

SITAN REPORT – UAE (SUMMARY)

The Situation Analysis (SITAN) Report on children in the United Arab Emirates (UAE) was prepared for UNICEF by the General Union of Women at the request of the Ministry of Foreign Affairs. It is dated August 2003 and was summarized by UNICEF's Regional Office in Amman.

General Background:

The population estimate for 2002 was 3.7 million people. The workforce estimate was 2.2 million. Children formed 32% of the population. Average annual growth rates in children numbers were 50% from 1995-2002. Males constitute 68% of the total population. Male children constitute 52% of total children. Average incomes are among the highest in the world. Average annual GDP growth since 1972 was 13%. The average annual growth rate for non-oil sectors (agriculture, transport, manufacturing, construction, communications and trade) was 15.6%. Laws are based on the *Sharia* and on Arab traditions and customs. A huge social change has taken place as people turned from a nomadic Bedouin extended family lifestyle to an urban one based on the nuclear family. The State provides free education, health, housing, sewage systems, culture, entertainment and other services. It ratified CRC in 1997 and is committed to guaranteeing all children's rights according to CRC based on equality; the best interest of the child; a child's right to life, survival and growth; and respecting a child's opinion.

Developing Children's Abilities:

The Constitution emphasizes the family's importance in society and its role in raising children. It commits the State to caring for mothers and children. The Ministry of Labor and Social Affairs is responsible for the family, for children and for youth. There are special adult literacy programs run by the Ministry of Education. Illiteracy rates in 2001/2002 were down to 7%. Several new departments specializing in family and maternal affairs are being set up including the Higher Council for Motherhood and Childhood. The Marriage Fund was set up to prepare people for married life. It offers financial help, teaches the principles on which a happy family is based and advises on pre-wedding tests.

Early-learning: There were 102 nurseries in 2001. These are regulated and monitored. The Kindergarten stage is part of the school system. It is for two years starting at age 3. It is free but not compulsory for citizens. There were 98 Kindergartens in 2002. The Center for the Development of Kindergartens was set up in 1991/1992 with the help of AGFUND and UNICEF. It helps with the curricula and with training staff. In its Education Vision for 2020, the Ministry of Education aims to expand the Kindergarten system all over the country; prepare curricula based on children's growing emotional and social needs; provide psychological guidance and social services in Kindergartens; ensure the availability of staff qualified in early-learning; provide Kindergartens with the appropriate educational tools and a library; and use modern educational methods and computers. The Cultural Center, women's societies, the centers for children and youth and the Higher Council for Families have also shown an active interest in early-learning. They have educational, recreational and cultural programs and activities aimed at developing children's abilities. They also prepare studies and hold lectures and seminars on various child related subjects.

Education: In 2001, the education stages were changed from 6-3-3 to 5-4-3. The 1st 9 years, the Foundation Stage, start at age 5 and are free and compulsory with unified curricula based on teaching children skills, values, deduction abilities, exploration tools and live tangible subjects related to every day life. There is a regular evaluation and review system for teaching methods and exam papers. There are teacher training programs and programs for training and qualifying administrative staff. The Emirates University now offers a higher diploma in school administration.

Model schools are used for training purposes. Private schools are regulated and monitored by the Ministry of Education. The Ministry of Education has set up a computer system with two databases, one for students and one for staff to enable it to monitor and evaluate the situation. In 2002, there were 310 schools offering the Foundation Stage. Students who successfully complete the Foundation Stage spend 3 years in Secondary School. Secondary Schools are free but not compulsory. In 2002, there were 205 Secondary Schools. Model Schools offer a unique educational service at a reasonable cost based on the national curriculum with a few extras. There are 19 Model Schools. In 2001/2002, there were 448 schools offering vocational training. Adult education evening classes offer older people the chance to go back to school and are also an alternative for students who repeatedly fail normal school. There are school councils (students, parents and teachers), school camps, school clubs and school competitions to encourage student participation and develop their abilities including their leadership skills. Sports and Arts lessons are given from grade 1-10. Music lessons are given from grade 1-6. Student activities also include scientific trips, survival activities, school media, workshops, lectures, vocational courses (e.g. car mechanics, electronic engineering, maintenance of household appliances) and summer camps.

Special Needs: People with special needs are given financial and moral support. There are rules and regulations governing their care. They constitute around 8% of the population. There are the mentally handicapped, the hearing impaired, the sight impaired, the physically handicapped, the autistic, the hyperactive and the attention deficient. They are put into 3 categories: those who can learn, those who can be trained and those who can neither learn nor be trained and, therefore, require the permanent care provided by government hospitals and the Medical Rehabilitation Center. There are 6 rehabilitation and care centers with 781 students (male and female) in 124 classes i.e. 6.29 students per class. Students range in age from 3.5 years to 19 years. The centers offer health care, education, and vocational and handicraft training. There are several private institutions, which also offer services to people with special needs as well as special clubs and societies for the handicapped. Some of these have local government support. All private and government institutions offer day care services only whereby a light meal is served around 10 am. The exception is the Medical Rehabilitation Center in Abu Dhabi. This was established in 1993 and contains 100 beds for the elderly and the severely handicapped, who need full care. The centers provide any hearing, seeing and mobility aids. They comply with all safety regulations especially where vocational and handicraft training are concerned. Financial help is also provided. The blind have been included in the general education system. There is one curriculum for all the centers. Private institutions must display their license and the rules and regulations governing them. The principles of equality and participation are emphasized throughout the care given at the centers. Technology is used to provide better standards of care.

The Media, Culture and Entertainment: 97% of children watch TV. Advertisements have a detrimental effect and have encouraged children to smoke. The government is trying to combat this through the National Anti-smoking Program aimed at children and teenagers and run by the Ministry of Health, the Ministry of Education and the General Union of Women. The Internet and the press also play a role. Internet connection rates in the Emirates are the highest in the Arab World. There are children magazines published in the UAE and distributed throughout the Arab World. Daily newspapers include children cultural sections. Children's books are encouraged. 64.2% of these use story-telling to cover important subjects. There are children plays and children films. Children songs are broadcast on various media outlets. The government and the private sector have set up parks, recreation grounds, historic and scientific museums, cultural clubs, heritage clubs and sports clubs for children. There are educational, cultural and entertainment programs to fill up spare time especially during the holidays when summer clubs and training course are available.

Obstacles and Challenges: The main problem facing education is school desertion and school dropouts. To combat this, the government has improved the school environment, raised families'

awareness of the importance of providing a proper home environment to encourage studying and taught students how to cope with the distractions of the Internet and satellite channels. Foreign nannies and maids are a problem. There are, on average, 2.2 foreign workers per home. Children's language abilities and behavior are affected. The government has tried to combat this through awareness programs and through regulating the employment of these workers. It is also conducting a study on the possibility of establishing crèches in the workplace. Divorce is an issue, as are marriages to foreign women and multiple wives. There is currently a joint project between the Emirates University and the Marriage Fund to study the issue of divorce. Efforts to combat increasing divorce rates include advice and guidance programs offered by women's societies and the Marriage Fund. Counseling offices have been established to help avoid a divorce and, in the event of divorce, to help the family cope. The General Union of Women has a program to facilitate access to children in case of divorce. The government is preparing a new personal status law, which will regulate family issues.

The Right to Survival and Health:

The Health system includes programs for Maternal and Child Care, School Health, Health Awareness and Nutrition. Health services are offered by the Ministry of Health, the General Association for Health Services in Abu Dhabi, the Health and Medical Services Department in Dubai, the Medical Services in the Armed Forces, the oil companies and the private sector. In 2001, there were 30 hospitals and 115 health centers. There was 1 hospital bed per 6,900 people, 1 doctor per 1,322 people and 1 nurse per 490 people. The health policy is based on offering full primary and specialist care to all residents; increasing longevity by reducing illness mortality rates and incidents; eradicating endemic illnesses especially childhood diseases; early detection and treatment of chronic illnesses; and targeting mothers, children, students, the youth, the elderly, people with special needs, professionals and tradesmen. It is also based on providing a unified database for all health issues; establishing specialist treatment units; and preparing health strategies and setting standards for health facilities and supplying them with the latest equipment and technology. The Ministry of Health pays special attention to preventative programs and, as health indicators show, has achieved good rates of success. Polio has been eradicated. There is a national plan to eradicate measles by 2005. Around 8% of the budget is spent on health services.

Mortality Rates: In 2000, Birth Mortality Rates were 7.8 per 1,000 representing a 12% decrease since 1991. Neonatal Mortality Rates were 5.62 per 1,000 live births representing a 19% decrease. Infant Mortality Rates were 8.08 representing a 24% decrease. Under Five Mortality Rates were 10.27 representing a 27% decrease. Under Five Mortality Rates were 2.5 per 1,000 children under five representing a 35% decrease. 99% of deliveries take place in hospitals. There were no deaths in delivery between 1997 and 2000. In 1996, rates were 0.01 for every 100,000 women representing a 98% decrease since 1991.

Immunizations: Rates in 2000 were 98% for Tuberculosis, 94% for polio, 94% for the triple vaccine, 94% for measles, 92% for Hepatitis B and 92% for Haemophilus Influenza.

Contagious Diseases: Rates in 2000 were 0.058 cases of measles; 0.034 cases of whooping cough and 0.91 cases of mumps per 1,000 children under 15. There were no diphtheria cases. In 1990, there were 0.03 cases per 1,000 children. There have been no polio cases since 1993. There were no deaths from mumps or diarrhea. There were no recorded cases of tetanus in the last two years.

Maternal Care: This is offered through the maternal and childcare centers in the primary health care system as well as in other health facilities, general hospitals and maternity hospitals. Pregnant women are monitored from the beginning of their pregnancy till the 8th month when they are referred to the hospital where delivery will take place. If any unnatural symptoms appear earlier or

if there are any risks from the pregnancy, then women are referred immediately to specialist hospitals for care and follow up. Services include a full examination (height, weight, teeth); lab tests; ensuring the child is growing healthily in the womb through ultrasounds and listening to the heartbeat, providing information about breastfeeding; providing treatment for normal illnesses and providing vitamins and minerals. Postnatal care is also offered. Women visit the centers to ensure that there are no complications following delivery, to learn more about breastfeeding and for childcare. The growth and development of children under five are monitored. Immunizations are provided. Nutrition information is also provided including advice and guidance on breastfeeding. Early detection of hereditary diseases and birth defects also takes place with the appropriate treatment and follow up offered. There are 10 maternal and childcare centers and 108 maternal and childcare units in primary healthcare centers. Pregnant women visit health centers on average 3.4 times during pregnancy. Postnatal visits average 2.02 visits. 95% of women visit the centers. Visit rates increased by 10.12% between 1999 and 2000. There are 4 maternity hospitals. 14 general hospitals have gynecological and maternal departments. There are 138.3 maternity beds and 15.3 gynecologists per 100,000 women of childbearing age.

Child Care: This includes pre-wedding tests to prevent hereditary diseases passing from parent to child as well as health advice and counseling for newly-weds. It also includes a program for supporting and promoting breastfeeding and a program for child-friendly hospitals. In 1999, there were 17 child-friendly hospitals compared to 14 in 1995. All hospitals with gynecological and maternity wards are being encouraged to follow the 10 steps to successful breastfeeding so that they too can be accredited as child-friendly hospitals. A law has been passed recently granting women 6 months' maternity leave after delivery and allowing them a one-hour break a day during work for breastfeeding for a year. More than 90% of women leaving hospital in 1999 breastfed their children. 71.3% breastfed for at least 6 months without introducing any other foods. This is an increase of 34% compared to 1995. There is a breastfeeding awareness program. Women societies and organizations also help to promote breastfeeding. Breastfeeding week is celebrated annually from 1-7 August. A national committee was set up in 1992 to further promote breastfeeding and limit the promotion of breast milk alternatives. A law governing their sale was issued in the same year. A further law is due out soon. A nutrition department was set up in 1994. There are 5 nutrition clinics, which provide advice and guidance to families especially mothers. Their main activities involve following up on children's growth and development, instructing mothers on correct weaning methods, encouraging breastfeeding, and solving nutrition related issues in children like anemia, obesity and cavities. A specialist clinic for hereditary diseases was established. The national program for the early detection of diseases among newborns was established in 1995. It tests for hereditary diseases like phenyl ketonuria and hypo thyroxin and provides treatment and follow up. 20-35 thousand children were examined each year between 1995 and 2000. 7 cases of phenyl ketonuria and 55 cases of hypo thyroxin were discovered. All these cases are being treated. Testing for sickle cell anemia was introduced in 2002.

Teen Health: A program for teen health was established in 1996 to promote teen health and meet their health and psychological needs. Its main activities and achievements include conducting a field study in conjunction with the scout movement to survey youth's opinions on their problems, priorities, and health and social issues and suggest solutions and ways to deal with them; holding training courses related to the teen health program and to behavioral and emotional issues; publishing leaflets on teen and family health issues; and initiating a program aimed at protecting teens (male and female).

School Health: School health clinics serve students sent by the school clinic or brought by their parents. They refer difficult cases to hospitals. The services are offered jointly by the Ministry of Education and the Ministry of Health and include: the "Schools Strengthening Health" project, which concentrates on 4 issues – providing a healthy school environment, social inclusion whereby

the school helps the community and the community helps the school, health awareness, and nutrition. Most students eat breakfast at school. Standards have been set for school cafeterias and the food they offer. Food standards include regulating calorie intakes, offering foods that provide energy and help the immune system, ensuring fair prices that all can afford, storing and preserving food properly, ensuring that the sweets and desserts sold are low in sugar and that chocolates are low in milk content, and allowing the sale of fizzy drinks only to children in Grade Six and above.

Anti-Smoking Program: There is a national anti-smoking program. An anti-smoking law is being drafted. 14.3% of male and 2.9% of female students smoke. 63% of male and 48% of female students believe that smoking harms the health. A competition “Stop and Win” was held in 2000 and another one is planned for this year. There are advice centers to help people stop smoking.

Accidents: Traffic accidents are a problem. They are the 2nd cause of death among the population. 35% of accidents among children under 15 are wounds and burns. Of these, 53% are wounds and 46% are burns. The rates for foreign children are 26% for each. 33% of accidents are breaks. Of these, 41% are among Emirati children and 24% among foreign children. 23% of accidents are light injuries. Of these, 42% are among Emirati children and 10% among foreign children. Fires, flames and falls are the major causes of accidents among children under 15. Fires and flames account for 30.2% of injuries. Falls account for 29.4%. The rates are higher for Emirati children (41% for fires and flames and 37% for falls compared to 23% and 24% for foreign children). Traffic accidents caused fewer injuries – 12% in total with 16% for Emirati children and 10% for foreign children. Accidental ingestion of medicines caused 19% of poisoning accidents with higher rates again for Emirati children (25%) compared to foreign children (15%). Asphyxiations and drownings caused 18% of accidents (31% among Emiratis and 13% among foreign children). 10.2% of total deaths from accidents are among children under 15. Deaths from accidents represent 1.2% of total deaths of children under 15 (4.4% for Emiratis and 5.8% for foreign children). Among Emirati children, 3.2% of accidental deaths of children under 15 are boys and 1.2% are girls.

Dental Health: Rates for child cavities are 90% i.e. 7 cavities per child. The Ministry of Health takes a special interest in dental health and gum problems. In 2000, it set up a dental health preventative unit run by the Ministry’s dental department. The unit takes into account the country’s health system, the widespread incidents of cavities, the amount of fluoride in the water, training and nutrition habits. Its services include preventative measures for cavities and gum problems, treating them when they appear and orthodontist work. The Ministry has issued a leaflet on dental health. Its program concentrates on mothers and pre-schoolers.

Protecting Children

The State’s constitution, its laws, its decrees, its rules and its decisions regulate the basic rights and freedoms of the people as well as their civilian and social rights and their security. This obviously also covers everything related to children and, especially, to children who have lost their primary care givers. The UAE has joined CRC and its optional protocols because of its interest in children and in securing all their basic rights.

The Right to a Name and a Home: Every child is considered a civilian with all the rights associated with this including the right to a name and a home. A child’s home is that of his/her guardian. Births must be registered within a month of delivery by a child’s father or mother or the person in charge of the family’s affairs if the child’s father dies before the child is born or if the father is away. Any close relative (4th degree) attending the delivery or the supervising doctor or midwife or the director of the hospital or the dispensary or the prison where the birth took place can also register the birth. If a child is born in prison or in custody, then his/her birth certificate must not have any indication of this.

The Right to a Nationality: Any child born in the country or abroad to a UAE father has the right to UAE nationality as does any child born in the country or abroad to a UAE mother whose father does not legally acknowledge him/her or is unknown. Any child born in the country to unknown parents has the right to UAE nationality. Under-age children of people who obtain UAE nationality automatically get the nationality themselves. However, they must decide within a year of becoming adults whether to keep it or not. The law allows the children of a UAE mother married to a foreigner, who has taken her husband's nationality, to obtain UAE nationality if their father has died, or abandoned or divorced their mother, if they are resident in the UAE and have expressed a wish to give up their father's nationality. Under-age children of people who have lost their UAE nationality are allowed to reclaim UAE nationality once they reach the age of consent. Any UAE national can get a passport. Any UAE national can have his/her children added to their passport if they are under age. Under age children can only get separate passports if their legal representative approves.

The Right to Primary Care and Rehabilitation: This is guaranteed by the constitution. Violations are punishable by law e.g. removing a newborn from his/her parents or exchanging one newborn for another or pretending the child belongs to another person; not returning a child to his/her legal guardians when asked; kidnapping a child even a son or daughter or a grandchild; and not providing appropriate care. The penal law covering juveniles and beggars also guarantees a child the right to care and rehabilitation. It punishes anybody who has custody of a juvenile delinquent and neglects the delinquent causing him/her to re-offend or who refuses to deliver a delinquent to the authorities or hides him/her. It punishes anybody who causes a child to be homeless or to beg and anybody who encourages a child to commit a crime or assist in committing a crime. The punishment is more severe if force has been used or if more than one child is involved even if at separate time. Children who have lost their primary carers are taken care of by the State. They are fostered with families until at least the age of 6 and can stay with the foster family until the age of 18. The care offered by the foster family is reviewed regularly.

The Right to Education: Education is compulsory during the 1st nine years of school and is free throughout the education system including Kindergarten for all UAE citizens (male and female). It is the child's father's responsibility to ensure that the child goes to school. If the father has passed away, then it is the child's guardian's responsibility. Violators are punished. The State, through the Ministry of Education, provides schools, books, teachers, sets curricula, study plans, etc.

The Right to Health: The State provides free healthcare to all its citizens. The Ministry of Health is responsible for preventative and curative medicine; fighting epidemics and diseases; preparing health programs; and training through its maternal and child care centers; its immunization program; its school health program; its health education program; its quarantine and ambulance services; establishing hospitals and dispensaries; and organizing the medical, pharmaceutical, nursing and midwifery professions. The law guarantees a child's right during his/her first year to immunization against tuberculosis, polio, diphtheria, tetanus, whooping cough and measles.

The Right to Financial Protection: The law differentiates between children under 7 and children over 7. Children under 7 do not have the right to take care of their financial matters. Any acts they carry out are considered illegal and are not binding. Acts of children over 7 are considered binding if they are for the child's good and not binding if they are not. Any doubt is resolved by the child's guardian or when the child reaches the age of consent. Under age children are not allowed to trade until they are 18 and have the court's permission. Any person abusing their position of responsibility towards a child's financial matters is punished by law.

Child Labor: It is prohibited to employ children under 15. It is prohibited to employ children at night in industrial projects i.e. from 8 pm to 6 am. It is prohibited to employ them in dangerous work or work that is harmful to the health. Children can only work 6 hours a day maximum. They must have no less than a total of one hour for breaks for rest, food and prayer during this time. They must not work more than 4 hours in a row. They cannot stay in the workplace for more than 7 hours in a row. They must not work overtime. They must not work on rest days. Their employer must keep a detailed record of all youths in his/her employment. Their employer is legally responsible. The issue of child Camel jockeys is being treated seriously. Every jockey must have a license to participate in a race. Licenses are issued only if the jockey is over 15 and weight more than 35 kilos at the beginning of a race. He must have entered the country legally with the appropriate visa and must have a residence permit. He must be healthy.

The Right to Social Services: Social Security Services are offered to orphans and children whose parents are unknown. They are also offered to UAE women (and their children) married to foreigners whose husbands cannot work or are in prison for longer than two months or have been sent out of the country and to UAE women married to foreigners who are widowed. Emergency assistant is offered to families and individuals in case of a crisis or a natural disaster (personal or national) on the order of the Minister of Labor and Social Services.

The Right to a Clean Environment: This is guaranteed in the federal law. The State established the General Association for the Environment to care and protect the environment and raise awareness and educate people about its importance. There are several other associations and organizations that help in this.

The Right to Culture, Sports and Art: The Ministry of Information and Culture is responsible for all media and cultural events. It is responsible for traditional folklore, music and the theatre. It is also responsible for libraries, shows and children's centers.

The Right to Protection from Crimes: Children who are not handed over to their custodians have the right to raise a case or have a case raised for them by a verbal or written complaint. The same applies in the case of non-payment of maintenance. If the victim of a crime is under 15, then a case is raised on his/her behalf by a guardian. If the victim is under age, a representative is appointed to speak on his/her behalf. Children under 15 are not called as witnesses. They are called to relate an event only and are not sworn in. Victims under the age of 15 can be taken into protective custody if need be.

Juvenile Delinquents: Children under 7 cannot be charged with committing a crime. Children aged 7-18 are treated according to the laws governing juvenile delinquents and beggars. If the issue is just a matter of anti-social behavior or running away from home, then the child's guardian's permission is required for any legal procedures. The first step is for the police to send a written warning to the child's guardian. This warning can be appealed. It is only after several warnings that legal procedures can take place. Repeat offenders can be scolded, put into custody, put on probation, banned from certain places, banned from certain activities, forced to go on a vocational training course or put in a rehabilitation center. Foreign juveniles who are repeat offenders and are considered a hopeless case are deported. There are laws governing the rehabilitation of delinquents e.g. the right to be placed in a juvenile center, a right to education and training, a right to visit their families especially on feast days, a right to work, etc, etc. In 1998, 133 juveniles were put in custody. Most offences took place in August, during the school holiday. 92% were boys. 75% were Emiratis. The high number of Emiratis is due to the fact that the centers only take in Emiratis. 53% lived with their parents but were constantly fighting with them and 25% came from families where the father had multiple wives. 49% involved theft and 18% involved homosexuals. 60% of female cases involved adultery and 20% involved prostitution. 70% of cases were among students.

The Right to Life and Freedom: Anybody who encourages a child to commit suicide is punished. Anybody who kidnaps a child or holds a child against his/her will is punished. Anybody who endangers or causes a child to be endangered is punished. Anybody who harms or causes a child to be harmed is punished. The punishments are more severe if the child is under 7.

Conclusion:

The plans to improve the situation of children in the UAE include:

Education:

- Expand the Kindergarten system
- Improve the capacity of the basic education system
- Regulate private education
- Make basic education and vocational training two complementary parts of one education system
- Make secondary education compulsory
- Evaluate students' abilities and provide the appropriate education accordingly and do the same for students with special needs while taking care to integrate them where possible into mainstream education
- Improve standards throughout the education system
- Improve standards in languages, maths, sciences, technology and IT

Health, Survival and Culture:

- Improve teen health programs
- Raise awareness regarding nutrition, traffic accidents and smoking
- Raise family awareness of modern child-rearing issues
- Establish centers for talented and gifted children
- Ensure that all departments, institutions and societies working on maternal and child care issues co-ordinate their activities
- Expand all aspects of maternal and child care programs
- Carry out studies and research, establish an information center for maternal and child care issues and publish all relevant information
- Establish cultural, scientific and promotional programs to raise awareness in the society on all issues related to the family in general and to maternal and child care in particular
- Establish training programs for all those in the field of child and maternal care
- Encourage producers of children's programs and children's authors
- Co-operate on the regional and international level with all those working in the field of maternal and child care
- Hold seminars and conferences on issues related to children and families