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Annual Report, 2006**

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Preface

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

The Palestinian Central Bureau of Statistics is pleased to introduce its ninth annual report on the demographic reality of the Palestinian child, as a part of the activities of the Child Statistics Program. This report is of a significant importance as it is issued after eleven years of PNA inception. We attempt through statistics to give specialists, concerned parties and decision makers an opportunity to identify the extent of progress we achieved as a PNA, local and international NGOs, and private sector in providing care, protection and development for our 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 reality, especially in the fields of health, education, culture, recreation, poverty, and child labor.

Developing the reality of the child status and commitment to enforce child rights can not be attained without the accumulation of the efforts of all parties interested in childhood. It is worthy to point that the database we are intending to construct is based-in terms of framework and content-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 in coordination with Palestinian, regional and international institutions in a way that is in harmony with the tools used in measuring indicators pertinent to child rights, as adopted by the General Assembly of the United Nations, and in a way that fulfills these requirements in light of the peculiarities of the Palestinian reality and the unique conditions of our children.

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

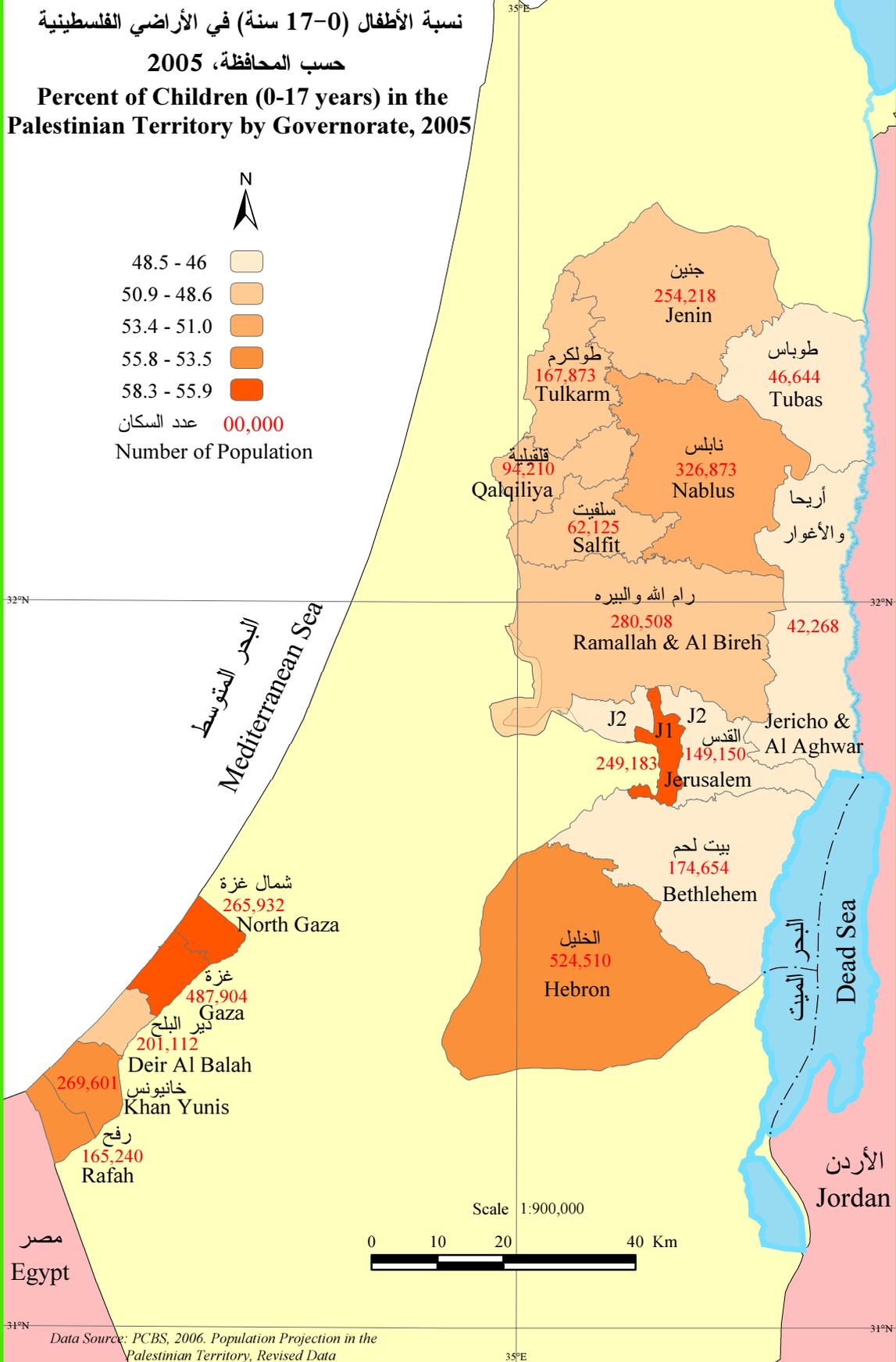
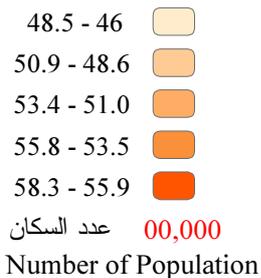
April, 2006

**Luay Shabaneh
President**

نسبة الأطفال (0-17 سنة) في الأراضي الفلسطينية

حسب المحافظة، 2005

Percent of Children (0-17 years) in the
Palestinian Territory by Governorate, 2005



Data Source: PCBS, 2006. Population Projection in the Palestinian Territory, Revised Data

CHILD MAP

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Glossary

Total Fertility Rate	Average number of live births per woman or group of women during their reproductive life by the age of specific fertility rate for a certain year. This rate is calculated by multiplying the age specific fertility rate by five.
Crude Birth Rate	Number of births per 1000 population in a certain year.
Crude Death Rate	Number of deaths per 1000 population in a certain year.
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
Age at Marriage	The age of the individual in years at the time of his\ her actual marriage.
Contraceptives (Family Planning Methods)	It is a methodology needed for delaying or stopping pregnancy.
Unemployment	This term refers to all persons in the work age who did not work at all during the reference period, who were not absent from a job and were available for work and actively seeking for work during the reference period in different ways, e.g. reading newspapers, registration in employment offices, asking friends or relatives ...etc.
Household	One person or a group of persons living together who make common provision for food or other essential for living. Household members may be related, unrelated or a combination of both.
Head of Household	The person who usually lives with the households and recognized as head of the household by its other members. Often, he \ she is the main decision-maker or responsible for financial support and welfare of the household.
House	The house is a housing unit built for the living of one household and is mainly established in one floor. The house could consist of two floors, each of which includes an apartment for one household only.
Apartment	The apartment is part of a house or a building, comprised of one room or more along with other facilities, e.g. kitchen, bathroom, water closet ...etc, all of which are connected with the outside world through one main door. It is occupied by one household and is often reached through stairs or a main road leading to the public road.
Illiterate	A person who can not read and write a short abstract about his \ her life in any know language and had not accredited any formal educational certificate.
Literate	A person who can read and write simple sentences without being accredited any formal educational certificate.

Health	A state of complete physical, mental and social well being and not merely the absence of diseases or infirmity.
Infant Mortality Rate	The number of infant deaths (aged less than one year) per 1,000 live born births in a certain year.
Under Five Years Child Mortality Rate	The number of death cases among children (aged less than five years) per 1,000 children in the age group 0 – 4 during a certain year.
Death Causes	A state of illness, infirmity, incidence, or poisoning that directly or indirectly leads to death. .
Breast-feeding	The child has received breast milk (direct from the breast or expressed)
Immunization	It is one of the sharpest tools for cutting into the vicious injections cycle and reducing the severity and frequency of set backs to the normal development of the child in its formative years.
Immunization Coverage	Immunization coverage includes three dosages against measles or (measles, mumps and rubella), three dosages against the triple, and three dosages against polio.
Polio Vaccine	This vaccine is given in a form of drops through the mouth or through injection. This vaccine is given to the child at the same time he \ she is given the Triple vaccine, i.e. in the second, third, fourth, sixth and twelfth months of age.
Measles Vaccine	An injection given once in life at the ninth month of age and over according to the UNRWA vaccination schedule and at the fifteenth months, according to the governmental vaccination schedule.
Triple Vaccine	This vaccine is jointly given against three diseases, namely diphtheria, whooping cough, and Tetanus. This vaccine is given in a form of injection in the muscles in the age of two months, four months, six months and one year.
Stunting	Stunting refers to lack of height in comparison to weight. Chronic malnutrition constitutes one of the main causes leading to stunting and underweight. Other causes leading to stunting include hereditary factors, infectious diseases and socio – economic conditions.
Supplements Supplementary Feeding	Any liquid (including milk) or solid given while the child is still receiving breast milk.
Weaning	The process where the child becomes accustomed to take liquids or solids other than breast milk.
Weight	A measurement of the child's total body mass underside.
Acute Respiratory Disease Infections	Are the most common illness suffered by children, no matter where they live. ARIs are caused by a wide variety of disease agents. These include from the vaccine preventable tangent disease: diphtheria, pertusis and tuberculosis. ARIs 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). Their principal transmission factors are: high population density, crowded conditions, and seasonal changes that favor the spread of disease.

Traffic Accidents	Accidents occurring for vehicles driven in the public road and result in casualties ...etc.
Diarrhea	A clear change in the number of excretion episodes (more than three times a day). Diarrhea is characterized with liquid – like stool. Fever and blood in the stool indicate severity of diarrhea episodes.
Health Care Provider	An individual or organization whose responsibilities involve on or more of the following: The provision, administration, teaching, development of health services, activities or supplies. The provider may have direct or indirect interest in the health industry.
Primary Health Care	Primary health care refers to primary check up and the comprehensive health care including basic or initial diagnosis and treatment, health supervision, management of chronic conditions and preventive health services. The provision of primary health care does not necessarily require highly sophisticated equipment or specialized resources.
Malnutrition	The term malnutrition is used to cover a multiplicity of disorders, ranging from deficiencies of specific micronutrients such as vitamins and minerals to gross starvation or obesity. This discussion is largely limited to protein and calorie malnutrition, which is manifested primarily by retardation of physical growth in terms of height and weight.
Poor Child	The child belonging to a poor household (whose income is below the national poverty line).
Subsidies	The value of subsidies in kind or cash received by the household in the month, irrespective of whether they were provided by UNRWA, Ministry of Social Affairs, alms (Zakat) committees, charitable societies, or other parties.
Poverty Gap	This indicator measures the volume of the total gap existing between the incomes of the poor and the poverty line (the total amount needed to promote the consumption levels of the poor to reach poverty line). It is recommended to calculate this indicator as a percentage of the total consumption value for the whole population, when the consumption level for each of them is equal to the poverty line.
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 operates his\ her own economic enterprise or engages independently in a profession or trade, and hires one or more waged employees.
Self-Employed	A person operates his\ her own economic enterprise or engages independently in a profession or trade and hired no employees.

Waged Employee	A person who works for a public or private employer 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.
Unpaid Family Member	A person who works without pay in an economic enterprise (farm, undertaking, etc...) operated by a related person living in the same household.
Occupation	Occupation refers to the kind of work done during the reference period by the employed person, irrespective of the economic activity or employment status or the type of study or training the person received.
Economic Activity	Economic activity refers to the main activity of the establishment in which the employed person or the kind of work done previously if unemployed ever worked person. For persons employed outside the establishments, the activity
Work Hours	The duration of time spent in performing a certain work.
Average Daily Wage	The total net wage paid to all waged employees divided by the total number of workdays according to the average exchange rate for that month.
Violence	The intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, deprivation and maldevelopment that compromise the well-being of individuals, families and communities.
Work Time	It could either be during the day or the night. Whereas the day refers to the duration starting from sunrise to sunset, the night refers to the duration between sunset to sunrise.
Household Library	A set of extracurricular books, magazines, or periodicals available to the household, which is used for developing the cultural or religious aspects, provided it is not comprised of less than 10 books magazines, or periodicals.
Children Libraries	An organized set of books, magazines, periodicals, and drawings, audiovisual means that offer services and facilities to the children upon demand.
Cultural Institutions	Institutions equipped with instruments and equipment used in the different artistic and / or crafts activities, including games and sports. Such instruments and equipment facilitate the cultural activities in the broader sense.
Handicapped Child	The child incapable of performing normal activities due to a disability or handicap that limits or undermine his ability to perform an activity, in comparison to another child in the same age and under the same circumstances.
Juvenile	This term refers to an offender below 18 years of age.

Orphan	The child who lost one or both parents as a result of death.
Stealing	Seizing the fixed or moveable properties with out the consent of the owner. It includes dwelling sneaking and invasion for the purpose and stealing cars. Minor offenses in the markets may and might not be classified under stealing.
School	Any educational institution other than kindergartens, irrespective of the number of students / pupils and grade structure, provided that the lowest grade is the first basic grade and the highest grade is the twelfth grade.
Kindergarten	Any educational institution licensed by the Ministry of Education to offer child education services two years prior to the basic stage (for 4 years old or 5 yeas old children). Kindergarten education is divided into two stages. First Grade: Offering educational services to four-year-old children & Second Grade: Offering educational services to five-year-old children
Governmental Schools	Any educational institution that is run by the Ministry of Education or any other ministries or governmental body.
UNRWA Schools	Any school run or supervised by UNRWA.
Private Schools	Any licensed local, foreign non – governmental educational institution that is established, headed, run or financed by a foreign or Palestinian individuals, societies or bodies.
Basic Stage	The first of ten scholastic years on which other educational stages depends.
Secondary Stage	The stage consisting of two scholastic years following the basic stage, (that is, years 11 and 12 of schooling).
Pupil / Student	Any one enrolled in an educational institution.
Teacher	A person with specialized qualification that is responsible for teaching students at an educational institution.
Gross Enrollment Rate	It refers to the percentage of pupils / students enrolled in a certain class to the total number of persons who are in the legal age for enrollment in that class.
Total Enrollment Rate	It refers to the total number of pupils / students enrolled in a certain class, whose ages are in the legal age designated for enrollment in that class as a percentage from the total number of persons in the society who are in the legal age for enrollment in that class.
Repetition	Repeating the same scholastic year for another year due to failure to accomplish the requirements necessary for promotion to next year.
Supervising Authority	The party responsible for schools from legal and administrative viewpoints, which could be either governmental, UNRWA or Private

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Executive Summary

The basic objectives of this annual statistical report were formulated by defining a set of selected basic indicators on the Palestinian child reality in an attempt to develop a Palestinian vision on the reality of child in Palestine.

The report involves a set of selected basic indicators on child reality. These indicators make it possible to measure the reality of child status in accordance with the Child Rights Convention and the Palestinian National Child Plan.

The various selected indicators addressed in this report include indicators on demographic reality; child health; educational, cultural and recreational reality of the child; children in need of special protection from the household and the society and potentials of providing this protection to vulnerable groups such as juveniles, orphans and poor children. Other indicators are included in this report related to employed children in addition to a special chapter discussing our children in the Intifada, as there is an urgent need to formulate a group of steps and programs to harness the impacts of these events on childhood.

We hope this report constitutes an effective and valuable tool that would enable beneficiaries to understand the reality of the Palestinian child and his\ her needs in order to be able to draw a Palestinian vision and enhance levels of planning, coupled with developing constructive developmental programs that meet the needs of our children in Palestine.

Demographic Reality

- The estimated population of the Palestinian Territory was 3.8 million in mid 2005, of which 2.4 million were in the West Bank and 1.4 million in Gaza Strip.
- More than half of the Palestinians (52.7%) were children below the age of 18 years in 2005 (1.983 million child).
- The Demographic and Health Survey 2004 indicates that fertility rate in the Palestinian Territory is 4.6 children.
- PCBS estimates indicate that there has been a drop in the crude birth rate over the past decade. It was estimated at 42.7 per 1000 persons in 1997 and dropped to 37.3 in 2005.
- 42.2% of Palestinian children under 18 years living in the Palestinian Territory are refugees: 26.9% in the West Bank and 68.5% in Gaza Strip.
- Data on marriage and divorce in the Palestinian Territory in 1997-2004 showed awidespread phenomenon of early marriage especially among females. The mean age of females at first marriage was 19.3 years, and 24.6 years for males.
- The findings of the Demographic and Health Survey of 2004 showed that females head 7.0% of the total number of Palestinian households in the West Bank compared with 9.9% in Gaza Strip.
- Data of 2005 showed that the average population density per room in the Palestinian Territory is 1.8 persons per room.

Child Health

- 9.9% of children under five years suffered from stunting and 4.9% of children suffered from underweight, 2.8% of children suffered from wasting in 2004.
- Infant mortality rate dropped from 25.5 per 1000 births between 1995 and 1999 to 24.2 per 1000 births between 1999 and 2003.
- Under five mortality rate also dropped from 28.7 per 1000 births between 1995-1999 to 28.3 per 1000 births between 1999-2003.
- The data of the annual report of the Ministry of Health 2004 states that the main leading causes of infant mortality in the West Bank were premature delivery and low birth weight (16.0%), respiratory system diseases including infection (8.3%), and congenital anomalies (18.3%).
- In Gaza Strip, infant mortality caused by premature and low birth weight remained the main leading causes of infant mortality (34.6%)..
- Evidently respiratory system infections and congenital anomalies are the main leading causes of deaths among infants and children under five.
- In the West Bank under-5 deaths caused by respiratory system diseases registered 8.2% compared with 8.4% in Gaza Strip, 2004.
- The data showed that the percentage of children (last child born during the period 2001-2003) who were breastfed was 95.6% in 2004.
- The Demographic and Health Survey 2004 revealed that 99.7% of Gaza children aged (12-23 months) were immunized against Tuberculosis, whereas 92.2% of West Bank children were immunized against Tuberculosis.
- There has been a significant increase between the cases of diarrhea registered in April 2000 Health Survey at 6.7% and June 2004 Demographic and Health Survey at 15.3%.
- The Demographic and Health Survey 2004 showed that 96.5% of pregnant women received antenatal care, distributed by 97.2% in Gaza Strip and was 96.1% in the West Bank.
- The findings of the Demographic Health Survey 2004 showed that 37.4% of women who gave birth during the year preceding the Survey received injection against tetanus.
- 20.3% of interviewed pregnant women complained of persistent headache, which could indicate suffering from anemia and its negative impact on the mother and fetal health.
- Data revealed that the percentage of births occurring at governmental hospitals/ health centers stands at 53.2%, with 44.8% and 64.1% in the West Bank and Gaza Strip respectively in 2004.

- The percentage of women who received postnatal care increased from 26.3% in 2000 to 34.1% in 2004. In the West Bank, the percentage increased from 29.0% to 37.6%, while in Gaza Strip it increased from 21.4% to 29.6% at the same period.
- The Annual Report of the Ministry of Health 2004 showed that the number of primary health care centers runned by the Ministry are 413, 357 centers in the West Bank and 56 centers in Gaza Strip..

Children's Educational Reality:

- At the outset of the scholastic year 2005/2006, the number of students enrolled in the basic and secondary stage was 1,078,488 students. Female students constitute around 49.8%.
- In the scholastic year 2005/2006, 11.6% of all students were enrolled in the secondary education stage, and 88.4% are enrolled in the basic stage.
- Data showed that 70.2% of total students were enrolled in governmental schools, 23.6% were enrolled in UNRWA schools, and 6.2% of them were enrolled in private schools In the scholastic year 2005/2006.
- The number of children in kindergarten rose from 69,134 in scholastic year 1996/1997 to 73,119 in scholastic year 2004/2005, an increase of 5.8%.
- Students at basic stage increased from 572,529 in the scholastic year 1994/1995 to 953,621 in the scholastic year 2005/2006, an increase rate of 66.6%. Females and males constituted 49.7% and 50.3% respectively.
- Students at secondary education stage increased from 45,339 in 1994/1995 to 124,867 students during the scholastic years 2005/2006, an increase of 175.4%. Female students constituted 52.1% of the total number students in the secondary stage in the scholastic year 2005/2006.
- The number of students enrolled in vocational high school reached 5,999 in the scholastic year 2005/2006 representing 4.8% of the total number of secondary school students.
- The percentage of repetition at basic stage in the scholastic year 2003/2004 in the Palestinian Territory was 1.5% for males and 1.3% for females, while at the secondary stage, the percentage was 1.4% for males and 0.6% for females.
- The drop-out rate at the basic stage in the scholastic year 2003/2004 in the Palestinian Territory was 0.9% for male students and 0.6% for female students. At the secondary stage, the rates were 2.3% for males and 3.6% for females.
- The number of schools totaled 2,276 in 2005/2006: 1,536 basic stage and 740 secondary schools. 75.4% of schools are in the West Bank and 24.6% are in Gaza Strip.
- According to 2004/2005 data, most schools are connected to the electricity network and the public sewers system; however, heating is only available for 12.3% of students at governmental schools, for 9.5% of UNRWA school students and 56.0% of private school students and 53.4% of kindergartens.

- Comparing classroom density according to region, it is noticed that the classroom density in basic schools is higher in Gaza Strip than in the West Bank (41.6 students per classroom in Gaza Strip and 31.9 students per classroom in the West Bank in 2005/2006).
- In the scholastic year 2004/2005, about 48.7% of kindergartens in the Palestinian Territory had computers, of which 51.3% were in the West Bank and 40.1% in Gaza Strip.
- The number of teachers in schools and kindergartens reached 42,385 in the scholastic year 2005/2006 (19,520 male teachers and 22,865 female teachers).

Child Cultural and Recreational Reality:

- In 2004, 71.5% of households who have children under 18 years do not have computers, 4.8% do not have TV sets, 28.6% do not have a satellite dish, and 90.7% do not have Internet at home.
- The findings of the Computer, Internet and Mobile Survey 2004 showed that 28.5% of households having children under 18 years in the Palestinian Territory have computers, with 31.1% in the West Bank compared with 23.8% in Gaza Strip.
- 28.4% have a home library compared with 15.3% in 2003.
- According to the survey findings, of the cultural institutions of the Palestinian Territory, 2005 the number of cultural centers in the Palestinian Territory is 213 including 174 operating centers; 122 of which are in the West Bank and 52 in Gaza Strip.
- Results showed that 60.3% of the cultural centers in the Palestinian Territory have libraries (62.3% in the West Bank and 55.8% in Gaza Strip) and 74.3% of cultural centers which have libraries have special section for children in their libraries in 2005.
- The Computer, Internet and Mobile Survey 2004 showed that 37.0% of children aged 10-17 years are participating in sport activities, and 29.8% are practicing drawing.
- In 2003/2004, 48.3% of kindergartens had computers, (49.0% in the West Bank and 45.9% in Gaza Strip).
- Computer, Internet and Mobile Survey 2004 showed that 56.0% of children aged 10-17 are using computers, distributed as 56.4% among males and 55.5% among females; 62.0% among the West Bank children compared with 46.3% among Gaza Strip children use computers.
- 25.3% of children using Internet stated that they use it for study and 22.5% for knowledge, 20.2% are using it for chatting and 17.8% for entertainment and recreational purposes, and 14.2% for mail purposes.

Children in Need of Special Protection

- In 2004, the statistics indicated that the rate of the total diffusion of poverty among Palestinians' children in the Palestinian Territory was 32.6%, of which 24.9% in the West Bank and 44.7% in Gaza Strip.
- Children living in the refugee camps have the highest incidence of poverty overall. About 38.2% of children living in refugee camps were poor, and this is higher than the rate of poverty in urban (32.2%) and rural areas (30.2%).
- The situation of the poor male-children (32.2%) seemed to be better than female-children (33.1%), but poor males constitute about 50.3% of poor children.
- The poverty rate among children who belonged to households whose heads are non-participants in labor force is 44.3% compared with 31.4% among children who belonged to households whose heads are labor force participants.
- 3.8% of the total number of children aged 10-17 years participated in labor force in 2005, 4.8% in the West Bank and 2.1% in Gaza Strip.
- 67.2% of employed children are working for their families (unpaid family employee), 27.7% of employed children are wage employees for others, and 5.1% of employed children are Employer.
- Data showed that 47.6% of employed children are not at school since working is an appropriate alternative for leaving school in 2005.
- The low economic status of the household is the main reason for child labor in 2004: 71.0% of employed children aged 5-17 years are working because of economic need (51.4% to assist in family projects, 19.6% to contribute in increasing family income).
- 51.4 % of Mothers stated that one of their children aged (5-17) years was exposed to violence during 2005, distributed by 53.3% in the West Bank and 48.5% in Gaza Strip.
- Data revealed that the household members were the main source of practicing assault against children at 93.3%, followed by boys and girls at street at 39.4%, then the teacher at 34.6%.
- Available data from the Ministry of Social Affairs (MOSA) records showed that there were 1,680 children in orphan institutions; 1,042 male children and 638 female children lived in 25 orphanages in the year 2003.
- In 2003, the Ministry of Social Affairs dealt with 7,839 children in need of special protection

Palestinian Children and the Intifada:

- Between September 2000 and January 31, 2006, 786 Palestinian children were martyred, constituting 19.8% of the total martyrs; 344 children were martyred in the West Bank and 440 in Gaza Strip, and 2 children were martyred in occupied Palestinian Territory 1948.
- During Al-Aqsa Intifada, September 28, 2000, till September 28, 2005, 43,761 Palestinians were injured, of which 29,096 were in the West Bank and 14,665 in Gaza Strip. and 28,822 Palestinian children were injured till September 28, 2005.
- About 391 Palestinian children were arrested between September 28, 2000, and February 20, 2006.
- During the Al-Aqsa Intifada, the Israeli occupation forces attacked 269 schools in different places in the West Bank and Gaza Strip. These schools were forcefully and illegally broken into, teargas and bullets were used against students, and the premises were then bombed. And 498 schools were closed in addition to 1,289 schools were closed at the begging of -Aqsa intifada.
- During Al-Aqsa intifada, September 29, 2000, till January 20, 2006, 579 students were martyred in the Palestinian Territory.
- Injured students during Al-Aqsa intifada totaled 3,471 during September 29, 2000 to January 20, 2006, distributed as 55.3% in the West Bank and 44.7% in Gaza Strip.
- The results from 2005 household survey revealed that 3.2% of the individuals in the localities affected by the wall left their education due to the security situation and the expansion and annexation wall, while it's noticed that 25.7% of the individuals in the affected localities left their education due to the bad economic conditions.
- The results showed that 48.4% households that have some member attending (basic/ secondary) education used detour roads in order to reach their schools as a method of adaptation with the difficulties they face compared with 79.7% households that have some member attending (basic/ secondary) education were forced to be absent from schools due to the closure.
- 28.3% of the households have access problem to health services because of military checkpoints, 37.3% due to the Israeli closure, 45.7% because of the high cost of medical treatment, 25.9% because of remoteness of health centers, 22.0% because of inability for medical staff to reach health centers, and 6.7% because of expansion and annexation wall.

Chapter 1

Demographic Reality

A child means every human being under the age of eighteen years unless, under the law applicable to the child, majority is attained earlier.

(Child's Rights Convention, Article 1)

Children are one of the main resources for the future development in any society. Childhood constitutes a particular phase of human development where future characteristics and personality are formulated. Many countries recognize its importance by focusing efforts on providing attention and care for children with the aim to develop all aspects of a child's life: social, economic and environmental. A child is defined as a person under the age of 18 years.

The aim of analyzing, presenting, and evaluating statistics is to develop national indicators for monitoring the situation of the Palestinian child and the extent of the fulfillment of their rights. It also aims at raising the level of awareness among decision makers, planners, and non-governmental organizations (NGOs), and those who lobby for the rights of the child about the importance of planning, legislating, prioritizing, and fulfilling children's needs.

This Chapter covers a list of significant demographic indicators that are in line, generally, with the Convention on the Rights of the Child adopted by the UN General Assembly in 1989.

Population Growth

The estimated population of the Palestinian Territory was 3.8 million in mid 2005, of which 2.4 million were in the West Bank and 1.4 million in Gaza Strip; the total population in 1997 was 2.8 million. The natural increase in the Palestinian Territory (3.3%) mid 2005 is considered among the highest rates in the world, where the world population increased by (1.4%).

Sex Ratio

States Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, color, sex, language, religion, political or other opinion, national, ethnic, or social origin, property, disability, birth or other status.

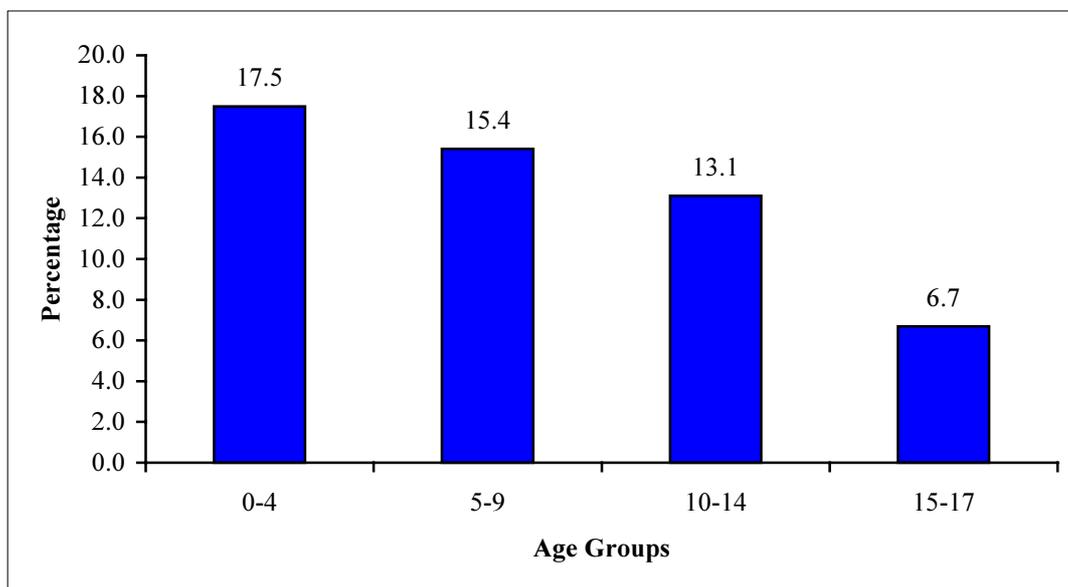
(Convention on the Rights of the Child, Article 2)

Population estimates of the Palestinian Territory mid 2005 showed a small increase in the number of males under the age of 18 years compared to females. The number was 1,010,357 and 973,305 respectively, a sex ratio of 103.8, compared to 757,000 males and 727,000 females, with sex ratio of 104.1 in mid 1997. In the West Bank, the number of males under the age of 18 years was estimated at 613,130 compared with 589,902 for females, a sex ratio of 103.9, while in Gaza Strip, the number of males was 397,227 and 383,403 for females, a sex ratio of 103.6 in mid 2005.

More than half of the Palestinians (52.7%) were children below the age of 18 years mid 2005

The study of the childhood age structure is significant since high rate of childbirths mean an increase of burdens to the parents and the state. It also reflects the rights of the children and their needs that the parents and the society must fulfill. Children aged (0-4 years) constitute 17.5% of the total Palestinian population living in the Palestinian Territory in mid 2005. Children aged (5-9 years) constitute 15.4% of the total population. Children aged (10-14 years) constitute 13.1% of the total population. Children aged (15-17 years) constitute about 6.7% of the Palestinian population in the Palestinian Territory.

Figure (1-1): Percentage of Children (under 18 years) of the Total Population in the Palestinian Territory, 2005



Source: Palestinian Central Bureau of Statistics, 2005. *Population Projections in the Palestinian Territory. Revised series.* Ramallah-Palestine.

Fertility

The fertility rate is influenced by social tradition, marriage age, women's attitudes towards having children, the use of contraception, and the country's family planning policies, among other factors. The Demographic and Health Survey 2004 indicates that the total fertility rate in the Palestinian Territory is 4.6 children. There is a significant discrepancy between the fertility rate of the West Bank at 4.1 children and Gaza Strip at 5.8 children. However, there is evidence that fertility rate began to drop during of the last decade. The contribution of females aged 15-19 to the total fertility rate in the Palestinian Territory dropped from 9.4% in 1995 to 7.4% in 2003. The total fertility rates in the Palestinian Territory is very high when compared to the fertility rate in other countries of the world. In Arab countries, for instance, the total fertility rate in Syria and Jordan was 3.7 in 2005.

Birth Rate

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

(Child's Rights Convention, Article 7)

A set of direct and indirect factors can influence birth rates. The most prominent of these factors includes: the level of fertility, availability of advanced health services, the care that the state provides for mothers and children and mortality rates. The number of children under 18 years rose from 1.3 million in the middle of the past decade to 1.9 million in 2005. PCBS estimates indicate that there has been a drop in the crude birth rate over the past decade. It was estimated at 42.7 per 1000 persons in 1997 and dropped to 37.3 in 2005; it was expected to continue dropping to 33.8 in the year 2010. Such a drop is related to a drop in the fertility rate as well as to the success of health programs towards reproductive health.

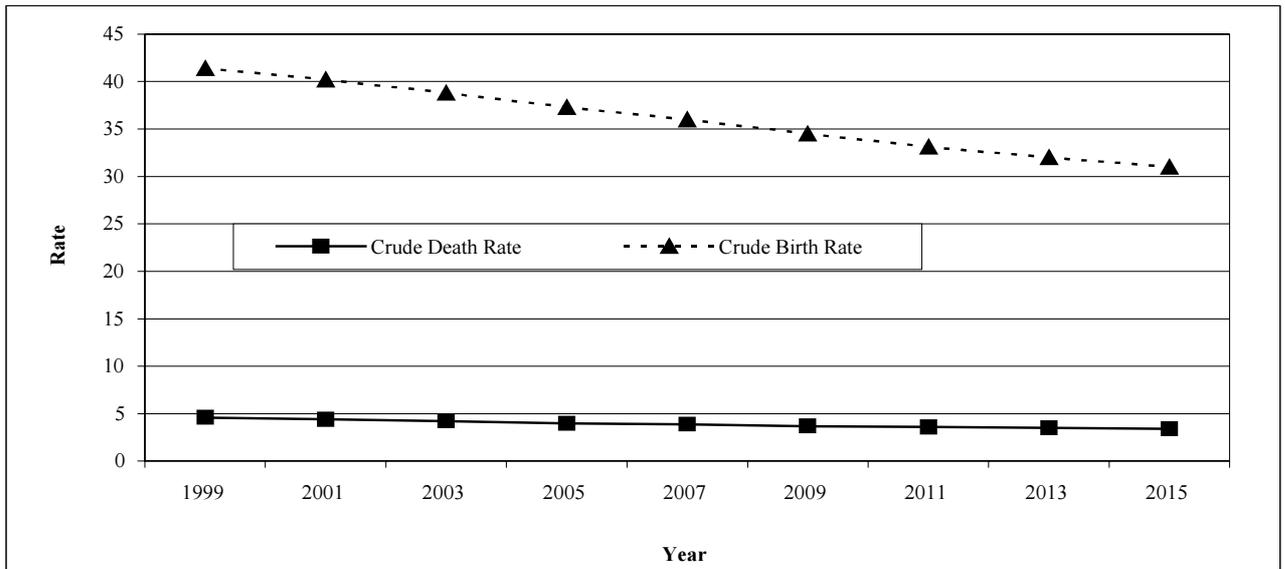
Mortality

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

(Child's Rights Convention, Article 24)

The mortality rate reflects the extent of progress made in the health and medical services of a state, whether preventive or curative. Trends in mortality rates showed a decline in the Palestinian Territory because of the policies that support health care and health awareness among the population, trends to provide health insurance and health services for the residents, as well as immunization campaigns. Mortality rates dropped especially among infants at the beginning of the past decade. Crude death rate registered 4.0 per 1000 people in 2005. Infant mortality rate dropped from 27.3 per 1000 births in 1990-1994 to 24.2 in 1999-2003. Consequently, life expectancy in the Palestinian Territory increased to 71 for males and 73 for females in 2005.

Figure (1-2): Crude Birth and Death Rates in the Palestinian Territory, 1999- 2015



Palestinian Central Bureau of Statistics, 2005. *Population Projections in the Palestinian Territory. Revised series.* Ramallah-Palestine.

Refugee Status

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.

(Child's Rights Convention, Article 22)

Refugee status refers to Palestinians who were forced out of their lands which Israel occupied in 1948 including their sons and grandchildren. The 2005 data showed that 40.2% of the Palestinian population in the Palestinian Territory are refugees: 24.2% in the West Bank and 67.5% in Gaza Strip. 42.2% of Palestinian children under 18 years living in the Palestinian Territory are refugees: 26.9% in the West Bank and 68.5% in Gaza Strip.

The Children of the Diaspora

Children of the Diaspora refer to children living outside their homeland, Palestine, due to their parents' emigration to other countries, for one or another reason. The number of Palestinian refugee children registered with UNRWA in Jordan, Syria, and Lebanon reached 2.6 million and 1.6 million in the West Bank and Gaza Strip, at the end of 2004 (UNRWA statistics). The study of living standards of Palestinian refugees in the Diaspora in different years showed that Palestinian communities in the Diaspora are young. The percentages of refugees under the age of 15 years were as follows: 42.6% for Jordan in 1996, 36.7% for Syria in 2002, and 36.4% for Lebanon in 2000. Infant mortality rates were similar to the rates in the developing countries at 32.0 per 1000 births in Lebanon in 2000, 24.9 per 1000 births in Jordan in 1998, and 23.5 per 1000 births in Syria in 2000.

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 the Palestinian Territory in 1997-2004 showed a widespread phenomenon of early marriage especially among females. The mean age of females at first marriage was 19.3 years, and 24.6 years for males, whereas the mean age at first marriage in the West Bank was 19.5 and 25.1 years for females and males respectively, and in Gaza Strip 19.1 and 24.0 years for females and males respectively. The mean age of marriage among those who have a bachelor or higher degree was 24.2 years for females and 26.8 years for males in the Palestinian Territory in 2004. This reflects the role of education in reducing early marriage among Palestinians. The mean age of marriage for those who have a preparatory certificate only was 17.1 for females and 22.6 for males.

Sex of Head of Household

The findings of the Demographic and Health Survey of 2004 showed that females headed 7.0% of the total Palestinian households in the West Bank compared with 9.9% in Gaza Strip. Moreover, findings indicated that the average size of households headed by females was 3.1 whereas the average size for households headed by males was 6.0. Matriarchal families emerge when the male head of the family dies and the children are still young or when a husband migrates and in the cases of divorce. Household size stands at 5.7 individuals regardless of the sex of the head of household.

Housing Conditions

Population density (average number of people in one room) is an indicator that should be studied in order to find its impacts on the education and health of the child. Data of 2005 showed that the average population density in the Palestinian Territory is 1.8 persons per room; data showed that 14.4 % of households live in high-density housing units (3 or more persons per room), distributed as 15.9% in Gaza Strip and 13.7% in the West Bank.

Data showed that the average number of rooms per housing unit reached 3.6 rooms, 18.6% of households in the Palestinian Territory live in housing units of 1-2 rooms, distributed by 20.4% in the West Bank and 15.0% in Gaza Strip.

Housing conditions have a psychological and health impact on children. Housing Conditions Survey of 2005 showed that 16,071 households was exposed to partial demolition of their housing unit by the end of 2005, distributed by 14,261 in the West Bank and 1,810 housing units in Gaza Strip.

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Chapter 2

Child Health

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 to access to such health care services.

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

Child health can be measured by using indicators such as infant mortality rate (or child mortality rate), contagious diseases rate among children under 5 years, and the nutritional status of children. Child health can also be influenced by a number of basic conditions or factors including factors related to the mother's education, age at giving birth, and other background characteristics. It can also be affected by indirect factors such as the socioeconomic status of the family and accessibility of health services.

The significance of monitoring the rights of the child reflects the advances made regarding the level of children's health, in addition to exposing remaining gaps as well as ensuring a better future for children. Monitoring the rights of the child also allows implementation of policies and programs that aim at improving the child and developing his or her status in all areas especially health, whether locally or internationally.

Monitoring of the rights of the child includes investigating the achievement of the mid and end decade goals (1990-2000) which emphasize improving the state of child health by reducing cases of diarrhea and respiratory infections, and lowering infant and child mortality rates. It also includes indicators showing the level of immunization and other related indicators.

The concern about Palestinian children's health stems from the fact that they have suffered difficulties in recent decades. In fact, they are still suffering difficult living conditions due to the Israeli occupation. Henceforth, as part of the efforts aiming at improving the socioeconomic conditions of Palestinian children, the PNA has sought, since it took control, to prepare a national strategic program for child's health. The Convention on the Rights of the Child was used as the general framework for children's services. The National Health Plan of 1994 encouraged improved medical care, especially concerning mother and child health, and reducing the existing gaps between child health indicators such as mortality, disease, and immunization levels. The National Strategic Health Plan 1999-2003 emphasized the need for improving the quality of widespread health services provided for mothers and children, in addition to working toward the MDGs, mainly the goals regarding reduction of child mortality rates by two thirds by the years 1990-2015 and reduction of maternal mortality rate by three quarters during 1990-2015.

This chapter presents selected health indicators related to child and infant mortality, causes of death among infants and children under five years of age, nutritional status, and immunization.

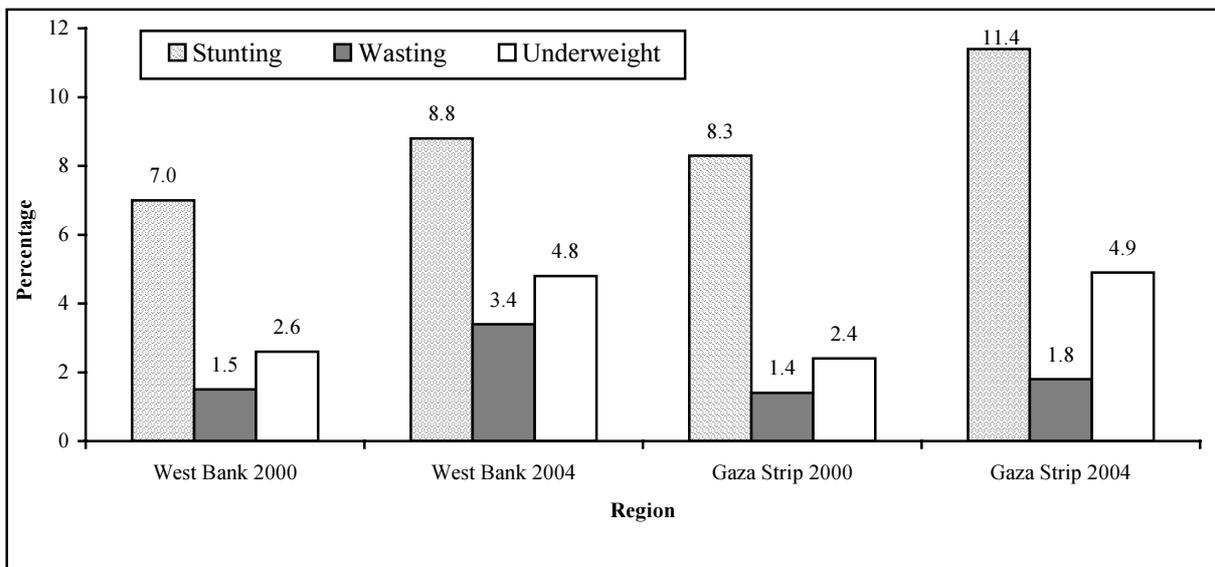
Nutritional Status

Nutritional status is one of the most important indicators of the child’s well being. The quantity and quality of food the child consumes and the method of preparing such food influences the nutritional status. The frequent catching of diseases among children also influences it.

9.9% of children under five years suffered from stunting and 4.9% of children suffered from underweight

Stunting is the most common problem among children under five years since no progress was made between 2000 and 2004. The Health Survey 2000 indicated that 7.5% of children were stunted and the DHS 2004 showed that 9.9% of children had the same problem. The quality of food could be a reason in rising or reducing the percentage of stunted children, however, this requires investigation and research. However, the percentage of wasted children increased from 1.4% in 2000 to 2.8% in 2004 and the percentage of underweight increased from 2.5% in 2000 to 4.9% in 2004.

Figure (2-1): Percentage of Children Suffering Stunting, Wasting, and Underweight by Region in 2000 and 2004



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

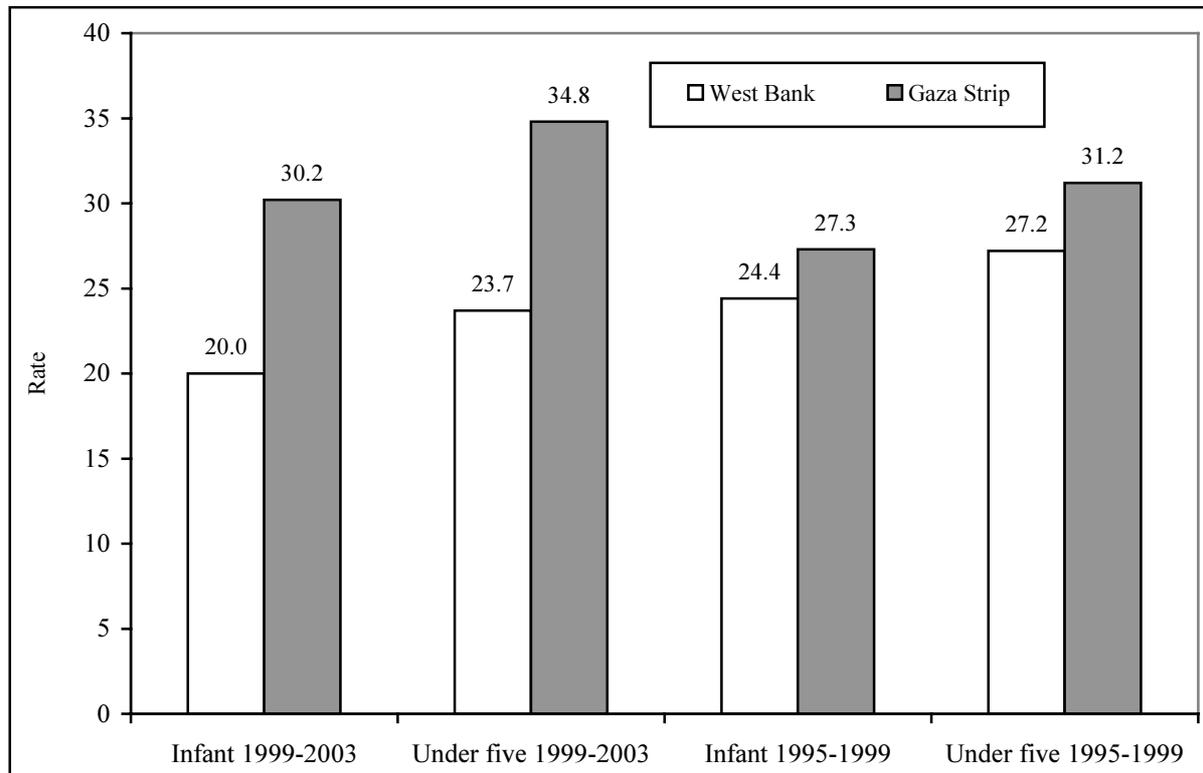
Palestinian Central Bureau of Statistics, 2000. *Health Survey 2000. Main Findings.* Ramallah-Palestine.

The data of the DHS 2004 did not show a clear-cut distinction in malnutrition or stunting between males and females.

The DHS 2004 showed that 65.3% of households consume iodized salt, 56.5% in the West Bank and 82.7% in Gaza Strip.

Child Mortality Rate

Figure (2-2): Infants and Child Mortality Rates by Region, 1995-1999, 1999-2003



Source: Palestinian Central Bureau of Statistics, 2000. *Health Survey, 2000. Main Findings*. Ramallah-Palestine.

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

Figure (2-2) indicates that infant mortality rate dropped from 25.5 per 1000 births between 1995 and 1999 to 24.2 per 1000 births between 1999 and 2003. Under five mortality rate also dropped from 28.7 per 1000 births between 1995-1999 to 28.3 per 1000 births between 1999-2003.

Achieving such progress in a relatively short period of time (during the past five years) has been the result of the concern that the health sector, whether public or private, has paid to providing healthcare programs for children and mothers in the various Palestinian localities (refugee camps, rural, and urban areas.) Many of these programs emphasized increase in health education and awareness in the household. The efforts of the PNA and UNRWA in creating a national immunization program for all children below three years were the most prominent. Additionally, there were other health programs such as health education and increase of maternal and child health care centers. However, the progress achieved is below the planned level; the National Health Plan of 1994 stipulated that by 2000, the child mortality rate would drop by 30% but a drop of 6.6% only has been achieved. This could have been caused by failure to draw attention to the quality of care provided to mother and child as well as failure to search deep into the causes of death and deal with them accordingly.

Data reveal that infant mortality in the West Bank dropped from 24.4 per 1000 births between 1995-1999 to 20.0 per 1000 births between 1999-2003. There was also a marked drop in child

mortality from 27.2 per 1000 births between 1995-1999 to 23.7 per 1000 births between 1999-2003.

Gaza Strip witnessed an evident rise in such rates mostly among under-5 mortality, where it increased from 31.2 per 1000 births between 1995-1999 to 34.8 per 1000 births between 1999-2003. Infant mortality also increased from 27.3 per 1000 births between 1995-1999 to 30.2 per 1000 births between 1999-2003.

Infant mortality among males in the Palestinian Territory increased from 25.3 per 1000 births between 1995-1999 to 26.6 per 1000 births between 1999-2003. However, infant mortality among females decreased from 25.6 per 1000 births between 1995-1999 to 21.6 per 1000 births between 1999-2003.

Under-5 mortality rate increased among male children from 29.1 per 1000 births between 1995-1999 to 31.8 per 1000 births between 1999-2003. On the other hand, under-5 mortality rate among female children dropped from 28.3 per 1000 births between 1995-1999 to 24.6 per 1000 births between 1999-2003.

Causes of Infant Mortality

Premature delivery and low birth weight are the main cause of infant mortality in the West Bank and Gaza Strip in 2004.

The data on the causes of death among infants and under-5 children is based on reported registered data at the Ministry of Health records. Since there is no unified classification between the West Bank and Gaza Strip in registering deaths according to cause, we find significant discrepancy between the results; the data quality is low when compared to reality.

The data of the annual report of the Ministry of Health 2004 states that the main leading causes of infant mortality in the West Bank were premature delivery and low birth weight (16.0%), respiratory system diseases including infection (8.3%), and congenital anomalies (18.3%). In Gaza Strip, infant mortality caused by premature and low birth weight remained the main leading causes of infant mortality (34.6%).

Prematurity and low birth weight remained the main leading causes of infant mortality in Gaza Strip. However, there has been a sharp increase in the percentage of deaths caused by respiratory system infections.

Data showed that deaths caused by respiratory system infections in Gaza Strip dropped from 13.3% in 2002 to 8.3% in 2004. However, there has not been a significant difference in deaths caused by sudden infant death syndrome, which was 6.0% in 2002 and dropped to 6.1% in 2004.

Despite the fact that there are a high percentage of women who receive antenatal care in Gaza Strip, deaths caused by premature birth constitute the main leading cause of infant mortality, which raises a number of questions.

The most prominent achievements of the past period is probably eradicating the causes of infant mortality resulting from diseases of the digestive system and dehydration as well as deaths caused by birth complications.

Causes of Under -Five Child Mortality

Evidently respiratory system infections and congenital anomalies are the main leading causes of deaths among infants and children under five.

In the West Bank under-5 deaths caused by respiratory system diseases registered 8.2% compared with 8.4% in Gaza Strip, 2004.

Breastfeeding

States Parties ...shall take appropriate measures 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 breast-feeding, hygiene and environmental sanitation and the prevention of accidents.

(Convention on the Rights of the Child, Article 24-2-h)

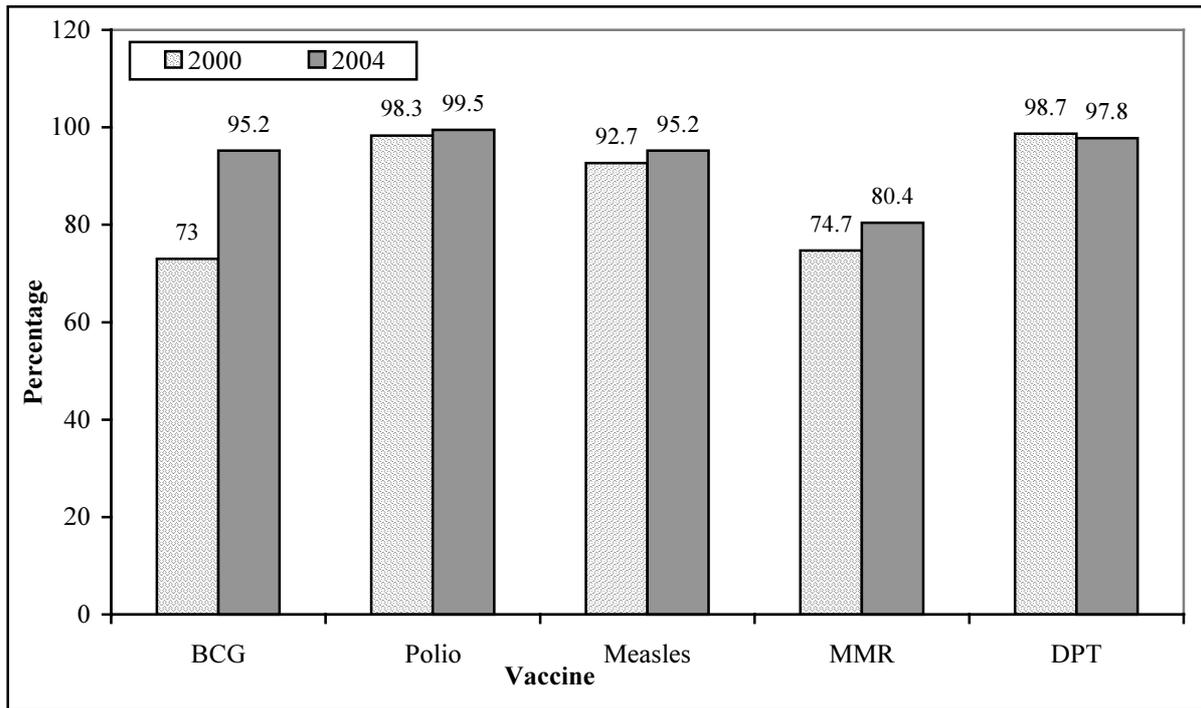
Breastfeeding Prevalence

The data showed that the percentage of children (last child born during the period 2001-2003) who were breastfed was 95.6% in 2004, distributed as 95.5% in the West Bank and 95.7% in Gaza Strip. In the years 1997-2000, the rate was 97.2%.

The above rates indicate that the percentages of breastfeeding in the Palestinian Territory are good. However, duration of breastfeeding in 2002 stands at 13.2 months, the mean duration was 10.9 months in 2004. The DHS 2004 showed that 55.2% of children were breastfed during the first hour of birth and 17.5% were breastfed after six hours or more. On the other hand, the 2000 Health Survey showed that percentages were 50.3% and 15.8% respectively. Weaning during the first three months of birth is still prevailing phenomenon. Data of DHS 2004 showed that 16.1% of children (last child) were weaned during the first three months of birth, compared with 14.0% in 2000. Main reasons for weaning were; insufficient breast milk at 31.6%, the child's refusal of breastfeeding at 20.9%.

Immunization

Immunization against Tuberculosis, Mumps/ Measles, and Rubella in Palestine is still low and there is still a clear distinction between vaccination against tuberculosis in the West Bank and Gaza Strip. The DHS 2004 revealed that 99.7% of Gaza children aged (12-23 months) were immunized against Tuberculosis, whereas 92.2% of West Bank children were immunized against Tuberculosis.

Figure (2-3): Percentage of Children (aged 12-23 months) Whose Health Cards were Seen and Received Specific Immunization in 2000 and 2004

Source: Palestinian Central Bureau of Statistics, 2000. *Health Survey, 2000. Main Findings.* Ramallah-Palestine.

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

The reason for the distinction between tuberculosis immunization between Gaza Strip and the West Bank could be the result of introducing such vaccine in 1999 as part of the immunization program of the Ministry of Health. In any case, UNRWA introduced tuberculosis immunization to its clinics and health centers prior to that. Additionally, Jerusalem children did not receive this type of vaccine. There is also still a distinction between the utilization of measles immunization between the West Bank and Gaza Strip. This could be caused by the fact that the Ministry of Health introduced this vaccine to its programs in 1996, which deprived non-refugee children in the West Bank from this immunization while refugee children received at UNRWA health centers. Immunization against measles in the West Bank rose from 89.1% in 2000 to 93.1% in 2004. In Gaza Strip, however, the percentage increased from 98.2% in 2000 to 98.4% in 2004. Vaccination against polio in the Palestinian Territory rose from 98.3% and 98.7% in 2000 to 99.5% and 97.8% in 2004 respectively.

Childhood Diseases

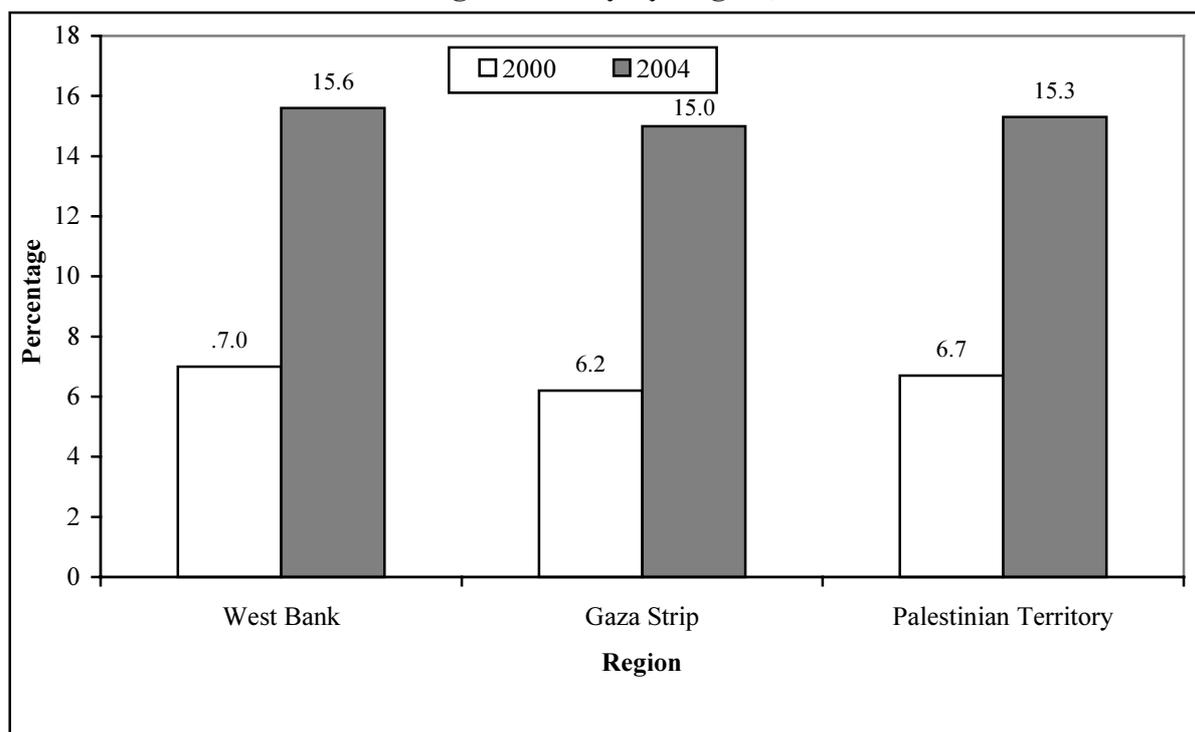
The rate of spread of contagious diseases among children is an indicator of children's well being and of the health environment where they live. It could also be an indicator of the social environment of the households. The following presents some child diseases:

Diarrhea

There has been a significant increase between the cases of diarrhea registered in April 2000 Health Survey at 6.7% and June 2004 DHS at 15.3%.

As for regions, West Bank children are more susceptible to diarrhea than Gaza children. In 2000, 7.0% of West Bank children had diarrhea whereas 6.2% of Gaza children suffered from diarrhea. The figures increased in 2004 to 15.6% for the West Bank and 15.0% for Gaza Strip. Moreover, infants aged 6-11 months were more susceptible to diarrhea than other children with an incidence rate of 34.6%. This could be due to the fact that infants start receiving family food or manufactured baby food at that age.

Figure (2-4): Percentage of Children (under 5 years) Who had Diarrhea During the Two Weeks Preceding the Survey by Region, 2000 and 2004



Source: Palestinian Central Bureau of Statistics, 2000. *Health Survey, 2000. Main Findings.* Ramallah-Palestine.

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

Data of the DHS 2004 indicated that 31.0% of children who suffered diarrhea received treatment with ORS and 65.4% received increased liquids during the episode of diarrhea. Most importantly, the Ministry of Health dropped dehydration and digestive system diseases from its records of fatal diseases among infants and children under the age of five.

Differential Indicators of Infant's Survival (*Indicators related to Mothers' Health*)

Antenatal Care

Antenatal care can address health problems that may accompany pregnancy, or may have occurred before it but become more complicated during pregnancy. Health care can also determine which pregnant women require special attention and follow up during pregnancy and at birth for reasons that could affect mother and child's health.

The Demographic and Health Survey 2004 showed that 96.5% of pregnant women received antenatal care, distributed by 97.2% in Gaza Strip and was 96.1% in the West Bank.

Noticeable progress has been made in the percentage of women who receive antenatal care; however, such progress has not been sufficient because the National Health Plan of 1994 aimed at raising the percentage to 100% in 2000. This could have been caused by lack of efficient promotion of the importance of antenatal care during health awareness programs. 66.6% of pregnant women covered by the Demographic and Health Survey 2004, who did not receive antenatal care, stated that the reason for not seeking healthcare was having previous experience.

Tetanus Toxoid Vaccination

37.4% of pregnant women in the preceding year of the survey 2004 received tetanus toxoid vaccination

Tetanus toxoid is one of the main causes that lead to maternal and neonatal mortality. No tetanus deaths have been recorded among Palestinian children at this stage. The findings of the Demographic Health Survey 2004 showed that 37.4% of women who gave birth during the year preceding the Survey received injection against tetanus; the percentage was 43.6% for the West Bank and 33.3% for Gaza Strip. In any case, the percentage of women who received tetanus shots in the Palestinian Territory is rather low when compared to the percentage of mothers who received antenatal care. Vaccination against tetanus has not reached the level set forth in the 1994 health plan, which aimed for 100%. The reason could be a lack of adhering to a clear policy for the private sector to urge women who receive antenatal care to receive shots against the disease at health centers of the Ministry of Health.

Health Problems During Pregnancy

About 25.2% of pregnant women covered during the period 2001-2003 stated that they suffered from urinary tract infections during pregnancy compared with 24.3% in 1997-1999; 9.4% suffered from high blood pressure compared with 7.6% in 1997-1999; 9.7% of pregnant women suffered bleeding compared with 4.5% in 1997-1999.

The findings of the Demographic and Health Survey 2004 showed that 3.7% of pregnant women suffered eclampsia compared with 2.3% in 2000. This percentage is a serious indicator since this problem leads to serious complications for mother and fetus.

The Demographic and Health Survey 2004 showed that 20.3% of interviewed pregnant women complained of persistent headache, which could indicate suffering from anemia and its negative impact on the mother and fetal health. Data revealed that 21.1% of women (15-49) years who gave birth in the last three years preceding the survey suffered from anemia, with 19.8% in the West Bank compared with 22.7% in Gaza Strip; 23.5% suffered anemia in refugee camps, 21.0% among urban women and 19.8% among rural women. 75.7% of pregnant women received iron tablets.

Natal Care

Data revealed that the percentage of births occurring at governmental hospitals/ health centers stands at 53.2%, distributed as 44.8% and 64.1% in the West Bank and Gaza Strip respectively in 2004. The wide spread of UNRWA clinics in Gaza Strip could be the reason for the increase in percentage of births occurring at UNRWA health facilities compared to the West Bank, 12.6% and 3.7% respectively.

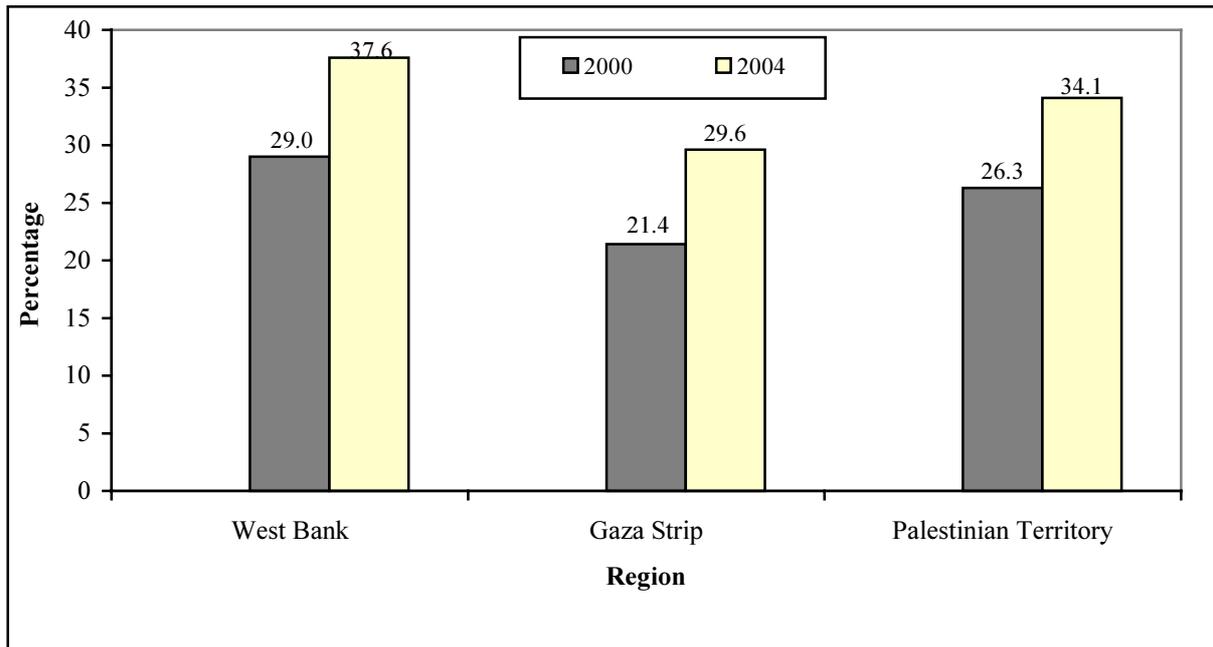
The percentage of births occurring with the supervision of a physician was 66.4%, distributed as 54.6% in the West Bank and 81.1% in Gaza Strip in 2004, which is a positive sign of health care follow up.

Postnatal Care

34.1% of women received postnatal care in 2004, compared with 26.3% in 2000

Figure (2-5) shows that the percentage of women who received postnatal care increased from 26.3% in 2000 to 34.1% in 2004. In the West Bank, the percentage increased from 29.0% to 37.6%, while in Gaza Strip it increased from 21.4% to 29.6% at the same period.

The National Strategic Health Plan 1999-2003 aims at increasing the use of health services by 50% including postnatal care. However, the increase reached 34.8% in 2000.

Figure (2-5): Percentage of Women Who Received Postnatal Care by Region, 2000 and 2004

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

Palestinian Central Bureau of Statistics, 2000. *Health Survey 2000. Main Findings*. Ramallah - Palestine.

The findings showed that according to the DHS-2004, 44.9% of women who delivered at hospitals stated that they received health education, distributed as 54.7% in the West Bank and 31.4% in Gaza Strip. 32.9% stated that they have received health education about the importance of medical follow up after delivery.

Maternal and Child Health Centers

The Annual Report of the Ministry of Health 2004 showed that the number of primary health care centers run by the Ministry are 413, 357 centers in the West Bank and 56 centers in Gaza Strip. The 2000 figures were 359; 316 in the West Bank and 43 in Gaza Strip. Clearly, there had been an increase in the number of health care centers but there is still a need to pay more attention to the quality of services.

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Chapter 3

Children's Educational Reality

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 gets governments' special attention since it represents real investment in the future of the nations. Educational indicators are used to measure the government and society's performance in providing suitable environment for children and youths' right to education.

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 of 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 matter 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, joining school 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

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 six years to ten years and the new Palestinian curriculum reform plans were gradually introduced for implementation during the scholastic years 2000- 2004. 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.

¹ UNICEF, *Education for All*, 1999

This Chapter deals with the state of children's education in Palestine by comparing important educational indicators over the past five years. Such indicators include the basic components of the educational process including pupils, schools, teachers, and classrooms.

Students

At the outset of the scholastic year 2005/2006, the number of students enrolled in the basic and secondary stage was 1,078,488 students. Female students constitute around 49.8%. Female percentage varies from one stage to another: in the basic education stage, females constitute 49.5%, compared with 52.1% in the secondary education stage.

In the scholastic year 2005/2006, 11.6% of all students were enrolled in the secondary education stage, and 88.4% are enrolled in the basic stage. 59.2% of all students were enrolled in the basic education stage in the West Bank and 40.8% were in Gaza Strip. As for students enrolled in the secondary education stage, this percentage amounted to 58.7% in the West Bank and 41.3% in Gaza Strip.

Data showed that 70.2% of total students were enrolled in governmental schools, 23.6% were enrolled in UNRWA schools, and 6.2% of them were enrolled in private schools. The relatively large number of refugee students in Gaza Strip made the educational task of UNRWA in Gaza Strip bigger than its task in the West Bank.²

There was a steady increase in the numbers of school students during 1994/1995 and 2005/2006, whereas the percentage of increases in the basic and secondary education stage was 64.7%, distributed as 86.8% in Gaza Strip and 52.3% in the West Bank.

Enrollment in Kindergartens

Kindergartens are run by the private sector excluding two kindergartens, which are run by the Ministry of Education. One third of children aged 4-5 joined kindergartens in the scholastic year 2004/2005

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

The number of children in kindergarten rose from 69,134 in scholastic year 1996/1997 to 73,119 in scholastic year 2004/2005, an increase of 5.8%.

Net enrollment rate in kindergarten in 2004/2005 was 19.1%, distributed by 23.0% in the West Bank and 12.9% in Gaza Strip. Also it was 20.1% for males compared with 18.1% for females.

² 76.8% of basic education stage in Gaza Strip enrolled in UNRWA schools while 23.2% in basic education stage students in the West Bank enrolled in UNRWA schools during the scholastic year 2005/2006

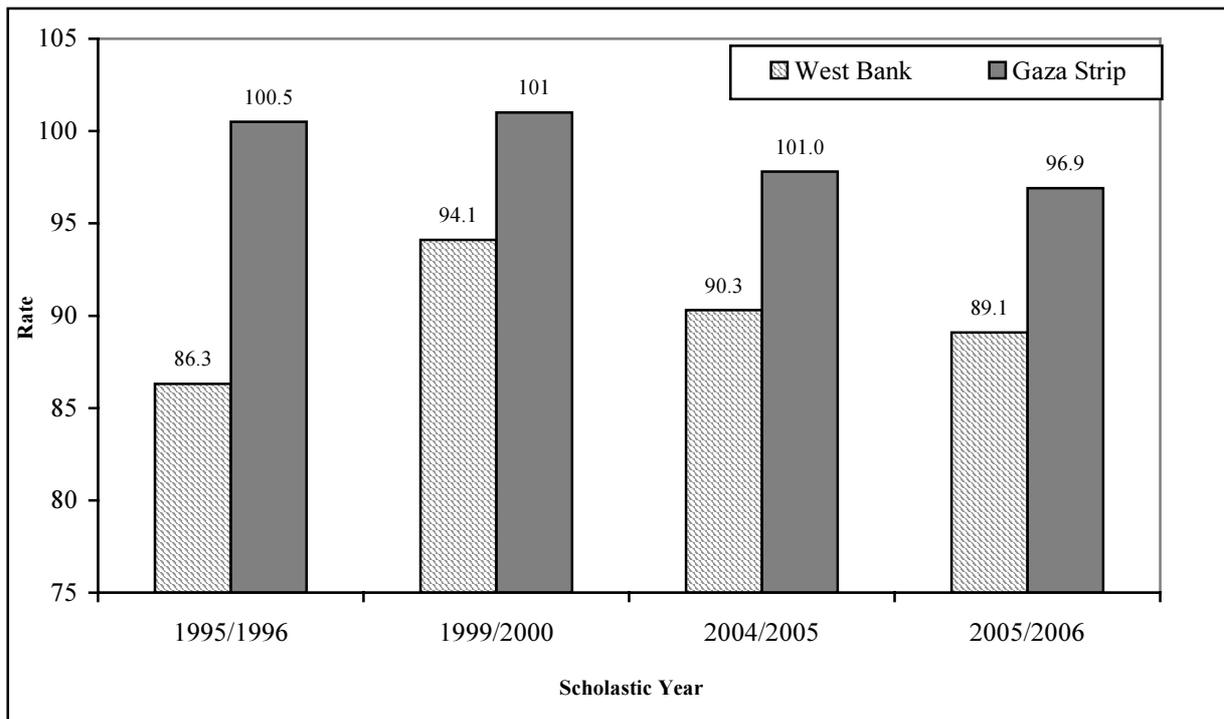
Enrollment in Basic Education Stage

Students at basic stage increased from 572,529 in the scholastic year 1994/1995 to 953,621 in the scholastic year 2005/2006, an increase rate of 66.6%. Females and males constituted 49.7% and 50.3% respectively.

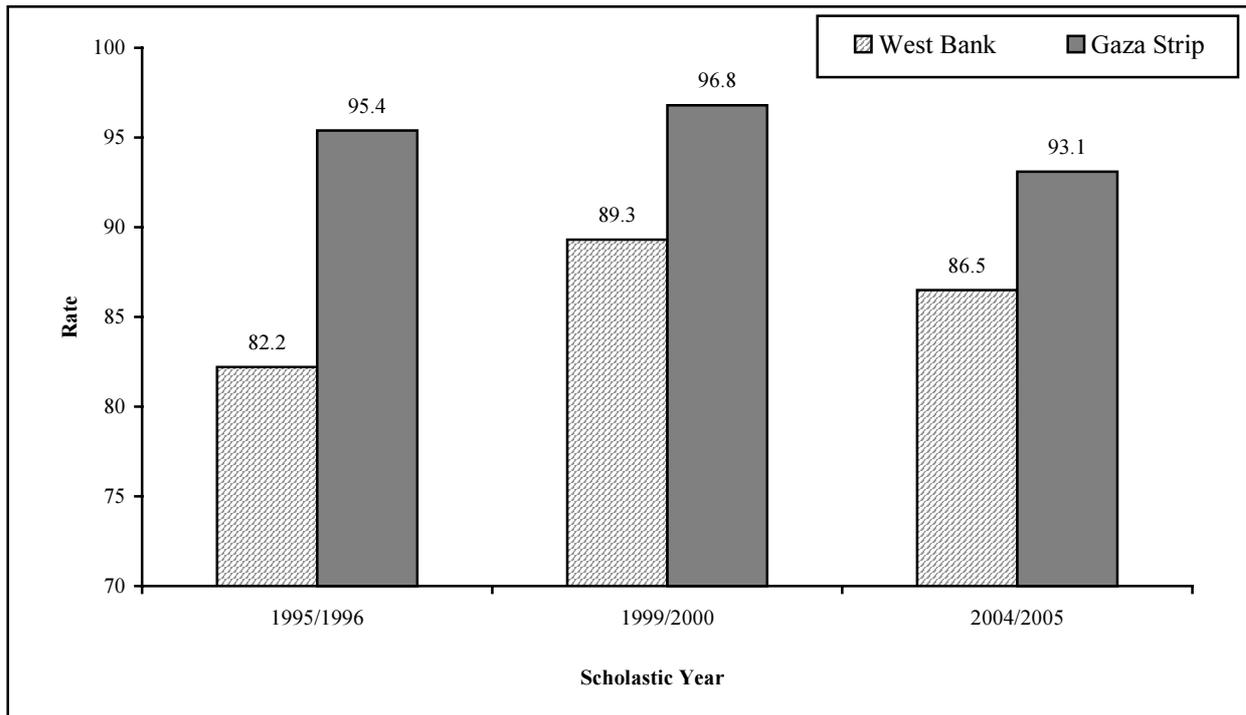
Female enrollment ratio in the basic education stage in the scholastic year 2005/2006 was 97.9 female students per 100 male students among basic school stage; it was 98.6 female students per 100 male students in the West Bank and 96.9 per 100 male students in Gaza Strip.

Gross and net enrollment rate are indicators of internal sufficiency of the educational system since they reflect phenomena like older age, repetition, and drop out. The variations between the averages during the years 1995/1996-1999/2000 show that gross and net enrollment rate in the basic stage increased from 91.4% in 1995/1996 to 96.8% in 1999/2000, then started to decrease during the period of Al Aqsa intifada beginning in September 2000 to reach 92.1% by 2005/2006. distributed as 89.1% in West Bank and 96.9% in Gaza Strip.

Figure (3-1): Gross Enrollment Rate in the Basic Stage by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics 2006. Primary *Education Census Database*. 2005/2006. Ministry of Education and Higher Education. Ramallah- Palestine (Primary and unpolished data).

Figure (3-2): Net Enrollment Rate in the Basic Stage by Region and Selected Scholastic Years

Source: Palestinian Central Bureau of Statistics 2006. Primary *Education Census Database*. 2004/2005. Ministry of Education and Higher Education. Ramallah- Palestine (Primary and unpolished data).

Secondary Stage Education

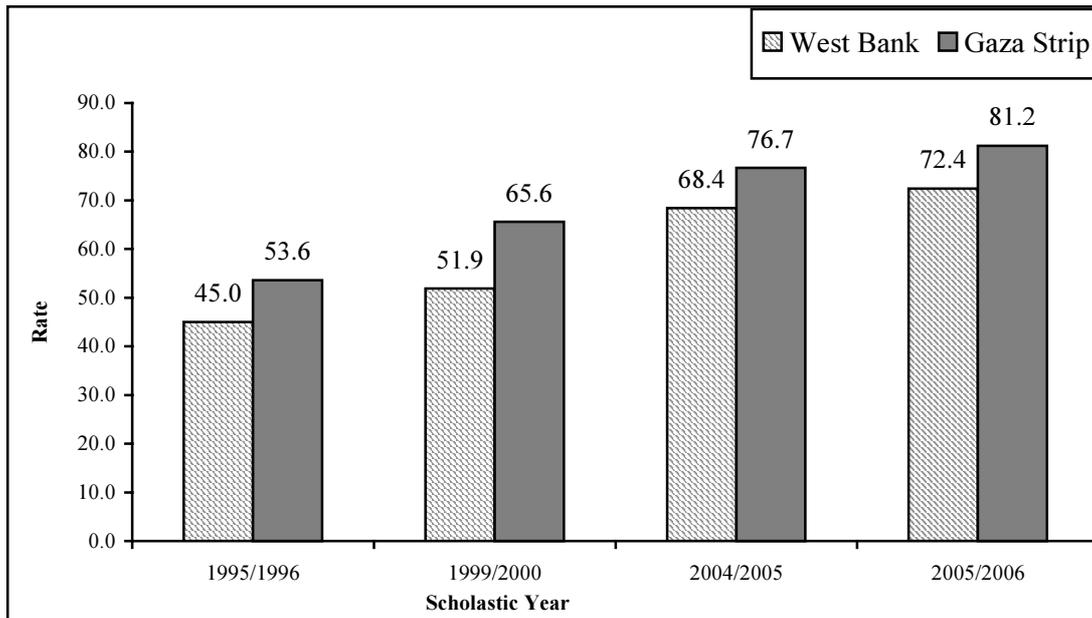
There were 108.8 female students per 100 male students in secondary stage in the scholastic year 2005/2006

Students at secondary education stage increased from 45,339 in 1994/1995 to 124,867 students during the scholastic years 2005/2006, an increase of 175.4%. Female students constituted 52.1% of the total number students in the secondary stage in the scholastic year 2005/2006, compared with 45.5% in 1995/1996.

The gross enrollment rate in secondary school increased from one year to another; it increased for females from 43.0% in the scholastic year 1994/1995 to 80.4%, and for males from 48.8% to 71.4% in the scholastic year 2005/2006. Gross enrollment rate in secondary school in Gaza Strip is much higher than that of the West Bank at 81.2% in Gaza Strip and only 72.4% in the West Bank in 2005/2006.

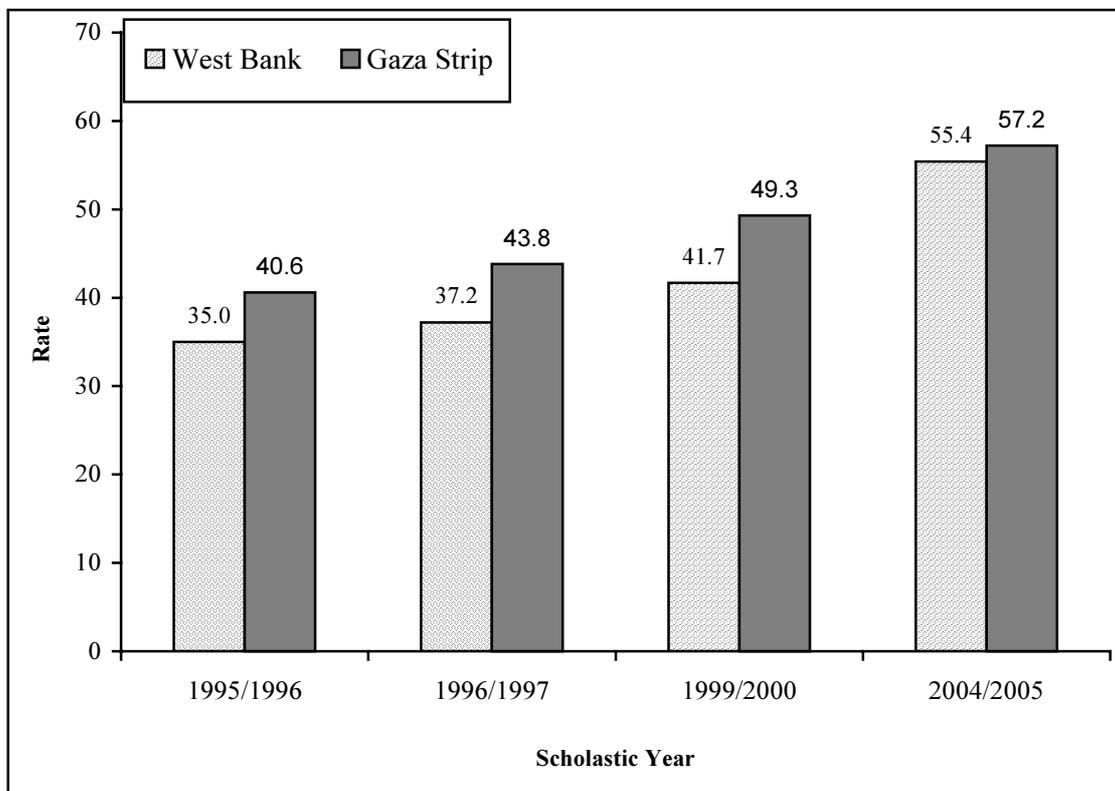
Academic education is still more attractive than vocational education. The number of students enrolled in vocational high school reached 5,999 in the scholastic year 2005/2006 representing 4.8% of the total number of secondary school students. Female students constituted only 31.2% of vocational high school students. On the other hand, they constituted 53.1% of academic secondary school students.

Figure (3-3): Gross Enrollment Rates in Secondary Schools by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics 2006. Primary *Education Census Database*. 2005/2006. Ministry of Education and Higher Education. Ramallah- Palestine (Primary and unpolished data).

Figure (3-4): Net Enrollment Rates in Secondary Schools by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics 2005. *Education Survey Database*. 2004/2005. Ministry of Education and Higher Education. Ramallah-Palestine

Repetition

The percentages of repetition among male and female students at basic and secondary stages in the Palestinian Territory have significantly improved during the scholastic years 1994/1995-2003/2004

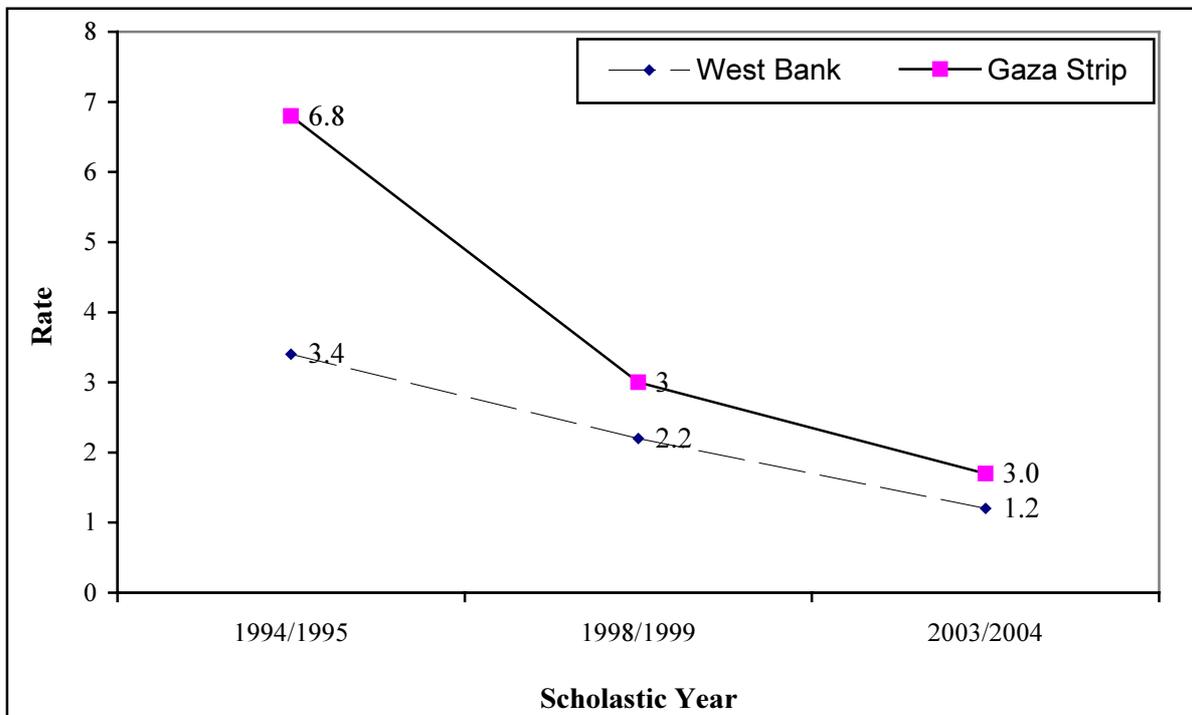
The percentage of repetition at basic stage in the scholastic year 2003/2004 in the Palestinian Territory was 1.5% for males and 1.3% for females, while at the secondary stage, the percentage was 1.4% for males and 0.6% for females.

Comparing percentages of repetition at basic and secondary stages of male and female students according to region in the scholastic year 2003/2004 revealed that there is no significant difference between Gaza Strip and the West Bank. The percentage of repetition in the basic stage was 1.2% for the West Bank and 1.7% for Gaza Strip, and for secondary stage was 1.1% in the West Bank compared with 0.9% for Gaza Strip .

The percentages of repetition among male and female students at basic and secondary stages in the Palestinian Territory dropped significantly during the scholastic years 1994/1995-2003/2004. For instance, female students who failed during basic stage dropped from 4.4% in 1994/1995 to 1.3% in 2003/2004. At secondary stage, female students who failed dropped from 1.3% in 1994/1995 to 0.6% in 2003/2004.

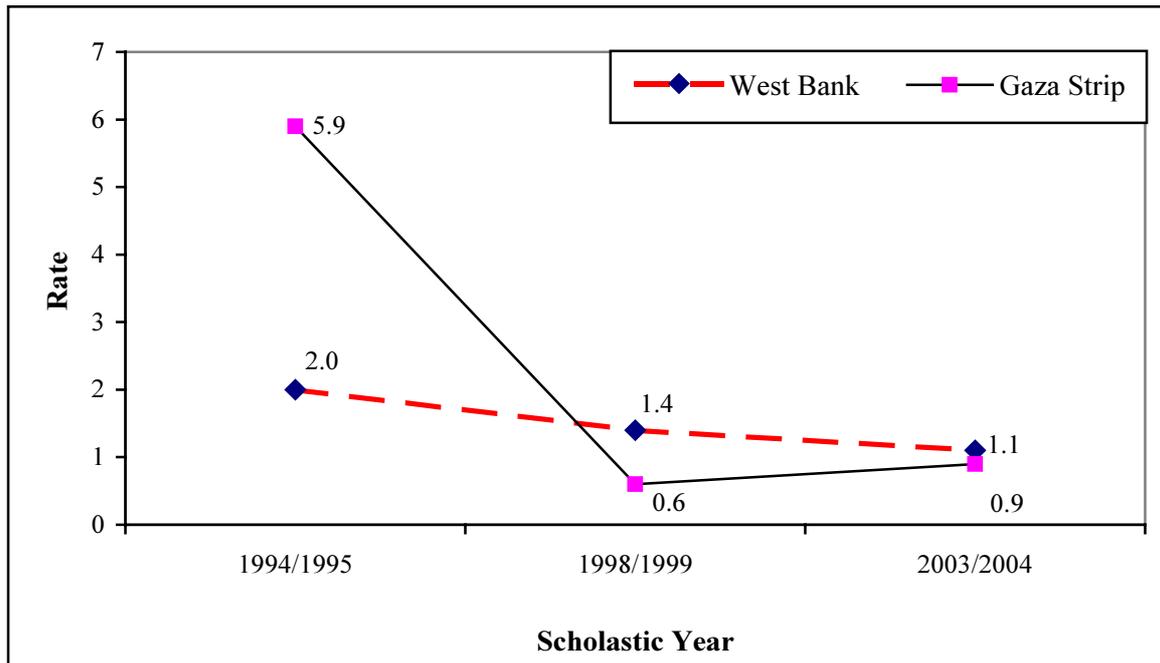
Caution should be exercised when examining the decrease in the percentages of repetition at school since the educational system has certain limitations to failing, such as students are allowed to repeat class twice and repetition starts at grade four. Also, repetition has been limited to 5% per class.

Table (3-5): Repetition Rate in the Basic Stage by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics. *Education Census Databases.1995/1996, 1999/2000, 2004/2005. Ministry of Education and Higher Education. Ramallah-Palestine.*

Table (3-6): Repetition Rate in the Secondary Stage by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics. *Education Census Databases. 1995/1996, 1999/2000, 2004/2005. Ministry of Education and Higher Education. Ramallah-Palestine.*

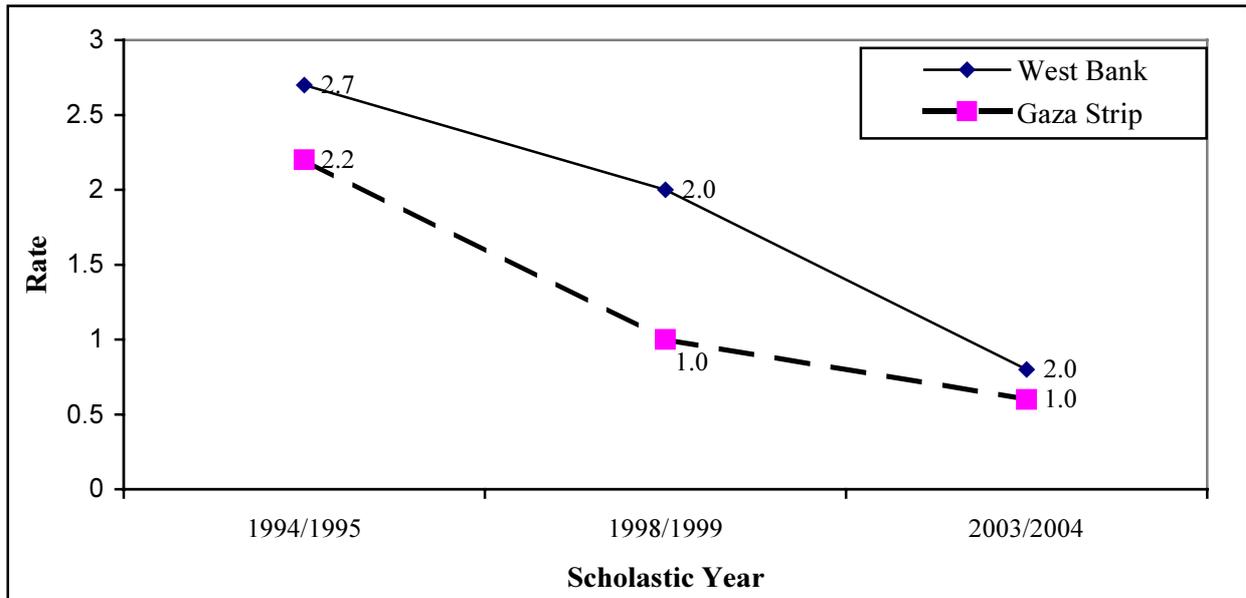
Drop-out Rates

Females and males drop-out rates at basic and secondary stages in the Palestinian Territory dropped significantly in the scholastic year 1994/1995-2003/2004

The drop-out rate at the basic stage in the scholastic year 2003/2004 in the Palestinian Territory was 0.9% for male students and 0.6% for female students. At the secondary stage, the rates were 2.3% for males and 3.6% for females.

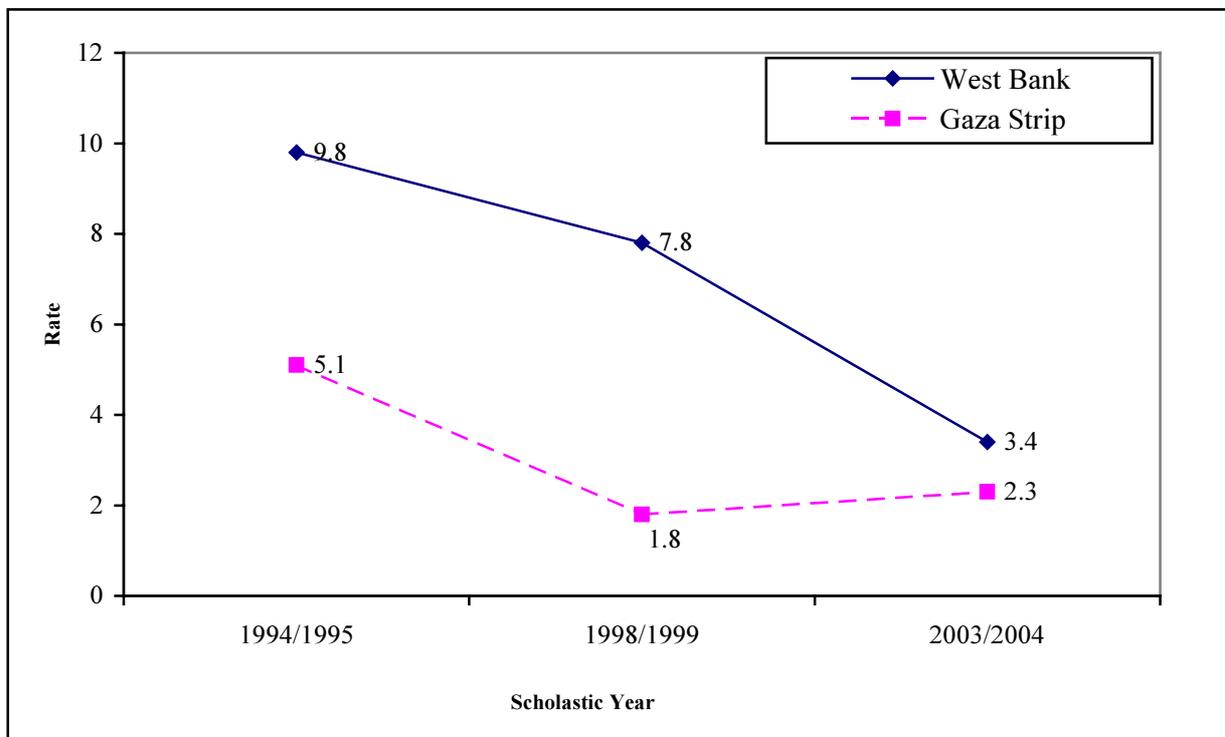
The drop-out rate among females at the secondary stage in 2003/2004 was 3.6%, distributed as 3.9% in the West Bank and 3.2% in Gaza Strip, while the rate at the basic stage was 0.6%, distributed as 0.6% in the West bank and 0.5% in Gaza Strip.

Table (3-7): Drop-out Rates in the Basic Stage by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics. *Education Census Databases. 1995/1996, 1999/2000, 2004/2005. Ministry of Education and Higher Education. Ramallah-Palestine*

Table (3-8): Drop-out Rates in the Secondary Stage by Region and Selected Scholastic Years



Source: Palestinian Central Bureau of Statistics. *Education Census Databases. 1995/1996, 1999/2000, 2004/2005. Ministry of Education and Higher Education. Ramallah-Palestine.*

Schools

The number of schools totaled 2,276 in 2005/2006: 1,536 basic stage and 740 secondary schools. 75.4% of schools are in the West Bank and 24.6% are in Gaza Strip.

Governmental schools constituted 75.8% of schools in 2005/2006, UNRWA-run schools constituted 12.3%, and private schools constituted 11.9%.

The number of schools 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 2005/2006 was 1,536, whereas the number of schools in 1995/1996 was 1,098. The number of secondary schools in 2005/2006 was 740, whereas the number of schools in 1995/1996 was 372³.

Educational Environment

The educational environment is one of the major influences on the process of education. It is not only providing school buildings, offices, desks, and textbooks, but also creating a safe healthy environment. It also includes providing the right infrastructure such as electricity, heating, and health facilities since they all play a major role in providing the right educational climate and influence the results of the educational process. Building walls around schools is also important since they reduce the risks and threats of road accidents especially for urban schools where there is heavy movement of traffic.

According to 2004/2005 data, most schools are connected to the electricity network and the public sewers system; however, heating is only available for 12.3% of students at governmental schools, for 9.5% of UNRWA school students and 56.0% of private school students.

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 2005/2006 was 35.3 at basic stage and 31.4 at secondary stage.

Comparing classroom density according to region, it is noticed that the classroom density in basic schools is higher in Gaza Strip than in the West Bank (41.6 students per classroom in Gaza Strip and 31.9 students per classroom in the West Bank in 2005/2006). At the secondary stage, class density was 40.9 in Gaza Strip and 27.0 in the West Bank in 2005/2006. This signals that the educational environment concerning classroom density in Gaza Strip is worse than that of the West Bank.

The case worsens at UNRWA schools where classroom density in the basic stage was 41.6 compared with 34.7 students at governmental schools. However, the figure for private schools was 24.3 students per classroom in 2005/2006 (UNRWA does not provide secondary stage education).

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

Computer and Education

Availability of computers at schools increased from 30.2% in 1995/1996 to 90.1% in 2004/2005

The availability of computers in schools and kindergartens is an indicator of having modern technical educational methods. Computers develop children's knowledge and can improve the learning environment and assist in acquiring skills.

In the scholastic year 2004/2005, about 48.7% of kindergartens in the Palestinian Territory had computers, of which 51.3% were in the West Bank and 40.1% in Gaza Strip. The percentage of schools that have computers available in the Palestinian Territory increased from 30.2% in 1995/1996 to 90.1% in 2004/2005, distributed as 90.3 % in the West Bank and 89.6% in Gaza Strip, an increase of 198.3%.

The improvement in introducing computers to schools has been the result of a Ministry of Education policy and it has encouraged private schools to do the same. There are plans to introduce computers in all governmental schools.

Teachers

The number of teachers in schools reached 42,385 in the scholastic year 2005/2006 (19,520 male teachers and 22,865 female teachers).

About 71.2% of teachers teach at governmental schools, 18.7% teach at UNRWA schools, 10.1% teach at private schools.

The number of students per teacher at governmental schools was 25.1 in 2005/2006; in UNRWA schools, the figure was 32.1, while in private schools it was 15.5 .

In 2004/2005 data indicated that 32.1% of teachers at basic and secondary schools have a associate diploma and 56.8% of them have a BA degree, 7.1% have both a BA degree and a diploma in education, 0.5% of teachers have post graduate diploma, 1.1% have a secondary school certificate, and 2.4% have a Masters degree or higher.

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Chapter 4

Child Cultural and Recreational Reality

1. *States Parties recognize the right of the child to rest and leisure, to engage in play and recreational activities appropriate to the age of the child and to participate freely in cultural life and the arts.*

(Child Rights Convention, Article 31-1)

2. *States 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 cultural, artistic, recreational and leisure activity.*

(Child Rights Convention, Article 31-2)

The significance of the child's culture and monitoring child cultural and recreational rights is the cornerstone of building the child's personality since they constitute the child's feelings toward beauty, love, and life. They develop the child's taste of art and beauty, and love and belonging to the society and homeland.

Understanding the world of beauty is a major part of the culture of the society. It finds a place in educational and cultural institutions whether locally, regionally, or internationally. Such understanding created the cultural and recreational rights of the child in the Palestinian national plan of the Palestinian child, which was prepared by the national committee and endorsed by the PNA in 1995 to be in line with the Convention on the Rights of the Child adopted by the UN General Assembly in 1989.

This Chapter discusses Children's Cultural and Recreational Status by shedding light on the important cultural issues in the life of the child presented through the role of the family and the society as well as cultural activities of the child.

Family Role in the Child's Culture and Recreation

Family is the base of the society and the place where children learn various cultures depending on the education of the family and its economic situation. Families that have cultural and recreational facilities such as home libraries, TVs, PCs, and Internet connection play a greater role in the child's education, culture, and entertainment than the families who lack such facilities. The families' cultural concerns such as visiting cultural institutions and festivals and art exhibitions also play a role in the status of child's education, culture, and entertainment.

The Child's Family's Ownership of Means of Knowledge

71.5% of households who have children under 18 years do not have computers, 4.8% do not have TV sets, 28.6% do not have a satellite dish, and 90.7% do not have Internet at home

Availability of a home library, computer and other means of knowledge for the child's family is an important factor in providing the child with culture and entertainment as long as they are used in the best positive manner.

The findings of the Computer, Internet and Mobile Survey 2004 showed that 28.5% of households having children under 18 years in the Palestinian Territory have computers, distributed by 31.1% in the West Bank compared with 23.8% in Gaza Strip. Data showed that 9.3% of the households who have children under 18 years had Internet.

In 2004, 95.2% of households who have children under 18 years in the Palestinian Territory reported having TV sets. As for possessing a satellite dish, the findings showed that 71.4% of households who have children under 18 years stated have a satellite dish, 24.0% have a video player and 28.4% have a home library compared with 15.3% in 2003.

Socio-cultural Activities

According to the survey findings, of the cultural institutions of the Palestinian Territory, 2005 the number of cultural centers in the Palestinian Territory is 213 including 174 operating centers; 122 of which are in the West Bank and 52 in Gaza Strip. Survey results also show that there are 39 non operational cultural centers in the Palestinian Territory.

Results showed that 60.3% of the cultural centers in the Palestinian Territory have libraries (62.3% in the West Bank and 55.8% in Gaza Strip) and 74.3% of cultural centers which have libraries have special section for children in their libraries. The results also indicate that approximately 36.8% of cultural centers are equipped to receive individuals with special needs (including 41.0% in the West Bank and 26.9% in Gaza Strip).

The Computer, Internet and Mobile Survey 2004 showed that 37.0% of children aged 10-17 years are participating in sport activities, distributed as 56.6% among males and 15.9% among females, and 29.8% are practicing drawing, distributed as 19.8% among males and 40.5% among females.

Data showed that 9.8% of children aged 10-17 years are affiliated to a sport club, distributed as 16.1% for males against 3.4% for females, 7.2% are participating in activities at a public library, distributed as 5.0% among males compared with 9.4% among females.

Practicing Activities in Free Time

Youth survey data 2003 showed that 31.9% of sampled children aged 10-17 years stated that they watch TV, 39.6% among females compared with 24.6% among males, 16.7% stated they study and review school subjects, 12.0% practice sports, 1.9% among females compared to 21.5% among males; 11.8% meet their friends; and 4.7% use the computer during their free time.

Data revealed that 25.3% of children aged 10-17 years do not have the desire to practice any activity in their free time, 17.5% would like to travel abroad, 15.7% would like to spend their

free time using computer and Internet, 13.5% would like to travel locally and 7.3% would like to practice sports. The main reason for not practicing any activity during their free time is the prevailing deteriorated political situation at 26.4%, 19.3% referred to the high cost of desired activities, 15.5% referred to the unavailability of desired activities, and 14.4% referred to the refusal of the family.

39.5% of children stated that activities should be directed to develop child personality, 15.5% stated that it should be directed to develop the spiritual side, 13.5% stated that activities should be directed to entertainment and recreation and 9.8% to develop the cultural side.

Cultural and Recreational Tools at Kindergartens and Schools

It is essential to have educating and recreational tools at kindergartens and schools so that they may carry out their role in developing the cultural interests of the children effectively and provide them with the right environment to carry out such activities.

Kindergartens' Libraries

The number of kindergartens that have special rooms for libraries has doubled in 2003/2004 to reach 13.5% compared with 6.5% in 1996/1997

There is not much information about the libraries of kindergartens; however, in 1996/1997 data revealed that 99.0% of them have libraries. Furthermore, there are not many studies about the children's use of such libraries and how they benefit from them. Furthermore, most kindergartens in the Palestinian Territory in the scholastic year 1996/1997 had libraries; 84.5% kindergarten libraries had less than 100 books and 2.2% of them contained 500 or more books.

Despite availability of books (irrespective of the kind) in kindergartens, most do not have special rooms allocated for libraries. The books are placed on shelves in classrooms, at teachers' rooms, or in the principal's office. The books are not usually classified.

The statistics of the scholastic year 2003/2004 showed that 13.5% of the kindergartens in the Palestinian Territory have rooms allocated for libraries, of which 13.1% are in the West Bank and 14.8% in Gaza Strip. Kindergartens that have special rooms for libraries increased from 6.5% in the scholastic year 1996/1997 to 13.5% in the scholastic year 2003/2004.

Schools' Libraries

According to studies in 2000¹, 37.4% of public school students visit the school library and 49.9% of students borrow books from them. Students usually borrow books once or twice a week, 61.8% of students find it easy to find information at libraries, 66.5% of students indicated that the books at the school library were not sufficient to fulfill their needs, 83.5% of students said they did not find time at school for optional reading, 56.6% of governmental schools students stated that the schools' educational system does not encourage scientific research and 68.0% stated that there were no incentives to encourage students to read in

¹ Ministry of Education. *Students Leaving Reading: Causes and Cure. Survey Study of Public Schools*, 2000.

schools. As for librarians, 87.6% of them stated that the number of classes allocated for them was not sufficient to activate the libraries.

Technological Means of Education and Entertainment at Schools

Availability of computers at schools increased from 30.2% in the scholastic year 1995/1996 to 90.1% in the scholastic year 2004/2005, an increase of 198%

Technological means of education and entertainment at schools and kindergartens facilitate obtaining knowledge and culture. Such means, which are available at schools and kindergartens, include computers, TVs, VCRs, and cassette players.

In 2003/2004, 48.3% of kindergartens had computers, (49.0% in the West Bank and 45.9% in Gaza Strip). There has been an increase in computers of 62.4% during 1995/1996 through 2003/2004. 90.1% of schools have computers, the percentage increased from 30.2% in the scholastic year 1995/1996 to 90.1% in the scholastic year 2004/2005.

Children Using Computers

56.0% of children aged 10-17 are using computers primarily for recreation and entertainment

Computer, Internet and Mobile Survey 2004 showed that 56.0% of children aged 10-17 are using computers, distributed as 56.4% among males and 55.5% among females; 62.0% among the West Bank children compared with 46.3% among Gaza Strip children.

Data also showed that home is the place where computers are most frequently used, 45.7%, followed by school, 30.9%, friends' homes, 7.7% and Internet cafes, 8.3%; 7.4% are using computers in other places. 50.2% of children who are using computers use them for entertainment and 35.6% of them use computers for learning purposes. Data showed that 18.8% of children aged 10-17 years know and use Internet, 36.8% know the internet and do not use it and 44.4% do not know anything about it. 25.3% of children using Internet stated that they use it for study, 22.5% using it for knowledge, 20.2% are using it for chatting, 17.8% using it for entertainment, and 14.2% for mail purposes. Internet is mostly used at home, 43.7%, followed by Internet cafes at 38.6%

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Chapter 5

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 well being. 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 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 been yet been implemented anywhere. This is a mission 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.

Clearly, these children need special care and protection particularly due to their lack of control on their surrounding environment. It is likely, too, that these children do not exercise any control on environmental, material, or physical resources required to ensure their attainment of health, educational, social and cultural services essential to their child endured development. This chapter offers an analysis of available data on groups of children in need of special protection. It shall be noted that special independent reports were issued on child labor and child poverty, which have nonetheless been given special attention in various sections of this report.

Children Living Below the Poverty Line¹

In 2004, the statistics indicated that the rate of the total diffusion of poverty among Palestinians' children in the Palestinian Territory was 32.6%, of which 24.9% in the West Bank and 44.7% in Gaza Strip. In general, the contribution of the children to national poverty (32.6%) is higher than the contribution of adults (28.2%), and this due to the population composition, since the children represent 53.1% of total population in the Palestinian Territory, or this may due to the fact that poverty among households with more children is higher than households with less number of children.

Table (5-1): Likelihood of being poor among Palestinians by age group, 2004

Age group	Poverty Status			
	Non-poor	Poor	Total	Distribution
Child	67.4	32.6	100.0	53.1
Adults	71.8	28.2	100.0	46.9
Total	69.4	30.6	100.0	100.0

In general the south is poorer than the north. This is true for the Palestinian Territory as a whole as well as for each area (the West Bank and Gaza Strip) separately. With the exception of Central West Bank, poverty increases consistently among children if one moves from the north to the south.

The poverty rates among children living in the Southern governorates of Gaza Strip stood at 56.2% compared to 40.0% in the Central and Northern governorates of Gaza Strip. Data, also, revealed that poverty rates among children living in the southern governorates of the West Bank stood at 39.5%. More significant is the fact that, the majority of the poor children live in the southern governorates of both Gaza Strip and West Bank, (poor children living in the southern governorates of both regions represented 48.7% of poor children in the Palestinian Territory).

Type of locality is another spatial dimension by which poverty is expected to vary everywhere, and the Palestinian Territory is no exception. Children living in the refugee camps have the highest incidence of poverty overall. About 38.2% of children living in refugee camps were poor, and this is higher than the rate of poverty in urban (32.2%) and rural areas (30.2%).

Table (5-2): Likelihood of being poor among Palestinians' children by region, 2004

Region	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Palestinian Territory	32.6	100.0	67.4	100.0
West Bank	24.9	46.5	75.1	68.0
West Bank-North	26.8	18.5	73.2	24.5
West Bank-Middle	6.8	3.9	93.2	25.6
West Bank-South	39.5	24.1	60.5	17.9
Gaza Strip	44.7	53.5	55.3	32.0
Gaza Strip-North	40.6	9.8	59.4	7.0
Gaza Strip-Middle	40.1	24.6	59.9	17.9
Gaza Strip-South	56.2	19.0	43.8	7.2

¹ The poverty line for a family of 6 members was 1,934 NIS, i.e. about USD 433.

Table (5-3): Likelihood of being poor among Palestinians' children by type of locality, 2004

Type of Locality	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Urban	32.2	52.7	67.8	53.8
Rural	30.2	27.3	69.8	30.5
Refugee camp	38.2	20.0	61.8	15.7
Total	32.6	100.0	67.4	100.0

The situation of the poor male-children (32.2%) seemed to be better than female-children (33.1%), but poor males constitute about 50.3% of poor children.

Table (5-4): Likelihood of being poor among Palestinians' children by child-sex, 2004

Sex of child	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Males	32.2	50.3	67.8	51.4
Females	33.1	49.7	66.9	48.6
Total	32.6	100.0	67.4	100.0

Socio-economic Indicators of Head of Household

Refugee Status of Head of Household

Children who belong to households headed by refugee heads constitute about 43.4% of Palestinian children in 2004. Yet, poor children belonged to household headed by refugee heads constitute about 46.7% of the poor children. Living condition of this group is worse compared with the other groups. The poverty rate, among children belonged to households headed by refugee heads, is higher (35.2%) than non-refugee headed households (30.7%).

Table (5-5): Likelihood of being poor among Palestinians' children by refugee status of head of household, 2004

Refugee status of head of household	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Refugee	35.2	46.7	64.8	41.8
Non-refugee	30.7	53.3	69.3	58.2
Total	32.6	100.0	67.4	100.0

Age of Head of Household

Of the total of households whose heads aged 65 and above, about 46.7% these households' children are poor. On the other extreme, the lowest incidence of poverty (18.4%) is observed for children who belonged to households whom heads aged less than 25 years.

Table (5-6): Likelihood of being poor among Palestinians' children by age of head of household, 2004

Age of head of household	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Less than 25 yrs	18.4	0.6	81.6	1.3
25-34 yrs	30.5	20.8	69.5	23.0
35-44 yrs	31.2	43.1	68.8	46.2
45-54 yrs	33.2	21.0	66.8	20.4
55-64 yrs	41.9	9.0	58.1	6.1
65 yrs or more	46.7	5.5	53.3	3.0
Total	32.6	100.0	67.4	100.0

Educational Level of Head of Household

Higher education is related strongly with lower incidence of poverty. The poverty rate among children who belonged to households whose heads with less than elementary education (45.7%) was almost 2.3 times higher than those who belonged to households whose heads with a two-year college degree (20.0%), and almost four times higher than those who belonged to households whose heads with Bachelore degree and above (12.5%), but there is no significant difference between those with preparatory or secondary degree (the difference does not pass than 0.2%).

Table (5-7): Likelihood of being poor among Palestinians' children by educational level of head of household, 2004

Educational level of head of household	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Less than elementary	45.7	27.0	54.3	15.6
Elementary	38.9	29.8	61.1	22.7
Preparatory	29.2	21.0	70.8	24.7
Secondary	29.4	14.5	70.6	16.9
College	20.0	4.1	80.0	7.9
Bachelore and above	12.5	3.6	87.5	12.2
Total	32.6	100.0	67.4	100.0

Labor Force Participation of Head of Household

The poverty rate among children who belonged to households whose heads are non-participants in labor force is 44.3% compared with 31.4% among children who belonged to households whose heads are labor force participants. Yet, these rates imply that about 7 out of 8 of children who belonged to households whose heads are in the labor force are poor.

Table (5-8): Likelihood of being poor among Palestinians' children by labor force participation of head of household, 2004

Labor force participation of head of household	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Inside labor force	31.4	87.4	68.6	92.3
Outside labor force	44.3	12.6	55.7	7.7
Total	32.6	100.0	67.4	100.0

The prevalence of poverty among children who belonged to households whose heads are unemployed (46.3%) is higher compared to children who belonged to households whose heads are employed. About 42.5% of children who belonged to households whose head worked for up 14 hours last week were poor compared with 26.4% among those children whose heads were employed 15 hours and more last week..

Table (5-9): Likelihood of being poor among Palestinians' children by employment status of head of household, 2004

Employment status of head of household	Poor		Non-poor	
	Value	Contribution	Value	Contribution
Employed (< 15 hrs per-week)	42.5	6.8	57.5	4.5
Employed (15 hrs+)	26.4	54.0	73.6	72.9
Un-employed	46.3	26.6	53.7	15.0
Out-of-labor	44.3	12.6	55.7	7.7
Total	32.6	100.0	67.4	100.0

The Adequacy of Emergency Assistance²

The results indicated that 32.6% of the children are below the poverty line even after including the value of the emergency assistance they consumed. When this emergency assistance is subtracted out, the poverty rates increased to 35.8% (assuming other factors would remain unchanged in the absence of emergency assistance). On the other hand, the emergency assistance had served to reduce poverty rates among children with 3.2%.

Table (5-10): The impact of emergency assistance on poverty among children, 2004

Poverty rates before emergency assistance	Poverty after receiving emergency assistance		Total
	Poor	Non-poor	
Poor	91.2	8.8	35.8
Non-poor	-	100.0	64.2
Total	32.6	67.4	100.0

² The results depend on the consumption data, the figures will be increased if income data is used.

Child Labor³

State Parties recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child's education, or to be harmful to the child's health or physical, mental or social development.

(Convention on the Rights of the Child, Article 32-1)

3.8% of the total number of children aged 10-17 years participated in labor force in 2005, 4.8% in the West Bank and 2.1% in Gaza Strip. Data showed that 67.2% of employed children are working for their families (unpaid family employee), 27.7% of employed children are wage employees for others, and 5.1% of employed children are Employer .

Factors Underlying Child Labour Reasons for the Child's Employment

Education-Related Factors

When children join work, they usually lose their schooling. This deprives a child of education and knowledge that may help in life. Education and its expenses are direct social factors that force low-income families to push children to the labor market. Families' unawareness of the value of education, since it does not make fast revenues and because training does not guarantee jobs immediately, and the children's failing at school push children to the labor market. Data showed that 47.6% of employed children are not at school since working is an appropriate alternative for leaving school in 2005. This deprives children of their rights to education, development, health, recreation, etc... It also creates a generation of uneducated and unskilled parents who will not be able to raise their children properly.

Economic-Related Factors

The low economic status of the household is the main reason for child labour in 2004: 71.0% of employed children aged 5-17 years are working because of economic need (51.4% to assist in family projects, 19.6% to contribute in increasing family income). Data showed that 6.3% of employed children are working toward being independent, 5.2% to fill their free time and 1.7% for learning certain skills.

Nature and Conditions of Child Labour

Employed Children by Economic Activity

The Labor Survey 2005, child labor was concentrated in agriculture 41.7%, followed by commerce and restaurants 34.6%, then mining and manufacturing 11.7%, and construction 8.6%.

Employed Children by Occupation

Data showed that there is a strong relation between a child's occupation and his father's occupation: the majority of children are working as skilled workers in agriculture at 39.5% (46.4% in the West Bank and 9.2% in Gaza Strip), 25.0% of working children were in elementary occupations (24.5% in the West Bank and 27.3% in Gaza Strip).

³ The findings presented in this section are derived mainly from PCBS' Labour Force Survey.

Children Suffering from Abuse

States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

(Convention on the Rights of the Child, Article 19-1)

There are many possible ways to define violence, depending on who is defining it and for what purpose. A definition for the purposes of arrest and conviction, for example, will be different from one for social service interventions. The World Health Organization defines violence as: The intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, deprivation and maldevelopment that compromise the well-being of individuals, families and communities.

Data showed that 51.4 % of Mothers stated that one of their children aged (5-17) years was exposed to violence during 2005, distributed by 53.3% in the West Bank and 48.5% in Gaza Strip. Data showed that Rural Children were the more exposed to violence at 56.4%, in Urban 50.1% and 47.3% in Refugee Camps. Data Showed that children were exposed to assault mainly at home at 93.3%, followed by school at 45.2%, and 41.1% exposed to assault at the street.

Data revealed that the household members were the main source of practicing assault against children at 93.3%, followed by boys and girls at street at 39.4%, then the teacher at 34.6%.

Children in Social and Health Care Institutions

A child temporarily or permanently deprived of his or her family environment, or in whose own best interests cannot be allowed to remain in that environment, shall be entitled to special protection and assistance provided by the State.

(Convention on the Rights of the Child, Article 20-1)

Available data from the Ministry of Social Affairs (MOSA) records showed that there were 1,680 children in orphan institutions; 1,042 male children and 638 female children lived in 25 orphanages in the year 2003. Data showed that children aged under six years constitute 8.2%, children aged 6-12 years, 44.1%, and children aged 13-17 years, 47.7%.

The reasons for children being in orphanages can be the death of parents, negligence, separation, divorce, disability, and lack of resources. Though the main reason for accommodating children in orphanages is death of the parents (994 children), economic pressures in many cases could lead to placing children in such institutions. Most children in orphanages belong to marginalized impoverished families.

Children Deprived of Normal Family Life

The Health Survey 2000 conducted by the Palestinian Central Bureau of Statistics, reveals that 4.4% of children live with one parent (about 73,069 children), and 75.0% of them live with their mothers. On the other hand, 16,606 children do not live with either parent⁴, while in 1997, according to the Population, Housing, and Establishments Census, 3.1% of children lived with one parent, and 92.5% of those children lived with their mothers.⁵

Furthermore, the health survey reveals that 48,159 children belonged to families where one of the parents or both is dead, while 34,874 lived with families where the father is dead, 11,625 lived with families where the mother is dead, and 1,660 children belonged to families where both parents are dead. DHS 2004 data revealed that 5.5% of children aged 0-17 years do not live with both parents and 2.1% of children one or both of their parents are dead.⁶

Juvenile Delinquents

State Parties recognize the right of every child alleged as, accused of, or recognized as having infringed the penal law to be treated in a manner consistent with the promotion of the child's sense of dignity and worth, which reinforces the child's respect for the human rights and fundamental freedoms of others and which takes into account the child's reintegration and the child's assuming a constructive role in society.

(Child's Rights Convention, Article 40-1)

The available data showed that there were 1,460 juvenile delinquents in 1998, 1,404 in 1999, 976 in 2001, and 561 in 2002.⁷ The difference between the old reports and the recent ones could be caused by the actual reported offences. Furthermore, old reports did not contain notes from regional investigating offices. The majority of the reported offences include physical assaults on people and/or property, followed by theft, and immoral offences. During the period 1999-2002, 3,995 juvenile delinquents were charged with offences of which 35.1% were in 1999, 24.6% in 2000, 24.4% in 2001, and 14.1% in 2002. Female children accused of committing offences between 1999-2002 was 2.1% of the total juvenile delinquents. Most juvenile delinquents who were charged with offences were aged 16-18 (61.8% in 2001 and 58.5% in 2002).

⁴ Palestinian Central Bureau of Statistics, 2000, *Health Survey Database*. (Unpublished data)

⁵ Palestinian central Bureau of Statistics, 2000. *Annual Report 1999, Palestinian Children: Issues and Statistics. Series 2*, Ramallah- Palestine, 2000.

⁶ Palestinian central Bureau of Statistics, 2005. *Demographic and Health Survey 2004 Main Findings report*. Ramallah-Palestine.

⁷ Palestinian Central Bureau of Statistics, 2004. *Crime and Victimization Statistics. Annual Report*, selected years.

The highest percentage of accused children during 2001 and 2002 was among children who completed the preparatory educational stage (43.9% and 40.5% respectively).

The numbers of juvenile delinquents who were placed in rehabilitation and reform institutions were 587 in 1999, 367 in 2000, and 300 in 2001 and 248 in 2002. 2002 represents the highest percent of accused children (44.2%) who were placed in rehabilitation and reform institutions; it was 30.7% in 2001, 34.8% in 2000 and 41.8% in 1999.⁸

There are three rehabilitation and reform institutions for juvenile delinquents in the Palestinian Territory including: Dar Al Rabee' in Gaza Strip for male juvenile delinquents, Dar Al Amal in Ramallah for male juvenile delinquents, and Girls' Care House in Beit Jala for female juvenile delinquents. Though children must be placed in these institutions by a court order or by an order from the judicial system, many juvenile delinquents are placed by instructions from the police and those who monitor behavior. This problem is clear in the Girls' Care House in Beit Jala, which also accommodates female victims of violence and negligence. Such irregularities lead to mixing of victims with juvenile delinquents. Moreover, data show that there is no separation inside the institution between accused juvenile delinquents and those who have not been charged yet.

Despite the text of Article (40-3) of the Convention on the Rights of the Child, which stipulates "State Parties shall seek to promote the establishment of laws, procedures, authorities and institutions specifically applicable to children alleged as, accused of, or recognized of having infringed the penal law," an independent judiciary for juvenile delinquents still does not exist in the Palestinian Territory, nor is there separation between the juvenile judiciary and normal judiciary. Moreover, juvenile delinquents are tried by the district court judges in places other than the places where courts are usually held or even in the judge's office and at a time other than the time of usual trials. Having an independent juvenile judicial system means giving the opportunity for special juvenile courts and for special committees to try juvenile cases where legal terms have less impact on the juveniles and they can be more flexible in trying the cases of the juvenile delinquents.⁹

Table (5-11): Juvenile Delinquents in the Palestinian Territory by Age and Region, 2001-2002

<i>Age group</i>	<i>2001</i>			<i>2002</i>		
	West Bank	Gaza Strip	Total	West Bank	Gaza Strip	Total
Under 13 years	31	19	50	8	27	35
13-15 years	131	192	323	62	136	198
16-18 years	281	322	603	101	227	328
Total	443	533	976	171	390	561

Source: Palestinian Central Bureau of Statistics 2004. *Crime and Victimization Statistics. Annual Reports.*

⁸ Palestinian Central Bureau of Statistics, 2004. Crime and Victimization Statistics. Annual Report, selected years.

⁹ International Movement for Defense of Children, Palestine Branch, *Juvenile Judiciary in the West Bank and Gaza Strip- Law and Legislation.*

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Chapter 6

Palestinian Children and the Intifada

States Parties undertake to respect and to ensure respect for rules of international humanitarian law applicable to them in armed conflicts, which are relevant to the child.

(Convention on the Rights of the Child, Article 38-1)

Palestinian children living in Palestine are suffering from Israeli occupation violations of their basic human rights. These violations permeate all aspects of their lives and are compounded by the absence of protection of their rights to social, economic and cultural development.

Israeli occupation forces have committed grave violations of the rights of the Palestinian children. Palestinian children and Palestinian people have been subjected to grave violations of the rights guaranteed to them by international conventions, especially the Convention on the Rights of the Child and the Fourth Geneva Convention regarding the protection of civilian population during times of armed conflicts.

Martyred and Injured Children¹

The right to life is the first and foremost right, which governments must safeguard. Nevertheless, data showed that the Israeli government uses all of its might to violate the Palestinian children's right to life. Israeli forces use all types of weaponry against Palestinian civilians in the Palestinian Territory. The force used against a civilian population is excessively disproportionate, and has resulted in a large number of Palestinian children and adults being either martyred, injured and/or disabled.

Between September 2000 and January 31, 2006, 786 Palestinian children were martyred, constituting 19.8% of the total martyrs; 344 children were martyred in the West Bank and 440 in Gaza Strip, and 2 children were martyred in occupied Palestinian Territory 1948 .

During Al-Aqsa Intifada, September 28, 2000, till September 28, 2005, 43,761 Palestinians were injured, of which 29,096 were in the West Bank and 14,665 in Gaza Strip. and 28,822 Palestinian children were injured till September 28, 2005

¹ Palestinian Central Bureau of Statistics 2006. Martyrs data base.

Detained Children

No child shall be deprived of his or her liberty unlawfully. 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-a)

Israeli occupation authorities have been carrying out arbitrary detention campaigns since the beginning of the occupation against the Palestinian people. About 391 Palestinian children were arrested between September 28, 2000, and February 20, 2006.

The arrest of Palestinian children by Israeli occupation authorities are grave violations of the rights of the child. Such arrests are illegal, arbitrary and usually carried out without charges. They are not carried out in conformity with international standards for detention, which require an arrest warrant and formal charges before carrying out an arrest. The arrests are based on official notices supported by military laws, which the occupation authorities invented to serve their purposes. The conditions inside prisons are also violations of the rights of the child.

Palestinian children are arrested in a terrorizing manner by Special Forces of the Israeli army (known as *Mustaribeen*: Israeli special agents disguised as Arabs.) who carry out cruel beating of their victims. Army troops and intelligence agents also carry out arrests after midnight. They break into homes in a manner meant to terrorize, creating fear, especially among children. The arrested person is blindfolded, handcuffed, and taken to interrogation. Israeli interrogators do not distinguish between Palestinian children and Palestinian adults and the same interrogators interrogate both men and children.

International conventions ban torture and maltreatment in prisons and detention centers including:

- No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

(Universal Declaration of Human Rights, Article 5)

- Each State Party shall ensure that all acts of torture are offences under its criminal law. The same shall apply to an attempt to commit torture and to an act by any person, which constitutes complicity or participation in torture.

(Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, Article 4-a)

- No exceptional circumstances whatsoever, whether a state of war or a threat of war, internal political instability or any other public emergency, may be invoked as a justification of torture.

(Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, Article 2-2)

- No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment. Neither capital punishment nor life imprisonment without possibility of release shall be imposed for offences committed by persons below eighteen years of age.

(Child's Rights Convention, Article 37-a)

Despite the above texts of international conventions, which ban torture and consider it a crime, the Israeli occupation authorities as usual disregard all international conventions and standards and subject Palestinian children detainees to all forms of physical and psychological torture. Some of the methods Israeli intelligence people use to torture detained children include:

- Covering the head and the face with a stinking bag, which distorts the mind and hinders breathing;
- Shabeh, a practice whereby a child is forced to stand up or sit down in painful contorted positions for long periods of time;
- Deprivation of sleep or going to the toilet for long periods of time;
- Deprivation of food and drink for long periods of time, or provision of bad food and the detainee would not be given sufficient time to finish it;
- Beating including slapping, kicking, strangling, and beating on sensitive body areas;
- Subjecting detainees to cold air currents in winter and hot air currents in summer by using the Shabeh in an exposed area;
- Threats including threatening detainees with bodily harm and threatening children with sexually assaulting him or her or a female relative;
- Locking up detainees with collaborators who usually attack the detainees;
- Violent shaking: the interrogators grab the detainee and systematically shake him or her violently and shaking the neck and the chest, which causes the detainee to faint. This is a serious method of torture that can lead to death.

Despite the protests of human rights organizations and lawyers against the use of such cruel methods of torture, the Israeli government in November 1994 allowed the Israeli police and the Shabak (the Israeli intelligence service) to use rough methods to force detainees to confess. In many cases, lawyers are banned from seeing their clients under the pretext of not finishing interrogation. In other cases, lawyers are not allowed to see the prosecution evidence. Moreover, trials of children are carried out under military courts, the same as where adults are tried. Jerusalem's children detainees suffer from grave breaches of their rights, such as when they are locked up with Jewish common criminals, which is a big threat to their lives.

Children receive harsh sentences when tried in Israeli courts. Such sentences are far harsher than their offences. For instance, a child accused of throwing stones could receive a sentence of 18 months' imprisonment. The sentence for throwing stones used to be six months, which means that Israeli judiciary decisions are dependent on political decision-makers. A Palestinian receives the harshest of sentences for minor offences whereas Jewish settlers, who kill children, are treated with leniency.

After the signing of the peace accords between the PNA and the government of Israel and the redeployment of the Israeli army from Palestinian towns, Palestinian prisoners were taken into Israel proper. Such a step is a violation of Article 76 of the Fourth Geneva Convention. This created a problem among detained Palestinian children whose families became unable to visit them.

The Israeli prisons governors' decision worsened recently with the limitation of the number of persons allowed to visit prisoners, depriving prisoners of seeing their families. Such measures

are a grave violation of Article 37 (c) of the Convention on the Rights of the Child, which states: "Every child deprived of liberty...shall have the right to maintain contact with his or her family through correspondence and visits." The Israeli high court decided in 1978 to deprive detained children of education, which has made conditions worse.

Education Status and the Intifada

The Israeli measures include the closure and siege of the Palestinian Territory and banning students from arriving to their schools, and killing, arresting and insulting teachers and students, as well as shelling school buildings, closing schools, and occupying schools for use as military posts and for detention purposes.

During Al-Aqsa intifada, Israeli occupation military forces have closed 9 schools in order to confiscate them for military posts; 269 schools were destroyed through shelling by missiles and tank shells, and during 2002/2003 498 schools were closed due to closure and curfew, in addition to 1,289 schools closed since the beginning of Al-Aqsa intifada.

Martyred Students

During Al-Aqsa intifada, September 29, 2000, till January 20, 2006, 579 students were martyred in the Palestinian Territory; distributed by 75.3% for the elementary stage (48.3% in the West Bank and 51.7% in Gaza Strip), and 24.7% for high school, including 47.4% in the West Bank and 52.6% in Gaza Strip.

Injured Students

Injured students during Al-Aqsa intifada totaled 3,471 during September 29, 2000 to January 20, 2006, distributed as 55.3% in the West Bank and 44.7% in Gaza Strip. 60.1% of injured were among elementary students of which 10.9% were in grades below grade six. The majority of injuries were due to rubber-covered metal bullets followed by live bullets (42.9%), and 7.1% due to inhaling tear gas and toxic gases. 50.4% of the injuries were located in the extremities and shoulders, 16.6% in the head (of which 2.2% in the eye), and 12.4% of injuries were in the abdomen, back and the chest

The Effect of the Expansion and Annexation Wall and the Security Situation on the Education

The results from 2005 household survey revealed that 3.2% of the individuals in the localities affected by the wall left their education due to the security situation and the expansion and annexation wall, while it's noticed that 25.7% of the individuals in the affected localities left their education due to the bad economic conditions.

The results showed that 48.4% households that have some member attending (basic/secondary) education used detour roads in order to reach their schools as a method of adaptation with the difficulties they face compared with 79.7% households that have some member attending (basic/secondary) education were forced to be absent from schools due to the closure.

Health Status

Since September 2000, the Israeli siege prevented ambulances from evacuating injured and martyrs; 372 ambulances were shelled and 38 were destroyed totally. The medical staff and technicians at hospitals and medical centers were prevented from arriving at their work places, which disrupted work and services provided for the patients, paralyzed transportation of medical aid and equipment from one place to another, especially oxygen, which is essential in operating theatres and incubators because of *dismembering* and isolating the Palestinian

governorates. Furthermore, the siege prevented medical teams from carrying out primary healthcare programs such as vaccination of children, maternal care and doing water quality tests; many pregnant women failed to receive antenatal care at the proper time. Giving birth at hospitals was severely disrupted as pregnant women were prevented from reaching hospitals, which caused negative health impacts on mothers and babies.

The main findings of the Survey on the Impact of Israeli Measures on the Economic Conditions of the Palestinian Households, October- December 2005, indicated that 28.3% of the households have access problem to health services because of military checkpoints, 37.3% due to the Israeli closure, 45.7% because of the high cost of medical treatment, 25.9% because of remoteness of health centers, 22.0% because of inability for medical staff to reach health centers, and 6.7% because of expansion and annexation wall.

Psychological Impact on Children

Palestinian children live in conditions of Israeli violence that are similar to the worst periods of excessive violations and stress against children. Israeli occupation forces use all means of weaponry against Palestinian civilians including children. The harsh situation has its worst impact on children's psychology, hindering their social development, as well as subjecting children to direct, excessive physical Israeli violence. The degree of obvious psychological disturbance due to crises varies from one child to another according to the child's experience and the impact of the incidents on them and the way people around them deal with the incident.

Some of the psychological impacts on children include: absentmindedness, loss of memory and concentration, depression and sadness, restlessness, violence, disobedience, feeling unsafe thus staying with adults, bedwetting, sleeplessness or excessive sleep, nightmares, indigestion, loss of appetite. The Israeli violence has resulted in more children becoming obsessed with playing war games and their drawings became more influenced by pictures of Israeli violence.

The Psychosocial Survey 2004, carried out by the Palestinian Central Bureau of Statistics in April and May 2004 interviewed about 3,232 male and female children, aged (5-17) years.

Data showed that the Palestinian children aged 5-17 years are suffering from a negative psychological attitude; 11% are suffering from extreme nervousness and continuous shouting, 10.8% from fear of loneliness, and also from fear of darkness, 8.4% are suffering from bad temper, 7.1% are suffering from frustration, 6.3% are suffering from nightmares and 4.3% have increased thinking of death.

Data showed that 30.8% of the Palestinian children were exposed to violence, distributed as 24.8% in the West Bank and 40.4% in Gaza Strip. Males were more exposed to violence than females at 34.7% and 26.9% respectively.

Data showed that the family is a source of violence for 68.0%, friends are for 35.5%, teachers represent a source of violence for 29.9%, and Israeli soldiers are a source of violence for 4.6%.

Data showed that psychological suffering has a negative impact on the behavior of children for 5.8%, beating, breaking things, shouting, and setting fires for 5.8%, and those practicing smoking was 0.8%.

Data showed that receiving psychological consultation occurred mainly at specialized psychological institutions 21.0%, followed by schoolteachers 19.6%, then school social worker at 15.4%, and 14.7% consult a psychiatrist.

Data showed that 86.6% of families provide counseling and consultation when a child is mistaken, compared with 83.4% as children stated. 14.3% use cursing and insulting compared with 13.7%, according to the child. 8.2% of families stated that they beat the child compared with 9.7%, according to children's statements.

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Annex 1: Selected Indicators

Indicator	West Bank	Gaza Strip	Palestinian Territory
Population (in thousands) in mid 2005	2,372,216	1,389,789	3,762,005
Urban	1,242,124	885,534	2,127,658
Rural	994,038	70,088	1,064,126
Refugee Camp	136,054	434,167	570,221
Children under 18 years of age in mid 2005	1,203,032	780,630	1,983,662
Males	613,130	397,227	1,010,357
Females	589,902	383,403	973,305
Infant mortality rate for 1999-2003	20.0	30.2	24.2
Under Five Mortality rate for 1999-2003	23.7	34.8	28.3
Median age at first marriage in 2004			
Males	25.1	24.0	24.6
Females	19.5	19.1	19.3
Total Fertility Rate in 2004	4.1	5.8	4.6
Average of Household Size, 2004	5.5	6.2	5.7
Low birth weight in 2004 (less than 2.5 kg.)	8.2	8.3	8.2
Percentage of infants (last birth) who were breast fed in 2004	95.5	95.7	95.6
Percentage of children suffering malnutrition according to anthropometric measurements in 2004			
Wasting	3.4	1.8	2.8
Stunting	8.8	11.4	9.9
Underweight	4.8	4.9	4.9
Percentage of children aged 12-23 months who received specific Immunization in 2004:			
Tuberculosis	92.2	99.7	95.2
Polio	99.4	99.7	99.5
Measles	93.1	98.4	95.2
DPT	96.9	99.4	97.8
Children above (6 months of age) who got vitamin A/D supplements in 2004	72.8	47.9	61.8
Percentage of pregnant women who got tetanus shots in 2004	43.6	33.3	37.4
Percentage of households consuming adequaety iodized salt in 2004	56.5	82.7	65.3
Literate individuals (10-17 years) in 2005	0.6	0.9	0.7
Males	0.6	1.3	0.9
Females	0.5	0.5	0.5
Net enrollment rate at Kindergartens in 2003/2004	27.6	14.4	22.5
Gross enrollment rate in 2005/2006 at:			
Basic Stage	89.1	96.9	92.1
Secondary Stage	72.4	81.2	75.8
Net enrollment rate in 2003/2004 at:			
Basic Stage	82.2	90.2	85.3
Secondary Stage	50.3	55.3	52.2
Repetition Rate in the Basic Stage in 2002/2003			
Males	1.4	1.7	1.5
Females	1.2	1.3	1.2
Repetition Rate in the Secondary Stage in 2002/2003			

Indicator	West Bank	Gaza Strip	Palestinian Territory
Males	1.4	1.5	1.4
Females	1.2	0.9	1.1
Drop Out Rate in the Basic Stage in 2002/2003			
Males	1.1	0.5	0.9
Females	0.8	0.4	0.6
Drop Out Rate in the Secondary Stage in 2002/2003			
Males	3.5	1.1	2.6
Females	5.5	3.8	4.8
Average number of students per teacher in 2005/2006	23.2	29.6	25.4
Governorate	23.9	28.2	25.1
UNRAWA	29.1	33.1	32.1
Private	15.4	15.9	15.5
Average number of students per class in 2005/2006			
Basic Stage	31.9	41.6	35.3
Secondary Stage	27.0	40.9	31.4
Percentage of households who have children under 18 years and have, 2004			
TV	96.3	93.2	95.2
satellite dish	70.6	72.9	71.4
a home library	27.9	29.2	28.4
computers	31.1	23.8	28.5
Poverty rate among Palestinians' children in 2004	24.9	44.7	32.6
Male	24.0	45.0	32.2
Female	25.9	44.4	33.1
Child labor (10-17 years) in 2005	4.8	2.1	3.8
Distribution of working children (10-17 years) according to joining school in 2005			
Currently Enrolled in School	56.2	35.8	52.4
Not Enrolled in School	43.8	64.2	47.6
Average weekly working hours of working children (10-17 years) in 2005	45.4	47.2	45.9
Number of martyred children 9/2000-31/1/2006	344	440	784
Percentage of Children (aged 5-17 Years) who were Exposed to Some Family Member Sustain An Accident – Injury That Resulted Certain Psychological Problem in 2004	9.2	8.0	8.8
Percentage of Children (aged 5-17 Years) Who Have Received Psychological – Medical and Counseling assistance in 2004	66.6	71.2	68.8
Percentage of Children (Aged 5-17 Years) Who Were Allowed to Talk About What is Happening to Them in 2004	99.4	99.3	99.3
Percentage of Children (aged 5-17 Years) who Received Counseling – Guidance from Household , 2004	99.7	.99	99.7
Percentage of Children (aged 5-17 Years) Who The Family has Noticed that they Suffers Abnormal Problem During the Growth and Evolution , 2004	2.7	4.0	3.2
Percentage of Children (aged 5-17 Years) Who their Family Heard or Read About Child's Rights Convention , 2004	64.3	52.6	59.8

Indicator	West Bank	Gaza Strip	Palestinian Territory
Percentage of Mothers stated that one of their children aged (5-17) years was exposed to Violence during 2005	53.3	48.5	51.4
Percentage of Mothers stated that one of their children aged (5-17) years was exposed to Violence by person practiced assault, 2005			
Ahousehold members	93.3	93.2	93.3
Arelative	23.9	26.2	24.7
Aneighbor	19.3	21.2	20.0
Ateacher	34.5	34.8	34.6
Afriend	32.2	32.7	32.4
Boys/ girls on the road	39.0	39.9	39.4