

PROMOTING THE RIGHTS OF CHILDREN IN IRAQ



REKINDLING HOPE IN A TIME OF CRISIS

A SITUATION ANALYSIS

AUGUST, 2007

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Health, Education, Equality, Protection
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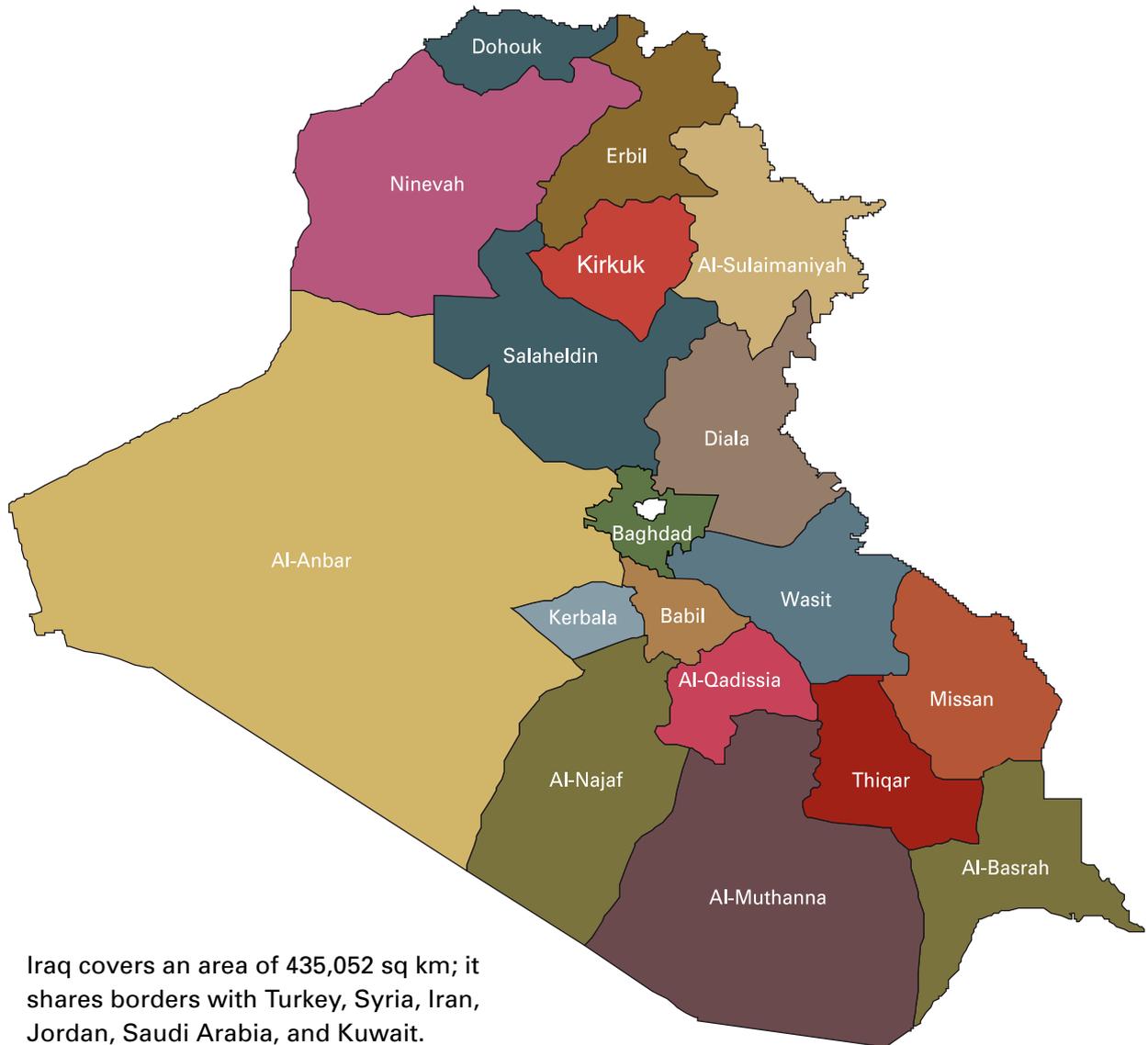
AUGUST, 2007

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Iraq covers an area of 435,052 sq km; it shares borders with Turkey, Syria, Iran, Jordan, Saudi Arabia, and Kuwait. Some 25% of the land is arable, and about half of this land is cultivated. There are four major physiographic regions: mountains (21%), alluvial plain (30%), desert plateau (39%), and upper plains (10%). The climate ranges from cool to cold winters and hot to extremely hot summers.

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This report is dedicated to the children of Iraq, from the northernmost part of the country, throughout its centre, and on to its southernmost tip.

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ABBREVIATIONS

ALP	Accelerated Learning Programme	IMR	Infant mortality rate
ARI	Acute Respiratory Infections	IRCS	Iraqi Red Crescent Society
BCG	Bacillus Calmette-Guérin anti-tuberculosis vaccine	KAP	Knowledge, Attitudes and Practices
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women	MDGs	Millennium Development Goals
COSIT	Central Organization for Statistics and Information Technology	MICS	Multiple Indicator Cluster Survey
CRC	Convention on the Rights of the Child	MMR	Measles/Mumps/Rubella vaccine
CWC	Child Welfare Commission	MOE	Ministry of Education
DPT	Diphtheria, Pertussis, Tetanus vaccine	MOH	Ministry of Health
Fafo	Norwegian research institute	MOLSA	Ministry of Labour and Social Affairs
FAO	Food and Agriculture Organisation	MOPDC	Ministry of Planning and Development Cooperation
FGM	Female genital mutilation	NGO	Non-governmental organization
FSVA	Food Security and Vulnerability Analysis	OFFP	Oil for Food Programme
GDP	Gross Domestic Product	PDS	Public Distribution System
GNP	Gross National Product	PHC	Primary Health Center
ICCPR	International Covenant on Civil and Political Rights	SOWC	The State of the World's Children
ICESCR	International Covenant on Economic, Social, and Cultural Rights	TNP	Targeted Nutrition Programme
ICG	International Crisis Group	U5MR	Under-five mortality rate
ICI	International Compact for Iraq	UN	United Nations
ICRC	International Committee of the Red Cross	UNAMI	United Nations Assistance Mission to Iraq
ID	Iraqi Dinar	UNDP	United Nations Development Programme
ILCS	Iraq Living Conditions Survey	UNHCR	United Nations High Commissioner for Refugees
IMF	International Monetary Fund	UNICEF	United Nations Children's Fund
		WFFC	A World Fit for Children
		WFP	World Food Programme
		WHO	World Health Organisation
		WSSD	World Summit on Sustainable Development



EXECUTIVE SUMMARY

This report analyzes the conditions of Iraqi children today within the limitations imposed by available data and rapidly changing conditions due to the growing humanitarian crisis. It seeks to identify the causes of the present situation, assess development responses, and recommend priority interventions. The human rights to which children are entitled under international conventions inform the analysis, which children's rights during different stages of their life cycle approach. Throughout, the voices of Iraqis themselves - the youth, the civil servants, and civil society - are recorded to communicate what it is like to be a child in Iraq today and to work for children's rights.

The children of Iraq today are heirs to dictatorship, wars, sanctions, and internal strife. They account for half of Iraq's population of 29 million people. Each form of conflict over the past quarter century has taken its toll. Saddam Hussein's regime launched the war with Iran from 1980-1988 and the war with Kuwait from 1990-91. Young men were conscripted into the army and thousands lost their lives or were injured. In 1991, uprisings against the dictatorship were brutally crushed. During the period of UN sanctions imposed on Iraq between 1990 and 2003, isolation from the rest of the world, growing poverty, and a widening gap in knowledge and skills seriously eroded the gains the country had made in child health and education. For the period from 2002 to 2006, under-five mortality in Iraq was, at 41 per 1000 live births, greater than that of all its Arab neighbours.

By the end of 2006, many parts of Iraq were facing humanitarian crisis. The escalating insurgency and counter-insurgency attacks since what has been termed by many as "the invasion and occupation" of 2003 and the sectarian-based violence since February 2006 had displaced 1.7 million Iraqis within the country and 2 million to neighbouring states by December 2006. By July 2007, this figure had increased to 2.2 million internally displaced. Children in displaced communities had limited access to shelter, food, health, and education. These rights were also increasingly beyond the reach of children in the governorates hardest hit by conflict. The UN estimated that over 34,000 Iraqis had been killed in violent attacks during 2006, most of them men. Widows were left to cope as best they could to meet their children's needs, as well as to care for the large numbers of injured. Even in relatively quiet parts of the country, the population struggled with the backlog of deprivation, and the majority depended on government rations.

During this period, elections were held and a new constitution was drafted, briefly raising hopes that the country could resume its arrested development progress. Beyond the security situation, challenges facing the Government included the fact that it was not only impacted by the crisis but also that some parts of government were contributing to it. Moreover, Iraq had a new political system that was instituting new

systems of governance, such as decentralization. The country also had to service a large debt that drained the resources needed for development as well as for humanitarian relief.

In an attempt to chart a road map for development that would also address political imperatives, the Government and the international community drafted an International Compact for Iraq that aimed to “create a mutually reinforcing dynamic of national consensus and international support.” The Compact focused on public resource management, governance and institutions, economic reforms, social sector reforms, and the energy and agricultural sector. As the Compact is taken forward, more emphasis must be placed on the basic services necessary to fulfil children’s rights. However, the Compact cannot be implemented effectively if the security situation does not improve.

International agencies continued to support national counterparts in dealing with the humanitarian emergency. As it became clear that displacement was likely to be a more permanent outcome due to the sectarian nature of civil strife, agencies began to consider community-based approaches to ensure that both host communities and IDPs received appropriate support, with access to all basic social services on a non-discriminatory basis. They highlighted the need to focus on the needs of the most vulnerable, particularly infants, young children, and pregnant and lactating women, to support female-headed households, promote children’s right to protection from forced labour and exploitation, and support children’s right to education by creating temporary learning spaces.

In terms of children’s rights to survival, growth, and development, as noted earlier, Iraq in the early 2000s had under-five and infant mortality rates that were higher than any of its Arab neighbours. The immediate causes included disease, particularly diarrhoeal diseases and acute respiratory infections, and malnutrition, which stabilized at a high rate at the end of the period of sanctions in 2003 and which has worsened since.

The underlying causes included family poverty, with growing numbers dependent on Government rations to survive. Over four million people were said to be food insecure by 2005. The level of the mother’s education was another underlying cause, as was the deterioration in health and water and sanitation services. While nationwide immunization campaigns were remarkably successful in preventing the outbreak of polio and measles, the functioning of the preventative health system continued to deteriorate. Water, sanitation, and electricity had not been overhauled since 1985 and suffered severe damage during the 1991 war. They were partly restored in the early 2000s but damaged again in the 2003 war and have been a target of insurgents and looting since. Courage and innovation by civil servants maintained the systems at a basic level, but their longstanding weakness meant the breakdown in security could quickly lead to collapse.

Basic causes included undeveloped national systems of governance and resource allocation due to the continuing after effects of the 1990-2003 sanctions and the rapidly deteriorating security since 2003. Beyond the security situation, challenges included under-funding of new projects and recurrent costs, serious capacity gaps exacerbated by rapid turnover of staff, and a preference for expensive imported technology rather than more appropriate technology, among other things. The growing difficulty in communication between central and regional government impacted on the ability of relatively quiet areas such as the Kurdistan Region to manage their development.

The Government and the international community were, in spite of the difficulties, able to respond to some of the basic needs for children until 2006. They managed to sustain some of the basic health and

nutrition services for the 4.8 million children under five years of age; address some nutrition issues such as fortifying wheat flour with iron and folic acid; rehabilitate and maintain some water and sanitation services; provide chemicals needed for water treatment plants as well as water-tankers to deprived areas and hospitals; and establish a committee for early childhood education. The Government increased the number of families receiving welfare payments from 160,000 to 1 million in 2006.

Children's rights to education were badly affected by the security situation. Data gathered in 2006 found that 800,000 children were out of primary school, 74% of them girls. The literacy rate of youth aged 15 – 24 was lower than that of the 25-34 age group, indicating that the younger generation was falling behind.

Isolation from developments in the field affected teachers, managers and administrators: 250,000 teachers still needed in-service skills building and administrators needed enhanced capacities for planning and management at all levels. The physical infrastructure was still dilapidated: by 2006, 4,000 schools still needed rehabilitation, 700 needed rebuilding, and 4,500 new schools were needed to accommodate population growth. Meanwhile, the needs of adolescents for information and engagement in social development were greatly underserved, even in quiet governorates.

The Government sought to respond by increasing teachers' salaries and benefits. In collaboration with the international community, it began in-service training; revised part of the curriculum; provided learning materials for primary level students; instituted management information systems; rehabilitated hundreds of schools as well as water and sanitation services (an important factor to promoting girls' education); and piloted initiatives targeting children who missed out on schooling, and integrating basic services to engage local communities in children's right to education.

Children's rights to protection evoked particular challenges. In Iraq vulnerable children include those who are separated from their caregivers, children in need of psychosocial support, those who are exposed to violence, and abuse, those living with disabilities, children exposed to unexploded ordnance, orphans, children driven into the workforce, children forced to resort to begging or living on the street, children in conflict with the law, and early marriage. Important aspects of the legal framework dealing with child protection remained outdated underdeveloped. The Government sought to respond by gathering data on children suffering from different forms of vulnerability, supporting some services for children living with disabilities, developing a mine risk education programme for students in contaminated governorates, piloting an initiative to reintegrate street children with their families, and promoting concepts of child rights rather than welfare approaches.

The development and humanitarian responses to children's rights, while laudable, were far below the scale of the problem. They must be redoubled, drawing on Iraq's own resources as available and by the resources and support of the international community.

In addition,

In conflict areas, more resources are needed to

- Ensure that mobile health, nutrition, water, and education services reach displaced populations as well as host communities.
- Support self-reliance, especially of female-headed households.
- Protect boys and girls from exploitation and abuse.

In relatively quiet governorates and wherever possible country, there is a need to

- Support the capacity to manage development, particularly in the regions, including the capacity to deal with emergencies.
- Undertake intensive outreach and advocacy for girls' education and women's literacy on human rights grounds, particularly in the Kurdistan Region where this has been identified as a major brake on development.
- Pay increased attention to the needs of adolescents for information, participation, and psycho-social support so as to help stem militarization of society.
- Make special investment in vulnerable children to enable them to live productive lives with disability, remain safe from unexploded ordnance, be protected from forced labour and exploitation, and experience justice at the hands of the state and its institutions.

It is important to be prepared for a long-term commitment to the children of Iraq, since security will not materialize overnight. Many parts of Iraq are experiencing a humanitarian crisis and international organizations must be staffed, resourced, and operated accordingly. Some pilot initiatives that have provided services while empowering local communities need to be up-scaled in a way that does not weaken Iraq's national systems: they will help keep the space open for development. The international community must make the resources available to support this work. Children cannot wait and hope for national reconciliation. Investing in their rights is a good in and of itself. At the same time, such investment makes it possible for Iraq to have a future.

INTRODUCTION

WHY THIS REPORT?

Giving Voice to the Human Rights of the Children of Iraq

Half the population of Iraq, which is estimated at 29 million, is under the age of 18; 43% is under the age of 15. These children are heirs to decades of conflict and dictatorship. They face a rapidly changing security, political, and economic situation that has slid into humanitarian crisis. Against overwhelming odds, their families struggle for survival and seek ways to improve their lives. In quieter parts of the country, such as the north and parts of the south, there is some development progress. Yet sectarian violence, insurgency attacks and counter-attacks, massive internal displacement and unresolved governance and economic issues pose a constant threat to stability throughout the country. The basic services on which children rely for survival and development - health, education, water and sanitation - function at greatly reduced and erratic levels that undermine improvement in morbidity and mortality rates.

What is it like to be a child in Iraq? What has it been like to grow through adolescence to adulthood during the past quarter century, when Iraq's invasion of Iran in 1980 led to eight years of war, and its invasion of Kuwait in 1990 to 13 years of sanctions, followed by what is commonly termed the invasion and occupation of Iraq itself in 2003, and escalating crisis and insecurity since then? How can the human rights and needs of children be addressed in the present context?

This report aims to provide some answers to these questions. It seeks to paint a picture of the situation that will communicate the conditions of Iraq's children to the international community, analyzing available data to identify priority needs, possible interventions, and areas for advocacy to realize the human rights of children. It also aims to identify actions necessary to fulfil the human rights of women.

THE APPROACH TO ANALYSIS

The conceptual framework is based on three approaches: the human rights-based approach to development, causal analysis, and the life cycle approach, in line with the established guidelines for a UNICEF situation analysis.

The human rights-based approach to development programming uses the standards and principles established in the Universal Declaration of Human Rights and in international conventions to assess the progress that has been achieved and the road that remains to be travelled, and to reflect this in goals, targets, and indicators. These standards and principles underpin many of the Millennium Development

Goals (MDGs) as well as the goals, targets and indicators of the World Fit for Children report (WFFC). The standards and principles that directly relate to the human rights of children are set out in the Convention on the Rights of the Child (CRC) and in other key international conventions, including the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the International Covenant on Economic, Social, and Cultural Rights (ICESCR), and the International Covenant on Civil and Political Rights (ICCPR). Particularly relevant are the four core principles of the CRC: non-discrimination; the best interests of the child; the right to life, survival and development; and respect for the views of the child. UNICEF looks at the progress towards the fulfilment of human rights at all stages of the life cycle.

The human rights-based approach identifies not only what rights are at stake but also who holds which rights and who has the duty to fulfil those rights. For example, both parents bear duties towards their children. At the same time parents, women and men, are rights-holders as individuals and in terms of the support they need from society and the state to fulfil their obligations towards their children. Government officials, in turn, cannot fulfil their obligations if they do not have access to resources, or authority to make decisions. The human rights-based approach sheds light on the interlocking web of rights and responsibilities, and identifies entry points to promote the fulfilment of rights.

Causal analysis begins by describing the existing situation and then digging more deeply into the causes for that situation. UNICEF distinguishes three levels of causation:

- Immediate causes, such as disease and inadequate nutrition, which directly relate to life, survival and development rights;
- Underlying causes, such as the status of household food and nutrition and other household factors, as well as social services like water and sanitation, health, and education, which promote or prevent well-being and development;
- Basic causes, which relate to issues such as control and distribution of national resources, institutional arrangements, and social organization (including the status of women), and which provide the environment in which rights may or may not be fulfilled.

The use of causal analysis helps to identify those areas that can, and have been, impacted by programme interventions and gaps that need to be addressed.

The life cycle approach provides a way of understanding the key issues at different stages of the life cycle and the development interventions necessary to respond. It helps development practitioners to capitalize on the cumulative effect of investment in human development within and across generations. It clarifies the importance of working across sectors and disciplines, and designing programmes that link nutrition, health, education, and other sectors, while making provision for protection and participation.

Core Principles Underpinning the Human Rights of Children

- Non-discrimination
- The right to life, survival and development
- The best interests of the child; right to protection
- Respect for the views of the child; right to participation

METHODOLOGY

The methodology involved a desk review and interviews with key informants.

- **Desk Review** This included a review of reports, data, and documents collected by UNICEF staff and consultants in 2005 for an earlier exercise, including an annotated bibliography of all documents available at that time. The review was brought up to date by drawing on reports produced in 2006 by international organizations, and internal notes to the file, minutes of meetings, and other documents. In addition, during the course of the review, preliminary analysis of data collected during the 2006 MICS3 became available, a particularly useful resource as MICS indicators now include data that helps to monitor progress towards the MDGs as well as WFFC goals.
- **Interviews with key informants** Interviews were conducted with Iraqi Government officials and citizens, as well as with UNICEF staff and partners, particularly during some meetings with counterparts who visited Amman in November and December 2006, and in phone interviews with counterparts and beneficiaries in Iraq.

Because one of the main objectives of a UNICEF situation analysis is to support programming, this document will, while recognizing the many national and international actors in Iraq, highlight recommendations for UNICEF when discussing initiatives to promote children's human rights in the current context.

LIMITATIONS AND CONSTRAINTS

The paucity of data proved a major constraint in writing this report. Since 2003, Iraq's statistical office and the UN, among other partners, have been able to collect new data on the population and its access to water, health, education, welfare, and other services. However,

- Data has been used as a political tool for decades in Iraq. Before 2003, the authorities closely guarded data, and use of anything other than state-authorized data was seen by the state as a crime to be severely punished. Thus data collected before 2003 cannot be considered to be fully reliable.
- The rapidly deteriorating security situation since 2006 meant that information rapidly became out of date, making it very difficult to form a clear picture of the situation on which to base analysis and recommendations.
- Insecurity in the country meant that no visit to Iraq itself could be undertaken to validate data for this report. UNICEF staff themselves do not go to Iraq, and the programmes are implemented and monitored by local staff whose identity is protected to avoid repercussions for them and their families.

Main Surveys Referenced in this Study

- MICS3, conducted during 2006 by COSIT and Kurdistan Region Statistical Organisation KRSO; total sample size 18,144 households; covered all 18 governorates of Iraq.
- FSVA, conducted both in 2005 and 2003 by WFP and COSIT, with support from UNICEF and others; 2005 survey covered 28,500 households in 16 governorates.
- ILCS, conducted in 2004 by UNDP, in collaboration with COSIT, MOPDC, Fafo; covered 21,668 households in all governorates.

COSIT and the World Bank are undertaking a major household survey and work was reportedly proceeding at the end of 2006 in spite of the very difficult security situation.

For these reasons, it is difficult to show development trends across generations with any degree of accuracy. Where possible, pre-2003 data will be used, but in many cases, the baseline for analysis will be 2003, when more reliable surveys and studies were undertaken, and when there is more than one data set to work with. However, even the authors of post-2003 studies caution that data must be interpreted with care and all surveys experienced serious problems due to the security situation. For example, the ILCS team, which began to collect data soon after the 2003 invasion, found infant and child mortality rates lower than expected, and conducted control interviews to check if all births had been recorded. It then re-interviewed all households using a smaller questionnaire. In spite of these efforts to ensure accuracy of the data, ILCS authors noted that they might still have underestimated infant and child mortality, particularly in the south.¹ Constraints on availability and reliability of data also made it difficult to undertake a solid analysis of regional variations and gender disparities, although efforts have been made to do so.

To partly address these constraints, this document seeks to gauge development trends in Iraq by comparing its situation to that of its neighbours. This gives a sense of the progress that could have been made in the absence of conflict and chaos. For example, by 1990 Iraq had a health system that was in many respects better than that of its neighbours. Even in the early 2000s, other nationals came to Baghdad for treatment because of the quality of service they could receive at low cost. But by 2003, Iraq had only 53 physicians per 100,000 inhabitants, about one third of the level in neighbouring Jordan, Syria, and Lebanon, and since then many medical health professionals have emigrated or fled due to threats on their life. For Iraqi children born between 2000 and 2005, the probability of dying before the age of 40 is estimated at 18% - about three times higher than in Jordan and Syria.²

The report also makes extensive use of interviews with counterparts and beneficiaries, as well as of data from small-scale studies and surveys so as to convey the serious challenges of promoting the human rights of children in Iraq today and to learn from experiences and lessons that can inform future work. Through discussion with Iraqi civil servants and others, it seeks to identify what it is like to “do” development, support humanitarian interventions, or provide basic services in often unimaginable conditions. Interviews have been conducted in different sectors and parts of the country to show how the civil service is able to cope, or not, and what their expectations are from the development community.

In addition, interviews have been conducted with Iraqi youth who have grown up during the past quarter century of war, sanctions, and civil strife, to get a sense of how they are coping and what their aspirations are. The Convention on the Rights of the Child defines children as 18 and below, but we have also reached out to older youth, including those born around the time of Iraq’s invasion of Iran in 1980, the first major war of the past quarter century. These “Voices of Iraqi Youth” provide insights on how to respond to the needs of children today.

REPORT STRUCTURE AND CONTENT

The report begins by providing an overview of the political, economic, and humanitarian context. Chapter 1 sets out the phases through which Iraq and its different regions have passed. It elaborates the context within which children are struggling to survive and thrive. Chapter 2 examines the extent to which the rights of children to survival, growth and development are fulfilled during their early years. It examines

1. ILCS Vol. II, pp. 50-51

2. ILCS Vol. II, pp. 81 and 82.

factors that impede the fulfilment of these rights, including the family's physical and economic security, and how health, water and sanitation services, and national systems and capacities have been affected by past and present conflicts. Within the constraints of available data, it will examine gender differences as well as differences between the governorates.

For Iraqi children the probability of dying before the age of 40 is about three times higher than in Jordan and Syria.

In Chapter 3, access to education by girls and boys is discussed. Education is the critical path to future opportunities, self-reliance and fulfilment, but is increasingly out of reach for the children of Iraq, particularly girls. The report examines the reasons for non-realization of the right to education, including the family environment, state services, and the security situation. As children grow into adolescents, they are in need of special attention and services, including education about sexual health and emerging threats like HIV/AIDS. Their right to participation becomes increasingly important.

Chapter 4 discusses children's right to protection, including the way the humanitarian emergency is exacerbating issues such child labour, homelessness, loss of one or both parents, juvenile delinquency, living with disabilities, and the continuing effect of unexploded ordnance. Not enough is known about these children or how families, communities, and the state cope with their special needs, but the information available has been reviewed, as have pilot interventions that have shown promise.

While recognizing that both parents have rights to and responsibilities for their children, Chapter 5 deals with the reality that women need special support during pregnancy and the early years of their children's lives. Investing in women's nutrition, health, and education provides the best possible environment for their children's growth and development without affecting women's own right to development. The Chapter also discusses women's human rights as individuals, and growing violations of these rights.

Chapter 6 pulls together the analysis and presents conclusions and recommendations. It is argued that, because the international community has been particularly involved in the country's fate since 1990, through sanctions, war, and occupation or by providing humanitarian relief and support for development, it bears particular responsibility for the children of Iraq in this time of crisis. Hope for Iraq's future depends on the investment made in its children today. They, and Iraq, must not be abandoned.



Chapter 1

THE IMPACT ON CHILDREN OF THE CHANGING FACE OF CONFLICT

Other countries in the region have not been strangers to conflict and repression, but none have experienced the extremes of authoritarian rule, two wars, sanctions, invasion and occupation, and civil strife that Iraq has witnessed for the past quarter century. Although the impact on children has differed during different phases, the ultimate result has been suffering and privation, the de-development of Iraq, and lost opportunities for generations to come. And the end is not yet in sight.

FROM 1979 TO 2003: DICTATORSHIP AND WARS

During the 1970s, Iraq made considerable progress in health, education, and infrastructure thanks to its oil wealth and the creativity of its people. However, Iraqis born in 1979 grew up under the authoritarian rule of the late Saddam Hussein, and had to live with the consequences of his decision to invade Iran in 1980. Thousands of young men, many of them minors, were drafted into the army, losing their lives or suffering disabilities. It is estimated that some 375,000 Iraqi and 500,000 Iranian soldiers and civilians were killed during battles as well the indiscriminate shelling and bombing of what was termed the “war of the cities.”

In 1990, Saddam Hussein’s decision to invade Kuwait resulted in much destruction and loss of life in that country. During the 1991 war led by the United States and a coalition force of approximately 30 nations to expel Iraq from Kuwait, countless numbers of young Iraqi men were killed or wounded. Uprisings in the south and the Kurdish region in the wake of the war were brutally crushed by the Iraqi regime.

The United Nations member states imposed stringent sanctions on Iraq after it invaded Kuwait in 1990. The sanctions were not lifted at the end of the 1991 war, and remained in place until 2003. They impacted

greatly on an entire generation's survival, growth, and development.³ Mass starvation was avoided partly because the regime established a public distribution system (PDS) of rations throughout the country, but this could not meet the full nutritional and other needs of families and children.

The impact of sanctions was somewhat mitigated after the introduction of the Oil for Food Programme in 1996. However, throughout the period of sanctions the rehabilitation of primary health centres, schools, and other basic services necessary for children's survival and development was far below the level needed, and there was little investment in new facilities and almost no opportunity to keep abreast of new knowledge. A visitor to Baghdad's second-hand book market in 2000 would find that books and magazines available were published before 1990. A yawning gap in skills and capacity developed between new generations of Iraqis and those who were educated in Iraq and abroad up until the end of the 1980s, who have been retiring, dying, killed, or fleeing the country.

2003 TO 2006: EARLY HOPES, GROWING ANARCHY

In March 2003, the US and its allies invaded Iraq and toppled the regime. Some of the political developments following the invasion were initially welcomed as providing a way out of violence and two decades of de-development. An estimated eight million Iraqis voted in elections for a transitional government in January 2005, although the Sunni community largely boycotted the election.

"We are living on the edge of a volcano. There are many mixed families and everything can explode."

In the spring of that year parliament elected a new president and a new prime minister was appointed. The cabinet oversaw the drafting of a new constitution, which was approved by a majority of voters in October 2005. Parliamentary elections were held in December 2005 for the first constitutionally elected government, which replaced the Transitional Government and has a four-year mandate. Unlike the previous elections in January, Sunni clerics urged their supporters to vote, citing it as the best way to bring the occupation to an end.

However, the new constitution, elections, and government did not bring an end to the violence. In fact, the security situation worsened considerably during 2004 and 2005 due to the growing insurgency and counter-attacks by the Multinational Forces. The voices of those who had warned against institutionalizing sectarianism in Iraq began to be given more of a hearing. For example, the International Crisis Group said in early 2006, the "constitution, rather than being the glue that binds the country together, has become both the prescription and blueprint for its dissolution," and called on all concerned to take measures "to restore a sense of national identity and address Iraqis' top priorities: personal safety, jobs and reliable access to basic amenities such as electricity and fuel."⁴

In the Kurdistan Region, which had begun to run its own affairs after 1991, the situation was relatively quiet during this period. Indeed, the regional government was able to overcome divisions and to unify its political apparatus and ministry structure. Parts of the centre and south were also quiet and able to progress with their development.

3. See UNICEF Iraq, *The Situation of Children in Iraq*, 2002.

4. ICG, *Middle East Report No. 52*, 27 February 2006.

However, while these parts were relatively quiet, civilians lived in fear of clashes erupting anywhere in the country because few areas are ethnically or religiously “pure.” As one resident in a major southern town put it, “We are living on the edge of a volcano. There are many mixed families and everything can explode.”

The attack on UN headquarters in 2003 and continuing attacks on NGOs and foreign contractors, led many international organizations to move their programmes to Amman. Those who are still in Baghdad work and live in the protected enclave of the Green Zone. They do not move around within the country, or even around greater Baghdad. By 2005, Iraq had become isolated from the rest world because of the severe breakdown in security.

2006 AND ON: DEATH, DISPLACEMENT, AND AN ESCALATING HUMANITARIAN EMERGENCY

The insurgency and counter-attacks by Multinational Forces continued to increase during 2006. The bombing of the Askari mosque in Samarra in February 2006 took the violence to a new and far more dangerous level, leading to sectarian-based attacks, ethnic cleansing, and massive displacement throughout the country. The areas of most severe conflict were the governorates of Anbar, Baghdad, Diyala, and Salaheddin. The security situation isolated communities from one another and deepened mistrust and fear based on ethnic and sectarian grounds. Kidnappings, assassinations, car bombs, explosions, sectarian clashes, and crime led to chaos and anarchy and plunged many parts of the country into humanitarian crisis. It is worth noting that Iraq is one of the few countries - Somalia is another - where the most intense violence is within the national capital. This has the effect of isolating other governorates and making it harder to unify the country and implement national policies.

The estimates of Iraqis killed between 2003 and 2006 ranged from 50,000 (Iraq Body Count), to 150,000 (Iraq’s health minister in November 2006) to 600,000 (Johns Hopkins/AI Mustansiriya 2006 study published in *The Lancet*). The UN put the figure of those violently killed during 2006 at 34,452 civilians, and those wounded at 36,685.⁵ While it may be difficult to prove the accuracy of macro-data, micro-data speak volumes. The Associated Press quoted the head of the Baghdad central morgue as saying in early November 2006 that he was receiving as many as 60 violent death victims each day at his facility alone - figures that did not include victims of violence whose bodies were taken to the city’s many hospital morgues or those who were removed from attack scenes by relatives and buried.

Men of fighting age have borne the brunt of the quarter century of conflict. Surveys conducted soon after 2003 traced a decline since 1988 of male life expectancy at birth, which was estimated at

between 62.5 and 65 years, whereas female life expectancy remained relatively stable at around 71 to 72 years. While data showed that the pattern of maternal orphanhood was the same in Iraq and Jordan, Iraqis between 15 and 19 years of age reported 13% of fathers dead compared to 8% fathers dead for the same age group in Jordan.⁶

In the mid-2000s. Iraqis between 15 and 19 years of age reported 13% of fathers dead compared to 8% of fathers dead for the same age group in Jordan.

Men still account for the vast majority of those killed since the post-2003 security breakdown. Thus the number of widows and orphans left to fend for themselves is rapidly increasing. The impact on orphans

5. UNAMI Human Rights Report, 1 November - 31 December 2006.

6. Figures in this paragraph from UNICEF Consolidated Donor Report 2005, p. 55.

and on widows is further elaborated in Chapters 4 and 5. Furthermore, it was estimated that by 2004, more than 220,000 Iraqis suffered chronic illness as a result of conflict - shelling, bombing, imprisonment, and other war-related causes - thus putting further pressure on the ability of families to cope with the situation.⁷

The status of women was of increasing concern after 2003, with growing reports of honour crimes, domestic violence, and violations of the rights to education, health, work and freedom of movement. In the north, the Human Rights Ministry recorded cases of 239 women who had allegedly burned themselves during the first eight months of 2006.

Such cases of what are believed to be domestic violence are said to be under-reported for fear of stigma and to protect family members. In the governorate of Najaf more than 140 female corpses were left unclaimed at the morgue in November and December 2006.

There were increasing violations of women's human rights: honour crimes, domestic violence, non-access to education and health services, inability to work, and restrictions on freedom of movement.

Throughout the country, many of those targeted in attacks are professionals - doctors, teachers, and humanitarian workers - of whom thousands have fled the country. Recently, the respected Iraqi academic who maintained a list of assassinations of Iraqi university professors and academics - over 300 between 2003 and 2005 - was himself assassinated. The loss of so many professionals to death, injury, or exile leaves the new generations even less opportunity for survival and development.

The humanitarian emergency has spread throughout Iraq as large numbers of people moved from one place to another in search of safety and security (see Table 1). The February 2006 shift in

violence that added sectarianism to insurgency has greatly increased the vulnerability for children and families. UNHCR estimated the number of internally displaced persons at around 1.9 million, with 712,000 displaced between February 2006 and February 2007. In addition, there are up to 2 million Iraq refugees in neighbouring countries, particularly in Syria and Jordan. UNHCR has described as this the "largest population movement in the Middle East since Palestinians were displaced following the creation of the State of Israel in 1948. Around one in eight Iraqis is displaced."⁸ Based on current trends of 166,000 people displaced per month, it estimated the internally displaced could reach 2.9 million or even 3.5 million by the end of 2007.

By 2007, one in every eight Iraqis was displaced.

There are also refugee communities within Iraq that have been seriously affected. Among the most vulnerable are the 30,000 Palestinian refugees, many of whom have been in the country since Israel was created in 1948. They are particularly targeted for assassination and displacement. Some families were stranded for months in the desert on the borders with Jordan and Syria as they fled targeting and harassment. Five were murdered on 19 October 2006 and thousands have been evicted.⁹

The Government, which has established a Ministry of Displacement and Migration, has, together with the international community and national agencies, sought to respond to the needs of displaced Iraqis within and outside the country. Emergency assistance has included food and non-food items, water and sanitation, health, education and child protection. But the situation is straining the capacity of the

7. ILCS, Vol. II p. 84.

8. UNHCR Supplementary Appeal Iraq Situation Response, January 2007.

9. UNHCR quotes Palestinian media sources as reporting 655 attacks and 165 Palestinians killed by late 2006.

ministry and of aid agencies, which are identifying great needs but have an ever-shrinking ability to respond. The Government is not able to deliver basic services to its people across the country and is least able to do this in the worst affected districts.

Many areas are out of reach of national and international humanitarian agencies, partly due to raging battles and to prohibitions on access to conflict areas. Increasing attacks on national humanitarian workers, until recently spared, are also making the provision of relief much harder (see Box 1). Militias are reportedly providing some humanitarian relief through mosques and within communities, but little is known about its extent. As one expert put it, “The humanitarian space has all but evaporated as the violence has escalated catching the population in a double jeopardy – just as needs have spiraled assistance has all but been suspended from most sources.”¹⁰

The UNHCR January 2007 appeal said that it and other humanitarian agencies lacked the resources to cope with the “growing numbers of displaced and increasingly desperate Iraqis needing help both within and outside their country.” The greatest needs were not just material. There was also pressing need for the protection and registration of Iraqi refugees in neighbouring states. Within the country, there was urgent need for documentation. Without protection, registration, and documentation, internally displaced Iraqis cannot, for example, access food rations and refugees cannot secure legal employment. A major part of the problem facing Iraqi refugees is that host countries and the international community have not qualified the displacement as a refugee crisis that demands international assistance and national support and access to services.

The impact on children is severe. In Syria, a UN report found that some 30% of Iraqi refugee children were not attending school, and where they were, the schools had few books or facilities.¹¹ Children were being forced to find work, young girls as domestics and young boys in the market. Women and girls were reportedly forced to engage in survival sex and prostitution. Women headed over 10% of households.

Whereas much of the internal displacement between 2003 and 2005 occurred during fighting and was of a more temporary nature, it was recognized that the nature of the displacement after February 2006 has a quasi-permanent character. Even as displaced families and children strained the already weak infrastructure and the resources of host communities, they desperately needed access to basic shelter, health, education and other services. As one expert noted, “With populations remaining displaced for longer periods, the strain on infrastructure and services in impacted communities has become acute; for example, schools serving the newly displaced as accommodation may be unable to function. In addition, tensions with host communities are rising due in part to local price increases and competition over access to basic services, infrastructure and

“A few months before the war, part of our training was to live as though we were IDPs. We felt their same sense of loss of everything. It’s a life no one can imagine, to live in a tent with nothing. Any help we provide them is equal to nothing. When IDPs complain I tell the staff to ignore the complaints because I know how terrible their situation is”.

Director of an Iraqi humanitarian agency

“UNHCR and other humanitarian agencies lack the resources to cope with the growing numbers of displaced and increasingly desperate Iraqis needing help both within and outside their country”.

UNHCR January 2007 Supplementary Appeal

10. UN internal note, January 2007.

11. Assessment of the Situation of Iraqi Refugees in Syria, with UNICEF and WFP, March 2006.

employment. To deal with this new reality emergency responses will have to be strategic and sustainable, rather than the ad hoc, short-term emergency interventions that were needed in the past.”¹²

National agencies and the UN system are constantly reviewing their humanitarian relief strategies to respond to the evolving crisis. During 2006, for example, agencies like UNICEF pre-positioned supplies in warehouses at key points within Iraq to be rapidly distributed to families displaced by conflict: water and sanitation emergency packages that included water containers, purification tablets, soap and sanitary napkins. Water tankers and mobile treatment units were used to provide safe drinking water. Basic health kits were also provided, as well as winter clothes, boots, and blankets.

Table 1 Iraqi IDPs by Governorate

Governorate	Pre 2003	2003-2005	Pre 2006	Newly displaced (Post Samara)	Newly displaced [military operations]	Total 2006	Total displaced families (as of March 2007)	Total displaced individuals (as of March 2007)	Newly displaced families* (as of June 2007)	Displaced individuals * (as of June 2007)
Dohuk	22,452	22	22,474**	6,751***		6,751	29,225	175,350	9,371	56,226
Erbil	32,737	76	32,813	2,322		2,322	35,135	210,810	5,602	33,612
Sulaymaniyah	50,430	35	50,465 ²	4,939 ³	52	4,991	55,456	332,736	10,395	62,370
Total North	105,619	133	105,752	14,012	52	14,064	119,816	718,896	25,368	152,208
Ninewa	1,947	4,625	6,572	6,105		6,105	12,677	76,062	14,925	89,550
Kirkuk	184	1,068	1,252	1,072		1,072	2,324	13,944	3,435	20,610
Anbar	612	1,593	2,205	7,121	3,679	10,800	13,005	78,030	7,650	45,900
Baghdad	2,281	1,586	3,867	20,000		20,000	23,867	143,202	30,000	180,000
Diyala	2,392	3,453	5,845	7,530		7,530	13,375	80,250	11,540	69,240
Salah al-Din	360	3,006	3,366	7,500		7,500	10,866	65,196	11,434	68,604
Total Centre	7,776	15,331	23,107	49,328	3,679	53,007	76,114	456,684	78,984	473,904
Babylon	654	821	1,475	8,400		8,400	9,875	59,250	11,150	66,900
Basrah	15,494	284	15,778	4,300		4,300	20,078	120,468	4,500	27,000
Diwaniya	222	932	1,154	2,800		2,800	3,954	23,724	3,972	23,832
Kerbala	17,490	1,328	18,818	8,452		8,452	27,270	163,620	9,631	57,786
Missan	18,465	406	18,871	4,820		4,820	23,691	142,146	6,583	39,498
Muthanna	424	437	861	1,712		1,712	2,573	15,438	2,350	14,100
Najaf	3,833	160	3,993	7,100		7,100	11,093	66,558	8,995	53,970
Thi-Qar	657	3,569	4,226	5,318		5,318	9,544	57,264	6,117	36,702
Wassit	70	1,232	1,302	8,698		8,698	10,000	60,000	10,995	65,970
Total South	57,309	9,169	66,478	51,600	0	51,600	118,078	708,468	64,293	385,758
Grand Total families	170,704	24,633	195,337	114,940	3,731	118,671	314,008	1,884,048	168,645	
Grand Total individuals	1,024,224	147,798	1,172,022	689,640	22,386	712,026				1,011,870

Source: UNHCR, March 2007

* Source: Ministry of Displacement and Migration, Kurdistan Regional Government and IOM

** These numbers reflect displaced populations, including others at risk, living in collective towns and public buildings as reported by UNOPS.

*** Info from December 2006, not updated in January 2007

12. UN internal note January 2007.

However the constraints are enormous and the space for coordination between external agencies and national counterparts is extremely limited - even though there is a pressing need to strengthen the capacity of government to respond to emergencies. As one senior civil servant put it, "We're not trained on flexible and quick revision of plans." There is also the need for capacity for continuous surveillance and monitoring of the situation to adapt to changing needs and plan for contingencies. Even more importantly, whatever supplies and resources the humanitarian agencies have been able to put in place pale against the scale of the emergency. The international community will need to support national authorities and make the resources available if the children of Iraq are not to be left to their fate.

BOX 1

The High-Risk Task of Providing Humanitarian Relief

On 17 December 2006 gunmen kidnapped 35 people at a national humanitarian organization's office in downtown Baghdad. Some were later released. Others were reportedly warned to stop working for the agency and some were said to have fled the country. The organization has around 1,000 staff and some 5,000 volunteers who work nationwide in Iraq. They had previously been able to maintain their operations in spite of the enormous risks, and continue to struggle to do so. A top official described how in an interview in November 2006.

After 1991 we changed our mandate to deal with socio economic disaster and opened offices in all governorates. They remained part of the national organization even in the Kurdish autonomous areas.

We have no right to ask about the religion, ethnicity, or political affiliation of anyone we help. If any person or office does so, they get fired or that office is closed. It must be one national authority serving one nation and one country

We cannot move our offices to Amman or work in secret like other organizations do. That would be impossible: we have 100 visitors a day. I refused the protection of big walls or electric fences because if we do that we send a message that we are members of an authority that is under attack. We're not. We are a humanitarian agency - we are neutral and we work with all. So far we have been able to work like this, though we could be attacked at any time. We have stopped all kinds of media activities, speeches and statements because of the situation.

The staff member or volunteer in Baghdad has to be of the same ethnicity and from the same neighbourhood. In this way, they are protected by the community. They also provide an early warning system when there are explosions or outbreaks of conflict. In addition, they are also held to account by the community as regards the materials for distribution. And they can distribute quickly.

Through the members or volunteers, we also get information about disability, diseases, orphans, and widows, and we try to respond. For example, we have a programme to provide wheelchairs to those who need them. So far we have distributed 3,000 wheelchairs. I had a dream to collect data for all parts

of Baghdad and then about Iraq, but it is not possible. We have to get information house by house - it is difficult to get it from hospitals. I don't blame anyone for not giving out numbers – the next day the family will get killed.

A few months before the war, part of our training was to live as though we were IDPs. We felt their same sense of loss of everything. It's a life no one can imagine, to live in a tent with nothing. Any help we provide them is equal to nothing. When IDPs complain I tell the staff to ignore the complaints because I know how terrible their situation is.

We are focused on the women and children issue for an important reason. Almost all of those killed are men. They are dead: the victims are their families. We have many thousands of families who consist of widows and orphans. We provide shelter, food and hygiene kits. Our hope for 2007 is to have mobile schools and social centres.

AN ECONOMY MARKED BY VULNERABILITY

The Iraqi economy is primarily dependent on oil. Although crude oil exports are around 1.8 million barrels per day, Iraq faces serious problems of debt, poverty and unemployment due to the costs of war and of reparations it was obliged to undertake after the invasion of Kuwait. The IMF estimated Iraq's external debt burden at \$121 billion. In spite of cancellation of a portion of the external debt (the Paris Club agreed in 2004 to write off 80% of the \$42 billion owed to its members over a three-year period), debt servicing is one of the factors delaying infrastructure reconstruction projects and the revitalisation of the economy. UNICEF estimated in 2005 that nearly half of national sectoral needs remained unfunded.¹³ Put another way, this meant that the funding was not available to deal with the pressing need to rehabilitate schools, primary health care centres, and other basic services that constitute the backbone of children's survival and development. Budget allocations for government departments have been improving and 2007 allocations were in some cases double that of 2006. However, the problem of debt servicing remained a burden.

By 2006, unemployment was estimated at over 60%. Youth accounted for some 25%; women experienced much higher unemployment than men.

GDP per capita has fluctuated sharply at different political periods. It was \$3,600 in the early 1980s, dropping to \$300 after the first Gulf war in 1991. The Oil for Food Programme, established to mitigate the impact of sanctions in 1996 helped to increase GDP per capita to \$770, but it dropped again following the 2003 war to between \$480 and \$630.¹⁴ With inflation now estimated at some 70% the fall in incomes in real terms is dramatic.

Data available in 2003 indicated that almost a third of the economically active population was unemployed, with urban areas more impacted than rural areas.¹⁵ Youth constitute a large proportion of

13. Consolidated Donor Report, p.13.

14. Figures quoted in UNICEF Iraq 2005 Annual Report, an internal document.

15. 2003 survey on unemployment by Iraq Government quoted in UNICEF Consolidated Donor Report p.14.

the unemployed population: over a quarter belonged to the 20 to 24 age group. Women experienced much higher unemployment than men: women's labour force participation rates were estimated at just 14.2% compared to 73.7% for men. In 2005, around a quarter of heads of households in Iraq were not working.¹⁶ By 2006, some local officials and NGOs put the unemployment rate countrywide at over 60%.

According to recent studies by the Ministry of Labour and Social Affairs, by 2006 nearly 5.6 millions Iraqis were living below the poverty line, a 35% increase over 2003. At least 40% of this number were said to live in "desperate deteriorated conditions."¹⁷

The economic situation in the Kurdistan region remained stable during a period when the rest of Iraq has been in turmoil. After 2003, government salaries increased, which improved people's livelihoods. However, between half and two thirds of families in the North were still totally dependent on the PDS ration, and structural poverty still affected hundreds of thousands.¹⁸ Indeed, as will be discussed in Chapter 2, growing numbers of Iraqis now rely on the PDS rations to survive, with adverse implications for child nutrition.

DEVELOPMENT RESPONSES TO THE NATION'S NEEDS: DECENTRALIZATION; THE COMPACT

Before the escalating violence of 2006, there had been changes that could have helped to build a different future. While the focus was on fears of fragmentation and the potential for conflict in mixed regions, less attention was paid to the Government's post-2003 efforts to begin devolving power to the regions as set out in the constitution. Governorates were given a small budget that they control directly, and there was discussion between governorates and the centre as to which agency would be responsible for what services. For the first time in decades Iraqis were beginning to voice their views on their priorities and vision for development in different cities and governorates, and to challenge assumptions made on their behalf by central planners or international agencies. At the same time, due to the heavily centralized nature of development in the past, local planners still respected central decision makers in Baghdad as regards technical issues such as quality control of medicines or supplies.¹⁹

Several problems emerged with decentralization unrelated to the security situation. For example,

- Some donors dealt directly with governorates leading to duplication of effort and to the installation of systems that were incompatible with national systems.
- Much weaker planning and design capacities made the process of capacity development, which is a slow one at the best of times, more difficult. As a planning ministry official put it, "We plan, they implement. Currently we are giving the governorates responsibility for some things, e.g. in data entry and processing. When their capacity is strengthened through decentralization and we have staff with higher degrees in government it will be possible to hand over that responsibility. We will see a difference within four or five years."

If the security situation allows and the Compact moves forward, it must emphasize the basic services that children need for survival and development, particularly given the backlog of deprivation and lost opportunity.

16. FSVA 2006, p42.

17. Senior MOLSA official quoted in internal UN note.

18. Save the Children UK survey.

19. Interviews with UNICEF development practitioners in education and health, November 2006.

- Some parts of the central Government were able to function better than others. Rapid turnover in many ministries, often for political reasons, affected institutional memory, created capacity gaps, and made sustainable planning and coordination, including with the international community, very difficult. However, some staff changes did bring more qualified people to the fore.

In 2006, the government took the initiative to work toward an International Compact with the international community working on Iraq. The Compact aimed to “create a mutually reinforcing dynamic of national consensus and international support. Domestically the aim is to build a national Compact around the government’s political and economic program and to restore the Iraqi people’s trust in the state and its ability to protect them and meet their basic needs. Internationally, the Compact establishes a framework of mutual commitments that will support Iraq and strengthen its resolve to address critical reforms and policies.” The Compact focused on public resource management, governance and institutions, economic reforms, social sector reforms, and the energy and agricultural sector.

As the UNAMI Human Rights Report for September-October 2006 noted, the Compact was an important development, in that it constituted an agreement between “the Government and the international community to achieve peace, stability and development based on the rule of law and respect for human rights.”

However, development plans, even ones that take political movement into account such as the Compact, are unlikely to be achieved without political reconciliation. A draft UN report at year-end noted that efforts towards an internal consensus needed to be intensified as a matter of urgent priority, “otherwise, the Compact process risks being swamped by Iraqi realities on the ground.” It added: “the only realistic, responsible and feasible solution is a political settlement in which all parties agree to negotiate their differences.” If the security situation allows and the Compact moves forward, it must emphasize the basic services that children need for survival and development, particularly given the backlog of deprivation and lost opportunity.

In late 2006, the UN Country Team for Iraq reviewed its activities to better respond to the needs in Iraq, and proposed a 2006 - 2008 Joint Priority Action Plan to support the Government in better managing national affairs at both the central and regional and local levels, while providing basic social services to the most vulnerable populations. Among other things it hoped to strengthen government capacity for emergency preparedness and response. The Plan identified 25 particularly vulnerable districts in northern, central and southern Iraq that it proposed to address through an area-based approach that would encompass basic services, economic development, and local governance. At the same time, preventive activities such as child immunization, basic teaching support, and animal health programmes would continue to be supported through national interventions.

While some large-scale foreign contractors have had to pull out due to security threats, leaving billions of dollars’ worth of incomplete projects behind, some inter-governmental and non-governmental agencies have been able to sustain interventions by working closely with Iraqi staff and by securing community ownership. The director of a Western NGO was quoted recently as saying “People won’t attack projects they feel ownership of.”²⁰ UNICEF, which has had an office in Iraq since 1983, is able to deliver an annual

20. Quoted in an Associated Press report, October 2006.

\$100 million programme by working closely with some 125 well-qualified and experienced Iraqi monitors, technicians and engineers in the fields of health, education, water and sanitation, and child protection.²¹ The World Bank, reporting to donors in May 2006, noted, “While the volatile security environment can disrupt project implementation, the Bank’s reliance on Iraqi execution and the selection of project sites has a mitigating effect.”

RESPONDING TO CHILDREN’S HUMAN RIGHTS IN A CONTEXT OF CONFLICT

In spite of some of the positive interventions described in the previous section, it should be emphasized that neither the humanitarian nor the development responses of the international community are commensurate to the scale of the problem. International humanitarian relief and development agencies believe that the escalation in violence since February 2006 has resulted in an over-stretched, under-capacitated and vulnerable system of basic services that is demonstrating symptoms of collapse, and that in many parts of Iraq a humanitarian crisis is in evidence. Action is needed to address humanitarian needs, for the IDP and refugee populations and for the population at large.

“We are focused on the women and children issue for an important reason. Almost all of those killed are men. They are dead: the victims are their families. Thousands of families consist of widows and orphans”.

Director of an Iraqi humanitarian agency

The conflict is impacting on children’s human rights in many ways and very large numbers of children are now extremely vulnerable:

- A fast-growing number of children are orphaned and live with one parent or none.
- Hundreds of thousands are displaced within or outside Iraq, with limited or no enjoyment of rights to shelter, food, health care, or education.
- Many are being forced to work or are exposed to sexual exploitation.
- Hundreds of thousands live in poverty and insecurity, and do not enjoy rights to physical survival and growth, or to development.

Girls and women are also very vulnerable. Among other things,

- Many more widows are left to fend for themselves and the household, including caring for the wounded.
- Conservative beliefs are leading to violations of the rights of women and girls to life, physical integrity, education, health, and freedom of movement.
- Social traditions make it more difficult for women to find employment.

If the security situation in the country does not improve development plans such as the Compact will not be implemented. Iraq’s Government is not capable of responding to either development or humanitarian needs. It is impacted by the crisis - and some parts of government are part of the crisis. Moreover, Iraq’s present political system is new, and is moving in new and uncharted waters, such as decentralization,

21. Within the framework of the UN Strategic Plan for Iraq, the 2005-2006 UNICEF country programme includes: improving access to clean water and sanitation; sustaining basic health and nutrition services; improving access to quality education; and child protection. UNICEF has also sought to support national planning in the social sectors and data collection and analysis, particularly MICS3, undertaken in 2006.

while having to deal with nearly two decades of arrested development. The debt burden drains the resources the country needs for development as well as for humanitarian relief.

The UN system and other humanitarian relief agencies are seeking ways to continue to provide basic services and to support national counterparts in dealing with displaced populations as well as in meeting the needs of the population at large. As the emergency has escalated, agencies have sought to identify other strategies, such as:

- A community based approach to ensure that both host communities and IDPs received appropriate support, with access to all basic social services on a non-discriminatory basis;
- A focus on the needs of the most vulnerable, particularly infants, young children, and pregnant and lactating women;
- Supporting self-reliance, especially of female-headed households;
- Promoting children's right to protection from forced labour and recruitment;
- Protecting women from threats, attacks, and exploitation; and
- Promoting displaced children's right to education, including by providing tents and blackboards to create temporary learning spaces.

The international community must make the resources available to support this work. Children cannot wait and hope for national reconciliation. Humanitarian relief and development programmes supported by UNICEF and others help keep the space open for national reconciliation and development. Ensuring that children are well nourished, healthy, and in school, makes it possible for Iraq to have a future.

BOX 2

Voices of Iraqi Youth

"We do the best with what we have, but we are threatened..."

I first became aware of war when I was a child. We were in the Kurdish region on a trip, and someone said Iraq had invaded Kuwait, so we went back home to Nasiriya. Because of the war, we moved to a safer place in our governorate.

Nothing was normal - there would be a sudden raid and you would have to go to the shelter. We went to my grandfather's once for security - no water, no electricity. We used to get water from the river and boil it. Gas was hugely expensive but we managed to get it.

The siege on Iraq exhausted the country. But things were still better at that time than they are now. Now there is fear, killing, terror. Now you walk in the street in terror.

I studied medicine, and have just completed my internship at the hospital. Half the people are dead and we don't know their families. When your patient dies, you die a little too. There was one horrible day recently when there were 200 dead - did you hear about it?

We do the best with what we have, but we are threatened. Now I feel we are the target. About half or more of my class has already gone abroad or have quit and stay at home. Those who are still here want to leave. Everyone in Baghdad is trying to find a way to leave Iraq.

Every human hopes for a better future, for security. To realize my dreams, I want to leave Iraq.

Ahmad, Baghdad, November 2006



Chapter 2

Fulfilling Children's Rights in the Early Years: Survival, Growth and Development

Securing children's rights during their early years does not only fulfil basic rights to survival and growth. The investment made during this period in nutrition, health, and early stimulation and learning also determines whether children will be able to enjoy such rights as health, education, work, and recreation as adolescents and adults, and to fulfil their potential as active and creative members of society.

The rights of the children of Iraq have been the subject of international controversy since the early 1990s. Supporters of the international sanctions imposed on the country in the wake of Iraq's invasion of Kuwait claimed that the situation was better than depicted and insisted that sanctions were necessary to bring about regime change. Opponents noted that the entire population was being punished for the actions of its leadership, and that those suffering the most were the most vulnerable members of society - its children. By 2006, Iraq had nearly five million children under five.

Under-five Mortality Rate

Probability of dying between birth and age five, per 1,000 live births.

Infant Mortality Rate

Probability of dying between birth and one year of age, per 1,000 live births.

Data collected after 2003 showed that Iraq had under-five and infant mortality rates that were higher than any of its Arab neighbours, after having had similar rates in 1990. The immediate causes included disease and malnutrition, which stabilized at a high rate at the end of the period of sanctions in 2003 but which worsened since. The underlying causes included family poverty, the level of the mother's education, and health and water and sanitation services. Basic causes included the continuing after effects of the 1990-2003 sanctions and the rapidly deteriorating security since 2003, which meant national systems

of governance and resource allocation have remained underdeveloped. These immediate, underlying and basic causes for non-fulfilment of children's rights are discussed in more detail below, following the presentation of more data on child mortality presented.

INFANT AND CHILD MORTALITY: STALLED PROGRESS, GROWING CRISIS

One of the overarching goals of the MDGs and A World Fit for Children is to reduce infant and under-five mortality. Monitoring progress towards this goal is made all the more difficult in Iraq due to disagreements on data. During the 1990s, data collected on infant and child mortality in Iraq revealed sharp deterioration in mortality. These findings were questioned in the wake of post-2003 surveys that reported lower rates than those of the 1990s. There are plans to convene a meeting of international experts to study the different data sets and to arrive at a common understanding of the factors behind the different results over the past decade. Until they arrive at their conclusions, two points are worth making.

Although they started from a comparable base, Iraq's Arab neighbours have overtaken it in the progressive realization of the rights of children to life and survival.

- The 2006 MICS3 found a U5MR of 41 per 1,000 live births and an IMR of 35 per 1,000 live births (data reflect the situation between 2001 - 2006). Thus, one in 24 children born in Iraq die before their 5th birthday, with 85% of deaths occurring during the first year of life.
- Child mortality rates in Iraq began to be affected during the 1980s, partly as a result of the hardships of the Iran-Iraq war and never recovered.²² If generations of Iraqi children had not lived through 25 years of war, sanctions, and occupation, the country might by now enjoy mortality rates as low as those in neighbouring Saudi Arabia, a country with a comparable size of population and oil wealth, or even as low as Syria, which has a smaller population but whose ruling party espoused a centrally planned economy and society similar to that of Iraq.

As Table 2 shows, although they started from a comparable base, Iraq's Arab neighbours have overtaken Iraq in the progressive realization of the rights of children to life and survival.

Table 2 Iraq and Its Neighbours: Stalled Progress

	Iraq	Jordan	Kuwait	Saudi Arabia	Syria
U5MR 1990	50	40	16	44	39
U5MR 2005	41 (2001 - 2006)	26	11	26	15
IMR 1990	40	33	14	35	31
IMR 2005	35 (2001 -2006)	22	9	21	14

Data on Iraq from 2006 MICS3; data on neighbours from SOWC 2007

22. "The Impact of the Oil-for-Food Programme on the Iraq People," p.52.

Since many parts of Iraq were convulsed by humanitarian crisis by the end of 2006, infant and child mortality rates are certain to rise again. Increasing malnutrition and disease for a considerable proportion of the population will take its toll on children first.

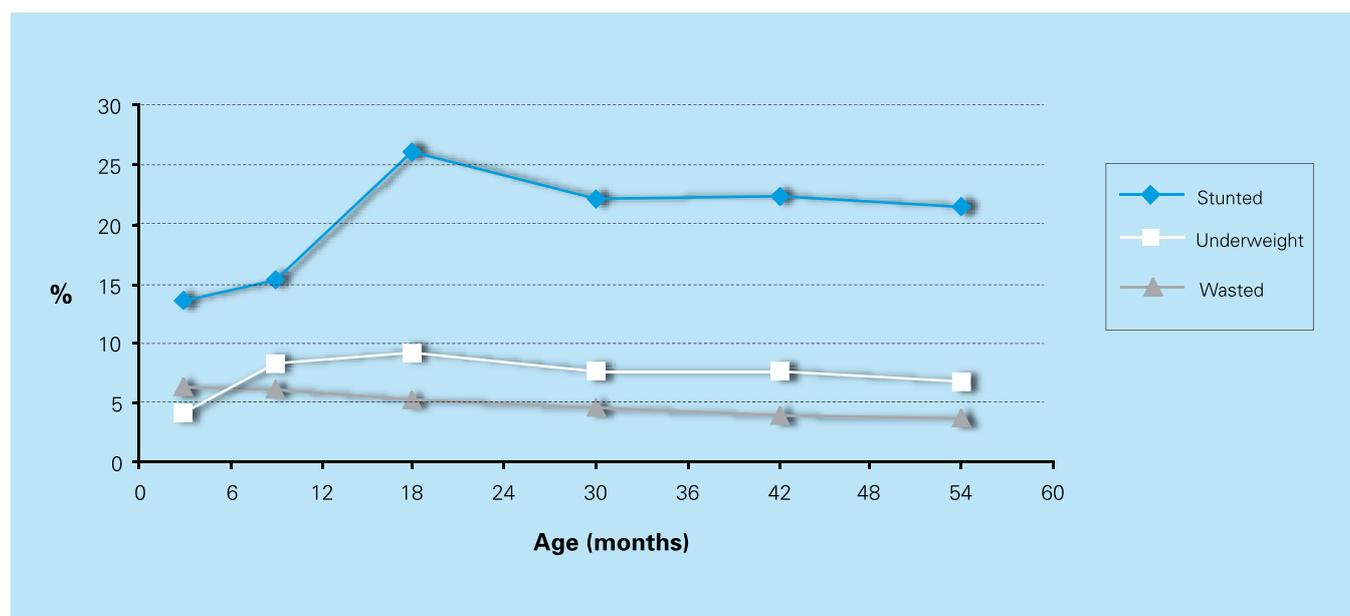
TOO MANY SUFFER MALNUTRITION AND DISEASE

The major immediate causes of child mortality were diarrhoeal diseases and acute respiratory infections (ARI, or suspected pneumonia), exacerbated by poor nutrition and low birth weight. The 2006 MICS3 showed that 13% of children under five had diarrhoea in the two weeks preceding the survey. Diarrhoea was highest among infants between six and 11 months of age, affecting nearly a fifth of this age group. About 13.4% of children under five had ARI in the two weeks prior to the survey, with ARI also affecting nearly a fifth of infants. MICS3 data revealed that one out of every five children (21.4%) under five suffered from chronic malnutrition, which was reflected in stunted growth (height for age); 7.6% were underweight (weight for age), and 4.8% were wasted (weight for height).²³ More children between the ages of 12 and 23 months were stunted compared to children who were younger or older (see Figure 1).

By 2006, a fifth of Iraqi children under five years of age suffered chronic malnutrition.

There were differences between rural and urban areas in child malnutrition. While 19.4% of children under five were stunted in urban areas, according to MICS3, 24.4% were stunted in rural areas; 7.1% were underweight in urban areas compared to 8.4% in rural areas. The extent of wasting was the same in both urban areas and rural areas (4.8%). It is worth noting that there were no marked gender-related differences

Figure 1: Percentage Of Iraqi Children 0-59 Months Who Are Undernourished, MICS3 2006.



²³ The 2005 FSVA survey found one out of every four children under five suffered from chronic malnutrition, with 26% suffering from stunting; 6% were underweight and 9% wasted. Some of the discrepancy between the FSVA and MICS3 could be because the FSVA was conducted in summer, when the incidence of diarrhoea is higher, while MICS3 was conducted in winter. However, the difference in the prevalence of stunting cannot be explained in this way because this condition evolves over time. More analysis will be needed to understand the differences in findings between the two surveys

in the prevalence of stunting, according to MICS3 and other food security surveys. This confirmed a UNICEF study in 2002 that discriminatory feeding was not practiced in Iraq. Underlying causes such as poverty, inadequate feeding practices, and the widespread use of infant formula will be elaborated in the next section. The impact of the security situation will be discussed as part of the discussion of basic causes later in this chapter.

With 1.7 million displaced by the end of 2006 and the IOM estimating that internal displacement was occurring at the rate of 1,000 a day, tens of thousands of infants and under-fives are exposed to malnutrition and disease, as are the children who live in areas where the displaced are seeking refuge in large numbers and where services are over-stretched.

By way of illustration, Anbar was the governorate experiencing the strongest insurgency and counter-insurgency operations. It already had high levels of poverty and weak infrastructure. Yet it received the largest numbers of IDPs between February and December 2006 as Iraqis sought shelter with co-religionists. IOM monitors reported that food was among the highest priority needs and that "more IDPs have no access to the Public Distribution System (PDS) than in almost any other governorate. A recent WFP survey revealed a very high malnutrition rates among children under five years old in Anbar."²⁴ IOM monitors also reported that "since the health service is inadequate in the governorate for the entire community, vaccinations and health care for children and pregnant women are poor and inadequate". Water was also identified as a priority need and, "although a high number has access to a source of water, IDPs in Anbar must travel further distances than in other governorates to fetch their water." As was noted above, these conditions constitute immediate causes of infant and child mortality.

Anbar was one of the least secure of Iraqi governorates, but even in Wassit, one of the more secure, IDPs faced serious problems in accessing shelter and food. IDPs in Wassit cite shelter, work and food as their top three priorities. Some 69% of families interviewed said they were not able to access the PDS rations, which they attributed to insecurity of transport. Although most of the displaced had access to health services, nearly a fifth had suffered from infectious diseases in the previous 45 days.

MORE AND MORE START LIFE IN POVERTY

Poverty and other factors at the household level such as illiteracy are among the major underlying causes for the illness and malnutrition that lead to mortality and morbidity. In 2003, some 2.6 million people (11% of the population) were said to be extremely poor and it was estimated that another 3.6 million people would become food insecure if the public distribution system (PDS) of rations were to be discontinued.²⁵ The PDS was established by the former regime in the early 1990s in response to the imposition of sanctions and continues to provide Iraqi citizens with detergent, infant formula, milk, pulses, rice, salt, soap, sugar, tea, vegetable oil, weaning cereal and wheat flour.

By 2005, the economic situation had greatly worsened: over four million people (15.4% of the population) had become food insecure and it was estimated that another 8.3 million people would become food insecure if they did not receive the PDS ration.²⁶ In spite of the importance of the PDS to families, its physical collection was problematic for 14%

In 2003, some around 11% of the population was living in poverty - by 2005, this had increased to 15.4%.

24. Data in this paragraph from IOM Anbar Emergency Needs Assessment Report 20 November 2006.

25. FSV 2006, p. 26.

26. Ibid, p. 32.

of the Iraqi population; 6% reported it was a psychological burden because they had to go to distribution points more than once, often queuing for hours when security concerns were very high. Some 5% of households said it imposed an additional financial burden because they had to pay for transport to pick up the commodities. There was discussion of lessening dependence on the PDS during the economic reform process, but a political decision was made to maintain it.

Poor dietary diversity and inadequate feeding practices also result in malnutrition. The 2005 food security study found that 18% of households consumed just two food groups on a daily basis. Such households consumed bread daily, rice four days a week, and fats and vegetable oils six days a week; other food items were rarely if ever eaten.²⁷ This type of diet is poor in terms of macro and micronutrient intake. The survey found that another 25% of households could be defined as borderline in diversity, consuming just three food groups daily. Box 3 illustrates some of the mechanisms people living in poverty adopt to manage food insecurity.

Another inadequate feeding practice is the continued widespread use of infant formula, which is still part of the PDS in spite of intensive advocacy by organizations such as UNICEF to change the policy. The formula contributes to malnutrition and disease because it is sometimes over-diluted to make the supply last longer, which aggravates malnutrition, and because it increases exposure to disease through the use of unclean water. As one study noted, "the natural protection provided by breastfeeding up to six months was more important than usual" because the impact of war conditions on water treatment and sewage plants put infants at high risk of diarrhoea, leading to additional deaths.²⁸

Box 3 **How Poor People in Iraq Try to Manage Food Insecurity**

Change of diet by

- Consuming low quality and cheaper foodstuffs

Increase food availability over the short term by

- Borrowing food or requesting help from relatives, friends, neighbours
- Buying food on credit
- Selling some food ration items to buy others
- Attending religious ceremonies, weddings, funerals, in order to eat

Ration food by

- Consuming less food within meals
- Reducing number of daily meals
- Reducing adult consumption to secure need of children
- Reducing expenditure of family on other items so as to buy food
- Feeding employed members of family rather than those not working
- Decreasing number of household members by sending some members to live with relatives or other families

From the Food Security and Vulnerability Analysis, 2006
World Food Programme, p.34

27. FSVA, p. 54-55.

28. "The Impact of the Oil-for-Food Programme on the Iraq People," p.39.

Different infant formulas are included in the PDS, some of which are suitable for infants 0-6 months and others for 6-12 months, which are then used irrespective of the child's age. Language and literacy also affect the way infant formula is prepared. The instructions are written in English and Arabic but not in Kurdish. The rate of illiteracy is high especially in the Kurdistan region. In addition to promoting breastfeeding, it is important to take these issues into account, to replace the formula with an increase in appropriate complementary food for children above six months, to educate mothers on how to prepare nutritious weaning mixes. It should be noted that conditions of conflict lead to psychological problems that may constrain a woman's ability to breastfeed. At the end of 2006, parliament discussed a plan to remove infant formula and replace it with nutrition for pregnant and lactating women, and ministry officials were hoping it would no longer be included in the food basket in 2007.

Only one in four children aged less than six months are exclusively breastfed (25.1%). As can be seen from Table 3, Iraq does better in terms of exclusive breastfeeding than Kuwait, but less well than the rest of its Arab neighbours. Reasons for the improvement in exclusive breastfeeding in Iraq may include less mobility due to the security situation, and delays in the PDS rations. Girls are more likely to be exclusively breastfed and have timely complementary feeding than boys, while boys are breastfed slightly longer than girls. Exclusive breastfeeding rates up to six months of age are low in the Kurdistan Region governorates: 6.9% in Erbil, 12.8% in Suleimaniya and 15.4% in Dohuk - compared to the national average of 25.1%.

Iodine in the diet is the single greatest cause of preventable mental retardation; lack of iodine can lower the average intelligence quotient of a population by as much as 13%. MICS2 conducted in 2000, found

Table 3 Who's Doing Better On Exclusive Breastfeeding

	Iraq	Jordan	Kuwait*	Saudi Arabia*	Syria*
% of children under 6 months exclusively breastfed (1996-2005)	25.1	27	12	31	81

Data on Iraq from preliminary findings of 2006 MICS3; data on neighbours from SOWC 2007.
* Data refers to exclusive breastfeeding for infants under four months.

Box 4

Working Parents, Malnourished Children

The father is an employee, the mother a teacher. They have two children. The children leave the house at 7:30am without breakfast with the mother, and she buys them chocolate in school. Then they don't eat lunch. She tries not to give them chocolate but they demand it.

The children have constant diarrhoea and are malnourished. The markets are full of junk food now, and families can buy it all the time.

Box 5 Monitoring Nutrition

I don't have a problem getting to my job here in Basrah, but there's a problem of going to Baghdad for workshops or their coming to the South for monitoring and planning. The director visited us in January 2006 but he hasn't been here since. We do our work through email, mobile phones, and by mail. The fact that we have to go through the capital to contact international organizations sometimes causes delays. Those that have offices or focal points here move faster.

We organize a lot of our work here in the governorate and sometimes include other governorates. We've had a lot of advocacy on exclusive breastfeeding, in all schools and colleges. I don't believe the nutrition figures are as poor as the surveys say, but it's a fact that malnutrition has increased in the past two years, partly due to the security situation. The problem with the ration is the amount because it sometimes lacks some of the commodities. That's due to the ministry of trade and problems with contracts.

There's no agriculture in the south any more. Previously, the government used to give out seeds but now people have to buy this from the market and can't afford it.

Some of my female colleagues have left their job due to the security situation, but I decided to brave it out. But as a woman, I'm scared to use my own car any more to get to work. I ask someone to take me.

Manager, Governorate District of Health, Basrah
November 2006

that 40% of households consuming iodized salt, a result achieved after an intensive advocacy campaign, the adoption of legislation and an action plan in 1996, and the use of only iodized salt in food rations. However, MICS3 showed that only 28% of Iraqi households were using adequately iodized salt (15+ PPM), with the highest in Dohuk Governorate at 67% and the lowest in Missan Governorate at 9%. The reasons include the collapse of centralized state control of salt iodization and mechanisms to enforce the legislation imposing its use.

Micronutrients are also a concern, and a post-2003 survey found that iron, absorbable folate, and vitamins A and D were not at satisfactory levels.²⁹ Studies in 2003 and 2004 also restated earlier findings regarding the high prevalence of anaemia, which was said to be around 60% in 1999.

Illiteracy is a key factor in the nutritional status of the child, particularly the mother's literacy. MICS3 confirmed that children whose mothers have secondary or higher education are the least likely to be underweight and stunted compared to children of mothers with no education. Mothers with non-standard curriculum education have children with the highest percentages of underweight, stunting, and wasting compared to all other women.³⁰ Not enough is known about the impact of the level of fathers' education on their children's nutrition.

29. ILCS, p. 63.

30. The FSVA had also found malnutrition to be much more closely related to the caretaker's levels of education than to family income. Among children with caretakers who never attended school, the prevalence of stunted children was 35%, while among children of caretakers with secondary school or higher, 17% were stunted. The level of underweight children falls steadily from 14% to 8% with secondary or higher education of the caretaker. P. 61.

MICS3 revealed that 9.4% of children in Iraq were overweight, with more children being overweight in rural areas than in urban areas. The increase in the number of overweight children can be seen as part of a regional trend.

MISSING OUT ON EARLY LEARNING AND STIMULATION

Research shows that attendance in kindergartens between three and five years of age is a key factor in improving educational attainment. However, children under three years old also benefit greatly from early care and stimulation within the family and community. However, the importance of the early years to children's future intellectual capacities is not yet widely recognized within the Arab region.³¹ Two early stages of pre-school development were identified as a priority at the World Conference on Education in Jomtien in 1990:

- Between the ages of nine months and three years, childcare needs to focus on basic socialisation and early cognitive development.
- From the ages of three to five years the focus should be on pre-primary education together with adequate care at home.

In countries pursuing development without the scourge of war, programmes offer alternatives to parents and strengthen their capacity to provide a stimulating environment for their child, both inside and outside the home. Such programmes give children solid foundations for reading, writing, and numeracy; provide an opportunity to cover health, hygiene and nutrition; and introduce early socialisation skills.

In Iraq, only 2.5% of the early childhood population attended pre-school, the majority in the urban areas. Millions of children are thus deprived of the opportunities provided through early learning. Early learning is also crucial for children living with disabilities, as is described in Chapter 4 Box 16, which summarizes the experience of a pilot project in the Kurdistan Region to provide early education to children with Down Syndrome.

HEALTH SERVICES STRUGGLE TO KEEP DISEASE AT BAY

The poor condition of health services is another major underlying cause for child mortality and morbidity. Preventative health is in serious decline, due to, among other factors, falling numbers of health professionals, and inability to access services that do exist because of the security situation. In some poor districts, it took hours to reach hospitals and clinics due to lack of fuel for transport, the security situation, or unavailability of nearby facilities.

The lack of capacity is greatly exacerbated by the staff turnover, particularly at higher levels due to appointments on political grounds. There has been a break in institutional memory of service systems, and abrupt changes in decision-making. There is insufficient understanding of the importance of policy reform and capacity development. In current conditions, it is much easier for both counterparts and international organizations to support a clinic or renovate a school rather than to tackle policy or systemic planning issues.

With the exception of nationwide immunization campaigns (described below) and specific areas such as quality control, ties between the centre and the governorates are reportedly fraying, and directorates are

31. See "Children in the Arab World: Understanding the Present, Shaping the Future", UNICEF, League of Arab States, 2003.

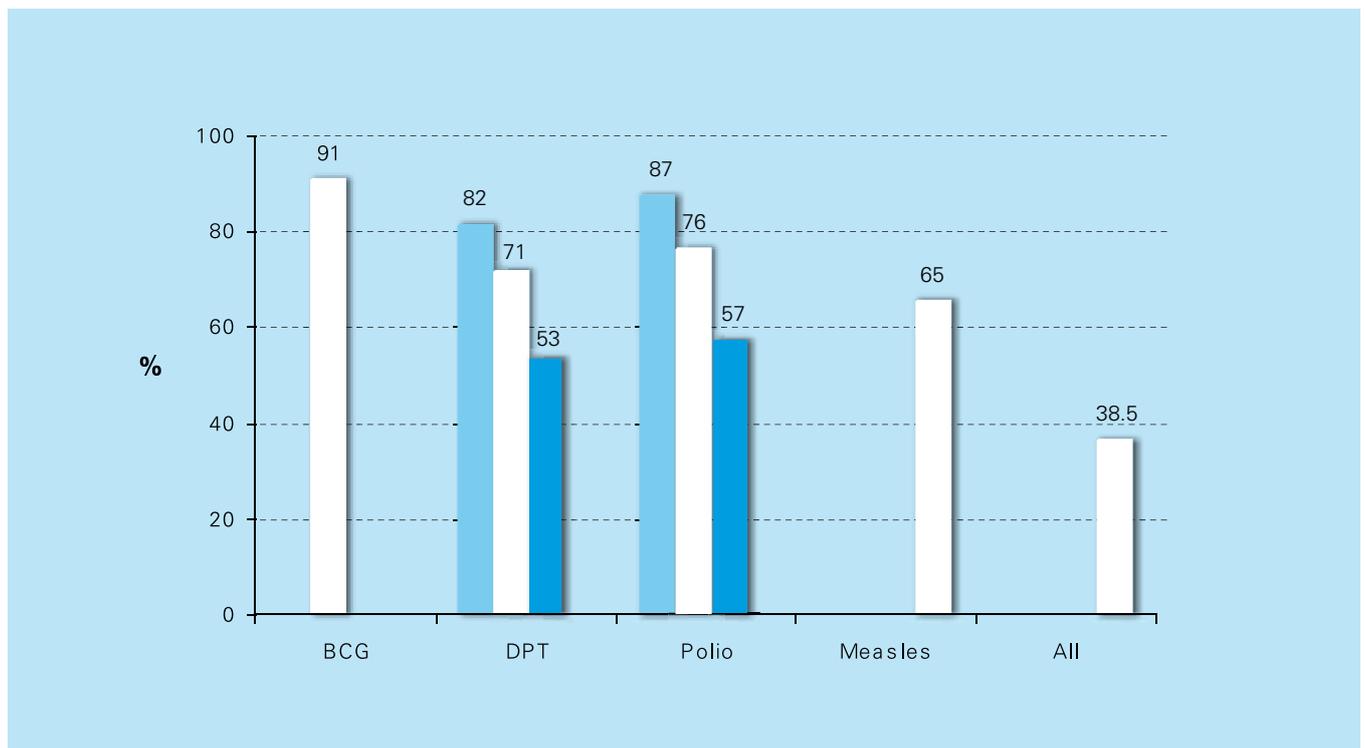
being left on their own to manage as best they can, with serious implications for sustainability. Moreover, the capacity to plan at lower levels is judged to be relatively weak, resulting in a good deal of waste. Perhaps the most serious current problems involve politicization of the health service. These reports have led some donors to pull out of supporting certain sectors. According to experienced development practitioners who have monitored the situation over time, entire systems are functioning because of the accumulated dynamics and could collapse without warning, quickly impacting health and nutrition.

Against this background, and given the very dangerous security conditions in much of the country, the immunization campaigns that Iraq has managed to organize are little short of miraculous, and have helped to boost the population’s resistance to disease. In spite of the security situation, Iraq continued to be polio free even though neighbouring countries were affected by outbreaks of polio. The last case of polio in Iraq was in January 2000.

Nationwide immunization campaigns were still - miraculously - organized in 2006. But the already weak health system could collapse without warning under the added strain of the humanitarian crisis.

The Ministry of Health has launched polio and MMR (measles/mumps/rubella) campaigns in each of the past three years, which contributed to the polio-free status of Iraq and the dramatic reduction in measles and mumps. During 10 months of 2006 only 116 measles cases were reported (90% of these cases were in two districts in the Wassit Governorate),

Figure 2: Percentage of Iraqi children 18 -29 months who received immunization by age 12 months (by age 18 months for measles). MICS3 2006.



indicating a nearly 70-fold reduction from 9,081 clinical cases in 2004 and 908 cases in 2005. An even greater positive trend was reported from the three Kurdistan Region governorates, where the number of measles cases dropped from 3,422 in 2002 to just 22 in the first 10 months of 2006.

As can be seen in Figure 2, MICS3 found that nearly 88 % of children had received the first dose of polio vaccine by age 12 months. This declined to 57% by the third dose. Some 91% of children had received a BCG vaccination by the age of 12 months, and nearly 82% received a first dose of DPT. However, around 71% received the second dose of DPT and 53% received the third dose. Measles or MMR coverage was 65% by 12 months. Overall, nearly 38.5% of children had received all recommended vaccinations by 12 months. MICS3 revealed little variance in coverage of MMR and polio between urban and rural areas, though there was a slight increase with mother's education.

However, there has been a decline in routine immunization coverage compared to earlier years. The main reason is insecurity, with mothers reluctant to take their children to primary health centres for vaccinations. Other reasons include a reduction of outreach services after 2003 due to lack of funding and transport as well as insecurity. Medical personnel have been subject to ongoing kidnappings and assassinations.

MICS3 found that 13.4% of U5 children had symptoms of a lower respiratory infection (suspected pneumonia) two weeks prior survey, which requires treatment of antibiotics. Of the children with suspected pneumonia some 82% received antibiotics. This is an example of good care-seeking behaviour that can be partly attributed to the success of earlier ARI programmes, which urged families to seek care in cases of cough, temperature, breathing difficulty and other pneumonia-like conditions. At the same time, the emphasis of the Iraqi medical system is curative, and both doctors and patients value prescription drugs, whether or not these are appropriate.³²

In the Kurdistan Region, we have the capacity and experience but no funds - even if we plan, we can't implement.

Health Ministry Official
Kurdistan Region

Some governorates in the south, such as Basrah, that had previously experienced neglect in terms of access to services and supplies to treat cancer and other illnesses now have better access, albeit on an intermittent scale.

In the Kurdistan Region, some improvements were reported in health infrastructure and some services during the late 1990s and early 2000s, and the Region now has three medical colleges whose staff include doctors from Europe, other Arab countries, and other parts of Iraq. However, the transport of medicines and food supplies between Baghdad and the Northern Governorates became very difficult due to the security situation, chronic shortages of essential drugs, vaccines, therapeutic feeding, other MCH related supplies, and fuel were regularly reported by all three northern governorates. At the end of 2006, negotiations between the Kurdistan Region and the central authorities in Baghdad reportedly led to an agreement whereby the region could import medicines and equipment directly rather than have them go through Baghdad.³³

32. There is of course a risk in overuse of antibiotics. The ILCS survey noted, for example, that antibiotics were being used to treat diarrhoea – some 68% of children had been so treated – and cautioned about the overuse of antibiotics.

33. Discussions with Kurdish officials.

Box 6**Immunizing Against All Odds**

The immunization campaigns are a major challenge for us. The security situation changes from hour to hour. Some health centres are completely closed because employees can't get to work, in other areas life goes on as normal.

There is the problem the IDPs - in Diyala some villages are completely deserted after the population was forced out. In some parts of Baghdad seven out of 10 houses stand empty. During previous wars, bridges and roads were cut in certain provinces. Now this is happening in Baghdad.

We manage to stay in touch by email and mobile phones to do our work, but it's difficult. We've been organizing inoculation for pilgrims going to the Haj in Saudi Arabia and we sent the instructions to all the governorates. I just found out it has not reached Diyala and Anbar so we will have to address that. We do our utmost.

Senior Civil Servant, MOH, Baghdad
November 2006

Similarly the capacity of staff in the North is also affected by their inability to participate in national training courses when these were organized in Baghdad. The provision of basic health services through mobile clinics and other outreach services to population groups living at a distance from towns became almost impossible, due to insufficient allocation of funds. The paucity of funds, particularly for recurrent costs and escalating fuel prices, also resulted in further deterioration of infrastructure in all sectors. According to a civil servant from the Kurdistan Region ministry of health, "We have capacity, and we have experience, but we don't have the funds. Even if we plan, we don't have the funds to implement."

Iraq was the first country in the region affected by avian influenza with 2 human fatalities from H5N1 avian influenza (AI) virus. During 2006 over 400 human specimens were tested for H5N1 virus from all suspected cases, but only two were confirmed. A rapid assessment of the population's knowledge of the issue and ability to deal with it was conducted in the Kurdistan Region of Iraq. While people were aware of the signs, there was confusion due to inconsistent messages and in most cases people had simply stopped eating chicken and eggs. The disease appeared to have been contained to date, as no further outbreaks were reported by the end of 2006.

Not enough information is available about the spread HIV/AIDS in Iraq. Data compiled shortly after 2003 suggested that Iraq was experiencing the very early stages of the HIV/AIDS pandemic.³⁴ The number of HIV positive cases had increased by 75%, from 152 in 1990 to 267 in 2001, but prevalence is still thought to be less than 0.01% among adults. Mother-to-child transmission, according to the report, accounted for about 5% of total cases. Even though HIV/AIDS is still low prevalence, it is an issue of concern. As one development professional noted, "If you look at indicators in use in other countries - a high transient labour force, militarization, high levels of stress in the community, rape - there is cause for concern in Iraq." The situation of street and "working" children, who are particularly vulnerable to HIV/AIDS, is described in Chapter 4.

34. UNICEF 2003 Iraq Social Sector Watching Briefs.

A National HIV/AIDS programme was set up, although it had few staff and limited data was available for planning. The subject was introduced in schools the mid 1990s, but was reportedly frequently skipped by teachers uncomfortable with addressing it. Prior to 2003, mother and care centres played some role in providing information on HIV. No information was available about whether HIV and infant feeding was covered in these centres, or whether mothers and infants were a target group.

As for knowledge of HIV prevention methods, this was still very low, although it increased with the level of education. A key indicator used to measure countries' responses to the HIV epidemic is the proportion of young women 15 - 24 years who know two methods of preventing HIV, reject two misconceptions about HIV, and know that a healthy looking person can have HIV. Only 1 in 8 women aged 15 to 49 reported knowing two prevention methods, according to MICS3. Only 2% of young women aged 15 - 24 had comprehensive correct knowledge.

MAINTAINING WATER AND SANITATION SERVICES

The condition of water, sanitation, and electricity services is another major cause for child mortality and morbidity. These sectors have not been overhauled since 1985. They suffered severe damage during the 1991 war, including destruction of electric power stations and supply networks for gas and oil fuel necessary for irrigation pumps, refrigeration chambers, and processing plants.³⁵ During the 1990s, electricity stations and networks - which are key for the functioning of the water and sanitation systems - began to receive some inputs to prevent further decline from worn-out parts, but it was not until 2002 that a substantial restoration of electricity capacity was achieved - only to be destroyed in the invasion of March 2003 and subsequent looting.³⁶ Insurgents have made infrastructure a major target of attacks since then.

Civil servants working in these sectors have managed to repair and maintain the networks to provide a minimum service. Their efforts are extraordinary but of course do not respond to the nation's needs. As one civil servant put it, "All our projects are patchwork when something breaks down, and so citizens don't feel they are getting a service." By the end of 2006, nearly a third of Iraqi households received electricity for under six hours a day, and almost half received it for between nine and 13 hours a day. More significantly, frequent power supply disruptions affected the water supply and sewerage operations.

I feel like someone who has been condemned to death; when I make it to the office, I feel the sentence has been postponed to another day. But people are committed and work without extra pay. And the water flows.

Senior Civil Servant, Baghdad Water Department

Without the investment for an overhaul and with continuing violence and insecurity, the water and sanitation infrastructure has remained largely dilapidated, with serious implications for the health of children and the population at large. Dilapidated water pipe networks, especially when empty, provide ample opportunities for cross-contamination with wastewater flowing through criss-crossing open channels or dilapidated sewers.

MICS3 found that 79.2% of the population had access to improved drinking water sources. However, as was pointed out in the survey itself and confirmed by earlier surveys, the figures do not reflect the actual condition of the water supply services. Only about half (52.3%) of those who had access to improved drinking water sources indicated that they had no problems with the condition of services. Indeed, an

35. "The Impact of the Oil-for-Food Programme on the Iraq People," p.43.

36. Ibid, p. 42.

Box 7**Delivering Water Under Fire**

We have eight new projects and a major one planned for next summer. The problem is when the electricity is blown up we have no back up. We try to do a bypass and link cables. It's getting increasingly difficult to move. It's very dangerous and the response is much slower due to the situation. It has really helped us to receive the support in chlorine.

If there's a break in a pipe you have to think a thousand times how you're going to get the materials over there to repair the pipe. Our cadre is good but we can't get them to the zone where they're needed. I try to get people and equipment from the neighbourhood to do the repair work there.

Myself, I feel like someone who has been condemned to death; when I make it to the office, I feel the sentence has been postponed to another day. But people are committed and work without extra pay. And the water flows.

Senior Civil Servant
Baghdad Water Department

Our projects are old and new ones don't meet the need. We are only covering some 70% of the need. The problem is not water quality, it's quantity. Terror attacks and military activities in the hot governorates have a big impact on our work. There are many martyrs from the water sector. But we manage in spite of everything and our cadres keep working. No governorate is without water. The biggest problem is in Basrah. It has a large population, was neglected in the past, and suffered during the Iran-Iraq war. Pollution and salinity are both high because it's at the end of the two rivers. We're working on a good project for Basrah.

We are managing to staff our projects, and we appoint people to replace those who retire or are lost to terror. There hasn't been too much change-over in our ministry; about 90% of the cadre has been here all along. I'm a civil engineer and have been with the ministry for four years. We need more expertise in the governorates, and we are working to support their capacity.

While we appreciate the support we get, the promises of the international community are greater than their action. Maybe the security situation is not enabling donors to act. But so many meetings are just words.

Senior Civil Servant, Ministry of Municipalities
November 2006

earlier survey found that the majority (63%) of children who had experienced diarrhoea had had access to treated water that was piped into their dwelling.

The disruption of access to water has implications for gender roles as, traditionally in much of the developing world, women and girls were responsible for water collection. There is insufficient information

at present on this issue in Iraq, but it would be an important one to address when studies are conducted, and could be the subject of a specific study when the situation permits.

In terms of sanitation, MICS3 found that 92.3% of the population of Iraq was living in households using improved sanitation facilities, with 87% of the population using flush toilets connected to sewage systems or septic tanks or pit latrines. However, 40% of those connected to the sewage system indicated problems with the functionality of the sewage system around their house. Indeed, the sewage treatment capacity available in all parts of Iraq stagnated and even became worse in the past 15 years. As a result, a significant amount of wastewater continued to be discharged into the Tigris, Euphrates and other waterways. Data on the solid waste sector was scanty and often unavailable. Non-compliance with respect to standard regulations, inadequate data on the landfill sites, a disregard for ground water pollution prevention, shortage of equipment and insufficient technical capacities continue to plague the proper management of solid wastes and thus constitute a major national environmental and public health problem.

There are other serious environmental problems about which little information is available, many of which are related to the wars the country has experienced, including the fallout from the burning of the oilfields in Kuwait, as well as the use of depleted uranium, a risk factor for cancer, in both 1991 and 2003.³⁷

HUMANITARIAN CRISIS OVERLOADS WEAK SYSTEMS

The previous sections have examined the situation in terms of Iraqi children's rights to survival and growth and the immediate and underlying causes preventing the fulfilment of these rights. In terms of basic causes, the rapidly deteriorating security situation since 2003 was having an inordinate impact of children's rights because Iraq's services and systems were already weak and over-stretched. Investment since 1990 was barely able to rehabilitate water, sanitation, electricity, and health services, let alone provide for the needs of a growing population. Through considerable innovation and, often, courage, Iraqi civil servants managed to patch up these systems and kept them going well enough to provide basic services at a minimum level from 1990 to the present time. Today, however, the existing weakness of services and systems means that the breakdown in security could quickly lead to collapse.

The following problems have faced the public sector since 2003, even before the security situation became so desperate in 2006.

- Under-funding of new projects. It was estimated that line ministries received barely 10% of their budgetary needs. For example, the needs of the water and sanitation sector were carefully set out in 727 projects and a specific amount was allocated. But costs escalated and the amount available was reduced. Moreover, funds were reallocated to security leaving very little for this critical sector, and many projects remained unimplemented. "I asked for ID400 billion, and got 77 billion," said one water manager in Baghdad. "We have plans to build new storage facilities to meet the growing population needs. But all we get is money for salaries, small repairs, and primary materials."
- Insufficient recurrent budgets. As result of the lack of resources in key ministries, UN and other agencies were compelled to cover the recurrent costs of supplies and operations. Before the humanitarian conditions reached crisis proportions in 2006, international organizations were advocating larger allocations of national resources and decentralisation of authority, including co-ownership of infrastructure at the lowest level. As a result of advocacy efforts after 2004, nearly all

³⁷ "The Impact of the Oil-for-Food Programme on the Iraq People," p.43.

vaccines used for the routine Expanded Programme on Immunisation in 2005 and 2006 were procured with MOH resources. As of 2006, the government also assumed responsibility for the procurement of all syringes and needs and for ORS requirements. Some budget allocations have reportedly increased for 2007.

- Rapid turnover of staff. This has affected the ministerial level and the ranks of senior and middle management in Baghdad as well as in the governorates, hardly giving staff time to master their portfolios before they are reassigned. The UN system and other agencies have noted it is particularly difficult to maintain and invest in working relations with counterparts.
- The “remote-control” relationship between the Government and aid agencies. Most international agencies have their offices in Jordan, which has made programme management a special challenge. Local monitors have been recruited to supervise agency programmes (see Boxes 8 and 9 for examples). In spite of travel to Amman by Iraqi civil servants and technocrats to review procedures and update plans, the distance makes it difficult to nurture steady relations with partners, or contribute to capacity development, support policy formulation, and to carry out advocacy.
- Burdensome reporting requirements. Civil servants have described problems they face in collaboration with the UN and other international organizations, including heavy reporting requirements and different planning processes. A Baghdad based senior manager said, “What we wish from the UN is more integration and coordination, and a shift away from vertical programmes. The priority should be set by the government, not the UN. All UN agencies have different forms and financial mechanisms, and this is a real problem affecting programme implementation. The work is there, the committed people are there, but we need to make their life easier.”
- Different development stages. The health system in particular was struggling to cope with both “first world” and “third world” diseases. While some children suffered from chronic malnutrition, others were beginning to suffer from obesity. Indeed, according to data issued by the MOH, MOPDC and WHO in late 2006, there was an alarming presence of risk factors for non-communicable diseases for the population between the ages of 25 and 65, including obesity, hypertension, diabetes, and high cholesterol.
- Capacity gaps. These affect all sectors and are particularly pronounced at the governorate level. For example, in the water and sanitation sector, as a planner in the Baghdad Municipality said, “We want support for design and logistics; our engineers haven’t had any investment in their capacity since the sanctions were imposed in 1990.” Data collection and planning activities to rationalize operations were rudimentary, and there were no proper maps. Tariffs have been low, and there have been few public awareness campaigns to sensitize the public on water conservation, proper sanitation, hygiene and waste management issues.
- High tech vs. community approaches. In the health, water, environment, and sanitation sector, community based approaches and hygiene were not given enough importance. Indeed, Iraqi services established prior to 1990 emphasized expensive imported technology rather than appropriate technology, and these approaches still prevail amongst national counterparts. For example, some donors after 2003 provided very expensive reverse osmosis equipment to treat saline water - equipment that would erode within a year without proper maintenance and chemicals. Moreover, after 2003, some donors in different parts of Iraq supported change without consulting with the central government, adding to the gap in knowledge between the centre and regions.

WHO CAN FULFIL CHILDREN'S RIGHTS TO SURVIVAL, GROWTH AND DEVELOPMENT?

The above discussion of the immediate, underlying and basic causes reveals that, by 2006, the situation was already precarious for children. They included:

- High rates of chronic malnutrition,
- Growing numbers of families suffering from poverty and dependent on Government rations to survive,
- Decreasing family and community knowledge of the factors necessary for children's health,
- Growing dependence on immunization rather than on a functioning preventative health system to ward off disease,
- A patchwork of water and sanitation services whose functioning depended on great personal courage and commitment; lack of access to water has implications for gender roles, given women's traditional water collection role.
- Systems of government hobbled by politicization and rapid turnover, insufficient resources for recurrent or new investment, weakening relations between the centre and the governorates rather than planned decentralization, complicated relations with the international development and humanitarian community due in part to the long-distance nature of collaboration, and major gaps in both sectoral and managerial skills and knowledge, among other problems.
- The 2003 war and insurgency and counter-insurgency operations, which made it difficult to deal with the after-effects of sanctions, and the sectarian-based ethnic cleansing that began in February 2006 and that has added hundreds of thousands to the numbers of displaced persons and refugees.

How then can children's rights in the early years be realized and who is responsible? In normal circumstances, parents are in the first line of responsibility for their children's rights to survival, growth, and development. With unemployment over 60%, and growing poverty, and desperate displacement, parents and communities are naturally unable to fulfil their responsibilities. Nor are they in a position, in most parts of Iraq, to lobby local, provincial, or national leaders to claim the support and services to which they are entitled. There are a few services to which parents still have access and for which they can be held accountable, for example, ensuring that their children participate in immunization campaigns. But even issues requiring knowledge and awareness, such as the importance of breastfeeding or correct preparation of infant formula are ones that require nationally planned education - and literacy - campaigns. In conflict-ridden parts of Iraq parents can hardly keep their children secure, or protect them from exploitation and abuse, as will be further discussed in Chapter 4.

Governments bear the most responsibility for respecting, protecting and promoting the rights of their citizens. They are the signatories to the international conventions, and they report on progress to committees established to monitor progress towards the rights set out in these conventions. In Iraq, the central Government operates in one of the most violence-ridden parts of Iraq, the capital Baghdad. Ministries, government facilities, and civil servants are themselves targets. They are hard pressed to respond to humanitarian and development needs. Given the previously highly centralized nature of the regime, local and regional government lack the capacity for development in those parts of Iraq that are relatively quiet.

Between 2003 and 2006, Government and the international community collaborated to support children's rights, for example,

- Sustaining equitable basic health and nutrition services for the 4.8 million children under five years of age and one million pregnant/lactating women.

- Salt iodization availability and use, fortification of wheat flour with the critical micronutrients, iron and folic acid, benefiting the entire Iraqi population covering all flour distributed through the PDS.
- Assisting the rehabilitation and maintenance of water and sanitation services with completion of over 200 projects throughout Iraq, provision of significant quantities of chemicals needed for water treatment plants throughout the country. In addition, water-tankering operations continued to serve residential areas and hospitals suffering water shortages, reaching about 180,000 people every month.
- Providing some training and capacity development, including planning and management, in health, nutrition, water and sanitation.
- Advocating early childhood development as a concept that will move the country to comprehensive approaches to child rearing. A National Committee on Early Childhood Development was established in July 2006 beginning the process of outreach to families and communities, and to collaboration with the ministries of health, and labour and social affairs.

However, well into 2006, the Government and the international community were still functioning as though Iraq was a country in development transition rather than one facing full-blown humanitarian crisis. The extent of the crisis began to be articulated at the end of 2006. Today, Iraq needs more not less support from the international community. The initiatives listed above need to be reinforced and expanded to respond to the scale of the crisis now facing Iraq.

In addition, to respond to the emergency there is need for:

- Increased resources to ensure that mobile health, nutrition and water services to reach displaced populations and, to extent possible, those in conflict areas;
- Advocacy for the humanitarian space and resources to promote children's rights;
- Ongoing collaboration with humanitarian relief agencies to ensure that children's basic rights are understood and addressed; and
- Recognition that Iraq is a humanitarian emergency, and that international organizations must be staffed, resourced, and operated accordingly.

Development measures in relatively quiet governorates could include:

- Supporting the capacity to manage development in the Kurdistan Region and the southern governorates. Such capacity development could include assistance to overcome supply problems, without undermining the centre's responsibilities and authorities and contributing to fragmentation. It could help to provide for independent action without chaos and lack of standardization and quality control, e.g. by pre-qualifying suppliers that can be approached directly by the governorates. It could also provide training in quiet regional centres such as Erbil.
- Developing the governorates' capacity to deal with emergencies, since the conflict could spill over to quieter parts of the country at any time, including the capacity to address the situation of children during crisis.
- Advocacy in support of the PDS ration, since it is clear that children would suffer greatly if moves were made again in future to cut this, while redoubling efforts to remove infant formula from the ration.
- Advocacy for and support to providing appropriate technology for Iraq's water and sanitation systems to save on cost and to enable local solutions and approaches to problems, as well as primary health care systems rather than expensive hospitals.

- Studies to understand the impact of breakdown in services, particularly water, on gender roles.
- Simplification and streamlining of the international community's policies and procedures so as not to tie up limited human resources.

Box 8

Being a Health Monitor in Baghdad

I'm from Baghdad - born here and studied here. I'm a paediatrician by training, and I've worked with government and non-governmental organizations. I've worked as a UNICEF monitor for a nearly two years. My work involves following up with the GOI on programmes supported by UNICEF, reviewing accounts, and monitoring and evaluation reports. For example, during the polio immunization campaign I reviewed the books and went to the field to meet with the PHC teams to review how they work and how they distribute the materials. I also have to sign off on any supplies that are delivered and monitor their use.

A typical week starts on Saturday, which is an official holiday for the government. That's when I catch up on administrative matters and on our warehouse supplies, which are directly under my control, so I visit them and we agree what is to be dispatched where.

From Sunday through to Thursday, I work with the MOH, meet with programme directors and various departments, to review reports and accounts, and also visit sites to which we've distributed materials. I'll visit the ministry of trade at least twice, as well as the Nutrition Institute. Given the security situation, I may not find the person I want to meet there because he can't get to the office so I have to go back. Some issues you just can't cover by phone.

There are many areas in Baghdad, where there are real security problems. The MOH is in a very hot area, as is the vaccine institute and the main warehouse. These are very dangerous areas and only people from that area can move around. Once we received some vaccines and it was three weeks before I could go and check that everything was OK. The first time I went I was very afraid, but then the army was in control and I felt better. Problems are in God's hands

Even though the programme faces challenges we are doing better than other partners. We just completed the autumn immunization campaign – no one thought we would be able to do it. The credit goes to MOH employees – the very fact that they go to the office is a victory for them. It's a very targeted building, part of a major complex between two very hot areas, and it's hit by a mortar or two every day

The area where the warehouses are is relatively quiet. Workers at the warehouses live in that same area, so they provide protection. They need to work to live so they guarantee security. If someone comes from outside to create problems, they will stop him.

Anyone who has expertise and can get work outside the country will do so. The Baghdad situation is very hard. For the past two weeks we've only had 1 hour of electricity every 10 hours so everyone using generators. If there is a fuel crisis people will be without electricity. I keep my three kids in front of the TV so that they're not hit by a stray bullet; but if there's no electricity what do you do?

Box 9**Monitoring Health in the Kurdistan Region**

I've worked as a UNICEF monitor since 2004. My background is in health and nutrition. My main job is to monitor implementation in the field since I have more freedom than UN staff. The Kurdistan region is safe, so I don't have a problem.

I visit the ministry and directorates of health in Dohuk almost daily and the other governorates every week or two. Our last campaign for polio immunization began on November 5th in the north. Initially, we had a problem because Baghdad postponed the campaign because of a curfew. But there were no security problems in Kurdistan, so we spoke to the minister who gave us the go ahead. After exchanging emails all night, we started Sunday morning with a ceremony 15 miles outside Dohuk. Everyone was pleased because it was raining and we need the water. In spite of the rain, the health teams took the vaccines and went house to house. The director general highlighted the fact there has been no polio in Dohuk since 1996 and gave credit to the health team.

The next day I woke up at 7am and reached Erbil by 9:30am to visit the preventive health department. They'd achieved almost 24% of coverage just on the first day. There's a well established system of daily reporting; each five teams have one supervisor, who has a district supervisor, and then a central one. Every field supervisor has to check all the details every morning and register the findings in their book, identifying shortage of vaccines. By 6 pm the data for the whole governorate is with the EPI manager, who reports it to the ministry in the North and to Baghdad, because it's a national day.

At one point we discovered there were a lot of people moving into the governorate, due to population displacement, so we put a vaccination team at checkpoint. A good deal of micro planning is involved in terms of vehicles, vaccinations, teams. In mountainous areas you will have to walk two hours to get just five or 10 children. If there's snow or a flood, they have a stand by system to make sure everyone is vaccinated. The main problem we face is the fuel crisis: there's no fixed price for fuel in Iraq so we face a lot of problems with contractor.

In the afternoon, I travel to Suleimaniya, a three hour trip. There are fewer children in this governorate, which has better family planning. The EPI manager said they went to 10 households till they found one child to vaccinate.

A mobile phone service provider in Suleimaniya disseminated the campaign message encouraging children to be vaccinated. It was very effective: all the relatives received the text message. This is very good social mobilization.

As part of my work, I support the development of project proposals and programme management. These are important capacities to develop at the governorate and district level. Previously the system was very centralized.



Chapter 3

Striving for Education, Seeking Participation

The education system in Iraq has been greatly affected by war, conflict, and politicization of the service over the past 20 years. As discussed below, data show a situation of clear retrogression in the realization of the right to education in Iraq, with resulting negative impact on the fulfilment of other rights, including rights to work, health, participation, and protection. The serious erosion in quantity and quality identified by MICS2 in the year 2000 has continued into the present time. This has been exacerbated since 2006 by the unwillingness of families to send their children to school out of fear for their physical safety, and by attacks on teachers who are unable to keep schools fully functioning. Growing poverty is also keeping children out of school, and the children of displaced families have very limited access to learning.

Even before the humanitarian crisis reached such proportions in 2006, education services were struggling to cope with the backlog in terms of infrastructure, the knowledge and skills of teaching and administrative staff that had been isolated from new materials and approaches during the 1990-2003 sanctions era, and an outdated and irrelevant curriculum. As the primary duty bearers for children's right to education, civil servants face the near impossible task of dealing with that backlog, accommodating population growth, and finding ways to reach displaced and impoverished children. Without support from the international community, the children of Iraq have little hope of moving beyond the opportunities lost by their parents' generation.

FOR GIRLS AND BOYS, A RIGHT INCREASINGLY DENIED

Universal access to basic education and the achievement of primary education by the world's children is one of the most important goals of the MDGs and of A World Fit for Children. In Iraq, in spite of the Government's best efforts, the education system is struggling to meet these targets.

In 2006 800,000 children were out of school, 63% of them girls.

Primary School enrolment: In 2004, 4.3 million students were enrolled in primary education out of a total 4.9 million primary school-aged children in Iraq – 56% of them boys and 44% girls.³⁸ This meant that some 600,000 children were out of school, 74% of them girls. Data also indicated that 21% of school age girls

38. Percentages based on the MOE 2003/2004 school survey and COSIT projected population data.

were not enrolled in primary school, that one million children will fail to complete primary school and two million will not enrol in secondary school.

Primary School attendance: Since 2000 (MICS 2), net primary school attendance ratios have increased from 78% to nearly 86%, according to the MICS3 data. Attendance of girls in secondary school remains extremely low (Iraq's Gender Parity Index for secondary school is 0.75 nationally, and just 0.40 in rural areas. This last value indicates that, in the rural areas, for every 100 boys, of secondary school age, attending secondary school, we only found 40 girls attending). Translated into real numbers, this means that approximately 3.9 million children are attending primary school - 2 million boys (87%) and 1.9 million girls (79%). This means that approximately 800,000 children of primary school age do not attend primary school, 63% of them girls. These figures were also supported by a Save the Children UK survey in September 2006, which estimated 818,000 children out of primary school.

MICS3 data showed that six out of every seven children of primary school age in Iraq were attending primary school or secondary school, with more doing so in urban areas than in rural areas (see Table 4). As can also be seen in Table 4, school attendance increased with mothers' education: mothers with secondary or higher education were much more likely to send their children to school than mothers with primary education or those with no education. MICS3 data on primary school completion and transition to secondary school showed that more than a third of Iraqi children of primary graduation age (11 years) were attending the 6th primary grade at the appropriate age, and that a significant proportion of older children were attending the 6th grade although they should have been in secondary school. The completion rate was greater in urban areas (see Table 5).

Table 4: Primary School Net Attendance Ratio

Percentage of children of primary school age 6-11 years attending primary or secondary school, Iraq, 2006

	Male net attendance ratio	Female net attendance ratio	Total net attendance ratio
Residence			
Urban	93.8	89.1	91.5
Rural	86.7	68.4	77.7
Mother's education			
None	83.2	66.0	74.6
Primary	91.9	82.4	87.4
Secondary +	96.8	92.5	94.7
Total	90.9	80.4	85.8

MICS3 2006 data

Some 78.3% of children who were in the 6th grade of primary school in 2005 attended the first grade of secondary school in 2006. More girls than boys did so, with 81.9% of girls completing the transition from primary to secondary compared to 75.7% of boys. There was a higher percentage of completion for urban areas. Both the completion rate and the transition rate to secondary education are positively associated with mother's education. Repetition rates, which generally indicate low quality of education, are high: 20% of children (23% boys, 16% girls) currently enrolled in primary school had repeated at least one year.³⁹

39. ILCS 2004.

Table 5: Primary School Completion And Transition To Secondary Education

	Net primary school completion rate	Gross primary school completion rate	Transition rate to secondary education
Sex			
Male	47.3	89.1	75.7
Female	40.1	71.8	81.9
Residence			
Urban	53.0	88.3	81.5
Rural	32.0	69.4	70.0
Mother's education			
None	28.9	63.8	74.7
Primary	40.2	80.1	76.2
Secondary +	67.5	98.7	84.5
Total	43.9	80.9	78.3

MICS3 2006

The right to education of Iraqi girls, a key Millennium Development Goal, is increasingly out of reach, as MICS3 showed (see Table 6). Only 88 girls attend primary school for every 100 boys, and this drops to 75 girls for every 100 boys at the secondary level. In rural areas, girls' disadvantage is particularly pronounced: only 79 girls for every 100 boys attend primary school and only 40 girls attend secondary school for every 100 boys. Given the evidence of the importance of mothers' education to the survival, growth, development, and education of their children, girls' increasing inability to enjoy this basic right will have repercussions for generations to come.

For every 100 boys, only 88 girls attend primary school and 75 girls attend secondary school. In rural areas, this ratio drops to 79 and 40 in primary and secondary school respectively.

Table 6: Gender Parity in Education

Ratio of girls to boys attending primary and secondary education, Iraq, 2006

	Primary school NAR - girls	Primary school NAR - boys	Gender parity index (GPI) for primary school NAR	Secondary school NAR - girls	Secondary school NAR - boys	Gender parity index (GPI) for secondary school NAR
Residence						
Urban	89.1	93.8	0.95	45.4	52.8	0.86
Rural	68.4	86.7	0.79	13.6	34.3	0.40
Mother's education						
None	66.0	83.2	0.79	23.9	33.9	0.71
Primary	82.4	91.9	0.90	36.0	44.9	0.80
Secondary +	92.5	96.8	0.96	66.6	71.6	0.93
Total	80.4	90.9	0.88	34.3	45.9	0.75

MICS3 2006. NAR: net attendance ratio

It is worth pointing out that little is known about the impact of the father's education on children's schooling. This is an important area for study, especially as fathers are likely to be the ones to determine whether girls go to school or not (see for example Box 19 in Chapter 5 on the girls' education in the Kurdistan Region). There is a need for data and analysis of the education levels of both parents and how this is likely to affect the education of girls and boys.

In terms of regional disparities within Iraq, while the situation has been improving in the Kurdistan Region, growing conservatism is reportedly impeding girls' education. The low level of women's literacy is repeatedly mentioned by health and education professionals in explaining the slow progress in the region in spite of the better security situation that has prevailed after the early 1990s.

The situation in the south continues to show the impact of poverty and neglect, and girls' enrolment is lowest in this region. Indicators in the centre show increasing deterioration. In violence-hit areas throughout the country, parents are increasingly afraid to send their children to school for fear they will be killed, injured, kidnapped or raped.

Overall, the above data help to explain a deteriorating national literacy rate that may be as low as 74%, with a female literacy rate of around 64% in a country that was on the way to eradicating illiteracy in the 1980s, especially for women. The successive national literacy campaigns of the 1970s and early 1980s had resulted in substantial improvements in the adult literacy rate. This had been estimated at 52% in 1977, and had increased to 72% in 1987.⁴⁰ Today, Iraq is unable to do as well by its children as its neighbouring Arab countries, in spite of the best efforts of parents and the state, as is shown in Table 7.

Table 7 Iraq and Its Neighbours on Literacy

		Iraq	Jordan	Kuwait	Saudi Arabia	Syria
Adult literacy rate 2000-2004	Total	74	90	93	79	80
	Male	84	95	94	87	86
	Female	64	85	91	69	74

SOWC 2007

Box 10**Voices of Iraqi Youth****Education and (Un) Employment...**

I'm 22 years old and I've been trying to find work for months but to no avail. I have no money, no means. I studied metalwork in secondary industrial school, but I couldn't complete high school. They closed the branch at our school, because most students failed. And students failed because teachers kept asking us for things like private lessons, which we couldn't afford. I would have had to go to another governorate to continue, but I couldn't afford that.

I served in the army and the national guard, and did all that - but I still didn't get a job. I went to see the governor, but they didn't appoint me. I've never learned how to use the Internet - there are offices that teach you but they want 1,000 Iraqi Dinars an hour, and I don't have the money. I don't do anything in my spare time, just sit around; it's boring.

I first became aware of war during the conflict with Kuwait. It was terrible how the army was withdrawing and the planes were still shelling them. They came through Nasiriya. The war was over but the planes were still bombing. After the army withdrew, the southern provinces rose up. The government cracked down on them and people's relations became very strained. Families became scared of their neighbours. There was a shortage of fuel and food. My closest friend in the neighbourhood was killed by a mine while he was out walking.

Then there was the siege, and then the last war. Life became more difficult and security worse. And now? This year I might have been able to travel to Amman for a job opportunity, but I didn't have the money. All I want is to find a job - that's my priority.

*Ahmed, Nasiriya
November 2006*

I was born during the war with Iran, and I was 11 during the war with Kuwait. Schools were closed and they cancelled the mid year exams. We went to shelters but for us kids that was fun - we met people there and made friends with other kids.

Apart from that, my life was normal growing up in Baghdad, just like any children in any other Arab country. There were no problems of security during my elementary and secondary years - we had friends and fun, summer holidays, clubs.

The situation has got very bad in the past three years. I graduated in computer engineering just before the war. I started work in January 2004 when things were a bit better - there was deterioration but not a complete collapse like things are now. I haven't left the house for the past two months.

Internet began to be available in 2001, but it was difficult. There was just one server and the government was the only provider. Many sites were blocked - politics, religion, sex - "this page cannot be displayed". At college we had a site when we needed to write reports.

Then we got a connection at home just before the war. Now the only good thing in the country is the Internet. It's slow and there's interference but it's better than nothing.

I began to work as a graphic designer a few months ago, but the company closed its offices here. I still work for the same company, but I do all my work by email. A lot of people stay in touch by email because there is no other way. In any case, most of my college friends aren't here any more - they're in Canada, Germany, Switzerland. So we keep in touch through the Internet.

*Lamia, Baghdad
November 2006*

The growing gap between generations is also captured in data on literacy.⁴¹ The literacy rate of youth aged 15 – 24 was, at 74%, about that of the population at large. Yet this was lower than the literacy rates for the age group 25-34, indicating that the younger generation is lagging behind its predecessors on educational performance. Tragically, while the gender gap in literacy is diminishing, this was reportedly due to a drop in the literacy levels of men rather than gains among women.

In mid-2000, literacy rates for youth aged 15 - 24 was lower than that of the 25 - 34 age group.

WHY SO MANY FAMILIES FAIL TO FULFIL THIS BASIC RIGHT

Beyond the efforts of the state to secure education services (discussed in the next section), there are three main reasons why Iraqi children do not enjoy their right to education: violence and insecurity; poverty, which leads parents to drive children, especially boys, into the workforce; and socio-cultural stereotyping about gender roles and concepts such as "family honour" that especially impede girls' access to education.

More than anything else today, security conditions have severely impacted on parents' willingness to send their children to school, particularly their daughters. According to the Ministry of Education, 64 children have been killed and 57 injured in more than 400 attacks on schools in just the five months between November 2005 and March 2006. In January 2007, over seven children died after a mortar hit a Baghdad high school, killing at least five girls, and a bomb blast hit a primary school in Ramadi, leaving two children dead. Many girls and women have been kidnapped and/or raped, leading to additional restrictions on their movement and reluctance among families to send their daughters to school.

64 children were killed and 57 injured in more than 400 attacks on schools between November 2005 and March 2006.

41. ILCS, p. 91.

In a survey conducted in 2003-4, before the security situation deteriorated to the extent it had by 2006, four major categories emerged among heads of households in which girls between 7 and 14 were not enrolled, in order of importance: lack of schools nearby; the family does not want girls to go to school; family poverty; and lack of interest in attending school.⁴²

Poverty is an important factor. Another survey around the same time found that, among extremely poor districts, a quarter of students under 15 dropped out of school compared to just over a tenth in better off districts. The reasons given were that families could no longer afford costs; schools were too far away; and some children were sent to work to supplement household incomes.⁴³

A third survey, which was conducted among Iraqi youth, confirmed some of these findings. Of the youth interviewed, over a third had either not gone to school at all (16%) or had dropped out (15.6%).⁴⁴ The main reasons, in this order: parents' refusal, economic conditions, and the distance of schools. Family objections were higher among the reasons for female dropouts while economic conditions were higher for male dropouts.

Female-headed households are among the households struggling to make ends meet. Surveys reveal that poor households are, in turn, less likely to be educated and that household heads have only some primary or secondary education.

TRYING TO SECURE RESOURCES AND SERVICES

The deterioration in the quality of education that began with the imposition of sanctions in 1990 has not yet been reversed. While the decline in the number of teachers caused by worsening pay was addressed by raising salaries, most recently in 2006, the lack of adequate teacher training has been a major factor in the poor quality of education. It is estimated that the number of teachers that still need in-service skills building is around 250,000. Few teachers have been exposed to developments in the field over the past 25 years. There is a special dearth of qualifications in the sciences. The non-renewal of teachers' skills and knowledge naturally impacted on those students who were able to attend school, and affected classroom operation, performance, and the ability to address the growing "culture of war". According to some NGO reports, there was a growing tendency for children – particularly boys – to play war games and have a preference for war related activities.

Investment is also needed in the capacities of administrators and supervisors for planning and management at all levels. Although no recent data have been collected on this area, anecdotal evidence indicates that women are under-represented at senior management levels and as trainees in workshops and courses. This is in spite of the fact that the majority of teachers are female. The Ministry's 2003-4 survey reported that 66% of teacher training institutes were for females.

By end-2006, 4,000 primary schools still needed rehabilitation, 700 needed to be rebuilt, and 4,500 new schools were needed to accommodate population growth.

It should be noted that the security situation has not only affected students and teachers, but also managers and administrators. A senior manager, one of the few women at that level, was recently attacked and had to move back to her region of origin for protection. At the end of 2006 the ministry of

42. ILCS, p. 110.

43. FSVA, p. 41.

44. The KAP survey of 2004 covered 19,610 youth between ages 10 – 24.

Box 11**Rebuilding the Basics**

We're working on three tracks - new buildings, rebuilding, and rehabilitation. In addition to partial and comprehensive rehabilitation of some 80% of schools, there are some schools that are not suitable, for example schools made of mud in Thiqr and Salaheddin. In the marshes, we have a major school building programme under way - there haven't been any schools built since 1958, just very small ones, and you have a million IDPs who are now going home.

Donors don't give as much money as they used to do. We have the skilled staff, but we need more support from the donors because the government budget isn't enough. Many schools are running two or three shifts. Donors say the security situation is bad, but we are able to build in all the governorates where there is no actual fighting. Some of the governorates have been allocated funds for their own development. We are in touch with them by email about their plans.

*Senior civil servant, Ministry of Education
November 2006*

Box 12**Refocusing the Curriculum**

The curriculum was set in the 1970s and partly revised in the 1980s and 1990s. It was very politicized by the Government, with characteristics of the military and single party system to bring generations up in this vein. After the fall of the regime we moved very fast to begin curricular reform. We established a committee of 150 people - good teachers, people who believe in positive change. About 35% of the committee members were women.

We managed to remove all promotion of violence, sectarianism, attacks on neighbouring countries and so on. This was a first stage and we need to do more. We included civic education, and education about human rights and democracy, the rights of women, and the rights of children. Our next step was to establish a higher committee to establish the education philosophy, which we disseminated to different groups for feedback. Once this is finalized we will set our objectives.

We need support in terms of access to the experience of other countries who've undergone similar situations and how they've dealt with them in the sphere of primary education. The sciences, English, and history especially need support. We also need support in training all our cadres, in establishing laboratories and libraries.

The security situation is very hard, but we keep in touch with the governorates by mobile phone and email and through the Internet. It's very hard to move around, especially in Baghdad. But we're in touch with all the governorates, even the one with the worst security situation.

*Senior civil servant, Ministry of Education
November 2006*

higher education was attacked, in broad daylight, and many officials kidnapped, some of whom were later released.

The MOE conducted a school survey for the 2003/2004 school year with the financial and technical support of UNICEF. This found 11,368 primary school buildings in Iraq, 4,236 of which were in urban and 7,132 in rural areas. Only a tenth of schools were undamaged, and over half were seriously damaged. By the end of 2006, around 4,000 schools still needed rehabilitation and 700 needed to be rebuilt - apart from those needed to accommodate population growth, estimated at another 4,500 (see Box 11).

The Ministry's survey revealed important gender discrepancies in vocational education. In 2003-4, out of 275 vocational schools, 70% were for males only. Thus, out of 89,902 students registered, 81% were male. Another problem was that 93% of the enrolment is in urban areas, leaving very few opportunities for rural areas.

Plans to overhaul the curriculum have been on the table for some time, and this is another area that will need to be addressed before the quality of education can be improved. At the end of 2006, the Ministry of Education identified this as a priority concern, based on an educational philosophy that would transcend religion, party or race (see Box 12). Other factors affecting quality include, for examples, the far greater number of primary schools, 12,000, compared to secondary school buildings, which puts additional pressures on the quality of secondary education by increasing classroom size.

PARTICIPATION: AN ELUSIVE RIGHT FROM CHILDHOOD TO ADOLESCENCE

The 2003 State of the World's Children Report urged that participation begin as early as possible in a child's life. It noted that the "values of democracy, such as respect for the rights and dignity of all people, for their diversity and their right to participate in the decisions that affect them, are first and best learned in childhood." In Iraq after 2003, there were attempts to encourage young people's participation by, for example, participatory training and participatory television workshops focused on key adolescent issues that were progressively transformed into dramatic television scripts. This was one of many initiatives that had to be put on hold due to security concerns.

As the security situation began to deteriorate in 2004 and 2005, the need to deal with the growing emergency needs of the population kept the focus on the most vulnerable - infants, children, pregnant and lactating mothers - and on immediate needs in terms of food, shelter, immunization and other basics. Adolescents and their needs received short shrift. The tendency to treat people, including adolescents, as helpless victims of conflict rather than competent social actors can breed resentment, and/or passivity.

Over half of respondents said they had no cultural interests. Only 3% mentioned such an ordinary pursuit - in other countries - as going to the cinema.

Experiences from other conflict-affected countries show that the need to focus on youth participation is more and not less important during humanitarian crisis. Many children are pushed into new roles as an outcome of conflict, for instance, as a breadwinner for the family. The struggle for identity often raises the political awareness of children and youth, and affects adolescent girls and boys in different ways. If this is not tackled with appropriate support and guidance, the result can be destructive. Adolescents, particularly

Box 13**Engaging Youth through the Media**

I'm 27 years old and originally from Eastern Kurdistan. My family fought for Kurdish rights and they had to flee to Iran. We were in the mountains for a while, then came to Sweden. I have a master of science in electronic engineering and had many job offers in Sweden, but it was my dream to come and do something here.

I hadn't been here for 20 years, and the vision I had from memory was not the same as the reality I found. You see a lot of things that make you sad - poor people, bad infrastructure. They suffer from cold, and not enough food. There's so much suffering.

I began by writing the project proposal and then collecting parts and transmitters from Europe to bring to Kurdistan. We started the project in Rania, working with a lot of youth from 17 to 30, and built the studio from scratch. We built everything ourselves, the antenna mast, everything.

Some of the volunteers were high school teachers, and it was a nice mix of people. At the beginning, people didn't have the experience of working for others, and some were disappointed it wasn't paid work. Also, people didn't have the experience of respecting expertise and learning from it. One guy had a know-it-all attitude and always questioned what I said, proposing other solutions. At the end he realized that something good was happening and that he was learning something. Now when I propose something they reflect on it and analyze it before weighing in with their own thoughts.

When the studio was finished, we organized a course in three parts: how to start an association, and what the different members do; how to make programmes; and how to maintain and run the studio. We established an association of youth to run the radio station. Then we started making programmes, and it was nice to see the youth use the knowledge they had acquired. It made them even more engaged in the project.

We know that more people listen to our radio station than others - there's nice music and programmes deal with local issues. We get around 5 phone calls an hour. People are also happy to hear something that's independent, and to have an opportunity to voice their opinions. We're planning a second radio project in Kirkuk that will be in four languages - Arabic, Kurdish, Turkish, and Assyrian/Chaldean - and we will also do it with youth.

males, can be more easily pulled into violence themselves by the many militias and criminal gangs, and contribute to the further militarization of society. This is particularly true in a country facing the extent of poverty and unemployment that Iraq faces.

Even in quiet areas such as the north, which has been one of the most secure regions of Iraq for years, visitors remark on the passivity and negativity of young people. An international development worker in the Kurdistan Region described how challenging it is to motivate youth.

People are depressed and in a post-traumatic phase, especially the youth. The country lacks equipment - in one school there were five computers for a thousand students. There are no clubs. Youth have no hope about life and they are very negative. Their first response is to criticize you, but then they get engaged. In the beginning they are afraid to change; many have lost a father or a brother. There is no hope, and there is nothing to do: no clubs, no cafes. There's so much focus on religion or on politics. That's what people are used to. They need to take their mind off past problems.

Some of these insights were affirmed by the 2004 survey of children and youth, which revealed that only a third of students participated in extra-curricular activities, while nearly three quarters did not practice any vocational skill.⁴⁵ Over half of respondents said they had no cultural interests, and only 3% of respondents mentioned such an ordinary pursuit - in other countries - as going to the cinema.

There are also increasing problems of addiction among youth, such as smoking, alcohol, and drugs. A survey noted that 40% of respondents mentioned alcohol and drugs as issues affecting health.⁴⁶ The survey found that names of drugs were well known to youth, such as mukabsil (drug capsules), thinner (paint dissolver) and others, including through a TV soap opera on the issue aired during Ramadan. Of the respondents, 11.2% knew at least one peer who consumed alcohol, and 6.8% at least one who took drugs. In addition, over half knew at least one peer who smoked cigarettes. The national anti-drug committee was quoted as saying in the 9 November 2004 edition of *Al Furat* that 68 people had died from substance abuse and 588 had become addicts in a three month period.⁴⁷

Overall, the security situation and the political crisis has meant that girls, boys, women and men have limited access to information on health, reproductive health, life skills, and other areas for. Such information is important for survival and health - as well as for participation.

The Government is working with international organizations to respond by promoting sports, youth centres, and the like, in spite of a difficult environment because of violence and insecurity. After 2003, a new Ministry of Youth and Sports was established for the first time in Iraq, with directorates in all the governorates. It incorporated the 170 youth centres that previously existed, and was working on a strategy for young people that included encouraging participation and engagement in the media, sports, culture and summer camps. The Ministry was seeking to make adolescence a priority, pointing out that young people with nothing to do were among the groups contributing to the worsening security situation.

In the Kurdistan Region, the Ministry of Sports and Youth aimed to establish youth camps with sports facilities so that youth can get away from "all the seriousness in their life." There is a lot of enthusiasm for

45. KAP 2004. It is worth noting that the KAP itself was conducted by involving youth, giving them the training to conduct questionnaires and undertake field work. Some of the youth who participated in the Basra Governorate were recruited for the FAFO survey.

46. Ibid.

47. Quoted in "Street Working Children: Development Needs and Survival Challenges," MOLSA, November 2004.

sports clubs, and it was seeking to encourage this. There were also plans for collaboration with the Ministry of Health to produce TV programmes on physical fitness for youth.

SOME BASIC ISSUES BURIED BY THE SECURITY BREAKDOWN

Some of the impact since 2003 of the escalating humanitarian emergency on children's right to education has been covered earlier. As previously noted, it was estimated that some 75% of children were not in school by the end of 2006 compared to 30% a year earlier. In many areas, schools had become shelters for IDPs. Particularly in poor and/or conflict-ridden governorates, the 1.7 million IDPs had limited access to services, while at the same time over-stretching whatever services available to the host community.

Partly due to the humanitarian crisis, there has not yet been sufficient analysis of how the education system functions, and how its diverse parts interact. For example, there is lack of clarity on how to deal with responsibility for new and emerging areas, such as early childhood development. Another question is how the centre does or should interact with the governorates and what the optimal mode of interaction should be. Yet another is how the education system interacts with other key systems, such as health, water and sanitation and other basic services.

The ability to deal with such issues was also hampered by rapid turnover of staff due to a variety of factors, including security and political reasons, undermining prospects for sustainability of initiatives and reforms. While new staff and appointees bring a fresh perspective, there are implications for continuity, institutional memory and capacity development.

The under-funding of the system was also a major problem. In 2006, 92% of the Government's budget for education was used for payment of salaries. Under-funding leads to a focus on alleviation of problems and ad hoc responses rather than a comprehensive and sustained approach. This also impacted on the relations of the education system with the international community, which focuses on funding basic services rather than partnering on technical cooperation and policy development drawing on the best examples from other countries and regions.

Other problems have emerged in dealings with the international community. In coordination meetings held at the end of 2006, for example, Government requested that contacts be streamlined between the UN and the ministry; for each agency to have its own contacts was jeopardizing the ministry's coordination efforts as well as defeating the UN's own efforts to support capacity development. The Government also urged increased Iraqi ownership of planning, project design, and implementation, and development of staff capacity in project design and donor coordination.

HOW CAN RIGHTS TO EDUCATION AND TO PARTICIPATION BE REALIZED?

As the above discussion shows, the causes of the non-fulfilment of children's right to education are similar to those leading to non-fulfilment of rights to survival and growth:

- Families live in growing poverty and insecurity, and are increasingly unable to provide for or protect their children. The security situation makes them unwilling to send their children to school, especially girls.

- Services are dilapidated and weakened by lack of investment, isolation, and loss of capacity during the 1990-2003 sanctions. As civil servants began to rehabilitate services and to deal with key areas such as the revision of the curriculum and renovation of school facilities, efforts were overwhelmed by the insurgency, counter-insurgency operations, and sectarian violence leading to mass displacement.
- The system is under-funded and as yet unable to respond to existing challenges, such as inter-sectoral linkages with health, nutrition and other systems, or to emerging challenges such as early childhood development.
- Overshadowing much of the above, the humanitarian crisis is ongoing and had displaced 1.7 million by the end of 2006, with some 1,000 continuing to be displaced every day. They and their children have limited access to services, and their situation strains already weak services and systems in host governorates.

In 2005 and 2006, the Ministry of Education sought to address budgetary matters, both as they related to the education system as well as to the position of teachers. There were plans to increase the Ministry's budget six-fold. The Government approved an increase of over 60% increase in teachers' salaries at the end of 2006. It was considering plans to offer teachers car loans and to support their capacity by granting scholarships to continue their education while they continued to receive their monthly wages. It remains to be seen how the security situation in 2007 will affect these plans.

The Ministry, with the support of the international community, also responded to some of the priority needs: teacher education (including in-service training on child-centred methodologies for 30,000 primary school teachers); learning materials for all 4.5 million primary level students; equipment; and management information systems. The international community also supported comprehensive school rehabilitation programmes, covering school buildings as well as water and sanitation services, an important factor to promoting girls' education. However, some of the schools rehabilitated have been destroyed in the spreading fighting since early 2006.

The Ministry of Education and the international community have piloted two significant initiatives since 2005: the first targeted children who missed out on schooling, and the second offered a way to integrate basic services and engage communities and local government in fulfilling their children's right to education. The Accelerated Learning Programme described in Box 14 proved highly successful in engaging communities in the 10 pilot governorates, which also covered the Kurdistan Region, and in particular in encouraging girls education. The Integrated Basic Services pilot, described in Box 15, was a good learning experience on how to bring together education, water and sanitation, protection, and health and nutrition services. It could form the nucleus of area based schemes that would help to address family and community poverty and sustain development in relatively quiet areas.

These responses are important and must continue to be supported. At the same time, increasing and sustained support is needed. As key duty bearers for children's right to education, civil servants face the near impossible task of dealing with that backlog, accommodating population growth, and finding ways to reach displaced and impoverished children. Without support from the international community, the children of Iraq have little hope of moving beyond the opportunities lost by their parents' generation.

Emergency Responses

In conflict-ridden areas, national and local government and international organizations must be supported to establish schools, which provide a safe and protective environment for children. Children in Iraq's "hot zones" cannot be left without this basic human right. Tents and blackboards can be used to create temporary learning spaces, and support provided to rehabilitate school infrastructure.

Given the more permanent nature of displacement since 2006, efforts to rehabilitate schools and provide education should serve the children of both IDPs and the host community, and improve existing infrastructure rather than building new short-term structures. This will help to address tensions between the host community and IDPs and will encourage them to contribute their own knowledge, skills and resources.

Responding to Poverty and Accumulated Gaps

The two pilots to provide accelerated learning as well as integrated basic services should be up-scaled wherever possible in the country. They offer an excellent opportunity to meet the rights of children today and set Iraq on the path to a better future. They will help address the fact that lack of access to schools is repeatedly cited as a reason for non-attendance. These initiatives can be the nucleus of planned area based development, which in turn can help the sustainability of efforts in "quiet" regions if other parts of the country are in conflict.

There should be intensive outreach and advocacy for girls' education and women's literacy on human rights grounds in the Kurdish Region and in the rural areas of the South. In the Kurdistan Region, there is a good basis in terms of government interest and active local NGOs, as well as a pressing need by girls and women for rights. In spite of the relative calm in the North, it continues to perform poorly on many indicators, and female illiteracy is repeatedly cited as a key reason why. In addition to pressing for girls' education as a human right, one of the key messages that can be made in this regard is the "double dividend" of a woman's education, for herself and for her family, and the prospect of breaking cycles of deprivation.

There is a need to support understanding of gender equality in the education and other systems and to move beyond gender stereotypes. At a time when women are experiencing far worse unemployment than men, and when the loss of so many males is leaving women to cope as household heads, the education sector offers very little vocational training for women. Women are a majority of teachers, but a minority of administrators and managers. The fact that the mother's level of education is associated strongly with the degree to which children remain in school means that children of poor female headed households are more likely to miss out on schooling than other children, perpetuating poverty, illiteracy, and disease.

At the same time, while there is a focus on the need for girls' education, boys are often pulled out of school to join the labour force and their rights due to stereotypes of men's roles that are important to understand. It is also important to study the role of fathers in promoting their children's right to education. The education and other government systems must develop the capacity for gender analysis so as to appreciate the way in which gender stereotypes perpetuate poverty and inequality.

The emphasis by the Ministry of Youth and Sports on adolescence should be supported to help Iraq break out of what has been described as a national post-traumatic syndrome. Adolescents, in particular,

need access to information in order to participate in shaping a healthy society. In addition, in quieter areas where schools are functioning more “normally”, it is important to provide psycho-social support to address the psychological accumulation of a quarter century of conflict on adults and children. Otherwise, constant insecurity and fear will exacerbate feelings of revenge and militarize society rather than fostering a culture of peace.

It should be recognized that the under-funding of the system is a major problem that is currently beyond the scope of Iraq to solve on its own. Relations between Government and the international development community need to be streamlined, in terms of coordinating contact points, and ensuring that Iraqis own the planning, design and implementation processes and develop the capacity to do so.

Box 14**Accelerated Learning: One Way to Catch Up on Rights**

The Accelerated Learning Programme was introduced in 2005 by the Government in collaboration with UNICEF to provide an alternative avenue of learning for the 600,000-plus out-of-school children and adolescents, especially girls, who have never joined any regular schooling or who dropped out at a very early stage. This is achieved by condensing six years of primary education into a three-year period. Some 14,000 students are enrolled in the pilot in 10 Governorates, which involves over 1,000 teachers. Essential materials for students, teachers, and schools were provided with Arabic and Kurdish textbooks. The development of the programme engaged the community: tribal leaders provided learning halls free-of-charge, and directorates of education swiftly organised the required administrative support, including the rapid posting of the teachers and setting up local monitoring committees. Community leaders have approached the Government to request additional centres.

The Programme is particularly important for girls, who have often missed several years of education. The engagement of the community has increased support for girls' education. Girls' classrooms are reported to be full and even married students are attending, with the support of their husbands and families. There has been remarkable progress given the situation in the country and given that the programme was first proposed in 2003 but could only begin in late 2005. A mid-2006 review by the committee managing the programme identified successes and areas to be addressed:

- More children were served than planned given the enthusiastic response by governorates and communities. However, there was insufficient understanding of programme objectives in some directorates.
- Coordination between the north and the south and centre was weak and officials from the different regions were unable to travel to other regions due to travel restrictions and the security situation.
- Teachers needed much more comprehensive training, including how to deal with classes that included children in different grades.
- Additional ways to involve the community were needed, such as parent-teacher associations, village education committees, and the co-option of local council members into sub-committees. There could also be opportunities to coordinate with some 43 schools that provide non-formal education, the Yafi'een schools.

A major challenge is that the number of children served is only a small percentage of those that need to be reached. At the same time, while considerable investment must be mobilized for such a programme it must also be of short duration, since once all children are reached the programme would be phased out. Alongside the investment in schooling, there are opportunities to serve the psycho-social needs of the children, many of whom will have been affected by conflict and exclusion. Finally, the number of out of school children is likely to be highest in regions where the conflict is most severe, and therefore the least possible to access.

Box 15**Integrated Basic Services: Another Way to Win Back Rights**

The Government, in collaboration with UNICEF, piloted an approach that used the school as a nucleus to enhance the community's access to basic social services, including education, health, water and sanitation. The Ministry of Education was in the lead, in collaboration with the ministries of health, municipalities and public works, and labour and social affairs. Some 100 schools were selected in 17 districts based on a rapid field assessment in the most needy six Governorates of Iraq. In addition, 26 primary health centres and 22 water and sanitation projects were also identified for support in the neighbourhood of the schools. The aim was to achieve implementation in six months.

Unlike the previous interventions where sectoral services were provided in "standalone" fashion, the integrated approach aimed at reaping the benefits of synergy by bringing together services in education, health, water and sanitation, nutrition and protection. Half way through the project, a debriefing from field staff revealed some issues that needed to be addressed:

- Insufficient involvement of local stakeholders in the selection of the districts and basic services, and a sense that the external agency was undertaking all aspects of implementation and monitoring.
- The need for more engagement of local communities at the local level to identify priorities as seen by the community, and to promote sustainability.
- A better understanding of the evolving process of decentralization, including the role and influence of elected councils at the governorate level and below.
- The need to couple the physical provisions with participatory communication activities on maintaining the new facilities and equipment, given the possible premature wear and tear of new facilities and supplies due to over-crowding in all the schools.

As lessons emerged, UNICEF monitors on the ground went to work on some of the identified issues. To nurture local stakeholder ownership, efforts were redoubled to activate the Parent Teacher Association and to involve local councils. While full-fledged community participation and social mobilization still remained difficult to achieve due to the volatile situation, persistent efforts showed that there were, in fact, opportunities to be tapped.

For example, in one of the project locations, the Misan Governorate in the south where basic services facilities were particularly poor, a three-day workshop on children's issues was convened. Local stakeholders came together from areas of education, health, water supply, and child protection. Among the over 30 participants were headmasters, managers of local PHCs and water treatment plants, district and governorate authorities, and members of the city council and the governorate council of Misan. Throughout the workshop, they debated the reasons for children dropping out of schools, the need to strengthen school health services, and the further requirements necessary to improve the access and quality of basic services for children in their districts. Within weeks of this workshop, health message brochures were made available to the schools and a water tanker was dispatched to some schools that were in particular need of water supply. These small steps are encouraging developments. Learning from this pilot experience will help ensure that future integrated basic services projects are attuned to and owned by the local communities their children.



Chapter 4

PROTECTING IRAQ'S MOST VULNERABLE CHILDREN

All children – and adults – are in need of protection from the violence and conflict raging in many parts of Iraq today. Within these circumstances, there are children who need special protection – those who are separated from their caregivers, children in

need of psychosocial support, those who are exposed to violence, and abuse, those living with disabilities, children exposed to unexploded ordnance, orphans, children driven into the workforce, children forced to resort to begging or living on the street, children in conflict with the law, and early marriage.. The causes that make children particularly vulnerable are also among the reasons that it has been very difficult to respond to their needs, although there have been some promising pilot initiatives, as discussed below. The causes include family poverty, displacement, over-stretched government and non-governmental capacity and resources, and limited space to tackle an inadequate legal framework, all greatly exacerbated by after-effects of sanctions between 1990 and 2003, and the escalating internal conflict since then.

The proportion of chronically disabled population groups has increased since 2003.

Living with Disability

There is very little information on children with physical or mental disabilities in Iraq, though their numbers are certainly larger than the percentage in other populations given the quarter century of war and conflict described in Chapter 1. A 2004 survey found that the proportion of chronically disabled people who were not soldiers had increased since 2003.⁴⁸ The Iraqi Children's Welfare Commission reported in September 2006 that 3,736 children with disabilities were institutionalised in Government care across the country in September 2006.

In Iraq, as elsewhere, families often saw disabilities as a source of shame and something to be kept hidden from society. Nor were they equipped to provide the special support that children living with disabilities needed. During the 1990s, there was growing understanding in the rest of the world that people living

48. ILCS, Vol. II, p. 84.

Box 16**Introducing Special Education Early in the Kurdistan Region**

Current international research shows that children with disabilities benefit greatly from programs that begin from birth or first diagnosis. This also saves governments millions of dollars, as children and families are later able to add to the family income and less likely to have expensive hospital visits. Research also shows that it is in the first five years that a child's brain is developing the connections he or she will need for the rest of his life.

The Special Education Project began after two international special education teachers spent three months talking to teachers from the Awat and Hiwa schools, parents of children with disabilities and other interested individuals to determine the current situation and what the people of Kurdistan wanted. A school was selected in which to base the project, and children were selected in collaboration by the government and through the newly started Down Syndrome Association. Teachers were selected through an interview process and a training session on special education was held for 70 participants in September 2004.

Research has shown families have a strong need for information, as well as a need for skills in caring for their child. This was provided through weekly home visits, where families were in control of goals and priorities for their child, and the weekly playgroup, where families could meet with other people in the same situation. The families were also invited to initial training in order to know more about the program and ask any questions.

The efficacy of this method of empowering families is an important measure, especially as playgroups are a new feature in Iraqi Kurdish society. In order to measure this, families were asked eight questions, based on the family outcomes framework. This framework came from a wide range of research that suggested that families who had stronger support networks, better skills at interacting with professionals and a better sense of their own worth were more able to support their child. A survey was handed out to families after four months of the program. Families were asked to answer honestly and to hand in their forms without writing their names on them. All the families responded positively to the questions, noting the difference the program had made to both their child and their family. They had gained information, gained skills, and gained support through the program.

Example: Aram is a three year old boy with cerebral palsy. Both his parents attend the initial training to find out about the program and learn how it works. The Family Guide talks to Aram's family about their goals and priorities. His father is concerned about him sitting up by himself, while his mother is concerned about his communication skills. They use the Small Steps assessment tool to discover what Aram is able to do and what he needs to learn next. They get ideas on how to achieve those goals from the Small Steps guide. Each week the Family Guide will see how Aram and his family are going with the goals, whether the goals need to change or whether they need to think of some new ideas to help Aram achieve these goals. After a month, both of Aram's parents are happy; they are able to see the progress Aram has made, and they know they are not alone.

*Adapted from the Preliminary Report of 27 December 2004
Special Education Pilot Project in Sulaimaniya, Northern Iraq
A partnership between ACORN and Ministry of Education*

disability not only had needs: they had rights. Thanks to growing organized advocacy by the people themselves, this understanding ultimately led to the adoption of the Convention on the Rights of Persons with Disabilities in December 2006. However, since 1990 Iraq has been isolated from the international community and its people did not participate in this movement.

To promote the rights of children with disability, families need additional support from the state, which since 2003 has been overwhelmed by the growing humanitarian crisis. Yet even in quiet regions, children who lived with disabilities remained a very large group with few opportunities for inclusion either within the community or the family, as revealed in a 2003 report on the Kurdistan Region by Save the Children UK. Families do take advantage of the opportunities offered to them, and can be helped to help their children, as is described in Box 16.

EXPOSED TO UNEXPLODED ORDNANCE

Mines, unexploded ordnance, and other explosive remnants of war are a major problem in Iraq. According to various need assessments and the Iraq Land Mine Impact Survey as at mid-2006, 1,579 communities were affected by mines out of which 93 communities were highly impacted and 642 communities were in the medium impact range. A total of 565 victims of mines was recorded, of whom 98.1% were civilians. Of these, a third were children under 14 years of age (23.9%) and almost half (45.7%) were aged 15-29.

Of 565 mine victims, 98.1% were civilians; a third of them were children.

Box 17

Contamination in Iraq's Southern Governorates

These four governorates [Basra, Messan, Muthanna, and Thi Qar] have each of them experienced Iraq's last three wars in different ways. The Iran-Iraq war affected the two border governorates (Basrah and Messan) the most heavily with deep border mined areas that exist to this day. This area is heavily contaminated, probably as contaminated as any in the world and largely abandoned. Prior to the Iran-Iraq War, it is said, this area was perhaps the largest date palm plantation in the world. That has all been destroyed and what remains in many areas is a dangerous corrugated flat mined area crisscrossed with trenches and dotted with the man-made berms of tank firing positions scattered across a grassy, semi-desert wasteland.

In western and southern areas of Basrah, in Muthanna and in the center Governorate of Thi Qar it is the last two wars that have created the majority of the danger that the residents now face. In the largely desert governorate of Muthanna new mined areas near the border are producing some of the highest rates of victims in the country.

Distribution of Impact and Land Contamination in Iraq's Southern Governorates"
From a preliminary internal report
Iraq Landmine Impact Survey 2006

Box 18**Voices of Iraqi Youth*****“My Friends Didn’t Know I’d Lost a Leg”***

I was nine years old when the Kurdish people rose in the spring of 1991 and we fled to Iran. I didn’t know anything about that place. One day I stepped on an anti-personnel mine and lost my left leg. I spent two months in hospital in Iran. My mother and two brothers were staying near the border and I stayed with them, but then came back to my town.

At that time I had to start the first year of primary school, The problem was I couldn’t carry my books and use the crutches at the same time. That was a huge problem for me. Then my family sent me to Suleimaniya to stay with my uncle and grandfather. They explained to me that if the Iraqi army attacked again and we had to flee, I would not be able to flee with them.

Then there was an organization that helped the handicapped in Kurdistan. They gave me an orthopaedic leg and trained me how to use it. That was a big change in my life. I could walk! I could throw away the crutches! That really helped my psychological problem and helped me integrate in society and make friends. I was even able to play football. OK, maybe I couldn’t run, but at least I could kick the ball. Some of my friends didn’t even know I’d lost a leg.

I only finished a couple of years in secondary. But I’ve read many books outside school, which made me realize how poor the education was. I’d like to go to Europe and continue my education, but I have no money. Since 2000 I’ve been working as a journalist, writing articles in Kurdish and English.

*Jalal, Suleimaniya
November 2006*

The major threat in the north comes from landmines; in the south, threats are caused by old landmines along the Iraq-Iran border and newer mines along the border with Saudi Arabia, as well as unexploded rockets and some cluster bombs; in the south-centre, cluster bombs are the most important cause of death and injury. The governorates with the highest rates of victimization are in the south-centre due to contamination from the 2003 war.

Contamination hinders reconstruction; threatens the safety of civilians; and denies access to agricultural and grazing land, roads, water sources and residential area. Contamination also hinders the safe return of IDPs and refugees. Due to the very difficult conditions Iraq is living through, victim surveillance and victim assistance have not been adequately addressed and there is a dire need for reliable data and information about the victims and survivors and their needs.

Despite concerted efforts in the past, there has not been sufficient change in risk taking behaviour and reduction in injuries and casualties have not been yielded as expected. People are forced to take risks to

earn their livelihoods exposing themselves to injuries and casualties because of the economic situation. The flow of IDPs in search of safety and security also places population at risk. At the same time, the security situation has made it very hard to organize education around mine risks to increase awareness. In addition, when the main bread-winner is disabled or dies, children in a household with reduced economic resources become more vulnerable to neglect, abuse and exploitation.

LIVING WITHOUT A FAMILY

More and more children are orphaned in Iraq due to the ongoing conflict, becoming at risk of neglect or exploitation. MICS3 found that about 7.6% of children aged 10 - 14 were orphans who lost one or both parents. One percent of children in that age group had lost both parents. Of children who had lost both parents, only 64.1% were currently attending school, compared to nearly 76% among those who lived with at least one parent. The survey did not take into account children who were living in government institutions or orphanages. Just over 700 children were living in such institutions in September 2006, according to the Children's Welfare Commission. An unknown number is cared for in institutions run informally by local groups.

The impact of the growing humanitarian crisis since 2003 has become more visible. An Iraqi humanitarian relief worker noted that previously it was hard to get data about the numbers of orphans from Falluja because it was considered shameful to have children who were not in a family's care. "Now, due to the very difficult situation families have agreed there has to be some support even if it is an orphanage. I never thought the families would agree to this. Some mosques are taking in orphans, and we are helping with carpets, heaters and food. We want mobile schools so people can make a new start on the basis that life has to go on." ⁴⁹

YOUNG AND FORCED TO WORK

The most recent data on working children are to be found in MICS3, which asked caregivers of each child in the household aged 5-14 years about the kind of work the child did and for how many hours.⁵⁰ The survey found that one out of every nine children (10.7%) aged 5 – 14 were going to work, with a higher percent in rural areas than in urban areas, as is shown in Table 8. Boys were more likely to be sent out to work than girls. Children who were working were less likely to go to school. As noted earlier, the involvement of children in the labour force decreased as the education of the mother increased - children of mothers with no education were almost three times as likely to be out at work as children of mothers with secondary education, as shown in Figure 3.

Children of mothers with no education were almost three times as likely to be in the labour force as children whose mothers had secondary education.

49. Interview with Iraqi aid worker.

50. Children aged 5 to 11 are considered to be involved in child labour if they did at least one hour of economic activity or at least 28 hours of domestic chores. For ages 12-14, this involves at least 14 hours of economic activity or at least 28 hours of domestic chores. MICS3 covered paid and unpaid work, as well as domestic work or work on family farms or businesses

Figure 3 Percentage Of Children Aged 5-14 Years Who Are Involved In Child Labour By Mother's Education, MICS3 2006.

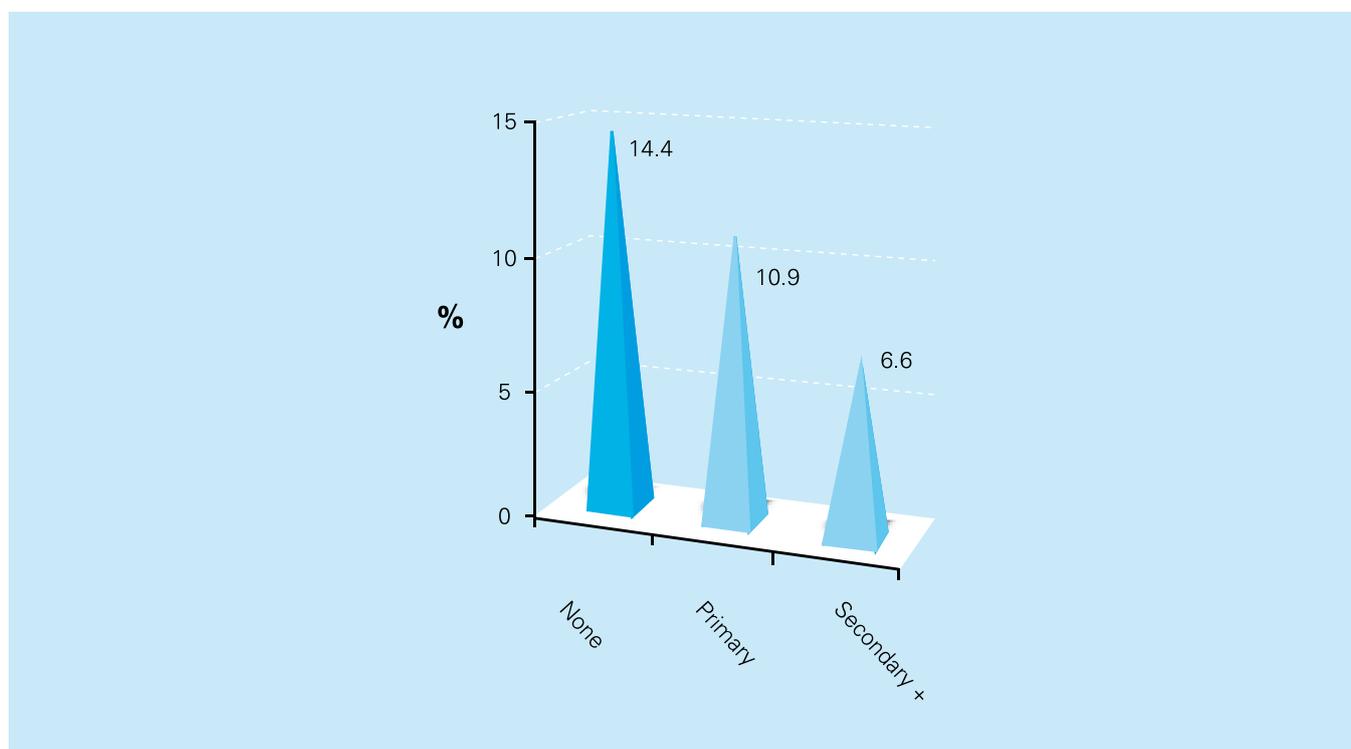


Table 8: Child Labour

Percentage of children aged 5-14 years who are involved in child labour activities by type of work, MICS3 2006

	Working outside household		Household chores for 28+ hours/ week	Working for family business	Total child labour
	Paid work	Unpaid work			
Sex					
Male	1.6	2.1	1.0	8.4	12.1
Female	0.1	1.4	2.7	5.9	9.2
Residence					
Urban	0.9	1.6	0.8	2.5	5.5
Rural	0.8	2.0	3.4	13.9	18.1
School participation					
Yes	0.5	1.9	1.0	6.8	9.5
No	1.8	1.5	3.7	8.1	13.5
Total	0.9	1.8	1.8	7.2	10.7

As noted in Chapter 2, not enough is known about the father's education and its impact on children, including keeping girls out of school for reasons of family honour and pushing boys into the workforce because of traditions that males are responsible for family income.

All mothers said they would not send their children to work if the family had sufficient income.

Another study conducted in 2003, and quoted in a MOLSA report on street working children, found that the child labour phenomenon had expanded in recent years. The study found that families tried to set some parameters to protect their children by having them work close to home or for relatives. Children were found to be working in blacksmith workshops, in greengrocers, and in selling plastic bags. In most cases, poor families had to send their children to work to supplement the family income and the rations they received. All mothers said they would not push their children into the workforce if they had sufficient income for their needs.

STREET AND "WORKING" CHILDREN

Iraqi society also faces the phenomena of vagrancy, begging, and street children, which emerged before the 2003 war and have worsened since. Reasons include disruption of family life, displacement, loss of parent, closure of schools, and others. Substance abuse is a common problem among vagrants according to a MOLSA study on institutions serving street children. Such children are also exposed to and engage in sexual abuse, and could be especially susceptible to HIV/AIDS given the combination of sexual and drug abuse.

A 2005 MOLSA study on 200 child beggars – 133 boys and 67 girls found that their "work" was often organized by family members or by unrelated adults. Indeed, 67% of the children were pushed to beg by their families, and 90% said they would give up begging if they could find other opportunities to study or work. Some 20% had to pay a proportion of their "earnings" to the adults who organized their work on the street. The children ranged in age from two to 18 years old, with the largest proportion being in the 10 – 12 year age range (18%). Nearly a quarter of the children had lost both parents, while another 27% said they had lost either their mother or their father. Based on the findings of the study, MOLSA jointly with MOE worked on bringing the children back into school and engaging with their parents.

In the Kurdistan region, a survey on street working children in the different governorates found children left school aged 5 to 18 years of age selling Kleenex or other small products.⁵¹ The main reason was the financial circumstance of the family. Some had never been to go to school, others had reached the 5th elementary; most wanted to go back to school. The survey covered 400 children – all were males, and all still lived with their families.

CHILDREN IN CONFLICT WITH THE LAW

According to the Children's Welfare Commission, the total number of children in conflict with the law in institutions for juvenile justice is 561. Of these 473 boys are in institutions run by MOLSA and 88 girls are in institutions run by the Ministry of

Children in juvenile prisons are living in deplorable conditions.

51. Information provided by Kurdish human rights official.

Justice. In a tragic sign of the terrible security situation, a car bomb targeted the juveniles' and women's prison in Kirkuk on 17 September 2006, killing at least eight women and three children.

The UNAMI Human Rights report for September-October 2006 expressed grave concern about the situation of juveniles in detention. It noted that "due to a lack of facilities at MOLSA, juveniles held outside Baghdad still remain in the custody of the Ministry of Justice." It added, "Due to the fact that there is only one investigative judge in Baghdad dealing with juvenile cases, judicial oversight is almost absent. An increase in juvenile arrests has been noted by MOLSA officials as a result of phase II of the Baghdad Security Plan." The report quoted a recent experts inspection of Al-Kharkh juvenile prison, carried out at MOLSA's request, which revealed that the 284 inmates, aged from 7 to 22 years, were living in "deplorable hygiene and medical conditions with signs of physical and sexual abuse allegedly committed by the prison guards and/or by their fellow inmates. Some were being detained without convictions or even charges."

RESPONSIBILITY FOR PROMOTING RIGHTS TO PROTECTION

Families and the community bear responsibility for children with special needs. Although families did not know how to respond to physical and mental disability and many tried to hide afflicted children from society, as in other parts of the world, Iraqi families had traditionally provided support for orphans so that phenomena of begging, vagrancy, and juvenile delinquency were almost completely absent prior to 1990. Today, families in many parts of Iraq cannot provide support for vulnerable children due to the security crisis, which both creates and reinforces poverty and deprivation. Pressures on the family capacity to cope can also find expression in alcohol addiction, substance abuse, and domestic violence, and expose children to forced, exploitation, and abuse.

According to preliminary results from an Iraq Family Health Survey that was being carried out by the Government and WHO in late 2006-early 2007, over 40% of adults suffered from anxiety and depression, with higher rates for women than men.⁵² About 30% of adolescents also suffered such mental distress, as did over 15% of primary school children. Anecdotal clinical evidence indicated high use of tranquilisers and increasing use of drugs, and there were many reports of domestic violence and violence in schools. Such pressures on adults and children make it even harder for families to provide the protection their children need.

In addition to its responsibility to provide or to ensure the provision of adequate basic services that fulfil children's human rights such as health, nutrition, education, the state is responsible for providing or supporting protection as well as an appropriate legal framework that is in line with international law. At present, the legal framework for vulnerable children is a mixture of old, new, and incomplete laws, and needs to be comprehensively revised. For example, juveniles are dealt with under Law for Juvenile Care No. 76 of 1983. However, this defines juvenile behaviour and vagrancy in a way that confuses several forms of conduct and age groups, according to a MOLSA study on childcare institutions for street children. In addition, some of the livelihoods defined by the law as constituting vagrancy are now essential for families to survive, and the legal framework for juveniles is out of touch with life in Iraq today.

Meanwhile, the new constitution has yet to be reflected in the legislation. Moreover there are areas within the constitution that need to be revisited to ensure child protection. For example, it does not define the

52. Quoted in UN internal note, January 2007.

age range for children. This has implications for many issues, such as child labour, the right to vote and to social security, treatment of children in conflict with the law, the death penalty, and others.

In terms of protection services and support, the Government organized a major response to the vulnerability of families and children living in poverty, and in 2006 increased the number of families receiving social welfare payments to one million families, up from 160,000 families in 2005. As a MOLSA senior staff in the social welfare department put it, "If we assume that each family consists of five members, we're talking about some three million children living in poverty, who may be driven into the workforce, abused, or exposed to drugs. What can we do for these families?"

Moreover, with the number of displaced people in Iraq growing by 1,000 a day, there is little information on whether and how displaced families are receiving this subsidy. The information collected by IOM by the end of 2006 on the ability of displaced families in high conflict zones to access PDS rations, a system that has been in place for 16 years as opposed to the recent expansion of welfare payments, is not encouraging.

MOLSA moved relatively quickly after 2003 to collect information about vulnerable children, producing a series of preliminary reports on begging and vagrancy, orphans, and other vulnerable groups. However, it has little capacity and insufficient resources to monitor and respond to the fast growing needs, let alone to introduce new services based on best practice in other parts of the world. The isolation of Iraqi professionals from the rest of the world for nearly two generations has meant a lack of specialised staff to deal with social issues and child protection and has hindered the provision of new innovative services. There is also a lack of specialisation within Iraq relevant to child protection i.e. street work, community development, case management, or post traumatic stress disorder counselling.

Nevertheless, the Government has undertaken some initiatives to respond to the situation of children in need of special protection, MOLSA, the MOE, and other national bodies have collaborated with international organizations to, among other things,

- Support the establishment of a Social Research and Training Centre within MOLSA to institutionalize and strengthen capacity for child protection in Iraq.
- Support child/youth friendly spaces, drop in centres and open centres for children and youth in need of special protection.
- Provide supplies for vocational training centres and institutions for disabled children, which would provide an entry point to advocate more progressive approaches to disability.
- Develop a mine risk education project with the new National Mine Action Authority focused on schools and communities in southern and central Iraq. Training was provided for 2,000 teachers, 300,000 students, and 4,000 community members. Voluntary groups were being established to reach out to high risk populations such as IDPs, returnees and refugees. New approaches using music, drama, and story writing were piloted by UNICEF and the Kurdistan regional government in Sulaymaniya to prevent injuries during summer holidays.
- Support a national conference on youth, and integration of child rights concepts into the newly established Ministry of Youth and Sports and Women's Affairs.

Of special note was a pilot initiative supported by UNICEF to reintegrate street children with their families, which successfully reintegrated 28 boys and 24 girls in their families, and expanded its operations from

two centres (one for boys and one for girls) to six centres (three for boys and three for girls) in the poorest areas of greater Baghdad area. The pilot was noteworthy for developing building good Government-NGO relations and a shift in attitudes to children in special need from the welfare approach to a more child rights approach.

It is unclear to what extent the initiatives described in this chapter have survived the growing humanitarian emergency or, in the cases of the Kurdistan Region, have been replicated. What is clear is that there is a pressing need to promote the rights of vulnerable children, an area of child rights that is even less well developed than others because it has been neglected for so long. It is also clear that families and communities in much of Iraq do not have the resources to fulfil their children's rights to protection, and the agencies of the state at the national level are greatly over-stretched. In this situation, the international community bears a special responsibility for children's protection. Some of the main areas for support are set out below.

Emergency Responses In governorates where there are large numbers of displaced families, it is important to be aware of children's pre-existing vulnerabilities and to respond to families' additional need for support, to the extent possible. National and international humanitarian relief agencies must also be alert to violations of children's right to protection through forced labour, domestic violence, or abuse, and work with families and community leaders to provide alternatives and support.

Responses to Poverty and Accumulated Gaps In areas that are relatively quiet, there is a pressing need to develop Governorate capacities to understand the vulnerabilities children face and the concepts involved in the right to protection, to gather data, and to engage local and regional leaders as well as families in finding solutions.

In the Kurdistan Region as in other parts of the country, disability remains a neglected area, and it is important to upscale initiatives such as the one described in Box 16. Resources should be made available to expand initiatives to reach children communities in mine-contaminated regions, to the extent possible.

In cases where children's rights are clearly being violated within state institutions, such as the juvenile prison, there is a need for urgent action to prevent violations and make alternative arrangements for children. As and when the situation stabilizes, attention can turn to the legal framework for child protection.

Iraqi adults and children throughout the country are suffering from psychosocial distress accumulated over the past quarter century. Initiatives for child protection should incorporate an element of psychosocial support to families, to the extent possible. Although this may seem a luxury in light of the pressing needs for security, shelter, food, and water, the psychological impact of the current situation on children will exacerbate feelings of revenge and militarize society rather than fostering a culture of peace.

The data that is currently being gathered about children in Iraq focuses primarily on children's rights to health, nutrition, and education, but not enough information is available about the extent of children's vulnerability. UNICEF's MICS3 did gather data on four areas of vulnerability (child labour, school attendance by orphans, birth registration, and early marriage). Some data is gathered about the conditions of children in IOM and UNHCR reports, with some reference to child labour and sexual exploitation. IOM has produced governorate by governorate reports.

In collaboration between these organizations, arrangements could be made to support additional data gathering on vulnerability. Monitors undertaking regular field visits to monitor programme implementation in health, education, and other areas could also do so. The availability of data will help identify the resources and capacity necessary to respond.



Chapter 5

Understanding Mother's Roles, Assessing Women's Rights

Both parents are responsible for the rights of their children, as set out in Article 18 of the CRC (see Annex 1). At the same time, a mother's own nutrition, health and education have a major impact on the development of her children, particularly during pregnancy and breast-feeding, that is, at the beginning of the child's life cycle. Once this period is over, both men and women are in a position to bear responsibility for their children. Neither men nor women who do not enjoy their human rights throughout their own life cycle are in a position to provide for the survival and development of their children. Indeed, singling out women's maternal roles as opposed to men's paternal roles may contribute to reinforcing gender stereotypes about women's domestic roles.

UNDERSTANDING THE GOAL OF GENDER EQUALITY

Equality between girls and boys, and women and men, is not only enshrined in several conventions. It is also one of the eight MDGs and underlies all the MDGs. To achieve gender equality, development practitioners must begin by understanding how discrimination on grounds of sex works against females as well as against males, and then take action to address this. This is why it is so important to, where possible, disaggregate data to examine not just the overall status of children but also the status of girls vis-à-vis that of boys, at different stages of their life cycle.

For example, in the case of Iraq, girls now lag seriously behind boys in schooling. Women experience much higher unemployment than men. Boys are more likely to be sent out to work as children than girls, or are more likely to be living on the street. Men account for the greater proportion of those killed or injured during the wars and conflicts of the past quarter century, and suffered the great hardships of compulsory military service in times of war. Boys are also far more likely to be drawn into the current conflict as soldiers or by militias.

Working towards gender equality means understanding the gender stereotypes that result in girls not being sent to school or boys being sent early into the workforce, and then taking action to address these stereotypes so as to ensure that both women, men, boys and girls have equal opportunities to realise their human rights. While working for gender equality in current programmes will prevent discrimination in future, it will not address the decades-old backlog of discrimination. This must be tackled through specific interventions that empower girls and women, and/or boys and men, depending on the gaps that have been revealed through analysis of the evidence of the data.

A special chapter is dedicated to women's rights in this report because there are several areas in which women's rights are being increasingly violated or remain unfulfilled. In addition, at this stage of the country's development, the mother is still seen as the primary care giver during their children's early years. As noted above, the mother's education is positively identified with their children's health in several respects:

- Children whose mothers have secondary or higher education are the least likely to be underweight and stunted.
- Children's vaccination increased by mother's educational level.
- Primary school completion rates increase with mothers' education.
- Transition from primary to secondary level is positively associated with mother's education
- Child labour decreases as mother's education increases (see Figure 3 in Chapter 4)
- Early marriage increases as the mother's education decreases.

These are among the reasons that UNICEF's 2007 State of the World Children's Report focuses on the double dividend of gender equality: invest in women and you also invest in generations of children to come.

At the same time, throughout the region, and Iraq is no exception, men play an important role in the domestic economy - taking on tasks like shopping, taking children for vaccination, helping with homework, and others. Men's education is an important factor in promoting the right to education of their daughters and sons. Information is not yet collected on the links between men's education and their children's rights to health, nutrition, education, and others. Identifying and recognizing these roles will lead to more equitable share of work between women and men in the domestic sphere at a time when women are taking on greater roles in the workforce, politics, and other public spheres.

IRAQI WOMEN'S RIGHTS TO SURVIVAL AND HEALTH

The mother's health and nutrition during pregnancy and while breastfeeding are key to their own survival and to the safe delivery and survival of infants and under-five children. The deterioration of the health system has impacted on women's health during pregnancy and at childbirth. The impact of the surge in violence, particularly since 2006, has not yet been assessed, but data collected for MICS3 gives a picture of the situation until that time.

Table 9 Iraq and Its Neighbours: Maternal Mortality Ratio

		Iraq*	Jordan	Kuwait	Saudi Arabia	Syria
Annual number of deaths of women from pregnancy related causes per 100,000 live births	Total	193	41	5	23	160

* Iraq data from ILCS 2004. All other data adjusted for 1990-2005 in SOWC 2007

Box 19**Compromising Girls' Rights to Health and Education in Kurdistan**

The tribal mentality still exists in Kurdistan. I visited the rural areas in 2001 and saw teams spreading out to vaccinate the people. Some men would not accept that the tetanus shot be given to girls because their hand would be painful for a few days and they would not be able to work in the fields. The man who said this to me explained it while he sat and smoked.

We tried to get the girls vaccinated in various ways, but they said, 'If he doesn't agree to it, I can't get the vaccine. He will hit me after you leave.' So we sat and reasoned with the father, and talked to him until he accepted. We get his acceptance dose by dose.

*Ministry of Health senior staff (male)
Kurdistan Region*

Girls aren't dropouts - because they've never been sent to school. They're forced to stay at home, especially in rural areas. We did a survey in the summer in eight villages around Erbil on the status of women and children. We worked in very difficult circumstances. People were afraid to talk. Men don't accept it that women should study and work. We would ask a man, 'Does your daughter study?' And he would respond, 'No, what for?' At the same time, the women have a real thirst for education.

We organized sessions in the villages surrounding Erbil, awareness raising about vaccinations and the girls' need to study. We invited Muslim clerics, teachers, and soldiers. At first some did not accept the idea, but after the third day they brought their womenfolk to listen and began to accept these ideas. The imam of a mosque liked what we said and we encouraged him to raise awareness through the mosque.

The main problem faced by women is violence. We go to the emergency rooms and get the data. They claim that the burns or injuries are "self inflicted." Violence inside the home is a major issue but they can't complain about the husband or children. We have one centre in Erbil for women who suffer from domestic violence and it helps as much as it can.

*Ministry of Human Rights staff (female)
Kurdistan Region*

The majority of women (88.5%) giving birth two years prior to MICS3 delivered babies with assistance from skilled attendants - half of these were assisted by a doctor and a quarter by a certified midwife. Approximately two out of three births occurring in the two years prior to the Iraq MICS3 survey were delivered in a health facility (63%), with more in urban (68%) than in rural areas (54%). Also according to MICS3, delivery in a health facility increases with a woman's educational level – only about half of the uneducated women delivered in a health facility (52%), compared with 61% for women with primary education and 72% for women with secondary or higher education.

The percentage of women receiving skilled care is certain to have been reduced due to the current violence. There are reports that women are no longer seeking ante-natal care during pregnancy as frequently as they used to due to the security situation and the weakening health care system. Women's access to emergency obstetric care if they experience life threatening problems during pregnancy or childbirth are key to saving their lives and health. However, maternal mortality rates are still high in Iraq at 193 per 100,000 live births.⁵³ This is three times higher than in neighbouring countries, as Table 8 shows. The direct causes of maternal deaths are similar to other developing countries and are mainly complications of pregnancy and delivery. They include eclampsia, haemorrhage, prolonged and obstructed labour, postpartum infections and complications of abortions. These conditions are usually made worse by prevalence of malnutrition and anaemia in women of childbearing age.

In terms of access to contraception, about half of currently married women or their husbands reported using contraception in 2006, with the pill being the most popular method. Women's use of contraception rises with their educational level, from 45% among women with no education, to 48% among women with primary education, and 55% among women with secondary or higher education. It would be useful to begin to track the links between men's education and contraception use.

KEY HUMAN RIGHTS ISSUES FACING WOMEN IN IRAQ

The UNAMI Human Rights reports for September-December 2006 painted a picture of increasing violence against women, against a background of overall violence, poverty and unemployment. It highlighted the very "worrying trend of female suicides" in the north, an indication of increase in honour crimes. The Secretary General's special representative wrote a letter to political leaders expressing his concern. A woman's rights activist in Mosul was killed after receiving threats from Islamic militias discouraging her from working with international organizations. The report also noted the increase in muta'a or temporary marriages, an arrangement that can last from a few hours to a year.

A comprehensive understanding of the human rights issues facing women in Iraq emerged at a workshop convened by UNIFEM in Amman in September 2006, which brought together the international NGO Coordinating Committee for Iraq and UN agencies in Amman to assess the current situation and identify priorities for action. In discussion, the participants identified issues on a regional basis that included the following:

- Central Iraq: high level of violence; large number of IDPs; high number of female headed households; high level of unemployment; many women have stopped working for security reasons; female students are dropping out of school; rising number of honour killings; increase in early marriages; increase in trafficking; reports of female genital mutilation; less activity by national and international NGOs.

53. ILCS. In another report that was never officially published, the maternal mortality ratio was estimated at 120 per 100,000 live births.

- Baghdad: decrease in school attendance; growing brain drain; restricted movement of women and girls; restricted choice of marriage (the highest number of mixed marriages is in Baghdad); increase in the number of female headed households, many of them widows with low education and high unemployment rate; decline of small income generating projects for women; declining health indicators for women; women are not in key ministries; women activists face great risks.
- The North: big differences between provinces and rural urban areas with regard to women's status; strong patriarchal system; low participation by women in politics and business - at the same time, increasing freedom of expression and participation for both men and women; improvement in women's education; early marriage; increase in divorce; increase in trafficking; much higher scale of honour killings with continued sympathy with perpetrators despite the change in the law; very prominent incidence of FGM; IDPs, migrants - vulnerable communities within which women are especially vulnerable.
- The South: underdeveloped, neglected region; higher levels of crime, drugs and trafficking; women are vocal, committed, and care for local needs; security situation deteriorating and NGOs experiencing threats; younger generation becoming more conservative; growing phenomenon of temporary marriage.

In terms of furthering women's human rights, participants at the September 2006 workshop noted that much of the work was clustered in the north, the south, and around Baghdad, with very little activity in the west and east. Reasons include donor preferences for areas such as the north and the south and for working with Government institutions in Baghdad; the security situation; availability of local partners and of partners with programme implementation skills. There was a need to expand programmes to under-served regions. Participants also underscored the need for better data on the status of women.

Meanwhile, the legal framework for the rights of women began to be eroded in the last years of the Saddam Hussein regime, which, for example, lessened the penalty applicable to "honour crimes". The penal code still exempts a man who "disciplines" his wife from criminal responsibility (Article 41).

Box 20

Family Reasons for Early Marriage

The other day I was visiting a family whose 13-year old daughter was married to her cousin. I asked her mother why she accepted this for her daughter. She said her husband would hit her if she did not. Besides, there was the security situation, and the economic situation, and the loss of so many young men. It was better to marry her off at the first opportunity.

*Health and nutrition staff
Basrah*

Even though the legal age for marriage is 18 and early marriage has declined over time, the phenomenon of early marriage is still strong in Iraq, with all that it implies for the violation of human rights of girls as well as boys. For the former, the result is early pregnancy, little education and skills, and inadequate capacity to cope with social and economic conditions. For the latter there is the responsibility of providing for a family, still traditionally seen as the male's primary responsibility, while still little more than a child. Overall, however, the phenomenon of early marriage impacts on females more than it does on males, and MICS3 found that about 19.0% of female adolescents aged 15 – 19 were married, with little difference between urban and rural areas. MICS3 also revealed that 25.8% of girls aged 15-19 years who married young often married men at least 10 years older than they were. MICS3 confirmed prevalence of early marriage had declined over time: 33.7% of women aged 45 to 49 had been married before their 18th birthday compared to 17.0% of women aged 20 to 24.

WORKING FOR RIGHTS WITHIN AND OUTSIDE THE HOME

The Government established a Ministry of State for Women, and efforts were underway at the end of 2006 to develop its capacity and to develop a national plan for women. The national statistical department, COSIT, was working on disaggregation of data by sex. As for non-governmental organizations, Iraqi women's groups are among the strongest NGOs in Iraq at present, although they now have to be extremely cautious in how they work. In 2004, women's rights activists successfully campaigned against an attempt to amend the personal status law to place certain family matters under the control of religious authorities.⁵⁴ Women's groups also lobbied for an introduction of a quota in political decision-making bodies, which has been set at 25%. In the Kurdistan Region, women's organizations are very active and were responsible for the evolution of laws in favour of women, according to a Ministry of Human Rights official. They have campaigned against FGM, gaining the support of clerics and local authorities.

In moving forward, the following responses could be considered. In governorates badly affected by conflict as well as in areas experiencing the worst poverty, female-headed households need special support in access to food and basic services. In addition, female headed households are in special need of documentation as this may have been produced in the husband's name given traditional beliefs that men are heads of household. Women and girls need protection from harassment, domestic violence, and sexual exploitation.

In quieter Governorates, the case for women's human rights should be made more strongly. In the Kurdistan Region, the new Ministry for Human Rights is undertaking initiatives to support the rights of girls and women to education and health service that should be better resourced and supported given the region's slow development progress in spite of several years of quiet - a slow pace that has been partly explained by high illiteracy, particularly among women.

Gender disaggregated data at the national level as well as at the project level should be strongly supported given the paucity of gender disaggregated data in many of the areas covered for this report. Monitors working for humanitarian relief and development agencies needs to consistently disaggregate

54. Amnesty International report, February 2005.

data by gender to better understand and respond to the impact of the current conflict. There is also a need to understand the coping mechanisms girls and women - as well as boys and men - are developing to survive the current disruption of utility services in Iraq, and the ways in which these influence gender roles.



Chapter 6

Reaffirming the Commitment to Iraq's Children

Tragic conflict is rapidly transforming the face of Iraq and it is difficult to present an analysis that will still be relevant when the print is dry. Nevertheless, the previous chapters have attempted to depict the situation of children in Iraq, analyze the causes for the non-fulfilment of their human rights, and assess efforts by the national authorities and NGOs as well as the international community to promote these rights, in the hope of making some meaningful recommendations.

The situation by January 2007 can be summarized under two broad headings: the humanitarian emergency, and the problems created by what can be termed arrested development, which leave the Government and international community hard pressed to respond to either development or humanitarian needs. Against this background, what can be done to promote the rights of children, and who is responsible?

THE HUMANITARIAN CRISIS AND THE PROBLEMS OF ARRESTED DEVELOPMENT

By January 2007, the fallout from insurgency and counter-insurgency operations and sectarian fighting included:

- Hundreds of thousands of children were displaced within or outside Iraq, with limited or no enjoyment of rights to shelter, food, health care, or education. One in eight Iraqis was displaced, and an estimated 5,300 people were being displaced every day.
- A fast-growing number of children were losing one or both parents.
- A growing number of boys and girls were being forced to work or faced sexual exploitation.
- Insecurity and the spread of conservative beliefs were leading to violations of the rights of girls to life, physical integrity, education, health, and freedom of movement.
- Many more widows were left to fend for themselves and the household, including caring for the wounded, even as traditions made it more difficult for women to find employment.

Since 2003, the fighting has made it difficult for the Government to deal with the after-effects of 13 years of sanctions or follow up on new initiatives. Even though Government allocations to basic services had increased by the end of 2006, the public sector remained hobbled by:

- Insufficient resources for recurrent or new investment, and a heavy debt servicing burden;
- Politicization, rapid turnover, and weakening relations between the centre and the governorates rather than planned decentralization;
- Major gaps in both sectoral and managerial skills and knowledge especially in the governorates, and difficulties in making inter-sectoral linkages between health, nutrition and other systems;
- Emphasis on expensive imported technology rather than appropriate technology and community based solutions; and
- Complicated relations with the international development and humanitarian community due in part to the long-distance nature of collaboration, and to burdensome policies and procedures, among other problems.

As a result, millions of children did not enjoy rights to physical survival and growth, development, participation, or protection.

- Over one million families were relying on social welfare payments by the end of 2006, that is, at least three million children were living in poverty. Unemployment was said to be over 60% and the majority of the population depended on PDS rations.
- Infant and under five mortality was higher in Iraq than in any of its Arab neighbours, though they had all started from a similar base in 1990.
- Chronic malnutrition had stabilized at a high level by 2003 and was worsening.
- There was growing dependence on immunization rather than on a functioning preventative health system to ward off disease, and family and community knowledge of the factors necessary for children's health was decreasing.
- Water and sanitation services were seriously over-stretched and, like health and nutrition services, in danger of collapse.
- 800,000 children were out of primary school, 64% of them girls. The literacy rate of youth aged 15 – 24 was lower than that of the 25-34 age group, indicating that the younger generation was falling behind.
- 250,000 teachers still needed in-service skills building and administrators needed enhanced capacities for planning and management at all levels.
- 4,000 schools still needed rehabilitation, 700 needed rebuilding, and 4,500 new schools were needed to accommodate population growth.
- The needs of adolescents for information and engagement in social development were greatly underserved, even in quiet governorates.
- Few services responded to the needs of vulnerable children for protection, including those who are separated from their caregivers, children in need of psychosocial support, those who are exposed to violence, and abuse, those living with disabilities, children exposed to unexploded ordnance, orphans, children driven into the workforce, children forced to resort to begging or living on the street, children in conflict with the law, and early marriage.

HUMANITARIAN AND DEVELOPMENT RESPONSES

Between 2003 and 2006, the Government and the international community were, in spite of the difficulties, able to respond to some of children's basic needs, including:

- Rights to survival, growth, and development, by sustaining some of the basic health and nutrition services for 4.8 million children under five years of age; addressing some nutrition issues such as fortifying wheat flour with iron and folic acid; rehabilitating and maintaining some water and sanitation services; providing chemicals needed for water treatment plants as well as water-tankers to deprived areas and hospitals; and establishing a committee for early childhood education.
- Rights to education by increasing teachers' salaries and benefits and beginning in-service training; revising part of the curriculum; providing learning materials for all 4.5 million primary level students; instituting management information systems; rehabilitating hundreds of schools as well as water and sanitation services, an important factor to promoting girls' education; and piloting initiatives targeting children who missed out on schooling, as well as integrating basic services and engaging local communities in children's right to education.
- Rights to protection, by increasing the number of families receiving welfare subsidies from 160,000 to one million, undertaking studies on children suffering from different forms of vulnerability, supporting some services for children with disability, developing a mine risk education programme for students in contaminated governorates, piloting an initiative to reintegrate street children with their families, and promoting concepts of child rights rather than welfare approaches.

During this period, promising new initiatives were piloted, particularly at the community level, which should be replicated or scaled-up. In particular, the integrated basic services project pulled together experience in water, sanitation, nutrition, health and child protection to focus on schools and community engagement. The accelerated learning programme demonstrated the great thirst for education, and encouraged families and communities to claim additional services. The special education programme for children with Down Syndrome in Kurdistan Region gave families the tools to care for their disabled children. The establishment of a radio station for and by youth, also in the Kurdistan Region, helped to overcome their passivity and negativity. All of these programmes not only provided services; equally importantly, they empowered children, adolescents, families and communities.

It is worth noting that these pilot initiatives were conducted against the background of superhuman efforts by Iraqis to maintain basic services, working with the international community. Carrying out nationwide immunization campaigns, introducing new measures such as the fortification of flour, patching up water and sanitation services - all these efforts were a testament to people's tenacity and commitment. Moreover, both Iraqi civil servants and international organizations proved adept at finding ways to keep working by, for example, introducing a system of national monitors to oversee international programmes, or entrusting local residents with the responsibility for distribution of humanitarian relief.

RESPONSIBILITY FOR THE RIGHTS OF THE CHILDREN OF IRAQ

In spite of these humanitarian and development responses, parents and communities in much of Iraq are unable to fulfil their responsibilities to their children. Few are in a position to lobby local, provincial, or national leaders to claim the support and services to which they are entitled. The central Government, which is usually primarily accountable for the rights of citizens, operates in one of the most violence-ridden parts of Iraq, the capital Baghdad. Ministries, government facilities, and civil servants are themselves targets. Given the previously highly centralized nature of the regime, local and regional government lack the capacity for development in those parts of Iraq that are relatively quiet. The international community has played a major part in Iraq's situation since 1990, through sanctions and military interventions as well as by supporting development and humanitarian relief. This places it under an obligation to contribute to the fulfilment of the rights of Iraqi children.

The development and humanitarian responses described above must be redoubled, using Iraq's own resources as available and drawing on the resources and support of the international community. In addition, in conflict areas, there is a need to:

- Advocate for the humanitarian space and resources to fulfil children's rights;
- Increase resources to ensure that mobile health, nutrition, water, and education services reach displaced populations as well as host communities;
- Focus on the needs of the most vulnerable, particularly infants, young children, and pregnant and lactating women;
- Ensure that children's protection rights are understood and addressed, including those of children who are separated from their caregivers, children in need of psychosocial support, those who are exposed to violence, and abuse, those living with disabilities, children exposed to unexploded ordnance, orphans, children driven into the workforce, children forced to resort to begging or living on the street, children in conflict with the law, and early marriage;
- Ensure that schooling is available for all children of all ages - and encourage adolescents to participate in providing services and in other ways so as to lessen their vulnerability to recruitment by militias or criminal gangs, or abuse of alcohol or drugs; and
- Support self-reliance, especially of female-headed households, and protect women from threats, attacks, and exploitation.

In relatively quiet governorates and wherever possible in the rest of the country, there is a need to:

- Support the capacity to manage development, particularly in the regions, including the capacity to deal with emergencies since the conflict could spill over to quieter parts of the country. Pilot initiatives such as the integrated basic services project provide a good basis for upscaling or replication.
- Support intensive outreach and advocacy for girls' education and women's literacy on human rights grounds, particularly in the Kurdish Region where very low literacy has seriously held back development. Moreover, there is a need to strengthen understanding of differences in gender roles and to factor this into the work of national and international staff so they can gather gender disaggregated data, including during the monitoring of health, nutrition, water and sanitation, education and other initiatives.
- Increase attention to the needs of adolescents for information, participation, and psycho-social support so as to defuse feelings of revenge, help stem militarization of society, and foster a culture of peace.
- Invest in initiatives to support children living with disabilities, expand initiatives to reach children communities in mine-contaminated regions, build on efforts to reintegrate street children, protect children from forced labour and exploitation and prevent violations of children's rights in state institutions. There is a need to strengthen understanding of vulnerability among national and international staff so as to gather more data on vulnerable girls and boys during the monitoring of health, nutrition, education and other initiatives.

There are three key messages for those who care about this country's children:

- Prepare for the long haul Security will not materialize overnight. The international community must do all it can to secure a more stable environment while continuing to invest in children. This means supporting basic needs, an investment that will be key to a stable and productive country.
- Deal with reality Iraq is an emergency country and international organizations must be staffed,

resourced, and operated accordingly.

- Build on pilot initiatives Integrated area-based programmes centred on children have a better chance of yielding results and saving lives while the national government is under such pressure. Supporting Iraq's local communities without weakening its national systems will keep the space open for development.

Investing in the children of Iraq is not just a moral imperative, it is the best strategy to recover and rehabilitate the country. Iraq's present is heartbreaking enough, but without its children, Iraq has no future.

Box 21

Voices of Iraqi Youth

"I want to give my children what I didn't have"

I don't know how old I am. In the countryside, it's work all the time, and there's no time to remember birthdays! We had to walk to school, four kilometres a day. There was a river to cross, winter and summer - and there was no bridge. Occasionally we were given a lift by car, but then the distance was greater. Clothes were a problem, but the state provided books.

In spite of the difficulties, the childhood days were the best of times - you had friends, teachers, sports. I especially loved history and used to read about Arab victories. Even though some subjects were hard, you miss those days and want them to come back.

There was no radio or TV in those days. We used to hear from other people that there was a war [with Iran] but we had no first hand knowledge of it. Then, when my uncle and two cousins were martyred, we knew there was a war.

We moved to the city in 1988 because my father was looking for work. All you can do in the rural areas is farm - it's agriculture or nothing. My father got a job with the electricity department. I was able to complete my third preparatory year. I served in the army from 1991 to 1998. We were recruited as the planes were shelling the troops [after the invasion of Kuwait]. It was compulsory service - if you didn't serve, your family's ration card was stopped.

I work as a mechanic, repairing TVs, satellite dishes and other equipment. I remember when I first saw a TV- we spent all our time glued to it. Now I'm too busy repairing TVs to have any time to watch! The economic situation is very hard now. Under Saddam Hussein, I used to have enough to live. But now prices have gone up a lot - even though we have more money, everything costs much more. Electricity is very bad - we only get it for two or three hours every 24 hours - it's better on Friday because businesses are closed.

I have three children - two, three, and four years old. I want to give them what I didn't have - take them to the doctor, buy them things from the market. I want them to study and do well. I do the best I can for my kids. They're all I have.

*Ali, Basrah
November 2006*

Annex

EXTRACTS FROM THE CONVENTION ON THE RIGHTS OF THE CHILD

The four core principles of the CRC are: non-discrimination; the right to life, survival and development; the best interests of the child; and respect for the views of the child.

Non-Discrimination

Article 2

1. States Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.
2. States Parties shall take all appropriate measures to ensure that the child is protected against all forms of discrimination or punishment on the basis of the status, activities, expressed opinions, or beliefs of the child's parents, legal guardians, or family members.

Life, Survival, and Development

Article 6

1. States Parties recognize that every child has the inherent right to life.
2. States Parties shall ensure to the maximum extent possible the survival and development of the child.

Article 23

1. States Parties recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community. ...

Article 24

1. States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.
2. States Parties shall pursue full implementation of this right and, in particular, shall take appropriate measures:
 - (a) To diminish infant and child mortality;
 - (b) To ensure the provision of necessary medical assistance and health care to all children with

emphasis on the development of primary health care;

- (c) To combat disease and malnutrition, including within the framework of primary health care, through, *inter alia*, the application of readily available technology and through the provision of adequate nutritious foods and clean drinking-water, taking into consideration the dangers and risks of environmental pollution;
 - (d) To ensure appropriate pre-natal and post-natal health care for mothers;
 - (e) To ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents;
 - (f) To develop preventive health care, guidance for parents and family planning education and services.
3. States Parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children.
 4. States Parties undertake to promote and encourage international co-operation with a view to achieving progressively the full realization of the right recognized in the present article. In this regard, particular account shall be taken of the needs of developing countries.

Article 28

1. States Parties recognize the right of the child to education, and with a view to achieving this right progressively and on the basis of equal opportunity, they shall, in particular:
 - (a) Make primary education compulsory and available free to all;
 - (b) Encourage the development of different forms of secondary education, including general and vocational education, make them available and accessible to every child, and take appropriate measures such as the introduction of free education and offering financial assistance in case of need;
 - (c) Make higher education accessible to all on the basis of capacity by every appropriate means;
 - (d) Make educational and vocational information and guidance available and accessible to all children;
 - (e) Take measures to encourage regular attendance at schools and the reduction of drop-out rates.
2. States Parties shall take all appropriate measures to ensure that school discipline is administered in a manner consistent with the child's human dignity and in conformity with the present Convention.
3. States Parties shall promote and encourage international cooperation in matters relating to education, in particular with a view to contributing to the elimination of ignorance and illiteracy throughout the world and facilitating access to scientific and technical knowledge and modern teaching methods. In this regard, particular account shall be taken of the needs of developing countries.

Best Interests of the Child; Right to Protection

Article 3

1. In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.
2. States Parties undertake to ensure the child such protection and care as is necessary for his or her well-being, taking into account the rights and duties of his or her parents, legal guardians, or other individuals legally responsible for him or her, and, to this end, shall take all appropriate legislative and administrative measures.
3. States Parties shall ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities,

particularly in the areas of safety, health, in the number and suitability of their staff, as well as competent supervision.

Respect for Views of the Child; Right to Participation

Article 12

1. States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
2. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.

Millennium Development Goals

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
 4. Reduce child mortality
 5. Improve maternal health
6. Combat HIV/AIDS, malaria and other diseases
 7. Ensure environmental sustainability
8. Develop a global partnership for development

A World Fit for Children Goals

Strategies and actions under each goal contribute to achieving the MDGs

1. Promoting healthy Lives
2. Providing quality education
3. Protecting against abuse, exploitation and violence
 4. Combating HIV/AIDS

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