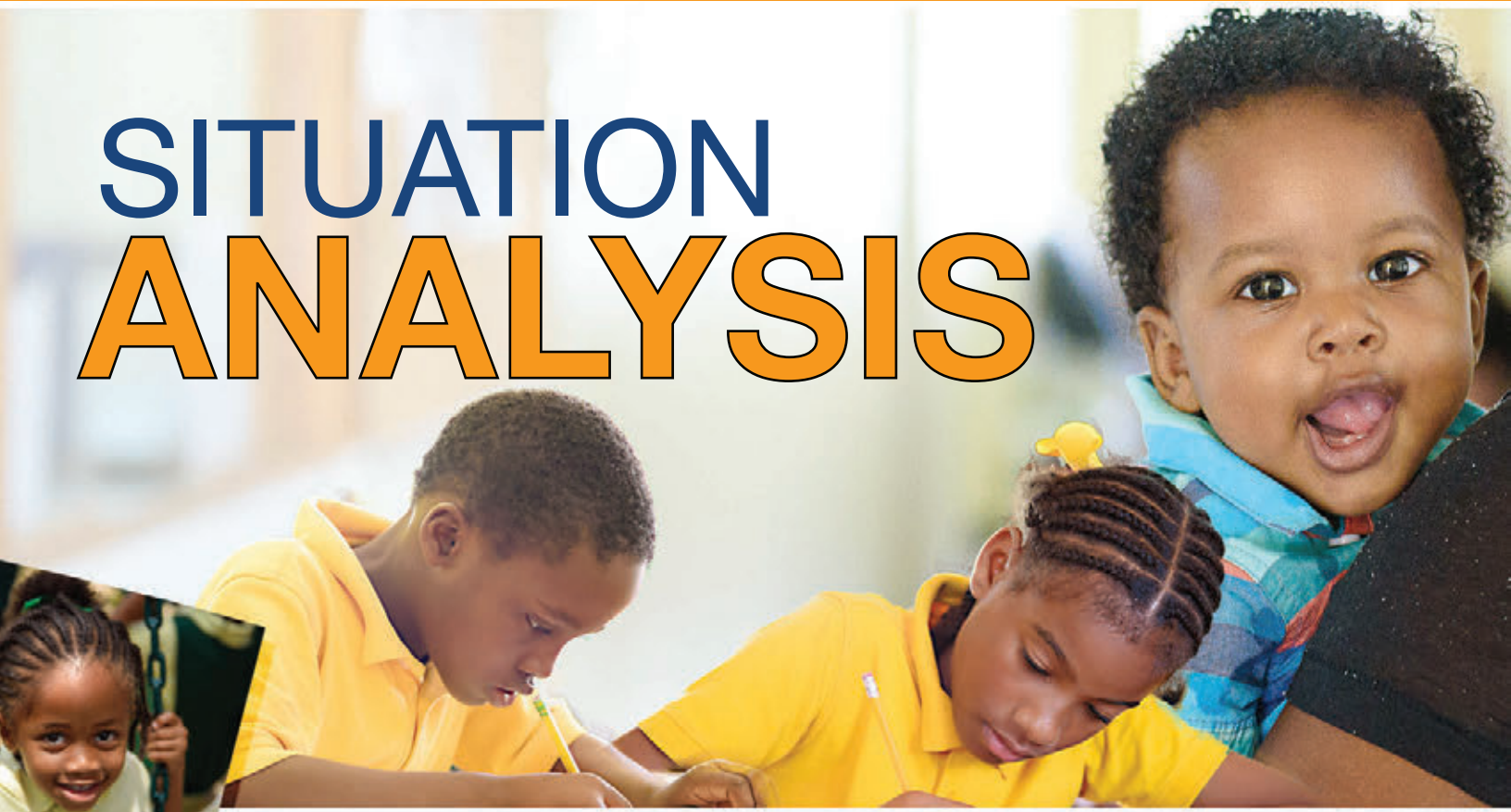


SITUATION ANALYSIS



OF CHILDREN *IN* ANGUILLA



The Government
of Anguilla



UKaid
from the Department for International Development

unicef 
unite for children

Work of Consultant Marcio Carvalho

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LIST OF ACRONYMS AND ABBREVIATIONS

CDB	Caribbean Development Bank
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CRC	Convention on the Rights of the Child
DSD	Department of Social Development
ECE	early childhood education
ECLAC	Economic Commission for Latin America and the Caribbean
ESL	English as a second language
ILO	International Labour Organization
MDGs	Millennium Development Goals
NGO	non-governmental organization
OECS	Organisation of Eastern Caribbean States
PAHO	Pan American Health Organization
PRU	Pupil Referral Unit
SDGs	Sustainable Development Goals
SIDS	Small Island Developing State
SitAn	Situation Analysis
UKOT	United Kingdom Overseas Territory
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
VPL	vulnerability to poverty line
WISE	Workshop Initiative for Support in Education

This Situation Analysis
of Children in Anguilla

is designed to

help government shape
national policies and
action plans

in line with the new

Sustainable Development

Goals agreed by

the international

community.

FOREWORD

The UNICEF Office for the Eastern Caribbean Area is very pleased to present this Situation Analysis of Children in partnership with the Government of Anguilla.

Evidence-informed programming is critical not only to our Multi Country Programme of Cooperation with the governments of the Eastern Caribbean Area but to the day-to-day decisions that are needed to determine policy, programme delivery and budget allocation in good governance to focus limited resources to the most critical issues and vulnerable groups. Notwithstanding some obvious gaps in data availability, we see this assessment as an integral contribution to the enhancement of knowledge of children and their families in Anguilla.

This Situation Analysis of Children in Anguilla is designed to help government shape national policies and action plans in line with the new Sustainable Development Goals agreed by the international community. It describes the current situation of children, identifies barriers and bottlenecks in advancing children's rights in health, education and child protection and sets forth recommendations.

It is also a critical tool in the preparation of the 2017-2021 UNICEF ECA Multi Country Programme as the identification of the vulnerable segments of the child population will sharpen our focus as we seek to support governments to respond to the needs all children, but especially those most at risk of multiple deprivations.

This document represents the first time in decades that we have attempted to compile separate updates for each of the 12 countries and territories in the Multi Country Programme. It has been an arduous, but rewarding task, as while there are many similarities between the countries of the Eastern Caribbean Area, some features and situations distinguish one state from the other.

It is hoped that this Situation Analysis will be a valuable tool to all sectors including Government; international, regional and national organisations; other Development Partners and UN agencies; non-state actors and the media as well as well as special interest groups and organisations whose mission is to work towards of the advancement of the rights of children.

We sincerely thank all those who contributed to its development.



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EXECUTIVE SUMMARY

INTRODUCTION

The Situation Analysis of Children (SitAn) in Anguilla is designed to help the Government shape national policies and action plans in line with the new Sustainable Development Goals (SDGs) agreed by the international community. It describes the current situation of children, identifies barriers and bottlenecks in advancing children's rights in health, education and child protection and sets forth recommendations.

Anguilla is a small island territory in the Eastern Caribbean. It falls under the jurisdiction and sovereignty of the United Kingdom but is self-governing and has its own laws. It has a population of just over 13,500 of which 30 per cent is 19 years of age or younger. Adolescents (10–19 years) comprise almost half of this child population.

The territory's economy is based on tourism and offshore banking. It experienced considerable growth in 2006/2007 with the expansion of the tourism and construction sectors but was set back by the international economic downturn following the 2008 global financial crash. Recent signs of recovery have been slow.

METHODOLOGY

Anguilla's lack of disaggregated data and its inconsistent sources do not allow for the measurement of trends or in-depth equity analysis. Usually, a balance between quantitative and qualitative data and analysis is necessary to increase the robustness of a SitAn and to make evidence-based assumptions and conclusions. In this study, there is a strong emphasis on qualitative information due to the limitations of available quantitative data.

The main research methods were: desk review (materials produced in the previous five years); data analysis (national and international surveys); interviews with key stakeholders (United Nations staff, government officials, non-governmental organizations (NGOs), civil society, adolescents); and group interviews with stakeholders. Observations complemented the other qualitative approaches. Data collection took place during two field visits. In order to reduce bias in the analysis, information was considered for use only after it was confirmed by three different sources. Measures were put in place to ensure the confidentiality and anonymity of opinions.

FINDINGS

Poverty is the root of most, if not all, the problems that affect children and adolescents. Yet poverty has not been monitored in Anguilla since 2008, which limits the possibility of assessing the local impact of the global economic crisis or a proper measurement of poverty in the territory today.

While most of those interviewed confirmed the existence of pockets of poverty, the majority agreed the term 'vulnerable person' was more appropriate than 'poor person'. Some rejected the concept of poverty, but there was broad acknowledgement that some people and/or groups with insufficient assets lived in unstable socio-economic situations and, consequently, were more vulnerable. The cost of living in Anguilla is high, creating an extra pressure for those families in which parents are underemployed. There is no minimum wage to avoid exploitation, especially among low-skilled workers.

Anguilla's geographic position also creates two other issues to consider when designing policies for children and the most vulnerable groups: it is vulnerable to natural disasters and, as an archipelago, is susceptible to illegal activities such as small arms and drug smuggling due to the high cost and difficulty of monitoring its borders. An additional consideration is the territory's experiences of all the typical forms of migration in the Eastern Caribbean – whether short term or long term, lone parent or whole families.

Different perspectives were aggregated and five vulnerable child populations were identified: children living with parents who are underemployed; children in single-parent households headed by women; children with learning difficulties; children with disabilities and/or special needs; and non-English-speaking children in immigrant families. Children may fall into more than one group, such as a child living in a non-English-speaking household with an underemployed single parent.

There is no consolidated social policy scheme in place to deal with vulnerable groups and families and strategically address the causes and consequences of poverty. Instead, the Government has set up public assistance grants to bring temporary relief to vulnerable individuals, families and communities. Those grants most associated with children provide free health services and medication, a monthly financial contribution, assistance with schoolbooks and uniforms, food vouchers and an alternative care programme. As in all British Overseas Territories there are two types of residents in Anguilla: 'belongers' (nationals) and 'non-belongers' (non-nationals). Legislation allows for non-belongers to access public assistance, but the majority of recipients are belongers.

Respondents considered the social assistance approach to be reactive, responding to the demands of some clients and failing to anticipate possible needs of different vulnerable groups.

While Anguilla does have an early childhood education (ECE) structure in place, access and quality need to be improved. ECE institutions receive government subsidies but still charge fees that some families find prohibitive. There is no free access granted to vulnerable families. As to quality, in 2012, not one of the day-care centres/playschools achieved a 'good' or 'excellent' rating in the seven areas assessed. The Government does not monitor enrolment.

Access to primary and secondary education does not seem to be a problem, but there is a need for improvement in providing quality education for all. At primary level, less than 50 per cent of the teachers were considered to be qualified. The same information is not available for secondary teachers, but the new educational plan mentions that the quality of teaching at secondary level has to be improved. Financial bottlenecks in relation to education were also identified. Although primary and secondary education is free, respondents pointed to the negative

impact of hidden costs (books, uniforms, lunch, transport) on domestic budgets.

Student respondents identified violence in schools as a major issue. Incidents of bullying, fights and disrespect for teachers were frequent. Among all respondents, the most mentioned causes were: lack of parental support at home; influence of other cultures; a school curriculum considered inadequate to meet students' perspectives of their own future; and frustration of non-English-speaking students. In response, the Government has set up the Pupil Referral Unit (PRU) for disruptive students. The efficiency of this programme is not known, but some of those interviewed believed it helped in bringing some students back on track.

In terms of children with special needs, English as a second language (ESL) is offered at primary level but not at secondary level. At secondary level, the PRU and the Workshop Initiative for Support in Education (WISE) for students, which focuses on practical work, are categorized as special programmes but neither is specifically for children with learning or physical disabilities.

There have been no maternal deaths in Anguilla since 2010. Of the five children under age 5 years who died in 2014, two were registered as perinatal deaths. In terms of children's health, informants identified overweight and/or obesity as a major concern. They cited two main causes: how families access healthy food (most food is imported and expensive; low quality food is cheaper than good quality) and social and cultural practices that influence eating habits including the increased consumption of high caloric drinks and fast food. Another major health issue identified is violence against children, which is widespread and pervasive throughout the society and continues to compromise social progress and development. While the number of reported cases of abuse and violence involving children went down in the years 2008–2014, it is not clear whether this is due to an effective response from the Government or

to an increase in underreporting.

Respondents had mixed views on the progress of gender equality. On the one hand, the differences between women and men are being reduced in some areas, particularly in the workplace. On the other hand, women's participation in politics is still small (just three representatives elected over the past 30 years) and violence against women and girls, particularly sexual abuse and domestic violence, remains pervasive.

There are more girls than boys enrolled in the last years of secondary education and moving into higher education, which is a reversal of the situation found in the final years of primary school and initial years of secondary. This indicates more boys are dropping out than girls and that more girls are also the ones advancing in their educational careers. Consequently, in the future, more girls are going to be qualified than boys, creating an imbalance in society that could increase violence against women. There is a need to properly assess the gender balance in the territory and create policies that are able to position both women and men at the same level.

CONCLUSION

In recent years Anguilla has advanced the rights of children in the legislative framework in several respects such as establishing compulsory education from 5 to 17 years, abolishing corporal punishment in schools and creating alternatives to prison. But further action is required such as measures to prevent statelessness and to abolish all discrimination in legislation regarding migrant children/children born in Anguilla of migrant parents; to combat discrimination in the education system; to provide in law for a proper juvenile justice system; to abolish unequal status of children born within and out of marriage; and to ratify (extend) pending human rights treaties relevant to children's rights, among others. Anguilla's failure to ask for the Convention on the

Elimination of All Forms of Discrimination against Women (CEDAW) to be extended to the territory was seen as a clear message that women's matters are not considered as important as men's.

The idea behind the Sustainable Development Goals (SDGs) is to create a global movement to advance work on the Millennium Development Goals (MDGs) towards new commitments. In this sense, nations should start framing their development plans and policies for the next years based on the new development agenda that has been globally agreed. For Anguilla, that means some strategic changes in terms of producing and using data, fighting discrimination and effectively addressing violence against children.

These challenges and the situation described and analysed in this document are not unique to Anguilla; they are shared among different nations in the region. At the same time, the SDGs signal a new wave of international co-operation among the countries and territories of the world to seek common solutions for common problems, increasing the use of resources and maximizing the chances of finding real life impacts for those in need.

RECOMMENDATIONS

LEGAL AND POLICY FRAMEWORK

- ▶ Take measures to prevent statelessness of children, including abolishing discrimination in legislation regarding migrant children/children born in Anguilla of migrant parents.
- ▶ Combat discrimination in the education system.
- ▶ Adopt legislation providing a proper juvenile justice system.
- ▶ Establishment a family court.
- ▶ Abolish the unequal status of children born within and outside of marriage.

- ▶ Ratify (extend) human rights treaties relevant to children's rights, among others.

SURVIVAL RIGHTS

- ▶ Create a programme for preventing and controlling child obesity with integral indicators and goals (involving all the relevant ministries).
- ▶ Produce and publish annual data on child and maternal health, including mortality, prenatal care, delivery, vaccination and other basic indicators.

DEVELOPMENT RIGHTS

- ▶ Reinforce the quality of education at all levels.
- ▶ Guarantee access to early childhood education (ECE) services for all children.
- ▶ Build a new secondary school and/or expand the existing one.
- ▶ Study the causes of violence at school and effectively tackle the problem.
- ▶ Provide after-school educational spaces and recreational opportunities for children and adolescents.
- ▶ Ensure secondary as well as primary students have access to an English as a second language (ESL) programme.
- ▶ Address the issue of children lagging behind and ensure the retention of children and adolescents in schools.
- ▶ Identify out-of-school children – and their reasons for not being at school – and develop effective policies to reinsert them into the formal educational system.
- ▶ Guarantee access to special education for all children who need this.

PROTECTION RIGHTS

- ▶ Create a unique database to manage cases related to child protection.
- ▶ Enforce confidentiality and anonymity in those cases where children are the victims or perpetrators of violence.
- ▶ Further develop and strengthen the juvenile justice system, including

through the use of specialized judges and appropriate mechanisms for dealing with juvenile offenders in accordance with the CRC.

- ▶ Openly discuss causes of violence against children and create a plan to tackle these.
- ▶ Reduce adolescent pregnancies by introducing policies that empower girls, guarantee access to reproductive health information and contraceptives and

penalize those who abuse young girls.

- ▶ Involve religious organizations in fighting violence against children.
- ▶ Implement a programme of mental health care for children, adolescents and women who have been the victims of abuse.
- ▶ Invest in the identification and monitoring of cases related to child labour in the territory.



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1. INTRODUCTION

As part of its country programming process, the United Nations Children's Fund (UNICEF) assists governments to analyse the situation of children, youth and women. A Situation Analysis (SitAn) of children helps shape national programmes of action for children, UNICEF's own programmes of assistance and the work of local and external development partners. It not only describes the current situation of children but also identifies and analyses the barriers and bottlenecks that prevent the full realization of their rights related to health, education and child protection. It is part of a process to help ensure that national policies to address the needs of children are on track to achieve the new Sustainable Development Goals (SDGs).

While the 2015 SitAn of Anguilla continues the work initiated with the '2009 Situation Analysis of Children and Their Families in the Eastern Caribbean' (UNICEF 2009), it also advances in its approach. For 2015, UNICEF is innovating and developing a set of individual SitAns for 12 countries in the region, including the other three United Kingdom Overseas Territories (UKOTs): Montserrat, Turks and Caicos Islands and Virgin Islands. In looking at the countries and territories separately, UNICEF aims to provide updated analysis of the situation of children, showing how this differs depending on local realities. In so doing, UNICEF wants to engage local governments and partners in the process of developing efficient public policies to realize child's rights and, at the same time, empower local society to monitor and participate as actors of change in the realization of those rights.

Although UNICEF may have initiated and sponsored the process, the SitAn is the result of cooperation between the Fund and Anguilla's Government and aims to attract as many stakeholders as possible into the process. It is intended to support the Government, civil society and other stakeholders to better understand the situation of boys and girls in Anguilla, increase national capacity for promoting human development and consequently contribute to the realization of human rights.

The analysis conducted in the SitAn adopts a human rights framework including the equity approach (Table 1). The assessment will allow for better understanding of those children who are the most marginalized, poorest, without a voice and sometimes invisible in current national policy dialogues between various stakeholders.

Equity means that all children have an opportunity to survive, develop and reach their full potential without discrimination, bias or favouritism. This interpretation is consistent with the Convention on the Rights of the Child (CRC), which guarantees the fundamental rights of every child regardless of gender, race, religious beliefs, income, physical attributes, geographical location or other status. Inequities generally arise when certain population groups are unfairly deprived of basic resources that are available to other groups. It is important to emphasize that equity is distinct from equality. Equality requires everyone to have the same resources. Equity requires everyone to have the opportunity to access the same resources. The aim of equity-focused policies is not to eliminate all differences so that everyone has the same level of income, health and education. Rather, the goal is to eliminate the unfair and avoidable circumstances that deprive children of their rights (UNICEF 2010).

Table 1: Human rights and equity focus perspectives

Rights-based approach	Equity-based approach
<p>Definition: Application of human rights principles in child survival, growth, development and participation</p> <p>Respect, protect, fulfil</p>	<p>Definition: Application of an equity-focused approach in the realization of child rights</p> <p>Poorest, most marginalized, deprived of opportunities, etc.</p>
<p>Scope: All children have the right to survive, develop and reach their full potential regardless of gender, race, religious beliefs, income, physical attributes, geographical location or other status.</p>	<p>Scope: All children have equal opportunity to survive, develop and reach full potential without discrimination, bias or favouritism. Focus is on the most marginalized children.</p>
<p>Guiding principles: Accountability, universality, indivisibility and participation. <i>Justice is the overriding theme.</i></p>	<p>Guiding principles: Equity is distinct from equality. <u>Equality</u> requires all to have the same resources, while <u>equity</u> requires all to have equal opportunity to access the same resources.</p> <p>Equity derives from a concept of social justice.</p>
<p>Violations of child rights arise when their basic rights are not realized as per the CRC’s four principles: non-discrimination; best interest of the child; right to survive, grow and develop; and right to participate/be heard.</p> <p>Concept of progressive realization of rights</p>	<p>Inequities arise when certain population groups are unfairly or unjustly deprived of basic resources that are available to other groups.</p>

1.1 METHODOLOGY

As described in the 2010 SitAn on the Eastern Caribbean Region (UNICEF Office for Barbados and the Eastern Caribbean 2011), a major challenge in its preparation was the availability and accessibility of social data to support disaggregated analysis and/or describe trends, which was uneven from country to country.

For this 2015 SitAn, quantitative analysis continued to be a challenge. Anguilla possesses limited disaggregated data, and inconsistent sources of data do not allow for measurements of trends, which is a limitation of an in-depth equity analysis.

Usually, a balance between quantitative and qualitative data and analysis is necessary to

increase the robustness of the study and to make assumptions and conclusions based on evidence. In the case of Anguilla, the SitAn has a strong emphasis on qualitative information due to limitations on quantitative data. The following are the main research methods used:

1. Desk review of key documents, research, studies, publications, government reports and plans, and other relevant materials produced about the territory in the last five years and made available for the public. The objective was to map the issues related to children and their possible causes, to assess the availability of data and to develop the questions to be asked during the interviews and focus groups. All the materials consulted and used in the SitAn are listed in the bibliography.

2. Data analysis of national and international surveys, demographic and health surveys, census, income and expenditure survey and administrative sources. The objective was to identify trends

in the indicators, to map the disparities presented and to make inferences on possible causes of inequalities. The main quantitative data sources are presented in Table 2.

Table 2: Main quantitative data sources utilized in the SitAn process

1. 2015 Budget Estimates
2. 2015 Education Development Plan (draft)
3. CDB 2014 Caribbean Economic Review & Outlook for 2015
4. 2014 Health Annual Statistics Report
5. 2014 Budget Estimates
6. OECS 2012/2013 Statistical Digest for Education
7. 2012 PAHO Health in the Americas Profile
8. 2011 Census (preliminary results)
9. OECS 2010/2011 Statistical Digest for Education
10. 2009 Anguilla Poverty Assessment
11. United Nations data

3. Interviews with key stakeholders, including United Nations staff, government officials, representatives of non-governmental organizations (NGOs), civil society and adolescents. The objective was to explore the problems identified in the literature review and to map the main issues related to children. Also, the interviews were used to capture different perspectives that were not found – or were not evident enough – in other studies.

4. Focus groups / group interviews with stakeholders, including representatives of civil organizations, NGOs and adolescent groups. The objective was to go beyond the formal interviews (described in item 3) and capture the interaction between those participating in the discussion. Focus groups were also essential to complement the lack of quantitative data.

5. Observations complemented the other qualitative approaches utilized in the

process. During two field visits (the first to collect data and the second to present initial findings to a steering committee and fill data gaps), useful notes were taken from interactions with stakeholders and formal visits to schools, hospitals, government offices, etc.

Special emphasis was given to the participation of different stakeholders during the data collection period. The process involved representatives from the Government, NGOs, youth and families. With the consent of the participants, some interviews and focus groups were recorded. The recordings were destroyed after the final version of the SitAn was prepared. As much as possible, names, positions and institutions are not mentioned in this document and there is no list attached of those who were interviewed and participated in the focus groups. Both measures aim to guarantee the confidentiality and anonymity of the opinions. At the same time, in order

to reduce bias in the analysis, all the description and analysis in the document was triangulated, i.e., it was only considered if the information was confirmed by three different sources.

On the second field visit, preliminary results were presented to a group of stakeholders with three objectives: (i) to increase participation in the process; (ii) to elucidate doubts that still existed in terms of rules,

regulations, procedures and systems, among others; and (iii) to present and discuss the initial findings. These findings were also used as the basis for a discussion on what should be the priorities in terms of actions for children in the coming years.

Using UNICEF’s determinant approach (Figure 1), the situation of children in the territory is shown to be the result of a complex mix of direct and indirect

Figure 1: Key determinants for barriers and bottlenecks

	Determinants	Description
Enabling Environment	Social Norms	Widely followed social rules of behaviour
	Legislation/Policy	Adequacy of laws and policies
	Budget/expenditure	Allocation & disbursement of required resources
	Management /Coordination	Roles and Accountability/ Coordination/ Partnership
Supply	Availability of essential commodities/inputs	Essential commodities/ inputs required to deliver a service or adopt a practice
	Access to adequately staffed services, facilities and information	Physical access (services, facilities/information)
Demand	Financial access	Direct and indirect costs for services/ practices
	Social and cultural practices and beliefs	Individual/ community beliefs, awareness, behaviors, practices, attitudes
	Timing and Continuity of use	Completion/ continuity in service, practice
Qty	Quality of care	Adherence to required quality standards (national or international norms)

Source: UNICEF Guidance on Situation Analysis (UNICEF 2011).

determinants that must be understood within its history and the political and economical choices made throughout the years.

All the analysis performed in the SitAn was

based on the notion that children are part of a dynamic enabling environment and that interactions at different levels determine their present situation and, consequently, frame their future.

After this introductory chapter, Chapter 2 provides an overview of the territory and the national context. Chapters 3, 4, 5 and 6 then assess the situation of children in relation to their right to an adequate standard of living, right to education, right to health and right to protection, respectively. At the end of each of these chapters, a subsection summarizes the main determinants that impact on the realization of children's rights. Chapter 7 looks at how the new Sustainable Development Goals (SDGs) can accelerate

progress for children, and finally Chapter 8 provides key conclusions emerging from the SitAn and some general recommendations. Some more specific recommendations that were extracted from the legislative analysis commissioned by UNICEF in 2015 can be found in Annex 1. These are reproduced here because they reflect important changes that are necessary to strength the enabling environment to facilitate the realization of rights for all rights holders in Anguilla.



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2. ANGUILLA OVERVIEW

Anguilla is located in the northerly part of the Caribbean's Leeward Islands (Figure). With a territorial area of 91 km², it is approximately 26 kilometres long by 5 kilometres wide at its widest point. Its topography is mostly flat with limited natural resources, mainly salt, fish and lobsters.

Figure 2: Anguilla's geographical position



Anguilla is vulnerable to natural hazards. It is located in the route of hurricanes and tropical storms – with the attendant possible wind damage, flooding and landslides – and also at risk for earthquakes (PAHO 2012). The Caribbean Disaster Emergency Management Agency (CDEMA) has been providing technical assistance for (i) development of a Comprehensive Disaster Management (CDM) Policy, (ii) review of the current CDM Strategy (through cooperation with the Disaster Office in the Virgin Islands); and (iii) amendment of the current Disaster Act and development of associated Regulations. The Department for Disaster Management also has a rolling programme with other government departments, education providers and the private sector to increase awareness, mitigation and business continuity planning (Overseas Territories Joint Ministerial Council 2013).

Another vulnerability is that, because Anguilla is an archipelago, monitoring of its borders is extremely costly and difficult, making it susceptible to illegal activities such as small arms and drug smuggling.

As Anguilla has no rivers, it is dependent on rainfall, wells and desalination for its water supply. By 2012, 94.6 per cent of the population had access to an improved drinking water source and 97.0 per cent had access to an improved sanitation facility (ECLAC 2015). According to the Census (Statistics Department 2014a), the main source of water supply to households comes from cisterns (73 per cent), followed by public water piped into the house (15 per cent). Long periods without rain force the population to buy water from trucks. Around 61 per cent of the drinking water comes from bottled water, creating environmental problems with garbage disposal and increasing the price of water for the communities. In addition, although flush toilets accounted for 97.7 per cent of the total toilet facilities in 2011, solid waste management and erosion remain a problem (PAHO 2012).

2.1 GOVERNANCE

Anguilla is considered an internally governed overseas territory of the United Kingdom. The Queen is the Head of State and the Governor is Her Majesty's representative on the island, responsible for external affairs, defence and internal security, the civil service and administration of the courts. The Executive Council consists of the Chief Minister, not more than three other Ministers, the Attorney General and the Deputy Governor. The House of Assembly has 12 members, and elections are held every five years. The judiciary consists of the Eastern Caribbean Supreme Court (ECSC), comprising the Court of Appeal, the High Court and the Magistrates' Court. Final appeals are heard at the Judicial Committee of The Privy Council (JCPC) in London (Morlchetti 2015). At regional level, Anguilla is an associate member State of the Caribbean Community (CARICOM) and the Organisation of Eastern Caribbean States (OECS).

Challenges faced by Anguilla as a middle-income State

Despite the fact that Anguilla is not considered a Small Island Developing State (SIDS), it faces similar issues to the SIDS: a small but growing population, limited resources, remoteness, susceptibility to natural disasters, vulnerability to external shocks, excessive dependence on the international economy and fragile environments. In addition, two other factors must be taken into consideration in understanding the territory and possible paths for its sustainable development. First, Anguilla has high averages for some economic indicators, such as GDP per capita, which positions it as a middle-income nation. Second, it is a UK territory. Both factors disqualify it from direct access to some multilateral cooperation assistance grants, international aid and development funds that could mitigate and help in reducing the inequalities and inequities present in the island.

The Medium-Term Economic Strategy 2010–2014 guided the macroeconomic and fiscal reform agenda. It aimed at maintaining Anguilla’s macroeconomic stability combined with a programme for stimulating sustainable and diversified economic growth within the context of enhanced social and environmental protection (Government of Anguilla 2014a). Interviewees mentioned that the new 2015–2018 strategic plan was being prepared, but as of August 2015 the Government had not produced a draft of the new strategy for the coming years.

2.2 LEGAL FRAMEWORK RELATED TO CHILDREN

In 2015 UNICEF commissioned a very detailed and precise assessment on the state of legislation in the British Overseas Territories related to children’s and women’s rights (Morlachetti 2015). Much of the content of this section and others related to the legal framework are based on that study. Each section in this document discusses the most important legislation related to children.

Although Anguilla is under the jurisdiction and sovereignty of the United Kingdom, it is not a part of the UK. It is self-governing and it has its own domestic laws. UK laws do not apply to Anguilla unless explicitly extended.

As a territory, Anguilla does not ratify international conventions or treaties; nevertheless, if requested by the United Kingdom or by the territory, a convention can be extended if the territory complies with necessary legal aspects (Government of the United Kingdom 2013). In practical terms, the extension of any convention or treaty means that internal legislation has to be adapted to fulfil the requirements of that instrument.

Some important conventions have been extended to Anguilla, including the Convention on the Rights of the Child (CRC). However, as depicted in Table 3, it has not ratified other relevant international conventions such as the International Labour Organization (ILO) Convention 138 on the minimum age for admission to employment and work, ILO Convention 182 on the worst forms of child labour, the Optional Protocol to the CRC on the sale of children, child prostitution and child pornography or the Palermo Protocol on Trafficking in Persons (United States Department of Labor 2014; Morlachetti 2015).

Table 3: Treaties extended and not extended by the UK to Anguilla

Treaties extended by the UK to Anguilla	Treaties not extended to Anguilla
<ul style="list-style-type: none"> ● International Convention on the Elimination of all Forms of Racial Discrimination ● Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment ● Convention on the Rights of the Child ● Convention of 25 October 1980 on the Civil Aspects of International Child Abduction ● Convention relating to the Status of Stateless Persons 	<ul style="list-style-type: none"> ● International Covenant on Civil and Political Rights ● International Covenant on Economic, Social and Cultural Rights ● Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) ● Convention on the Rights of Persons with Disabilities ● ILO Convention No. 182 on the worst forms of child labour ● ILO Convention No. 138 on the minimum age for admission to employment and work ● Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography ● Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children

Source: Morlachetti 2015.

The territory has a body of legislation and regulations that frame the situation of children in all the areas explored in this SitAn (Table 4). The Anguilla Constitution Order 1982 (as amended in 1990) in Chapter I “Protection of Fundamental Rights and Freedoms” contains specific provisions to protect human rights and combat discrimination. Every person in Anguilla

is entitled to the fundamental rights and freedoms of the individual, whatever his or her race, place of origin, political opinions, colour, creed or sex: life, liberty, security of the person, the enjoyment of property and the protection of the law, freedom of conscience, of expression and of peaceful assembly and association; and respect for private and family life.

Table 4: Relevant legislation related to children, Anguilla, 2015

Legislation*
<ul style="list-style-type: none"> ● Child Protection Bill (2015) ● Social Protection Act (2015) ● Domestic Violence Act (2015) ● Education Act (2012) ● Adoption of Children Act (2000) ● Age of Majority Act (2000) ● Anguilla Belonger Commission Act (2006) ● Child Abduction and Custody Act (Revised Regulations under Child Abduction and Custody Act R.S.A. C. C32) ● Criminal Code (2010) ● Employment of Women, Young Persons and Children Act (2000) ● Fair Labour Standards Act (2000) ● Health Authority of Anguilla Act (2006) and Health Services Fees and Charges Regulations (2004) ● Immigration and Passport Act (2000) ● Juvenile Act (2000) ● Juvenile Courts Act (2000) ● Labour Department Act (2000) ● Maintenance of Children Act (2000) ● Marriage Act (2010) ● Probation Act (2011) ● Probation Regulations (2012)

* Numbers in parentheses indicate when the legislation was enacted. Revisions might have occurred after that date.
Source: Morlachetti 2015.

Under the Age of Majority Act, the age of majority is 18 years. The minimum age of marriage without parental consent is also 18, according to the Marriage Act, and a marriage is void if either of the parties was, at the time of marriage, under the age of 16. An exception is provided in Section 25 (3) that the Registrar-General may grant a license to marry to any person under the age of 16 years but over the age of 15 years, if,

for serious reasons, he considers it to be in the interest of the intending spouses to do so.

The minimum age of sexual consent is 16, but the Criminal Code (Section 145 {3}) makes an exception in those cases where a marriage is void under the Marriage Act because the wife is under the age of 16 years. The invalidity of the marriage does

not make the husband guilty of an offence under this section because he had sexual intercourse with his wife if, at the time, he believed her to be his wife and had reasonable cause for that belief. In addition, it states that a man shall not be convicted of an offence under this section because he has unlawful sexual intercourse with a girl under the age of 16 years if he is under the age of 21 years, has not previously been charged with a similar offence and believes her to be 16 years or over and has reasonable cause for the belief.

The Employment of Women, Young Persons and Children Act prohibits child labour (under 14 years of age), but children may be employed by their parents in domestic, agricultural work limited to no more than two hours on days when they should be attending school.

In terms of health, the practice is that children under 18 need parental consent to access medical services. However, no legislation can be identified regulating age of consent to medical services. A person under the age of 10 years is not criminally responsible for any act or omission.

Table 5: Minimum legal ages, Anguilla, 2015

Minimum age	Age	Legislation
Age of marriage	18 16 15	Marriage Act (2010)
Minimum age of sexual consent	16	Criminal Code – Section 145 (1)
Minimum age needed for medical consent to have access to medical services	N/A	
Minimum age for employment	14 12	Employment of Women, Young Persons and Children Act
Criminal age of responsibility Age of compulsory education	10 From 5 to 17	Criminal Code – Section 17 Education Act 2012 Section 117

Source: Morlachetti 2015.

For the purpose of this SitAn, a child is someone under the age of 18 or, sometimes (depending on how data were aggregated), under the age of 19. Adolescents are defined as children between the ages of 10 and 18 (and sometimes between 10 and 19 years of age).

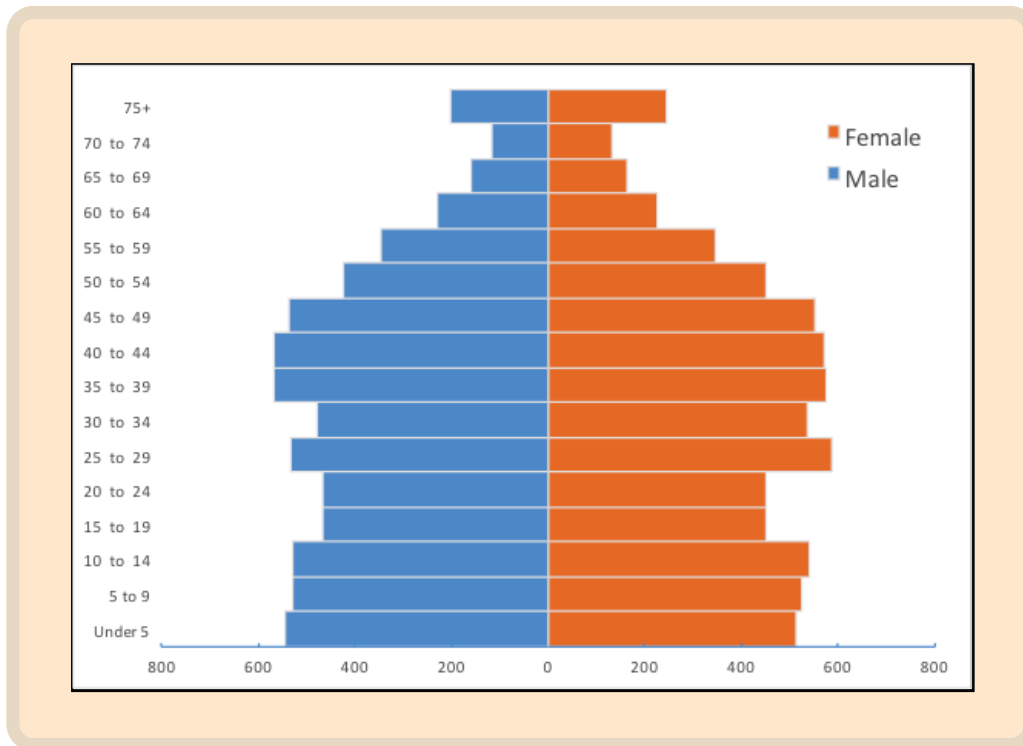
2.3 DEMOGRAPHICS

The last census was done in 2011. Preliminary results indicated that the

population was 13,572 people: 6,707 (49.4 per cent) male and 6,865 (50.6 per cent) female (Statistics Department 2014b). The population is evenly distributed (Figure 3) up to the age of 50. Around 30 per cent of the population is 19 years of age or younger. Adolescents (10 to 19 years old) comprise almost half of the child population (Table 6).

According to the Census, religious affiliation is as follows: 22.7 per cent Anglican, 19.4 per

Figure 3: Population pyramid, 2011



Source: Statistics Department 2014c.

Table 6: Child and youth population, 2011

	Male	Female	Total	% Total population	% Child population
Under 1 year	130	115	245	1.8	6.0
1 to 4 years	416	397	813	6.0	19.8
5 to 9 years	529	527	1,056	7.8	25.8
10 to 14 years	530	539	1,069	7.9	26.1
15 to 19 years	466	450	916	6.7	22.3
20 to 24 years	466	451	917	6.8	-
Population under 5 years	546	512	1058	7.8	25.8
Adolescent population (10–19 years)	996	989	1985	14.6	48.4
Youth population (15–24 years)	932	901	1,833	13.5	-
Total child population (0–19 years)	2,071	2,028	4,099	30.2	100.0

Source: 2011 Census (Statistics Department 2014d)

cent Methodist, 10.5 per cent Pentecostal, 10.1 per cent Christianity, 8.3 per cent Seventh Day Adventist, 7.1 per cent Baptist and 6.8 per cent Roman Catholic. The remaining population includes members of the Church of God, Jehovah's Witnesses and others (Statistics Department 2014b).

2.4 MIGRANT POPULATION

Migration has a substantial impact on the population. In the Eastern Caribbean in general, migration takes place in four typical forms: (i) seasonal migration, i.e., parents migrate to a host territory for up to six months for work; (ii) serial migration, i.e., one or both of the parents migrate with the intention to 'send for' the rest of the family at a later date; (iii) parental migration, i.e., parents migrate permanently, or for an assigned period, but have no intention of their children joining them; and (iv) family migration, i.e., parents and children migrate (UNICEF 2009). In the case of Anguilla, all four forms are present.

The effects of migration on the child, such as one who has a parent working abroad, can include loss or reduction of parental support. Additionally, if the child is the one migrating, there can be challenges to accessing services and adaptation issues in their new homes (UNICEF 2012).

Anguilla's construction and tourism sectors flourished in 2006 and 2007 and led to a heavy demand for labour, attracting workers from other nationalities seeking employment. In the past, due to the large influx of immigrants, the Government ruled that families could immigrate with only two children. That barrier was later abolished. It was estimated that, in 2009, migration inflows were 14.06 per 1,000 people (PAHO 2012). Estimates suggest that around 48 per cent of the population is comprised of immigrants, among whom 24 per cent are children under the age of 18 (United Nations et al. 2014). Cross-checking the information from the 2011 census with that from the United Nations (Table 7) shows that almost 39 per cent of children aged 0–19 years are non-nationals.

Table 7: Total child and youth populations, total migrant population and % of migrants by age group

	Total population (*)	Migrant population (#)	% Migrants in the age group
0–4 years	1,058	466	44.0
5–9 years	1,056	414	39.2
10–14 years	1,069	360	33.7
15–19 years	916	347	37.9
20–24 years	917	445	48.5
Total children (0–19 years)	4,099	1,587	38.7
Total youth (15–24 years)	1,833	792	43.2
Total Population	13,572	6520	48.0

Sources: (*) 2011 Census (Statistics Department 2014c) and (#) 2013 UNICEF data (United Nations et al. 2014)

According to the 2009 Poverty Assessment (Government of Anguilla and Kairi Consultants Limited 2009), there are significant numbers of Spanish-speaking immigrants, particularly from the Dominican Republic. Most of the immigrants are in the territory legally – i.e., they have a work permit – but interviews suggest that the

population of illegal immigrants has been increasing, mainly due to the harsh financial situation of other countries in the Eastern Caribbean. Five countries are responsible for 56 per cent of the legal migrant population: Dominican Republic, Jamaica, Saint Kitts and Nevis, United States and US Virgin Islands (United Nations et al. 2014).

Becoming a Belonger in Anguilla

The Constitution Order (Chapter VII Section 80) calls for the establishment of an Anguilla Belonger Commission, which was created by the Anguilla Belonger Commission Act of 2006 that sets the function of the Commission and the procedure to grant belonger status to any person who is domiciled in Anguilla and has been ordinarily resident in Anguilla for not less than 15 years, or is a spouse of a belonger, and has been married to such a person for not less than three years.

Source: Morlachetti 2015.

These immigrants include professionals, technicians, tradespersons and hotel and domestic workers, and they help fill the territory's need for a larger and more diverse base of human resources. Nevertheless, the 2009 Poverty Assessment indicates that some Anguillians deeply resent their presence, especially the Spanish-speaking ones, and that some immigrants have experienced discrimination, exploitation and exclusion. The fact that the second largest immigrant group is comprised of Spanish speakers creates issues at primary and secondary schools as well as in the provision of services. Interviews with Spanish-speaking legal migrants also showed that, from their perspective, non-English-speaking migrants are treated differently, and many of them used the word "discrimination" to describe their experiences in Anguilla.

There are two types of residents in Anguilla: belongers and non-belongers. The terms 'belonger' (national) and 'non-belonger' (non-national) are commonly used in all British Overseas Territories to denote those who are 'deemed to belong' and 'not deemed to belong' to the respective territory. National/ islander/ belonger status confers important rights, including the right to buy property, to vote and to access some public services, including social welfare benefits. Non-nationals need a work permit and are under the control of immigration authorities (Morlachetti 2015). In the case of Anguilla, as will be discussed in this report, the difference between nationals and non-nationals also influences how families access social welfare services and benefits that affect the full realization of the rights of children.

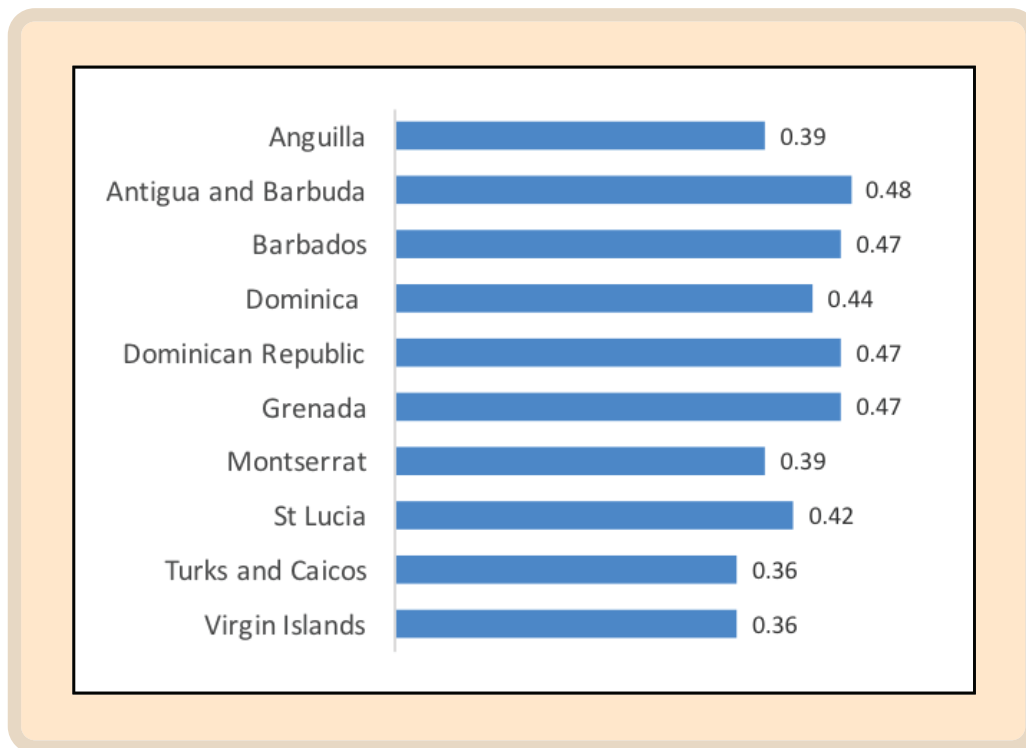
2.5 ECONOMY

Anguilla's economy is service-based and focused on tourism and offshore banking. In 2013, about 45 per cent of its GDP was related to tourism (construction, hotels, restaurants and real estate).¹ In the same year, GDP per capita was around US\$19,886, the sixth highest in the region among 16 territories/countries.² The last measurement of the Gini coefficient was 0.39 in 2009,³ positioning the territory as average among countries and territories in the region (Figure 4). The Gini coefficient

GDP PER CAPITA:
US\$ 19,886
 SOURCE: UN DATA

measures the extent to which the distribution of income (or, in some cases, consumption expenditure) among individuals or households within an economy deviates from a perfectly equal distribution. The coefficient varies from 0 to 1; the closer to one, higher the inequality in the country/territory.

Figure 4: GINI coefficient for selected countries and territories



Sources: Government of Anguilla and Kairi Consultants Limited 2009; UNDP 2016.

1 Data are from the Eastern Caribbean Central Bank: www.eccb-centralbank.org/Statistics/#GDP (accessed 5 June 2015).

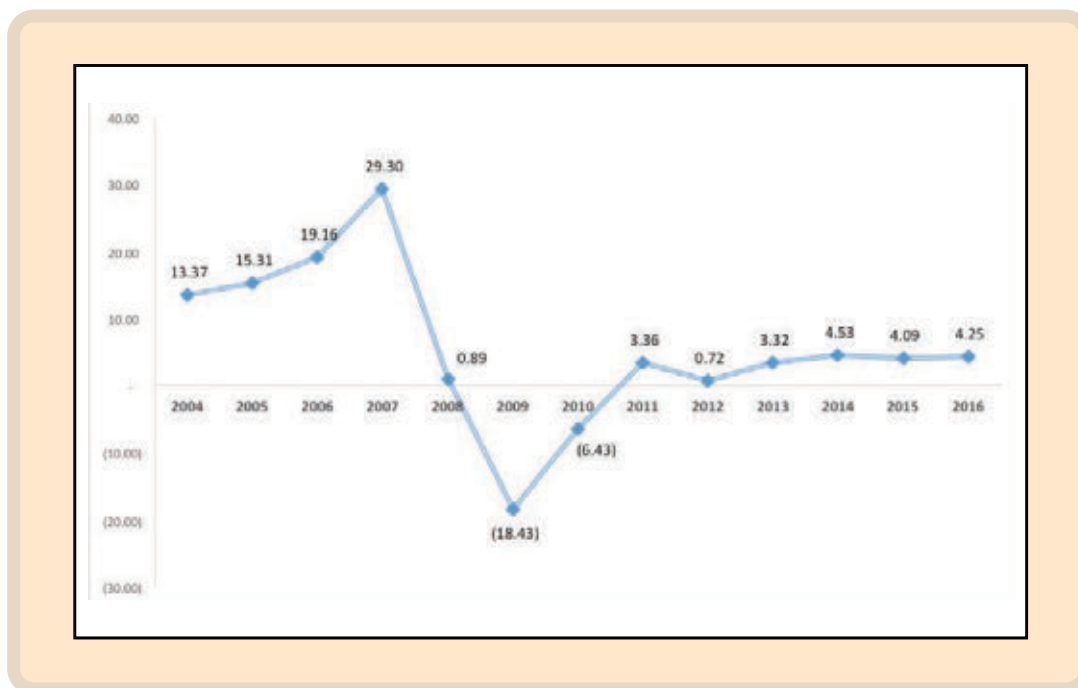
2 Anguilla is behind Bermuda (US\$85,762.3), Cayman Islands (US\$59,447), Virgin Islands (US\$32,306), Bahamas (US\$22,312) and Turks and Caicos (US\$21,338). All numbers are for 2013, adjusted for US\$ in May 2015. Data are available at <https://data.un.org/Default.aspx> (accessed 28 May 2015).

3 For a comparison with other nations, see: www.cia.gov/library/publications/the-world-factbook/rankorder/2172rank.html

In 2006/2007, with the expansion of the tourism and construction sectors, the economy had considerable growth. However, in the following years there was a major decrease due to the global economic downturn. The global financial crash hit Anguilla particularly hard due to its reliance on tourism, which depends heavily on income growth in industrialized nations (Overseas Territories Joint Ministerial

Council 2013) – as well as favourable weather conditions. According to numbers from the Eastern Caribbean Central Bank⁴ the number of tourists dropped from 164,000 in 2007 to 112,000 in 2009. The sector is only slowly recovering and attracted 151,000 tourists in 2013. These numbers partially explain the slow recovery of the economy depicted in Figure 5.

Figure 5: GDP growth and estimates, Anguilla, 2004–2016



Data source: Eastern Caribbean Central Bank, available at www.eccb-centralbank.org/Statistics/#GDP (numbers for 2015 and 2016 are estimates).

In general, in nations where migration is a reality, remittances are an important component of a household's survival strategy, especially among vulnerable families (UNICEF 2009). In Anguilla, however, remittances coming in to help families have declined. They used to drive the economy in the 1970s, but the situation has changed considerably in the past years.

The latest numbers available are from 2009, when remittances accounted for 2.6 per cent of the territory's overall source of income (Government of Anguilla and Kairi Consultants Limited 2009). Qualitative data collected during the field trip reveal the overall perception that the amount of financial resources sent by non-belongers residing in Anguilla to their countries/

⁴ Data available at www.eccb-centralbank.org/Statistics/#GDP (accessed 5 June 2015).

**MAIN ECONOMIC
SECTORS:**

Hotel and restaurants
Real Estate
Financial
Intermediation
Government
Transport
Construction

territories of origin surpasses the amount that Anguillan expatriates send back to their families living in the territory. In this sense, part of the resources generated locally do not stay in the island and do not reinforce its economy.

Anguilla has no recent employment data. Data from 2002 showed an 8 per cent unemployment rate, while the 2009 poverty assessment had less than 2 per cent. A discussion on quality of employment can be found in the next chapter.



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3. THE RIGHT TO AN ADEQUATE STANDARD OF LIVING

Children have the right to a standard of living that is good enough to meet their physical and mental needs. Governments should help families and guardians who cannot afford to provide this, particularly with regard to food, clothing and housing (CRC, article 27)

As with the other UK overseas territories, raw data are available from various governmental arms and agencies but may not be disaggregated or collected in a format that facilitates analysis. Structured analytical studies on poverty and other socio-economic areas date back to 2009, using data from 2007/2008 (Government of Anguilla and Kairi Consultants Limited 2009). Hence, these data do not capture the full impact of the 2008 economic crisis. Also, new vulnerable groups may have emerged and those groups previously identified as vulnerable may have had changes in their conditions that would require different approaches and tools to address their needs.

Field visits to Anguilla in mid-2015 showed that some of the consequences of the 2008 crisis were still present as a considerable number of tourism investments seemed to be unfinished and abandoned. Interviews and focus groups indicated that the crisis increased the number of people not earning enough to support their families. The Government had tried to alleviate its impact but, due to the dependency on tourism, few possibilities were available and implemented.

The cost of living in Anguilla is considered to be higher today than it was in the past. One reason is the cost of food. As in other territories in the region, most of the products are imported and, according to interviewees, some goods are prohibitively expensive for the local population. Residents pay the same prices as tourists but do not have the same purchasing power as those who come to Anguilla for a short stay. High prices of goods, especially food, determine eating habits among families, impacting how people choose the type and quality of food they consume.

The 2009 poverty assessment (Government of Anguilla and Kairi Consultants Limited 2009) derived three poverty lines for Anguilla. The first is an indigence or severe poverty line, which is based on minimum food requirements. The second, called the general poverty line, additionally includes essential non-food expenditure (e.g., utilities, housing, clothing, etc.). The third is the vulnerability to poverty line (VPL), which provides an indication of the households (or population) with expenditures just above the poverty line that could fall into

Anguilla and the 2008 economic crisis

Despite the fact that available data did not monitor the effect of the 2008 economic crisis on Anguilla's socio-economic situation, the qualitative assessment done for the 2009 poverty study showed that 44.1 per cent of household heads felt conditions had worsened in 2008 when compared to the previous year, indicating that the financial crisis was starting to hit the territory.

poverty as a result of a relatively small variation in income or expenditure. In common with Caribbean Development Bank (CDB) practice, the VPL was set at 25 per

cent above the general poverty line. The values considered for the 2008/09 poverty estimates are shown in Table 8.

Table 8: Daily and annual cut-off values for poverty lines, Anguilla, 2007/2008

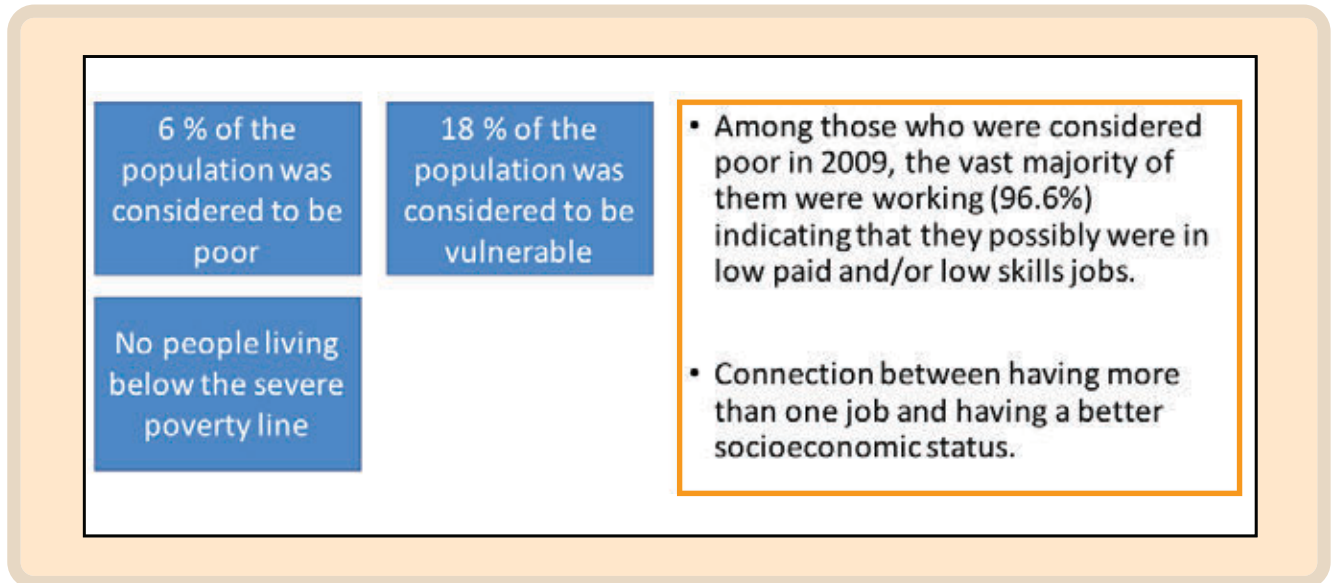
	Daily value	Annual value
Severe poverty line	EC\$7.13/US\$ 2.6	EC\$2,602/US\$945
General poverty line	EC\$ 44.7/US\$16.58	EC\$16,348/US\$6,054
Vulnerable poverty line	EC\$ 56.1/US\$20.7	EC\$20,484/US\$7,588

Source: Government of Anguilla and Kairi Consultants Limited 2009.

In 2007/2008, there was no one in Anguilla living below the severe poverty line. The poverty rate was 5.8 per cent and the vulnerability rate was 17.7 per cent (Government of Anguilla and Kairi Consultants Limited 2009) (Figure 6). These rates are low in comparison to the other territories in the region. Two possible explanations for the small rates are (i) the fact that data were collected during an economic boom in the country (GDP

growth for 2007, the year that data collection started, was 29.3 per cent – see Figure 6), and (ii) the extremely low cut-off points that were determined for the territory. For a middle-income territory, establishing a general poverty line around US\$16 a day is very low and mathematically diminishes the number of poor people in the island. At that year, the GINI coefficient was 0.39 per cent (ibid.).

Figure 6: Poverty in Anguilla, 2007/2008

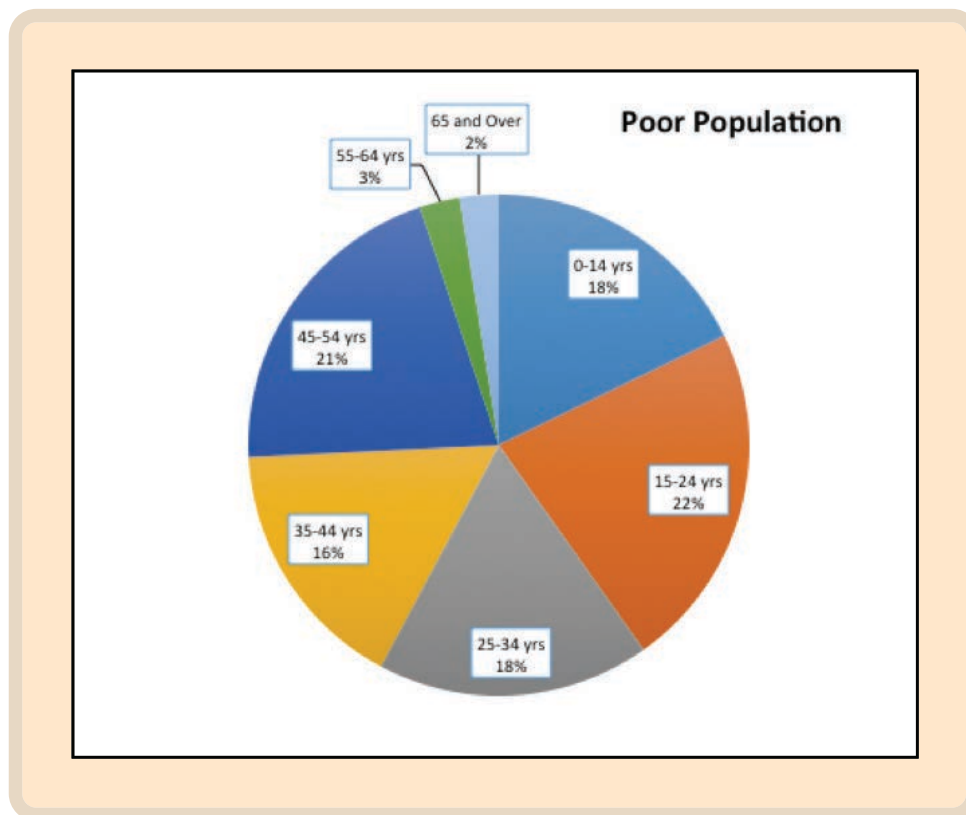


Source: Government of Anguilla and Kairi Consultants Limited 2009.

Poverty varied in terms of age and hit children and young populations harder. Among those who were poor, children (aged 0–14) and youths (aged 15–24) accounted for 40.1 per cent of the poor (Figure) and 38 per cent of the vulnerable (Government of Anguilla and Kairi Consultants Limited

2009). Among the population aged 0–14 years, 20 per cent were considered poor or vulnerable, while among the population aged 15–24 years, 25 per cent were poor or at risk of becoming poor if they lost their jobs or if prices increased.

Figure 7: Age groups among the poor population, 2009



Source: Government of Anguilla and Kairi Consultants Limited 2009.

Among those who were considered poor in 2009, the vast majority were working (96.6 per cent), indicating that possibly they were in low-paid and/or low-skilled jobs. There is no minimum wage, so salaries are at the discretion of the employer. At the time of data collection for the 2009 study, people needed multiple jobs in order to be out of poverty. For example, 11.4 per cent of those employed at the time of the survey stated that they had more than one job, and the likelihood of having more than one job increased with socio-economic status. Almost 17 per cent of persons in the richest quintile had more than one job, compared to 10 per cent of those in the poorest quintile. This indicates that jobs were not secure enough to guarantee that families live well, and people needed to work in more than one job to be able to cope with their needs and/or to maintain their desired socio-economic

status. Another important element is that since Anguilla is a tourism destination, the availability of jobs varies depending on the time of the year. Those who work in this sector therefore try to accumulate as much money as possible when jobs are available (usually in the peak tourist season), leading women and men to work in diverse jobs to save for the rest of the year.

The absence of job opportunities, low wages, low levels of education and lack of marketable skills were identified as major contributors to poverty. Data showed a definite link between education, employment and the household economy. Low levels of education of household heads – many of whom had only primary education – and among youth – the majority of whom had not completed secondary school or had not attended technical and vocational or skills-

training programmes – were considered as determinants for those persons who were unable to obtain permanent or well-paid jobs and to contribute in any substantial way to the economy of their households (Government of Anguilla and Kairi Consultants Limited 2009).

As a result, people were obliged to remain unemployed or to engage in a number of diverse income-earning activities in the informal sector and sometimes even in the underground economy. However, while activities in the informal sector and the underground economy provided some income that allowed them to survive and to be able to buy food and pay some of their bills, the money generated was usually insufficient to pull households out of poverty (ibid.).

3.1 POVERTY AND VULNERABILITIES IN 2015

The interviews conducted in Anguilla in 2015 showed a mixed picture in terms of recognizing and defining poverty. While most of those who were interviewed confirmed the existence of pockets of poverty, the majority also agreed that the most appropriate terminology to be used would be ‘vulnerable person’ rather than ‘poor person’. The concept of poverty was actually rejected by some of those who were interviewed, but the idea that some people and/or groups do not have enough assets, live in very unstable socio-economic situations and, consequently, are more socially and economically vulnerable than others was largely acknowledged.

Vulnerability is connected to the risk of deprivation, losing assets, being physically or psychologically hurt or losing life due to various threats in the surrounding environment. The concept of vulnerable populations is common in emergency preparedness analysis, but it can be adapted to indicate those situations where social and economic changes create a risk for the population. For this SitAn,

vulnerability is related to a family both not having enough financial resources and not having access to public policies that provide the systemic protection that children need for their rights to be realized.

Based on the interviews and focus groups, five categories of vulnerable groups of children in Anguilla were identified. Many of these are at high risk of not accessing health facilities and schools and some may not have been registered due to their family migration patterns and background. These categories are:

1. Children living with parents who are underemployed and/or have inadequate employment
2. Children who live in single-parent households headed by women
3. Children who do not learn properly at school
4. Children with disabilities and/or special needs
5. Children who are residents but are non-belongers, especially those for whom English is not their mother tongue

The characterization is important in terms of public policies. Acknowledging the most vulnerable groups means that policies can be developed to address their needs, aiming to increase the overall well-being of the population.

1. Children living with parents who are underemployed and/or have inadequate employment

The first group of vulnerable children is those whose parents are unemployed, underemployed and/or have inadequate employment. As mentioned, government data do not track general employment figures; nevertheless, the poverty assessment from 2009 and interviews conducted in 2015 show that underemployment and inadequate employment are common. They arise because many workers face not only a total

lack of work opportunities but also a lack of adequate work opportunities, giving rise to situations in which persons in employment are often obliged to use their skills only partially, to earn low hourly incomes and/or to work less hours than those they are willing and able to work (Greenwood 1999).

These families are in a situation also called ‘the working poor’, where poverty (or in this case, vulnerability) is not connected to the lack of jobs but to low payments and low job opportunities. As noted above, there is no minimum wage, meaning employers pay whatever they think is appropriate and forcing workers to accept any type of job since they have to respond to their families’ needs. While some justify the lack of a minimum wage for economic reasons, that rational is creating a situation where parents often have to find more than one

job to cope with the needs of their families, influencing many of the social situations that are discussed in this SitAn.

Adding to their vulnerable financial situation is the high cost of living as rental and consumption products are expensive, creating a perception that many families live from pay check to pay check without any scope for extra expenses. For example, during prolonged droughts residents have to buy water to fill their needs, which is not cheap and can lead to some families not having water in their dwellings for some time. Qualitative evidence also points to families who have houses but not enough resources to pay for electricity. Besides, financial costs associated with education and health might also impact on how families with children cope with their financial situation, influencing the decisions they make.

Table 9: Summary of vulnerabilities faced by children living in families where parents are underemployed and/or have inadequate employment

Area	Vulnerability
Finance	<p>The cost of living is high, creating pressure on families whose parents are underemployed or have inadequate employment. There is no minimum wage to avoid work exploitation, especially among low-skilled workers.</p> <p>The harsh financial situation of the family contributes to children working in informal jobs as a coping mechanism.</p>
Education <i>(to be discussed in Chapter 4)</i>	<p>Lack of financial resources in some families restricts access to early childhood education (ECE) services. The fact that families have to buy uniforms and books and provide lunch during the school years is a problem for those families in a difficult financial situation.</p>
Health <i>(to be discussed in Chapter 5)</i>	<p>Costs associated with health are prohibitive for some families, especially those in low-skilled, low-paid jobs.</p>
Child protection <i>(to be discussed in Chapter 6)</i>	<p>The harsh economic situation of some families pushes children to commit small crimes. Qualitative evidence relates appearances in youth courts to the low economic situation of the families.</p> <p>The chances of cases of child labour are higher among children living in these families.</p> <p>Age-mixing among sexual partners is fuelled by the poor economic situation in which children live.</p>
Social protection <i>(to be discussed in section 3.2)</i>	<p>Depending on the characteristics of the family (being a believer or not), access to social welfare programmes to alleviate their problems is limited.</p>

2. Children who live in single-parent household headed by women

Children who live in single-parent households headed by women comprise the second vulnerable group. The exact number of such households is not known; however, interviewees mentioned that these types of families are common. Social norms are one possible reason. According to the interviews, it is common and socially accepted that older men have affairs outside their marriage, usually with much younger girls, and in some cases children are born from these relationships. Also, qualitative evidence points to the fact that some of these mothers are not belongers and initially came with work authorizations. In Anguilla, they became pregnant and were separated from (due to abuse or a failed relationship) or abandoned by the fathers of the children.

The vulnerability of children living in these arrangements is connected to the need that mothers have to find work to sustain the family. As jobs are rarely permanent and secure, mothers usually have to

work double shifts to guarantee financial resources for their children. In single-parent households, when a mother – or father – is not home, children are affected in a number of ways. One direct danger is susceptibility to being abused by older children and/or adults. Qualitative assessment conducted in the territory (and in the whole Eastern Caribbean area) connects abuse, including sexual abuse of children, to the absence of parents from home, especially during the night.

For a single parent, being absent from the house is usually not a choice but a coping mechanism to financially sustain the household, especially when one job does not guarantee a sufficient salary to ensure the well-being of the family. Lack of parental supervision should not be seen as irresponsibility on the part of the mother or father. Rather, the situation calls for a social protection system that guarantees safe spaces for children to stay while their mothers are working and for policies that complement low salaries and alleviate vulnerability.

Table 10: Summary of vulnerabilities faced by children in single-parent households

Area	Vulnerability
Finance	In general, single-parent households have lower incomes than households where both parents are present and able to work, increasing the chances that children living in these arrangements are in a difficult financial situation.
Education <i>(to be discussed in Chapter 4)</i>	Some boys living in single-parent households are said to be involved in fights at school and have higher chances of dropping out of formal education. Lack of parental supervision and a male figure at home are connected to behavioural problems at school and in the community.
Health <i>(to be discussed in Chapter 5)</i>	Access to health might be limited due to the harsh economic situation.
Child protection <i>(to be discussed in Chapter 6)</i>	<p>Children are left alone and unsupervised for long periods of time, making them vulnerable to different forms of abuse and violence by older peers and adults, including sexual violence.</p> <p>A large number of children in conflict with the law seems to be coming from broken families, categorized as single-parent households or other arrangements where one of the parents (mainly the men) are not effectively present in the life of the child.</p>
Social protection <i>(to be discussed in section 3.2)</i>	Depending on the characteristics of the family (being a believer or not), access to social welfare programmes that alleviate their problems is limited.

3. Children who do not learn properly at school

Stakeholders identified a third group as those children who do not learn properly at school. This group is different from those who have special needs (see next category) and includes those children who pass from one educational level to another without having grasped the academic content. According to the interviews, the inability

to comprehend comes from the individual situation of the pupils (some might not have a strong educational basis or might have learning disabilities), but it is also fuelled by an educational system in which there is pressure to keep advancing children to higher grades. As a consequence, in the last years of school, these children are not going to be prepared to take the final exams, will not progress into more advanced levels and will not be prepared for skilled jobs.

Table 11: Summary of vulnerabilities faced by children who do not learn properly at school

Area	Vulnerability
Finance	There is no immediate financial vulnerability faced by these children, but it is likely that in the future they will have low-paid jobs, perpetuating a poverty cycle.
Education (to be discussed in Chapter 4)	Children in this group do not always understand their lessons and are behind their peers. If challenged, they can become demotivated, increasing their chances of dropping out of school. There is also qualitative information connecting low academic achievement with challenging behaviour at school.
Health (to be discussed in Chapter 5)	There are no immediate vulnerabilities related to health. However, more systematic early screening is needed for learning disabilities such as attention deficit disorder (ADD) or dyslexia. The earlier the diagnosis, the sooner work can be done to prevent low achievement and build that student's skills.
Child protection (to be discussed in Chapter 6)	Children in this group have a higher propensity of becoming violent at school, at home and in their communities. There is a correlation between low achievement and alcohol consumption and/or use of drugs. It should be further investigated whether low achievement is caused by abuses suffered at school, community or home.
Social protection (to be discussed in section 3.2)	Depending on the characteristics of the family (being a believer or not), access to social welfare programmes that alleviate their problems is limited.

4. Children with disabilities and special needs

Children with disabilities and special needs⁵ are considered an extremely vulnerable group, not only in the territory but also in many countries worldwide. Anguilla has no recent record of how many children have disabilities, nor their type of disability. There

are still social norms that influence how families and society deal with children with disabilities. Some families are ashamed of their child's condition and prefer to hide this instead of searching for help. Focus groups and interviews showed the perception that the Government and society are not ready to deal with children with disabilities and their families.

⁵ For the purpose of this SitAn, a child with a disability is one with some type of physical impairment and a child with special needs is one with some degree of learning difficulty and/or emotional or behavioural problems.

Table 12: Summary of vulnerabilities faced by children with disabilities and/or special needs

Area	Vulnerability
Education <i>(to be discussed in Chapter 4)</i>	<p>The situation of children with disabilities is practically unknown. There is an urgent need to identify their situation and discuss a plan to increase access and address their problems. It is not known whether the educational opportunities available for children in this group guarantee their access.</p> <p>While children who have low levels of disabilities and/or learning problems might be included in the same classes as other children, it is not known whether they are able to follow the lessons or lag behind the other students.</p>
Health <i>(to be discussed in Chapter 5)</i>	<p>The SitAn did not obtain details on the availability of specific services to detect children with disabilities and/or special needs at early stages of their lives. Access to specialized health services for children in this group is limited to those living in Tortola or those who seek help abroad.</p>
Child protection <i>(to be discussed in Chapter 6)</i>	<p>Children with disabilities and/or special needs are hidden in society. There are neither official numbers nor studies to identify their problems and address them. These children might be bullied at school and/or be victims of violence and abuse at home and school and in the community.</p> <p>According to the interviews, some families are ashamed of a child who might have disabilities and prefer to hide this than to look for help.</p>
Social protection <i>(to be discussed in section 3.2)</i>	<p>Depending on the characteristics of the family (being a believer or not), access to social welfare programmes that alleviate their problems is limited. Also, the fact that some families are ashamed of the situation is a factor that hinders family access to government help.</p>

5. Children who are residents but non-belongers

A fifth group of vulnerable children (and families) are those who are resident but non-belongers, especially those for whom English is not their mother tongue. Recently, the influx of migrants from the Dominican Republic has been increasing. Children who do not speak English are in the same educational system as those who do, but there is no formal support for them. Similarly, Spanish-speaking civil servants (including welfare workers and police officers) are few. As will be discussed later, there is also a differentiation in access to services and fees between belongers and non-belongers.

The distinction between nationals and non-nationals poses a significant problem that in particular affects migrant children and children born in Anguilla of non-national parents. In terms of their social status, migrant children may be considered vulnerable and may be facing obstacles in accessing educational, health and basic social services. The lack of basic social rights induces vulnerability and increases their chance of being exposed to abuse, exploitation and crimes (Caribbean Development Bank 2009). Table 13 summarizes the main problems in this group.

Table 13: Summary of vulnerabilities faced by resident children who are non-belongers, especially those for whom English is not their mother tongue

Area	Vulnerability
Financial	<p>Not all non-belonger families from non-English-speaking countries living in Anguilla are in a harsh financial situation, but the majority of families that are financially vulnerable are non-belongers, and the qualitative assessment identifies those that do not have English as their first language as having the worst jobs.</p> <p>Most non-English speakers are from a Spanish heritage and are employed in low-skilled/low-paid jobs.</p>
Education <i>(to be discussed in Chapter 4)</i>	<p>The lack of formal English as a second language (ESL) programmes at primary and secondary levels creates a disparity between these children and English-speaking children. Qualitative assessment shows that some non-English-speaking children cannot follow the lessons. Despite the presence of some ESL programmes for primary students implemented by the Education Department, some parents organize their own ESL classes, creating doubts about the quality of the government programme.</p> <p>There are also reports that non-English-speaking children are the target of bullying at school, and those who cannot follow the classes lag behind, have lower grades and ultimately drop out of school.</p>
Health <i>(to be discussed in Chapter 5)</i>	<p>Health services are provided in English, with little help in other languages. Children living in families of non-belongers legally residing in the territory have free access to health.</p>
Child protection <i>(to be discussed in Chapter 6)</i>	<p>Protective services are mostly available in English. Some material is being translated into Spanish, but most (if not all) social workers do not speak a second language.</p> <p>The police response to domestic conflict in non-English-speaking families is limited due to language capabilities. Some of the conflicts are solved within the non-belonger community.</p> <p>There are reports that children whose main language is Spanish are bullied at school and in the society.</p>
Social protection <i>(to be discussed in section 3.2)</i>	<p>There are claims that children from non-belonger families are among those with social and financial problems.</p>

While these five groups represent the most vulnerable child rights holders in Anguilla, it should be noted that they are not mutually exclusive – i.e., children in one group might also belong to a second or third group. For example, a child who lives in a female-headed single-parent household might also live in a family whose mother is

underemployed and from a non-English-speaking country. Also, both nationals and non-nationals share the risk of being in a vulnerable group. Nevertheless, the difference is in the type of support that belongers have. It is the Government's responsibility, as the main duty bearer, to guarantee the realization of the rights

for all children, including creating policies that equalize access to health, education and child protection for all children, independently of any type of differentiation among them.

3.2 SOCIAL POLICY RESPONSE

In order to respond to the demands of the most vulnerable groups, the Government has set up a series of public assistance grants delivered by the Department of Social Development (DSD). Stakeholders, however, suggested that although these try to meet the most immediate demands of vulnerable families and persons, an overarching social policy or social protection policy is lacking. The perception among stakeholders is that benefits are demand driven, i.e., people have to come forward, apply and – if a Board considers the demand valid – obtain assistance.

The most common grants related to children are medical exemptions, medical letters, public assistance, education assistance (including uniforms and books), food vouchers and alternative care (foster care) assistance (Government of Anguilla 2015).

Medical exemption is based on a needs assessment, which is carried out for accountability and transparency. The medical letters are used to authorize private

providers to provide the medication or service needed by the client when these are not available in the public medical service. In 2014, the DSD wrote approximately 66 letters to the Health Authority asking for authorization for 54 persons. Services requested were mainly medication (50 per cent) and consultation (31 per cent). In 2014, there were more males than females requesting letters of authorization (Department of Social Development 2014).

Public assistance is a monthly financial contribution made to qualified persons in need (ibid.). To determine eligibility, a means test is conducted by a social worker and then the application is sent to the Poor Law Board where a final decision is made. Public assistance recipients usually receive EC\$400 monthly or, in the case of a family, EC\$1,000. This assistance may also be given in the form of food vouchers for the same amount or it may be part financial and part vouchers. In 2014, 22 families applied for public assistance and 16 were approved. Twenty-nine persons benefited from the food vouchers distributed by the DSD, 12 persons received vouchers only once while seven received vouchers more than twice. In 2013, 36 families had applied. Individual and family acceptance depends on the availability of financial resources by the DSD.

A persons qualifies to apply for social benefits if he/she:

- (a) is a belonger of Anguilla; or
- (b) is the spouse of a person who is a belonger of Anguilla and is living in the household of the belonger for a period of not less than three years before the date of the application for the benefit and continues to live there; or
- (c) is the guardian of a dependant who is a belonger of Anguilla; and
- (d) is resident in Anguilla for no less than 10 months in any calendar year; and
- (e) is not serving a sentence of imprisonment.

Source: Government of Anguilla 2015.

Educational assistance helped 27 families comprising 35 children in 2014 (an increase of 10 families and 10 children over the previous year). Of these, 19 children received books only, seven received uniforms and nine received books and uniforms. In terms of the alternative care programme, more details are explored in Chapter 6 of this SitAn.

The 2015 Social Protection Act (Government of Anguilla 2015) makes clear that a person is qualified to make an application for social protection benefits if he/she is a believer (see box).⁶ However, the legislation does open the possibility for non-believers to receive temporary relief benefit under exceptional circumstances (ibid.). Among those who received benefits from the DSD (135 individuals in total⁷), 91 were Anguillans and the remainder were non-nationals (Department of Social Development 2014). It was also reported that women used to be the ones looking for help from the DSD, but the number of men searching for help has been increasing since 2012.

As the report from the DSD does not reference data from previous years (with the exception of some numbers from 2012

and 2013), a trend analysis of cases is not possible. Nonetheless, the perspective among several stakeholders is that more individuals and families are looking for assistance now than in previous years. It is important to mention that the number of persons receiving assistance from the DSD does not represent the number that look for assistance, since cases have to be approved. There is still a doubt whether the perception of more families searching for benefits represents (i) an increase of vulnerable families due to the harsh economic situation; (ii) an increase in new immigrant families; or (iii) an increase of awareness of the benefits among the possible rights-holders.

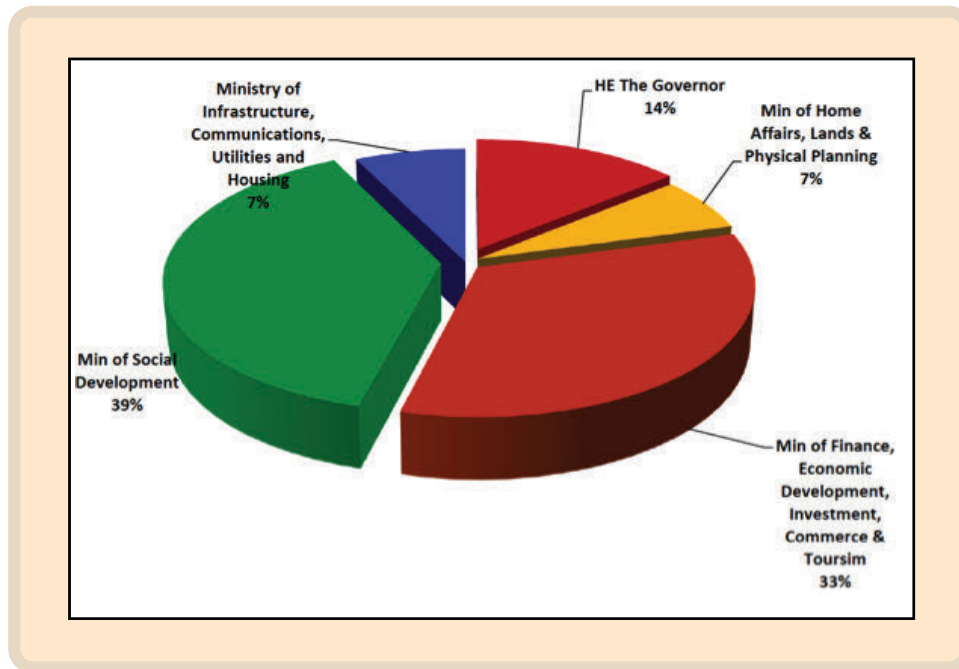
According to the interviews, financial constraint is the main reason why the public assistance programme cannot be extended to non-nationals or to other national families. For 2014, 3 per cent of the overall government's budget was allocated to social services (Government of Anguilla 2014b).⁸ In considering the expenditure by ministries, the Ministry of Health and Social Development is the one with highest expenditure, representing 39 per cent of the overall budget (Figure 8).

⁶ As of December 2015, the Act that extends the benefit for non-believers had not been implemented.

⁷ Some might have received more than one benefit.

⁸ For 2014, 46 per cent of the overall budget was allocated to pay government salaries.

Figure 8: Expenditure by ministries, 2014



Source: Government of Anguilla 2014b.

However, it is important to take into account that this Ministry contains various departments and areas of expertise. The DSD (responsible for the grants to alleviate vulnerabilities) received EC\$4.7 million in 2014, about 7 per cent of the Ministry's

overall budget that year (Table 14). Most of the DSD funds (73 per cent) in 2014 were spent on public assistance grants, 24 per cent on personal emoluments (salaries) and 3 per cent on goods and services (Department of Social Development 2014).

Table 14: Budget estimates (EC\$) for the Ministry of Health and Social Development, 2014

	2014 Budget estimates EC\$	% of Budget
Ministry of Social Services	25,636,633	36.2
Education	25,414,806	35.9
HM Prison	4,952,101	7.0
Health Protection	4,782,519	6.8
Dept. of Social Development	4,697,431	6.6
Probation Services	2,163,502	3.1
Dept. of Sports	1,207,255	1.7
Library Services	1,076,484	1.5
Dept. of Youth & Culture	916,285	1.3
Ministry total	70,847,016	100

Source: Government of Anguilla 2014b.

According to the 2015 Budget Speech, funds for the Ministry of Health and Social Development for 2015 were EC\$73.98 million, representing an increase of 4.4

per cent over the 2014 allocation (Ministry of Finance, Economic Development and Tourism 2014).



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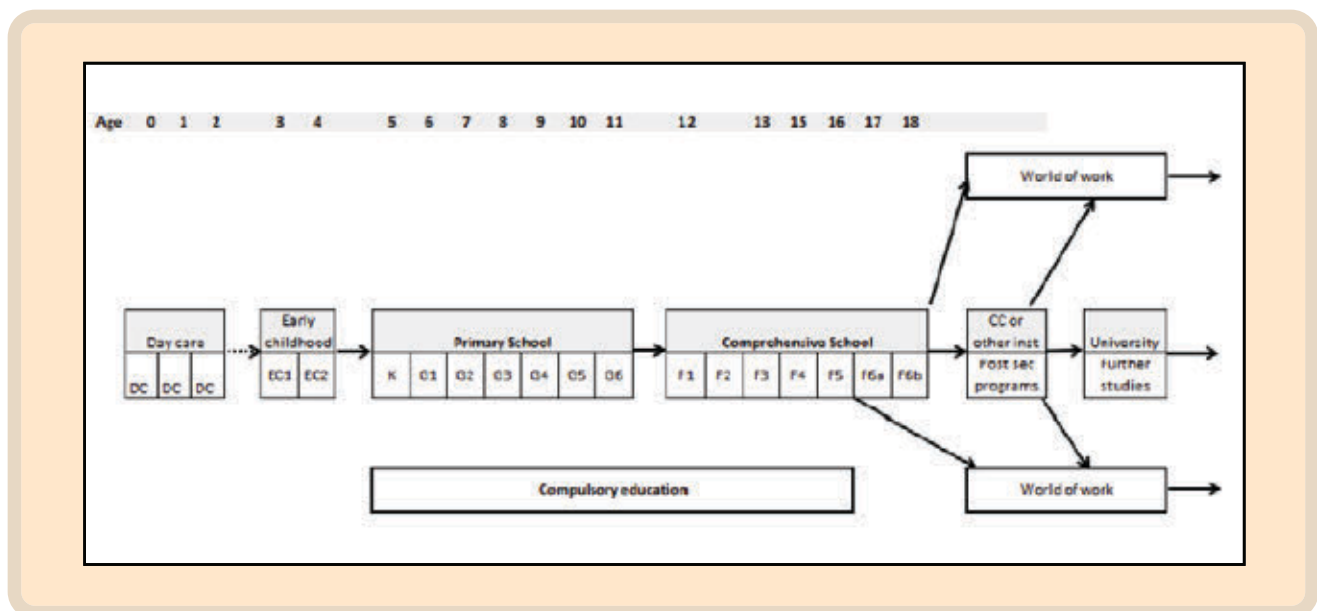
4. THE RIGHT TO EDUCATION

Children's education should develop each child's personality, talents and abilities to the fullest. It should encourage children to respect human rights and their own and other cultures. It should also help them learn to live peacefully, protect the environment and respect other people. Children have a particular responsibility to respect the rights of their parents, and education should aim to develop respect for the values and culture of their parents (CRC, article 29).

According to the Education Act of 2012, education in Anguilla is compulsory for children between the ages of 5 and 17 (Government of the United Kingdom 2014) and tuition is free in all public schools. Nevertheless, families still have to pay for books, uniforms and lunch, among other small fees. Discrimination is forbidden on account of race, place of origin, political opinions, colour, creed, sex and mental or physical disability. The 2012 Act also abolished corporal punishment in schools.

Education is divided into five levels: (i) day-care centres or playschool (younger than 3 years of age); (ii) early childhood, pre-primary or preschool (3 and 4 years old); (iii) primary school; (iv) secondary (comprehensive school); and (v) post-secondary education (Figure 9).

Figure 9: Anguilla's educational system



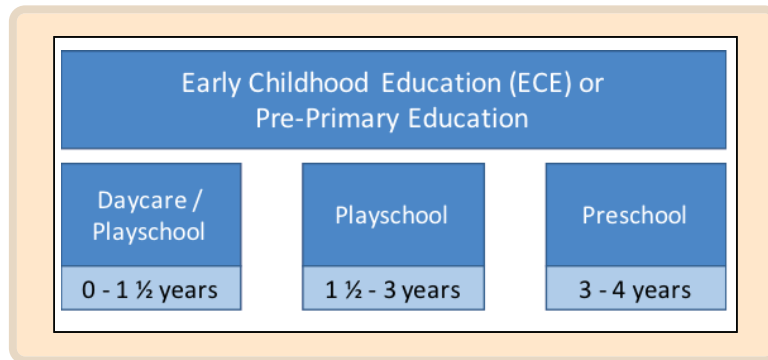
Source: Education Department 2015.

4.1 EARLY CHILDHOOD EDUCATION

In Anguilla, early childhood education (ECE) – also called pre-primary education – encompasses day care (children younger than 1 ½ years old), playschool (children

between 1 ½ and 3 years old) and preschool for children between 3 and 4 years of age (Figure 10). Overall responsibility for the coordination and development of the early childhood sector rests within the Department of Social Development (DSD).

Figure 10: ECE arrangements



In 2012, 37 institutions were providing ECE services. All of these were handled by the private sector, and the majority of

preschools were affiliated with a religious denomination (UNICEF Office for Barbados and the Eastern Caribbean 2012).

Table 15: Number and type of care for ECE services, 2012

Type of ECE setting	Number of settings provided in the private sector
Preschool	11
Special needs centre	1
Playschool	3
Day care	22
TOTAL	37

Source: UNICEF Office for Barbados and the Eastern Caribbean 2012.

The Government does not record how many children between the ages of 0 and 3 years old are receiving services in day-care centres and playschools. In 2012, 445 boys and girls ages 3 and 4 were enrolled in preschool settings. According to the OECS, the preschool gross enrolment rate⁹ (GER) for the 2010/2011 school year was 87 per cent (Organisation of Eastern Caribbean States 2012).

The SitAn identified three issues related to ECE in Anguilla. First, all the schools and institutions that provide services for children younger than 5 years of age are private, meaning that parents have to pay for their children to receive the services. This could result in some children not being enrolled because their families cannot afford to pay for them – average fees for preschools start at EC\$525 per term, around US\$194 (Education Department 2015).¹⁰

Second, there is a lack of monitoring of those institutions that handle children younger than 3 years old, creating a gap in the system. At the time of the field visit (mid-2015), the Government did not know how many children were in day-care centres and playschools and consequently could not monitor their quality.

Third, according to the informants, despite the fact that all preschools follow a national curriculum, monitoring and assuring the quality of their services was also an issue. On the one hand, the teacher-pupil ratio for preschools in 2012 was 1:10, low in comparison to the established target of 1:15; on the other hand, among the 42 teachers in the preschools in 2012/13, only 40 per cent (17 teachers) were trained. Three schools had no trained teachers among their staff (Education Department 2015).

In 2012, the UNICEF Office for Barbados and the Eastern Caribbean sponsored a survey to assess the quality of ECE settings based on seven criteria: space and furnishings; personal care routines; language-reasoning; activities; interaction; programme structure; and parents and staff. Of the 14 preschools that were part of the survey, 14 per cent were considered inadequate, 72 per cent achieved the minimum requirements and only 14 per cent were considered good (UNICEF Office for Barbados and the Eastern Caribbean 2012). None of the schools were considered excellent according to the methodology that was used (Table 16).

⁹ Total enrolment in a specific level of education, regardless of age, expressed as a percentage of the eligible official school age population (from census data) corresponding to the same level of education in a given school year.

¹⁰ Besides charging fees, preschools also receive financial aid from the Government through (i) a stipend of EC\$650 per child each year and (ii) subsidizing of teachers' salaries up to EC\$450 per month (Anguilla Department of Social Development 2015).

Table 16: Rating of 14 preschools, percentages, 2012

Item surveyed:	Inadequate	Minimal	Good	Excellent
Space and furnishings	28	36	36	0
Personal care routines	0	50	43	7
Language-reasoning	43	28.5	28.5	0
Activities	43	43	14	0
Interaction	0	36	64	0
Programme structure	50	28.5	21.5	0
Parents and staff	7	93	0	0
Overall percentage scores on all items:	14	72	14	0

Source: UNICEF Office for Barbados and the Eastern Caribbean 2012.

The survey also uses the same standards to measure quality in day-care centres and playschools. The results were even more worrisome than for preschools: 56 per cent of the day-care centres/playschools were

considered to be inadequate and 44 per cent achieved the minimum standards. No institution was considered to be either good or excellent (Table 17).

Table 17: Rating of 23 day-care centres/playschools, percentages, 2012

Item surveyed:	Inadequate	Minimal	Good	Excellent
Space and furnishings	39	61	9	0
Personal care routines	17	61	22	0
Listening and talking	39	48	13	0
Activities	100	0	0	0
Interaction	17	44	39	0
Programme structure	48	48	4	0
Parents and staff	83	13	4	0
Overall percentage scores on all items:	56	44	0	0

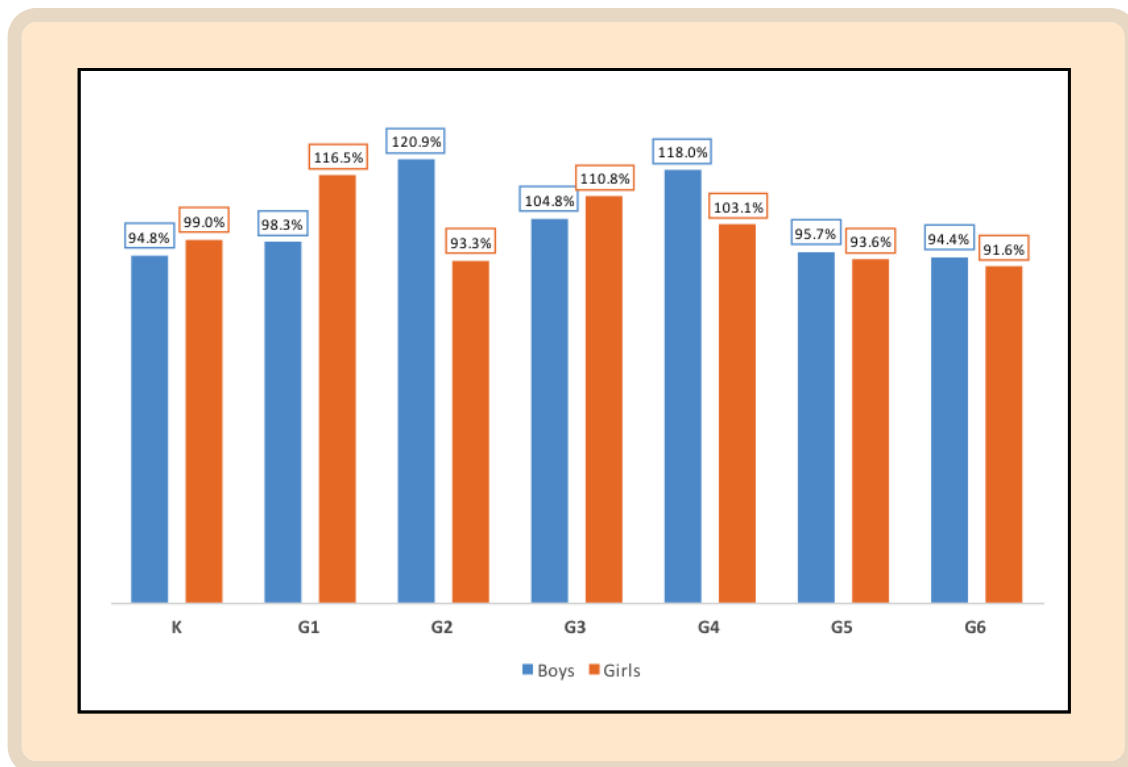
Source: UNICEF Office for Barbados and the Eastern Caribbean 2012.

4.2 PRIMARY EDUCATION

Primary education covers children aged 5 to 11. In 2015 there were six government primary schools in Anguilla hosting 1,571 pupils. The gross enrolment rate (GER) in 2012 was 103.4 per cent¹¹ (Education Department 2015), indicating that there are more children enrolled in primary education than those estimated to be between the ages of 5 and 11. Possible reasons were gaps in the estimates of the population on

this age group, in combination with younger and older children who were enrolled in primary education. GERs in specific grades are shown in Figure 4. High numbers in some classes might indicate repetition or the fact that students might start their academic life at older ages than that recommended. The latest number for the net enrolment rate¹² (NER) in primary – from the OECS Statistical Digest for 2010/2011 – was 92 per cent (Organisation of Eastern Caribbean States 2012).

Figure 11: Gross enrolment rate, primary education, 2012



Source: Education Department 2015.

While access to primary education is important, guaranteeing quality education for all children is the prerequisite for achieving equity and for the full development of individuals and society (UNESCO

2005). Different measures of quality exist worldwide, and the Government of Anguilla monitors some of them. One such measure is the pupil-teacher ratio. In theory, the smaller the number of children per teacher,

¹¹ OECS data for the 2010/2011 school year for Anguilla had GER = 94.9 per cent.

¹² Enrolment of the official age group for a given level of education expressed as a percentage of the corresponding population (from census data).

the more attention the teacher can provide to the students, increasing their chances of learning. On average, this ratio was 18.4 students per teacher in the 2012 academic year. Another measure is the number of trained teachers teaching in the system. According to the Education Department, there were 77 primary school teachers in 2012. Of these, 40, or 52 per cent, were considered trained to be teaching at primary level (Education Department 2015).

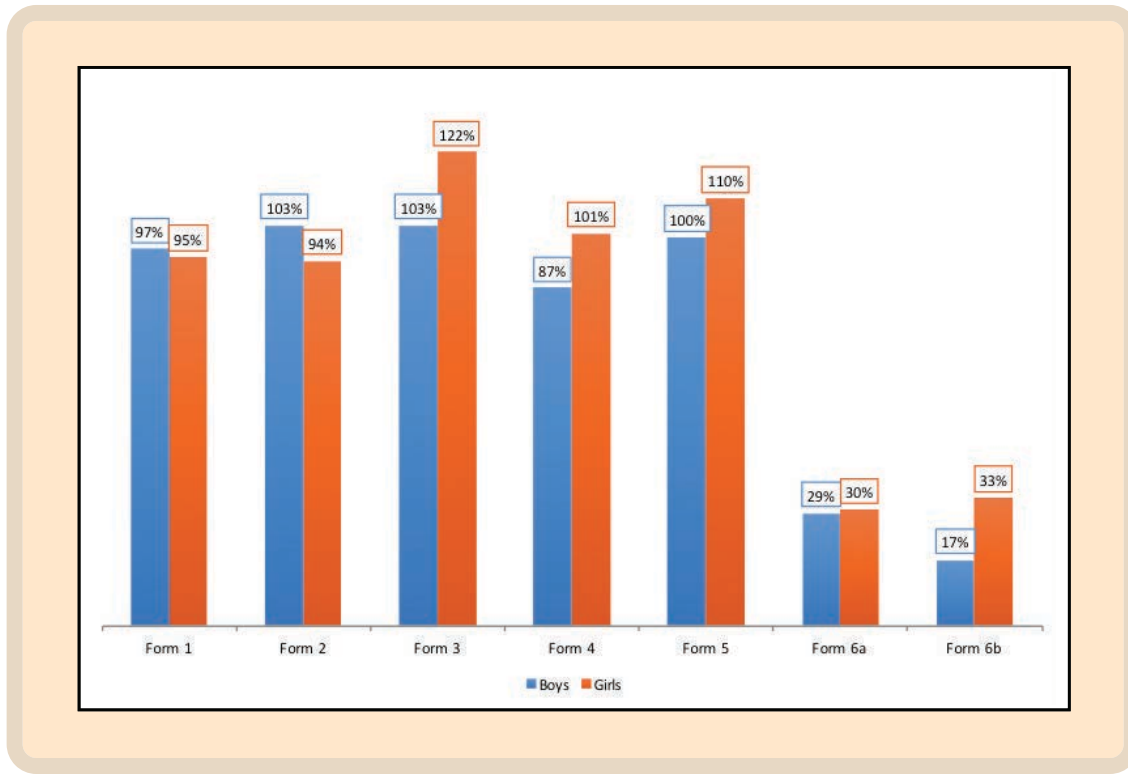
Despite the fact that primary education is free in Anguilla, the hidden costs could be considered as bottlenecks to the right of education for many children, especially those coming from the vulnerable groups identified in section 3.1 above. For instance, focus groups and interviews that supported this SitAn mentioned that children going to school without breakfast and lunch was becoming increasingly common. Two factors seemed to account for this: (i) families did not have enough money to buy food or to give to children to buy lunch; and (ii) there is no government-subsidized lunch programme to provide meals to the most vulnerable children (although children identified by schools as being in need of such support are provided with meals via vendors, which are paid for by Government). School feeding programmes supervised by schools are an equitable way to guarantee that children eat quality food. In addition, letting children of all ages leave school to buy their lunches is not time efficient and creates an unnecessary risk for their security.

Informants also identified issues connected to the cost and availability of books for children at primary level. As parents have to replace the books every year, the cost can become a burden. Stakeholders complained that books cannot be reutilized, creating an additional expense that interferes with the family budget. In fact, 2009 data show that 1 in every 4 students in primary school did not have textbooks since their families could not afford them (Government of Anguilla and Kairi Consultants Limited 2009).

4.3 SECONDARY EDUCATION

There is one secondary school in Anguilla split into two neighbouring campuses. Overall enrolments in the secondary sector rose at an average annual rate of about 2.2 per cent between 2005 and 2012. On average, the GER for secondary education was 80 per cent in 2012, with some variations depending on the grade and on the student's gender (Education Department 2015). While boys are the majority of students in the two initial years of secondary education, this situation is reversed in form 3 (Figure 12). Rates above 100 per cent might in this case also represent a problem with the population estimate for the age groups or that students are older than expected for the specific grade. The net enrolment rate for secondary education is not available.

Figure 12: Secondary school enrolment rate by form, 2012

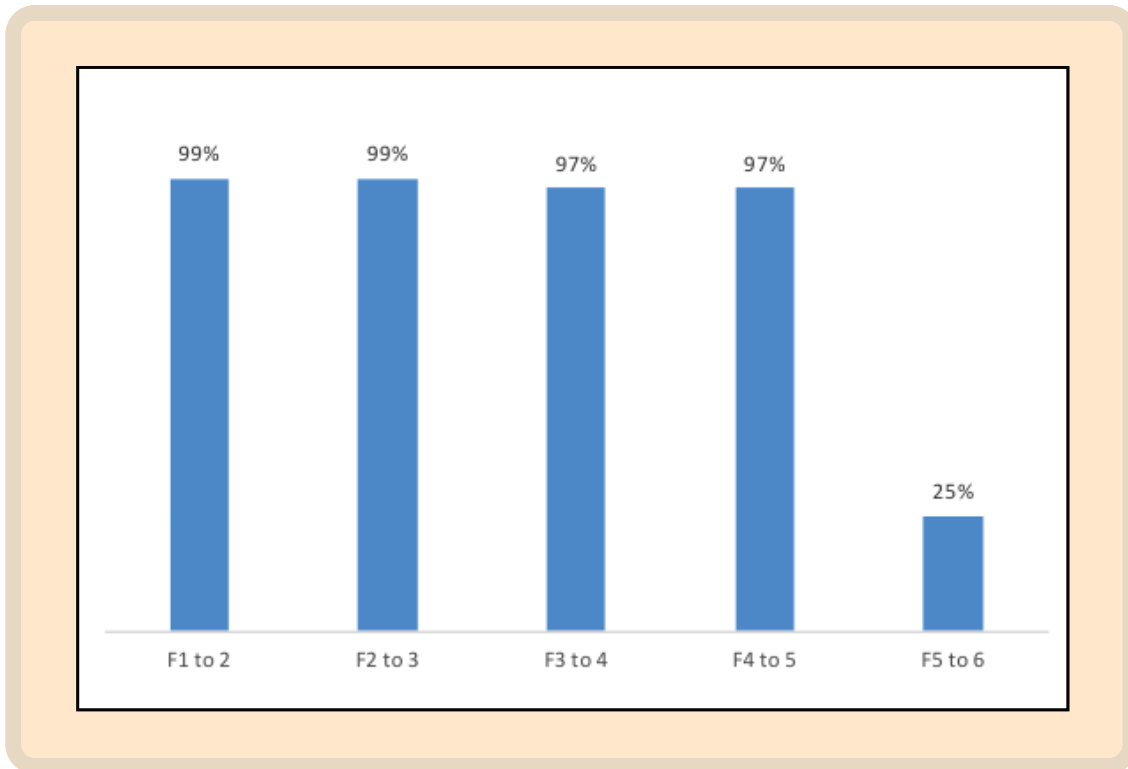


Source: Education Department 2015.

The intra-grade transition rate for secondary education is quite high, with the exception the transition between forms 5 and 6 (Figure 13). The main reason is that form 6 is not mandatory but is for those students pursuing

advanced level studies. In terms of gender, with the exception of form 4 to form 5, girls have been transitioning at higher rates than boys.

Figure 13: Secondary school intra-grade transition, 2012



Source: Education Department 2015.

High enrolment and transition rates should reflect high retention and low drop-out rates in secondary education. Drop-out rates were not calculated by the Education Department, and two contradictory views related to this topic were identified during the preparation of this SitAn: (i) government officials and some stakeholders stated that dropouts were almost inexistent and should not be seen as a major concern; and (ii) the students who participated in focus groups said dropouts at secondary school were frequent. Unfortunately, lack of data means it is not possible to verify whether dropouts are a problem in the territory or not.

Analysis was performed by the Education Department in 2009, however, which showed that dropouts have some connection to the curriculum being implemented at secondary level (Ministry of Education 2009). Students in higher classes (after form 3) tended to drop out of school since

they did not consider it a “fun environment” anymore. The study also identified that students and parents complained about the “excessive number of subjects” that were taught at school. In reality, both complaints have a relationship with how parents and students perceive the utility of what is being taught in terms of what students might need in their future professions. According to interviewees, this gap has been discussed in the context of how to better adjust the academic and technical curricula.

Another challenge identified is the availability of support and staff services for the students. One frequent observation made by the parents who participated in the focus group was that the school system targets the average student, leaving those who academically fall behind and those who are more advanced without proper support. The perception among stakeholders was that schools had some support for those

who could not follow the class content, but the system did not know how to stimulate those who could develop their potential further.

Students and some parents mentioned that implicit financial barriers also influence the adolescent and his/her family's decision to stay in or leave formal education due to costs associated with books, lunches, uniforms and transport. Adolescents mentioned that they all knew someone who was not going to school due to lack of money for food or transport. As mentioned above, the general perception was that the number of children going to school without having had breakfast and/or without lunch or money to buy food was on the rise. Like the parents of primary students, parents of secondary students complained that textbooks changed from one year to the next, meaning younger siblings could not use the same books and forcing them to spend more resources. For some families, the DSD covers these costs – as discussed in Chapter 3. Immigrant families who do not receive social benefits may have to ask for help from their communities, church or other organizations.

Language seems to be one of the main issues pushing students to drop out of school. While some initiatives for English as second language (ESL) exist in some primary schools, sponsored by the Government or parents, secondary school students whose first language is not English have no institutional support. According to several informants, some adolescents abandoned school due to frustration while others became violent and used aggression as a channel to fuel their disappointment with the educational system.

4.4 CHILD WELL-BEING, VIOLENCE AT SCHOOL AND PARTICIPATION

The infrastructure at the secondary school was considered by all stakeholders to be deficient and not allowing students to feel comfortable. Students and parents reported

the campus that accommodates forms 1 and 2 to be overcrowded and said bathrooms, classrooms and common areas needed to be cleaner and better maintained. As described by the parents, the situation has not changed since they were students on the same campus. While some see the students as guilty of making the environment dirty and damaging the school's infrastructure, others suggested there was little incentive to keep the environment neat since the school does not assume its responsibility.

Violence at school is seen as a problem by all stakeholders, to the point where the new education policy being discussed acknowledges it as an issue. It has been reported that the behaviour of a minority of children at primary and secondary levels is very poor and potentially compromises the sort of environment that is needed to allow effective teaching and learning in the classroom (Education Department 2015).

Focus groups and interviews showed that students did not feel safe at school. According to the pupils, fights happen all the time and cases of violence among students – and against teachers – were commonly reported. There were also reports of guns, knives and machetes being found inside schools and sometimes used in the fights. In the 2009 Global school-based student health survey (GSHS), 28 per cent of the Anguillan students (34 per cent of boys and 21 per cent of girls) mentioned that they had been physically attacked at least once at school in the previous 12 months (WHO and CDC 2014). Being in fights was more common for boys than girls, with 41 per cent of the interviewed boys saying they had been in physical fights compared to 25 per cent of the girls.

One form of violence that is becoming more frequent in schools is bullying. According to a survey commissioned by UNICEF, around seven out of 10 students (68 per cent) felt that bullying was a problem at their school, and the two locations mentioned most for the occurrence of bullying were the classroom and the playground (UNICEF

Office for the Eastern Caribbean Area 2015). One in four students mentioned that they had been bullied at least once in the past 30 days. According to the interviews and focus groups, cyber bullying is also happening in different forms.

Informants suggested that violence at schools is mainly connected to social and cultural norms that frame the situation of children. Four causes were pointed to as directly influencing the situation: (i) lack of parental support at home; (ii) the influence of other cultures; (iii) frustration with the school curriculum in comparison to students' perspective of their own future; and (iv) frustration of those students whose language is not English. The last two factors were discussed earlier in this section.

As mentioned in Chapter 3, children living in broken families, in situations where parents were constantly absent from home or where only one parent was present to raise the children were among the vulnerable groups identified. Children in these families are most at risk of suffering violence at school and/or being involved in school fights. As described by the interviewees, the lack of a role model in these households could lead young boys and girls to attach themselves to the wrong people, in search of 'quick pleasures', instead of investing in their future. At the same time, schools did not seem to be prepared to provide counselling or special support for those children at risk of becoming violent. Students mentioned that when they needed psychological support, they did not search for help at school; instead, some talk to their parents but the majority prefer to talk with friends.

The influence of other cultures is represented by the gang philosophy that seems to attract the attention of some adolescents at school. When asked about possible motives that fuel the fights at

school, adolescents talk about area-based gangs that fight at school in order to determine their 'territory'. There was a general perception that the gang culture portrayed by foreign movies and music has been influencing children's behaviour. Many adults who were interviewed mentioned that children were more exposed to different perspectives now than they were in the past, and that lack of guidance might lead to wrong choices being made.

Interviews and focus groups also connected alcohol and drugs consumption with violence at school. Students confirmed that the use of alcohol and drugs among adolescents was quite common, and the fact that some were drunk or on drugs increased the chances of fighting during school time. According to the 2009 Global school-based student health survey, three out of four Anguillian students over 12 years of age had tried alcohol, with very little difference between boys and girls: 74.4 per cent of boys and 71 per cent of girls (WHO and CDC 2014). Students and parents in the focus groups confirmed the survey result. Alcohol consumption is part of the culture in Anguilla and, according to the adolescents, parents and peer pressure were the most frequent reasons why children tried alcohol at early ages.

In terms of participation (CRC, article 12 – Right to be heard and participate), there is no legislation in place that recognizes the right to participate and the right to be heard in all matters that may affect children's rights, either at school or in society in general (Morlachetti 2015). Students who participated in the focus groups mentioned that their voices were hardly heard in topics related to them, either at school or at home.¹³ In their perception, part of the problem is the adult view that children and adolescents are not old enough or knowledgeable enough to properly participate in the decision-making process.

13 According to the Government, student councils are being re-established at schools. By December 2015, three schools already had one in place.

4.5 EDUCATION FOR CHILDREN WITH SPECIAL NEEDS

At the primary level, those children with the most severe communication problems and mobility disabilities are catered for by the Developing a Vision for Education (DOVE) unit based at the Alwyn Alison Richardson Primary School. There are also units at the Orealia Kelly Primary School for children with severe learning difficulties and at the Adrian T Hazell for children with moderate learning difficulties as well as one unit at The Valley for boys and girls with emotional issues.

At the secondary level, two programmes provide education for children with special needs: the Workshop Initiative for Support in Education (WISE) and the Pupil Referral Unit (PRU) (Ministry of Education 2009). Despite being considered as special programmes, these two initiatives do not necessarily focus on children with learning or physical disabilities. The WISE programme was established for pupils who are more suited to practical work. In 2012, the programme had 30 students. Meanwhile, the PRU was created to handle adolescents who manifest disruptive behaviour. In 2012, the Unit had 12 students (Education Department 2015).

The large influx of migrants whose primary language is not English has been creating a new demand for specialized services in the educational system. These children are largely from the growing Spanish community

and comprise up to 25 per cent of the enrolment in some schools (Education Department 2015). Parents participating in a focus group all recognized that an ESL programme should be part of the curriculum at both primary and secondary levels. In addition, they acknowledged that some of the disruptive behaviour of some children at school was linked to their frustration at not understanding English and not being able to communicate with peers and teachers.

In sum, despite the existence of some support for children with special needs, especially at primary level, there are still problems with availability for all children that might need the services. The draft document for the new education policy mentions that the existing units have small capacity, and it was not possible to clearly determine exactly how many children would require support each year since there had not been any specific assessment of children with special needs. Documents from the Education Department do not mention how many children are using the special programmes at primary level, nor the type of support that they currently need and will need in the future.

4.6 SUMMARY OF DETERMINANTS IN EDUCATION

Table 18 summarizes the problems found in education in Anguilla, as discussed in this chapter, and their relation to the main determinants used as the framework of analysis.

Table 18: Summary of determinant analysis for education

	Determinant	Summary of determinants in education
Enabling environment	Social norms	Violence at school is a constant concern. School fights are partly inspired by gang-related images in movies, games and music that some students act out in the school environment. Violence is also connected to the lack of mentoring at home and the lack of a father figure to help guide children's behaviour. It pushes some children to move to other schools (when parents can afford that), increases the chances of dropping out and creates an environment of insecurity among children and teachers.
	Legislation/policy	Legislation does not guarantee the quality of ECE services and does not make ECE mandatory. The secondary curriculum is not seen as exciting by many boys, creating incentives for them to drop out of school.
	Budget/expenditure	While there are no public ECE services, the Government contributes financially to all preschools depending on enrolment, contributes to the salaries of all pre-school teachers and pays 70 per cent of the cost of training for preschool teachers pursuing associate degrees. Lack of budgetary resources does not allow for school feeding programmes for all children, which could increase the quality of learning as well as school retention. Budgetary provision is made for providing meals for some students who are in need. There are no budgetary allocations for reforms, expansion or construction of new spaces for the only public secondary school.
	Management/coordination	No specific problems in coordination of the educational sector were mentioned. The Government does not calculate enrolment rates as well as other important rates that could help in analysing the efficiency of the system (e.g., measuring out-of-school children).

	Determinant	Summary of determinants in education
Supply	Availability of essential commodities/inputs	<p>There are no public (free of charge) ECE services.</p> <p>School infrastructure at secondary school is poor.</p> <p>There is no government school feeding programme.</p>
	Access to adequately staffed services, facilities and information	<p>A lack of male secondary level school advisors and teachers was identified as a problem as it does not incentivize male students to stay in school.</p> <p>The lack of ESL programmes influences how non-English-speaking students learn and their propensity to finish primary and secondary education.</p> <p>Due to the lack of information on the number of students who need special education, it is not known whether all children who need this actually have it.</p>
Demand	Financial access	<p>There are no public ECE services. The cost of access to the service is prohibitive for some families.</p> <p>For primary and secondary education, the fact that families have to provide for books, uniforms and lunch creates financial pressures that mainly impact those vulnerable populations identified in Chapter 3 of this SitAn.</p> <p>For secondary education, besides the hidden cost associated with going to school, there are financial incentives for young boys to leave school and enter the labour market. These incentives are connected to short-term gains instead of long-term investment in education.</p>
	Social and cultural practices and beliefs	<p>Lack of parenting at home, especially for male secondary school students, was seen as one factor that influences them to leave school without finishing their formal education.</p> <p>Adolescents are adopting a 'gang related image' that is influencing their behaviour at school. Alcohol and drug consumption among older students at secondary level is common.</p>
	Timing and continuity of use	<p>There were no bottlenecks associated with this category.</p>

	Determinant	Summary of determinants in education
Quality	Quality of care	<p>There is no quality control in ECE institutions for those children aged between 0 and 3 years. The Government has in place some control mechanisms for the group between 3 and 5 years.</p> <p>For primary schools, some measures of quality of education are in place, but it is not known how the measures to monitor the quality of education are used to make actual changes in the system.</p> <p>Standardized results in secondary education examinations show that the quality of services needs to be improved.</p>





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5. THE RIGHT TO HEALTH

Children have the right to live. Governments should ensure that children survive and develop healthily (CRC, article 6).

Children have the right to good quality health care – the best health care possible – to safe drinking water, nutritious food, a clean and safe environment, and information to help them stay healthy (CRC, article 24)

Mothers should have appropriate pre-natal and post-natal health care (CRC, article 24)

While Anguilla has some administrative data related to children's health, recent rates and trend analysis are not available. The territory has been very successful in addressing Millennium Development Goal (MDG) 5 (improve maternal health). The last registered maternal death happened in 2010. Most pregnant women (46.7 per cent) have their first prenatal visit in the first trimester, 32 per cent in the second trimester and around 21 per cent after 28 weeks (PAHO 2012). Around 82 per cent of the first prenatal visits take place in public clinics/hospital (Health Authority of Anguilla 2015). According to the Pan American Health Organization (ibid.), skilled health workers are responsible for pre- and postnatal care, which is available for all pregnant women.

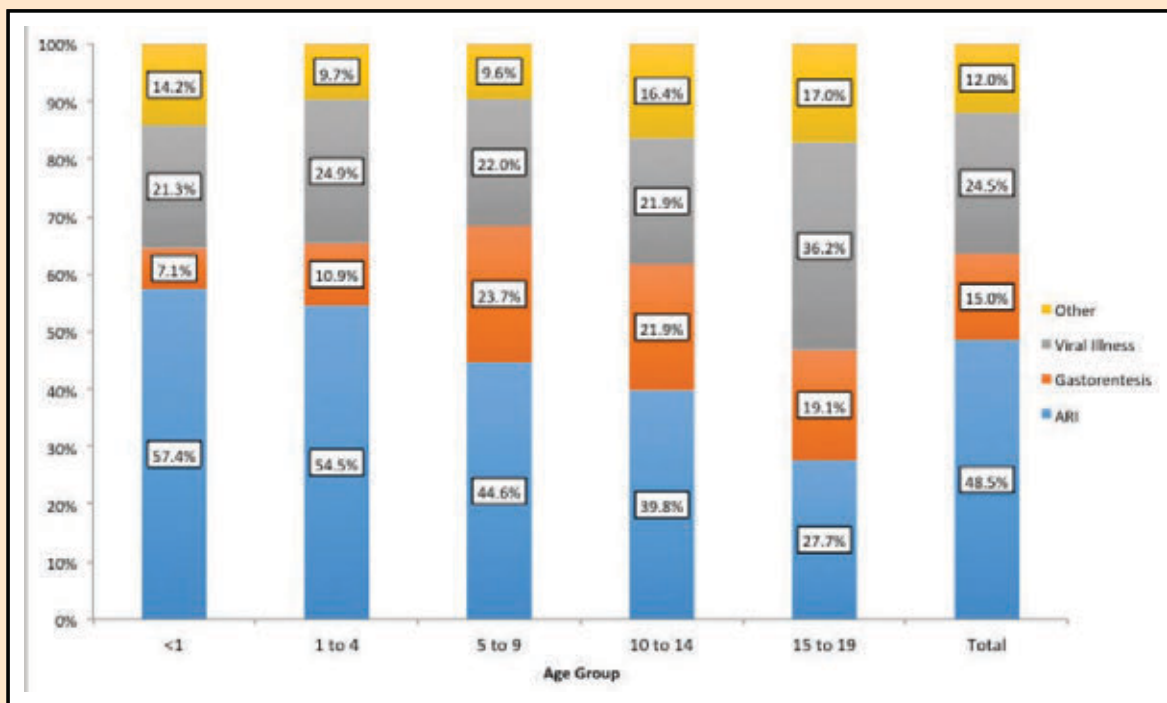
Caesarean section accounted for 46.7 per cent of all deliveries of live births in 2014 (Health Authority of Anguilla 2015), an increase when compared to 42.9 per cent in 2007 (PAHO 2012). Reasons for this high level of C-sections should be further explored.

In 2014, 150 babies were born in Anguilla and two perinatal deaths¹⁴ were registered (neonatal mortality rate of 13.3 per 1,000 live births). In the same year, the territory also registered three other children dying between the ages of 1 and 5 years. In sum, five children under the age of 5 died in 2014 (Health Authority of Anguilla 2015). The causes were registered as conditions originated in the perinatal period for newborn deaths and "external causes/other diseases" for the older children.

The three main causes for children being seen at hospital are acute respiratory infections, viral illness and gastroenteritis, with some variation depending on the child's age (Figure 14). According to health specialists in the territory, these causes are 'normally' associated with common colds or viruses and do not characterize any major health concern.

¹⁴ Child death between 28 weeks of gestation and less than seven days of life.

Figure 14: Main causes for children being seen at clinics/hospital, 2014

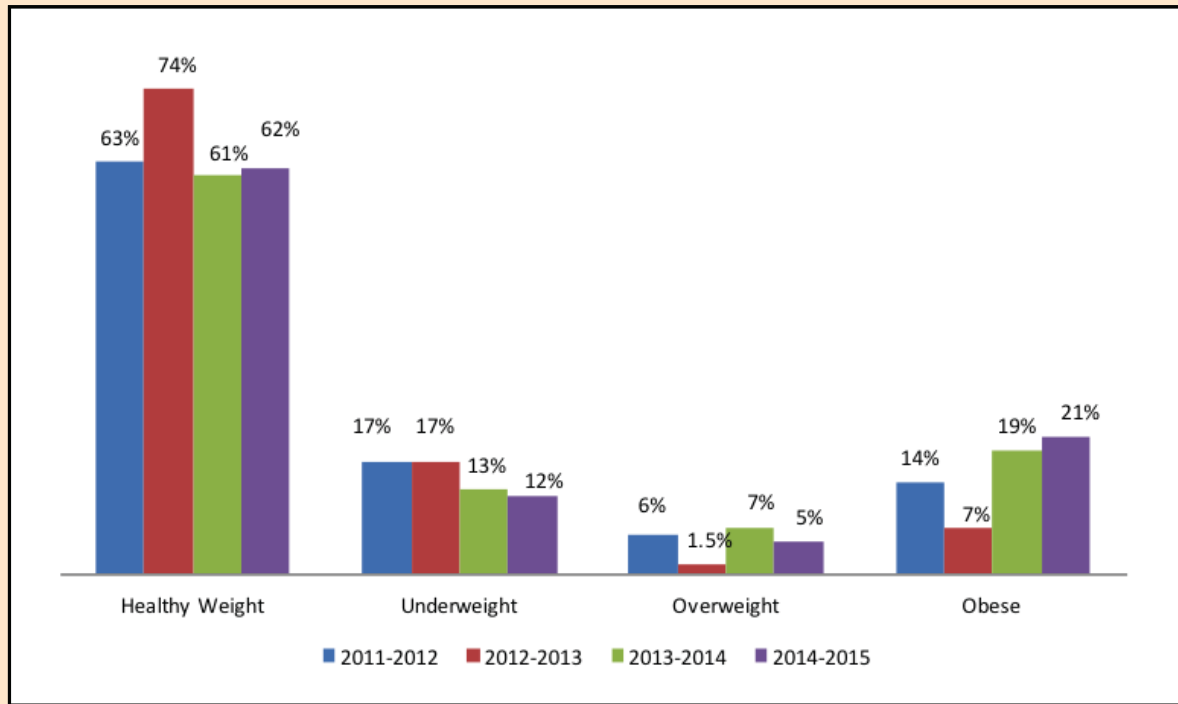


Source: Health Authority of Anguilla 2015.

Childhood obesity is a major concern. Following the same tendency as other countries and territories in the region, cases of overweight and obesity among children of

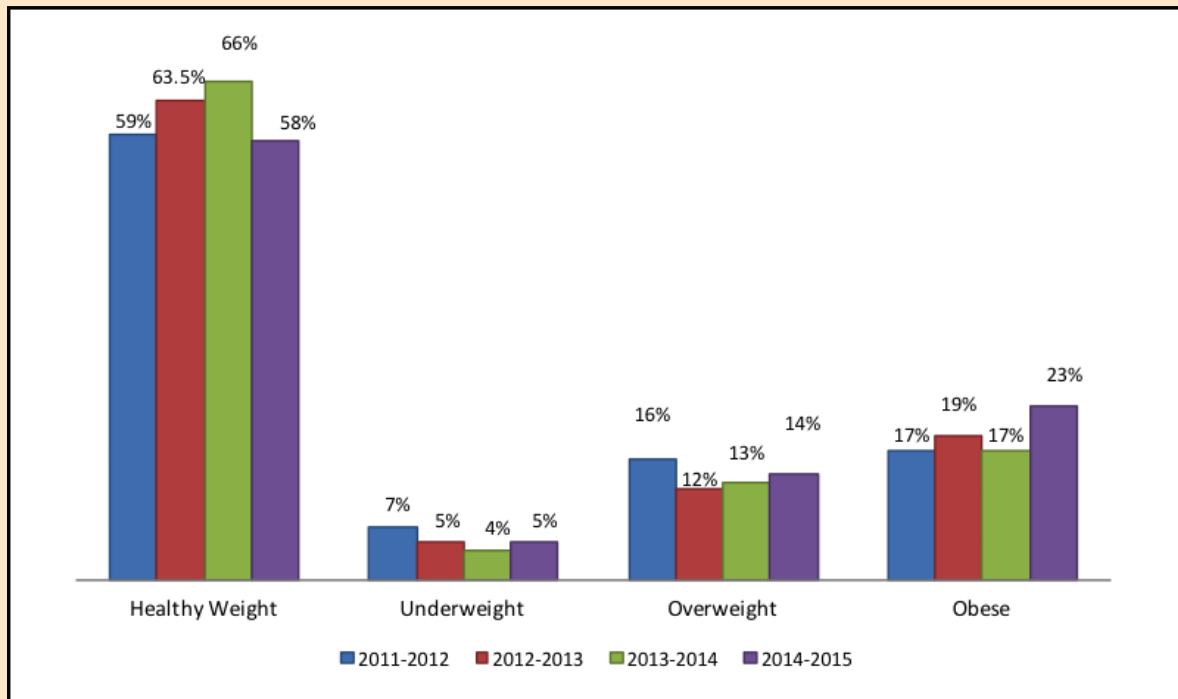
different ages are on the rise, independent of which grade they are in (Figures 15, 16 and 17).

Figure 15: Body mass index (BMI) report on kindergarten students, 2011–2015



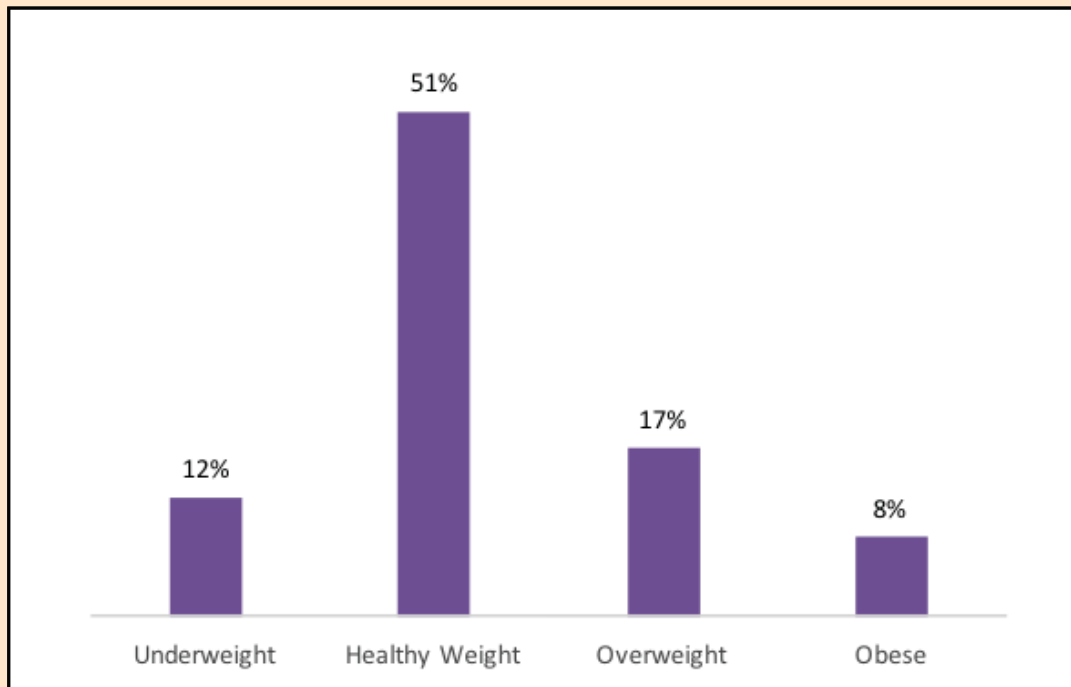
Source: Ruan and Hodge 2015.

Figure 16: Body mass index (BMI) report on grade 6 students, 2011–2015



Source: Ruan and Hodge 2015.

Figure 17: Body mass index (BMI) report on form 5 students, 2014–2015



Source: Ruan and Hodge 2015.

Several interviewees expressed concern about child obesity and how the quality of food consumed by children at home and school is impacting on their weight and, consequently, on their health. The topic is part of the discussion of the new education strategic plan that was in draft in June 2015.

As mentioned, the secondary school does not have a cafeteria where the quality of the food can be controlled, so students have access to food outside that is not necessarily the most nutritious. In addition, in 2002, 41 per cent of youth reported not eating vegetables but consuming high-fat and high-calorie food items (Primary Health Care Department 2002). The same situation was detected in 2009, when 71 per cent of Anguillan students who answered the 2009 Global school-based student health survey

(GSHS) mentioned they ate at a fast food restaurant at least once a week and 84 per cent said they drank carbonated soft drinks at least once a day (WHO and CDC 2014). Focus groups and interviews in 2015 also detected some cultural practices that determine how young people eat. There is a preference for fried food and 'American style' fast food over nutritional meals. As mentioned before, food prices also influence the food habits of the families. As most food products are imported and expensive for the average person, families have to cope by buying cheaper products that are not necessarily the most nutritious.

Between 1988 and 2011, 42 persons¹⁵ were diagnosed with HIV (23 male and 19 female) (Ministry of Health 2011), heterosexual sex being the main mode of

¹⁵ According to the Ministry of Health (2011), 17 had died, 20 were alive and the status of five was not known.

transmission (Government of the United Kingdom 2014). In 2014, 905 HIV tests were conducted, with one positive case. About 30 per cent of the tests (270) were carried out during the prenatal care period (Health Authority of Anguilla 2015). The five public clinics offer antenatal care, including HIV surveillance testing (Ministry of Health 2011). Antiretroviral treatment is provided free in cases where a person is unable to afford treatment. Anguilla has had no case of mother-to-child transmission of HIV over the past 10 years.

The 2011 surveillance report offers some important reflections on the situation of HIV in the territory, especially in a situation where the incidence of HIV in the Caribbean is high but data on the smaller islands are not available. It suggests there may be under-reporting in Anguilla as, due to stigma and discrimination (coupled with the cultural taboo associated with the men having sex with men), residents may seek care abroad or go to private doctors who do not report cases (Ministry of Health 2011).

In general, the Government heavily subsidizes hospital services, but users are still charged a fee. The Health Services Fees and Charges Regulations (Revised Regulations of Anguilla) regulate fees and accessibility to medical services. There are 3 different fee categories: (i) uninsured resident,¹⁶ (ii) insured resident and (iii) regional residents¹⁷/ all others.

Resident children under 16 years of age are exempt from payment for dental services and pay 50 per cent of fees and charges for other health services. In addition, a resident who is under the age of 16 years, or who is a student at a school in Anguilla, who receives health services at the Princess Alexandra Hospital during school hours and/or who is accompanied to the hospital by a teacher, is exempt from paying fees for health services, hospital out-patient charges and some laboratory tests (Morlachetti 2015).

According to the informants, fees affect whether non-nationals attend prenatal and postnatal care as well as their decision to take their children to the hospital or health clinics for treatment, especially if they are uninsured. Also according to the informants, another factor that influences some families in not going to hospitals and health clinics is the lack of Spanish speakers among the staff.

5.1 SUMMARY OF DETERMINANTS IN HEALTH

Table 19 below summarizes the main determinants related to health in Anguilla. While different stakeholders think the system and the services could still have better quality, they also recognize that within the capacity of the island, services and treatment achieve good standards.

¹⁶ As mentioned, residents consist of both belongers and non-belongers.

¹⁷ Regional residents are citizens of or belong to regional jurisdictions as indicated in Schedule 1 of the Health Services Fees and Charges Regulations: Antigua and Barbuda, The Bahamas, Barbados, Belize, Bermuda, Cayman Islands, Dominica, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, Montserrat, Saint Christopher and Nevis, Saint Lucia, Saint Martin, Saint Vincent and the Grenadines, Saint Maarten, Suriname, Trinidad and Tobago, Turks and Caicos Islands and Virgin Islands.

Table 19: Summary of determinant analysis for health

	Determinant	Summary of determinants in health
Enabling environment	Social norms	Implicit social norms could be associated with the high percentage of C-sections.
	Legislation/policy	The legislation sets different fees for different categories of people, creating some implicit discrimination between nationals and non-nationals.
	Budget/expenditure	Budget allocation and expenditure are not considered a bottleneck in health.
	Management/coordination	Lack of data is a problem related to addressing the efficiency of the health system. Data are not disaggregated in a way that allows for a proper equity-based analysis. In addition, the territory does not efficiently track data on HIV. The territory does not monitor health-related indicators that could be used to address the efficiency of the system.
Supply	Availability of essential commodities/inputs	The availability of essential commodities/inputs was not considered to be a major bottleneck in health.
	Access to adequately staffed services, facilities and information	Access to health care was considered to be a problem for adolescents older than 16 years of age. Despite the fact that there are no formal rules, it is the practice of many health professionals not to provide services to those between the ages of 16 and 18 without parental consent. Access to some more specialized health services is only available outside the territory.
Demand	Financial access	Fees are charged in the hospitals. The three levels of fees hinder access to the more economically vulnerable populations.
	Social and cultural practices and beliefs	Social and cultural practices and beliefs are not considered to be a major bottleneck in health.
	Timing and continuity of use	Timing and continuity of use are not considered to be a major bottleneck in health.
Quality	Quality of care	While quality of care is considered for all in the system as an item that can still improve, stakeholders mentioned that, with the existing capacity and taking into consideration the demand for services, the health quality is the best that can be provided in the island.





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6. THE RIGHT TO PROTECTION

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.

Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement. (CRC, article 19)

There is significant evidence that violence, exploitation and abuse can affect children's physical and mental health in the short and longer term, impairing their ability to learn and socialize and impacting their transition to adulthood, with adverse consequences later in life. Violence, exploitation and abuse are often practiced by someone known to the child, including parents, other family members, caretakers, teachers, employers, law enforcement authorities, state and non-state actors and other children. Only a small proportion of acts of violence, exploitation and abuse are reported and investigated, and few perpetrators are held accountable.

Vulnerability is also associated with age, with younger children at greater risk of certain types of violence and the risks changing as they get older. As seen above, experiences of school violence can result in children dropping out.

6.1 BIRTH REGISTRATION

According to UNICEF, birth registration is more than an administrative record of the existence of a child. It is the foundation for safeguarding many of the child's civil, political, economic, social and cultural rights. Article 7 of the CRC specifies that every child has the right to be registered at birth without any discrimination. Birth registration is central to ensuring that children are counted and have quality access to basic services such as health, social security and education. Knowing the age of a child is central to protecting them from child labour, being arrested and treated as adults in the justice system, forcible conscription in armed forces, child marriage, trafficking and sexual exploitation. A birth certificate as proof of birth can support the traceability of unaccompanied and separated children and promote safe migration. In effect, birth registration is their 'passport to protection'. Universal birth registration is one of the most powerful instruments to ensuring equity over a broad scope of services and interventions for children.¹⁹

¹⁹ www.unicef.org/protection/57929_57972.html (accessed 1 June 2015).

The Registry of Births, Deaths and Marriages is responsible for registering all children born in Anguilla, independent of the nationality of their parents. Those who are non-nationals (non-belongers) are registered and receive a birth certificate; however, according to the law, they are not considered citizens. It is the parents' responsibility to regularize the child's situation with their country of citizenship.

Birth registration is free of cost, but there is a charge of EC\$20 (around US\$8) for the issue of a birth certificate. This certificate is required for children to be registered at school, as well as for other documents such as a passport. The territory does not have an estimate of how many children do not have a birth certificate, but according to the interviews, the chances for that are minimal since the Government facilitates the process and the document is necessary for the child to be at school. Also, in spite of the increased flow of immigrants (see Chapter

2), including some illegal ones, there is no evidence of undocumented children in Anguilla.

6.2 SEXUAL, PHYSICAL AND EMOTIONAL ABUSE AND NEGLECT

The situation of children in Anguilla related to their right to be protected from sexual, physical and emotional abuse and neglect is hard to assess due to two important factors: (i) data on these topics are rare and, most of the time, only partially track cases of abuses and violence as these are generally underreported; and (ii) interviews showed an overall concern regarding the confidentiality and anonymity of any such information with such a small population, making victims and witnesses afraid of being stigmatized if they come forward. Table 20 summarizes the different issues that influence people's propensity not to report abuse and violence in Anguilla.

Table 20: Reasons identified for not reporting abuses

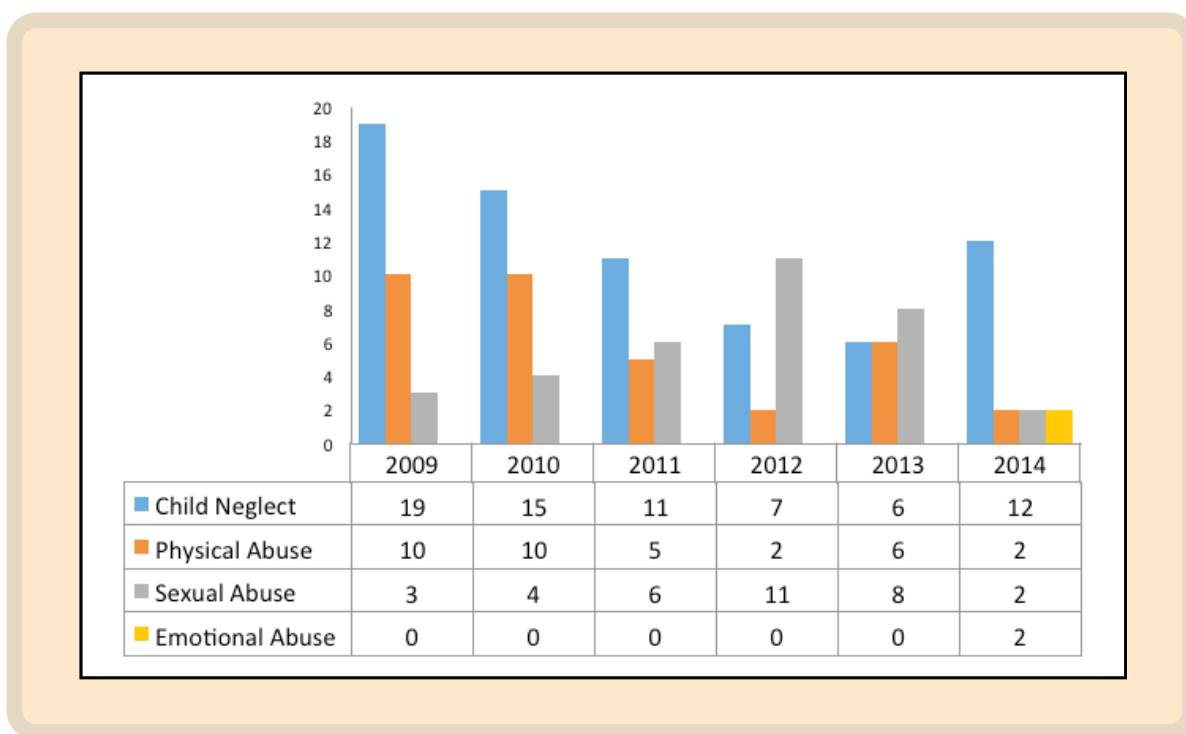
Non-nationals	Nationals
<ul style="list-style-type: none"> ● Fear of losing their work permit ● Those who are illegal are afraid of being deported ● Fear of not being taken seriously ● Stigma in society due to the size of the population ● Language barriers ● Process is lengthy and difficult to understand ● Lack of trust in the authorities ● Perception that cases are not prosecuted 	<ul style="list-style-type: none"> ● Stigma ● Fear of being known as a 'story teller' ● 'Pride' involving the family ● Perception that cases are not prosecuted

Between 2006 and 2010, 58 cases of child neglect, 40 cases of physical abuse and 32 cases of sexual abuse (under 18 years) were registered (PAHO 2012). There were also reports that statutory rape and incest occur, but their frequency is not known due to underreporting (Stoby 2006).

In 2014, 18 children were referred to the Department of Social Development (DSD), the smallest number since 2009 (Figure

18). This reduction needs to be further investigated by the DSD; it is not known whether it represents a real reduction in cases – indicating a positive result – or an increase in non-reporting. Most of the reported cases were related to child neglect. The Department also received 15 referrals related to behavioural problems, two cases of attempted suicide and one case of bullying (Department of Social Development 2014).

Figure 18: Reported cases of child abuse, 2009–2014



Source: Department of Social Development 2014.

Recent data or estimates on the extent of corporal punishment²⁰ in Anguilla are non-existent; nonetheless, its practice is common in the territory and the overall region. In the Eastern Caribbean, corporal punishment is generally socially and culturally accepted

as a way of discipline in home and schools (UNICEF Regional Office for Latin America and the Caribbean 2006). Just over half (55 per cent) of those in Anguilla who were interviewed for a 2014 UNICEF study had an understanding of what constitutes

²⁰ Following UNICEF’s definition, corporal punishment is “any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. Most involves hitting (‘smacking’, ‘slapping’, ‘spanking’) children, with the hand or with an implement – whip, stick, belt, shoe, wooden spoon, etc.”

corporal punishment (UNICEF Office for Barbados and the Eastern Caribbean 2014). The survey demonstrated that 37 per cent of the respondents did not perceive spanking/ hitting/ smacking with hands and objects to be corporal punishment; 53 per cent did not find shaking/throwing children as such and 51 per cent did not think kicking/punching/ burning children was corporal punishment (ibid.).

Among respondents, 59 per cent understood discipline and corporal punishment to be distinct from each other, 91 per cent believed there were other forms of punishment without using force and 55 per cent believed corporal punishment was not important for raising and educating children. Nevertheless, 51 per cent admitted to occasionally having administered corporal punishment and 21 per cent admitted having felt uncomfortable afterwards. Asked how they had felt when they themselves had experienced corporal punishment as children, 34 per cent said they had felt upset, 21 per cent had been angry or vengeful and 10 per cent had felt humiliated (ibid.).

Where child sexual abuse is concerned, evidence points to a cyclical situation, with those who were sexually abused when they were children now abusing children (UNICEF Office for Barbados and the Eastern Caribbean Area 2010). Child sexual abuse is not necessarily recognized as a problem in the territory, as less than half of the respondents (45 per cent) in the 2014 UNICEF survey identified it as such; nevertheless, at the same time, 16 per cent knew of a child who was a victim (UNICEF Office for Barbados and the Eastern Caribbean 2014). Of those interviewed, 88 per cent believed people would not report from fear of negative consequences, 49 per cent because they felt authorities would not take action on the report and 72 per cent felt embarrassment would prevent the reporting (ibid.).

During the SitAn process, respondents mentioned that there were indications that children perform sex acts in exchange for money and gifts. Moreover, focus groups conducted by UNICEF in 2010 identified that the society tolerates older men engaging in sexual activity with young girls. They acknowledged that it was common for young girls to engage in sex and sexual activity for money, often with the knowledge and consent of – and sometimes at the initiation of – the mother (UNICEF Office for Barbados and the Eastern Caribbean Area 2010).

Some of the circumstances related to sexual, physical and emotional abuse and neglect have been identified in this report. One of them, highlighted above, is that children are living in broken home environments, i.e., households where mothers, fathers or both are absent, where no father figure exists and/or where domestic violence is common (to be discussed next). A second issue is that some offences are not reported due to the reasons explored in this SitAn – including shame, lack of trust in the authorities, stigma, etc. – leading to a feeling of impunity (i.e., some crimes are committed but those responsible do not pay for them). Third, there is an acceptance of violence in the Caribbean due to a mix of social norms and social and cultural practices and beliefs. For example, as mentioned, many do not see corporal punishment as a problem. Lastly, society implicitly accepts older men having relationships with younger girls due to misconceptions and social norms that see sex between older men and younger girls as normal.

Violence against children is intrinsically connected to domestic violence.²¹ In 2014, 46 per cent of those who answered a survey sponsored by UNICEF believed domestic violence was a major problem for the territory. Meanwhile, 34 per cent knew someone who had experienced domestic

²¹ As defined in the UNICEF study, domestic violence is behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours.

violence and 24 per cent mentioned they knew about a case that had not been reported (UNICEF Office for Barbados and the Eastern Caribbean 2014). However, the number of referrals to the Department of Social Development involving domestic violence are very low in relation to the stakeholders' perspective: four in 2010 and 2011, six in 2012, three in 2013 and two in 2014 (Department of Social Development 2014). Some of the reasons related to underreporting were explored in the UNICEF survey: embarrassment (88 per cent), feeling that the abuse is not their business (77 per cent), economic dependency on the abuser (76 per cent), the hope that abuser would change (75 per cent), emotional dependency on the abuser (70 per cent) and the perspective that the investigation would be time consuming and would lead nowhere (63 per cent) (UNICEF Office for Barbados and the Eastern Caribbean 2014).

The underlying cause of violence against women is related to the social norms that drive the relationship between couples, i.e., the power and control that men try to exercise over women, which is also extended to children (UNICEF 2012). In terms of direct causes, domestic violence in Anguilla is associated with drug and alcohol abuse, extra-spousal relationships, feelings of insecurity, no further prosecution of some cases and delay in judicial solutions. According to the interviewees, some cases are reported but later the victims decide to stop the process due to fear of the possible negative consequences for the woman and her family. Additionally, there was a lack of social recovery programmes and out-dated legislation regarding protection against domestic violence for women and children (Stoby 2006).

The territory has made some advances in setting up a positive enabling environment to protect children from different forms of abuse and neglect; nevertheless, some changes are still necessary in order for the rights of children be fully realized. The four main legislations/protocols that are in place related to child protection are the Criminal

Code, the Interagency Child Protection Protocol, the Juvenile Act and the 2015 Domestic Violence Act.

The Criminal Code makes provision for the prevention of cruelty and details the offence of having the custody or care of a child or a young person and neglecting, abandoning, exposing or procuring him or her to be ill treated, neglected or exposed. It is also an offence if a person liable to maintain a juvenile fails to provide food, clothing, lodging and medical aid. The Code also covers most forms of child abuse, identifying criminal offences with varying levels of penalties imposed. In addition, it deals with indecent assault on children and prostitution related to children. In the case of sexual intercourse with a girl under the age of 16 years, the Code provides an exception if the man is under the age of 21 years, has not previously been charged with a similar offence and believes her to be of the age of 16 years or over, and has reasonable cause for the belief (see section 2.2 above).

The Criminal Code makes trafficking an offence and provides some level of protection, increasing the sanctions in cases of trafficking with the purpose of sexual exploitation and/or in the case of a person below 18 years of age, but there is no specific law addressing trafficking of women and girls and the protection of victims. All initiatives to draft and amend criminal laws must be coupled with protection measures and services for victims and those who are at risk of being subjected to harmful practices.

An Interagency Child Protection Protocol has been approved that aims to strengthen collaboration among different stakeholders and to offer guidance and support on good practices for the identification, reporting, investigation, case management and prosecution of child abuse cases (Government of the United Kingdom 2014). The Protocol establishes guidelines and procedures related to who is mandated to report, how to report, to which competent agencies such reports should be made

and to ensure that reports are investigated, prosecuted and managed. It also provides guidelines for reporting suspected child abuse, maltreatment or neglect; case management of child abuse, including removal to places of safety, treatment counselling and follow-up; the role of school and teachers; information sharing between stakeholders; interviews (child, parents, etc.); medical Intervention; and roles and responsibilities of various proximate agencies.

The Criminal Code and the Protocol demand mandatory reporting by parents, guardian, teachers, medical practitioner and any person who has reasonable grounds for believing that a sexual offence has been committed towards a minor. The reporter must bring the grounds for their belief to the DSD as soon as reasonably practicable.

Qualitative evidence collected in 2015 reveals that the Protocol is understood by the main stakeholders and is being used. However, according to the DSD (2014), ongoing issues that prevent optimum use of the Protocol are the absence of a place of safety for children in need of care and protection and fact that basic needs are not being met by the home environment (for more on the institutional response, refer to section 5.5).

The Juvenile Act empowers the magistrate to authorize any police officer to search for and to remove a juvenile to a place of safety if it is found that her or his welfare is in jeopardy. A police officer, probation officer or social worker may bring a child in need of care and protection before the court for assistance in cases where it reasonably appears to the magistrate that a child is being assaulted, ill-treated or neglected in a manner likely to cause the child unnecessary suffering and/or that specified offences have been or are being committed against the child (Morlachetti 2015). However, the Act does not sufficiently differentiate between the situation of children

in need of protection and juvenile offenders (ibid.). Regardless of being a victim or an offender, the children will be dealt with by the same magistrate, potentially receiving similar court orders to “take steps for removing the juvenile from undesirable surroundings” (Section 2).

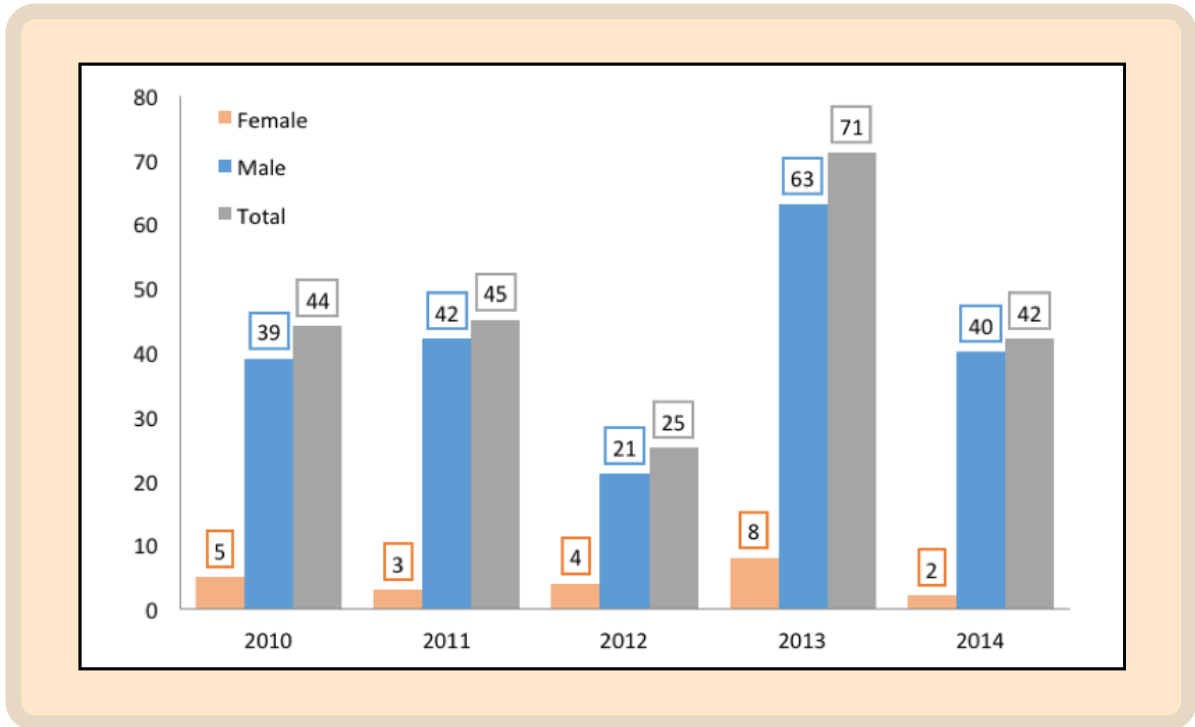
The Domestic Violence Act was approved at the end of 2015. This Act defines domestic violence in part as “... any controlling or abusive behaviour that harms (or may harm) the health, safety or well-being of a person or any child regardless of gender or sexuality...” It also makes provisions for protective orders and maintenance orders for children. However, some level of violence against the child is still allowed at home, administered by parents or guardians, as Section 234 of the Criminal Code allows parents, or other persons with lawful custody of a child or young person, to administer “reasonable punishment”. Interviewees mentioned that the absence of a domestic violence bill until recently was caused by the political view that it is too “liberal” for the society since it also deals with violence against homosexuals.

6.3 CHILDREN IN CONFLICT WITH THE LAW AND JUVENILE JUSTICE

The term ‘children in conflict with the law’ refers to anyone under 18 who comes into contact with the justice system as a result of being suspected or accused of committing an offence. Most children in conflict with the law have committed petty crimes or minor offences such as vagrancy, truancy, begging or alcohol use. In addition, some children who engage in criminal behaviour have been used or coerced by adults.

Statistical information provided by the Royal Anguilla Police Force shows that in 2014, 40 boys and two girls were arrested in the territory. This number is similar to 2010 and 2011 and represents a significant reduction when compared to 2013 (Figure 19).

Figure 19: Juvenile arrests by gender, 2010–2014



Source: Royal Anguilla Police Force.

Table 21 depicts the key offences that led to children being arrested, ordered by the most common cases in 2014. While in the other

years theft and possession of cannabis were the main offences, in 2014 children were involved in five cases of murder.

Table 21: Key offences of children arrested, 2010–2014

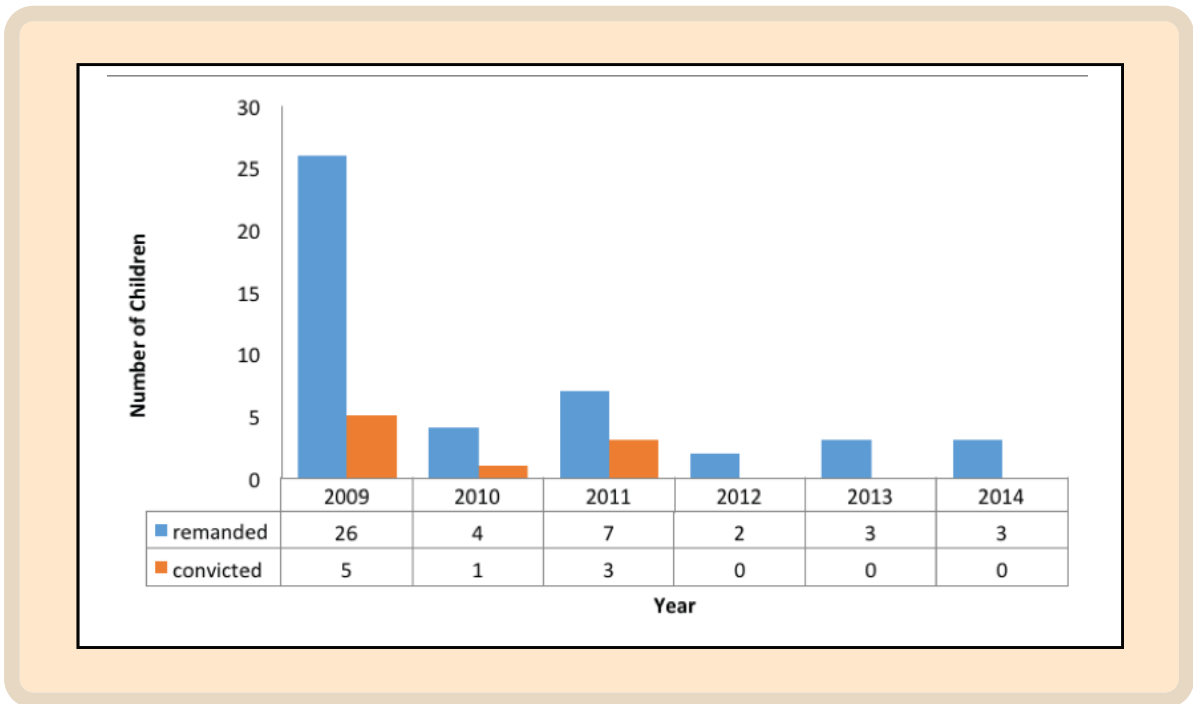
Offence	2010	2011	2012	2013	2014
Murder	0	0	0	2	5
Theft	2	2	1	16	5
Possession of cannabis with intent to supply	1	2	1	17	4
Breach of the peace	0	0	4	8	3
Grievous bodily harm	0	2	0	1	3
Possession of a firearm	0	0	0	1	3
Armed with offensive weapon	3	9	3	1	2
Burglary	1	1	0	1	2
Disorderly conduct	0	4	0	5	2
Taking and conveyance	0	0	0	0	2
Warrants (bench, first instance)	0	0	0	4	2
Arson	0	0	0	0	1
Assault	8	6	4	0	1
Assault of a police officer	0	0	0	1	1
Criminal damage	0	0	1	1	1
Fraud	0	0	0	0	1
Indecent assault	0	0	0	0	1
Possession of ammunition	0	0	0	0	1
Robbery	0	0	0	8	1
Wounding	0	3	0	0	1
Other	29	16	11	5	0
Totals	44	45	25	71	42

Source: Royal Anguilla Police Force

Since 2012 there have been no children in custodial care in HM Prison (Figure 20) as children in conflict with the law are now placed in the Zenaida Haven Rehabilitation

Centre. However, it was noted that there were three boys temporarily in the prison awaiting sentencing.

Figure 20: Number of children in custodial care (HM Prisons), by classification of stay, 2009–2014



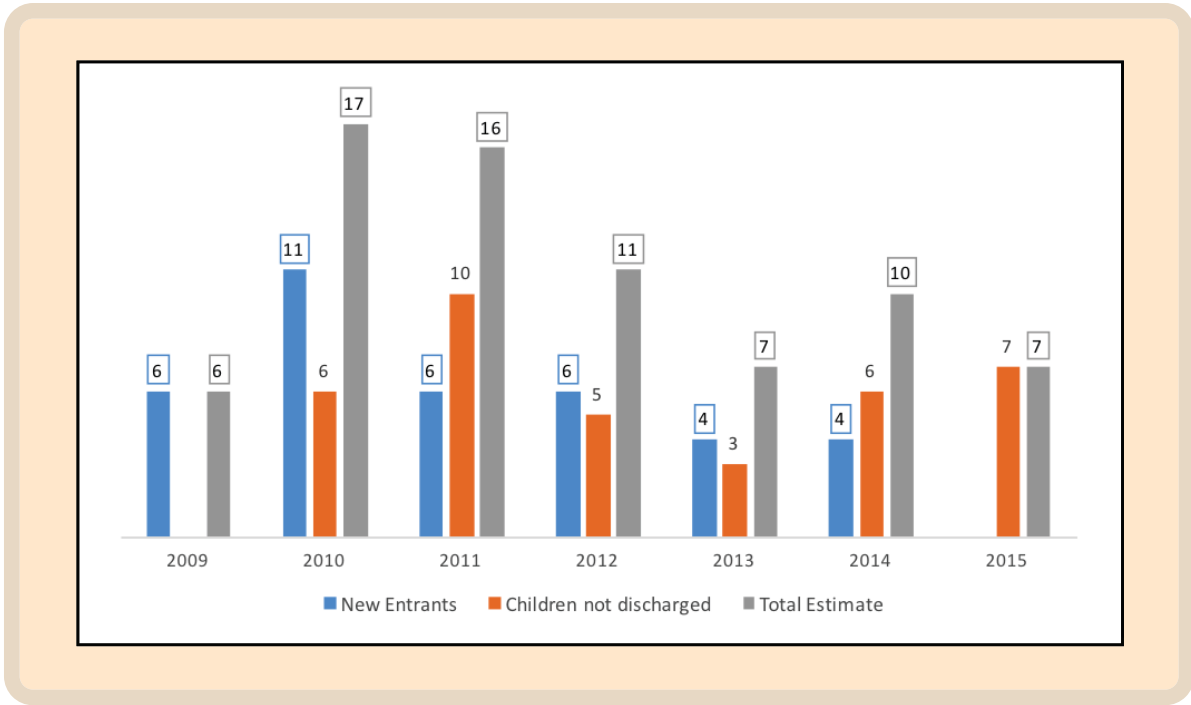
Source: HM Prisons.

The Zenaida Haven Juvenile Rehabilitation Centre began operations in May 2009. It provides a residential, therapeutic environment for chronic and persistent juvenile offenders aged 12–17 years, and it employs a range of targeted interventions with the aim of reducing offending and

anti-social behaviour. It ultimately has the objective of successfully reintegrating young people into their communities.

Figure 21 depicts the number of children placed at the Juvenile Rehabilitation Centre between 2009 and 2015.

Figure 21: Children placed at Zenaida Haven, 2009–2015



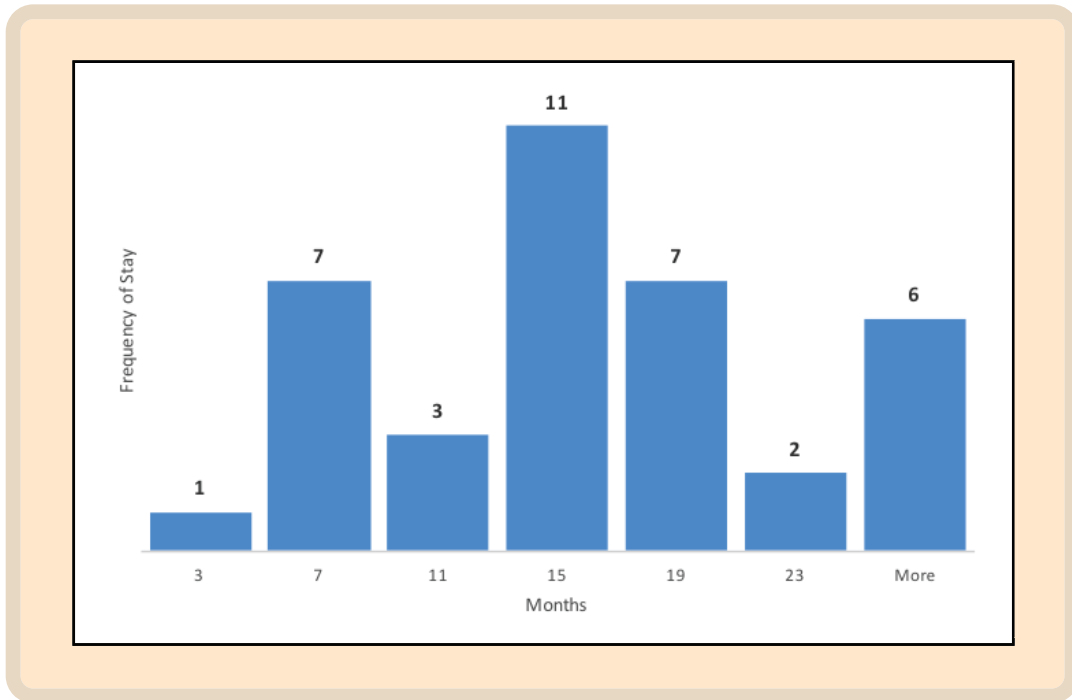
Source: Communication from the Department of Probation 2015.

Note: Data for 2009 only take into consideration children who entered in that year. Data for 2015 only cover the first three months of the year and do not consider new entrants.

On average, children spend around 15 months in Zenaida Haven (Figure 22). All

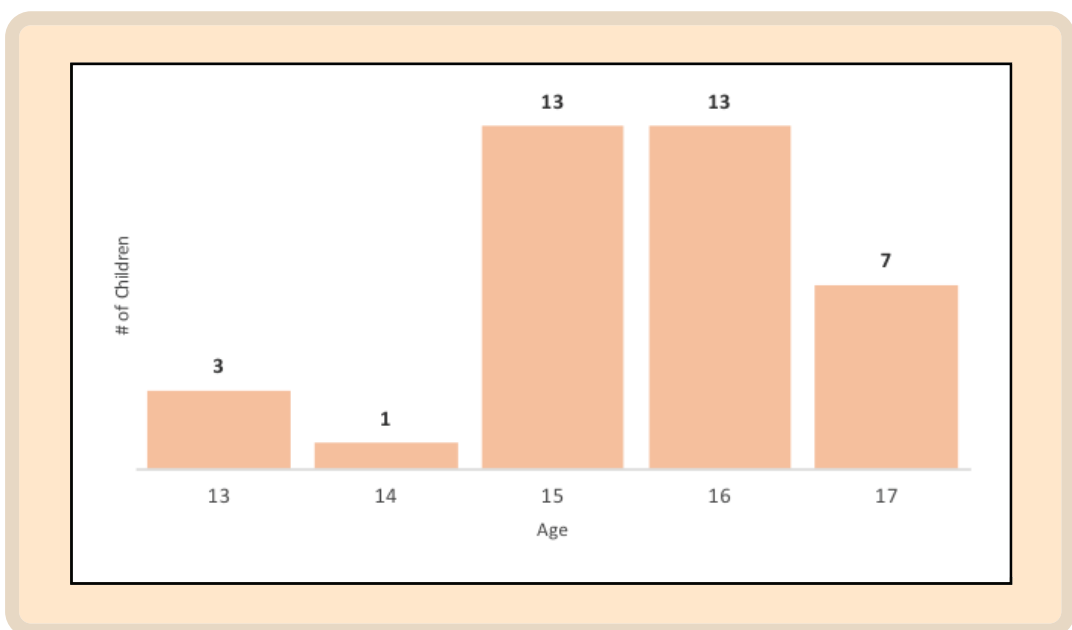
the children there were boys and most of them were 15 or 16 years old (Figure 23).

Figure 22: Length of stay in Zenaida Haven, 2009–2014



Source: Communication from the Department of Probation 2015

Figure 23: Age of children admitted to Zenaida Haven, 2009–2014



Source: Communication from the Department of Probation 2015.

In terms of an enabling environment, despite some initiatives that try to prevent violence among children and reduce the cases of children in conflict with the law, the criminal system related to children and young people remains a punitive one, not dissimilar to the criminal system for adults (Overseas Territories Joint Ministerial Council 2013). Children can be tried for offences from the very early age of 10 years and they are tried in a Magistrate's Court – the same one dealing with adults even when it is called a Juvenile Court (Morlachetti 2015). Informants mentioned that boys and girls of 16 years of age were tried as adults. Additionally, under the Juvenile Act, if a child under 16 years jointly commits an offence with an adult, that child is tried as an adult.

There is no diversion system and even small children committing minor offences can be brought before the court. The Probation Act, 2011, provides for alternatives once the court makes a probation order, but the Magistrate has a very broad discretionary power to make a decision granting a probation order or not. According to section 12 of the Probation Act, the Court may consider the contents of the pre-sentence report, the victim impact statement, if any, and some of the following: a plea of guilty and any assistance the offender gave to the police; the presence of mitigating circumstances relating to the offence and the offender; any diminished responsibility of the offender; the nature of the offence; the need for the community to be protected from the offender; or any other matter the Court thinks is appropriate.

The Probation Act is equally applied to adults and young persons. However, there are some special provisions for juvenile offenders: there is a limit of 200 hours of community service over a period of no more than 12 months; and the Court shall include a condition in every probation order that the

offender abide by a curfew for a period not exceeding three months.

The Act provides the legal framework for the operation of the Zenaida Haven Juvenile Rehabilitation Centre. According to the law, children and juveniles found guilty can be sentenced to a probation order of one to three years or could have the condition of residence (residence order) added to the sentence (i.e., placement in Zenaida Haven). The Magistrate's Court may request an assessment from the Juvenile Centre Director or the Probation Officer may make a recommendation in the pre-sentence report to place the youth in the Centre as an additional sentencing option. The length of stay for a residence order can range from six months to three years. After six months, based on the youth's good progress, the Programme Supervisor can recommend the Probation Officer take the matter back to court and make the recommendation to remove the remainder of the residency order from the probation order (The Juvenile Rehabilitation Centre 2009).²²

This Probation Act points to a desire by the Government to move from a punitive judicial system related to children in contact with the law to one that is more preventative and rehabilitative in nature. The establishment of a residential centre has provided a child-friendly alternative to custodial care in the adult prison. However, there is no free legal aid for anyone, save in the case of murder, and the children of poor parents cannot afford legal representation in the Juvenile Court or on appeal. The lack of legal representation in a criminal proceeding constitutes a serious breach of the due process of law and compromises the possibility of a fair trial and the right to have a remedy or recourse (Morlachetti 2015).

There are certain principles, standards and norms related to juvenile justice that

Part 6 Section 30: Early Discharge – The offender has served at least three quarters of his probation period among other stipulations.

should be used to guarantee that boys and girls in conflict with the law have improved chances to be reinserted into society without prejudice,²³ and with the same chances as other children. These standards can be summarized into four criteria

that could be used to analyse Anguilla's general compliance (Table 22). Based on the information gathered in this SitAn, one was not achieved and the other three were partially achieved.²⁴

Table 22: Anguilla's status under general international criteria for assessing juvenile justice systems

Criteria	Anguilla' status
A sufficiently high age of criminal responsibility (not less than 12, which is the sub-regional minimum, and preferably 14, which is the international standard)	Not achieved. Age of criminal responsibility is 10.
Diversion of children and adolescents away from criminal justice processes as far as possible	Partially achieved. The territory has a Centre that provides alternative care for children in conflict with the law; but processes might treat children as adults.
Assurance that children receive a prompt and a fair trial	Partially achieved. There is no free legal aid for anyone, save in the case of murder, including children charged before the Juvenile Court.
Incorporation into juvenile justice systems of education, reintegration and rehabilitation, and the need to ensure that detention is a last resort.	Partially achieved. The system needs to accelerate reforms to ensure that it becomes fully preventative and rehabilitative in nature.

6.4 CHILD LABOUR

The Government does not formally monitor child labour in the territory. During the field visits in May and July 2015 it was common to see children and adolescents working in small shops, supermarkets and/or small restaurants. On one occasion, a young girl around 10 years of age working in a market mentioned that her mother had found her the job – it was school vacation time. She worked from morning to evening and would do any type of job required, from cleaning the floor, to stocking products and throwing the boxes in the garbage. She did not know how much she would be paid.

While the legislative provision to avoid child labour exists, its monitoring seems to be lacking. Section 3 of the Employment of Women, Young Persons and Children Act prohibits children under the age of 14 from working in industrial undertakings such as mining, manufacturing and construction. However, the law does not prohibit young persons between the ages of 14 and 18 from engaging in industrial undertakings, which may leave them vulnerable to dangerous work. There are restrictions on employing young people at night in industrial undertakings, but the Act allows the employment of young persons over 16

²³ For some of these principles, standards and norms, see UNICEF 2011 on legislative reform.

²⁴ Analysis was based on the interviews as well as documents made available during the SitAn process. The main documents used were Morlachetti 2015, Department of Social Development 2014.

years of age, including during the night, in the manufacturing of raw sugar. In the Employment of Children (Restriction) Act, the employment of children under 14 years is also prohibited, but the Act states that 12-year-old children, and those even younger, can be employed by their parents in domestic or agricultural work, limited to no more than two hours on the days that they attend school.

Due to the lack of formal monitoring, the situation regarding child labour cannot be properly assessed. Nevertheless, its existence was acknowledged by many stakeholders in the territory and, as seen in the case of the girl working in the market, it is sometimes encouraged by parents and other relatives.

6.5 ADOLESCENT PREGNANCY

While adolescent pregnancy could be seen as a health subject, its causes frame the problem as a child protection issue. Unwanted pregnancy among the adolescent population is a big concern not only in Anguilla but also all over the Caribbean. The rate of adolescent pregnancy (10 to 19 years of age) increased in the territory from 9 per cent in 2006 to 11 per cent in 2009 (PAHO 2012). In 2014 10 adolescent deliveries were registered: one was by a 14-year-old and 9 by girls between the ages of 16 and 19 (Health Authority of Anguilla 2015).

In the 2009 poverty assessment, it was reported that 32 per cent of females had

**10 DELIVERIES BY
ADOLESCENTS IN 2014**

**1 BIRTH FROM A
14 YEAR-OLD GIRL**

their first birth between the ages of 15 and 19, meaning that almost one third of the women had their first child as an adolescent (Government of Anguilla and Kairi Consultants Limited 2009). According to the interviews, adolescent pregnancy might be higher than recorded since some girls leave the territory to deliver their babies abroad.

Among the main factors contributing to adolescent pregnancy are the early age of sexual debut, the low use of contraceptives by sexually active adolescents and/or coerced sex at first sexual intercourse. In 2002, a health survey showed that young males started their sexual life at the age of 10 years or under as a result of some sort of initiation, and many of them were forced (Primary Health Care Department 2002). The survey also found that boys were more susceptible to being forced into sexual initiation than girls. Along the same lines, the 2009 Global school-based student health survey (GSHS), conducted with children aged between 13 and 15 years, showed that 30 per cent of the respondents in Anguilla had experienced sexual intercourse and 76.5 per cent of them had done so for the first time before the age of 14 years (WHO and CDC 2014). The same survey indicated that among students who had experienced sexual intercourse, 69 per cent had used a condom the last time (i.e., around a third had not).

In many cases, first intercourse is forced, which highlights the underlying issue of gender-based sexual violence and the need for strategies for prevention and response (UNFPA 2014). Data on the percentage of forced first intercourse are not available for the territory, but the pattern for the region points to high levels. Evidence also suggests that many adolescent pregnancies result in unwanted babies who would be raised by immature young mothers without proper institutional and family support (Stoby 2006).

Besides the causes reported so far, and as analysed by the United Nations Population

Fund (UNFPA 2014), pregnancies among adolescents have multiple other determinants. There are social factors, such as poverty, level of education, area of residence and culture, among others, which are correlated with behavioural patterns. Adolescents in the 10–14 age group may suffer as a result of inadequate protective measures that fail to prevent sexual violence and child abuse. There are also health systems and/or legal factors that limit adolescents' access to reproductive and sexual health services. They may encounter barriers to accessing contraception, information and counselling. As mentioned, despite the fact that national legislation does not set a minimum age for access to health, the custom is that people under 18 years of age need parental consent to see a doctor.

Community norms and attitudes may also hinder access to sexual and reproductive health services or excuse sexual violence. For example, as noted above, interviewees stated that it is common for older men – married or not – to have relationships with younger girls, and during sexual intercourse they avoid the use of contraceptive measures, increasing the risk of adolescent pregnancy and the transmission of sexual diseases. Besides, as highlighted by UNFPA (2014), schools may not offer comprehensive sexuality education – the health and family life education (HFLE) and physical sexual education (PSE) classes are centred on biology rather than sexual conduct, morality, risk and exploitation – so adolescents often rely on information (often inaccurate) from peers about sexuality, pregnancy and contraception.

While Anguilla is a religious territory, which influences how families and individuals view some subjects related to sex, it is not known how this affects the behaviour of adolescents and how young people view or follow church principles. On the one hand, interviewees with a strong religious background complained that young people were not following church principles. On the other hand, others with a less religious approach suggested that religious leaders

could be more active in helping to address the root causes of the abuses committed in the territory, including finding solutions to reduce vulnerabilities in the society. In general, religious groups, organizations and leaders are seen as elements that could be positive influences to change children's and adolescents' behaviour.

6.6 INSTITUTIONAL RESPONSE ON CHILD PROTECTION

The Ministry of Health and Social Development is responsible for child protection issues. Within the Ministry, two departments handle the topic: the Department of Social Development (DSD), which is the main body accountable for policies to alleviate vulnerabilities (see section 3.2) and for dealing with most of the issues related to child protection; and the Department of Probation, which takes care of children in conflict with the law (and is responsible for Zenaida Haven). Besides these, the Royal Anguilla Police Force also provides support in investigating cases (suffered or perpetrated by children), arresting suspects (including children) and removing children who are considered to be in danger.

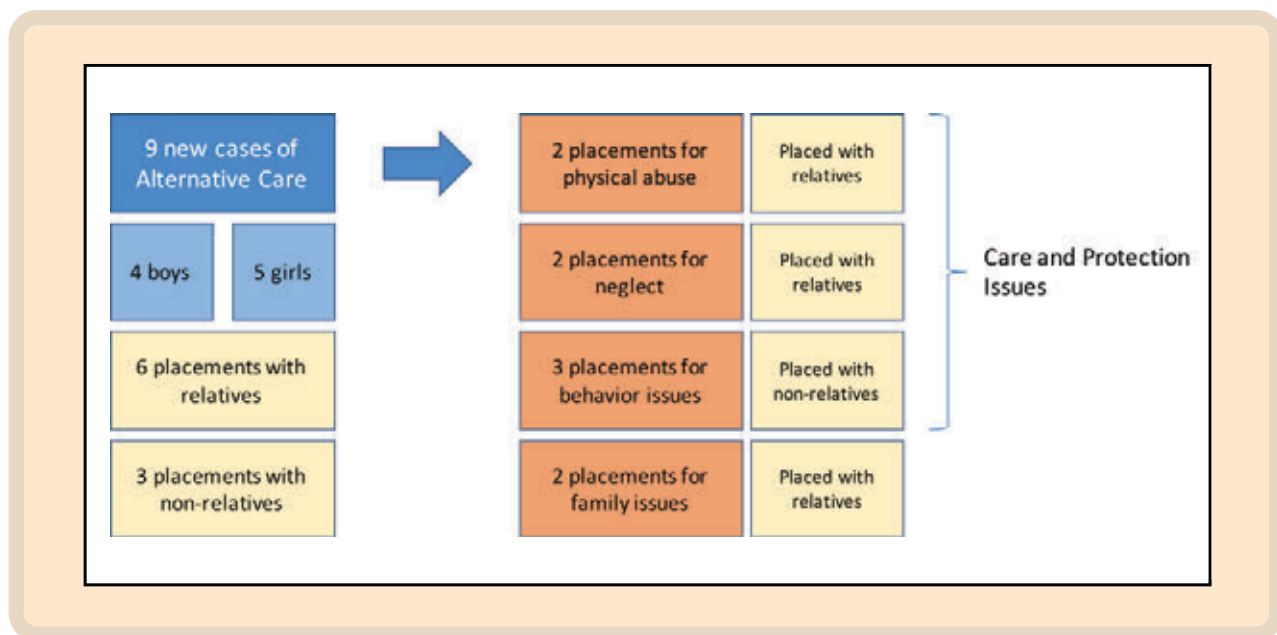
In terms of staff capacity, the DSD has three senior social workers dealing with family and social services/child maintenance/the elderly and disabled and two other social workers for the area of family and social services. There are also other officers in the Department with qualifications in psychology, counselling and related fields. According to the stakeholders interviewed, despite the efforts of the staff, the number of employees is not sufficient to properly provide services to all those who need help.

While children in conflict with the law are mostly handled by the Department of Probation with the support of the DSD, the DSD manages the Alternative Care Programme (of foster care) for children in need of care and protection due to violence at home. As shown in Table 23, 38 children

were placed in alternative care in 2013 and 31 in 2014 (Department of Social Development 2014). Among the cases in

2014, nine were new and seven of these were characterized as related to care and protection issues (Figure 24).

Figure 24: New cases of alternative care, 2014



Source: Department of Social Development 2014.

Among the overall foster care population in 2014, there were 16 boys and 15 girls. Most

of the children were between 11 and 15 years of age (Table 23).

Table 23: Number of children in the alternative care programme, 2013–2014

Age range (years)	Number of children placed 2013			Number of children placed 2014		
	Male	Female	Total	Male	Female	Total
0 to 5	4	2	6	2	3	5
6 to 10	5	9	14	6	4	10
11 to 15	8	8	16	7	7	14
16 to 18	1	1	2	1	1	2
Total	18	20	38	16	15	31

Source: Department of Social Development 2014.

The enabling environment also framed the institutional response to child protection issues. As mentioned in different parts of this SitAn, the current legislation related to child protection needs to be updated. The main gaps and recommendations are listed in UNICEF's legislation assessment (Morlchetti 2015), and a summary table from that study is reproduced in Annex 1.

6.7 SUMMARY OF DETERMINANTS IN CHILD PROTECTION

In any circumstances, the child protection area is extremely complex as it involves a myriad of stakeholders and its causes and consequences are seen in different areas such as health and education. Table 24 tries to summarize the main determinants related to child protection. Most of the bottlenecks are the result of social norms and social and cultural practices that have been constantly reinforced over the years and transmitted from one generation to the next.

Table 24: Summary of determinants related to child protection

	Determinant	Summary of determinants in child protection
Enabling environment	Social norms	<p>Violence is used as a way to control women and, consequently, children. There is a cycle of abuse that is transmitted from one generation to the next, where today's perpetrators were the victims in the past.</p> <p>Intergenerational sexual relationships are common and accepted as normal. This leads to adolescent pregnancy and risks related to sexual transmitted diseases.</p>
	Legislation/policy	<p>Legislation is in place, but there are many gaps as described in the text.</p> <p>CEDAW has not been extended to the territory.</p>
	Budget/expenditure	<p>It was not possible to address this due to lack of information. The budget for child protection is spread across different ministries and departments.</p>
	Management/coordination	<p>Lack of coordination between the different sectors involved in child protection creates a bottleneck in terms of the management and effectiveness of public policies.</p> <p>There are no data management systems that can properly monitor the situation of child victims of violence or families who might need support.</p> <p>The response is spread among different stakeholders in governmental and non-governmental areas.</p>
Supply	Availability of essential commodities/inputs	<p>Many stakeholders see the lack of recreational services for children after school and during the weekends as a problem. Without proper activities, children use drugs and alcohol at a young age as a recreational escape, increasing episodes of violence among them.</p> <p>There is no comprehensive sex education programme at schools (the HFLE and the PSE were considered to be to centred on biological and not behavioural aspects); consequently adolescents often rely on information (often inaccurate) from peers about sexuality, pregnancy and contraception, increasing the risk of adolescent pregnancy.</p> <p>Most of the social welfare programmes that could help alleviate the situation of some groups that are victims of child abuse and violence are only available for belongers.</p>
	Access to adequately staffed services, facilities and information	<p>Access to contraceptives for adolescents is limited,</p> <p>Child protection services are mostly available in English. Children from non-English-speaking families do not have access to the same services as those who speak English.</p>

	Determinant	Summary of determinants in child protection
Demand	Financial access	<p>Lack of monetary resources is seen by many as a possible cause of violence among and against children. Physical violence by parents might be associated with frustration with their economic condition. Children in conflict with the law are motivated by the poverty in which they live.</p> <p>The financial situation also influences the decision to leave young children unsupervised, increasing the danger of abuse and violence against them.</p>
	Social and cultural practices and beliefs	<p>The violent behaviour that some children present is a reflection of the situation they see at home or in their community. 'Gang-related behaviour' is seen by stakeholders as a cultural practice that is fuelling violence among children.</p> <p>For some families, the use of violence as a corrective measure is normal. Corporal punishment is used at home and considered to be the 'family's business'.</p> <p>Absence of the mother/father in the house, lack of dialogue between parents and children, inadequate parental supervision, peer influence and lack of a male figure in the family are contributing to changes in cultural practices, behaviour and beliefs among the young population.</p> <p>There is a perception that non-belonger populations are violent and involved in unlawful acts.</p> <p>The role of the church in fighting child abuse and violence has not been fully defined.</p>
	Timing and continuity of use	<p>While the reporting of different forms of abuse and violence has been increasing, the perception among various stakeholders is that under-reporting is still a problem. There are also situations where victims ask for cases to be dropped after initially reporting due to fear of stigma or future violence.</p> <p>Some non-belongers do not know which government services they can access. Some are afraid of coming forward and reporting abuses or being witnesses in cases due to fear of losing their work permit.</p>
Quality	Quality of care	<p>The territory has no measures of quality in the child protection system. While some standards and protocols are available, the consistency of their use could not be addressed in this SitAn and should be the subject of a future evaluation.</p>



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7. THE SDGS AND A NEW FRAMEWORK FOR CHILDREN

While the Millennium Development Goals (MDGs) set the international development framework for action until 2015, United Nations' Member States had agreed at the Rio +20 Conference to create a set of Sustainable Development Goals (SDGs) to coordinate the development efforts post-2015. The SDGs represent a new framework for global development (UNICEF 2014) that was officially adopted at the SDG Summit in September 2015. The process of developing the SDGs was not limited to the United Nations; it involved vast participation from different stakeholders from civil society, private enterprises and citizens around the world.²⁵ There are 17 Goals (see box) and 169 targets. They are action-oriented, global in nature and universally applicable.²⁶ The indicators to measure progress on outcomes are being developed, and it is expected that they will be finalized by March 2016.

The 17 Sustainable Development Goals

Goal 1: End poverty in all its forms everywhere

Goal 2: End hunger, achieve food security and improved nutrition and promote sustainable agriculture

Goal 3: Ensure healthy lives and promote well-being for all ages

Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

Goal 5: Achieve gender equality and empower all women and girls

Goal 6: Ensure availability and sustainable management of water and sanitation for all

Goal 7: Ensure access to affordable, reliable, sustainable and modern energy for all

Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

Goal 9: Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation

²⁵ For more on the civil society engagement in the post-2015 debate, see www.beyond2015.org/ (accessed 18 June 2015).

²⁶ Based on <https://sustainabledevelopment.un.org/sdgsproposal> (accessed 18 June 2015).

Goal 10: Reduce inequality within and among countries

Goal 11: Make cities and human settlements inclusive, safe, resilient and sustainable

Goal 12: Ensure sustainable consumption and production patterns

Goal 13: Take urgent action to combat climate change and its impacts

Goal 14: Conserve and use the oceans, seas and marine resources for sustainable development

Goal 15: Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss

Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

Goal 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development

Children, youth and future generations are referenced as central to the SDGs. Children are directly related to 12 of the goals and indirectly to the other five. The SDGs call for explicit targets on reducing inequality, ending violence against children and combating child poverty. At the same time, UNICEF emphasizes the importance of “leaving no one behind”; reaching first the poorest and most disadvantaged children must be reflected in all targets, indicators and national implementation frameworks as they are developed (UNICEF 2014).

The SDGs call for a “data revolution”. All targets must be measurable to ensure equitable results for all children. In addition, disaggregated data will be essential for monitoring equity gaps, strengthening social accountability and ensuring that the gaps between the most and least advantaged groups are narrowing. Data

should also be disaggregated by all grounds of discrimination prohibited by international human rights law, including by sex, age, race, ethnicity, income, location, disability and other grounds relevant to specific countries and contexts (e.g., caste, minority groups, indigenous peoples, migrant or displacement status) (UNICEF 2014). The global framework of goals, targets and expected indicators for 2016–2030 have significantly expanded comparing to the MDG era and will place higher demand on data collection. Adequate resources and increased capacities will be critical to generate quality disaggregated data for SDGs monitoring. This will be particularly challenging for Anguilla and other islands in the Eastern Caribbean area, given the resource and capacity constraints associated with their small size and middle-income status.





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8. CONCLUSION AND RECOMMENDATIONS

This Situation Analysis (SitAn) has identified a number of areas in which concerted and sustained action is needed in order to ensure that the rights of all girls and boys in Anguilla are realized. These general observations are being made with the acknowledgement that a proper, equity-based analysis of the situation of children depends on the availability of disaggregated data covering different aspects that might influence their lives, including, but not limited to, gender, age, nationality and socio-economic status.

While the Government produces some data related to children's rights, those made available for the SitAn do not capture the full range of issues to allow for an in-depth assessment of the situation of girls and boys related to education, health, social protection and child protection. Difficulty of access and the fact that different reports and datasets present different numbers for the same indicator jeopardize public accountability and reinforce a culture where information is still considered 'classified' by different government institutions. This reinforces the 'silo' culture, where each governmental area is concerned about its own data and there is no coordination of efforts to maximize data collection and use. Lack of data not only disrupts proper analysis but also interferes with how public policies are designed, implemented, monitored and evaluated. Results-based public policies are connected to the availability and use of information.

Despite its importance, poverty has not been monitored in the territory since 2008 and so the full impact of the economic crisis is hard to assess. In addition, some groups and families might not be characterized as poor but are vulnerable in ways that negatively impact on the realization of children's rights. Although the Government has set up some public assistance grants, there is no consolidated social policy scheme that deals with vulnerable groups and families and strategically addresses the causes and consequences of poverty and vulnerabilities.

Gender was seen as a crosscutting topic in the SitAn. While the differences between women and men are being reduced in some areas, especially those related to jobs in the public and private sectors, women's participation in politics is still small – over the past 30 years only three women have been elected representatives – and sexual abuse and domestic violence are predominantly carried out against women. If Anguilla asked for the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) to be extended to the territory, it would send a clear message that women's matters are considered to be important as men's.

Moreover, gender issues do not only impact on girls. There are more girls than boys enrolled in the last years of secondary education, reversing the situation found in the final years of primary school and initial years of secondary. This indicates that more boys are dropping out of school than girls. Girls are also the ones advancing in their educational careers. Consequently, in the future, more girls are going to be qualified than boys, creating an imbalance in society. There is a need to properly assess the gender balance and create policies that are able to position women and men at the same level, as called for by the Sustainable Development Goals (SDGs).

LEGAL AND POLICY FRAMEWORK

In recent years the territory has advanced in establishing compulsory education from ages five to 17 years (Education Act), in the abolition of corporal punishment (Education Act), in establishing the Abduction and Custody Act and in creating alternatives to prison as in the 2011 Probation Act (Morlachetti 2015). In addition, the Domestic Violence Act was passed at the end of 2015.

Nonetheless, there are still actions that need to be taken in order for the rights of children to be fully realized. It is recommended that the Government:

- (i) Take measures to prevent statelessness of children, including abolishing discrimination in legislation regarding migrant children/children born in Anguilla of migrant parents.
- (ii) Combat discrimination in the education system.
- (iii) Adopt legislation providing a proper juvenile justice system.
- (iv) Establish a family court.
- (v) Abolish the unequal status of children born within and outside of marriage.
- (vi) Ratify (extend) human rights treaties relevant to children rights, among others.

SURVIVAL RIGHTS

The major concern in terms of health for children is overweight/obesity. Reasons for this include not only a financial component – low quality food is cheaper than good quality and most, if not all food consumed in Anguilla is imported – but also social and cultural practices that influence families' eating habits. It is recommended that the Government:

- (i) Create a programme for preventing and controlling child obesity with integral

indicators and goals (involving all the relevant ministries).

- (ii) Produce and publish annual data on child and maternal health, including mortality, prenatal care, delivery, vaccination and other basic indicators.

DEVELOPMENT RIGHTS

There is an early childhood education (ECE) structure in place, but stakeholders indicated that access remains limited and enrolment is not monitored. Fees can be prohibitive and the quality needs to improve. Despite universal access to primary and secondary education, there is room for improvement here also in terms of guaranteeing quality of education for all as, although these schools do not charge tuition, there are hidden costs in terms of books, lunch and transport. Other issues in education include violence at school – in response to which the Government has created the Pupil Referral Unit (PRU) – and the fact that almost 39 per cent of the children are from abroad and both primary and secondary pupils need English as a second language (ESL) classes. To address some of these issues, it is recommended that policy makers:

- (i) Reinforce the quality of education at all levels.
- (ii) Guarantee access to ECE services for all children.
- (iii) Build a new secondary school and/or expand the existing one.
- (iv) Study the causes of violence at school and effectively tackle the problem.
- (v) Provide after-school educational spaces and recreational opportunities for children and adolescents.
- (vi) Ensure secondary as well as primary students have access to an ESL programme.
- (vii) Address the issue of children lagging behind and ensure the retention of children and adolescents in schools.

- (viii) Identify out-of-school children – and their reasons for not being at school – and develop effective policies to reinsert them into the formal educational system.
- (ix) Guarantee access to special education for all children who need this.

reproductive health information and contraceptives and penalize those who abuse young girls.

(vi) Involve religious organizations in fighting violence against children.

(vii) Implement a programme of mental health care for children, adolescents and women who have been the victims of abuse.

(viii) Invest in the identification and monitoring of cases related to child labour in the territory.

PROTECTION RIGHTS

Violence against children is pervasive and continues to compromise social progress and development. According to stakeholders, the number of cases being reported is below the number actually happening. The protection of children from violence, including the most vulnerable and marginalized girls and boys, must be made an explicit priority. It is recommended that the Government:

- (i) Create a unique database to manage cases related to child protection.
- (ii) Enforce confidentiality and anonymity in those cases where children are the victims or perpetrators of violence.
- (iii) Further develop and strengthen the juvenile justice system, including through the use of specialized judges and appropriate mechanisms for dealing with juvenile offenders in accordance with the CRC.
- (iv) Openly discuss causes of violence against children and create a plan to tackle these.
- (v) Reduce adolescent pregnancies by introducing policies that empower girls, guarantee access to

THE SDGS AND THE FUTURE

The Sustainable Development Goals (SDGs), which were officially adopted at the SDG Summit in September 2015, represent a new framework for global development. The aim is to create a global movement to continue the work done with the Millennium Development Goals (MDGs) as well as advance towards new commitments. Nations should therefore start framing their development plans and policies for the next years based on this globally agreed development agenda.

For Anguilla, that means some strategic changes in terms of producing and using data, fighting discrimination and effectively addressing violence against children. With the agreement on the SDGs, a new wave of international cooperation is expected among the countries and territories in the world, signalling that common solutions should be sought for common problems, increasing the use of resources and maximizing the chances of positive real life impacts for those in need.

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ANNEX 1: GAPS AND RECOMMENDATIONS RELATED TO CHILD RIGHTS

The original of this table was presented in Morlachetti 2015. The reader is recommended to access that document in order to get details about the legislation, gaps and recommendations, among others.

Main gaps	Recommendations and priority actions
Discrimination against migrant children	Clarify the rights of non-belongers and eliminate barriers to ensure equal access to government agencies and public services by immigrant children
Stateless children	Reform the British Nationality Act of 1981 and the Anguilla Constitution to automatically provide citizenship to children born in the territory regardless of their parents' status (This recommendation requires action by the United Kingdom, which is responsible for the reform of the British Nationality Act)
Discrimination against children born in Anguilla of migrant parents	Amend national legislation to automatically provide children born in Anguilla with a birth certificate and residence status, granting them full access to rights on equal terms with national children
Lack of procedure to determine the best interest of the child	Adopt legislation and/or include in current draft bills the explicit recognition of the principle of the best interest of the child Adopt procedures granting the child the right to have his or her best interests assessed and taken into account as a primary consideration in all actions or decisions that concern him or her, both in the public and private sphere in accordance with General Comment 14 of the Committee of the Rights of the Child ¹
Lack of participation and enforcement of the right to be heard	Adopt legislation and/or include in current draft bills the recognition of the right to participate and the right to be heard in all matter that may affect children's rights It should be noted that article 12 of the CRC implies a two-fold obligation: the right of an individual child to be heard and the right to be heard as applied to a group of children (e.g., a class of schoolchildren, the children in a neighbourhood, the children of a country, children

	<p>in a neighbourhood, the children of a country, children with disabilities, or girls).² Both aspects of article 12 should be fully implemented.</p> <p>For instance: individually the right to be heard may apply to proceedings such as complaints and appeals against school decisions (e.g., warnings, suspensions, exclusion); collectively it means the right to participate in designing school rules, adopting decisions such as student councils, committees, etc.</p>
Lack of child care and protection legislative framework	Revise and approve the Child Care Bill (OECS Children (Care and Adoption) model Bill)
Status of children	Repeal any references to “bastards” and any other reference discriminating against children born out of
Lack of independent monitoring and investigation of children rights	Establish a Human Rights Commission/ children’s ombudsperson or commissioners with a broad children’s rights mandate
Lack of appropriate juvenile justice legislation and system	Raise the minimum age of criminal responsibility to bring it into line with the CRC
	Focus on prevention rather than punishment of children and adolescents (rehabilitation and restorative justice) and adopt legislation and regulations to establish a diversion system that deals with children committing minor offences without resorting to judicial proceedings
	Limit Magistrates’/Courts’ broad sentencing powers and explicitly uphold the principle that deprivation of liberty shall be used only as a measure of last resort and for the shortest appropriate period of time
	Due process of law should be fully recognized in the legislation and, in particular, the availability of legal representation of all children subjected to criminal proceedings should be fully implemented without exception
	Recognize and grant the right to appeal or recourse to any measure imposed as a consequence of a guilty verdict. Recourses should be decided by a higher, competent, independent and impartial authority or judicial body
	Establish specialized units within the judiciary, the court system, the prosecutor’s office, as well as specialized defenders or other representatives who provide legal or

	other appropriate assistance to the child.
Lack of ratification of fundamental human rights treaties	<p>Fully integrate into juvenile justice legislation and policy the United Nations Guidelines for the Prevention of Juvenile Delinquency adopted by the UN General Assembly in its resolution 45/112 of 14 December 1990</p> <p>Ratify (extend) the following fundamental treaties:</p> <ol style="list-style-type: none"> 1. International Covenant on Civil and Political Rights 2. International Covenant on Economic, Social and Cultural Rights 3. Convention on the Elimination of All Forms of Discrimination against Women 4. Convention on the Rights of Persons with Disabilities 5. ILO Convention No. 182 on the worst forms of child labour 6. ILO Convention No. 138 on the minimum age for admission to employment and work 7. Optional protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography 8. Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children



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