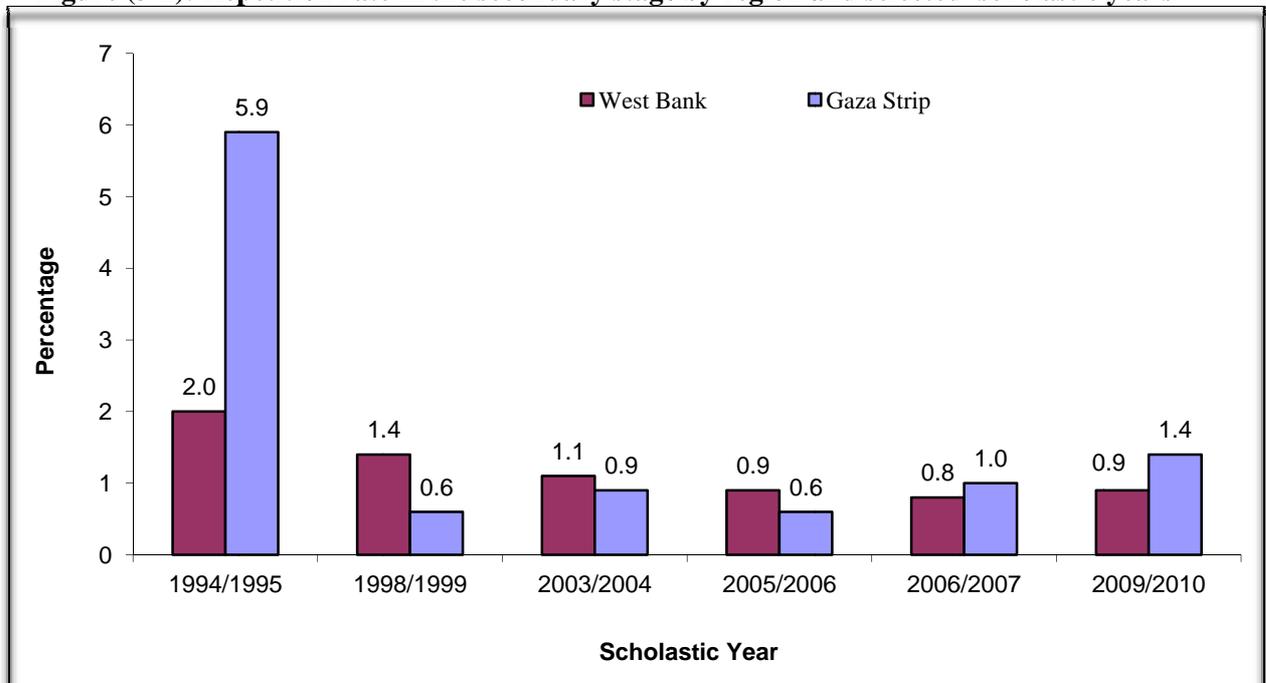
Caution should be exercised when examining the decrease in the percentages of repetition at school since the educational system has certain limitations to failing, such as students are allowed to repeat class twice and repetition starts at grade four. Also, repetition has been limited to 5% per class.

Figure (3-1) :Repetition rate in the basic stage by region and selected scholastic years



Source: Palestinian Central Bureau of Statistics 2012. Education Survey Database. Ministry of Education and Higher Education. Ramallah-Palestine.

Figure (3-2): Repetition rate in the secondary stage by region and selected scholastic years



Source: Palestinian Central Bureau of Statistics 2012. Education Survey Database. Ministry of Education and Higher Education. Ramallah-Palestine.

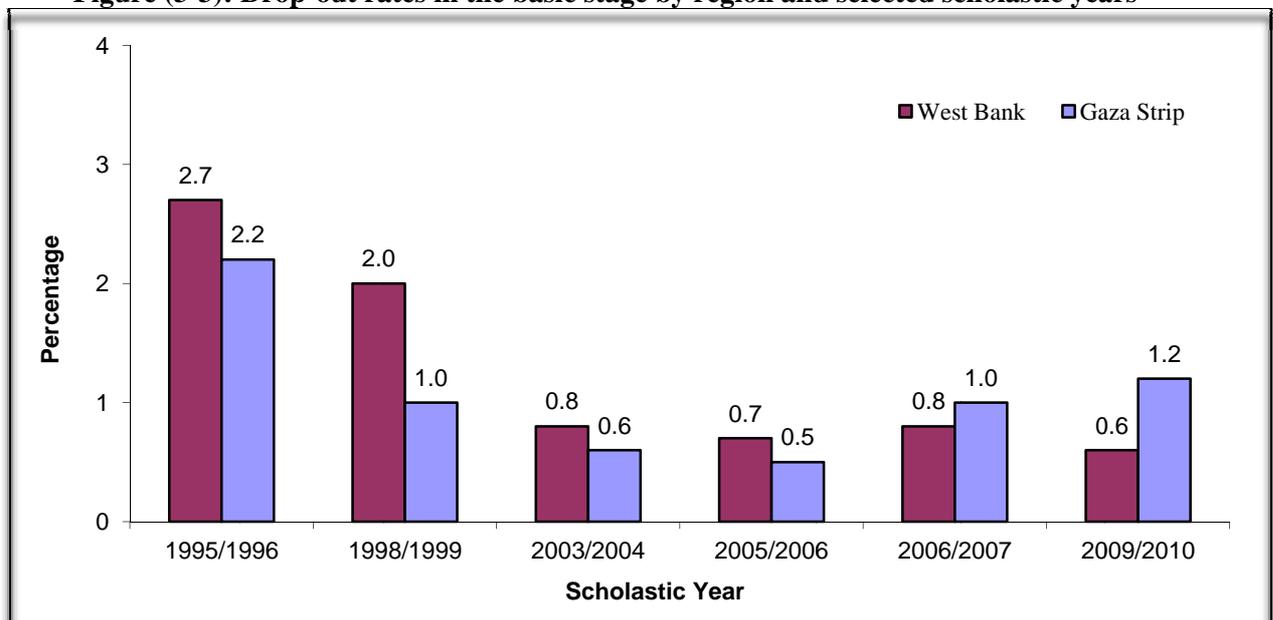
3.6 Drop-Outs Rate

The drop-outs rate at the basic schooling stage in the schooling year of 2009/2010 in the Palestinian territory was 1.0% for male students and 0.7% for female students. At the secondary stage, the rates were 1.9% for males and 2.1% for females.

The drop-outs rate among females at the secondary schooling stage of 2009/2010 was 2.1%, distributed as 2.5% in West Bank and 1.5% in Gaza Strip, while the rate at the basic stage was 0.7%, distributed as 0.4% in the West Bank and 1.1% in Gaza Strip.

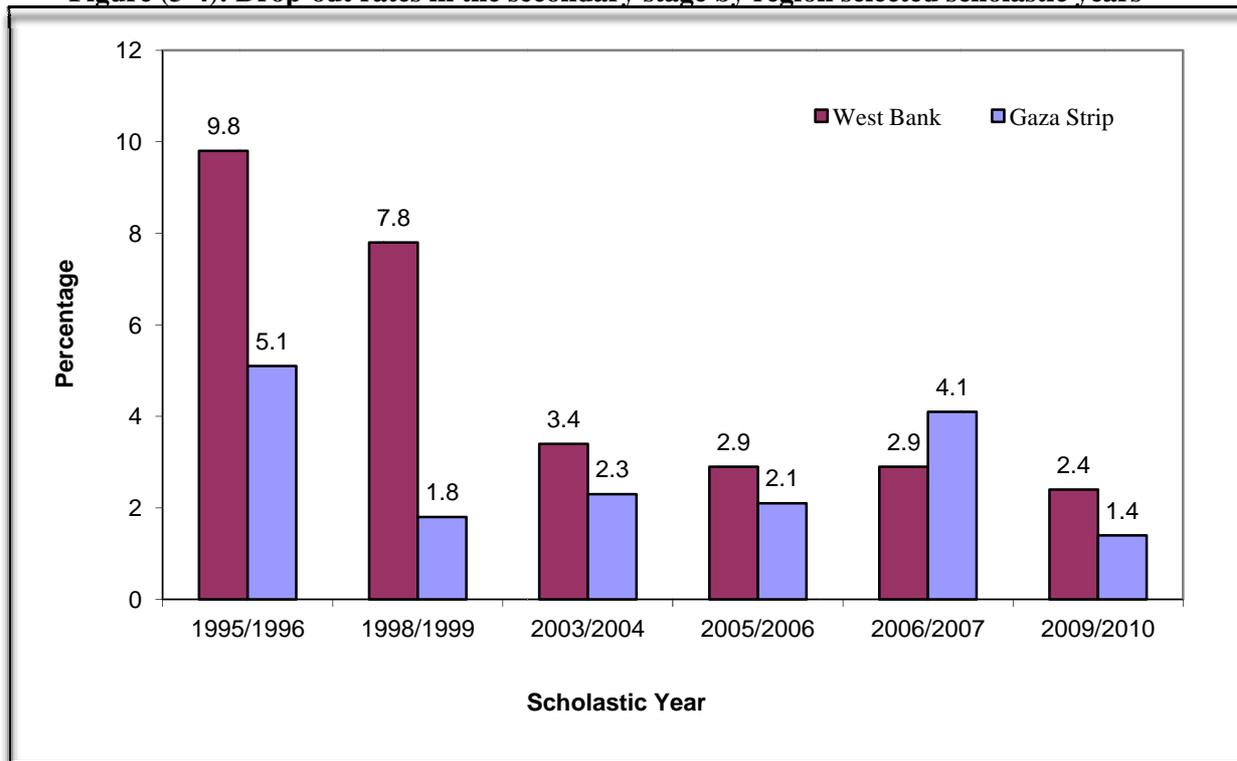
The drop-out rate among males at the secondary stage in 2009/2010 was 1.9%, distributed as 2.3% in the West Bank and 1.3% in Gaza Strip, while the rate at the basic stage was 1.0%, distributed as 0.9% in the West Bank and 1.2% in Gaza Strip.

Figure (3-3): Drop-out rates in the basic stage by region and selected scholastic years



Source: Palestinian Central Bureau of Statistics, 2012. Education Survey Database. Ministry of Education and Higher Education. Ramallah-Palestine.

Figure (3-4): Drop-out rates in the secondary stage by region selected scholastic years



Source: Palestinian Central Bureau of Statistics 2012. Education Survey Database. Ministry of Education and Higher Education. Ramallah-Palestine.

3.7 Schools

The number of schools was 2,652 in 2010/2011: 1,747 basic stage and 905 secondary schools. 74.5% of schools are in the West Bank and 25.5% are in Gaza Strip.

Governmental schools constituted 74.4% of schools in 2010/2011, compared to 12.6% as UNRWA-run schools, and 13.0% 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 2010/2011 was 1,747, whereas the number of schools in 1995/1996 was 1,098. The number of secondary schools in 2010/2011 was 905, whereas the number of schools in 1995/1996 was 372.³

3.8 School Facilities and Educational Technologies

The percentage of schools where there was a special room that was devoted to laboratory science increased from 39.6% in 1994/1995 to 61.8% in 2010/2011. While this percentage increased at government schools from 40.0% in year 1994/1995 to 66.1% in 2010/2011, but at UNRWA schools, this percentage increased from 31.3% to 48.2% during the same period and in private schools, it increased from 47.6% to 50.6% during same period as well.

As for school libraries, the percentage of schools, where there was a special room that was dedicated to school library, increased from 24.4% in 1994/1995 to 68.7% in the year of 2010/2011 whereas it increased from 28.0% in the year of 1995/1996 to 72.4% in 2010/2011

³ Includes schools that have both basic education and secondary school education as well as secondary schools.

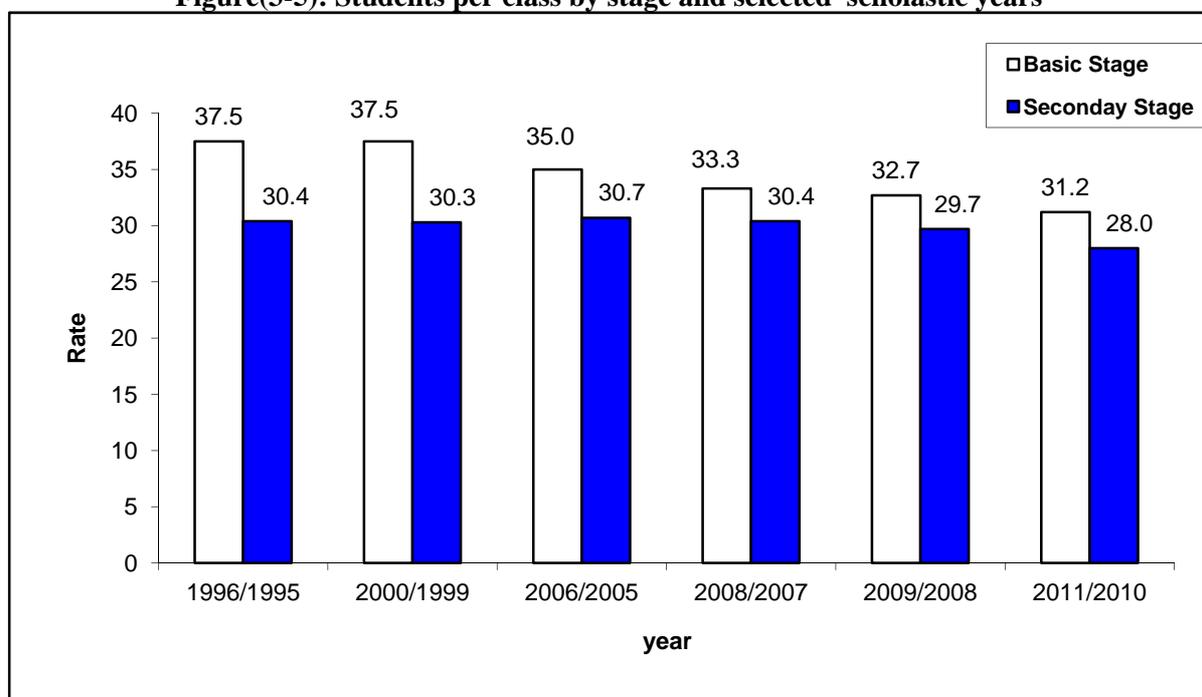
at government schools and from 26.6% to 61.0% for the same period at UNRWA schools and from 38.4% to 54.7% at private schools for the same period as well.

For computer labs, percentages of schools where there is a room devoted to computer labs increased from 3.5% in 1994/1995 to 68.9% in 2010/2011, whereas it increased from 3.0% in 1994/1995 to 68.7% in 2010/2011 at government schools while in UNRWA schools, there was no computer laboratories in the year of 1994/1995, but in the year of 2010/2011, there was computer labs at UNRWA schools by 74.4%, while it increased at private schools from 13.6% in 1994/1995 to 68.4% in 2010/2011.

3.9 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 2010/2011 was 31.2 at basic stage and 28.0 at secondary stage.

Figure(3-5): Students per class by stage and selected scholastic years



Source: Palestinian Central Bureau of Statistics 2012. 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 schooling schools is higher in Gaza Strip than in the West Bank (36.0 students per classroom in Gaza Strip and 28.6 students per classroom in the West Bank in 2010/2011). At the secondary schooling stage, class density was 36.4 in Gaza Strip and 24.3 in the West Bank in 2010/2011.

The case worsens at UNRWA schools where classroom density in the basic schooling stage was 36.0 compared with 30.8 students at governmental schools. However, the figure for private schools was 23.7 students per classroom in 2010/2011 (UNRWA does not provide secondary stage education).

3.10 Teachers

The number of teachers in schools reached 50,468 in the scholastic year 2010/2011 (21,156 male teachers and 29,312 female teachers).

71.1% of teachers teach at governmental schools, 18.1% teach at UNRWA schools, 10.8% teach at private schools.

The number of students per teacher at governmental schools was 21.4 in 2010/2011; in UNRWA schools, the figure was 28.7, while in private schools it was 16.3.

References

- **Palestinian Central Bureau of Statistics, 2012.** Education Census database-selected years. Ministry of Education and Higher Education (unpublished data). **Ramallah-Palestine.**

- **Ministry of Education, 2000.** *The Annual Statistical Educational Book, 1999/2000*, Number (6). **Ramallah-Palestine.**

- **Ministry of Education, 2001.** *The Five Year Plan for Education in Palestine (2001-2005)*. **Ramallah-Palestine.**

- **Ministry of Education, 2000.** *Window on Education in Palestine.* **Ramallah-Palestine.**

- **Palestinian Central Bureau of Statistics, 1999.** *Teaching Indicators 1994/1995-1998/1999*, **Ramallah-Palestine.**

Chapter Four

Child Cultural and Recreational Status

State parties recognize the right of the child to rest and leisure, to engage in play and recreational activities appropriate to the child age and to participate freely in cultural life and the arts.

(Convention on the Rights of the Child, Article 31-1)

State parties shall respect and promote the right of the child to participate fully in cultural and artistic life and shall encourage the provision of appropriate and equal opportunities for artistic, cultural and recreational and leisure time activity.

(Convention on the Rights of the Child, Article 31-2)

Children's education and culture is a basic function of culture as a social process of upbringing and transforming the newborn from a biological entity into a social being. Cultures go beyond socialization to develop the child's personality and national identity. Solidification of cultural and recreational rights of Palestinian children have been made through the incorporation of these rights into the Palestinian child national plan, prepared by the national committee and endorsed by the PNA in 1995. The plan is in line with the International Convention of the Rights of the Child sanctioned by the UN General Assembly in 1989. The child's cultural and recreational rights have since become inseparable parts of the child's rights as a human being, as stated in the Article 31 of this Convention.

The culture of Palestinian children stems from Palestinian Arabic heritage, philosophy, religion, norms, values, traditions, the 1988 Declaration of Independence, and the national Palestinian, Arab and Islamic aspirations. Knowledge and information are acquired through the Arabic language by which interpersonal communication, self-expression, and openness to the Arab culture are made possible. The child's knowledge is also enriched through arts, music, literature, technology, and investment in recreational activities and leisure time.

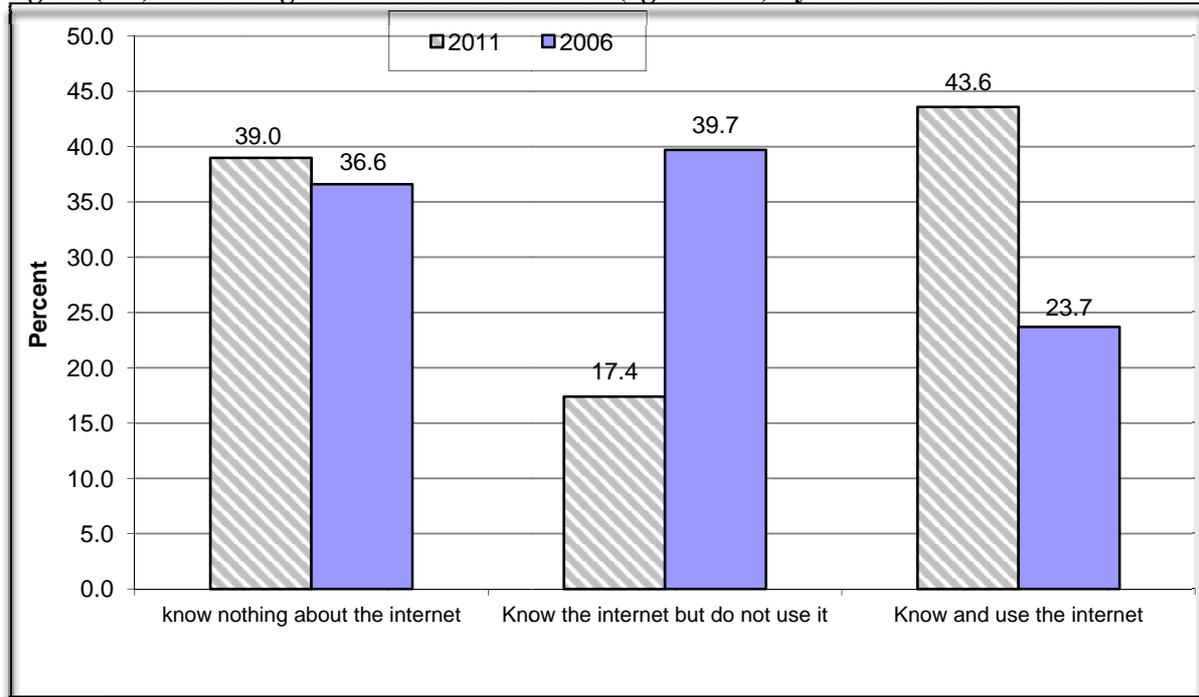
4.1 Using Computer

Percentage of children (10-17 years) who use computers amounted to 75.1%, (of which 81.9% in West Bank and 64.4% in Gaza Strip), with no significant differences between males (76.7%) and females (73.5%) in 2011.

4.2 Using Internet

About the extent of knowledge and use of the internet by children aged 10-17 years old, the results showed that four out of ten children (43.6%) have internet service and know and use it, while four out of ten children (39.0%) do not have the minimum knowledge of the internet. Furthermore, findings revealed that the most common reason for using the Internet were: leisure and entertainment purposes 32.8%, (33.5% for males and 31.9% for females), while it was 26.0% in 2006, and study and research 23.3% (16.2% for males and 31.3% for females) compared to 25.6% in 2006, and email service 21.8%,(28.6% for males and 14.1% for females), while it was 8.7% in 2006,

Figure (4-1): Percentage distribution of children (aged 10-17) by use of internet in 2006 and 2011



Sources: Palestinian Central Bureau of Statistics, 2006. Household Survey on Information and Communications Technology, 2006: Main findings. **Ramallah-Palestine**
Palestinian Central Bureau of Statistics, 2011. Household Culture Survey, 2011. Main Findings Report. **Ramallah-Palestine.**

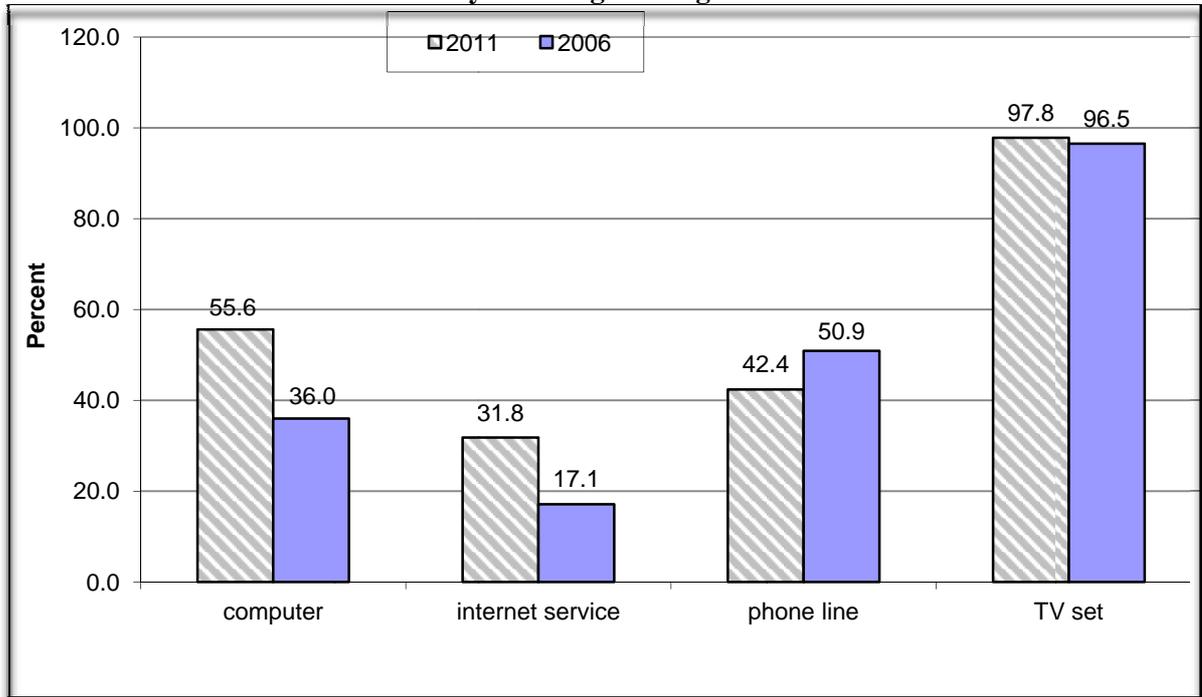
4.3 Availability of Knowledge Means in the Family

Since the family plays an important role in the development of the child's personality, and in the pattern of social and cultural interaction with the child, the availability of the means of knowledge for the child's family is an important factor in providing optimal use of cultural and recreational resources for the child.

Data showed that the percentage of households with children (less than 18 years old) who own computers amounted to 55.6% in year 2011, while it was 36.0% in 2006. The percentage of households with children who have internet access amounted to 31.8% in 2011, compared to 17.1% in 2006.

As for the availability of TVsets, data showed the percentage of households with children (less than 18 years old) who own a TVset 97.8% in 2011. The percentage of households with children (less than 18 years old) who own a satellite dish in the Palestinian Territory was 95.4% in year 2011 and 20.4% of them owned video.

Figure (4-2): Percentage of availability of entertaining instruments for households with children below 18 years of age during in 2006 and 2011



Sources: Palestinian Central Bureau of Statistics, 2006. Household Survey on Information and Communications Technology, 2006: Main findings. Ramallah-Palestine
 Palestinian Central Bureau of Statistics, 2011. Household Culture Survey, 2011. Main Findings Report. Ramallah-Palestine.

References

- **Palestinian Central Bureau of Statistics, 2006.** Household Survey on Information and Communications Technology, 2006: Main findings. **Ramallah-Palestine.**

- **Palestinian Central Bureau of Statistics, 2011.** Household Culture Survey, 2011. Main Findings Report. **Ramallah-Palestine.**

- **UNICEF, 1990.** *Children First, Convention on the Rights of the Child.*

Chapter Five

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.

5.1 Children Living in Poverty

19.9% of Palestinian households are childless, while the vast majority of Palestinian households at 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 significantly, it is the fact that the poverty data indicated that 16.0% of the households in 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 (5-1): Likelihood of being poor among households according to households monthly consumption by region in 2010

Region	With Children		With out Children		Total	
	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 West Bank, and 38.4% in Gaza Strip.

Table (5-2): Percentage of children in poverty by region in 2010

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.*

5.2 Number of Children 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.

Table (5-3): Likelihood of being poor among households according to households monthly consumption by number of children in the household, 2010

Number of Childen	Poverty	
	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

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

5.3 Child Labor

About 65 thousand child; 6.0 % out of the average number of children aged 5-14 years are working children paid or unpaid in 2010; 8.0% in the West Bank and 3.1% in Gaza Strip, and it is clear that male children who are engaged in working is higher; 7.7% compared to 4.2% female children.

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..

Table (5-4): Percentage distribution of children 5-14 years by employment status and selected characteristics in 2010

Background characteristics	employed	Un-employed	Total
Palestinian Territory	6.0	94.0	100
West Bank	8.0	92.0	100
Gaza Strip	3.1	96.9	100
Sex			
Males	7.7	92.3	100
Females	4.2	95.8	100
Age			
5-11	6.5	93.5	100
12-14	4.8	95.2	100

Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. 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. 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.

The Percentage of children aged 5-14 years attending school and also engaged in child labor was 5.9% in 2010; 7.8 % in the West Bank and 3.0 % in Gaza Strip, and it was 7.5 % among male children attending school compared to 4.1% among females.

Table (5-5): Percentage of child labor and education enrollment of children aged 5-14 years by selected background characteristics in 2010

Background Characteristics	Percentage of students who are also involved in child labor	Percentage of children attending school
Palestinian Territory	5.9	96.3
West Bank	7.8	95.7
Gaza Strip	3.0	97.2
Age in years		
5-11	6.5	95.9
12-14	4.3	97.2
Sex		
Males	7.5	96.1
Females	4.1	96.4

Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. 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.

The results of Palestinian household survey 2010 showed that 4.1% of children aged 5-11 years were working for their families; 6.0% in West Bank and 1.3% in Gaza Strip, but at the gender level, it was 5.6% for males and 2.6% for females.

And 2.9% of children in the age group of 5-11 years worked outside their household whereas 2.1% of them worked against a pay and 0.8% without a pay while the percentage of children who worked outside their household, whether paid or unpaid, reached 3.5% in West Bank and 2.0% in Gaza Strip, but at the gender level, it reached 3.9% for males and 1.9% for females.

Table (5-6): Percentage of children aged 5-11 years who are involved in child labor by involvement in economic activity during the past week, according to selected background characteristics in 2010

Background Characteristics	Working for family business	Working outside household	
		Unpaid work	Paid work
Palestinian Territory	4.1	2.1	0.8
West Bank	6.0	2.3	1.2
Gaza Strip	1.3	1.7	0.3
Sex			
Males	5.6	2.8	1.1
Females	2.6	1.3	0.6

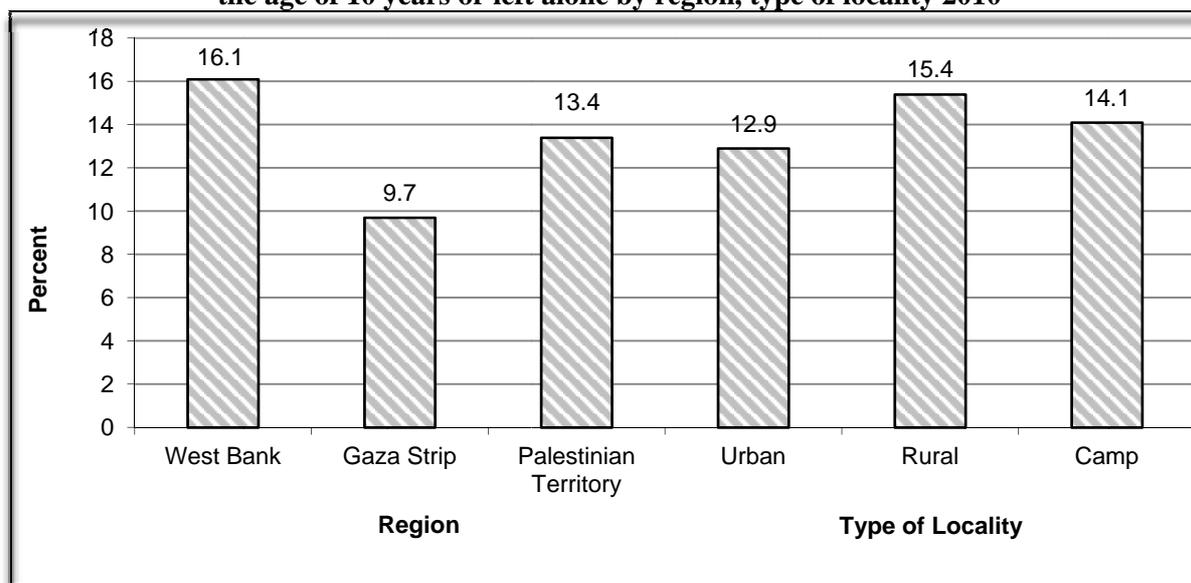
Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

5.4 In-adequate Care for Children Under Age of Five Years

13.4% of children under age of five who received inadequate care in the past week that preceded the conduction of this survey (care is insufficient include children who are left alone during the previous week, or left under the care of other children under age of 10 years for more than one hour at least) of which 16.1% was in West Bank and 9.7% in Gaza Strip in 2010.

As for type of locality, the higher percentage of children who received inadequate care during the past week was at rural areas, followed by refugee camps and then at urban areas as of 15.4%, 14.1%, 12.9%, respectively.

Figure (5-1): Percentage of children aged 0-59 months left in the care of other children under the age of 10 years or left alone by region, type of locality 2010



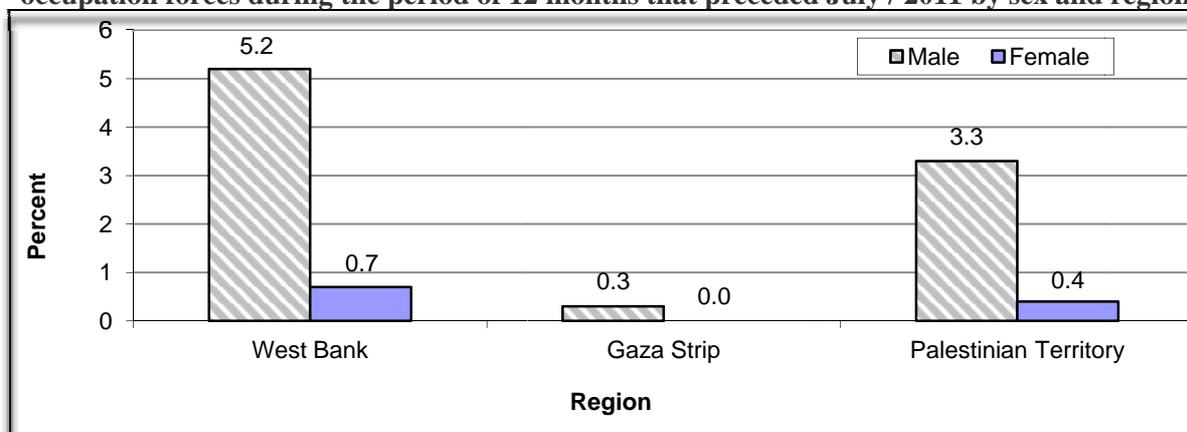
Source: Palestinian Central Bureau of Statistics, 2011. Palestinian Family Survey 2010, *Main Report*. Ramallah - Palestine

5.5 Violence Against Children

About 3% of male children of 12-17 years were exposed to physical violence from the occupation forces during the period of 12 months before July/2011 among them 5% in the West Bank compared to 0.3% in Gaza Strip this percent was 0.4% among females 12-17 years, 0.7% in the West Bank while, no case were reported about females physical violence by the occupation in Gaza Strip due to the absence of direct contacts with occupation forces over there .

About 6% of male children of 12-17 years were exposed to psychological violence of the occupation forces and settlers during the period of 12 months before July/2011. 8.7% were in the West Bank compared to 0.8% in Gaza Strip, this percent was 1.2%. 1.7% among females in the West Bank compared to 0.4% in Gaza Strip.

Figure (5-2): Percentage of Children of (12-17 years) who exposed to physical violence from the occupation forces during the period of 12 months that preceded July / 2011 by sex and region



Source: Palestinian Central Bureau of Statistics, 2011. *Press Release Main Findings of Violence survey in the Palestinian Society, 2011*. Ramallah - Palestine.

Educational Institutions One of the Places Where Children Were Exposed to Violence

More than one fifth of the student's age at 12-17 years were exposed to psychological violence at schools, out of the students who attended schools during the period of 12 months that preceded the July / 2011; 21.6% in West Bank compared to 22.7% in Gaza Strip. The results indicated that, psychological violence was the most practiced violence against these students by their colleagues or teachers, 25.0% and 27.6% respectively. On the other hand the rate of those who were exposed to physical violence by their teachers was 21.4% compared to 14.2% by their fellow students.

Table (5-7): Percentage of children of 12-17 years who were exposed to physical or Psychological violence from students or teachers during the period of 12 months that preceded July / 2011 on the school by sex and region

Sex	Region		
	Palestinian territory	West Bank	Gaza Strip
Both Sexes	22.0	21.6	22.7
males	28.7	28.7	28.6
Females	15.1	15.1	16.7

Source: Palestinian Central Bureau of Statistics, 2011. Press Release Main Findings of Violence survey in the Palestinian Society, 2011. Ramallah – Palestine

Table (5-8): Percentage of children of 12-17 years who were exposed to a form of violence at least for one time by one of the parents during the period of 12 months that preceded July / 2011 by region

Region	Exposed to Violence	father		mother	
		Psychological violence	physical violence	Psychological violence	physical violence
Palestinian territory	51.0	69.0	34.4	66.4	34.5
West Bank	45.8	64.7	28.7	61.9	27.7
Gaza Strip	59.4	75.9	43.2	73.3	45.2

Source: Palestinian Central Bureau of Statistics, 2011. Press Release Main Findings of Violence survey in the Palestinian Society, 2011. Ramallah – Palestine

Parents are the First to Practice Violence Against Children

51.0% of children 12-17 years were exposed to violence inside the household by one individual member of the household in 2011; 45.8% in West Bank compared to 59.4% in Gaza Strip; 69.0% of them were exposed to psychological violence by their parents, and 34.4% to physical violence compared to 66.4% of these children were exposed to psychological violence and 34.5% to physical violence by their mothers .

About two thirds of children who were exposed to violence resort to a parent to ask for help

70.8% of children who had been subjected to violence resorted to a parent, it followed by 30.1% of children resorted to one of brothers and sisters, and 28.6% of the children resorted

to a friend. Also, data revealed that 20.2% of children resorted to a social adviser at school, while 12.3% of children resorted to a teacher .

5.6 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 world, 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 of 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 treatment 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 under 18 while Palestinian children are those under 16 years old.

According to the data of the Ministry for Detainees and Prisoners in 2012, the Israeli occupation authorities are holding 179 child in the age group 13-18 years, amid harsh conditions and flagrant violations of all rights. Detained children constitute about 4.4% of the total detainees in Israeli jails. Among the detained children, there are (42) serving sentenced terms, (136) awaiting pending trial, and (1) children are under administrative detention without charge. It is worth mentioning in this context that hundreds of detainees were arrested when they were children and now they are over the age of 18 years but still in captivity inside 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 data of the Ministry for Detainees and Ex-War Prisoners of 2012, the Israeli occupation authorities used 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 a 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.

References

- **Palestinian Central Bureau of Statistics, 2010.** Annual Report 2010. Palestine children –Issues and statistics. Child statistics series (No. 13) . **Ramallah – Palestine.**

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

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

- **Ministry for Detainees and Prisoners. 2012.** Administrative records. **Ramallah- Palestine**
