

SITAN REPORT – BAHRAIN (SUMMARY)

The report was written by the National Committee for Childhood in Bahrain with the co-operation of UNICEF and the American University of Cairo. It is dated January 2003.

General Background:

Bahrain has a young population: children constitute 45.3% and those under 26 constitute 58.5%. It is densely populated putting pressure on resources and infrastructure. Bahrainis form 62.4% of the population. 37.6% are foreign workers. Bahraini males form 50.44% of the population and females 49.56%. This ratio changes to 69% for males and 31% for females if foreign workers are taken into account. Total population growth is 2.7% annually (2.5% for Bahraini nationals). This is low compared to other Gulf countries but high compared to developed ones. Children are defined as those under 18. They form 34.2% of the population - a total of 223 thousand children (184,000 Bahraini and 39,000 foreign). Fertility rates in 2000 were 3.2 children per woman. Children under 19 constituted 28.3% of fatalities from traffic accidents and 28% of injuries. Car pollution, although under control at present, is expected to cause problems in the future. GDP growth in 2001 was 4.8% (transport, communications, management, finance and oil sectors). Oil revenues account for 58% of the country's income. The government is changing its reliance on oil revenues to avoid the effects of fluctuating prices. Oil is not the major GDP contributor. Financial Services, Real Estate and Business Services are. The 2001 study on poverty levels based on the 1994-1995 survey on income and expenditure shows that the poverty line is 309 Dinars and that 16% of the population lived below the poverty line in 1995. The poverty gap is 0.3. The extreme poverty indicator is 0.23. 30% of handicapped Bahrainis are under 19 while 30.5% of handicapped people living in Bahrain are under 19. The Ministry of Health has set up a plan to help prevent child abuse. Bahrain signed the UN Convention on the Rights of the Child in 1991.

Health:

Primary healthcare is provided through 20 health centers staffed with GPs and nurses. The centers provide immunizations, advice on breastfeeding and nutrition; and regular examinations from the age of two months till school age for the early detection of childhood diseases and signs of malnutrition or anemia (hemoglobin is tested regularly from the age of 9 months). They also provide health education and a dental care awareness program and dental treatment. These services are also available in private and government hospitals and private clinics. The centers also provide prenatal care for women (97% of women use this service) including ultrasounds, regular examinations of women for the early detection of breast and cervical cancer, postnatal examinations (62% of women use this service) and family planning (53.4% of the population use contraceptives – a figure that has gone down compared to what it was - with 28.9% using modern methods and 24.5% using traditional ones) through emphasizing the importance of birth spacing and advice on contraception. They also provide information on pregnancy and childcare as well as pre-wedding tests for sickle cell anemia, thalassemia and yeast infections (20% of people use this service). Primary healthcare covers 100% of the population and is easily accessible. Beneficiaries constitute 99% of the population.

Mortality Rates: In 2001, mortality rates for live births were 8.7 per 1,000. Mortality rates at birth were 11.1 per 1,000. Neonatal mortality rates were 4.8 per 1,000. Postnatal mortality rates were 3.9 per 1,000 (both of these show an increase from 1997!). Male mortality rates are higher than female mortality rates except where postnatal rates are concerned. This is attributed to hereditary issues. Boys also seem to be more disposed to accidents than girls. Neonatal mortality rates are attributed to problems with the pregnancy and/or delivery, deformities, low birth weights, asphyxiation during birth, malnutrition and the mother's bad health. Postnatal mortality rates are attributed to diarrhea

and respiratory tract illnesses and, in a few cases, to malnutrition. Under 5 Mortality Rates are attributed to malnutrition and accidents at home. Low Infant Mortality Rates are attributed to the fact that most deliveries (93.4%) take place in hospitals under expert attention (although 6.6% of women have no care during childbirth), the availability of pregnancy clinics, family planning and health education. Child mortality rates are higher when the mother is a teenage (23 per 1,000 live births; 30 per 1,000 under fives) and also increase when the mother is older. Child mortality rates are similar in all regions with slightly higher rates in the north and south governorates. This is probably because most health services especially private ones are in the capital and because of higher education levels in the capital. The higher the mother's education level, the better the chance her child has of survival. The longer the birth interval, the better the chance is for survival. Maternal Mortality rates were 0.22 deaths for every 1,000 live births in 2001.

Illnesses: Carrier rates for sickle cell anemia are 13.8% of the population, while people who actually have the illness form 1.2% of the population. 3% are thalassemia carriers. 26% have a yeast infection. 10.5% of Under Fives are underweight for their age while 5.3% are severely underweight for their age. 6.4% of Under Fives are underweight for their height. 8.1% of Under Fives are short for their age. 48.3% of Under Fives are anemic. Anemia among 26.7% of children aged 6 months to 5 years is due to iron deficiency. Only 8.5% of the population use iodine enriched salt. 1.7% of children aged 8-12 years have enlarged thyroid glands with its accompanying symptoms. 16.5% of these show a deficiency of iodine in the urine. There are no studies on the lack of vitamin A. Experts claim that this is not a problem. The Ministry of Health tests water in schools, nurseries and kindergartens as well as water in parks and pools. Statistics show that average infection rates are low. 9.7% of children surveyed had diarrhea in the two weeks preceding the field study. 20.7% were given extra fluids while 58.4% continued with their normal feeding pattern and 17% received extra fluids along with their usual food. 4.1% of children surveyed had a severe respiratory tract infection in the two weeks preceding the field study. 57.1% visited a clinic for treatment. 30.3% visited a private clinic. Total incidents of illness in the two weeks preceding the field study were 46.4% with 26.4% of cases receiving extra fluids and 60% continuing with their normal feeding pattern.

Immunizations: These are provided during the regular examination of children by the child and maternal care health system, which covers children from the age of 2 months until they go to school. Children are immunized against contagious diseases, which could lead to deformities or death. Immunization rates have increased drastically - 99% of Infants have been given the triple vaccine and have been immunized against polio, Hepatitis B and Haemophilus Influenza B; 97% of one year olds have been immunized against measles, German measles and mumps; and 99% of six year olds have been immunized. Bahrain has successfully eradicated polio.

Breastfeeding: The project for making hospitals and clinics child friendly began in 1993 to encourage breastfeeding. In 2002, 95.1% of children were breastfed for various periods. However, only 10% of children were given only breast milk in the 1st 4 months. A breastfeeding awareness program has been set up to improve the situation. The reasons why women don't breastfeed exclusively or stop early include the wish to decrease the child's reliance on the mother and the mother returning to work. A law was passed in 1995 to govern the sale of breast milk alternatives.

Dental Health: Dental Health is a major problem (52.3% of 12 year olds, 65% of 15 year olds and 61.8% of 18 year olds have cavities while 65.6% of 12 year olds, 48% of 15 year olds and 35.2% of 18 year olds have gum problems). There are attempts to tackle this through awareness programs but the government does not seem to have the support of families or schools.

Social Issues:

The family status has changed dramatically due to higher levels of education and the discovery of oil. The extended family is now reduced to a nuclear one. As a result, there is a strong reliance on foreign maids. The law grants mothers 34 working days of maternal leave on full salary starting on the date of delivery. The law also grants working mothers one-hour's break a day for breastfeeding for only the 1st four months after delivery. Mothers can, by special permission and after a medical exam, get one year's leave without pay after delivery. Some private companies and institutions grant mothers the one-hour's break a day for breastfeeding for two years after delivery. There is no law on crèches.

The Ministry of Labor and Social Services has set up 7 Social Centers to help cater for families' needs. In 1982, the Salman Cultural Center for children was set up to provide after school services for children. It has a limited capacity of 600 children between the ages of 6-12.

Education:

Education from the age of 6 to 17 is free (i.e. it is not free in kindergartens and nurseries). At the end of the 1990s, there were 189 schools (94 for boys and 95 for girls). The education system is divided into four sections: Pre-school, Primary, Preparatory and Secondary. The private sector runs the Pre-school education section under the supervision of the Ministry of Education. There is a need to develop proper curricula and to train staff and supervisors and to monitor standards. The Ministry is also aiming to include Pre-school classes in government schools. In the school year 2001/2002, there were 103 national and foreign kindergartens with 9,009 students registered in them. There were 16 kindergartens with nurseries attached with 1,562 students registered in them. A closer study of the situation shows that only small numbers of Bahraini children attend Pre-school and that more boys than girls attend it. It also shows that the higher the mother's education level the higher her children's Pre-school attendance rate is. Teacher student ratios in Kindergartens in the 1999/2002 school year were 1 teacher to every 14 students. Teachers must have passed the General Secondary School Certificate to be appointed and should be encouraged to attend the Kindergarten Diploma Program. Capacity levels in Primary School were 109.6% in the school year 2000/2001 and 87.6% in Secondary School for the same year. There were 40 private schools in Bahrain in 2000. Despite the high fees and the free education offered in government schools, large numbers of students attend private schools. There are many more boys than girls at these schools. Expenditure on education is decreasing despite the increase in the number of students (13.1% in 2000 as opposed to 14.6% in 1990 and 15% in 1980). Teacher training is important and the government is beginning to pay more attention to it. There is a need for a documented training philosophy in the country

Desertion and Dropout Rates: Dropout Rates in all levels were 0.9% according to the education statistics of the school year 1999/2000. Male dropouts and desertion levels in Secondary Education were 3.3% while female levels in Secondary Education were 2.3%. More research is needed to find out the reasons why although 4 points are raised: no wish to continue schooling; work; looking for work or dismissal from the school. In Primary Education, statistics show that 97.5% of students attending 1st grade go on to 5th grade. Dropout and desertion levels in Primary Education are 2.6%. Statistics show that 13.5% of registered students failed Preparatory School. This is due to: not passing the exam, familial neglect, slow learning including learning difficulties and a weakness in Arabic.

Illiteracy: Literacy classes are available to everybody free of charge. Illiteracy rates in 2001 were 12.3% with 7.5% for males and 17% for females. Illiteracy rates for men are falling faster than those for women (by 50% annually for men and by 37.2% annually for women). More work needs to be done to lower illiteracy rates among women..

Culture and Entertainment:

Most media outlets have tried to produce children programs or programs directed at educating the society at large. However, Radio and TV programs for children are limited in number. Bahraini TV has special children programs. Programs are broadcast for two hours daily in the evening during the week and in the mornings at the weekends. Broadcast times are extended during the holidays. Total broadcasting times for children programs are 7.8 hours weekly. The programs are for children aged 6-13 and aim to encourage children to view their local TV station, get children used to speaking their mind and to think things through, embed in them appropriate social and religious values, educate them on health, enhance their general knowledge and occupy their spare time in a useful and enjoyable manner. Talk shows attempt to educate the population on children's rights and the issues facing them. Child abuse, child labor, domestic violence, the UN Convention on the Rights of the Child, children with special needs, child rearing and various family problems are some of the issues the programs covered. The TV also tries to show various children events especially if they take place in Bahrain. There are 2 radio programs targeting 6-18 year olds, one is live and the other is pre-recorded. They have been broadcasting for 3 years. There is one family program on the radio entitled "Your family, this small world". It is aimed at mothers and is educational in context (modern child rearing methods, and solving child rearing and teenager issues). There is another program called "The Afternoon Meeting" which covers social and family health issues. There are special children publications limited to showing children's photos, their hobbies and their talents. There is a weekly magazine published by the Bahrain Society for Child Development aimed at parents and experts covering child-rearing issues. There is the Mother and Child magazine. Children's books are available in bookshops and at book fairs.

The School Theatre department at the Ministry of Education was set up at the end of the 1970s. Its main activities involved participating in local and foreign festivals at various levels for both boys and girls. At present, the Ministry is trying to develop school theatre and is considering including it as an elective subject in the Preparatory School sector. There is also an active Puppet and Real Theatre department at the Salman Cultural Center, which is open to the Center's members. It puts on locally produced shows once or twice a year and also shows other Gulf productions.

In 2001, 33.6% of the population owned a personal computer. The subject is taught in private and government schools. In 2001, 18.16% of households were connected to the Internet.

Children's Rights:

Article 5, paragraph A of the constitution guarantees a child's general rights. This complies with the aims of the Convention on the Right of the Child (CRC).

Name, Nationality: The proof that a child's right to a name and nationality (Article 7 of the CRC) is exhibited by the fact that the Emirate has granted Bahraini nationality to a large number of children living in the country. A father has the right to decide if his son or daughter should have a separate passport or should be included on his passport or on the child's mother's passport. Children born to unknown parents in Bahrain have the right to a Bahraini nationality. A mother can only give Bahraini nationality to her children if the child's father is unknown or unproven. If the father has a different nationality or is from the *Bedoon*, then the child does not have the right to Bahraini nationality even if the father has deserted the mother and child.

Family Care: Children deprived of one or both parents are subject to the various interpretations of *Sharia* law. This poses a problem, as there are no clear laws governing the issue although a personal status law will be issued soon. In 1984, a children's home was set up for children whose parents are unknown, orphans and children from broken homes. The home also took in children who had

family problems on a temporary basis. Bahrain relies on the idea of fostering, as it is known in *Sharia* law to care for children. The Ministry of Labor and Social Affairs and the Ministry of Justice and Islamic Affairs co-ordinate the matter. Several new homes (for girls aged 12+ and young children) are being set up. Child maintenance is also subject to the various interpretations of *Sharia* law although the new personal status law will cover this subject. As Bahrain attracts a large number of foreign workers and as their families often join them, family living standards have been affected and more pressure has been put on government services. A child's right to familial care (Article 9 of the CRC) seems, therefore, to be compromised although a child's right to be with his/her family (Article 10 of the CRC) is not.

Freedoms: Articles 18 and 27 of the constitution guarantee a child's right to freedom of expression, access to information and freedom to participate (Article 15 of the CRC). Religious freedoms are guaranteed in Bahrain.

Protection: Law Number 17 issued in 1976 as well as Law Number 22 issued in 2000 guarantee a child's right to protection (Articles 19-22 of the CRC). Law Number 15 issued in 1976 (the Penal Law) governs the physical and sexual abuse of children (Article 34 of the CRC) and children who commit crimes (Article 37 of the CRC). However, the law is not really sufficient in that it does not treat the physical and sexual abuse of children as a separate serious social issue. It looks at it from a criminal point of view only or as one caused by an illness. Abuse is not fully reported even though articles 230 and 231 of the law require people to report cases of abuse. This is probably due to fear of being accused of lying although the law protects informers if the information is proved to be incorrect. It is also probably due to people adhering to article 369 of the law, which prohibits any professional disclosures. However, Article 26 of Law Number 7 issued in 1998 allows doctors and dentists to disclose personal information on their patients in criminal cases. These gaps in the law need to be addressed and the law needs to be amended to ensure that the medical profession can and must report suspected cases of abuse. The issue of decriminalizing sexual abuse if the abuser marries the victim also needs to be addressed. The fact that the law lessens the punishment for sexual abusers if the victim is over 16 means that the law does not fully comply with Article 2 of the CRC. This issue also needs to be addressed.

Child Labor: Law Number 14 issued in 1993 (the Labor Law) governs Child Labor Rights (Article 32 of the CRC). It prohibits the employment of all children under 14 (male or female) and sets out rules and regulations for employing children older than 14. A permit needs to be obtained and a health exam carried out before employment starts and regularly during employment. Employment cannot be in any industry. It also must not be dangerous or harmful to the health. It is prohibited at night and cannot include overtime or more than 6 hours a day. One month's holiday a year must be granted. 5.5% of working 5-15 year olds are paid. 0.5% of those who work for non-family members are unpaid. 39% of children spend less than 4 hours a day on housework while 0.2% of them spend more than 4 hours a day on housework. The 2001 Human Development Report for Bahrain estimates that there are 3,000 children working in Bahrain. The numbers increase during holidays and include car-washing, cleaning fish, selling flowers and sweets at crossroads and carrying bags at supermarkets. The Baqer/Shukri study shows that 64.4% of children working in Bahrain are aged 10-14; 29.66% are aged 15-18 and 5.9% are aged 5-9. 73.3% of these children belong to families with up to 8 members. Most are poor rural families who have no income or have no work or both. Children work because their father does not have enough income to cover the costs of the family's food, clothes and school expenses. 50% of children surveyed come from families with a monthly income of less than 150 Dinars.

Armed Conflict: In line with Article 38 of the CRC, Law Number 23 issued in 1979 (the Military Service Law) prohibits anybody under 17 from becoming a soldier unless he is an officer in which case he needs to be at least 15 years old. There is no compulsory military service in Bahrain.

Juvenile Delinquents: Law Number 17 issued in 1976 governs young delinquents. The government offers two types of services for the care of young delinquents: institutional care for those under 15 run by the Ministry of Interior (and not the Ministry of Labor and Social Affairs) and non-institutional care run by the Delinquents' Department in the Women's Police Force in the Ministry of Interior in co-operation with the Ministry of Labor and Social Affairs. Delinquents over the age of 15 are not treated as children. This needs to change.

Conclusion:

The following needs to be done to improve a child's right to life and health in Bahrain:

- Increase the numbers of child and maternal care staff
- Have a clear set of statistics on which to base child and maternal care programs
- Review laws governing the health and development of a child in his/her early years (e.g. pre-wedding tests, women's rights in the civil status law, child protection laws)
- Increase health workers' knowledge of child and maternal care issues and laws
- Ensure that there are enough rooms for breastfeeding in health centers, hospitals and the workplace and educate women about the importance of breastfeeding and how it should be done
- Encourage the establishment of crèches so that breastfeeding can continue even after a woman returns to work
- Encourage women to breastfeed for more than 4 months (for a year if possible)
- Increase the Ministry of Health's budget for primary healthcare.

The following needs to be done to improve a child's right to develop his/her abilities:

- Increase government support for needy families
- Educate people about the negative aspects of having foreign maids and train Bahrainis on how to take care of children so that they can replace these maids
- Extend maternity (including delivery) leave and breastfeeding breaks
- Establish a teacher training strategy (pre-service and during service)
- Establish why male students are weak in Arabic
- Include Kindergartens in the compulsory school system and ensure it is free for all
- Establish a clear strategy for children's media
- Establish a clear strategy for using TV as a children's media outlet
- Supply promotional materials aimed at children and teenagers
- Establish an information data base for children and carry out scientific and field studies related to children's media
- Regularly evaluate children's programs including their effect on children
- Form a cadre capable of supervising children's programs and ensuring that they are free of any detrimental material
- Aim specific programs at teenagers
- Allocate part of the Ministry of Information's budget specifically to children's programs
- Establish a special unit to work on children's program, train the unit's workers in the field of children's media and encourage them with bonuses and rewards
- Ensure that children participate in the whole process
- Establish attractive children websites on the Internet.

The following needs to be done to improve a child's civil rights and his/her right to protection:

- Finalize all laws so that they comply with all CRC articles

- Give a legal definition to child abuse and neglect and clarify what should be done in cases where abuse is suspected including stating who should be informed in such cases
- Make it obligatory to inform the authorities of cases of abuse and/or cases of suspected abuse
- Provide protection for people who inform the authorities about such cases
- Establish a register of cases of abuse
- Provide enough resources both financial and human so that the aims of the National Committee on Childhood can be achieved
- Include 16-18 year olds in all laws related to juvenile delinquents
- Cancel the article which decriminalizes sexual abuse in cases where the abuser marries the victim
- Strengthen articles 324 and 325 to ensure that anybody who encourages a juvenile to commit a crime faces punishment
- Review articles 344 and 355 regarding the death penalty or life in prison for anybody who has sex with a female under 16 without her consent
- Review articles 346 and 347 regarding sex with boys under 16
- Form a proper committee which includes child experts to defend a juvenile if he/she commits a crime
- Differentiate between juveniles who have actually committed a crime and those who might and separate them in the institutions in which they are placed
- Review the issue of runaways and dropouts or those who drive without a license
- Ensure that the law allows for the rehabilitation of delinquents
- Review the labor law so that a child is properly defined in it as anybody under 18
- Allow women to give their children Bahraini nationality regardless of who they marry
- Speed up the finalization of the civil status law to cover children who have lost one or both of their parents and children who have lost a parent as a result of government intervention
- Encourage religious leaders to educate people and clarify the issue of children who have lost one or both of their parents
- Use the media to educate people about children who have lost one or both of their parents
- Train social workers and raise their professional standards
- Use religious guidance to encourage families to foster boys
- Investigate the possibility of fostering
- Carry out a study to verify the benefits of social programs
- Facilitate appropriate training for children of needy families to enable them to work
- Take preventative measure against those who sexually or physically abuse children.