



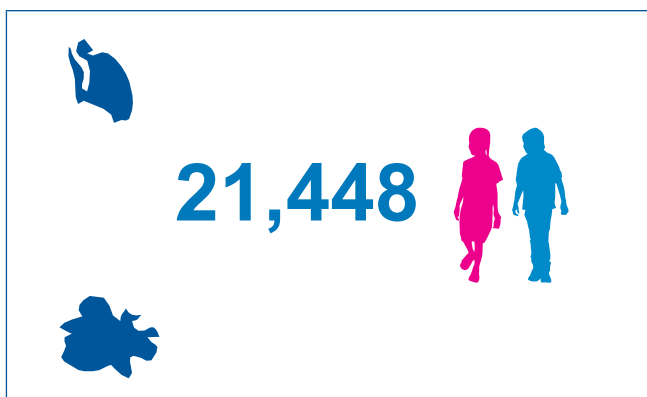
Generation Unlimited: the Well-being of Young People in Antigua and Barbuda

FACT SHEET

July 2021

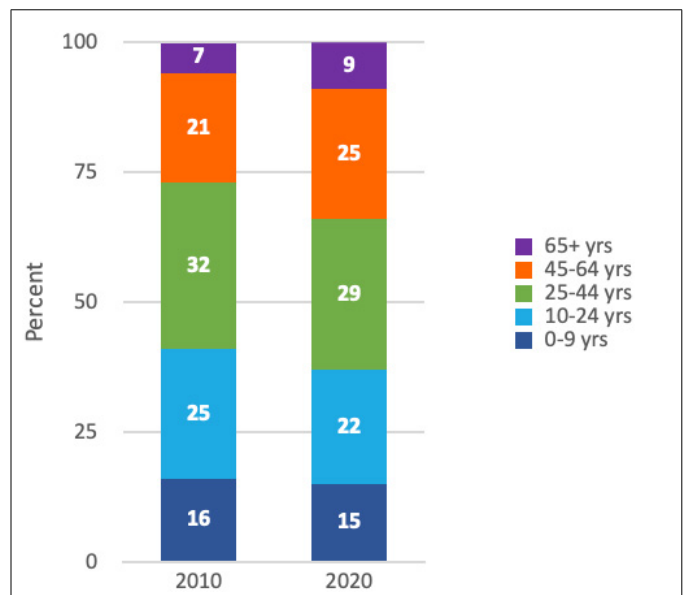
The age from 10-24 is an important transitional period in the life cycle of young people: from dependence to independence; from childhood to adulthood; from primary to secondary school and onto tertiary education and/or the labour market; and from pre-pubescence to sexual maturity. Few young people are likely to pass through this period without some reversals or feelings of uncertainty, such as: not doing well at school; examination failures; parental discord; problems with friends and partners; and/or difficulties in finding their first job. In most cases, these experiences will be transitory and have little influence on their future lives. But for others, these experiences can be more severe and have long-lasting impacts on one's well-being, on that of their families and, if widespread, on national, social and economic development. In 2020 and 2021, the COVID-19 global pandemic and its economic and social impacts have disrupted nearly all aspects of life for all groups in society, but young people, and especially for vulnerable youth, the COVID-19 crisis poses considerable risks to their education, employment, mental health and disposable income. While young people will shoulder much of the long-term economic and social consequences of the crisis, their well-being may be superseded by short-term economic and equity considerations.

Young People in Antigua and Barbuda



In 2020, according to UN population projections, there were around 21,448 young people (10-24 years) in Antigua and Barbuda; about 343 (2%) fewer than in 2010. Young people accounted for about 22% of the population. This proportion is likely to decrease in the future as the population continues to age and fertility remains constant or declines.

Population distribution by age groups



Source: Economic Commission for Latin American and the Caribbean (ECLAC).

EVERY YOUNG PERSON HAS A FAIR CHANCE IN LIFE

Ending poverty – or its dramatic reduction – is an overarching objective of the Sustainable Development Goals (SDGs). Adolescence and young adulthood are times when growing up in poverty can hamper educational performance, increase the risk of unemployment and lead to risky behaviours, such as substance abuse, involvement in gangs and other criminal activities. These can have a detrimental impact on the physical, emotional and social development of young people, threatening their life chances and risking the creation of inter-generational poverty.

Poverty and Young People

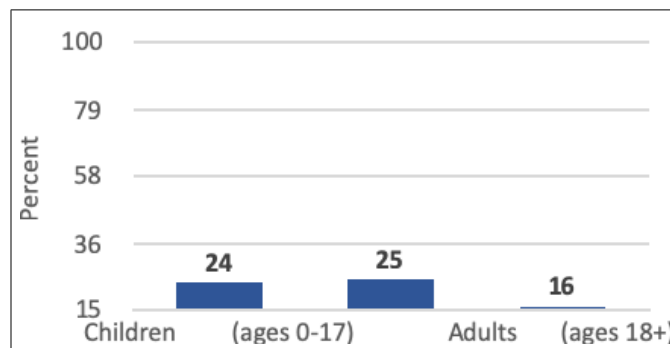
Poverty is at the heart of a considerable amount of vulnerability, social discrimination and exclusion: Households with inadequate income are more vulnerable to changing economic, social and environmental circumstances and to reduced income-earning potential. People in poverty also tend to live in inadequate and unsanitary housing in less desirable neighbourhoods, which are especially vulnerable to weather-related damage. They are also more prone to live in communities with high rates of crime and violence, which can be unsafe environments for adolescents and young people. Poverty is a problem in the ECA even though countries and territories have reached a level of development that should allow a significant proportion of people living in poverty to escape poverty.

In 2016, 18% of people in Antigua and Barbuda lived in poverty and 5% were indigent. Antigua and Barbuda's poverty rate is lower than the average of 23% for the Eastern Caribbean.

More specifically, 24% of children ages 0-17 and 25% of adolescents ages 10-19 were living in poverty, which is higher than the poverty rate for adults age 18+ years (16%). The poverty rate for young people ages 10-24 is not available because

it has yet to be calculated. Antigua and Barbuda's child and adolescent poverty rates are lower than the averages for the Eastern Caribbean (33% and 34% respectively).

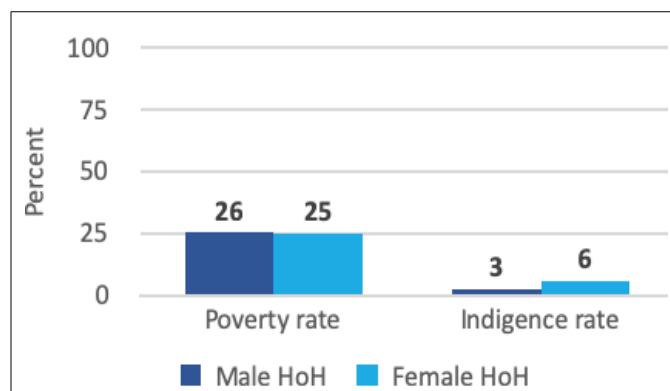
Poverty and indigence rates by age group



Source: UNICEF (2020). *Generation Unlimited: The Well-being of Young People in Barbados*. UNICEF Office for the ECA: Christ Church, Barbados

Adolescents ages 10-19 living in female-headed households were nearly equally likely to live in poverty as adolescents living in male-headed households. However, adolescents living in female-headed households (6%) were twice as likely to be indigent, compared to adolescents living in male headed- households (3%).

Adolescent poverty and indigence rate by sex of HoH

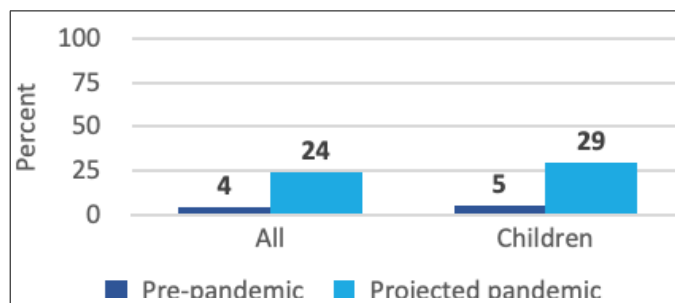


Sources: OECS Commission/UNICEF (2017). *Child Poverty in the Eastern Caribbean Area, Final Report*. OECS Commission/UNICEF: Castries, Saint Lucia

With the onset of the COVID-19 pandemic, it has been projected that severe poverty rates will increase in the ECA, impacting the societies at-large, but children in particular. As a result of the pandemic,

the severe poverty rate in Antigua and Barbuda is projected to increase nearly sixfold to 24% for all persons and to 29% for children.

Projected changes in severe poverty due to COVID-19

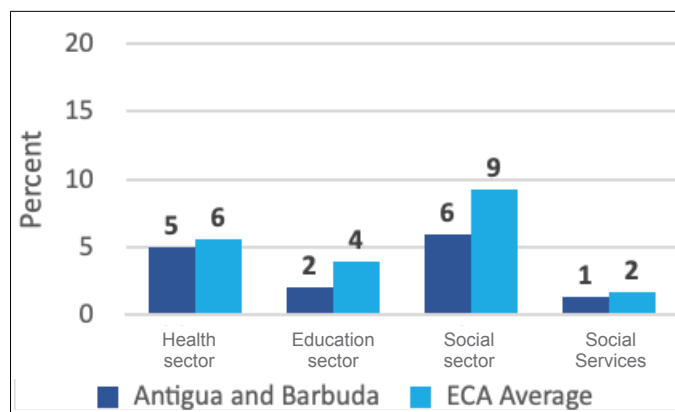


Source: USAID/UNICEF (2020). *The socio-economic impact of COVID-19 on children and young people in the ECA*. UNICEF Office for the ECA: Christ Church, Barbados, p. 13.

Public Finance for Children and Young People

Public financing varies across sectors – health, education, social protection and social services – that are particularly important to children and young people. Mobilising national resources for children and young people in Antigua and Barbuda is critical to ensuring a sustainable and equitable impact on their lives.

Public expenditures (% of GDP) allocated to sector (%)



Source: Nabinger, S. (2017). *Review of Social Sector Expenditures in the Eastern Caribbean Area*. UNICEF Office for the ECA: Christ Church, Barbados

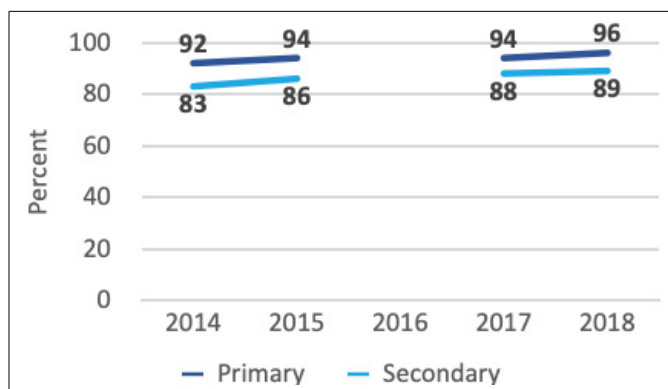
EVERY YOUNG PERSON LEARNS

Access to quality education is crucial if young people are to acquire the knowledge and skills to function in and contribute to society. Experiences at school have far-reaching effects on their development and well-being, encompassing physical and mental health, safety, civic engagement and social development. Education in various forms is a vital prerequisite for combating poverty, empowering young people, protecting them from hazardous and exploitative practices, promoting human rights and democracy and protecting the environment.

Primary and Secondary School Enrolment

In 2018, the primary school enrolment rate approached 100%; the proportion of over-age students in primary schools was 4%. In addition, the secondary school enrolment rate was 89%; the secondary school enrolment rate was slightly higher for girls (907%) than boys (88%). Net enrolment rate data were not available for 2016. In 2018-2019, 1% of adolescents were out-of-school at the lower secondary level, and 14% of boys and 17% of girls were out-of-school at the upper secondary level.

Primary and secondary net enrolment rates



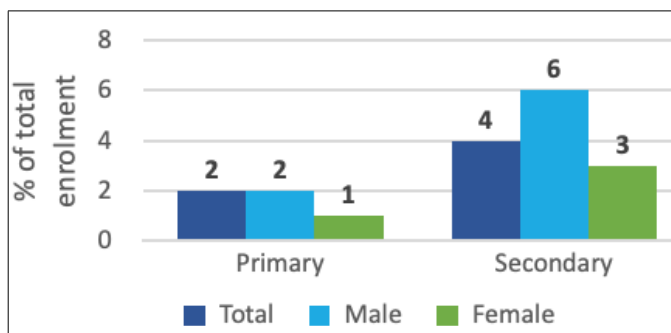
Source: UNESCO Institute for Statistics.

Primary and Secondary Grade Repetition

Grade repetition rates¹ represent the proportion of pupils who remain in the same grade in the following school year. Repeating a grade reflects the internal efficiency of educational systems. Repetition is one of the key indicators for analysing and projecting pupil flows from grade-to-grade within educational systems. Ideally, repetition rates should approach zero percent. High repetition rates reveal problems in the internal efficiency of the educational system and possible reflect a poor level of instruction.

In Antigua and Barbuda, the repetition rate was 2% for primary education and 4% for secondary education. Males were twice as likely to repeat primary grades (2%) and secondary grades (6%), compared to females (1% and 3% respectively).

Grade repetition rate by gender, 2017-2018



Source: OECS (2020). *Education Statistical Digest for the Academic Year 2018-2019*. OECS: Castries, Saint Lucia

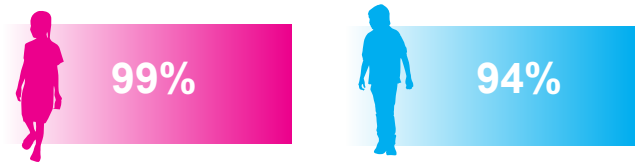
Primary and Secondary Completion Rates

In 2019, the primary education completion rate was 96% (99% for girls and 94% for boys). The lower secondary education completion rate was slightly higher at 99% (102% for girls and 95% for boys).

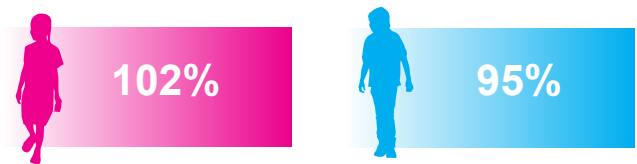
¹ Repetition rate is the number of repeaters in a given grade in a given school year, expressed as a percentage of enrolment in that grade the previous year.

School completion rates - 2016

Primary - 96%



Secondary - 99%



Skills and Learning Outcomes

At primary and secondary levels of education, children and adolescents develop foundational and transferable skills, including digital skills needed to enable them to become lifelong learners, and to access future educational and work opportunities.

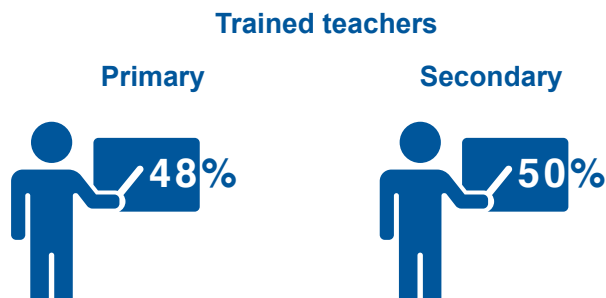
In 2018-2019, the proportion of students passing five or more CSEC subjects, including English A and Mathematics was 27%. Females (29%) had a slightly higher passing rate than males (26%). This is slightly lower than average passing rate of 28% among OECS Member States.

On average, among OECS Members States, 95 percent of students attained Grades I, II, III and CSEC Information Technology. Rates of attainment were similarly in Antigua and Barbuda (95%).

Trained Teachers

A trained teacher is one who has received at least the minimum organised pedagogical teacher training pre-service and in-service required for teaching at the relevant level in Suriname. Training of teachers can have a great impact on student learning outcome; yet this only happens when the teachers apply new knowledge and skills in their classroom.

In Antigua and Barbuda, in 2018-2019, the proportion of trained teachers was 48% at the primary education level and 50% at the secondary education level. This is far less than the average for OECS Member States (72% and 60% respectively) and the Eastern Caribbean Area (70% and 61% respectively).



Tertiary Education

Access to tertiary education for youth is crucial to learning outcomes and skills development, human development of a population and poverty reduction in a country. Summary data on transition rates and net enrolment rates, as well as numbers of youth in tertiary education are limited. In 2012, the gross enrolment rate for tertiary education was 25% in Antigua and Barbuda; lower than the ECA average (44%), yet slightly higher than the average for Caribbean Small States (23%).

EVERY YOUNG PERSON PARTICIPATES

For young people, the path to a successful future goes through quality education that equips them – and empowers them – with the skills they need to thrive into today’s work force. This transition is not always so straight forward, especially when young people are unable to find suitable jobs. This can have a negative impact on their self-esteem, mental health and well-being, contribute to engagement in anti-social or risk behaviours, and can be a financial strain on the household and affect their relationship with family members.

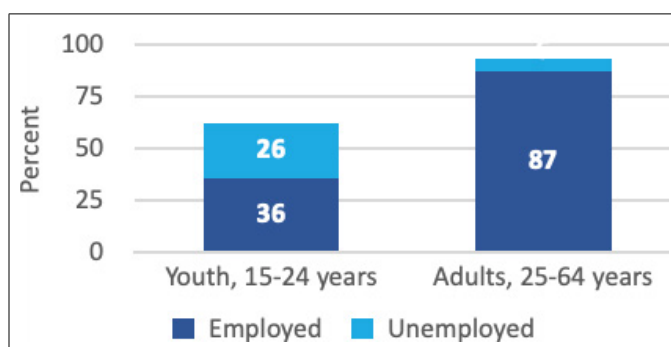


Youth Employment and Unemployment

In the OECS subregion, the total youth population (ages 15-24) is estimated at 103,000, of which 34% were employed in the labour force and 26% were unemployed prior to the COVID-19 pandemic; in comparison, 85% of adults ages 25-64 were employed and 9% were unemployed prior to the pandemic.

In Antigua and Barbuda, 36% of youth were employed in the labour force, compared to 87% of adults; whereas as 26% of youth were unemployed, compared to only 6% of adults.

Labour force participation by age groups

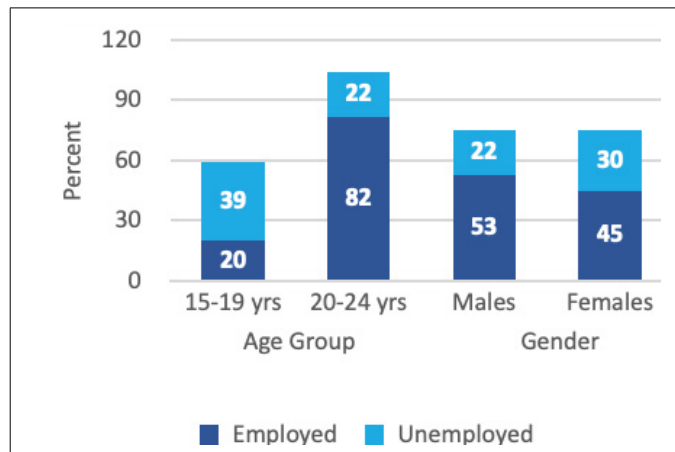


Source: OECS/UNICEF/ILO (2020). *Youth Unemployment in Barbados and the OECS Area: A Statistical Compendium*. OECS Commission: Castries, Saint Lucia

Youth ages 20-24 (82%) were four times more likely to be employed than youth aged 15-19 (20%); whereas, youth ages 15-19 (39%) were more likely to be unemployed, compared to youth aged 20-24 (22%). In terms of gender, male youth (53%) were

more likely to participate in the labour force than female youth (45%); whereas female youth (30%) were more likely to be unemployed than male youth (22%).

Youth labour for participation by age and gender



Source: OECS/UNICEF/ILO (2020). *Youth Unemployment in Barbados and the OECS Area: A Statistical Compendium*. OECS Commission: Castries, Saint Lucia

Youth Not in Employment, Education or Training (NEET)

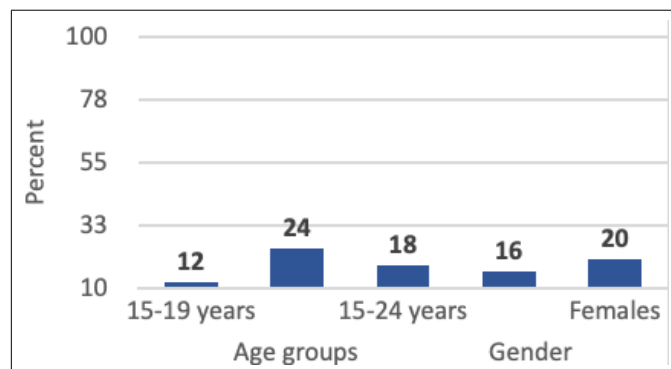
The NEET indicator is the percentage of youth population that are neither working, nor in education or training. It includes those youth who are unemployed and those who are inactive for other reasons. This indicator is the result of a recognition that unemployment is strictly defined as those who are not in employment and are actively seeking work and are available for work. As a consequence, this definition excludes a potentially significant proportion of the youth population who are not working, but are not actively seeking employment for a variety of reasons.

Youth NEETs are likely at-risk from the adverse impacts of unemployment, including marginalisation, exclusion and engagement in anti-social behaviours. The need to incorporate this group of youth into the analysis of youth issues led to the NEET indicator becoming the sole youth-specific target for post-2015 SDGs.

In Antigua and Barbuda, 46% of youth ages 15-24 are in education, 36% are employed and 18% are

NEETs. Youth NEETs are twice as likely be aged 20-24 (24%) than 15-19 years (12%); they are also more likely to be female (20%) than male (16%).

Youth NEET rate by age groups and gender



Source: OECS/UNICEF/ILO (2020). *Youth Unemployment in Barbados and the OECS Area: A Statistical Compendium*. OECS Commission: Castries, Saint Lucia

It has been projected that the youth unemployment rate can be expected to double due to the COVID-19 pandemic. Given the majority of unemployed youth live with their families, this can only further exacerbate the financial situations of families/households and increase the risks of volatile family situations. Further analysis is needed to understand the short- and long-term impacts of COVID-19 on youth unemployment and labour force participation.

EVERY YOUNG PERSON THRIVES

The rights of adolescents and youth to survive, grow and develop are enshrined in international conventions, including the CRC. In keeping states are obliged to recognise the special health and development needs and rights of young people, including adolescents and youth. Young people will thrive when they continue to eat well, are stimulated and cared for at home and in their communities, and enjoy access to quality education that gives them opportunities to learn and grow into adulthood.

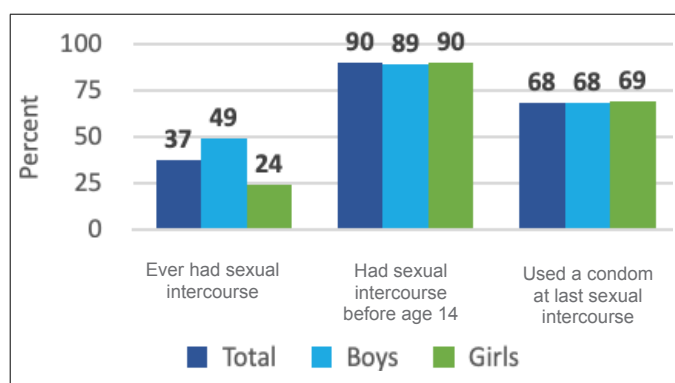
Sexual Behaviours

Data on the sexual behaviours of adolescents in Antigua and Barbuda are limited to adolescent

ages 13-15 and three indicators – ever had sexual intercourse, had sexual intercourse before the age of 14, and condom use during the last act of sexual intercourse.

Among adolescents ages 13-15, 37% ever had sexual intercourse; boys (49%) were twice as likely as girls (24%) to have had sexual intercourse. Among adolescents who ever had sexual intercourse, 90% did so before 14 years of age and 68% used a condom at last sexual intercourse. Boys and girls were equally likely to have sexual intercourse before 14 years of age and to use a condom at the last sexual intercourse.

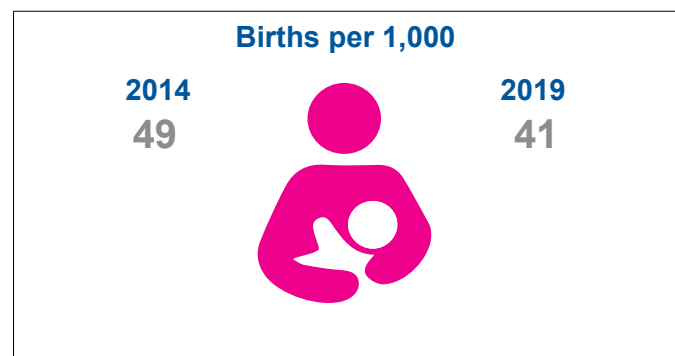
Sexual behaviours among adolescents ages 13-15



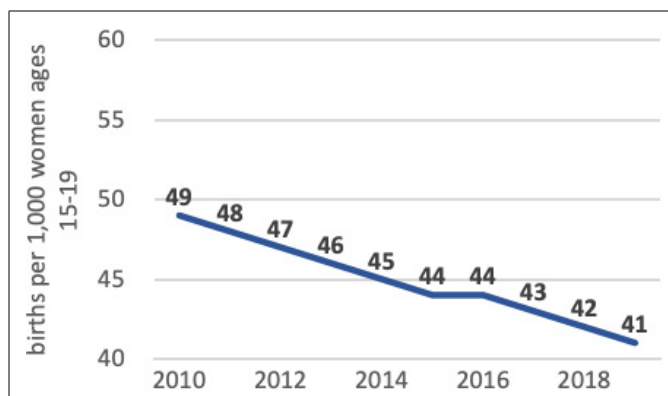
Source: Antigua and Barbuda GSHS, 2009

Teenage Pregnancy and Childbirth

There has been a steady, but small decrease in the adolescent fertility rate in Antigua and Barbuda from 49 per 1,000 births in 2010 to 41 per 1,000 births among women ages 15-19 in 2019.



Adolescent fertility rate



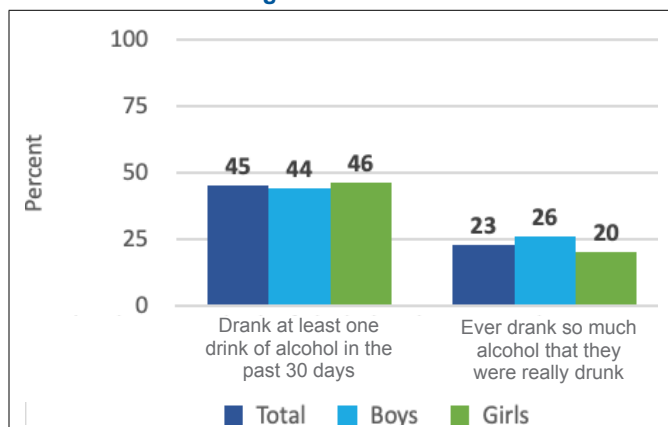
Source: United Nations Population Division, World Population Prospects.

Alcohol and Tobacco Use

Alcohol and tobacco use typically have their onset in adolescence and young adulthood, and are major risk factors for adverse health and social outcomes, as well as for non-communicable diseases later in life. During adolescence and young adulthood, young people are less able to anticipate the negative effects of alcohol and tobacco use on their health and well-being, including risks of abusing such substance and developing addictions.

In Antigua and Barbuda, 45% of adolescents ages 13-15 drank at least one drink of alcohol in the past 30 days, and 23% ever drank so much alcohol that they were really drunk. Boys (26%) were more likely than girls (20%) to ever drink so much alcohol that they were really drunk.

Adolescents ages 13-15 who drank alcohol

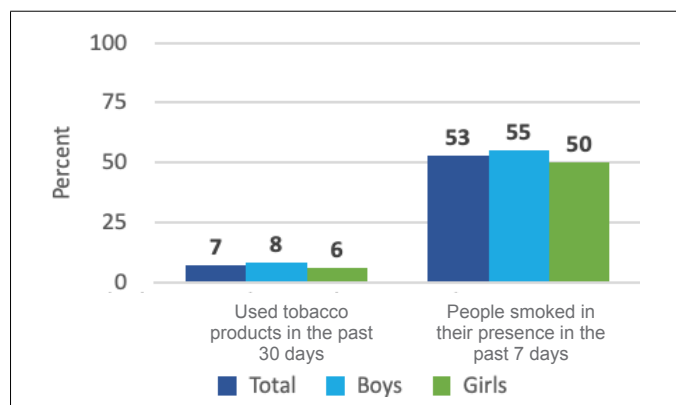


Source: Antigua and Barbuda GSHS, 2009

Tobacco use is the leading cause of preventable disease and death, and nearly all tobacco use begins during adolescents and young adulthood. Adolescents and youth who use tobacco products are at higher risk for developing nicotine dependence and might be more likely to continue using tobacco into adulthood.

Although 53% of adolescents had people smoke in their presence during the past 7 days, only 7% used any tobacco product in the past 30 days.

Adolescents ages 13-15 who used tobacco products



Source: Antigua and Barbuda GSHS, 2009

Nutrition

Adolescence is the period of development that begins at puberty and ends in early adulthood, and is characterised by a rapid pace of growth that is second only to that of infancy. Rapid physical growth during adolescence creates a high demand for energy and certain nutrients. Nutrition is a critical factor for appropriate adolescent development and an important element for prevention of disease development, especially for chronic disease. Over the past decade, nutrition has been identified as a major global priority, and the increase in worldwide overweight and obesity has been highlighted.

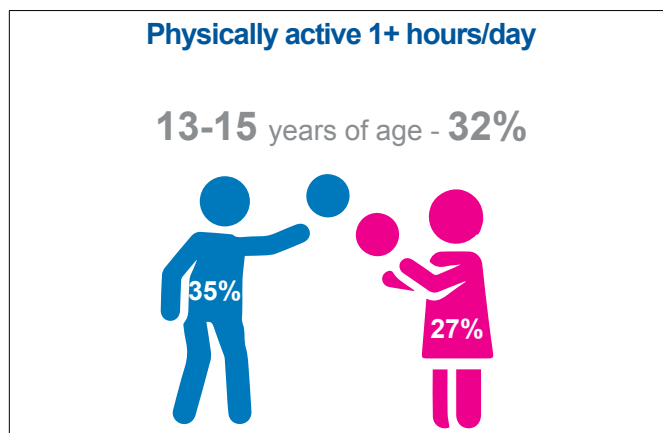
Data on the proportion of adolescents who are underweight (≤ 2 SD from median for BMI), overweight ($>+1$ SD from median for BMI by age and sex) and obese ($>+2$ SD from median for BMI by age and sex) are not available.

It is notable that 59% of adolescents ages 13-15 reported they drink carbonated soft drink one or more times per day. The consumption of soft drinks with high sugar content and acidity can have harmful effects on oral and general health (e.g., diabetes, high blood pressure and other non-communicable diseases).

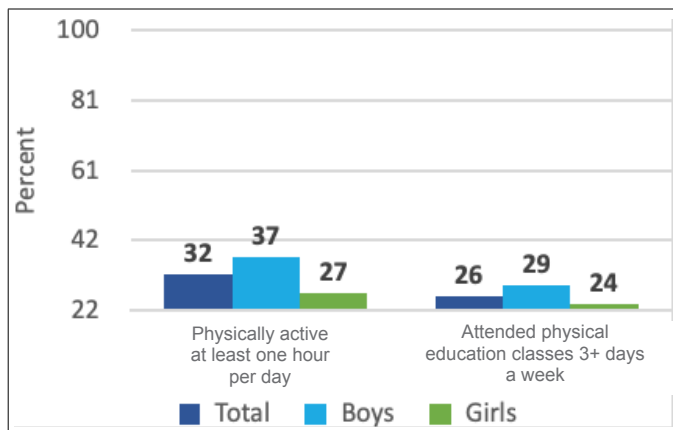
Physical Activity

Regular physical activity in adolescence promotes health and fitness; thus, it is important to provide young people with opportunities and encouragement to participate in physical activities that are appropriate for their age and are enjoyable. Adolescents should engage in at least one hour or more of moderate to vigorous aerobic physical activity each day, and muscle and bone-strengthening physical activity at least three days a week.

In Antigua and Barbuda, 32% of adolescents ages 13-15 were physically active at least one hour per day; boys (37%) were more physically active than girls (27%). In addition, 26% of adolescents attended physical education classes three or more days a week.



Physical activity among adolescents ages 13-15

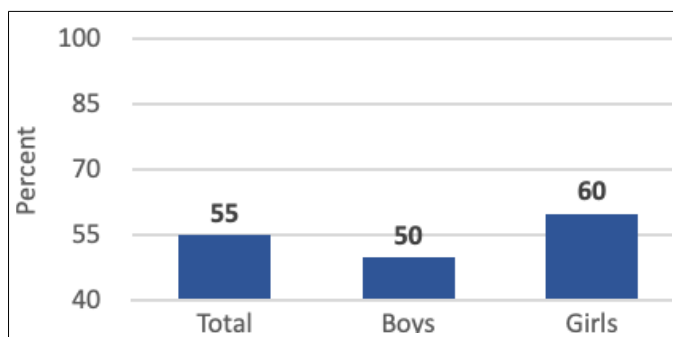


Source: Antigua and Barbuda GSHS, 2009

At the same time, 55% of adolescents ages 13-15 were physically inactive, i.e., spend three or more hours per day sitting and watching television, playing computer games or talking with friends, when not in school or doing homework during a typical or usual day. Girls (60%) were more likely than boys (50%) to spend three or more hours per day sitting.



Adolescents ages 13-15 who spent 3+ hrs per day sitting



Source: Antigua and Barbuda GSHS, 2009

Mental Health

Most adolescents have good mental health, however, physical, emotional and social changes that occur during adolescence, coupled with exposure to poverty, physical and/or sexual violence, harsh parenting, and peer bullying can make adolescents vulnerable to mental health problems. Other risk factors that contribute to stress during adolescence include the quality of one's home life, relationships with peers, pressure to conform to peers, exploration of sexual and/or gender identity, and negative impacts of social media. Some adolescents are at greater risk of experiencing mental health problems because they experience stigmatisation, discrimination and exclusion, and lack access to quality support and mental health services.

Recent studies have identified mental health problems, particularly depression, as the largest cause of mental health problems among young people. Other mental health problems often experienced by adolescents include anxiety, eating disorders and psychosis. Poor mental health can have important effects on the wider health and development of adolescents and is associated with several health and social outcomes such as higher alcohol, tobacco and illicit drug use, adolescent pregnancy, school dropout and delinquent behaviours, self-harming behaviours and suicide ideation.

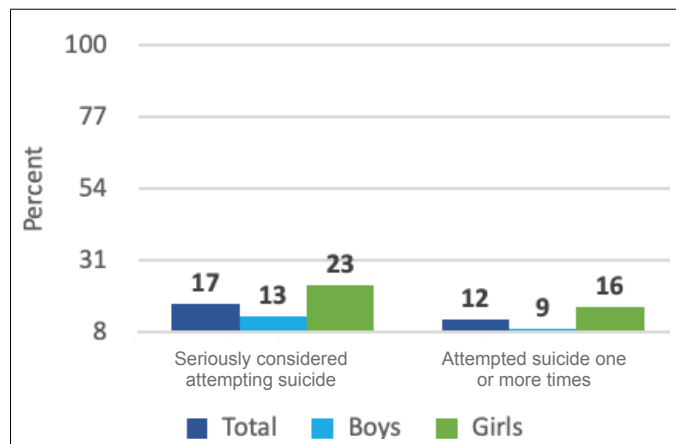
Children with mental disorders often face major challenges with stigma, isolation and discrimination, as well as lack of access to health care and education facilities in violation of their fundamental human rights.

Suicide

Among adolescents ages 13-15, 17% seriously considered attempting suicide and 12% attempted suicide one or more times in the past 12 months. Girls (31%) were twice as likely as boys (16%) to consider attempting suicide, but only slightly more likely to attempt suicide in the past 12 months. Girls were nearly twice as likely to consider attempting

suicide (23%) and to attempt suicide one or more times in the past 12 months (16%), compared to boys (13% and 9% respectively). It is notable that nearly 1 in 4 or 23% of girls ages 13-15 considered attempting suicide.

Adolescents ages 13-15 suicidal tendencies by gender



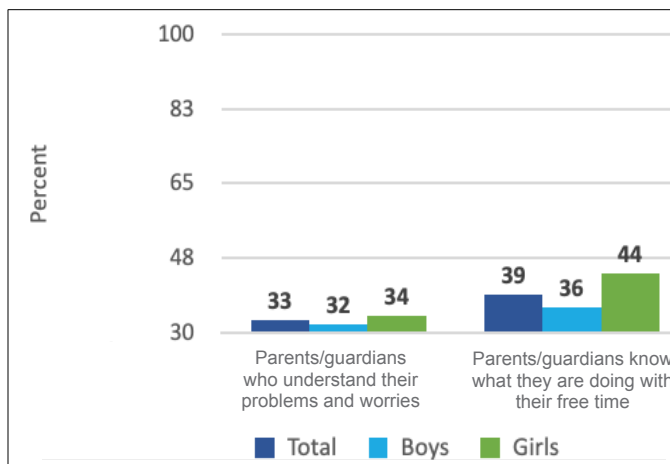
Source: Antigua and Barbuda GSHS, 2009

Well-Being Protective Factors

Parental and peer relationships are very important to adolescent mental health. Teenagers with friendship and close ties to their parents/guardians tend to be more adaptive to stress, report being happier due to an increased feeling of uniqueness, and are likely to do better academically. In addition, they tend to have higher self-esteem and self-confidence and may be more assertive.

In Antigua and Barbuda, only 9% of adolescents ages 13-15 reported they had no close friends; boys (11%) were more likely than girls (6%) to have no close friends. At the same time, only 33% of adolescents had parents/guardians who understood their problems and worries, and 39% had parents/guardians who knew what they are doing with their free time. Girls (44%) were more likely than boys (36%) to report their parents/guardians know what they are doing with their free time.

Adolescent's age 13-17 with involved parents

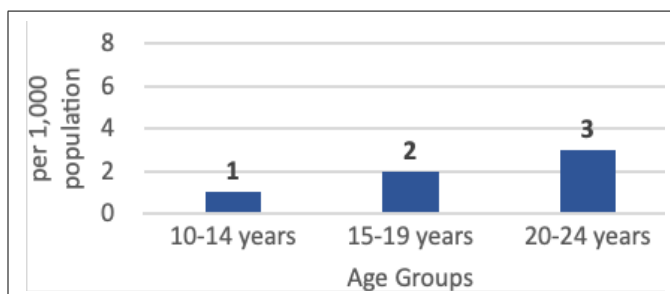


Source: Antigua and Barbuda GSHS, 2009

Mortality of Young People

In Antigua and Barbuda, the probability of young people dying varies by age. The probability of mortality is highest among youth ages 20-24 dying (3 per 1,000 youth) and lowest among adolescent ages 10-14 (1 per 1,000 adolescents).

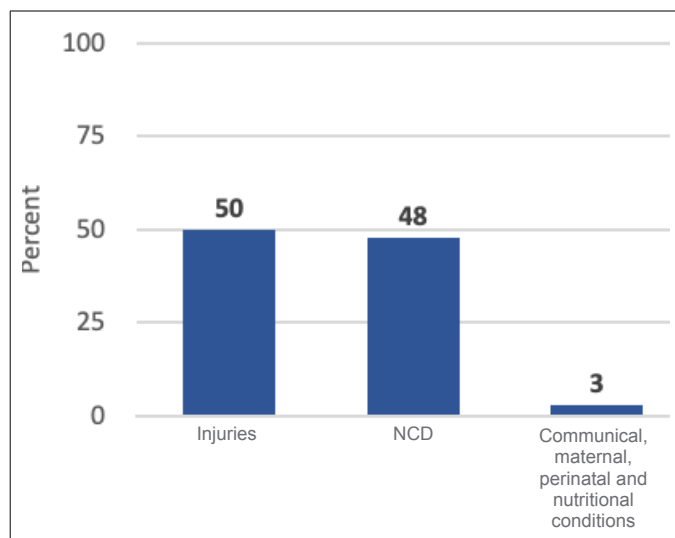
Probability of dying among young people by age group



Source: Estimates developed by the UN Inter-agency Group for child Mortality Estimation (UNICEF, WHO, World Bank, UN DESA Population Division).

The leading causes of death among adolescents ages 10-19 are injuries (50%), noncommunicable diseases (NCDs, 48%), whereas only 3% of deaths were related to communicable, maternal, perinatal and nutritional conditions. The leading causes of mortality varied by gender.

Leading cause of death among adolescents ages 10-19



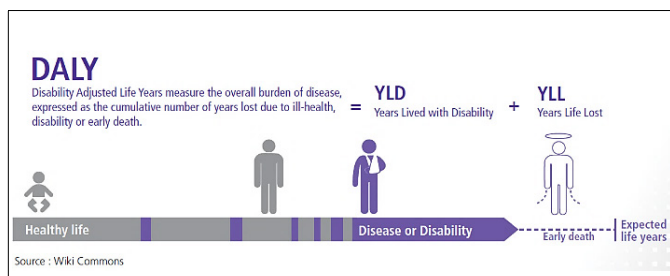
Source: UNICEF Adolescent Health Dashboards

Adolescents ages 10-19 leading causes of mortality	
Boys	Girls
Fire, heat and hot surfaces	Drowning
Hypertensive heart disease	Ischemic heart disease
Exposure to mechanical forces	Stroke
Congenital anomalies	Exposure to mechanical forces
Interpersonal violence	Chagas disease
Poisonings	Maternal conditions
Iodine deficiencies	Corpus uteri cancer
Meningitis	Interpersonal violence
Schistosomiasis	Schistosomiasis
	Sickle cell disorder and traits

Source: UNICEF Adolescent Health Dashboards, 2020

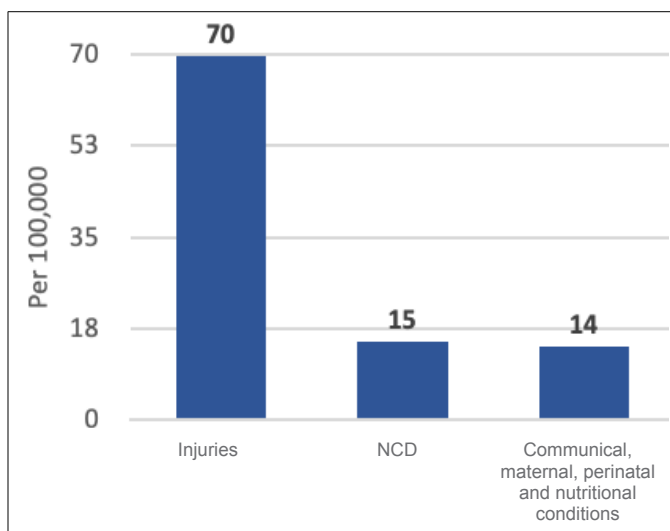
Disability-Adjusted Life Years (DALYs)

The disability-adjusted life year (DALY) is a summary measure of overall disease burden, expressed as the number of years lost due to ill-health, disability or early death. DALYs were developed in the 1990s by the World Bank and World Health Organisation (WHO) as a measure of the global impact of disease on individual illness status, i.e., a way of quantifying the global burden of disease and a way of comparing the overall health and life expectancy across countries. DALY combines information about morbidity and mortality and is expressed in terms of numbers of healthy years lost.



In Antigua and Barbuda, NCD was the main cause of DALY at 70 per 100,000, followed by injuries (15 per 100,000) and communicable, maternal, perinatal and nutritional conditions (14 per 100,000). The leading causes of DALYs varied by gender.

DALY by cause among adolescents 10-19



Source: UNICEF Adolescent Health Dashboards

Leading causes of DALYs, adolescents ages 10-19	
Boys	Girls
<ul style="list-style-type: none"> Child behavioural disorders Hypertensive heart disease Congenital anomalies Exposure to mechanical forces Anxiety disorders Fire, heat and hot substances Depressive disorders Asthma 	<ul style="list-style-type: none"> Drowning Depressive disorders Stroke Ischemic heart disease Anxiety disorders Migraine Exposure to mechanical forces Childhood behavioural disorders

Source: UNICEF Adolescent Health Dashboards, 2020

National Policies/Plans on Child/Adolescent Health

Antigua and Barbuda have adopted some national policies and plans on child and adolescent health, such as those related to NCDs, physical activity and healthy foods, alcohol and tobacco, and mental health.

National policies and plans on child/adolescent health		
Operational, multi-sectoral national NCD policy, strategy or action plan that integrates several NCDs and their risk factors		Green
National adolescent health programme		Grey
Operational policy/strategy/action plan to reduce physical inactivity		Green
National policy to prohibit the selling of unhealthy foods and sweetened beverages in or close to schools		Red
National policy/laws designating an appropriate minimum age for purchase or consumption of alcoholic beverages		Green
National policy/law to prohibit sale of tobacco products to minors		Grey
Plan or strategy for child and/or adolescent mental health		Green
Colour Code	Yes	Green
	No	Red
	Unknown	Grey

Source: UNICEF Adolescent Health Dashboards, 2020

Antigua and Barbuda have some user fee exemptions for adolescents as it relates to accessing health and well-being services, including sexual and reproductive health, mental health and substance abuse services.

User fee exemptions for adolescents using health and well-being services		
Contraceptives		Green
Vaccination for HPV		Green
Testing and treatment of STIs		Green
HIV testing and counselling		Green
Mental health care		Green
Rehab for substance abuse		Yellow
Colour Code	Yes	Green
	Yes, for select groups	Yellow

Source: UNICEF Adolescent Health Dashboards, 2020

Antigua and Barbuda do not have legal age limits for unmarried adolescents to access services without parental/legal consent, including sexual and reproductive health, and mental health services. A good practice is for countries to have no legal age limits for unmarried adolescents to use these services.

No legal age limits for unmarried adolescents to access services		
Contraceptive services (except sterilisation)		Red
HIV testing and counselling		Red
Mental health services		Green
Colour Code	Yes	Green
	No	Red

Source: UNICEF Adolescent Health Dashboards, 2020

Antigua and Barbuda do not have taxation of sugar-sweetened beverages and alcohol.

Taxation of sugar-sweetened beverages and alcohol		
Sugar-sweetened beverages		Red
Beer		Red
Spirits		Red
Wine		Red
Colour Code	Yes	Green
	No	Red

Source: UNICEF Adolescent Health Dashboards, 2020



EVERY YOUNG PERSON IS PROTECTED FROM VIOLENCE AND EXPLOITATION

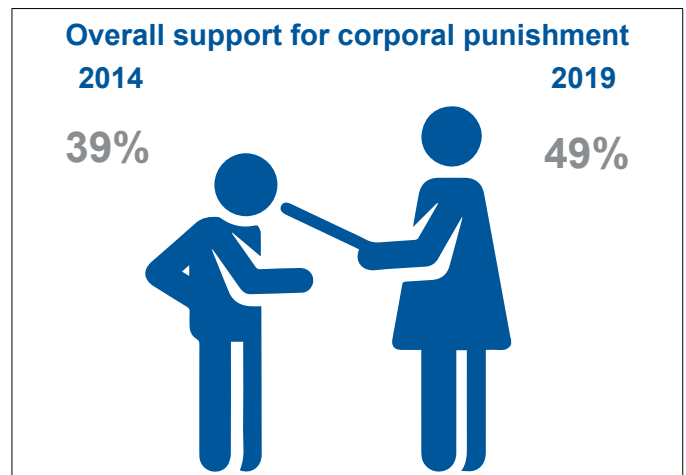
Violence is a pervasive violation of children's rights. Many children and young people are exposed to violence because they grow up in violent households and communities. Violence occurs in many settings, including the home, school, community and over the Internet. As young people pass through adolescence and become young adults, they begin to spend more time outside their homes and interact more intimately with a wider range of people. These interactions are crucial to their development, but can also expose them to new form of violence and exploitation. These threats can have implications for their physical and mental health lasting into adolescence, young adulthood and older age with indirect, but equally potential severe impact on their families, communities and wider society.

Protection of children and young people from all forms of violence and exploitation are fundamentals rights enshrined in the Convention on the Rights of the Child (CRC) and its Optional Protocols, and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). SDGs include specific targets to: end abuse, exploitation, trafficking and all forms of violence and torture against children (SDG 16.2); end all forms of violence against women and girls in public and private spheres, including trafficking and sexual and other types of exploitation (SDG 5.2); and eliminate all harmful practices, such as child, early and forced marriage (SDG 5.3).

Violence against children (VAC), including gender-based violence (GBV), knows no boundaries of culture, socio-economic status, education, income or ethnic origin; however, gender, disability, poverty and national/ethnic origin are some of the risk factors that can place children and young people at increased risk of experiencing violence and exploitation.

Corporal Punishment

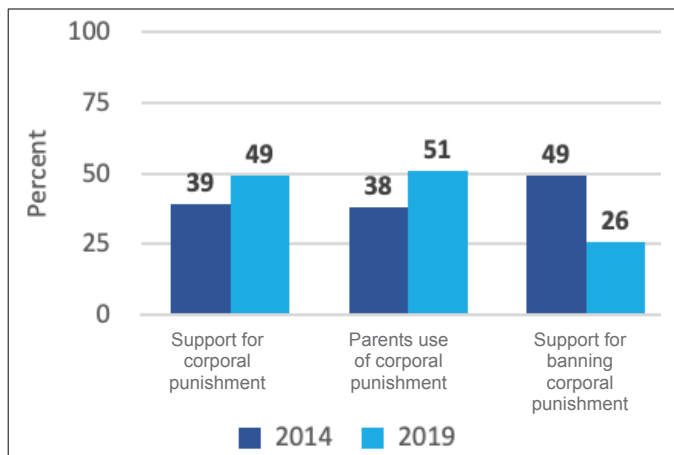
Understanding children's risks of experiencing corporal punishment requires understanding the extent to which such violence is a social norm tolerated in families and communities. In Antigua, support for corporal punishment has increased from 39% in 2014 to 49% in 2019. A large proportion of adults believe that corporal punishment curbs misbehaviour (52%), instils discipline (46%) and encourages obedience (40%). Some adults also believe that corporal punishment establishes authority (19%), encourages children to perform well in school (16%) or allows adults to vent frustration (3%).



In addition to the increase in support for corporal punishment, there has been an increase in parents use of corporal punishment from 38% in 2014 to 51% in 2019. Adults considered it slightly more suitable to use corporal punishment on children 6-11 years (61%) than 12-16 years (55%).

In 2019, only 49% of adults supported banning corporal punishment in schools and 26% supported banning corporal punishment in the home.

Support for corporal punishment in Antigua

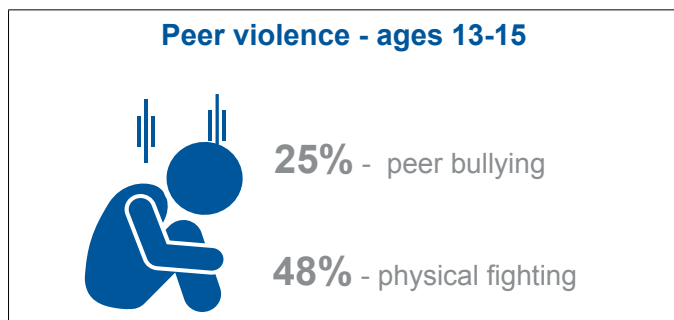


Source: Caribbean Development Research Services, (2019). *Social Survey Report*. UNICEF Office for the ECA: Christ Church, Barbados.

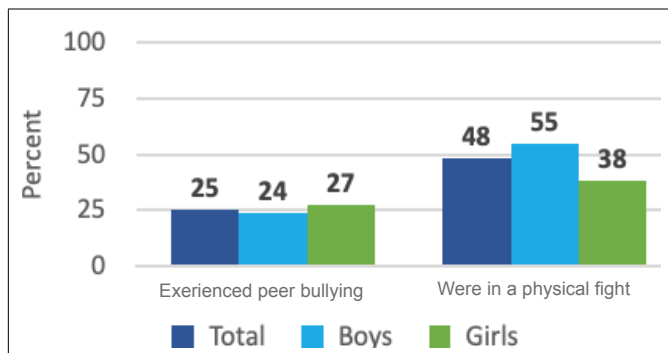
Peer Violence

Once children enter school, friendships and interactions with peers take on an important role in the lives of children and adolescents. These relationships have the potential to contribute to a child’s sense of well-being and social competence, but are also associated with exposure to new forms of violence and victimisation. Peer violence can take many forms, but available data suggests that bullying by peers and/or schoolmates is the most common form of peer violence.

In Antigua and Barbuda, 25% of adolescents ages 13-15 experienced peer bullying, and 48% were in a physical fight one or more times during the past 12 months. Boys (55%) were more likely than girls (38%) be in a physical fight one or more times during the past 12 months.



Adolescents ages 13-15 who experienced peer violence



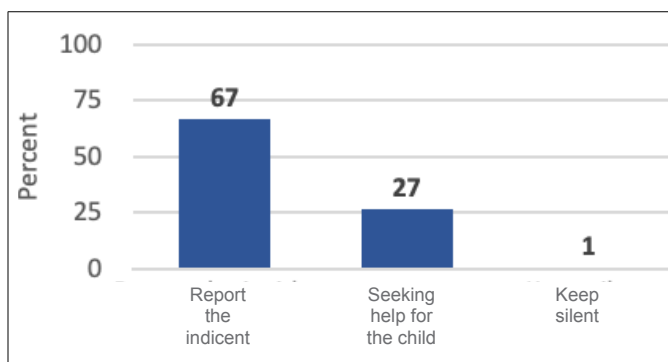
Source: 2011 Barbados GSHS

Child Sexual Abuse

Understanding children’s risks of experiencing child sexual abuse requires understanding the extent to which such violence is a social norm tolerated in families and communities. In Antigua, 44% of adults viewed child sexual abuse as a major problem in the country, whereas 41% viewed it as a minor problem and 3% thought it was not a problem at all. It is notable that nearly 2 in 3 or 64% of adults engaged in victim-blaming and believed the myth that girls invite sexual abuse by the way they dress.

When asked what they would do if they had knowledge of child sexual abuse, 67% of adults would report the incident of child sexual abuse, 27% would seek help for the child and 1% would remain silent.

Reaction of adults to child sexual abuse in Antigua

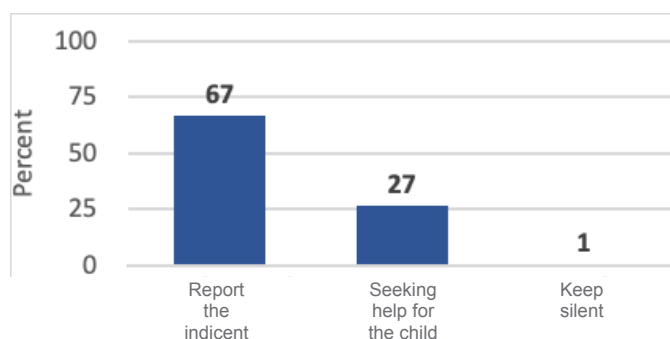


Source: Caribbean Development Research Services, (2019). *Social Survey Report*. UNICEF Office for the ECA: Christ Church, Barbados

Domestic Violence

Understanding children’s risks of experiencing domestic violence requires understanding the extent to which such violence is a social norm tolerated in families and communities. In Antigua, only 47% of adults considered domestic violence a major problem in the country, whereas 39% considered it a minor problem and 3% thought it was not a problem.

Attitudes toward domestic violence in one’s country



Source: Caribbean Development Research Services, (2019). *Social Survey Report*. UNICEF Office for the ECA: Christ Church, Barbados

Child Labour

As a signatory to the CRC and the International Labour Organisation (ILO) Convention on Worst Forms of Child Labour and the Convention on Minimum Age, the Government of Anguilla has made efforts to eradicate child labour. Data related to child labour are not readily available.

Human Trafficking

There is a lack of data and information about trafficking and exploitation of young people in the ECA. In Antigua and Barbuda, documented and undocumented immigrants from the Caribbean region, notably Jamaica, Guyana and Dominican Republic were identified as victims of sex trafficking and forced labour. Authorities reported an increased number of trafficking victims in multiple-destination trafficking, arriving in Antigua and Barbuda for a few months before their traffickers exploited them in other Caribbean countries, such as Saint Kitts and Nevis and Barbados. Sex trafficking occurs in bars,

taverns and brothels, including with minor girls. Forced labour, including of children, also occurs in domestic services and the retail sector, particularly in family-owned businesses.²

Child Protection and Justice for Children

Governments across the Caribbean, including the OECS region, have stepped up efforts to improve responses to child protection, particularly for children who are vulnerable to violence, abuse, neglect and exploitation, and children in conflict with the law. All ECA countries have ratified the CRC, but in several cases, this was not followed by passing the Optional Protocols needed for an efficient child protection environment.

The Government of Antigua and Barbuda has taken steps to translate international normative frameworks into national law by passing and implementing a Domestic Violence Bill, Child Care and Adoption Bill, Child Justice Bill, Status of Children Bill and Child Maintenance Bill. A Guardianship, Custody and Access Bill is in progress of being drafted.

National child protection legislation	
Domestic Violence Bill	Passed, taken effect
Child Care and Adoption Bill	Passed, taken effect
Child Justice Bill	Passed, taken effect
Status of Children Bill	Passed, taken effect
Child Maintenance Bill	Passed, taken effect
Guardianship, Custody & Access Bill	In progress
Colour Code	Passed, taken effect
	In progress

Source: UNICEF (2020). *Situation Analysis of Children in the Eastern Caribbean*. UNICEF Office for the ECA: Christ Church, Barbados.

Antigua and Barbuda have yet to abolish corporal punishment across settings, except a law does exist that abolishes the use of corporal punishment in sentencing. There is also a stated policy or draft law under consideration for abolition of corporal punishment in schools.

2 US Department of State (2020). *Trafficking in Persons Report, 20th Edition*. US Department of State: Washington, DC, USA.

Status of legal abolition of corporal punishment		
Home		Red
Alternative Care		Red
Day Care		Red
Schools		Orange
Penal Institutions		Red
Sentencing		Green
Colour Code	Abolished in laws	Green
	Stated policy, ministerial statement or draft law under consideration for abolition	Orange
	Not abolished	Red

Source: UNICEF (2020). *Situation Analysis of Children in the Eastern Caribbean*. UNICEF Office for the ECA: Christ Church, Barbados.

Child protection and juvenile justice policy development has been generally weak and inconsistent among Eastern Caribbean countries, however, some OECS countries have made progress establishing policies for child protection and juvenile justice.

National child protection policies and practices		
National plan of action on child protection		Red
National plan of action on juvenile justice issues		Red
Child protection system has both preventive and responsive services		Red
Youth/Family Court established		Green
Legal aid for juveniles provided		Red
Colour Code	Passed, taken effect	Green
	Not passed	Red

Sources: Sealy-Burke, J. (2018), *OECS Assessment of Child Protection Services*. OECS Commission: Castries, Saint Lucia; UNICEF (2020). *Situation Analysis of Children in the Eastern Caribbean*. UNICEF Office for the ECA: Christ Church, Barbados.



EVERY YOUNG PERSON LIVES IN A SAFE AND CLEAN ENVIRONMENT

Children need a safe and clean environment to survive, grow and thrive (Article 24, CRC). The availability of safe and clean water, sanitation and hygiene (WASH) services, and the quality of the physical environment in which children, adolescents and youth live, are important determinants of their health and well-being, and learning, safety and ability to take advantage of opportunities to reach their full potential. Inadequate WASH is primarily responsible for the transmission of diseases such as cholera, diarrhoea, dysentery, hepatitis A, typhoid and polio. Diarrheal diseases exacerbate malnutrition and remain a leading global cause of child deaths.

Water, Sanitation and Hygiene (WASH)

Access to safely managed drinking water and sanitation services, and good hygiene practices are considered core socio-economic and health determinants and are key for survival and well-being. Everyone has the human right to safe drinking water. When children and young people do not have access to clean water, it negatively impacts all aspects of their lives, including their health, nutrition and education. In Antigua and Barbuda, 97% of the population has access to basic drinking water from an improved source.

Sanitation is about more than toilets, it is about the coupling of behaviours, facilities and services that provide the hygienic environment that children need to fight diseases and grow up healthy. Adequate sanitation is essential to childhood survival and development. Poor sanitation puts children at risk of childhood diseases and malnutrition that can impact their overall development and learning. In Antigua and Barbuda, 97% of the population have basic sanitation services (i.e., use of improved facilities which are not shared with other households).

Good hygiene is critical for preventing the spread of infectious diseases and helping children to lead long and healthy lives. Good hygiene can help to prevent children from missing school, which results in better learning outcomes. For families, good hygiene means avoiding illness and spending less on health care. In some contexts, good hygiene can also secure a family's social status and help individuals to maintain their self-confidence. Good hygiene, however, is difficult to practice without the right knowledge and skills, adequate community support and the belief that one's own behaviour can make a difference. Data are not available for the proportion of population using a hand-washing facility with soap and water.

Mortality Attributed to Unsafe WASH Services

Inadequate WASH are important risks to health, particularly in low- and middle-income countries. The impact of unsafe WASH on death rates of children under five and mothers in the year after childbirth is important to understand; unfortunately, these data are not available. Data are available, however, as it relates to mortality rate attributed to exposure to unsafe WASH (SDG 3.9.2). Antigua and Barbuda have a very low mortality rate attributed to exposure to unsafe WASH at 0.1 per 100,000 population.

Mortality Attributed to Air Pollution

The drivers of air pollution are closely related to those of climate change. In Antigua and Barbuda, mortality rates attributed to air pollution is 30 per 100,000 population; this is lower than the average for Caribbean Small States (42 per 100,000 population).

CONCLUDING REMARKS

There are a number of areas in which concerted and sustained action are needed to ensure the rights of all young people – both girls and boys – are realised in the Antigua and Barbuda. These general observations are being made with the acknowledgement that a complete equity-based analysis of the situation of young people in Antigua

and Barbuda depends on the availability of data, particularly disaggregated data on different aspects that might influence their lives, including gender, age, nationality and socio-economic status; such data are not always readily available for Antigua and Barbuda. Data that are available are not real-time; in many cases, the data are several years or a decade old. Outdated data makes it difficult to analyse the current situation of young people and changes over time. Another data challenge was the lack of comparable data with other ECA countries and territories.

Although the Government of Antigua and Barbuda and development partners produce some very meaningful and relevant data related to young people, existing data does not capture the full range of issues that allow for an in-depth assessment of the situation of young people related to health, education, employment, poverty, social welfare, child protection and justice, among others. There appears to be little coordination of effort across ministries/agencies and sectors to maximise data collection, and to collect and use data in a harmonised manner on an agreed upon set of indicators relevant to young people.

Limited data hinders opportunities for evidence-based programme and policy planning, and proper monitoring and analysis of the situation of young people, but also impacts the ability to plan and allocate resources to advance the needs and rights of young people. In addition, lack of data limits the ability to analyse whether the situation of young people has improved over time in the areas of poverty reduction, education and employment, protection from violence and exploitation, improved access to health and proper nutrition, and more.

Similarly, sparse historical data limits the ability to do trend comparisons and to analyse whether the situation of young people has improved over time in the areas of poverty reduction, education and employment, protection from violence and exploitation, health and nutrition, and more. Due to the lack of longitudinal data on poverty, education and employment data, it is not possible to analyse

whether the socio-economic situation of young people is better, worse or the same as it was five to ten years ago in Antigua and Barbuda.

As it relates to child protection and justice for children, government agencies responsible for child protection and justice for children do not collect and disseminate real-time data. Data that are collected are not disaggregated by age or focused on adolescents or youth, which does not allow for an in-depth assessment of the situation of violence, abuse and exploitation of young people, including gender-based violence.

Gender is a cross-cutting topic in this situation analysis. In some areas, differences between girls and boys are reported on by the government, especially in education; however, in other areas, gender differences are not reported. For instance, more girls than boys are finishing secondary education, while boys are more likely to repeat grades and to drop out of school which relegates them to accepting low-paying and low-skills jobs, impacting their future earning potential.

There is a need to better assess gender inequalities in Antigua and Barbuda, including as it relates to tertiary education, TVET, and employment, as well as exposure to different types of violence, abuse and exploitation, engagement in offending behaviours, and access to protection and social services, and health care. Data are needed to create evidence-based policies and programmes aimed at promoting the rights of young people as called for by the CRC, CEDAW and SDGs.

STRATEGIC THINKING

The idea behind the SDGs is to create a global movement to advance work on the 2030 Agenda for Sustainable Development; therefore, governments should frame their development plans and policies for the next years based on this globally agreed upon development agenda. To maintain an enabling environment conducive to delivering equitable social and economic growth and effective poverty reduction, certain capacities must be put in place or

strengthened. These include:

- **Mobilising and channelling resources** to the appropriate sectors at the appropriate time for optimal production
- **Enforcing standards and regulations**, specifically operationalising legislation and policies identified and/or in draft form
- **Establishing a mix of social partnerships with key actors**, including local councils, civil society, research institutions, the private sector
- **Improving systems for generating, collating and managing data and information** so that it is easily accessible and shared across different agencies and with partners.

This situation analysis of young people in Antigua and Barbuda revealed there is a real need to strengthen cooperation around the needs and rights of young people. This requires a deep dive³ into how to build better partnerships for smart planning, problem-solving and innovation to accelerate results for young people in the areas of:

- **Education**, with a focus on strengthening the quality of primary and secondary education, which requires improvements to teaching and learning materials, expanded coverage of information and communication technology, and human capital of school personnel.
- **TVET**, with a focus on partnering with the private sector to identify and develop market-driven TVET opportunities for young people.
- **Health and well-being**, with a focus on improving adolescent health, reducing teenage pregnancy and adolescent fertility rates, preventing drug and alcohol abuse, and addressing adolescent mental health to reduce suicide among young people.
- **Social protection**, with a focus on multidimensional child poverty and poverty among adolescents, and the impact of COVID-19 on multidimensional poverty, so that the Eastern Caribbean governments and development partners can more effectively focus on policy efforts to alleviate children's deprivations and achieve sustainable poverty eradication.

³ A deep dive is a more thorough or comprehensive assessment and analysis of a subject or issue.

- **Child protection**, with a focus on strengthening child protection systems and community-based services for child victims of violence, abuse and exploitation, and their families, particularly in countries/territories where child protection systems and services are lacking or few and far between.
- **Climate change**, with a focus on strengthening the capacities of the government to respond to climate change and climate crisis, to bring together specialised expertise to strengthen disaster risk reduction (DRR) to ensure that hazards do not become disasters, and to devote greater attention and resources to shielding children and young people from these risks, and to enhance their resilience. As a cross-cutting priority, particular attention must be paid to addressing the magnified risks faced by the most vulnerable children and young people, and to meeting their specific needs.

As Antigua and Barbuda begins planning for a post-pandemic recovery, it is important that the government seizes on the opportunity to “build back better” by creating a more sustainable, resilient and inclusive society. This requires a more risk informed programming and smart planning, problem-solving and innovation to address challenges facing young people.

Strengthening public-private partnerships should be a key intervention. Developing a strategic business for results (B4R) agenda and framework that engages the private sector is crucial; however, it must be coordinated and done in cooperation with both the private and public sectors, including government partners. B4R and engagement with the private sector must be aligned with public policies and national agendas, including national action plans for the rights of young people.

Assessments and results-based monitoring are needed to better understand how B4R can be implemented in Antigua and Barbuda, and how B4R initiatives that engage the private sector contribute and lead to advancing the rights of young people and accelerating results for young people. This requires understanding how B4R initiatives impact the most vulnerable, including poor and marginalised populations, and contributes to improvements in systems of social protection.

Strengthen Administrative Data on Young People

There are administrative data gaps related to young people; thus, there is a real need for government ministries/agencies and service providers in Antigua and Barbuda to strengthen administrative data collection on young people’s issues. Strengthening administrative data is an important and useful investment in resources.

In recent years, globally, there has been increased interest among governments and development partners to explore ways to strengthen and use existing administrative data to monitor and report on young people’s health, education, employment, poverty, social welfare, protection and access to justice, as well as exposure to violence, exploitation and crime. Administrative data are an important source of information that can often be readily accessed and used to complement prevalence studies on a wide range of subject matter; in particular, young people’s access to education, health care, essential services, protection and justice. Administrative data can also be used to measure progress towards SDG targets and indicators that do not require survey data.

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