

A close-up photograph of three young children from Vanuatu. The child on the left is a girl with a wide smile, wearing a red and white patterned cloth. The child in the middle is a boy with a bright smile, wearing a traditional wooden headdress. The child on the right is a girl with a gentle smile, wearing a green and blue patterned cloth. The background is dark and filled with green foliage and traditional wooden structures.

CHILDREN IN VANUATU: 2011
AN ATLAS OF SOCIAL
INDICATORS

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Foreword

Vanuatu is a youthful nation. With more than half of the population aged below 25, it is clear that our country's future rests in the hands of young people.

As a government, it is our responsibility to invest generously in our young to ensure they have equal access to the services and opportunities they need to achieve their full potential.

Vanuatu takes seriously its commitment to meeting the targets of the Millennium Development Goals and is mindful of the fact that the 2015 deadline is fast approaching.

While we have made great strides in many areas, we still have a long way to go before we can say that Vanuatu's children enjoy equal access to the resources and opportunities they need.

The Government of Vanuatu believes that health, education and protection are the birthright of all children and welcomes the chance to work alongside UNICEF in identifying the disparities and inequities that stand in the way of children's development.

This Atlas of Social Indicators charts key indicators such as child survival, protection and development as well as relevant socio-economic factors and examines the progress made toward meeting the MDG targets.

It provides a snapshot of the situation of children in Vanuatu, province by province, and identifies areas of disparity and disadvantage. The atlas will serve as a valuable aid for Government and civil society in determining policy priorities and resource allocation to target the areas of greatest need.

In working to address the disparities that exist among children, we are investing in the creation of a stronger and healthier society, one which gives children equal opportunities for growth and development, no matter where they live.


Gregoire Virambath **NIMBTIK**
Acting Director General
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Introduction

Children in Vanuatu: An Atlas of Social Indicators provides a snapshot of the situation of children throughout the nation and examines the progress made towards achieving the Millennium Development Goals, in particular, those with special relevance to children. By mapping sub-national patterns of deprivation and disparity for children and women, the atlas provides a foundation for an effective response to such inequities.

In Vanuatu, the extended family remains the dominant social structure and the care of children is a shared responsibility. Family ties are valued highly and offer children protection and a strong sense of belonging. Traditional networks based on community, family and kinship provide social and material support and act as a buffer against poverty. The subsistence lifestyle predominates and from an early age, children are expected to help with daily domestic chores in preparation for adult life.

External pressures, however, are eroding the traditional structures that have provided security for children. Increasing urbanisation and reliance on the cash economy give rise to greater disparities in the quality of life, opportunities and services available to children. While the most pronounced gaps in equity are based on income, in Vanuatu, geography is also a key factor. The financial and institutional constraints on delivering social services to a scattered and often remote population present ongoing challenges. While those living in rural communities suffer more from poverty of access to services, children in urban areas are affected by material poverty and social problems that affect the welfare of families.

Some progress has been made in addressing children's rights and protection. The Vanuatu Government ratified the United Nations Convention on the Rights of the Child in 1993 and enacted the Family Protection Legislation in 2008. From a poverty reduction perspective, however, the Government still has a number of Millennium Development Goals (MDGs) to address in relation to health; specifically maternal and child health, water and sanitation.

A recent UNICEF study found that an equity-based approach to improving the situation of children and women could move us more quickly and cost-effectively towards meeting MDGs 4 and 5 by the 2015 MDG deadline.¹

An equity-based model focuses on strengthening services for all children; removing barriers that prevent the poorest from using services; and making greater use of community-based workers to deliver essential services.

It is hoped that the Government of Vanuatu and civil society will use the information brought to light in this atlas to develop policies that reduce child disadvantage and give all children an equal opportunity to grow and achieve their full potential.

¹ UNICEF, *Narrowing the Gaps to Meet the Goals*, 2010.

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Acronyms

CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women	NGO	Non-Government Organization
ECE	Early Childhood Education	PENAMA	Pentecost, Ambae and Maewo Islands
GER	Gross Enrolment Ratio	SANMA	Santo, Malo and Aore Islands
GNI	Gross National Income	SPRC	Social Policy Research Centre
HDI	Human Development Index	SHEFA	Shepards, Epi and Efate Islands
HIES	Household Income & Expenditure Survey	STI	Sexually Transmitted Disease
HIV	Human Immunodeficiency Virus	TAFEA	Tanna, Erromango, Aneitym and Futuna
IMR	Infant Mortality Rate	TORBA	Torres and Banks Island Group
MALAMPA	Malekula, Penama and Ambrym Islands	UNDP	United Nations Development Program
MCC	Millennium Challenge Corporation	UNICEF	United Nations Children's Fund
MDG	Millennium Development Goals	VEMIS	Vanuatu Education Management Information System
MICS	Multiple Indicator Cluster Survey	VIP	Improved Pit Toilets
MMR	Maternal Mortality Rate	VNSO	Vanuatu National Statistics Office
		WHO	World Health Organization

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1 DEMOGRAPHY



Demography

Overview

The Republic of Vanuatu is one of four Melanesian countries located to the north east of Australia in the South West Pacific. It comprises 88 islands – 65 of them inhabited – spread over more than 700,000 square kilometres of ocean. The total land area is 12,253 square kilometres and though not vast in terms of size, the distances between islands create major obstacles in the delivery of communication, transport and essential services. Rough terrain makes inter-island travel difficult and some communities are only accessible by boat or by light aircraft.

Land is held under customary tenure with 75-year leases being issued for urban, commercial, residential and tourism developments.

In 2009, Vanuatu had a population of 234,023 with a high ratio of children to adults. Children under 19 years comprised 47% of the population and young people aged 19-24 accounted for a further 11%.²

The population is distributed over six provinces and has two urban centres – Port Vila and Luganville - with an average population density of 19 persons per square kilometre. Most people live in the coastal areas, away from the rugged volcanic plateaus.

Bislama (Pidgin) is the national language, while English and French have official language status. Most Ni-Vanuatu also speak a local dialect.

The country has a tropical climate with high humidity and temperatures ranging between 15-31 degrees celsius. Cyclonic activity occurs during the rainy season from November to March. Vanuatu has seven active volcanoes and two subterranean vents that cause frequent earth tremors.

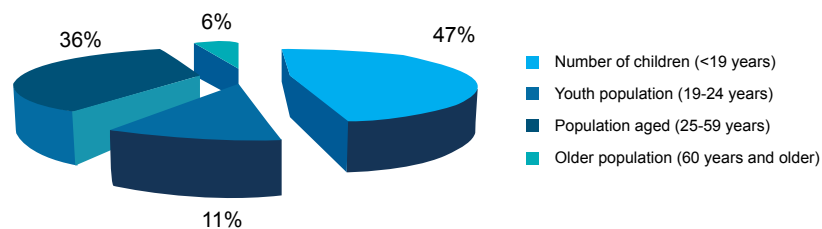
Subsistence agriculture is the main source of livelihood along with fishing, small-scale farming of copra, cocoa, kava, vanilla and other cash crops and cattle and small livestock grazing.

Historically, Vanuatu was administered by an Anglo-French condominium from 1906 and was known as the New Hebrides up until independence was achieved in 1980 and the name, Vanuatu, was adopted.

The country has a democratic Westminster system of government with elections being held every four years. Central Government is responsible for providing services, assisted by six provincial governments and two urban municipalities. In the rural communities, where 75.6% of the population lives, traditional custom chiefs have a significant leadership role. Services are also provided by civil society and a number of non-governmental organisations that work with Government to deliver a range of programs.

² 2009 National Population and Housing Census, VNSO

Figure 1.1 Age distribution



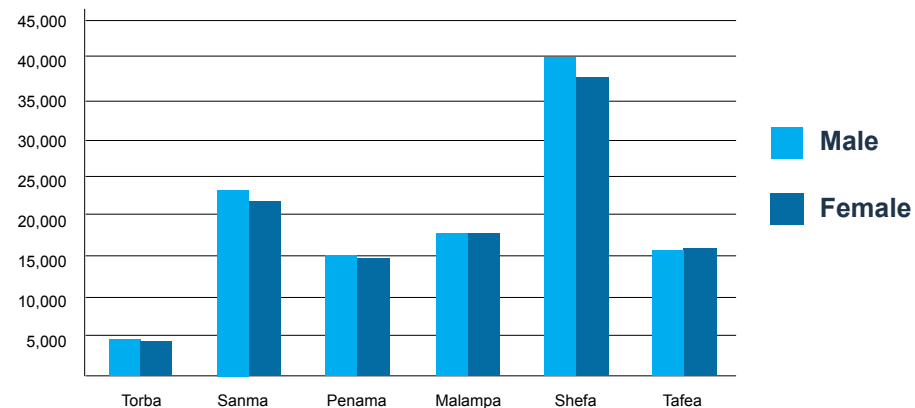
Source: 2009 National Population and Housing Census, VNSO

With 58% of the population under 25, the youth bulge presents a major challenge to planners, politicians and policy makers in meeting the needs of young people for education, health services and employment opportunities. The potential embodied in these young people also represents an opportunity for growth and innovation.

Lack of experience and relevant skills disadvantage youth in the labour market and the low absorption of school-leavers into formal employment is a concern³.

The distribution of the population by gender is generally equal, although there are somewhat more men than women in Shefa and Sanma reflecting the greater propensity for young men to migrate to urban areas.

Figure 1.2 Number of males and females by province

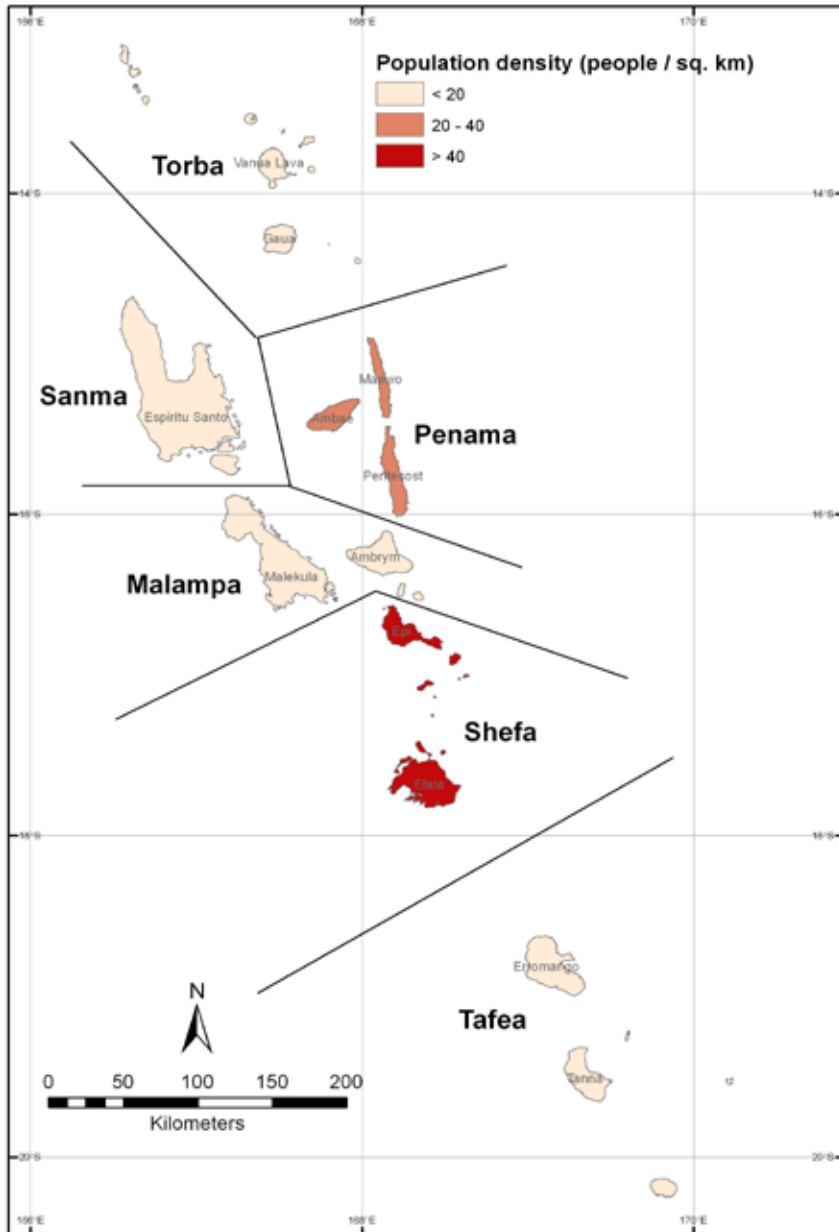


Source: 2009 National Population and Housing Census, VNSO

58% of the population are in the 0-24 age group

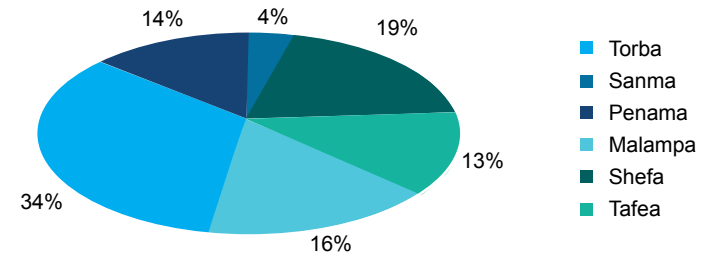
³ International Labour Organization, 2009.

Map 1.1 Population density by province



Source: 2009 National Population and Housing Census VNSO

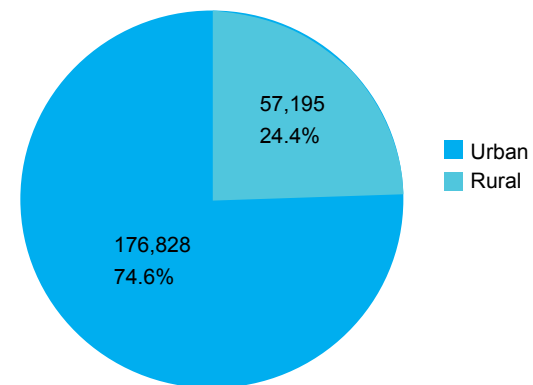
Figure 1.3 Population distribution by province



Source: 2009 National Population and Housing Census, VNSO

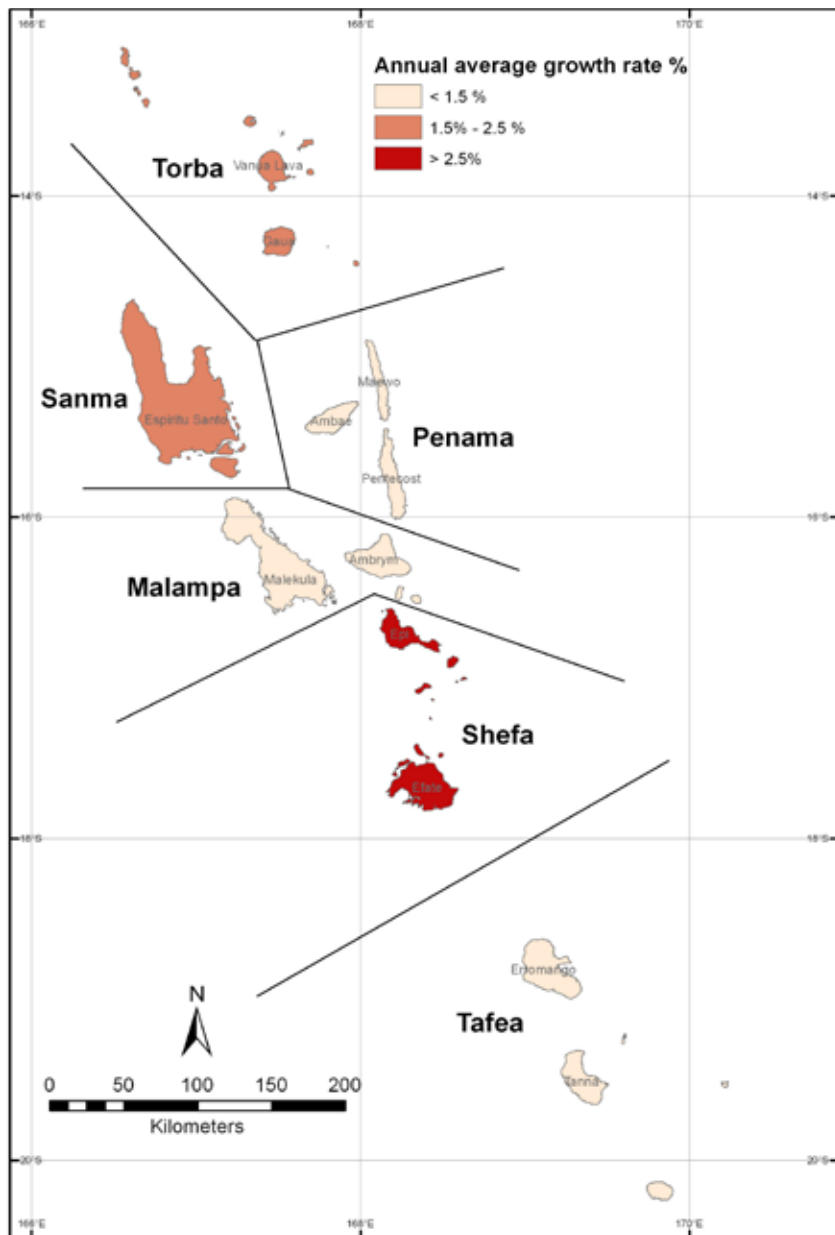
The national population density is 19 persons per square kilometre. There are, however, much more densely populated urban areas, for example, Shefa (where Port Vila is located), Penama and Tafea. Sanma, having the second largest town, has a high urban population, but due to its comparatively large land area has a low density with only 10.8 persons per square kilometre.

Figure 1.4 Urban/rural population



Source: 2009 National Population and Housing Census, VNSO

Map 1.2 Annual population growth rate



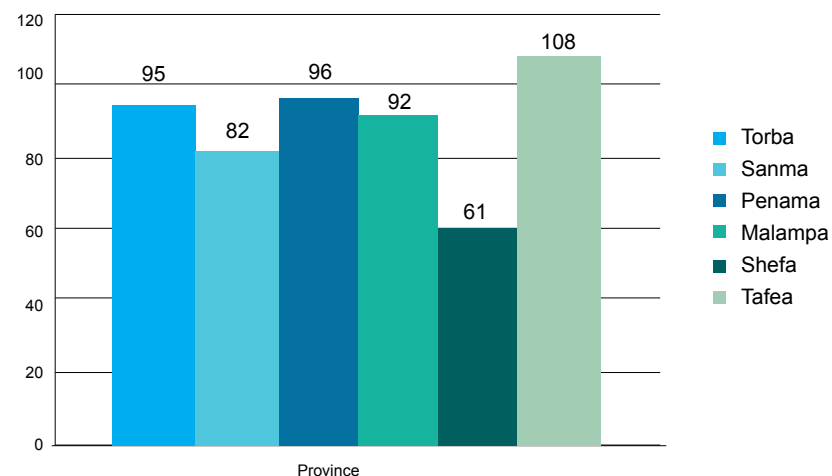
Source: 2009 National Population and Housing Census VNSO

Age dependency

With rising urbanization and a small job market, workers are engaged mainly in producing goods for their own consumption and for sale, doing unpaid family work and voluntary work.

The national age dependency ratio of 81 shows that for every 100 people of working age (15-59), 81 are in the age-dependent category, i.e. under 15 or over 59. The dependency ratio in urban areas is 54, while in rural areas it is 92. These ratios indicate a high level of burden on Vanuatu's working population and the Government to provide for the needs of dependants. Tafea has the highest dependency ratio of 108. This reflects the migration trends of the working population moving to urban areas looking for work. The next highest rate of dependency is in Penama, followed by Torba.

Figure 1.5 Dependency ratio by province



Source: 2009 National Housing and Population Census VNSO

The national population growth rate is quite high at 2.3%, however, at 4.1%, the Port Vila Urban Area is growing at a much faster rate. Shefa province, where the capital, Port Vila, is situated, receives most of the migrants from the outer islands. In 2009, 1370 people moved into Port Vila: 650 from Tafea, 400 from Malampa, 260 from Penama and 60 from Torba (2009 Census).

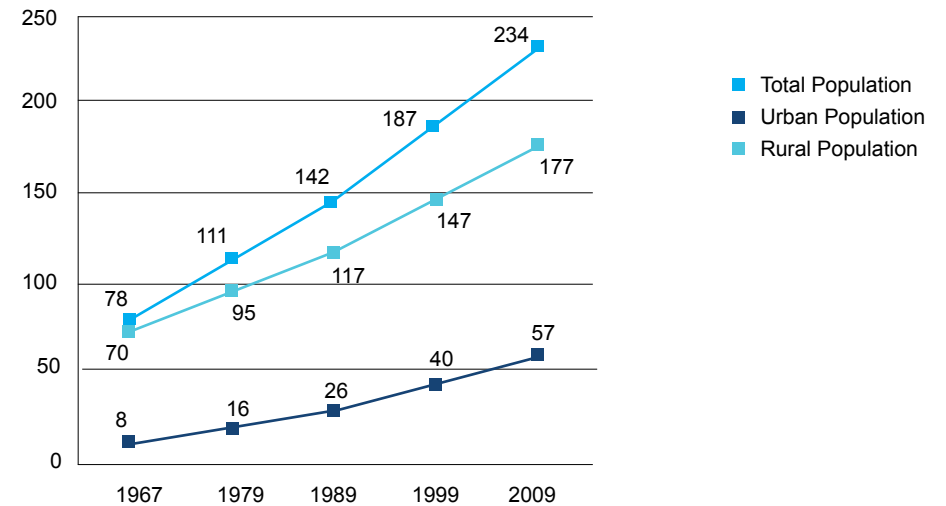
Shefa's overall growth rate is 3.7%, while Luganville, in Sanma province, has a growth rate of 2.0%. Both town centres have growing squatter settlement areas.

There are a number of peri-urban areas and the funding of the new Efate Ring Road and Santo East Coast Road infrastructure project by the Millennium Challenge Corporation - an independent US foreign aid agency - will encourage new settlements along these roads and new business and service developments.

There are two growing commercial centres – Lakatoro, on Malekula, and Lenakel, on Tanna Island, and it is expected that these will eventually be designated townships.

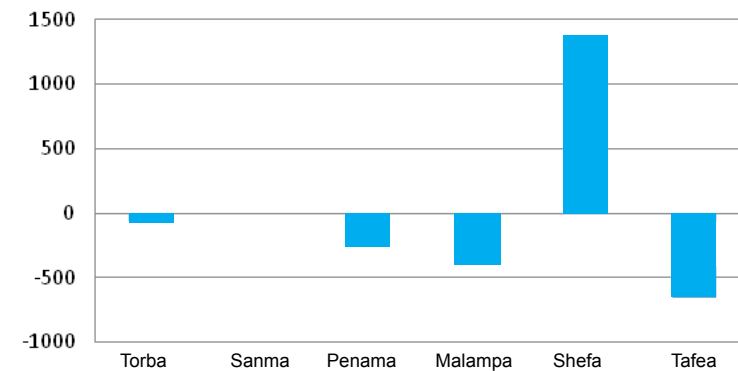
The average annual urban growth rate is 3.5%

Figure 1.6 Urban-rural population (in thousands)



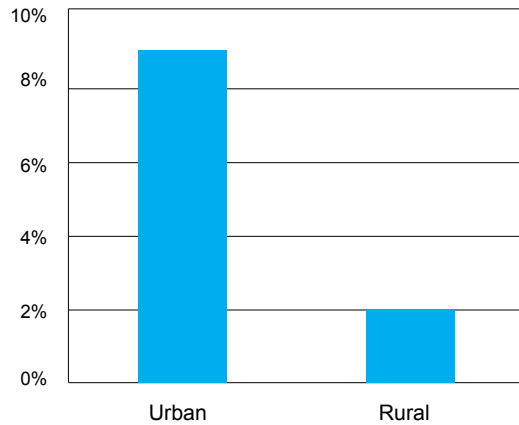
Source: 2009 National Housing and Population Census VNSO

Figure 1.7 Number of annual net migrants



Source: 2009 National Housing and Population Census VNSO

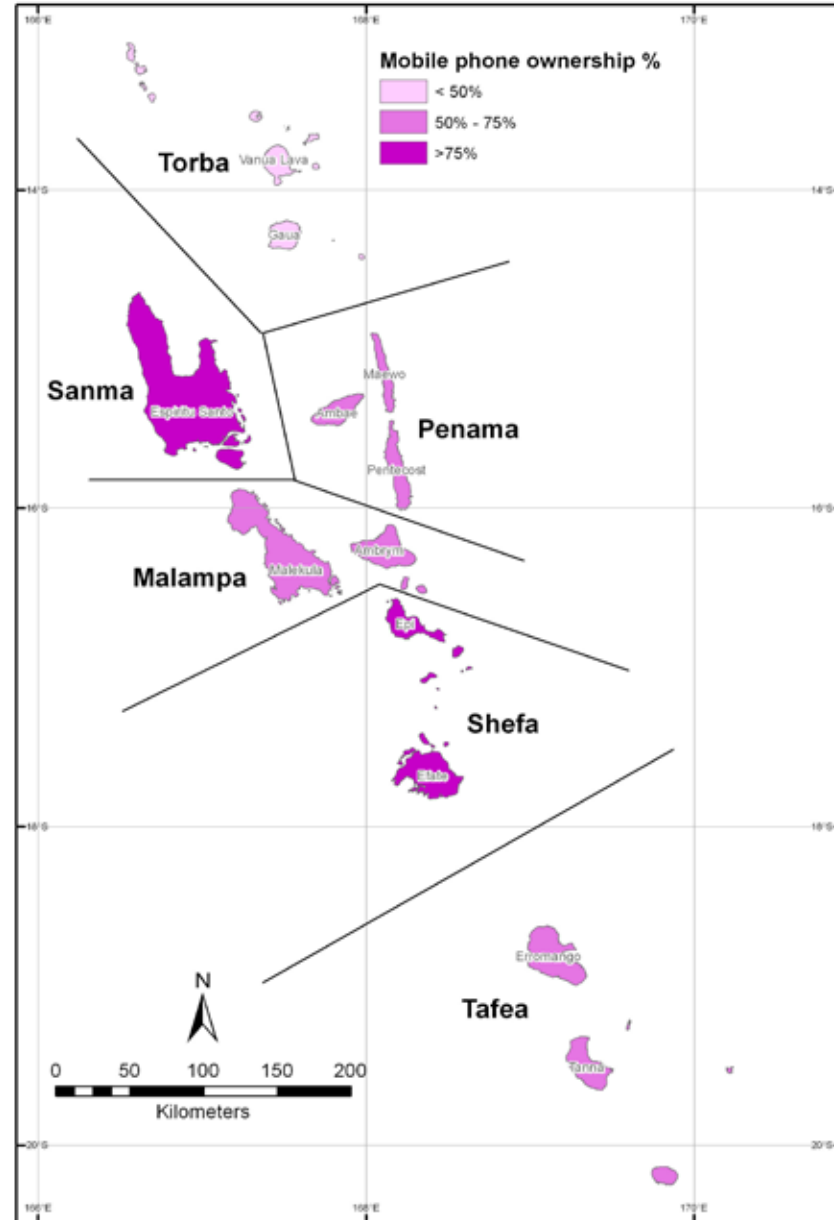
Figure 1.8 Percentage of households with access to internet



Source: 2009 National Census of Population and Housing, VNSO

Despite having good mobile phone coverage and improved telecommunication services, less than 10% of urban households and less than 2% of rural households have internet access. In rural areas, access would be mainly through secondary schools and some church institutions. The cost constraints and high taxes on the necessary equipment would necessitate an intervention policy to change this situation. Poverty of opportunity to access information is therefore very evident in both rural and urban areas. Children in Shefa and Sanma would have better access to information than those in other provinces.

Map 1.3 Mobile phone ownership (%)



Source: 2009 National Census of Population and Housing, VNSO

2 SOCIO - ECONOMIC DEVELOPMENT



Socio-economic development

Overview

Vanuatu is characterised by a large rural population and a high rate of dependency on subsistence agriculture.

Income is derived largely from tourism and small-scale sales and exports of agricultural products such as copra and coconut oil, beef, kava, coffee, cocoa, vanilla, shells and live fish.

Revenue is also raised through the Government's 12.5% Value-Added Tax and from import tariffs and charges. Foreign investment in Vanuatu is in tourism, the wholesale and retail trade, property development and building construction.

The population relies heavily on imported products such as rice, wheat flour, frozen chicken wings and canned foods as well as fuels and manufactured goods. The Government recorded a trade deficit of 1,163 million Vatu in the December 2010 quarter.

The most striking income disparities exist between those living in remote rural areas with poor access to services, employment and markets and those living in urban areas.

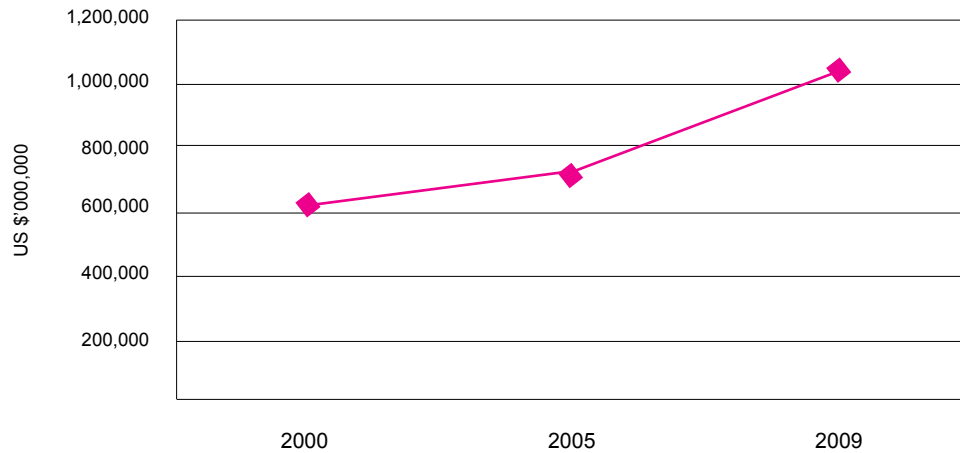
There are limited formal employment opportunities in Vanuatu. The census defines people who are actively engaged in producing or selling their own food to be self-employed. The definition of work for pay or work to support one's self makes up the productive sector, including those who are subsistence farmers. One in three adults working for pay or profit in Port Vila are considered to be living in poverty and these working poor are unable to meet their basic needs.

Many people consider themselves self-employed rather than unemployed and as they are not actively seeking work, are not classified as unemployed. The unemployment rates shown are therefore low and do not reflect the real numbers of people who are not in paid employment.

Some reasons for the low levels of employment include: low skill levels and educational attainment, the economy's lack of capacity to produce new jobs for young people, reluctance to employ long-term unemployed, lack of financial incentives, the changing international economic environment and people placing a higher priority on producing food for their own consumption.

One in three adults working for pay or profit in Port Vila are considered to be living in poverty

Figure 2.1 Gross National Product (GNP) (US\$)



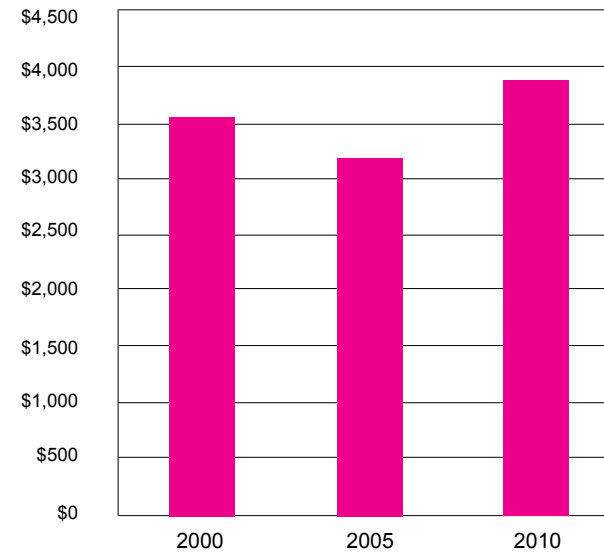
Source: Ministry of Finance Budget Book 2009/2010

Since 2000, the Gross National Product (GNP) has increased over the two periods to 2005 and to 2009 and this is due largely to increased activity in retail and wholesale trading, manufacturing, utilities, tourism and construction.

The introduction of the Regional Seasonal Employment scheme for Ni-Vanuatu to work in New Zealand has also contributed to this growth.

There is a disparity in growth rates between urban and rural areas. While there is underachievement in agriculture, in the urban areas expanding fiscal space (the difference between the current level of public debt and the level of debt that is sustainable) means more tax revenue for the Government and a greater capacity to fund services.

Figure 2.2 Gross National Income per capita (GNI) (US\$)



Source: Ministry of Finance Budget Book 2009/2010

The Gross National Income dropped to US\$3,231 per capita in 2005, then with increased levels of investment, rose again to US\$3,908 per capita in 2010. The higher level of investment has centred on the main towns in urban centres, with lower levels of development occurring in the rural areas because of the infrastructural constraints of remote islands.

Urbanization

Vanuatu is largely a subsistence economy, with 176,828 people or 75.6% of the population living in rural areas and 57,195 persons or 24.4% living in the two urban centres of Port Vila, on Efate, and Luganville, on Espiritu Santo.

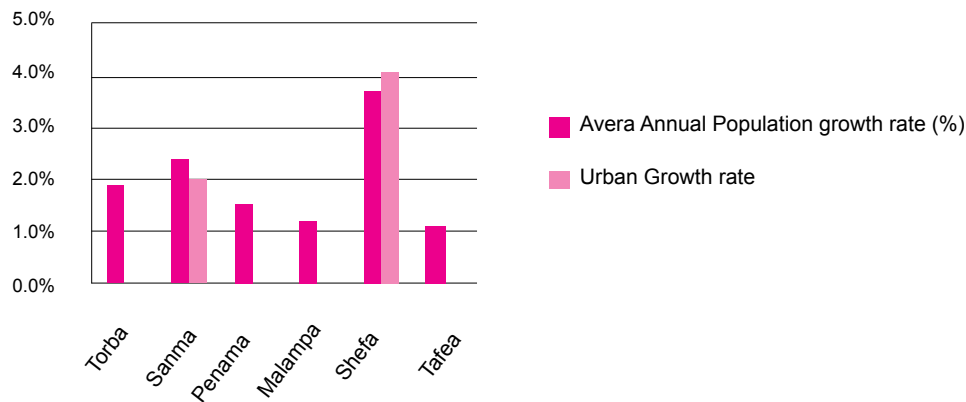
Distance and the cost of transportation limits access to education and health services for many living in rural areas. These are important precipitating factors in rural-urban migration with people moving to town centres in search of work, education and a range of services unavailable outside urban areas.

The ratio of the urban-to-rural population has been steadily increasing and is now 32:34. The average annual urban growth rate in 1999-2009 was 3.5%⁶.

The high growth rate will exacerbate the deficit of services and worsening of conditions if not addressed by municipal councils and the Government.

Figure 1.7 shows the increase in the urban and rural population over a 42-year period, with Census data being collected at 10-year intervals. Port Vila has a much higher growth rate and consequently, a much higher demand for social services, employment and housing.

Figure 2.3 Growth and urbanization rate

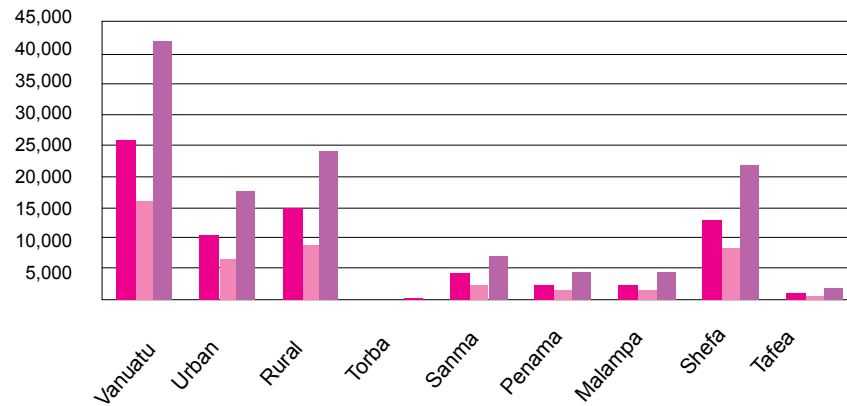


Source: 2009 National Housing and Population Census, VNSO



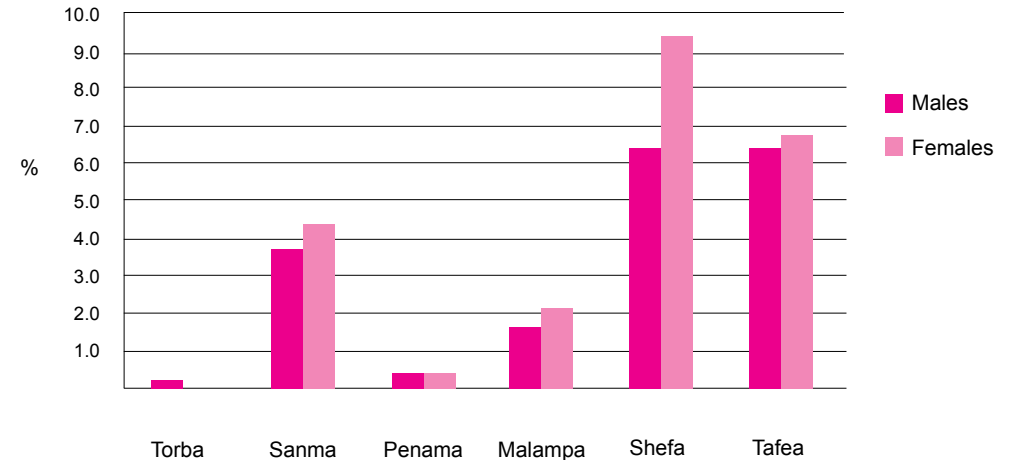
Work and employment

Figure 2.4 Labour force (Number)



2009 National Census of Population and Housing VNSO

Figure 2.5 Unemployment rate (%) by province



Source: 2009 National Census of Population and Housing, VNSO

Census data shows that Shefa at 43% has the highest levels of employment in the formal sector, but also has the highest levels of reported unemployment. Torba has the lowest level of formal sector employment at 13.7%.

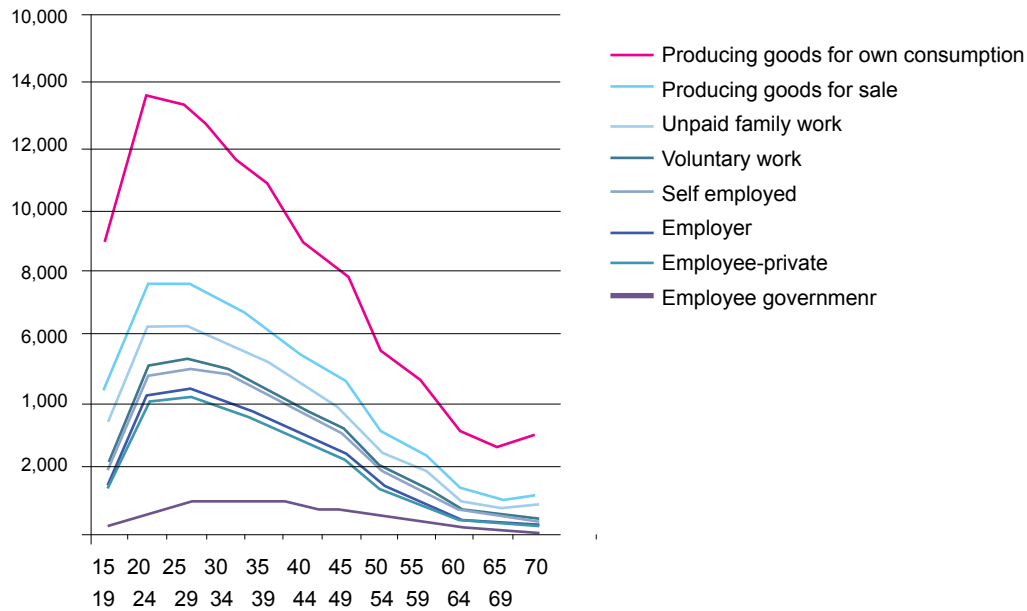
Formal employment opportunities in rural areas are limited and confined to provincial administrative centres, schools and health centres and agriculture extension, police and bank officers and some NGOs. This characterises the formal employment sector in all of the provinces.

Tafea and Sanma also have relatively high unemployment, with more women than men recorded as unemployed. Malampa, Penama and Torba have much lower numbers of people actively looking for work as there are few employment opportunities.

The unemployment rates are based on people who indicate they are seeking work. There are, however, many more who are unemployed, but not actively seeking work as there is none available. This group does not appear in these unemployment figures. Shefa therefore registers the highest number of unemployed people, followed by Tafea and Sanma.

Shefa province has both the highest level of formal sector employment and the highest level of reported unemployment

Figure 2.6 Employment type and age distribution

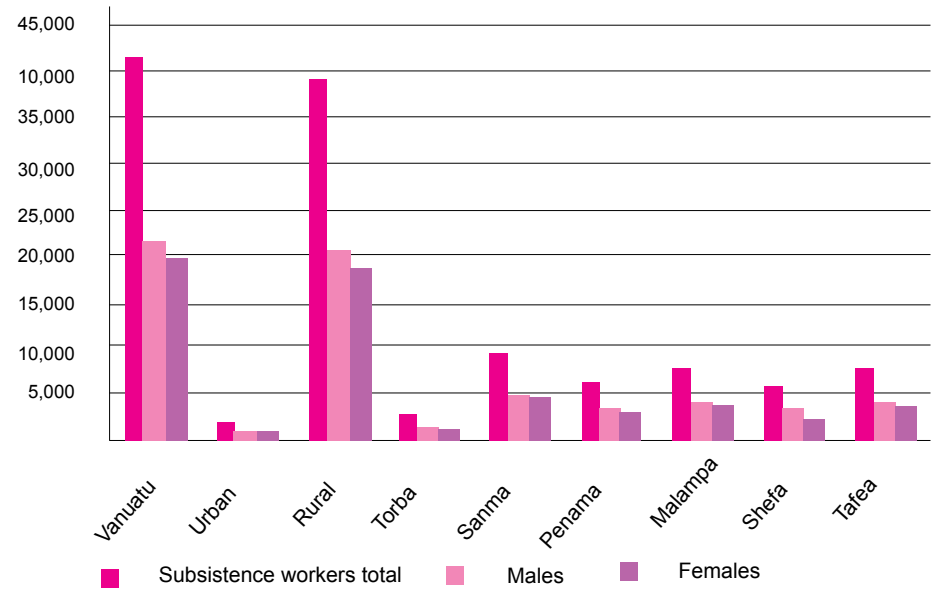


Source: 2009 National Census of Population and Housing, VNSO

Figure 2.6 shows the age range distribution and type of employment. The entry age for employment is 15-19, with the highest number of workers being in the 20 to 24 years age group.

The vast majority of people of working age, however, will not find employment in the formal sector and many will be engaged in voluntary or unpaid family work.

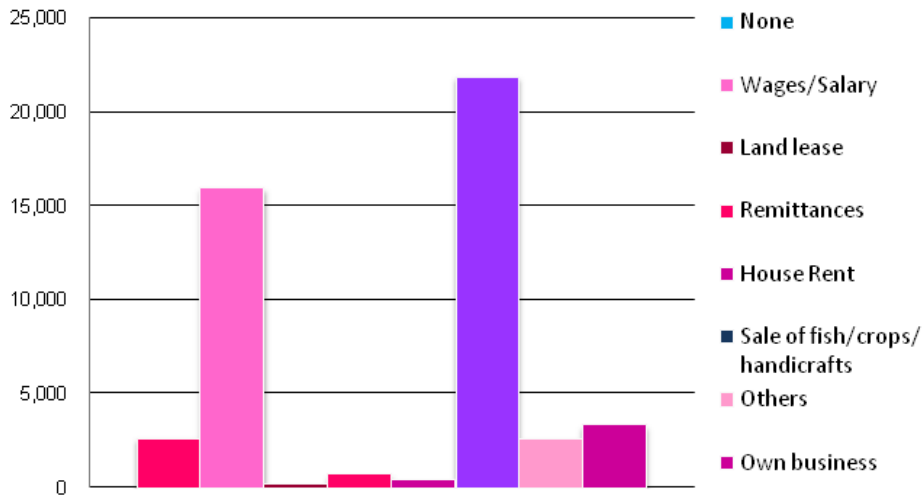
Figure 2.7 Number of subsistence workers



Source: 2009 National Census of Population and Housing, VNSO

The 2009 Census defined subsistence workers as those producing goods for their own consumption. Eighteen per cent of the population indicated they were involved in the subsistence economy. However, it should be noted that this figure could be much higher as 75.6% live in rural areas where the subsistence economy predominates.

Figure 2.8 Household income sources



Source: 2009 National Census of Population and Housing, VNSO

According to the Census (2009), most households rely on the sale of agricultural products and handicrafts for income. For 46% of households the main income is derived from the sale of crops, fish and handicrafts, while 33.6% of households are supported by wages or salaries, 7% run their own businesses, 5.5% have no form of income and fewer than 1.4% of households are receiving rental income, remittances and other forms of income.

Table 2.1 Pacific Island Countries Human Development Index and rank

Pacific Island Countries	HDI	Rank
Tonga	0.704	90
Samoa	0.688	99
Fiji	0.688	100
Solomon Islands	0.510	142
Vanuatu	0.617	125
PNG	0.466	153
Federated States of Micronesia	0.636	116

Source: UNDP Human Development Report 2011

The Human Development Index (HDI) is a composite statistic used to rank countries on a number of development indicators. These include life expectancy, literacy, education and standard of living.

Vanuatu is ranked 125th on the 2011 United Nations Human Development Index (HDI) table of 187 countries ahead of Solomon Islands and PNG, but below Tonga, Samoa and Fiji. Vanuatu's HDI value is 0.617, which places it in the Medium Human Development category.

Vanuatu was ranked 125 out of 177 on the Human Development Index

Poverty

The international baseline income definition of poverty is US\$1.25 per day. Surveys indicate that about 9.2% of the population in Vanuatu live below this poverty line⁴. The Vanuatu National Poverty Line (VNPL) has been determined as income of Vt 4,715 per month and sample data indicates that 15.9% live below the VNPL. While income poverty is a significant problem, poverty of opportunity is a major issue, particularly for rural children who face access barriers due to geography and lack of infrastructure.

Deprivations in childhood can have long-term consequences for children's development. Many studies have identified strong correlations between household poverty levels and development indicators for children. Health and education indicators suggest children living in poverty have lower levels of health and educational attainment and opportunities⁵.

There is a marked disparity between rural and urban areas in the level of deprivation affecting children. The Vanuatu Child Poverty Study⁶ shows that rural children experience three times more deprivation than those living in urban areas. The study also shows that deprivation is concentrated in the lowest quintile⁷.

People living in rural areas, remote villages and the outer islands have limited access to basic infrastructure such as electricity and running water. Fifteen per cent of the population have access to only unimproved drinking water sources such as unprotected wells, rivers and springs and this has serious implications for child health in terms of diarrheal diseases.

Many live in inadequate, mainly traditional housing built with dirt floors, thatched roofs and other local materials. There are also a large number of makeshift dwellings that are constructed from any available materials.

Child poverty and wellbeing is strongly influenced by region. When national poverty lines are used, it is highest in Torba and Tafea provinces, but if sub-national poverty lines are used, then child poverty is most severe in the capital city, Port Vila, because of the higher living costs in urban areas.

Other factors influencing child poverty include the size of the household and the education level of the head of the household. Fifty seven per cent (57%) of families live within a nuclear family household while 25% live with members of their extended family. The average number of people living in one dwelling is 4.7. Gender does not appear to play a significant role in influencing expenditure poverty, with virtually no difference in poverty rates between boys and girls.

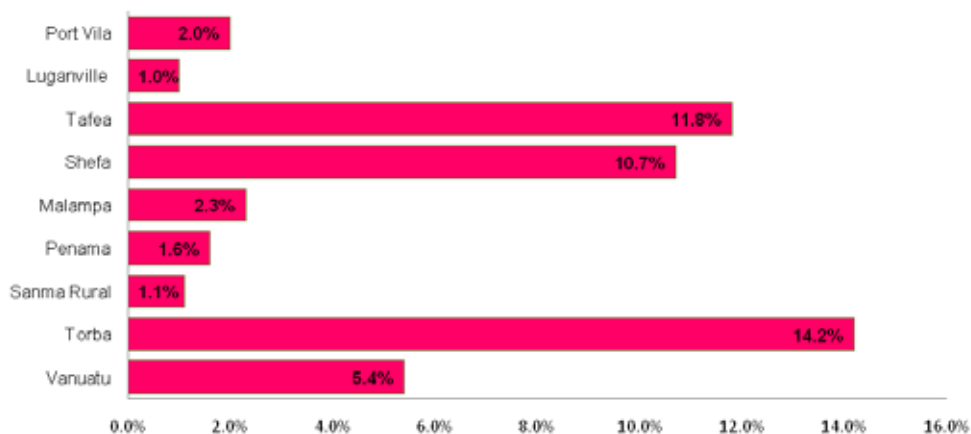
⁴ Household Income and Expenditure Survey, VNSO 2006

⁵ UNICEF, SPRC, 2010

⁶ UNICEF, 2011.

⁷ United Nations, 2011

Figure 2.9 Children (0-17 years) living below US\$1.25 per day



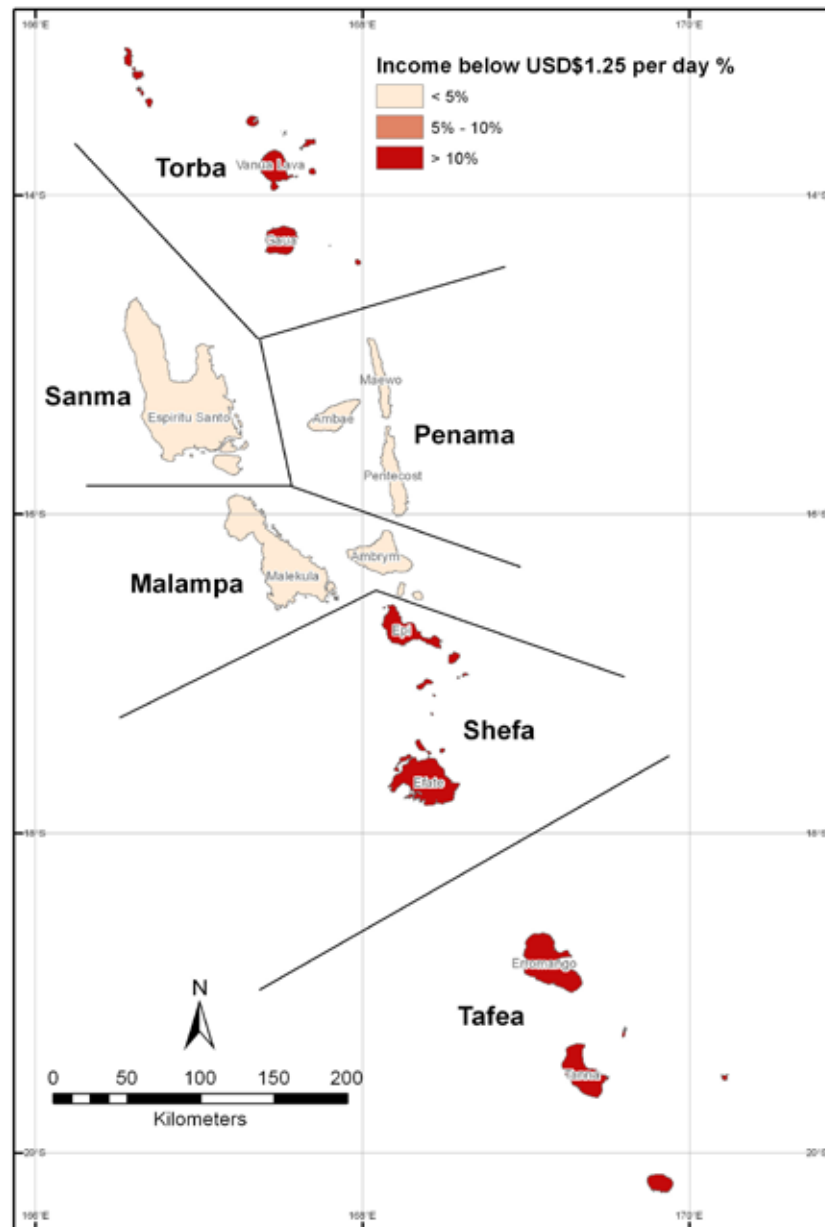
Source: Study on Child Poverty and Disparities Vanuatu, UNICEF Pacific, 2010

The Household Income and Expenditure Survey carried out by the National Statistics Office in 2006 shows that monetary poverty for children is more severe in Torba, Tafea and Shefa.

A greater percentage of the child population in Torba live in poverty, however, they represent much smaller numbers of the total child population. There are about 4,827 children in Torba as compared with some 32,485 in Shefa.

Income poverty for children is most severe in Torba, Tafea and Shefa

Map 2.1 Children (0-17 years) living below US\$1.25 per day



Source: Study on Child Poverty and Disparities Vanuatu, UNICEF Pacific, 2010

Table 2.2 Percentage of children who are deprived of essential goods and services

Shelter	14%	0-17 Sand or earth floor
Sanitation	3.2%	0-17 No toilet facilities
Safe drinking water	7.5%	0-17 Unimproved water source
Information services	51%	3-17 No access to radio /TV/ Phone
Food	10%	0-4 3SD below weight for age
Education	5%	7-17 Never attended school
Health	17%	1-2 No immunization

Source: Study on Child Poverty and Disparities –Vanuatu, UNICEF Pacific, 2010

In Vanuatu, information deprivation is most common, with 51% of children in Vanuatu experiencing severe deprivation of this type. The next most common severe deprivation is health, with 17% of children affected, followed by shelter with severe deprivation affecting 14% of children; 10% were affected by severe food deprivation; 7.5% by water deprivation; 5% by education deprivation and 3.2% by sanitation deprivation.

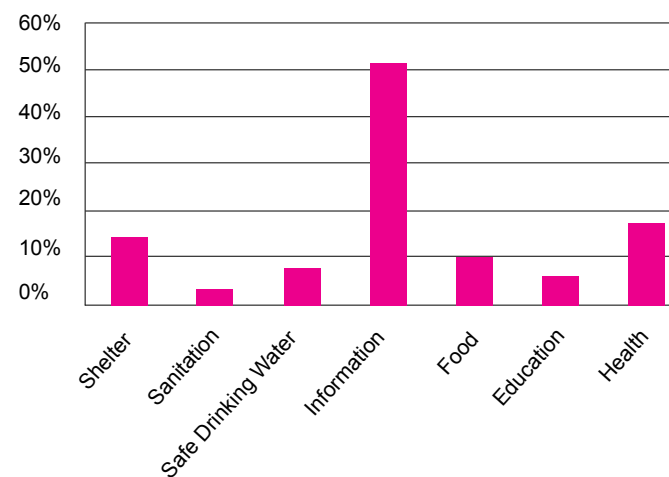
About 6% of children are affected by three or more severe deprivations and 35% by at least three less severe deprivations. However, if information deprivation is excluded, then only 0.6% of all children experience three or more severe deprivations, and 4.3% of all children experience two severe deprivations.

Considering correlates of severe deprivation (excluding information deprivation), the survey found little difference between experiences of deprivation for boys and girls.

There were large differences between urban and rural areas with about 10 per cent of children in urban households experiencing at least one severe deprivation compared to nearly 29 per cent of rural households.

Severe shelter deprivation was most common in Torba, where it affects 42% of children and is least prevalent in Shefa province and Port Vila.

Figure 2.10 Percentage of children with severe deprivation



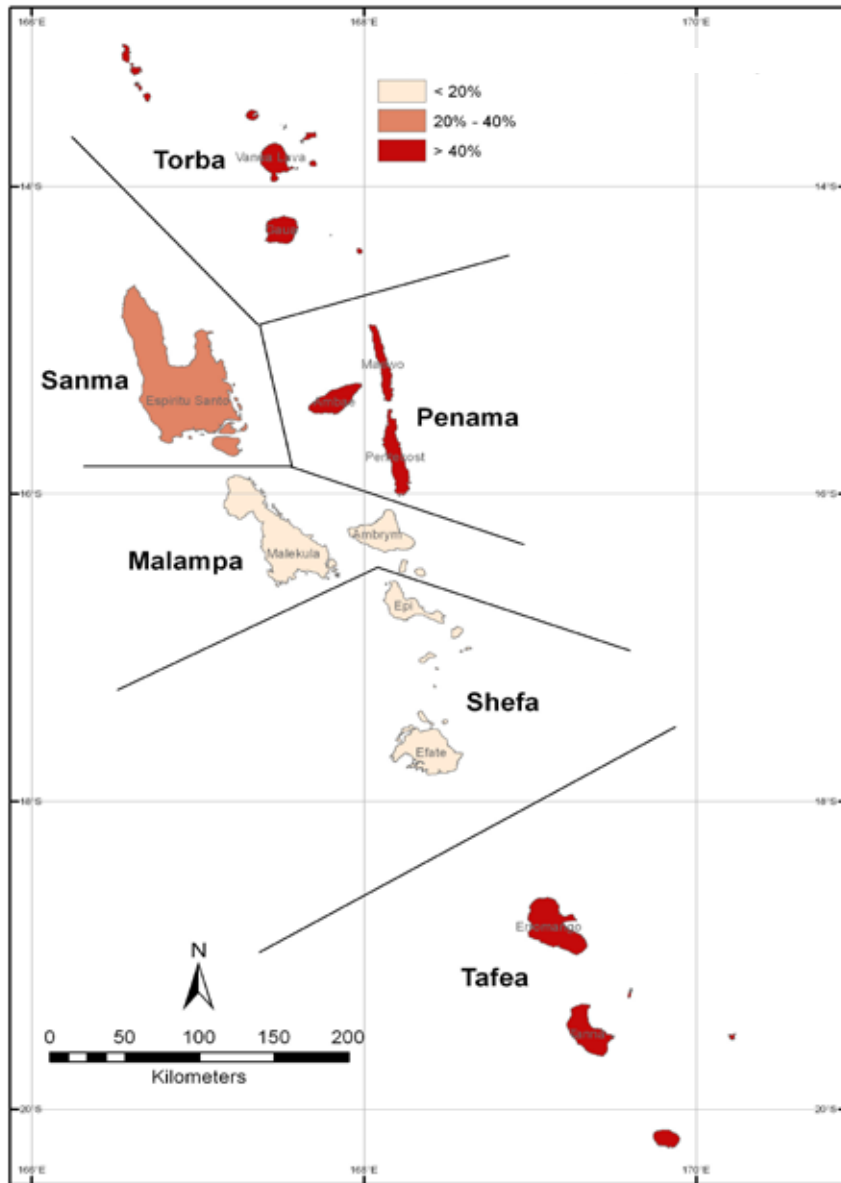
Source: Study on Child Poverty and Disparities –Vanuatu, UNICEF Pacific, 2010

Sanitation deprivation is highest in Sanma at 9.2%, while water deprivation is highest in Tafea at 23%. Food deprivation tends to be significantly worse in urban areas than in rural areas, being highest in Port Vila at close to 20%, compared to less than 10% in most rural areas (except Sanma at 14%). Education deprivation is most common in Tafea (13%) and Torba (10%) compared to 4% in urban areas. Severe health deprivation is fairly uniform in all areas of the country except Malampa province⁸.

Food deprivation affects almost 20% of children in Port Vila

⁸ Child Poverty and Disparities –Vanuatu, UNICEF Pacific, 2011

Map 2.2 Children with at least one severe deprivation (%)



Rural children experience three times more deprivation than their urban peers

Source: Child Poverty and Disparities –Vanuatu, UNICEF Pacific, 2011

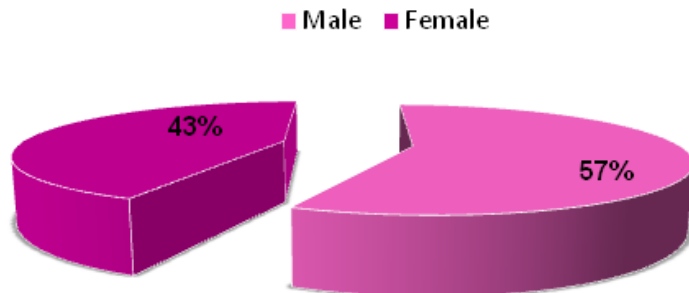
Gender

The trends in women's participation in politics and elections over the years have revealed minimal progress towards Vanuatu's commitment to achieving 30% women in parliament by 2015. In 30 years - through seven national elections - only five women have been successful in gaining seats in parliament.

Despite this, women have achieved the ratification of the Family Protection Bill in Parliament in 2009 and Vanuatu is a signatory to the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW).

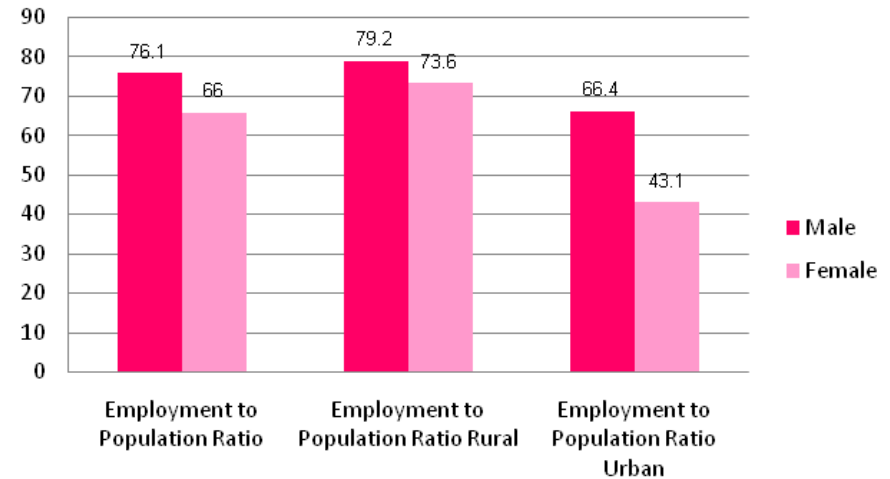
In the 2009 Census, the ratio of women to men was 97 to 100 (114,932 women and 119,091 men). Many women are likely to be dependent on their partners for income and basic necessities as men have a much greater representation in the labour force. Women in Vanuatu are more likely to be involved in subsistence and household employment in rural areas and much less likely than men to participate in formal employment in urban areas. Employment figures show that in every province women are less likely to be in employment even though employment is defined to include producing or selling your own food.

Figure 2.11 Distribution of the labour force by gender



Source: 2009 National Population and Housing Census, VNSO

Figure 2.12 Total urban and rural employment by gender



Source: 2009 National Population and Housing Census VNSO

Only five women have been elected to parliament in 30 years

3 EDUCATION



Education

Overview

In Vanuatu, the official school starting age is six and education is not compulsory for the first seven years. In 2011, only 45 per cent of children starting year one were aged six, the correct school entry age. In total, there are 81 secondary schools, 432 primary schools and 546 early childhood kindergartens.

The education system comprises early childhood centres (ECEs) for children aged 3 to 5; primary education for ages 6 to 12; junior secondary education for ages 13 to 16; senior secondary education for ages 17 to 20; and tertiary education. In 2011, ECE enrolment was 11,411, primary was 42,053 and secondary, 18,437. Approximately three-quarters (88%) of primary aged school children enrol, but only 63% reach grade 6, and less than 3% of children who enrol in primary school make it through to Year 13.⁹

Vanuatu literacy rate is quite low at an estimated 85% and is even lower in rural areas at 80.5%. There are high rates of student drop-outs, withdrawals and absenteeism. These rates could be attributed to geographical constraints, parents' inability to cover school and transport costs and children's involvement in subsistence agriculture. While Vanuatu is progressing towards meeting MDG2 indicator of 100% primary school enrolment, it has not achieved the second indicator concerning completion of year six. There seems little prospect of Vanuatu achieving MDG 2, 'Universal Education', by the 2015 deadline.¹⁰

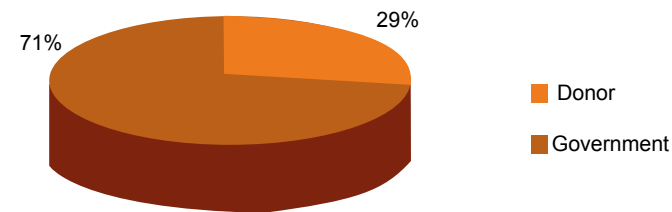
The percentage share of public expenditure has in real terms declined over the past four years. However, donor funding supplements Government spending for projects to the tune of 29%.

Figure 3.1 Percentage share of public expenditure on education



Source: MoE Annual Report 2010

Figure 3.2 Government vs donor contribution



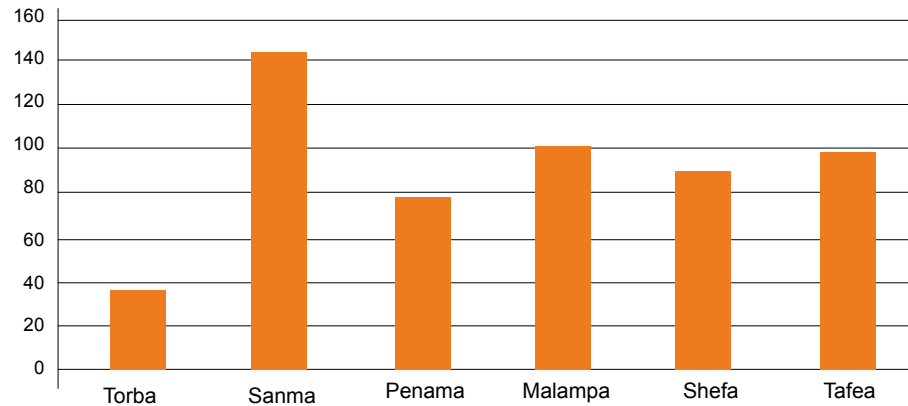
Source: MoE Annual Report 2010

⁹ADB, Vanuatu: Country Partnership Strategy (2010 – 2014), 2009

¹⁰ Ibid

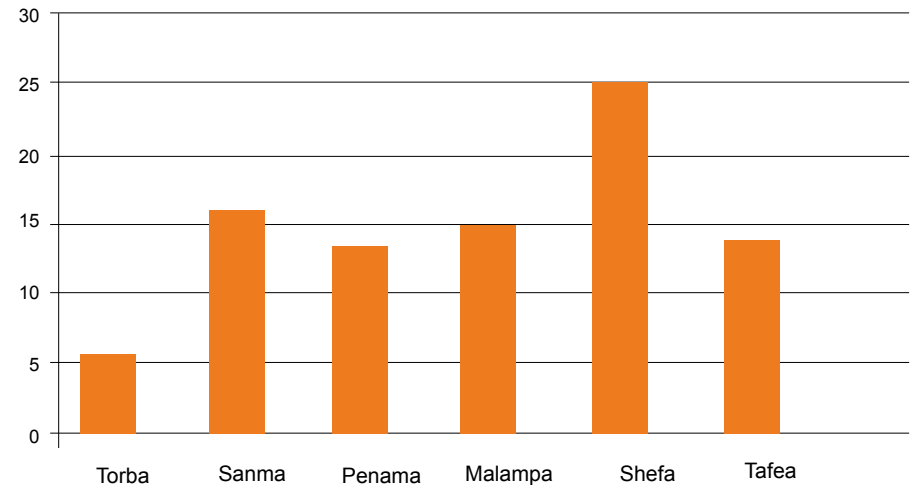
Schools by province

Figure 3.3 Number of ECE schools



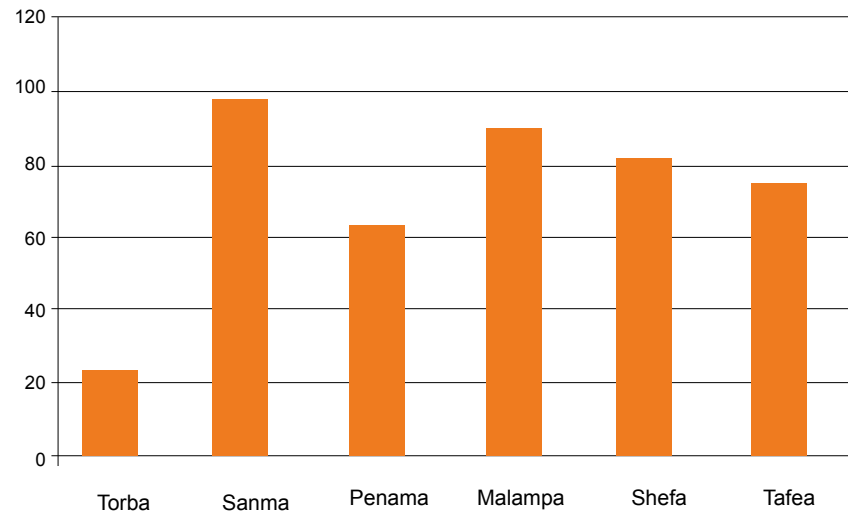
Source: VEMIS System 2011 Ministry of Education

Figure 3.5 Number of Secondary schools



Source: VEMIS System 2011 Ministry of Education

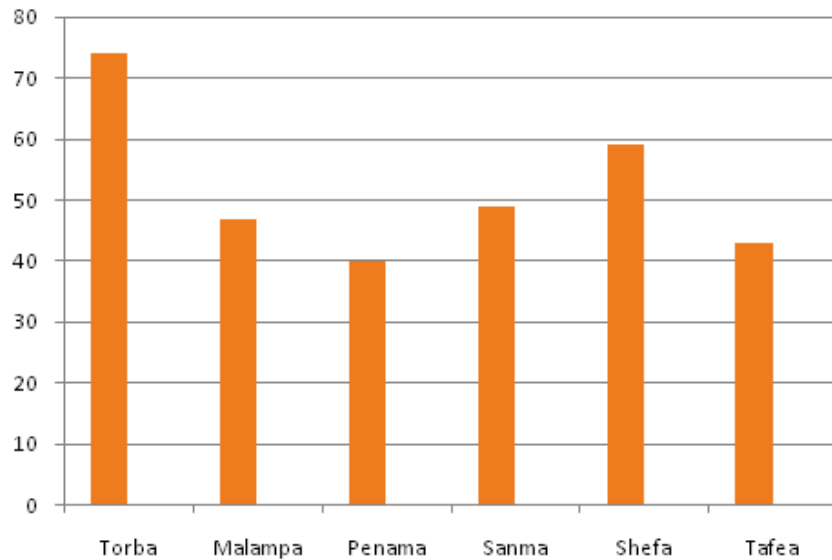
Figure 3.4 Number of Primary schools



Source: VEMIS System 2011 Ministry of Education

As many secondary schools are boarding schools, data on school access for children from particular provinces is limited as students go to school on islands away from their home island. The cost of secondary education excludes many children and the cost of transport to school is also often a prohibitive factor. A considerable number of students from Port Vila attend provincial schools as the costs are much lower than in the capital.

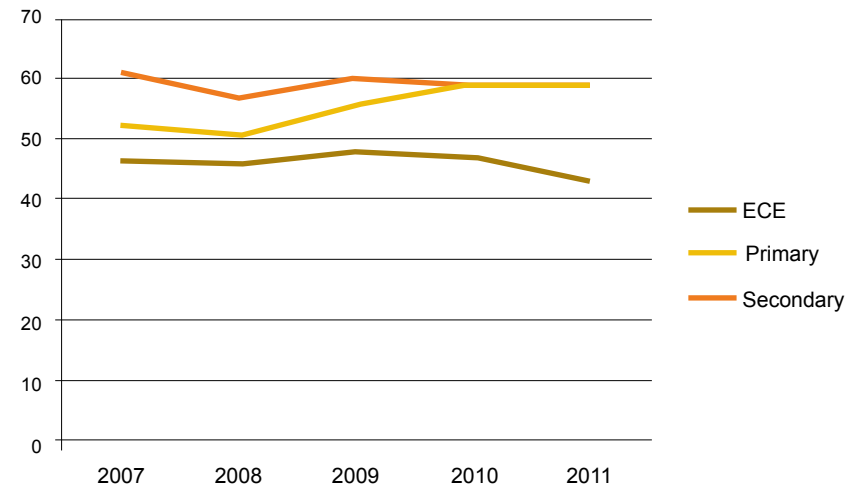
Figure 3.6 Percentage of certified teachers by province



Source: VEMIS, 2011 Ministry of Education

Schools are staffed by teachers who are either trained overseas or at the Vanuatu Institute of Teacher Education in Port Vila. There is ongoing difficulty in recruiting enough trained teachers for outer-island schools. The trend indicates that while the ratio of trained secondary teachers to pupils has increased in the past four years, the ratio of both primary and pre-school-certified teachers has declined.

Figure 3.7 Pupil – certified teacher ratio

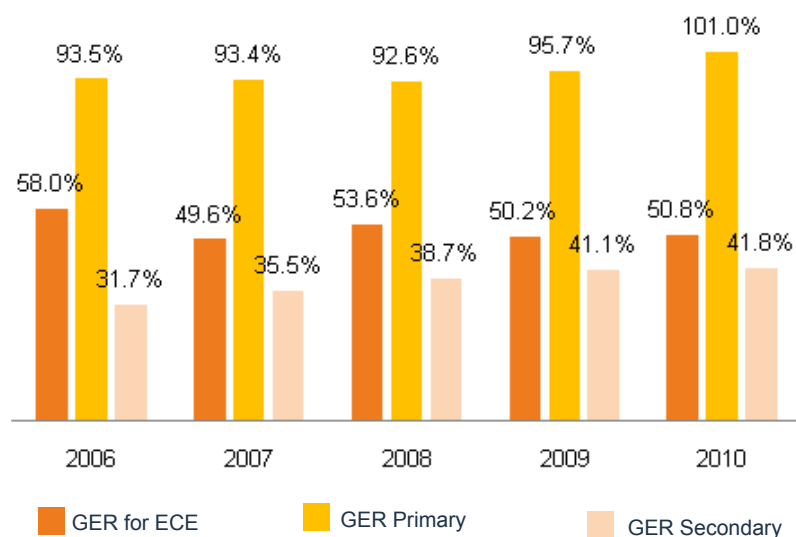


Source: VEMIS, 2011 Ministry of Education

There are more certified teachers (those who have a specific teaching degree) at secondary than primary level. The balance is changing slowly though to ensure there are adequate ratios at all levels.

The ratio at primary and junior secondary levels needs to be reduced so that basic literacy and numeracy skills can be strengthened and education outcomes improved.

Figure 3.8 Gross Enrolment Ratios



Source: Ministry of Education VEMIS 2010

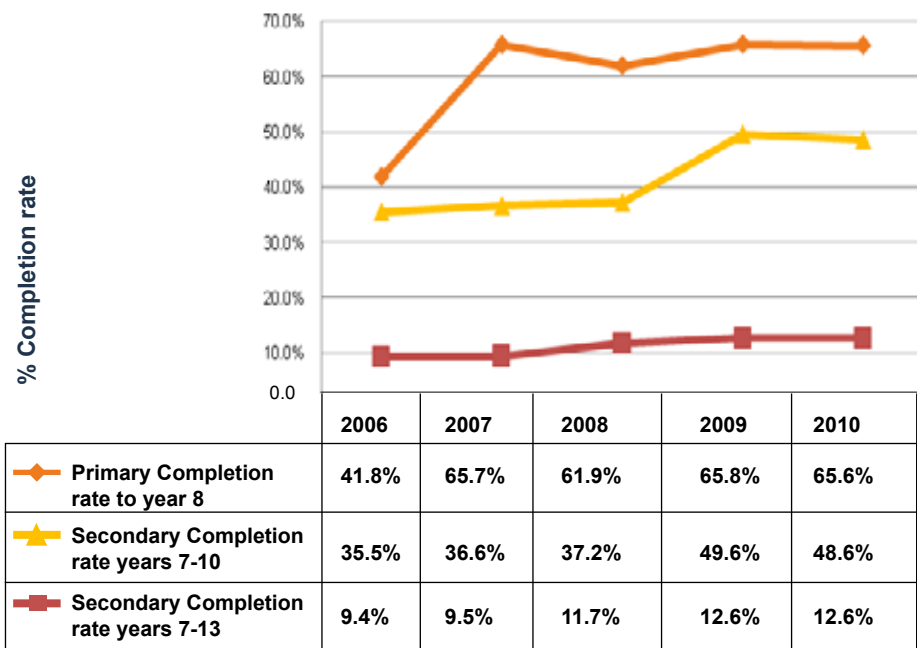
The GER is a ratio of the number of students enrolled compared to the population in the official school age group. In Vanuatu, the GER for primary school is high, however, for both secondary and early childhood education, it is very low. Of the 6,000 students who sit exams in primary grade 6, only 1400 are awarded a place to proceed in the formal education system.¹¹ There are not enough teachers and school places to meet the demand. Those students who do not go on to secondary school tend to work in home gardens or migrate to the urban centres in search of work.

Gross Enrolment Ratios can mask the number of underage and overage children in the education system. A closer look at entry age for primary school shows that nationally, only 64% of children in the first year of primary school are the appropriate age. In both urban and rural areas a large percentage of children are enrolling late or repeating their first year. Low ECE enrolment (less than 50%) indicates that the majority of children are not prepared for primary school. This factor will have an impact on educational outcomes.

Less than a third of Vanuatu children who sit grade six exams progress to junior secondary schools

¹¹ AusAID, Up to the Job, 2011

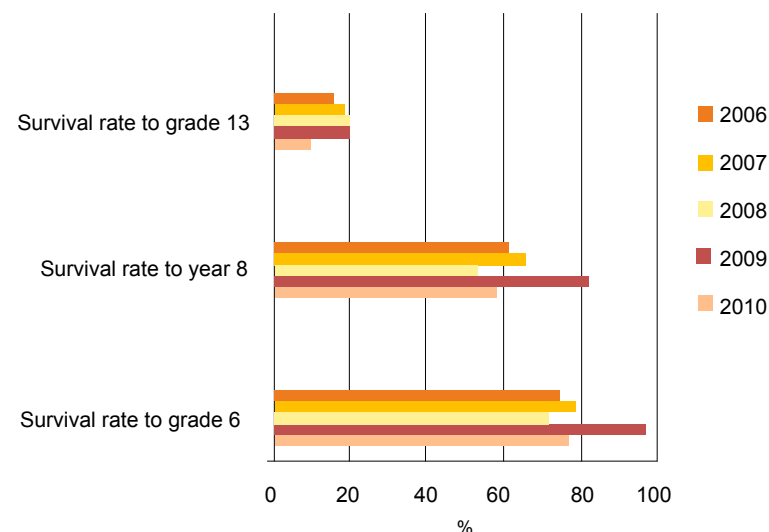
Figure 3.9 Completion rates 2006-2010



Source: Ministry of Education VEMIS 2010

Completion rates for each level of schooling are increasing, but are still considered extremely low and this will have major implications in terms of the country's economic growth. Less than 80 per cent of children are completing primary education and only a small minority complete secondary school.

Figure 3.10 Survival rates

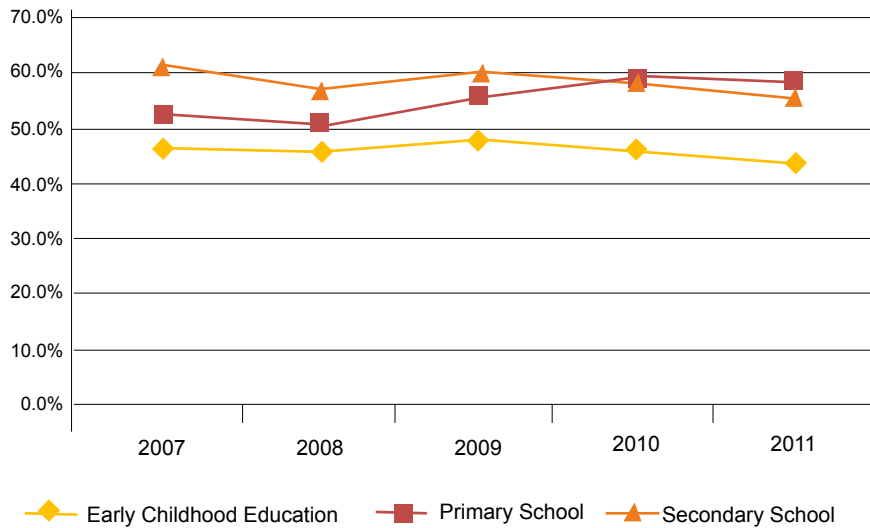


Source: Ministry of Education VEMIS 2011

Survival rates increased from 2006-2009, but in 2010, there was a decline in the survival rate to years 6, 8 and 13. A number of factors may be influencing this result including too few school places and the financial pressure on families due to the economic downturn. Children may also be dropping out because they have not acquired the basic literacy and numeracy skills that would enable them to continue in the school system.

Additionally there are 425 schools in total and only 365 schools are being supported or given school grant. Approximately 60 schools are not supported and therefore children in this fee paying schools also drop out.

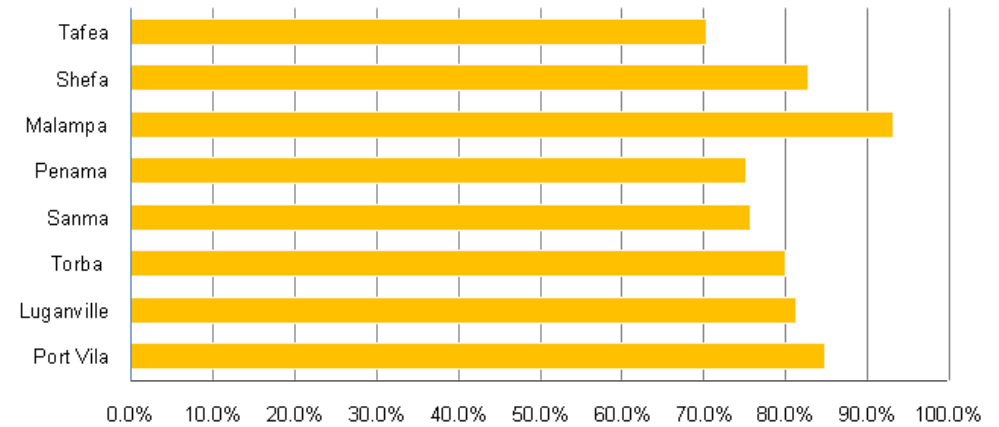
Figure 3.11 Net attendance by school type 2007-2011



Source: VEMIS, 2011 Ministry of Education.

A closer look at entry age for primary school in 2011 shows that nationally, only 58.7% of children in the first year of primary school are the appropriate age. Low ECE attendance enrolment 43.5% indicates that the majority of children are not prepared for primary school. This factor will have an impact on educational outcomes. Figure 3.11 shows that secondary school enrolment has decreased since 2007 from 61.4% to 55.8% in 2011.

Figure 3.12 Primary school net attendance by province (%)

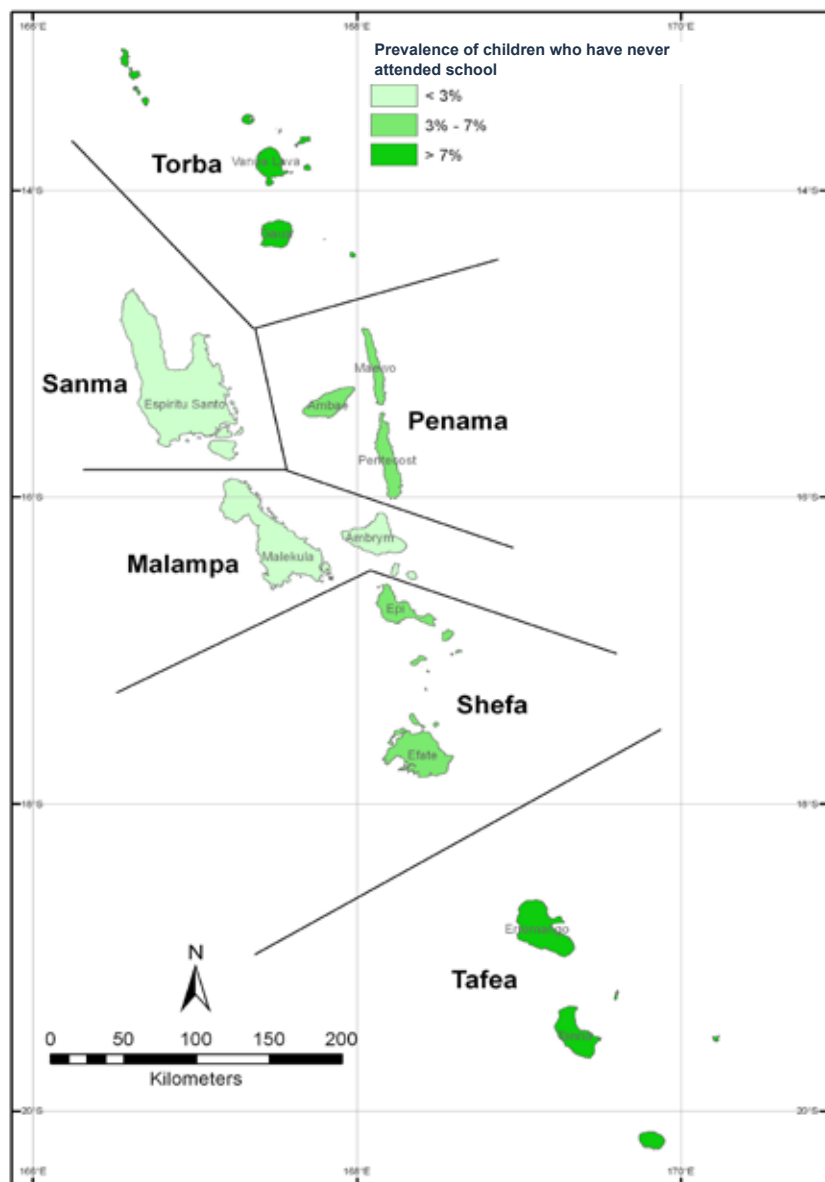


Source: EMIS Statistical Digest, 2008

Primary school attendance has increased since 2008 and currently, all provinces in Vanuatu have 70% and more attendance. Figure 3.12 shows that primary school attendance ranges from 70% in Tafea to 93% in Malampa. The two major urban centres, Luganville and Port Vila have high attendance (over 80%) compared to the rural areas (70%).

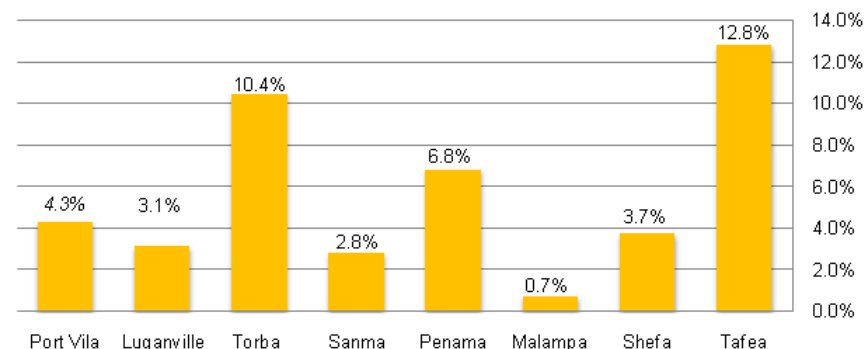
10% of primary school aged children were out of school in 2011

Map 3.1 Percentage of children (7-17 years) who have never attended school



Source: Study on Child Poverty and Disparities –Vanuatu, UNICEF Pacific, 2010

Figure 3.13 Percentage of children (7-17 years) who have never attended school



Source: Study on Child Poverty and Disparities –Vanuatu, UNICEF Pacific, 2010

There is still a considerable proportion of children aged 7-17 who do not access education. Survey data from 2007 found that 5% of children had never been enrolled in school and there were considerable disparities between regions. In addition, many children may enrol, but do not attend regularly or drop out at an early age. One-fifth of children of primary school age were not attending school in 2007. Attendance ratios were highest in Malampa and lowest in Tafea.

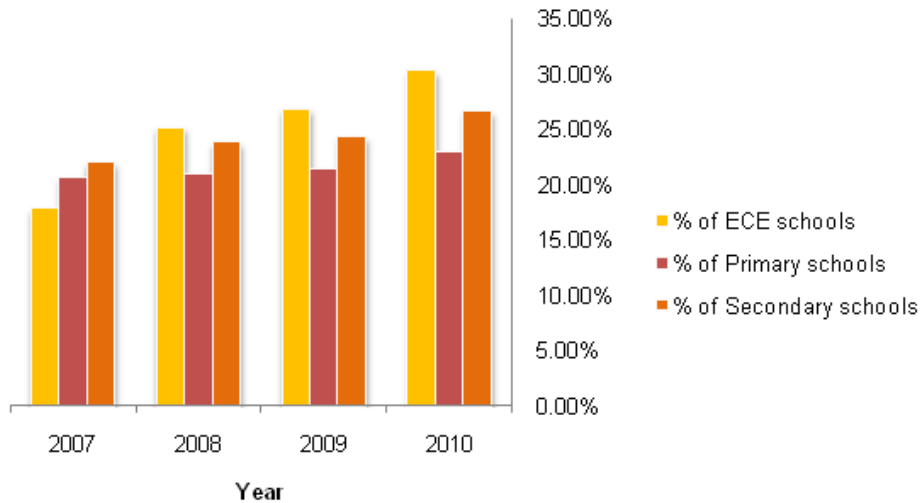
Mother's education level had a strong correlation with children's school attendance. The number of children never enrolled or not attending school is declining. It is estimated that 10% of children aged 7-17 are not in the formal education system¹².

In 2010, the Vanuatu Government announced it would eliminate all school fees for grades 1-6 in order to make primary education more accessible and to improve enrolment and education outcomes. Under the plan, funded by Australia, New Zealand and UNICEF, each primary school child is allocated US\$70 to cover school fees¹³.

¹² Ministry of Education VEMIS, 2010

¹³ Government of Vanuatu website

Figure 3.14 Percentage of schools with access to safe drinking water

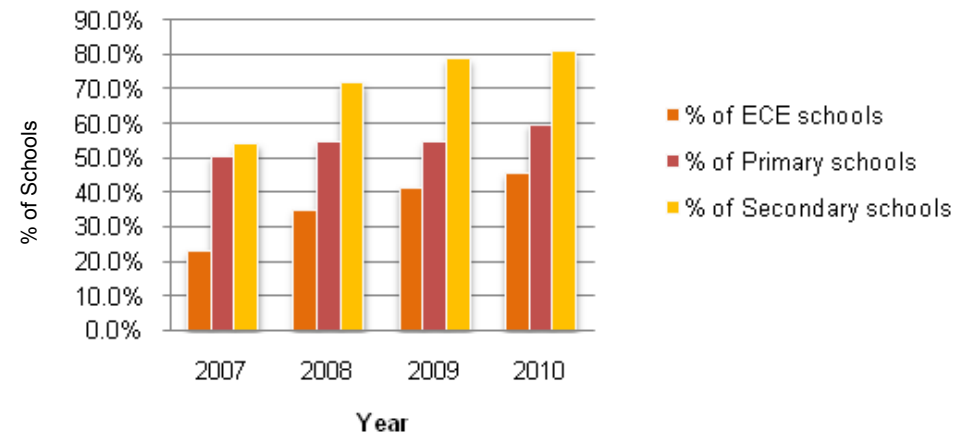


Source: VEMIS, 2010 Ministry of Education

Access to safe drinking water is still a major issue for Vanuatu schools that are located outside town boundaries and have no piped water supply systems.

Instead, they depend on sources such as rainwater tanks or cement-lined wells. There has been some improvement over the past four years, but still only about half of schools had access to safe drinking water in 2010.

Figure 3.15 Percentage of schools with access to good sanitation toilets



Source: Ministry of Education VEMIS 2010

Secondary schools have recently improved their sanitation with donor-funded refurbishment of facilities, but there are many ECE and primary schools that still have poor sanitation.

Almost 1 in 2 schools do not have access to safe drinking water while access to adequate sanitation is gradually improving

4 HEALTH



Health

Overview

Vanuatu has two main health facilities: Vila Central Hospital, in Port Vila, and the Northern District Hospital, in Luganville. Spread throughout the islands are basic first-aid posts and clinics that are staffed by community health-care workers, however, provincial community health services are very limited.

Communicable and non-communicable diseases are causing significant health problems in Vanuatu and the country currently faces a “double disease burden” putting severe stress on the health budget and system. The prevalent health problems are malaria, tuberculosis, STIs, acute upper-respiratory tract infection, diarrhea and viral hepatitis.

In 2006, sample data showed Vanuatu’s Maternal Mortality Rate (MMR) - the annual death rate for women resulting from pregnancy or child-birth related complications - was 68 per 100,000 live births¹⁴.

The Infant Mortality rate (IMR) has declined since 1989 and in each subsequent year where data is available. This is largely due to increased immunization coverage, however, at the last census, there was still some way to go to achieve the MDG targets. Under 5 mortality has also declined and with greater focus on neonatal mortality, acute respiratory infections and diarrhoea could decrease further.

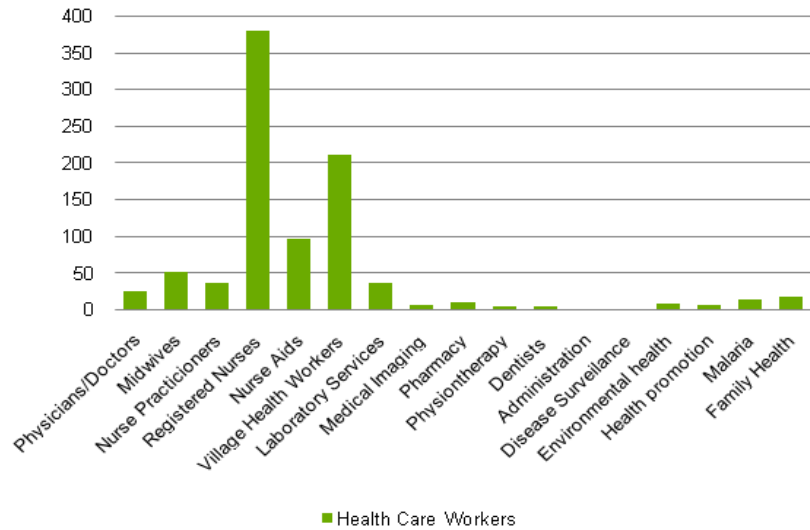
With a relatively low expenditure on health and very low numbers of health professionals in the country, particularly in rural areas, the attendance of skilled health professionals at child births has dropped from 88% in 2002 to 74% in 2009, although 80% of pregnant women attended a health facility to give birth.

The 2007 Vanuatu Multiple Indicator Cluster Survey found that 14% of children under 5 had suffered from diarrhea in the previous two weeks. This was mainly attributed to inadequate hygiene and sanitation, water-related diseases and poor housing and living conditions. Only about half (54%) of these children had received oral rehydration treatment (ORT), while the other half had no treatment. This suggests a lack of consistent public health education.

A lack of human resources both in numbers and skills constrains the delivery of basic health services particularly in the rural areas. So while the actual numbers of aid posts to the population is high actual staff is quite low.

¹⁴ Global Health Observatory Database, WHO, 2008

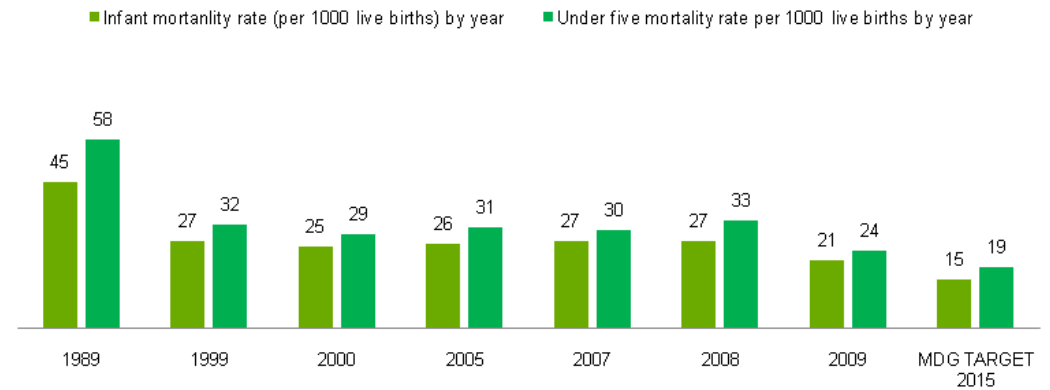
Figure 4.1 Human resources in health care sector



Source: Ministry of Health, 2010

The current numbers of health care workers, allied health services and public health administration human resources fall far short of meeting the needs of the population. Most frontline health services are provided by registered nurses, nursing aides and village health workers. In addressing this challenge the Ministry of Health has trained and recruit new graduate nurses and is recruiting from Solomon Islands.

Figure 4.2 Infant mortality rates (IMR) and under-five mortality rates (UMR)

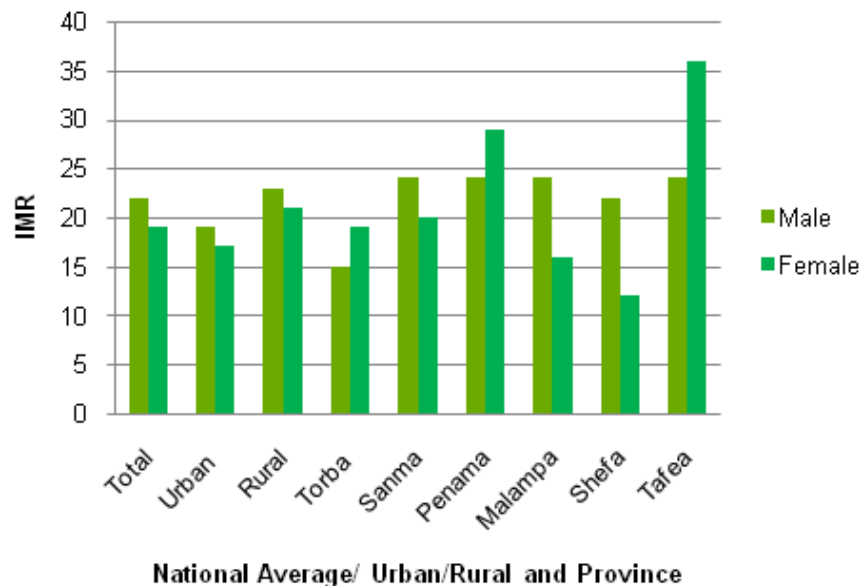


Source: 2009 National Housing & Population Census

There has been significant progress in reducing infant and under-five mortality rates in the period 1989 to 2009. Encouragingly, the MDG targets in IMR and U5MR, set at 15 and 19 per 1,000 live births, appear to be within reach.

Infant and child mortality rates are highest in Tafea and Penama provinces

Figure 4.3 Infant mortality rate per 1000 live births by province



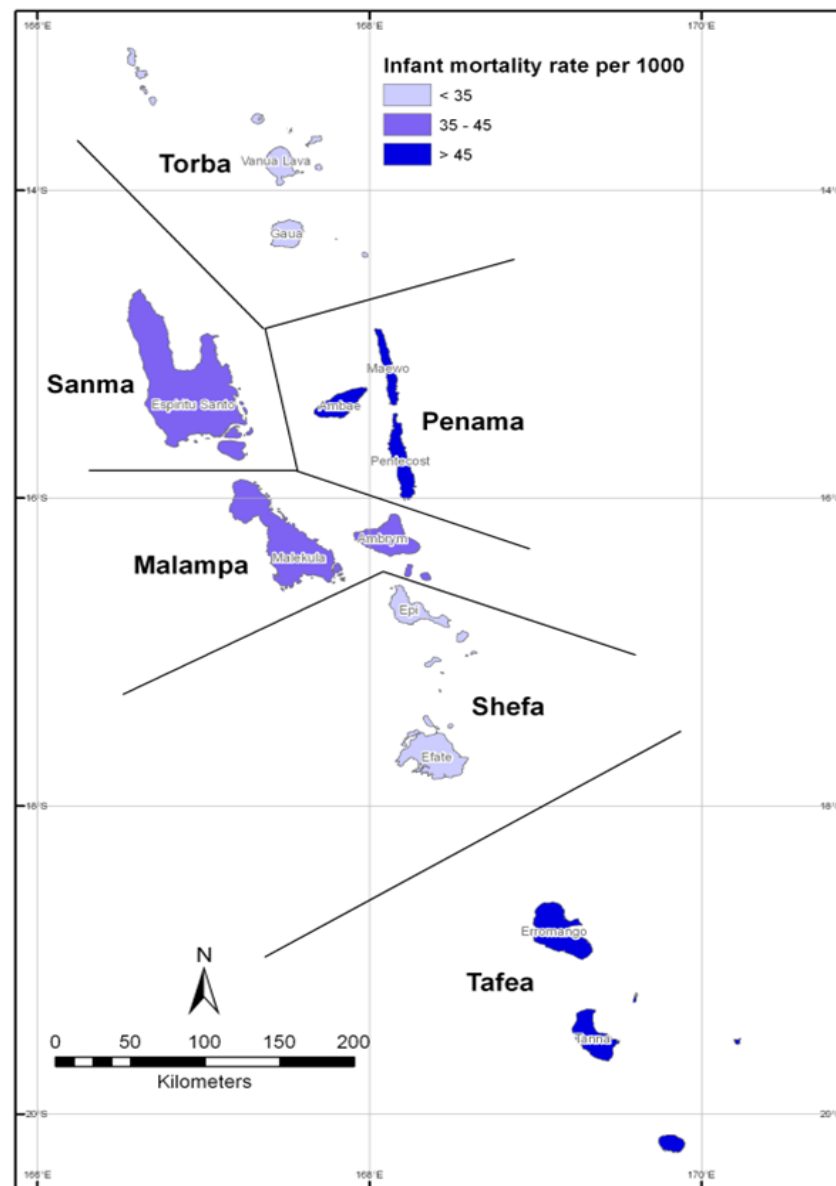
Source: 2009 National Housing & Population Census

The steady decline of Infant Mortality Rates (IMR), from 45 per 1000 live births in 1990 to 21 in 2009 can be attributed to improved coverage of cost-effective child survival measures. These include exclusive breastfeeding, immunization, integrated management of childhood illnesses, clean water and sanitation.

Progress masks disparities between urban and rural areas, with Tafea and Penama experiencing the highest IMR in the country. Mother's education level is also a strong correlate to infant survival, with rates halved for those mother's with secondary education compared to those with none or only primary.

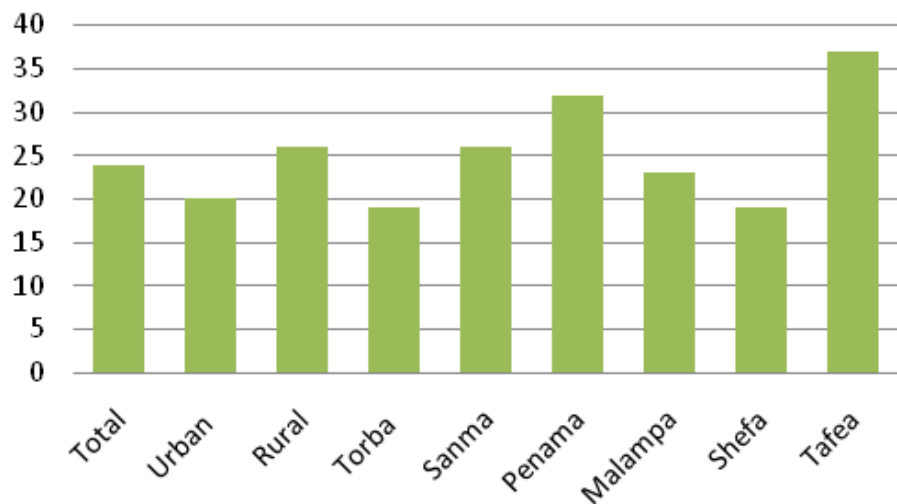
Neonatal mortality is responsible for a large share of infant deaths with prematurity, asphyxia and severe infections being the main causes.

Map 4.1 Infant mortality rate per 1000 live births by province



Source: 2009 National Housing & Population Census

Figure 4.4 Under five mortality rate per 1000 live births



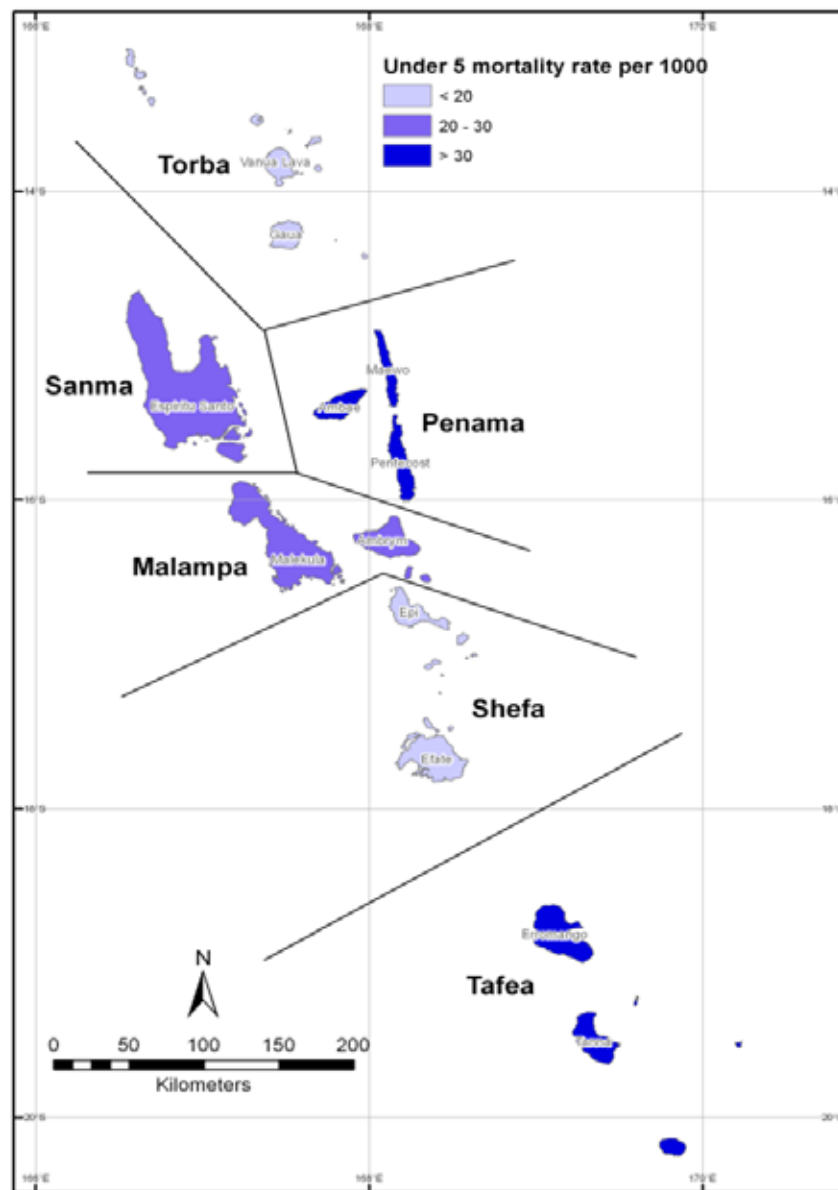
Source: 2009 National Housing & Population Census

Under-five mortality rates (U5MR) have fallen steadily from a rate of 58 per 1000 live births in 1990 to 24 in 2009. However, like Infant Mortality Rates, Tafea and Penama continue to experience rates that are higher than other parts of the country.

The major causes of child mortality include communicable, and increasingly, non-communicable diseases. Pneumonia and diarrhea still claim many young lives in Vanuatu and climate change threatens to increase the risks posed by these diseases.

As under-five mortality rates decline, infant mortality is responsible for a larger number of child deaths. Improved neonatal and infant care must receive attention to further reduce child mortality.

Map 4.2 Under five mortality rate per 1000



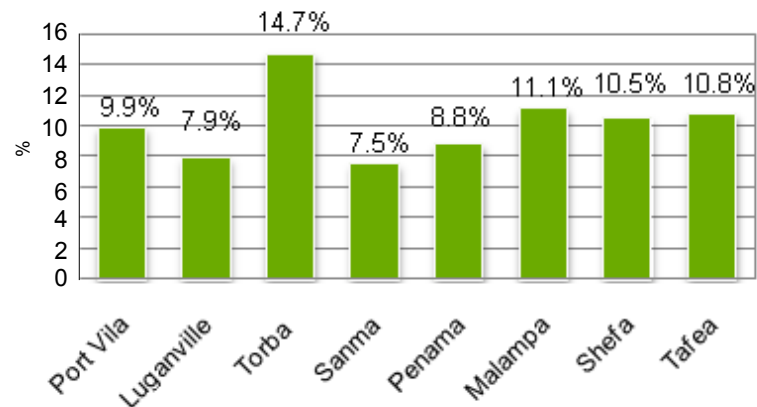
Source: 2009 National Housing & Population Census

Nutrition

The Nutrition Survey in 2007 found an average of 10% of newborns had a birth weight of less than 2500 grams (MoH, 2007). Babies who are low birth weight are more vulnerable to grave health risks during their early months and years and are more likely to remain undernourished throughout their lives. Some provincial disparities exist, as do disparities based on income and mothers education level. Improved maternal nutrition and care is the key to reducing low birth weights.

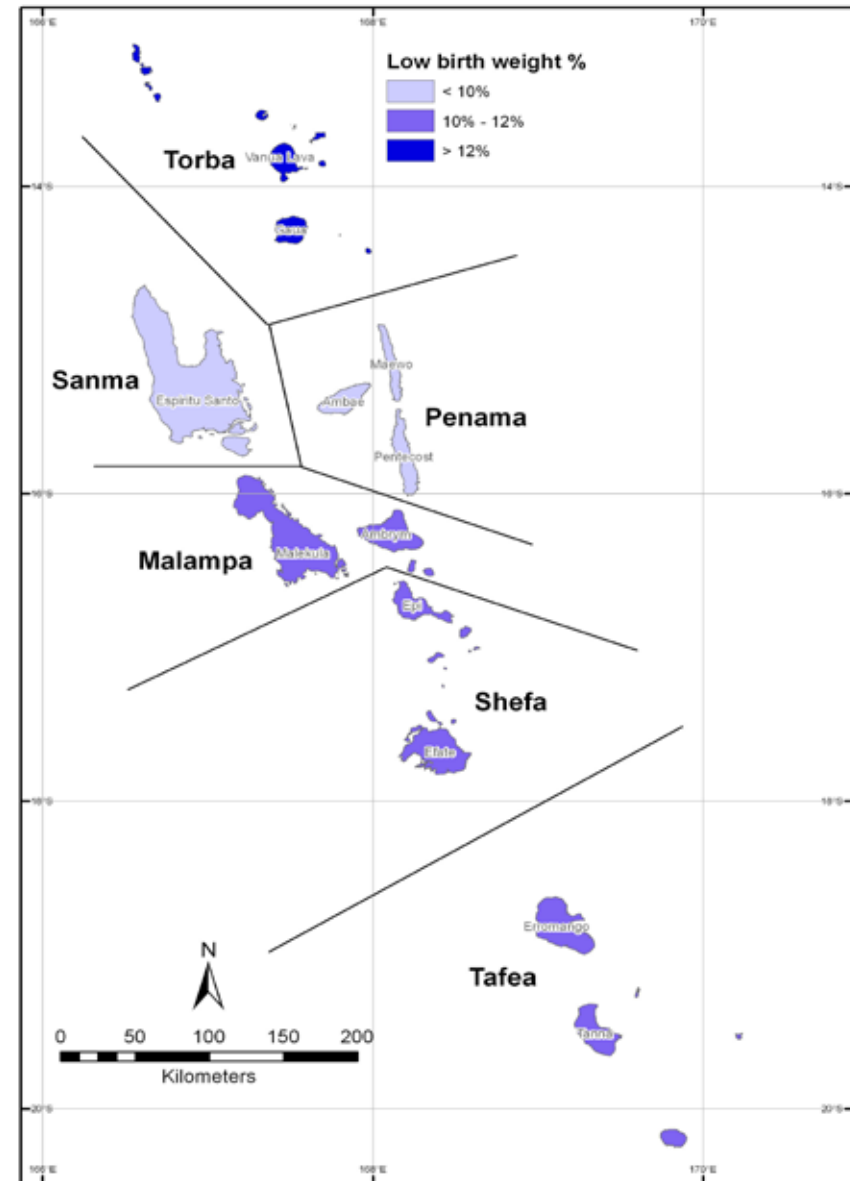
The percentage of children under five who were moderately or severely underweight was 15.9%. This indicates a significant level of malnutrition in Vanuatu and is a major public health concern. This can be attributed to inappropriate young child feeding practices, relatively low levels of breastfeeding, poor timing of the introduction of complementary food, low immunization rates and poor sanitation.

Figure 4.5 Low birth weight newborns (%)



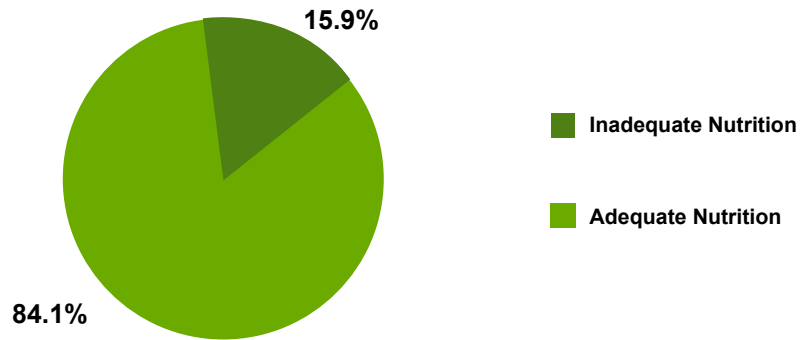
Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Map 4.3 Low birth weight newborns (%)



Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Figure 4.6 Children (< 5 yrs) who are stunted



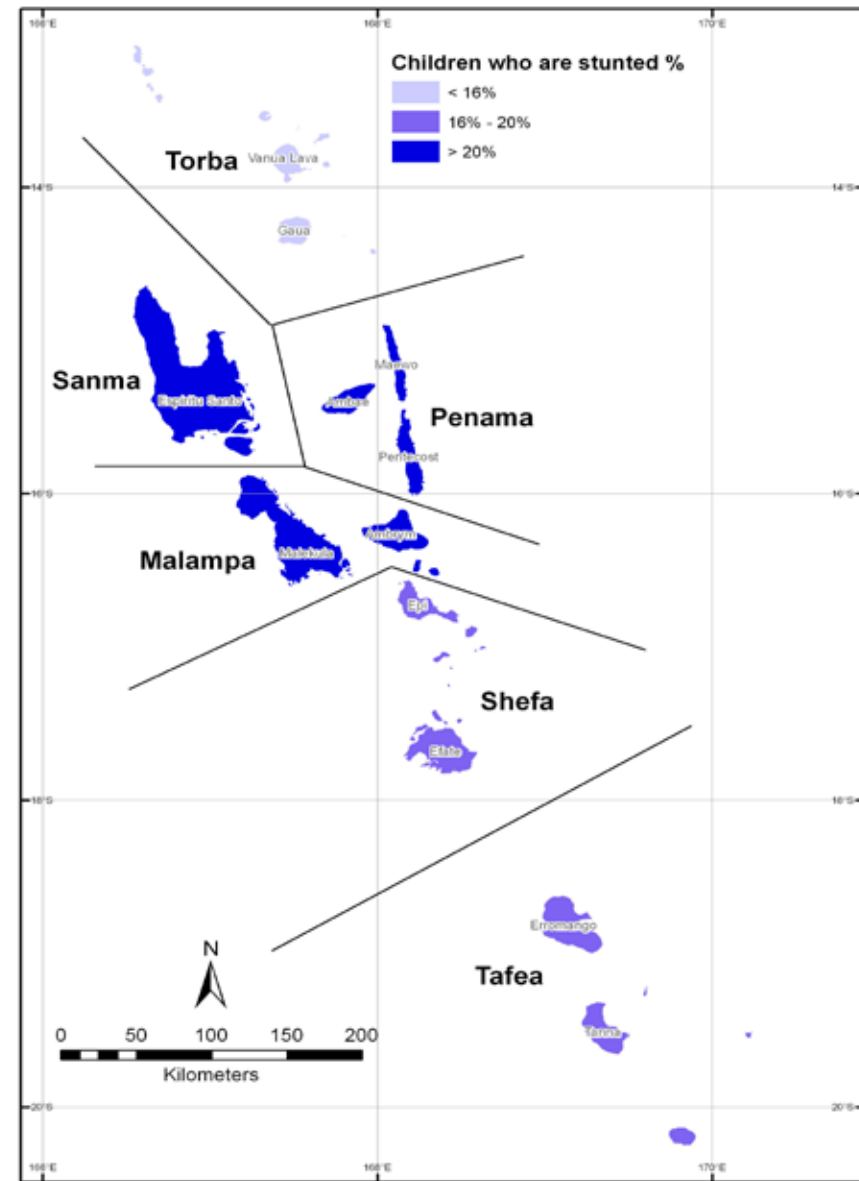
Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Nationally, about 2% of children under five years of age are severely underweight and 16% are moderately underweight. Stunting is the worst of the nutrition outcomes, with 7% of all children severely stunted, and 20 per cent moderately. By region, Torba and Sanma have the highest percentage of severely underweight children (4% in each region), Port Vila and Sanma have the highest percentage of severely stunted children (9% and 10%, respectively), and Port Vila and Penama have the highest percentage of severely wasted children (3% each).

Mother's level of education has a significant bearing on children's nutrition outcomes. Those with better-educated mothers are better nourished and consequently, healthier.

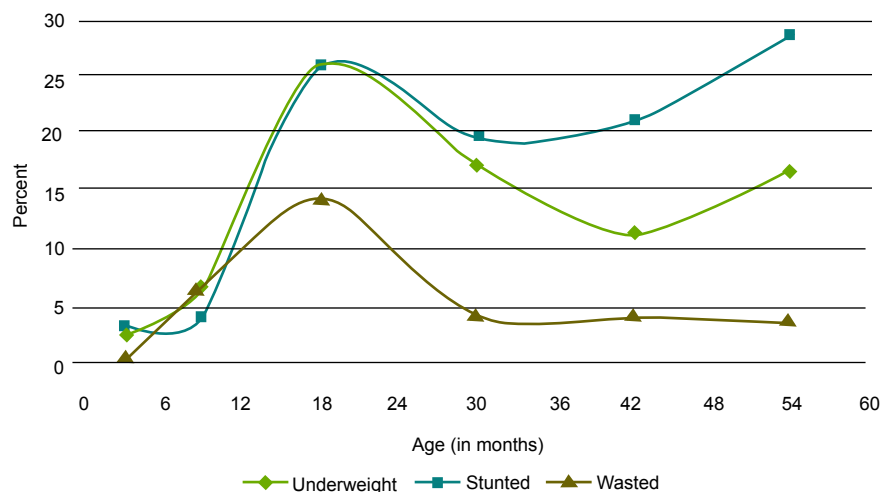
1 in 5 children under five years of age have stunted growth as a consequence of long-term insufficient nutrient intake

Map 4.4 Children (< 5 yrs) who are stunted



Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Figure 4.7 Percentage of children who are malnourished by age

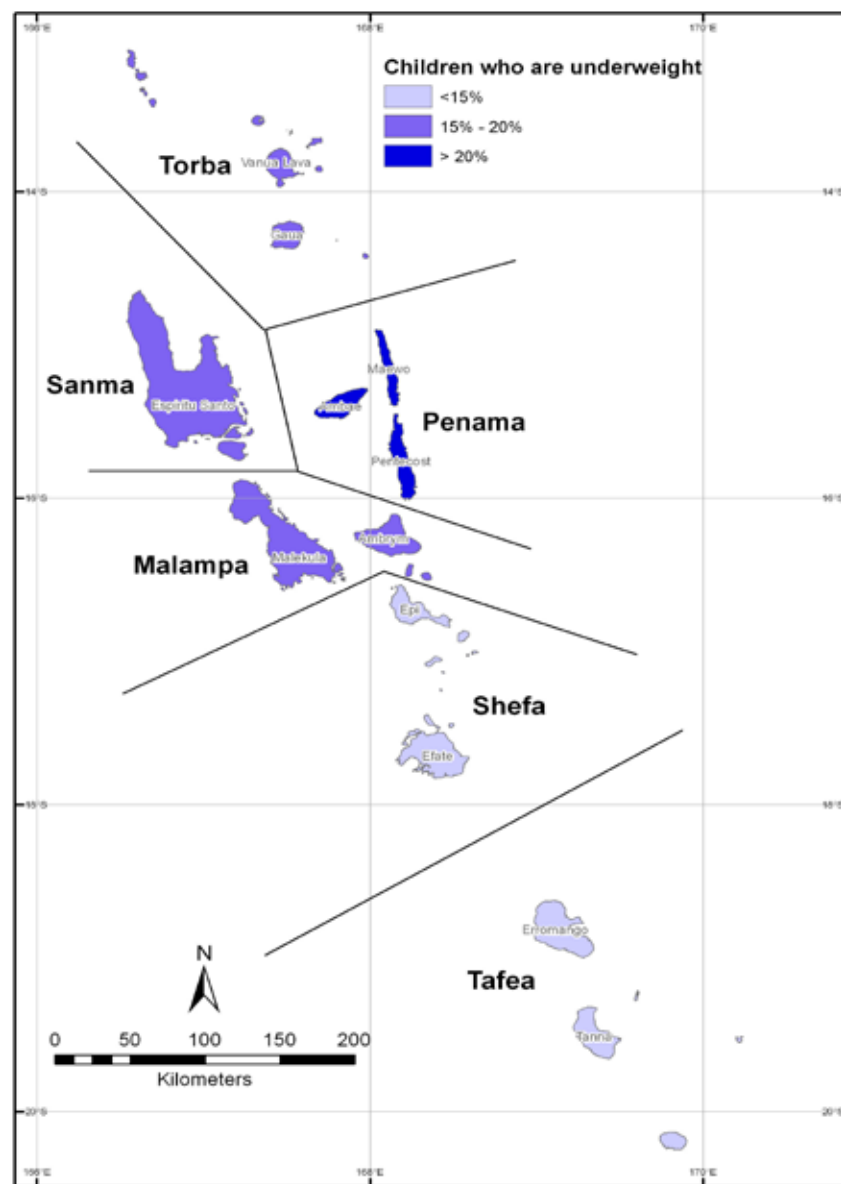


Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Children under six months of age are least likely to be stunted or underweight, most likely due to the positive effects of breastfeeding. After six months of age, rates of underweight and stunting soar – with 26% of one-year olds malnourished. With time the number of underweight children declines, however, the cumulative effects of malnutrition and illness remain, with stunting affecting one in five ni-Vanuatu children.

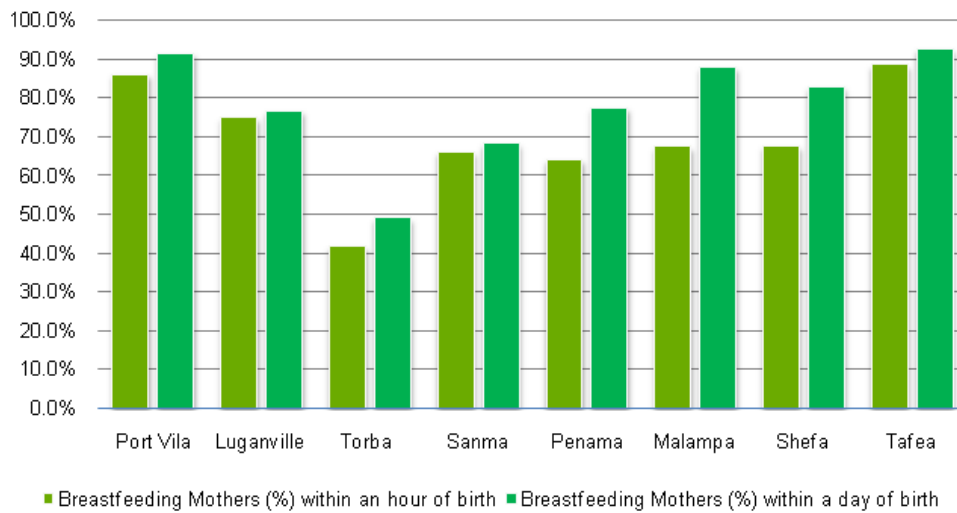
A higher proportion aged 12-23 months are undernourished according to all three indices in comparison to those who are younger and older than this age range. There appear to be very significant differences in the distribution of stunting by province, ranging from 18% in Torba to 31% in Sanma, closely followed by 30% in Port Vila. Wealth does not have a profound influence on child nutrition, but mother’s education level does. Stunting reflects chronic undernutrition. Underweight reflecting both past and current undernutrition, ranged from 16% in Port Vila to 25% in Luganville.

Map 4.5 Percentage of children (< 5 yrs) who are underweight by province



Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

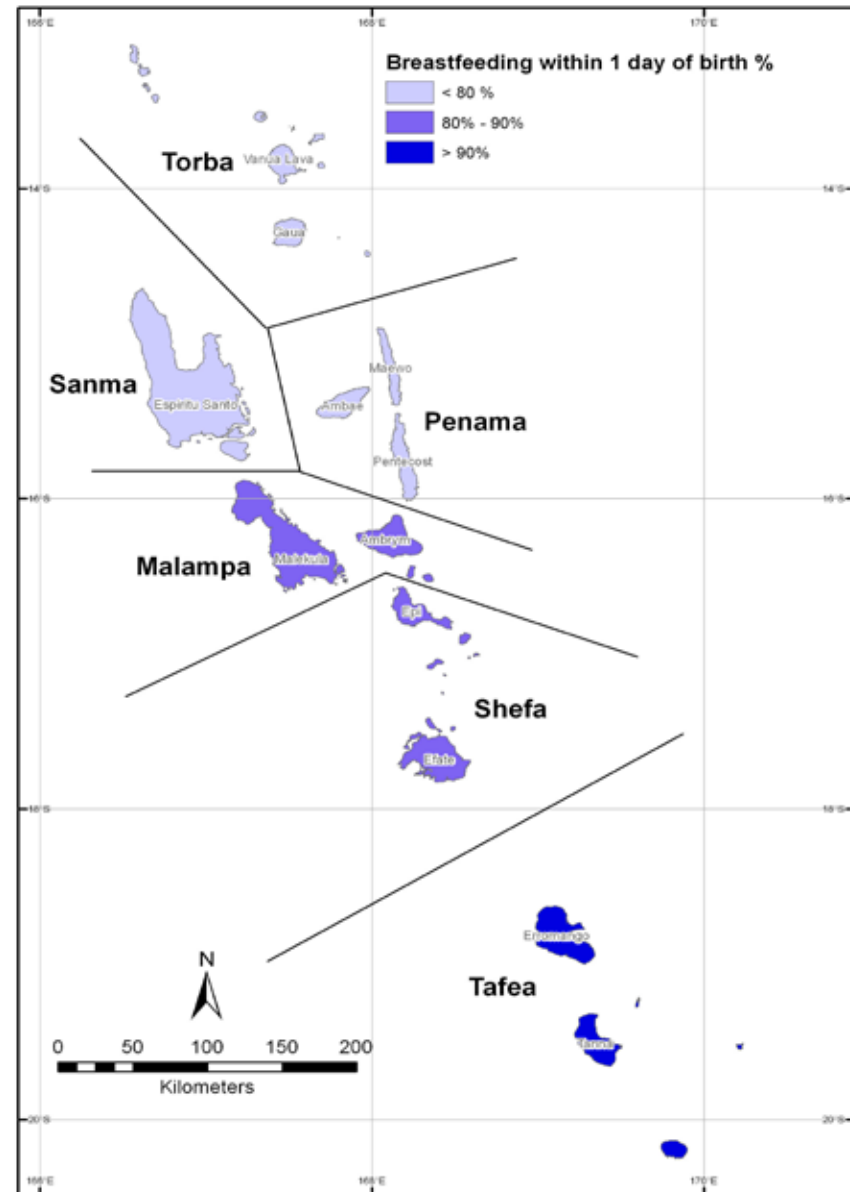
Figure 4.8 Percentage of breastfeeding mothers by province



Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

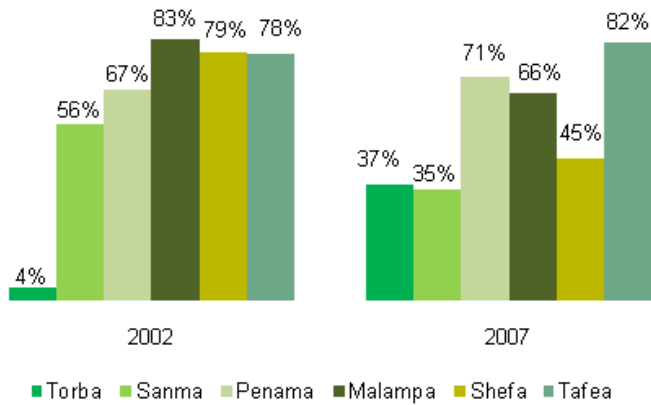
Based on a 24-hour recall, survey data indicates that 40 per cent of children in Vanuatu aged 0-5 months are exclusively breastfed, however, more than half (52.4%) of the children aged 6-8 months are receiving breast milk and complementary foods at least for the minimum recommended number of times. While there is no urban rural difference in the exclusive breastfeeding rate, breastfeeding with complementary feeding was more common in rural than urban areas compared to urban children (54.5% vs. 42.8%). Early and exclusive breastfeeding needs to be increased in Vanuatu. Initial breastfeeding offers protection from illness and fosters bonding between mother and child. For children aged 9-11 months, 47 per cent received breast milk and complementary foods at least three times in 24 hours leading up to the interview. Again it is higher in rural areas (50.1%) compared with urban areas (32.0%). Hence for these three indicators, rural children appeared to be more adequately fed than their urban counterparts.

Map 4.6 Breastfeeding within one day of birth



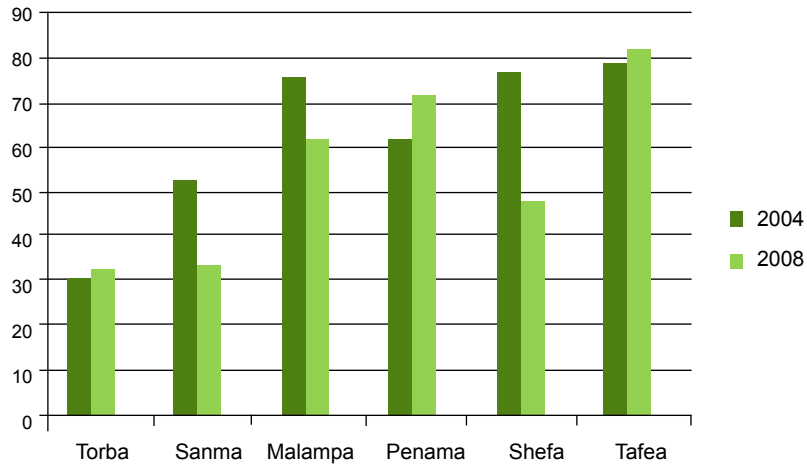
Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Figure 4.9 Full immunisation coverage at 1yr by province



Source: 2007 Vanuatu Nutrition Survey, MICS, 2007i

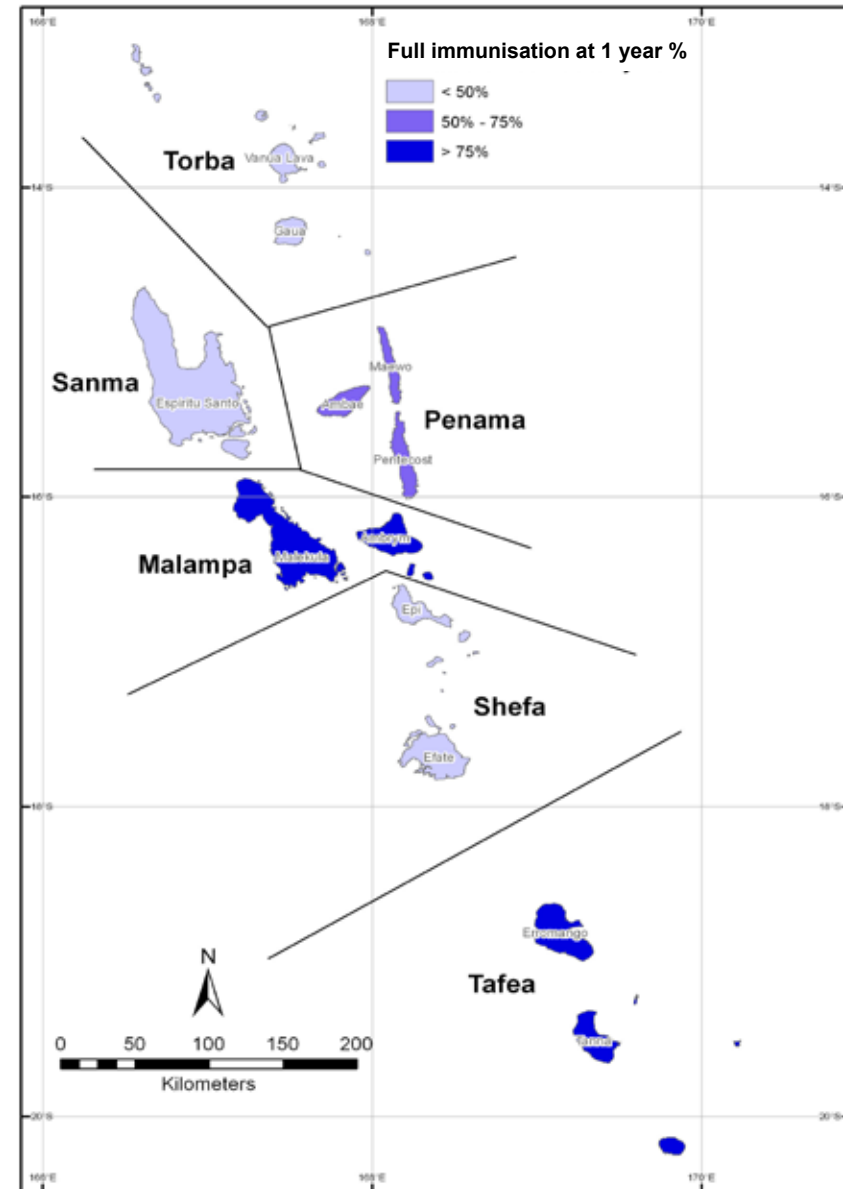
Figure 4.10 Immunisation coverage by province 2004 and 2008



Source: Ministry of Health

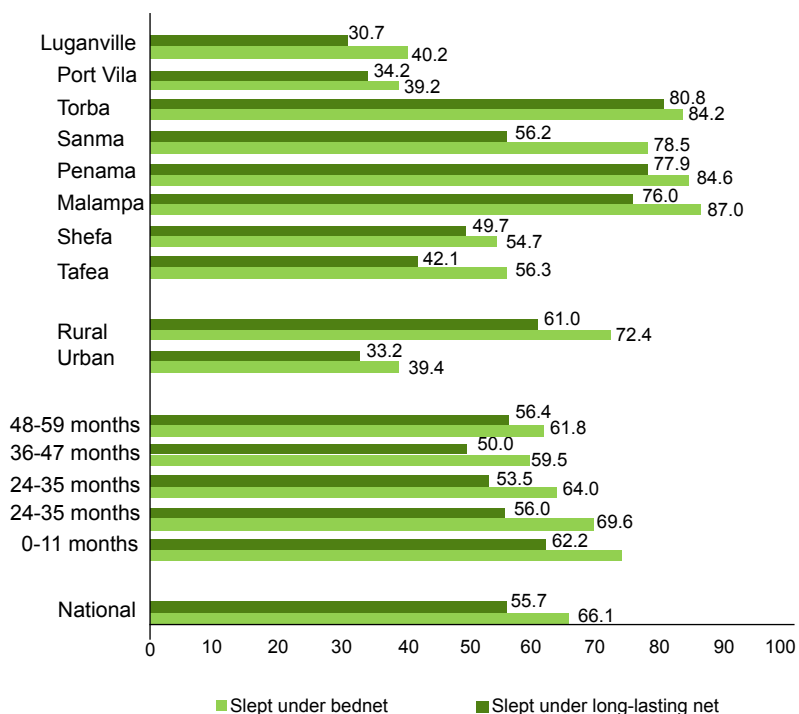
Recent effort by the government and partners to improve immunisation has lifted the estimated rate of boys and girls aged 1 year and under immunised with potent childhood vaccination to 90% and 80% in low performing provinces.

Map 4.7 Full immunisation coverage at 1yr by province



Source: Ministry of Health

Figure 4.11 Percentage of children sleeping under bednets

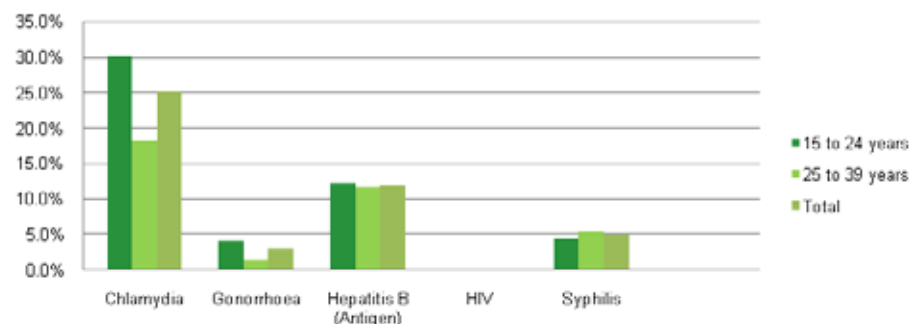


Source: 2007 Vanuatu Nutrition Survey, MICS, 2007

Malaria has been a priority health issue, with a reported 111 cases per 100,000 in 2006. The main strategy to prevent malaria is the introduction of insecticide-treated nets and 68% of households have at least one long-lasting, treated net (MICS 2007). This survey indicates that Tafea has the lowest rates of bednet usage both treated and untreated. Luganville and Port Vila urban areas also have lower rates of bednet usage. Torba, Malampa and Penama have high usage figures for both treated and untreated bednets. Young children overall appear to have lower than average rates of sleeping under bednets.

Reproductive Health

Figure 4.12 Rates of STI (Sexually Transmitted Infection)

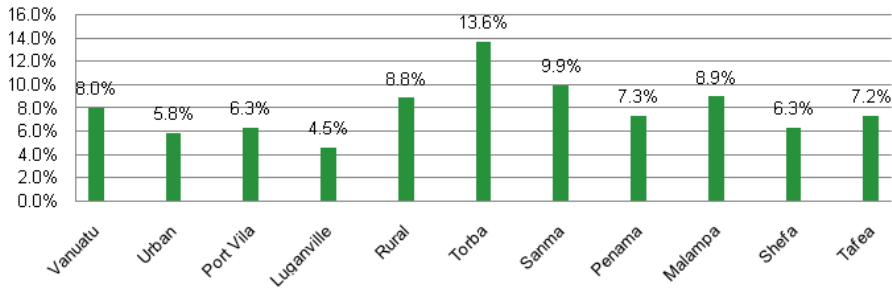


Source: Ministry of Health

Data, although not nationally representative since it was only based on a small number of samples, indicate high infection rates for STIs. In samples of 303 women tested, one quarter (25.1%) were found to have Chlamydia compared with women aged 25 to 39 years (18%). Gonorrhoea was detected in specimens from five (3%) women. All five women with gonorrhoea were also found to have a chlamydia infection. Five per cent of women were found to have 'early' syphilis infections. One in eight women (11.9%) was found to have the hepatitis B surface antigen. There were no confirmed positive HIV test results among the 303 women tested, although not all test results were registered. The high rates of infection among girls and women aged 15 to 24 suggest a need for adolescent reproductive health education and services.

Nationally 56% of children sleep under an insecticide-treated bednet to prevent malaria

Figure 4.13 Percentage of 15-19 year-olds ever given birth

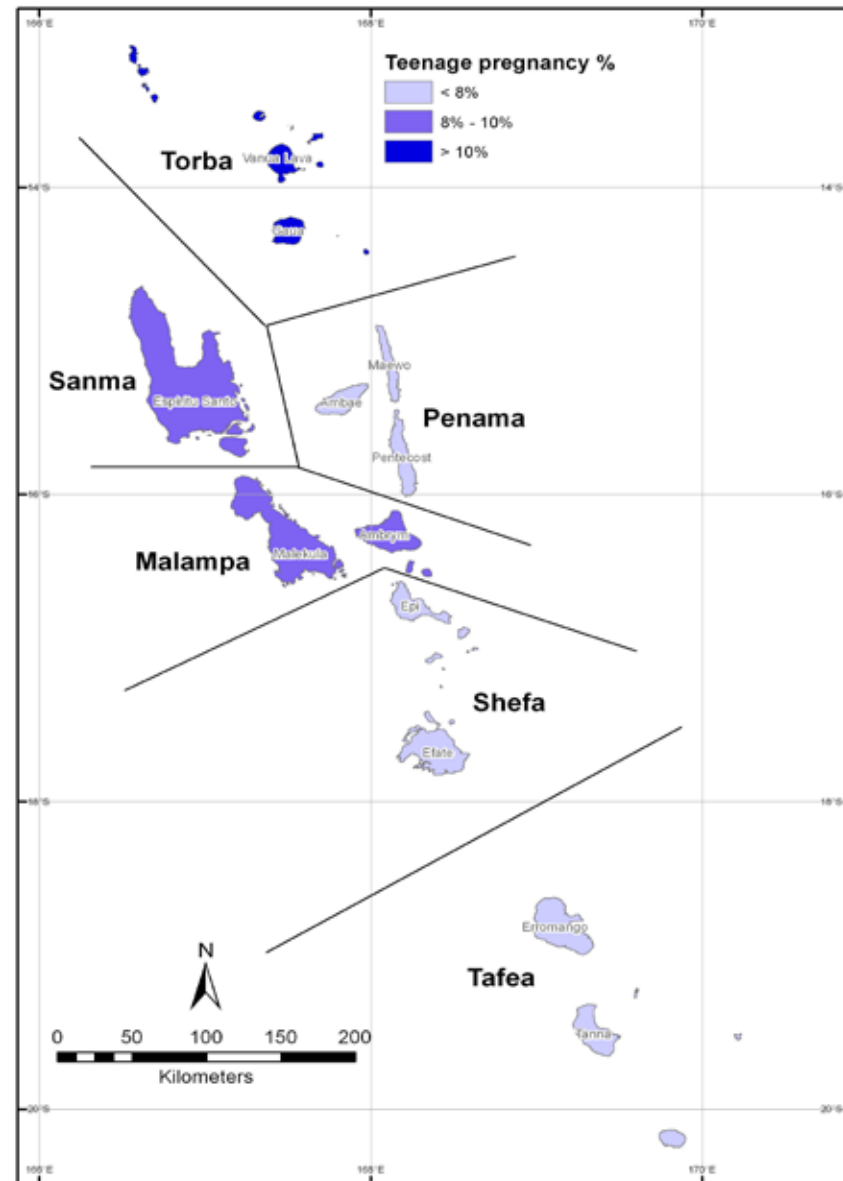


Source: 2009 Housing and Population Census VNSO

Teenage pregnancy rates are not available, however, Census data shows the number of 15-19-year-olds who ever given birth. It is much lower in urban centres than rural areas and this could reflect the lack of access to birth control measures and earlier marriage in rural areas. Research conducted in Port Vila in 2008 with youth aged 13-25 years found that 38% used some form of family planning or contraceptives.

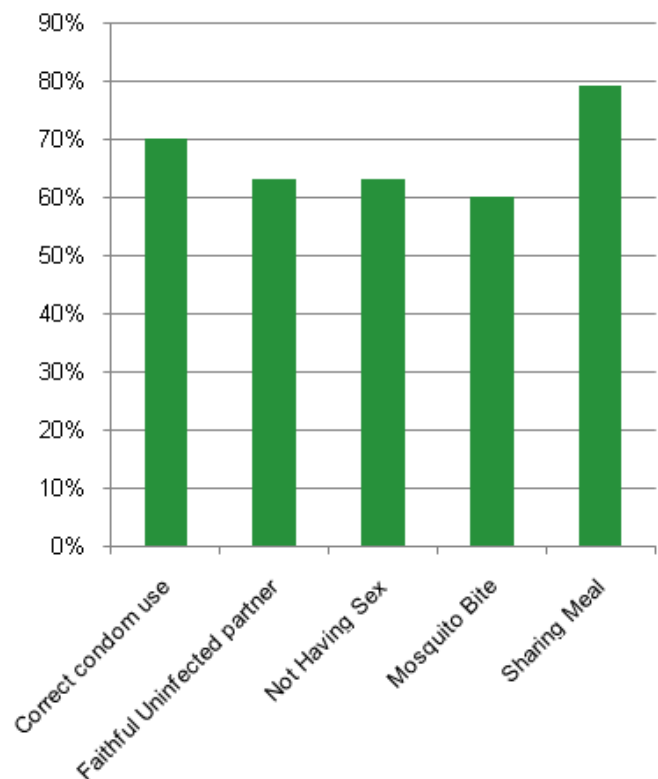
38% of young people in Port Vila used some form of contraceptives in 2008

Map 4.8 Percentage of 15-19 year-olds ever given birth



Source: 2009 Housing and Population Census VNSO

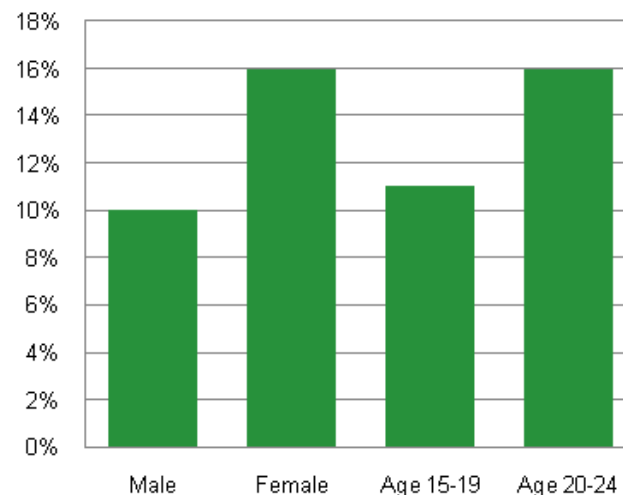
Figure 4.14 Percentage of respondents who correctly identified ways to prevent HIV infection and rejected misconceptions



Source: 2010 I No bin Gat Protection, UNICEF Pacific

While the incidence of reported HIV and AIDs cases is low at only five persons nationally, there is a poor understanding of modes of transmission. The survey for the graphs above and below, targeted most-at-risk and vulnerable youth. A total of 20% of females and 29% of males answered all five questions correctly about AIDS transmission and rejected correctly the misconceptions. Of sexually active age groups, 23% of 15-19 and 27% of 20-24 year olds answered correctly.

Figure 4.15 Comprehensive knowledge of HIV and AIDS by gender, adolescents and young people



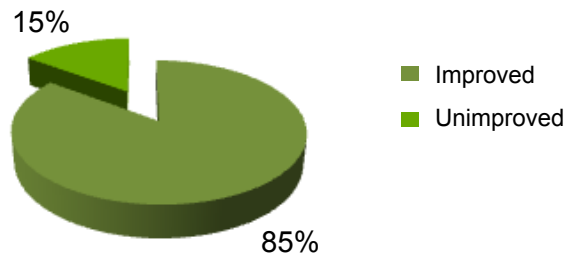
Source: 2010 I No bin Gat Protection, UNICEF Pacific

Figure 4.15 shows that the percentage of those who correctly answer all five questions varies by gender and age. It shows that more males (29%) demonstrated comprehensive knowledge when compared to females (20%) and more young people (27%) than adolescent (23%).

Only 20-30% of male and female youth have full comprehensive correct knowledge of HIV and AIDS

Water and sanitation

Figure 4.16 Access to clean drinking water (%)

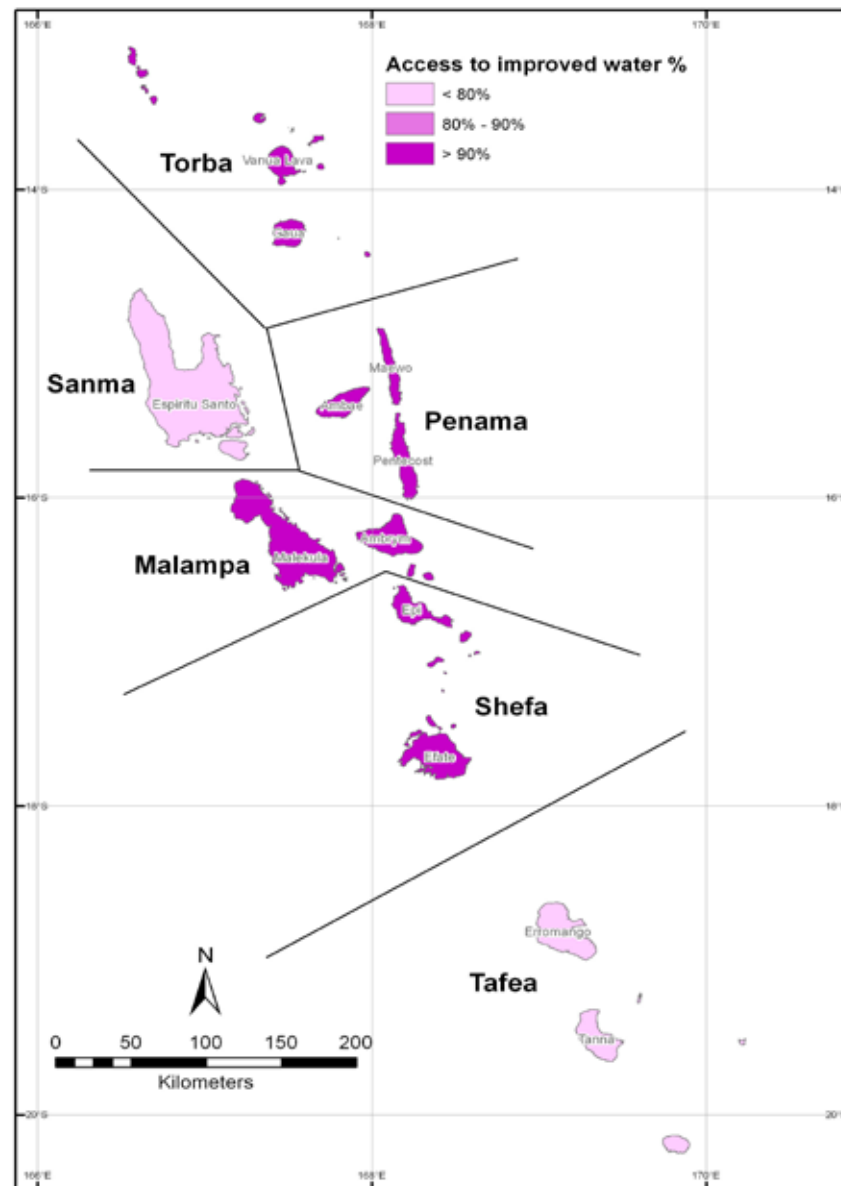


Source: 2009 National Census of Population and Housing VNSO

Census data shows about 15% of the households in Vanuatu do not have access to improved water sources for drinking. They obtain drinking water from a village standpipe, an unprotected well, a river, lake, spring or bore. The table below shows that Sanma and Tafea have the highest number of households that only have access to a river, lake or spring for drinking water. The use of unimproved water sources increases the risk of diarrheal diseases.

15% of households do not have access to improved sources of drinking water

Map 4.9 Access to improved water (%)



Source: 2009 National Census of Population and Housing VNSO

Table 4.1 Sources of drinking water

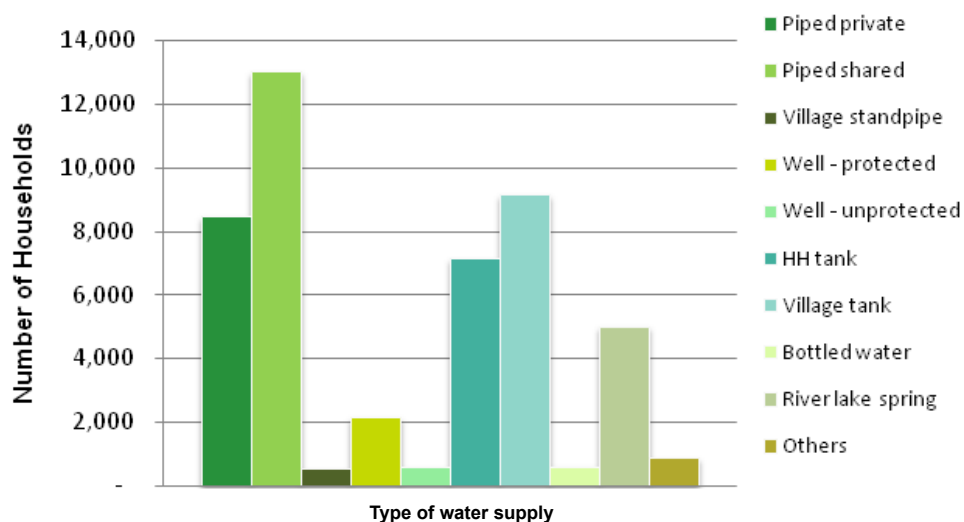
Province/island	Total	Piped private	Piped shared	Village standpipe	Well - protected	Well - unprotected	HH tank	Village tank	Bottled water	River lake spring	Others
TORBA	1,766	116	369	-	1	2	349	666	16	209	38
SANMA	9,213	1,105	2,098	167	336	51	1,718	1,878	260	1,249	351
PENAMA	6,620	452	1,427	134	20	-	1,363	2,645	61	489	29
MALAMPA	7,991	559	1,965	106	858	358	1,357	2,006	51	655	76
SHEFA	15,930	5,554	5,076	97	573	101	2,094	1,556	192	449	238
TAFEA	5,853	652	2,059	27	343	60	249	374	9	1,943	137
TOTAL Households	47,373	8,438	12,994	531	2,131	572	7,130	9,125	589	4,994	869

Source: 2009 National Housing & Population Census

Fifteen per cent of households use a water tank as their main source of drinking water. Ministry of Health MICS survey data indicated quite a high prevalence of diarrhea among under-five children as one in every seven (13.8%) in this age group had diarrhea within the two weeks prior to the survey, with a small urban-rural differential (12.8% vs. 14.1%).

A large proportion of households have piped water and many have access to either household or village tanks, however, some 5,000 households are still dependent on river, lake and spring water. The distance from water source is commonly an issue for families, with many women and children having to cart water long distances.

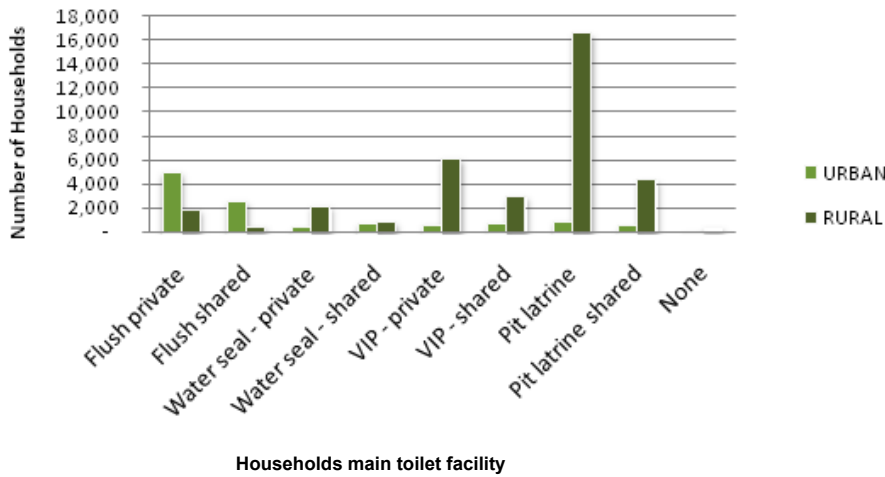
Figure 4.17 Households main water supply



Source: 2009 National Census of Population and Housing VNSO

Prevalence of diarrhea among under-five children is high in both urban and rural areas

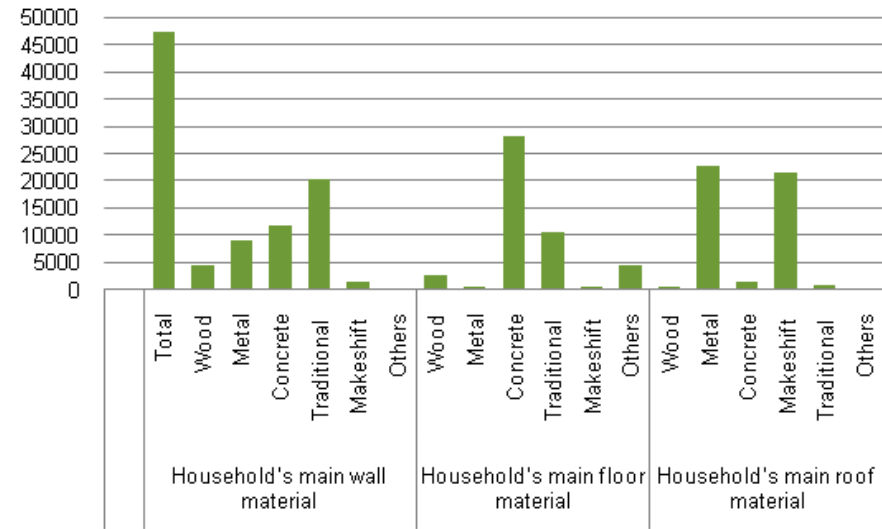
Figure 4.18 Sanitation urban/rural



Source: 2009 National Population and Housing Census, VNSO

Census figures show that in 2009, many dwellings were constructed using traditional materials such as bamboo or thatch or are built from makeshift temporary materials. The traditional, unimproved floor materials of sand, coral or dirt are of concern as they have a direct bearing on poor sanitation and health issues.

Figure 4.19 Materials used for walls, floors and roofs



Source: 2009 National Census of Population and Housing VNSO

Forty-eight per cent of households have unimproved toilet facilities, which are simple pit latrines with a small number using improved pit (VIP) toilets in the rural areas.

Almost half of all households have access to proper toilet facilities

5 DISABILITY



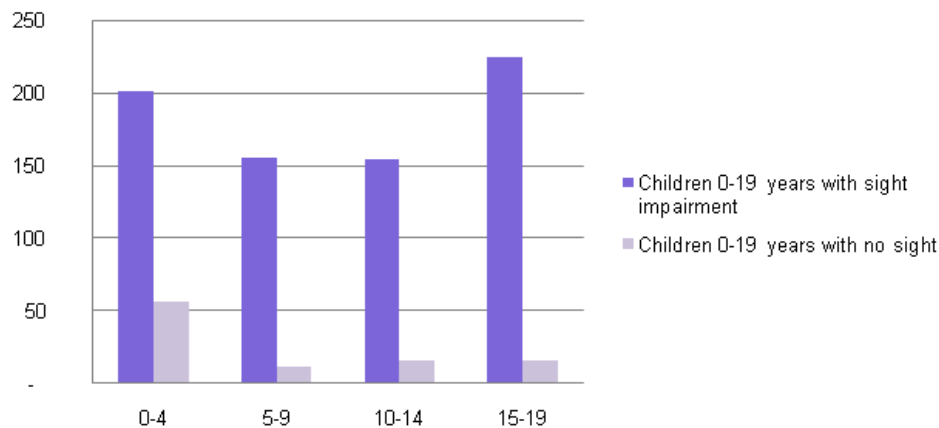
Disability

Overview

Official statistics show that Vanuatu has a relatively small percentage of children with disabilities, however, the numbers are likely to be underestimated. Families do not always report children with disabilities. Education surveys show that while schools are dealing with a number of students with disabilities, they do not have access to specialist support services.

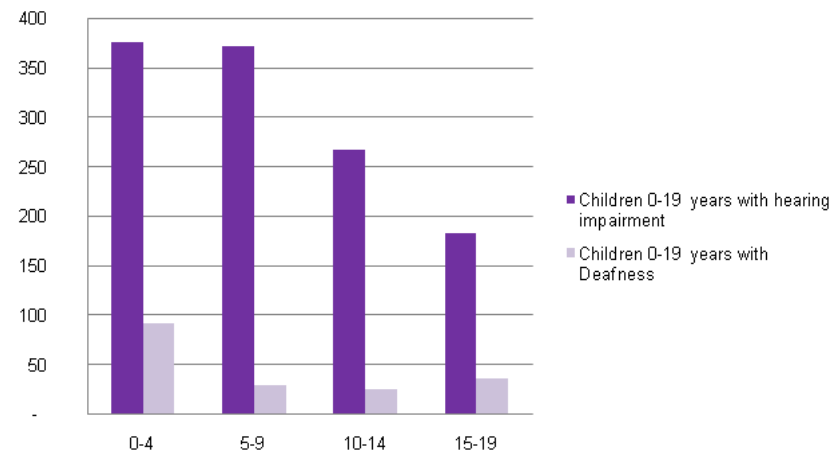
The Disabled Society in Port Vila is the only active organisation providing services to this group. There are limited visiting services for disabled people living in rural areas. The most common form of disability is sight impairment, which affects 17,187 people, followed by mobility impairment (11,555), senility (8,449) and hearing impairment (7,323). Vanuatu has ratified the Convention on the Rights of Persons with Disabilities, but Government policy to make education inclusive has not been effective.

Figure 5.1 Children with blindness and sight impairment



Source: 2009 Household and Population Census, VNSO

Figure 5.2 Children with deafness and hearing impairment



Source: 2009 Household and Population Census, VNSO



Port Vila: Noella is a 12-year-old ni-Vanuatu girl who speaks five languages. She has impaired vision. Noella attended school for four years until a new teacher excluded her because of her disability. She loved school and playing with her friends. Now she stays at home.

6 CHILD PROTECTION



Child Protection

Overview

Only about 26 per cent of children in Vanuatu have their birth registered, a process that gives them the right of identity, name and nationality. It is an unexpectedly low number, given that many women now have their babies in hospitals and clinics.

Officially, children under 19 comprise 47% of Vanuatu's population. With an estimated 83% of children living in rural areas and the low rate of birth registration, this figure could be much higher.

The level of compliance of Vanuatu's laws with the Convention of the Rights of Children principles is relatively low and there is an urgent need for Government policy interventions to address issues of child protection. There is a significant risk – particularly for girls - of physical, emotional and/or sexual abuse and neglect. Children attending secondary school on another island or location must often live away from their families and that increases their vulnerability to abuse.

Sample data shows that some 17% of children experience some kind of physical abuse in the home on a regular basis. In the same sample study, 78% of adults responded that they did hit, smack and otherwise inflict physical stress on children. Cultural norms seem to suggest that this is viewed as acceptable. In all child-centred questionnaires, children responded that they were most disturbed by adults inflicting abuse by shouting, swearing and otherwise making them feel unwanted. The need for a National Child Protection Policy, better systems to manage children at risk and more effective reporting systems and awareness programs is evident from the sample studies undertaken. Although Vanuatu lacks comprehensive data on the financial cost of child abuse, sample data provides lower and upper estimates. This does not include neglect for which no data exists. The estimated annual costs of child abuse are in the range of Vt293.8m and Vt425.4m. This is for hospitalisation, emergency care, child welfare services and law enforcement. Investment in an effective child protection system at an estimated one-off cost of Vt136.3m is a modest commitment compared to the substantial annual cost of child abuse.

In a field study¹⁵, police in 13 locations in Vanuatu were asked how many abuse cases they dealt with in a month. Their responses indicated significant child abuse issues that require further actual data, research and verification. Many cases would go unreported or would be dealt with by a village chief and in village meetings.

¹⁵ UNICEF, Protect me with Love & Care-A baseline report for creating a future free from violence, abuse and exploitation of boys and girls in Vanuatu, 2009

Table 6.1 Reported incidents of physical or sexual abuse

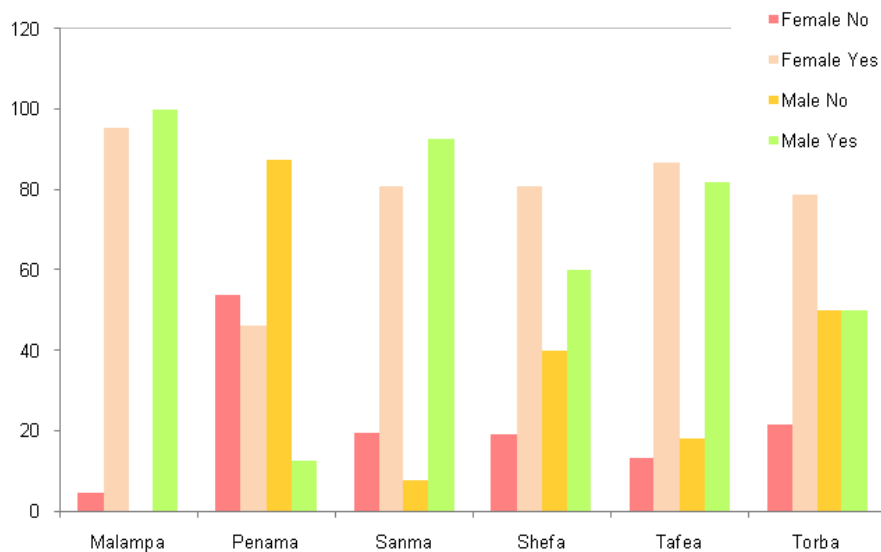
How many reports of child victims of physical or sexual abuse do you receive in one month?		
Types of report received	Average number of cases per month according to respondents	Number of respondents
Physical abuse	13	5
Sexual abuse	30	7
Exploitation (economic or other)	6	2
Neglect	5	3

It appears that physical punishment of children by parents (both male and female) is more common in Malampa and Sanma.

The data indicates that mothers are more frequently using physical punishment on children than fathers. This could be attributed to the fact that mothers tend to spend more time with their children than fathers.

Source: 2008 Protect Me with Love & Care: A Baseline Report for Vanuatu, UNICEF Pacific

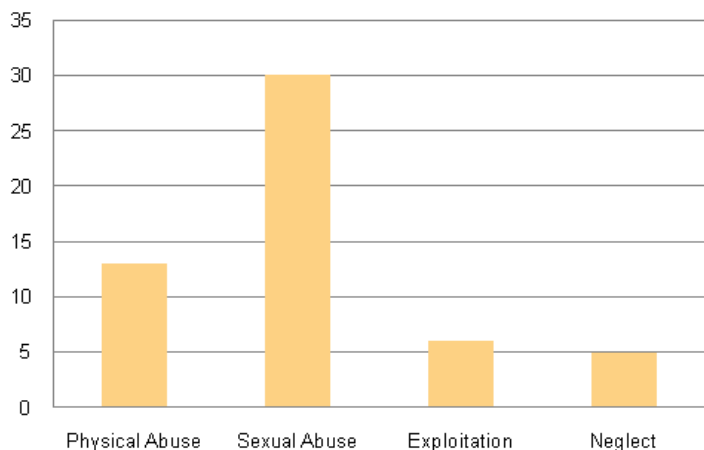
Figure 6.1 Respondents (%) who state that they hit, smack, kick or pinch children or pull or twist their ears, 2008



Source: 2008 Protect Me with Love & Care: A Baseline Report for Vanuatu, UNICEF Pacific

78% of adults said they inflicted physical stress on children

Figure 6.2 Incidence of child abuse per month



Source: 2008 Protect Me with Love & Care: A Baseline Report for Vanuatu, UNICEF Pacific

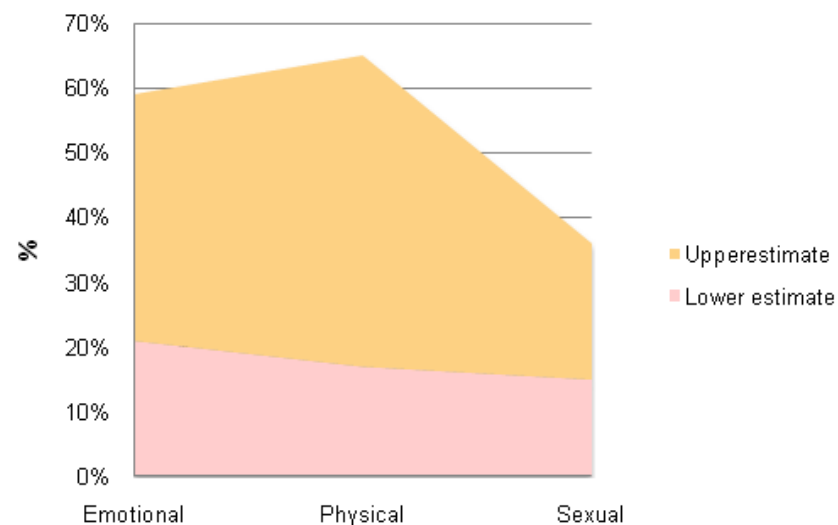
In a recent Childhood Household Questionnaire, family violence was cited in 44% of the answers to a question on what makes children feel unsafe in the community.

A consultation with 11-17 year-olds highlighted the lack of essential community services relevant to child protection in their community and the need to make sure services are accessible to all children, including disabled children.

As there are no juvenile courts, those who are brought before the law, be it civil or “kastom” law, usually do not know their rights and may be dealt with in a manner inappropriate to children. The majority of matters concerning child offenders are addressed at community level, using traditional mechanisms. Also, courts and public prosecutors lack child-friendly procedures, although some lawyers and the DPP have received training in children’s rights.

A study was undertaken to better understand if children were being increasingly protected by legislation and better served by justice systems that protect them as victims, offenders and witnesses. It was found that the law in Vanuatu is only fully compliant in some areas. Of the Convention on the Rights of the Child Indicators assessed, it was found that Vanuatu Legal provisions were fully compliant with 53 indicators, partially compliant with six and non-compliant with 168 indicators.

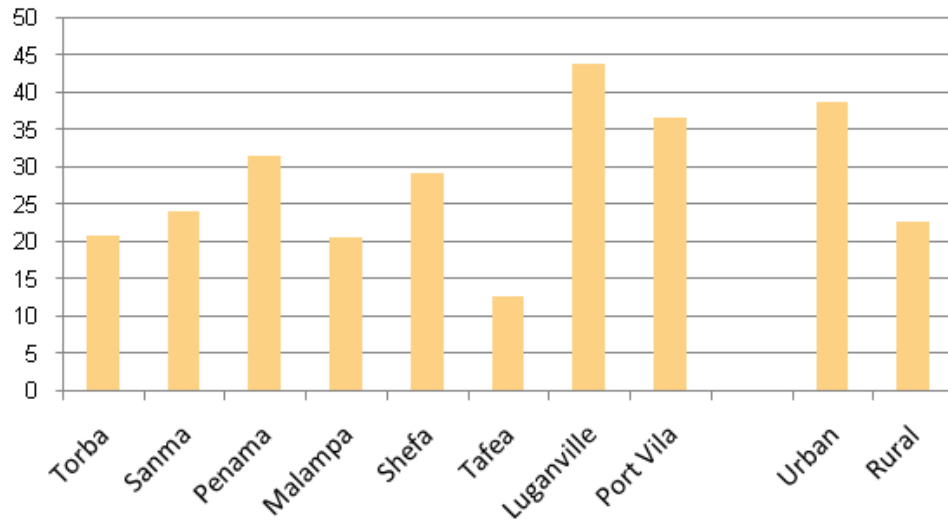
Figure 6.3 Percentage of abused children estimates



Source: UNICEF Lifting the Financial Burden of child abuse – A Vanuatu Case study

11-17 year-olds highlighted a lack of essential community services for child protection

Figure 6.4 Birth registration, by region (% all births)



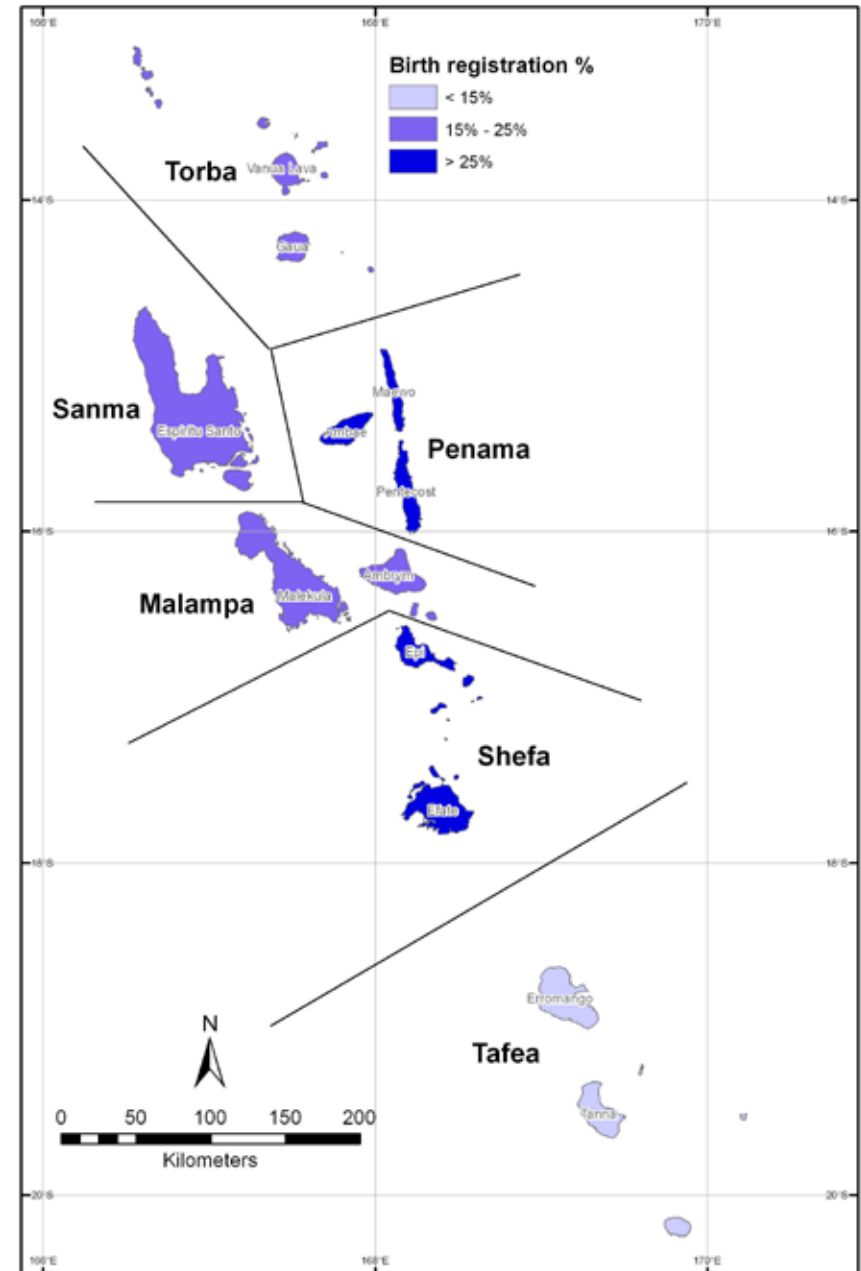
Source: Ministry of Health, Vanuatu Multiple Indicator Cluster Survey, 2007

One of the targets identified in the child protection baseline research is to have an effective birth registration system at 50% by 2009 and 70% by 2012¹⁶. In Vanuatu, just over a quarter of all children are registered nationally. Rates of registration vary between provinces, with Tafea having the lowest registration rates (12.5%), and Luganville the highest at over 40%. Children born into the richest quintiles are more likely to be registered than those born into poorer families (40.9% versus 13.3%).

Just over a quarter of children in Vanuatu have their birth registered

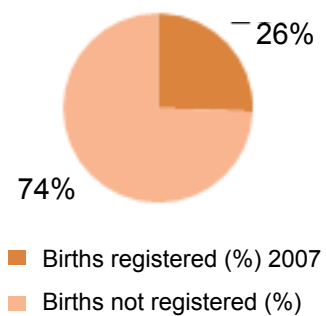
¹⁶ UNICEF and Republic of Vanuatu (2009) Vanuatu Child Protection Baseline Research 2008, National Report, April 2009.

Map 6.1 Birth registration, by region (% all births)



Source: Ministry of Health, Vanuatu Multiple Indicator Cluster Survey, 2007

Figure 6.5 Proportion of registered births (%)



Source: Ministry of Health, Vanuatu Multiple Indicator Cluster Survey, 2007

The reasons for not registering births vary. For some provinces, the distance to travel and the cost of registration were cited as the main reasons why children were not registered. But in Tafea, the province with the lowest rates of registration, the most common reason cited was “did not know child should be registered”, (41%), followed by “did not know where to register children”.



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Notes
