Preface

In publishing this report, UNICEF Mexico seeks to offer a broad panorama of the progress made to date and the challenges that lie ahead on the subject of respect and fulfillment of children’s rights in Mexico, based on the country’s international commitments.

Two decades ago, in November 1989, the United Nations General Assembly unanimously approved the Convention on the Rights of the Child. This was the first legally-binding international instrument affirming human rights for all children in all countries and cultures, at all times and without exception. The Convention represents an important milestone in tackling child-related issues by establishing the fundamental principles that all law-makers, politicians and society as a whole must follow: the best interests of the child, freedom from discrimination, the right to survival and development, as well as respect for the views and participation of young people under the age of 18 in all aspects of their lives.

Since the Mexican State’s ratification of the Convention in 1990, progress has been notable: the Government has managed to significantly reduce malnutrition and infant mortality, guarantee primary school education for almost every child and adapt its legal framework to the principles established by the Convention, among other advances.

However, in view of the developmental roadblocks and emerging challenges of a country with the income levels, complexity and heterogeneity of Mexico, it is clear that there is still a long way to go toward overcoming the disparities that persist. It must still provide guarantees for each and every child access to quality education; protection against child labour; eradication of violence; and full equality and freedom from discrimination, just to mention a few. The broad cultural diversity of the country constitutes both wealth and opportunity. At the same time, widespread inequality contributes to a vicious circle of intergenerational poverty and impedes fulfillment of the rights of millions of children.

Mexico boasts solid institutions, as well as substantial capabilities and resources, which enable it to rise to meet these challenges. Since 1954, UNICEF has closely followed national efforts aimed at fully complying with children’s rights and today, more than ever before, reaffirms its commitment to provide continued support to the Government, civil society and all other actors that are mobilizing to realize this objective.

We take this opportunity to sincerely thank each and every one of our partners, allies and counterparts for their unique and valuable contribution to the cause of child and adolescent rights. We recognize that the reflections and analyses contained in this publication form part of the dialogue and collaboration with all of them throughout the history of UNICEF’s cooperation in Mexico. Furthermore, we would like to thank the National Committee on Assessment of Social Development Policy (CONEVAL) for reviewing this document and for the valuable comments it made, as part of its alliance with UNICEF Mexico in 2009 to strengthen the analysis of poverty and assessment of social policy in the light of child and adolescent rights.

*The Rights of Children and Adolescents in Mexico: A Present Day Agenda* is a renewed appeal to put children and adolescents at the heart of legal reform and policy-making. It is an invitation to government institutions and civil society to join forces to build a Mexico that offers optimal conditions for the development of its children and adolescents.

Susana Sottoli
Representative, UNICEF Mexico
Contents

Preface ......................................................................................................................................................... iii

Chapter 1 ...................................................................................................................................................... 9
A country of contrasts ................................................................................................................................ 9
The migration dynamic ................................................................................................................................... 9
Indigenous peoples ....................................................................................................................................... 11
Poverty, inequality and human development ................................................................................................. 13
The economic dynamic .................................................................................................................................. 16
National legal framework and harmonization with international human rights instruments ......................... 19

GRAPHS
Graph 1.1 Percentage and number of people below age 18 living in poverty, (1992-2008) .......................................................... 14

MAPS
Map 1. Number of indigenous language speaking children living in conditions of food poverty, by state (2008) ........................................ 13

PANELS
Panel 1.1 Mexico at the crossroads: natural disasters and climate change ................................................................. 10
Panel 1.2 Indigenous children in Mexico ................................................................................................................. 12
Panel 1.3 The Oportunidades programme: achievements and challenges 12 years on ......................................................... 15
Panel 1.4 Economic impact of the 2009 Influenza A(H1N1) outbreak .................................................................................... 20

TABLES
Table 1.1 Classification of households with indigenous children between the ages of three and 17, 2008 (per cent) ......................... 11
Table 1.2 Children from 0 to 17 years old living in poverty: comparative data, (2005-2008) (per cent) ............................................ 14
Table 1.3 Urban unemployment rates in Mexico, (1990-2008) (per cent) .................................................................................... 17

Chapter 2 .................................................................................................................................................... 23
The right to survival and development ........................................................................................................ 23
Maternal and child health ............................................................................................................................... 23
Infant mortality .................................................................................................................................................. 28
The nutritional status of Mexican children ....................................................................................................... 32
Children and HIV/AIDS ................................................................................................................................ 39

DIAGRAMS
Diagram 2.1 Maternal mortality ratios, Mexico 1990-2007 ......................................................................................... 27
Diagram 2.2 The three delays model describing causes of maternal death ................................................................. 27
Diagram 2.3 How HIV/AIDS can impact the lives of children and families ............................................................... 41
Chapter 3

The right to education

Opportunities to access education and stay in school

Beyond access: quality and equity in education

The right to be respected in school
Chapter 4

The right of children and adolescents to protection in contexts of high vulnerability

Unaccompanied migrant children and adolescents

Child labour

Violence against children and adolescents

Adolescents in conflict with the law
LOS DERECHOS DE LA INFANCIA EN MEXICO: UNA AGENDA PARA EL PRESENTE
© UNICEF Mexico
A country of contrasts

The diversity of Mexico is displayed in its geography, people and culture, and is reflected in the country’s rich and complex history. But Mexico is also a nation of sharp social, political and economic contrasts. With a gross domestic product (GDP) per capita of US $14,367 in 2008, Mexico is considered a medium-high income country. However, the distribution of this wealth shows serious disparities given that the 10 per cent of the population with the lowest incomes obtains only 2 per cent of GDP, whereas the 10 per cent with the highest incomes accounts for 40 per cent of the total wealth generated in the country.

The current socio-demographic profile of Mexico reflects, on the one hand, the impact of urbanization, economic development and social modernization, but on the other, the persistence of conditions of extreme poverty, widespread inequality and marked social exclusion of the poorest members of society, primarily indigenous peoples.

The country’s population is remarkably young. Of the 107.5 million inhabitants of Mexico, 37.5 million (that is to say, 35 per cent of the total) are under the age of 18. Notwithstanding the positive role a population with these characteristics could play in Mexican social and economic development, there is the enormous limitation posed by the poverty affecting children and young people under the age of 18.

The life expectancy of Mexicans has increased 10 years over the last three decades. Measured in years, average life expectancy of women is 77.5 and 72.7 among men. The infant mortality rate has been decreasing steadily and in 2008 reached 15.2 deaths for every 1,000 live births.

Nevertheless, underlying the averages of these indicators are significant regional disparities associated with the quantity and quality of available public services, the health risks present in each part of the country, as well as the allocation and spending of budgets and implementation of policies aimed at improving living conditions.

These contrasts are also evident in the distribution of the population and the environmental situation. The country has high population densities concentrated in a few cities as well as widely dispersed populations in rural areas, a situation that exacerbates inequality. Population concentrations coexist with high levels of environmental contamination — above all in the most important urban centres — which are the result of man-made activities, including the inadequate use of technology and the presence of severely marginalized socioeconomic areas. In addition, there is the impact of climatic phenomena and natural disasters that produce a high degree of vulnerability and an extremely high economic cost.

The migration dynamic

Mexico’s geographic location is a factor that contributes to many aspects of the situation of children in the country. The peculiarities of the country’s economy, as well as important social phenomenon, such as internal and external migration flows, all stem from its location.
Over the last decades of the 20th century, the flow of internal migration intensified across Mexican territory. Given that Mexico is a country with large-scale regional disparities, the decision to migrate is generally related to the search for better living conditions, as well as better opportunities for work, education and healthcare, and movement is mainly from rural areas to cities.

Nevertheless, in recent years, internal migration patterns have shifted. Regions that were previously gaining in population, such as Mexico City, are now undergoing a net loss of population. The opposite can be seen in states that two decades ago featured low population densities, such as Baja California Sur and Quintana Roo – both linked with tourism development – which have now become highly attractive to migrants.

From an international perspective, Mexico has been a traditional source, transit point and destination for migrants. Mexican migration abroad has increased since 2000, a time when the risks associated with migration – primarily that directed toward the United States – have resulted in the search for ever more dangerous routes and intensification of illegal migrant trafficking. It is estimated that around 500,000 people leave the country each year.

Panel 1.1 Mexico at the crossroads: natural disasters and climate change

Mexico is vulnerable to different kinds of natural disasters, in particular, those resulting from earthquakes, volcanic eruptions, cyclones and hurricanes. Apart from the dangers that these phenomena represent to the population, the economic cost of natural disasters are very high. Between 1980 and 1999, total losses as a result of natural catastrophes amounted to $10.4 billion dollars. In 2005, the worst year for hurricanes in Mexico’s recent history, the direct economic costs reached fully 0.6 per cent of GDP.

It is estimated that 15 per cent of Mexico’s national territory, 68.2 per cent of its population and 71 per cent of its GDP are highly exposed to the risk of adverse impacts associated with climate change. Mexico is also highly vulnerable to climate change because it spans several distinct climatic zones. In the northwest, there are droughts that limit the population’s access to water, while severe floods in the southeast part of the country wash away crops and affect entire cities. Over the last few years, these events have come to repeat themselves with ever-greater frequency.

Children, in general terms, face their own particular type of vulnerability to climate change, which translates into greater incidences of diarrhoea, malaria and other illnesses associated with meteorological phenomena. In addition, they have to deal with scarcity of water and food, and the effects of natural disasters that occur in developing countries which can force children to abandon their homes, be separated from their families or become orphans, making them potential victims of abuse by adults.

Mexico’s vulnerability to climate change and the high proportion of its population under the age of 18 both intensify the impact of meteorological phenomena on this age group, considering that this sector of the population is already seriously affected by poverty and inequality.

One example of the repercussions of meteorological phenomena on children was seen during the heavy rainfall and floods in the state of Tabasco in October 2007, when approximately 70 per cent of the population was directly affected by this emergency, and of this percentage, approximately 45 per cent (some 520,000 people) were under the age of 15.

Additionally, recent times have witnessed a dynamic growth in migration in regions of the country which previously contributed little in the way of migratory flows toward the United States, such as the south and southeast. Currently, Mexicans represent four per cent of the total population of the United States and 29 per cent of its immigrant population.

Indigenous peoples
Characterized by great cultural and ethnic diversity, Mexico has one of the highest proportions of indigenous populations in the world. There are more than 62 different ethno-linguistic groups in the country, although some experts believe that the real number is considerably higher — around one hundred — because of the extremely disparate dialects spoken within certain languages. Some languages are spoken only in small, isolated regions whereas others — such as Nahuatl, Otomi, Mayan, Mixtec and Zapotec — are spoken in a number of regions, not necessarily bordering one another, spread across several states.

In Mexico, 10.1 million inhabitants (9.8 per cent of the population) are considered indigenous. These groups are concentrated in highly marginalized municipalities to the extent that an estimated seven out of every ten indigenous language speakers reside in these municipalities. Indigenous peoples are poorer than the rest of Mexicans, which is reflected in their lower wages, poorer quality education and, in general, restricted access to public services.

The states with the largest indigenous populations are Yucatan (65.5 per cent), Oaxaca (55.7 per cent), Quintana Roo (45.6 per cent) and Chiapas (30.9 per cent).

Among the principal causes of poverty and exclusion that affect indigenous peoples are historical factors linked to centuries of discrimination and exploitation. Other endogenous causes include difficulty in accessing services like bilingual education and healthcare, or entering labour markets on an equal footing with the rest of the population.

Table 1.1 Classification of households with indigenous children between the ages of three and 17, 2008 (per cent)

<table>
<thead>
<tr>
<th>Household Characteristics</th>
<th>Indigenous</th>
<th>Non Indigenous</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Poverty</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td>70.0</td>
<td>22.6</td>
<td>25.3</td>
</tr>
<tr>
<td>Capacity</td>
<td>76.5</td>
<td>31.1</td>
<td>33.7</td>
</tr>
<tr>
<td>Patrimony</td>
<td>90.7</td>
<td>57.3</td>
<td>59.2</td>
</tr>
<tr>
<td><strong>School attendance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5-12 year-olds</td>
<td>93.0</td>
<td>97.7</td>
<td>97.4</td>
</tr>
<tr>
<td>13-15 year-olds</td>
<td>71.7</td>
<td>85.9</td>
<td>85.1</td>
</tr>
<tr>
<td>16-17 year-olds</td>
<td>41.1</td>
<td>60.7</td>
<td>59.7</td>
</tr>
<tr>
<td>Children between the ages of 12 and 17 who are not EAP</td>
<td>31.5</td>
<td>22.2</td>
<td>22.7</td>
</tr>
<tr>
<td>Employed</td>
<td>93.2</td>
<td>89.1</td>
<td>89.4</td>
</tr>
<tr>
<td>Unemployed</td>
<td>6.9</td>
<td>10.9</td>
<td>10.6</td>
</tr>
<tr>
<td>Children between the ages of 12 and 17 who do not attend school</td>
<td>33.9</td>
<td>20.8</td>
<td>21.6</td>
</tr>
<tr>
<td>Children between the ages of 12 and 17 who work and do not attend school</td>
<td>66.1</td>
<td>56.5</td>
<td>57.1</td>
</tr>
</tbody>
</table>

1 Defined as the proportion of the population three years or older reported as speaking an indigenous language.
2 Estimates for these indicators are from CONEVAL based on the ENIGH, 2008.
3 This data was obtained by excluding indigenous populations.
4 The definition of work included under the EAP.
Panel 1.2 Indigenous children in Mexico

The indigenous population of Mexico, particularly children and adolescents, is the most disadvantaged and suffers the lowest level of fulfillment of their basic rights in the country. In 2005, the Human Development Index (HDI) for Mexico was 0.8070 overall, whereas in the municipality with the highest percentage of indigenous language speakers (Chalchihuitán, Chiapas), it was only 0.5875. In that same year, 72.5 per cent of the indigenous population was not entitled to healthcare services (compared with the national average of 51 per cent).

The contrast in housing conditions between indigenous and non-indigenous populations is illustrative of the vast disparities that exist. In 2005, on average, 87.7 per cent of all households in the country had access to tap water systems, but only 70.5 per cent of indigenous households had piped-in water. In terms of indoor plumbing, the national average of households with sanitary sewage disposal is 86.3 per cent, but only 55.6 per cent in indigenous households.

The majority of the country’s nearly 25,000 indigenous communities are located in hard-to-reach areas. This has negative repercussions for education and fulfillment of other rights of indigenous children.

Seventy per cent of the population between the ages of three and 17 who speak an indigenous language live in conditions of food poverty compared with 22.6 per cent of non-indigenous children in the same age group (see table 1.1). In 2006, 33.2 per cent of indigenous children under the age of five were stunted in comparison to 12.7 per cent of all children of the same age. The infant mortality rate among indigenous populations is 60 per cent higher than in non-indigenous populations.

The Committee on the Rights of the Child is deeply concerned with what it considers to be “persistent discrimination against indigenous children,” which is expressed in higher mortality rates and low levels of birth registration, among other indicators. Failure to fulfill the basic rights of indigenous children is also reflected in low educational achievement. It is estimated that illiteracy among indigenous populations is four times higher (more than 26 per cent of the population aged 15 and older) than the national average (7.4 per cent). Nationwide, classes in one out of every three primary schools are multi-grade (in other words, teachers must attend to more than one grade) while two out of every three indigenous schools share this characteristic. In 2005, just 13 per cent of sixth grade students placed in the highest group in terms of reading comprehension, compared to the national average of 33 per cent, whereas 51 per cent of indigenous children placed in the lowest level (the national average being 25 per cent).

One significant challenge for indigenous children in Mexico is that bilingual and intercultural education programmes exist only in primary schools in regions considered indigenous, and not in urban areas, even though 20 to 25 per cent of indigenous language speaking households are currently in cities with more than 100,000 inhabitants, due to massive migration from the countryside to cities, and to the high birth-rates among indigenous families. Mexico City is a clear example of the differences between indigenous and non-indigenous populations. In fact, school attendance among non-indigenous language speakers in the Federal District in 2005 was 96 per cent compared to 87 per cent, on average, among indigenous language speakers. But among certain ethnic minorities, such as the Mazahuas, school attendance barely reached 70 per cent.

The legal framework governing indigenous peoples in Mexico underwent a major transformation in 2001. Reforms enacted that year to article 2 of the Constitution expressly recognize indigenous peoples’ autonomy with respect to decisions on their internal way of life, and their social, economic, political and cultural organization. They also recognize indigenous peoples’ freedom to enforce their own standards for dealing with internal conflicts, albeit subject to the underlying principles of the Constitution, with emphasis on respecting the dignity and integrity of women.

Poverty, inequality and human development
Mexico is one of a group of countries considered as having a high Human Development Index (HDI). This position is in marked contrast to the unequal levels of development evident in different states. While the Federal District (as well as states such as Nuevo Leon, Coahuila, Chihuahua, Baja California and Baja California Sur) enjoy a level of development similar to the Czech Republic, Kuwait or Argentina, the HDI of Chiapas resembles that of Nicaragua or the Syrian Arab Republic. At the municipal level, this inequality is even more evident. In Chiapas or Oaxaca, for example, it is possible to find municipalities whose HDI is similar to the low development indices of countries such as Nigeria, Eritrea or Senegal.

Recent data on poverty in Mexico are not encouraging: in 2008, 50.6 million Mexicans (47.4 per cent) did not receive sufficient income to satisfy their healthcare, education, dietary, housing, clothing or public transport needs, even if they devoted their entire household income to meet them. In rural towns with fewer than 15,000 inhabitants, inadequate income affected 60.8 per cent of the population, while in urban areas this reached 39.8 per cent. This implies that in 2008, 23.4 and 27.2 million people in rural and urban settings, respectively, were living in conditions of patrimony poverty. Similarly, 19.5 million (18.2 per cent) — 7.2 million in urban areas and 12.2 million in rural areas — exhibited signs of food poverty.

Map 1. Number of indigenous language speaking children living in conditions of food poverty, by state 2008

Source: UNICEF with information from ENIGH, 2008
Income poverty levels are defined in the following way in Mexico:

- **Food poverty**: insufficient income to purchase the basic food basket, despite devoting the entire household income to only acquire the items in the basket;

- **Capability poverty**: insufficient income to acquire the value of the basic food basket, and meet the expense of necessary healthcare and education, despite devoting the entire household income to these purposes;

- **Patrimony poverty**: insufficient income to acquire the basic food basket, as well as meet the expense of necessary healthcare, clothing, housing, transport and education, despite devoting the entire household income to the acquisition of these goods and services.

However, if we consider poverty to be a multidimensional phenomenon encompassing a range of social development indicators beyond income alone, Mexico has undoubtedly experienced significant progress in terms of the wellbeing of the population. In fact, recent information shows that coverage of basic services, such as education, healthcare and housing, has increased among poorer populations, particularly between 1992 and 2008.

Indeed, Mexico, under the Social Development Law, adopted a multidimensional methodology for measuring poverty, whose results were publicized for the first time toward the end of 2009. The new methodology employs a social-rights focus and incorporates indicators for measuring gaps in education, access to healthcare and to social security, quality and size of homes, basic household services, access to food, per capita income and the degree of social cohesion. According to this new methodology, and based on information collected in 2008, 42.7 million Mexicans (44.2 per cent of the total population) live in conditions of multidimensional poverty.

These sharp disparities also appear in the analysis of the plight of children: those who live in rural
The Oportunidades (Opportunities) programme is the main component of the Mexican Federal Government’s social policy strategy. The approach of the Oportunidades programme and its predecessors (Solidaridad and Progresa) constitutes, without doubt, one of the most important innovations in social policy in Mexico and worldwide. The underlying principle is to provide cash transfers to families living in extreme poverty in exchange for a commitment to send their children to school and that the families visit healthcare centres. These so-called conditional transfers are aimed at breaking the intergenerational transmission of poverty and favoring improvements in basic abilities of the recipients.

To achieve this, the programme provides support for education, healthcare, nutrition and income under a scheme of co-responsibility in which families take an active part. Oportunidades is an inter-institutional programme undertaken jointly by the Ministry of Social Development, the Ministry of Public Education, the Ministry of Health and the Mexican Institute of Social Security, as well as state and municipal governments. The programme currently provides support to five million families in more than 95,000 localities (96 per cent of them rural) in every municipality.

Since its creation, Oportunidades has been extensively evaluated both internally and externally. These evaluations have highlighted the programme’s rigorous system for selecting beneficiaries; its impact on strengthening the position of women in the family and the community, as mothers are the ones receiving the cash transfers; the preferential granting of educational scholarships to women; the special attention given to pregnant women to prevent high-risk births; the transparency and efficiency with which financial support is provided directly to the families in need, and their impact on the health, nutrition and education of those who benefit from them. These evaluations have revealed, among other impacts:

- A 50 per cent reduction in the number of stunted girls between the ages of zero and two, reaching 12.4 per cent lower prevalence in rural communities covered by the programme compared to those that are not;
- A 10 per cent drop in maternal mortality rates in women benefitting from Oportunidades;
- An increase in the use of preventative healthcare services, as well as a fall in the number of sick days taken by both children and adults;
- A 14.8 per cent reduction in school drop-out rates among girls and 22.4 per cent among boys in rural areas;
- A 25 per cent increase in attendance rates in rural high schools (32.2 per cent among girls and 17.1 per cent among boys);
- An 85 per cent increase in enrolment in first year senior high school in rural areas;
- The programme has also helped to close gender and ethnic gaps among school-age children.

Over the 12 years since it was established, Oportunidades has undergone a continuous process of revision and improvement. Its proven efficiency and innovative nature have led to the programme being replicated in more than 20 countries around the world. Recently, the Federal Government proposed increasing the subsidy given to participating families with children between the ages of zero and nine. This would mean extending support to more than 74 million children and broadening coverage for more than 6,825,000 families throughout the country.

In this context, the Oportunidades programme faces several challenges, the most significant being:

- To resolve the operational challenges associated with expanding programme coverage;
- To design or reinforce components that train young scholarship holders to commence their adult lives in conditions which enable them to break the intergenerational transmission of poverty;
- To design an effective strategy to “graduate” families who are no longer living in poverty or move them to a differentiated support scheme to prevent them from reentering the programme.

Lastly, although it is not the direct responsibility of the programme, there is the pending challenge of improving the quality of educational and healthcare services that can be accessed under Oportunidades, which is an essential step toward increasing its potential impact on beneficiaries. In other words, Oportunidades will only meet its goal of fostering capabilities to break the intergenerational transmission of poverty insofar as its beneficiaries have effective access to educational and healthcare services that will truly empower them to build a new and more rewarding life project.

Sources: Davila, 2008; Cordero, 2009; CONEVAL 2008b; UNICEF, 2005.
areas face greater disadvantages than those living in urban areas; in addition, indigenous children are among the most vulnerable groups in Mexico (for example, in 2006, 33 per cent of indigenous children under the age of five were stunted compared with 12 per cent of all children in that age group)22.

A comparison between the incidence of income poverty among the general population and that of under-18-year-olds also brings home the fact that children and adolescents suffer from poverty in greater proportions than adult populations. Moreover, income poverty has increased in the under-18 age group over the last few years at a slightly higher rate than that of total number of people living in poverty. This is shown in Table 1.2, which illustrates, for example, that food poverty in the general population remained steady but increased in groups under the age of 17 by 0.5 per cent. In the case of capability poverty, the difference was one per cent in the under-17 age group compared to 0.3 per cent in the general population, while patrimony poverty showed increases of 2.5 per cent in the population under the age of 17 and just 0.4 per cent in the general population.

As for the evolution of poverty among the under-18 age group, significant fluctuations were observed between 1992 and 2008, mainly associated with periods of economic crisis, which are illustrated in Graph 1.1.

Poverty estimates under the new multidimensional methodology confirm tendencies already identified through income poverty measurements, in the sense that people under the age of 18 represent a larger proportion within the poor population in comparison to the population as a whole. In fact, whereas 44.2 per cent of the total population (42.7 million people) lived in conditions of multidimensional poverty in 2008, for children and adolescents this figure reached 53.5 per cent (equivalent to 20.8 million people), of whom 5.1 million (13.1 per cent) were living in conditions of extreme poverty (compared to 10.5 per cent of the general population, or 11.2 million people)23.

It is worth pointing out that social spending in Mexico has increased constantly in recent years. In the 1970s, it represented around 4.5 per cent of GDP, whereas in 2005, it stood at 11 per cent24.

Although the Federal Government has promoted social spending with a growing emphasis on impoverished populations, as demonstrated by the implementation of Oportunidades programme, and has launched other programmes that also have positive impacts on children, such as IMSS-Oportunidades or the Seguro Popular health insurance scheme25, there are still obvious inequalities in social spending — subsidies on public goods and services such as gasoline, that have regressive effects, being a case in point.

Similarly, while recognizing the importance of universal healthcare and education programmes, certain adverse affects of these expenditures are also evident, exemplified by the fact that the poorest children have access to lower quality educational and healthcare services than those with higher incomes26.

The economic dynamic
According to data from the World Bank, the Mexican economy is the thirteenth largest in the world and the second largest in Latin America after Brazil27.

Since the 1980s, Mexico has undergone significant economic transformations toward the liberalization of its economy, as demonstrated by the country’s entry into the North American Free Trade Agreement (NAFTA) with the United States and Canada. This process has not only led to greater diversification of its trade and export models, but also to structural changes in the country’s GDP. In particular, notable increases have been observed in the proportion of wealth generated through...
foreign investment and external trade, which constituted a third of GDP in 1980 and today reaches 70 per cent.

As part of this transformation, a significant part of Mexico’s GDP is generated by the service sector (71 per cent), while the manufacturing sector, despite the opportunities offered under NAFTA, has declined progressively and today only constitutes 17 per cent. The portion of GDP related to agriculture has also fallen gradually and today barely reaches 4 per cent, while the mining sector represents 1.5 per cent.

Furthermore, and despite efforts to diversify income, oil production remains an important component of federal income (around 35 per cent).

With respect to external financing, Mexico does not rely heavily on international institutions. The country does, however, have a high level of remittances sent primarily by Mexican immigrants living in the United States.

Tourism is one of the country’s main economic activities, representing more than eight per cent of national GDP, and nine per cent of employment (both direct and indirect). Mexico places eighth in the world in terms of attracting international tourists, and tenth in terms of foreign exchange revenue.

Economic activity is highly concentrated in certain geographical areas. More than 20 per cent of GDP is generated in the country’s capital, and a further 10 per cent in its neighbor, the state of Mexico.

Mexico’s macroeconomic panorama over the last 20 years has been punctuated by various economic crises and recessions – the main ones in 1994 and 2000 – followed by periods of recovery (average annual GDP growth between 1996 and 2006 was 3.6 per cent). This growth, nevertheless, has proven insufficient to counter the impact of the crises in terms of levels of poverty and inequality. In 2007, for example, the Mexican economy grew by 3.3 per cent, only to fall by 1.3 per cent in 2008, due largely to the deceleration in internal and external demand, with slight rises in unemployment and inflation, as well as a drop in remittances.

Table 1.3 Urban unemployment rates in Mexico, 1990-2008 (per cent)

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Men</th>
<th>Women</th>
<th>Young people</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12-19</td>
<td>20-24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1990</td>
<td>2.7</td>
<td>2.6</td>
<td>3.0</td>
<td>7.0</td>
</tr>
<tr>
<td>1995</td>
<td>6.3</td>
<td>6.1</td>
<td>6.5</td>
<td>13.1</td>
</tr>
<tr>
<td>2000</td>
<td>2.2</td>
<td>2.1</td>
<td>2.4</td>
<td>5.3</td>
</tr>
<tr>
<td>2005</td>
<td>4.7</td>
<td>4.5</td>
<td>5.0</td>
<td>6.8</td>
</tr>
<tr>
<td>2006</td>
<td>4.6</td>
<td>4.4</td>
<td>4.9</td>
<td>6.9</td>
</tr>
<tr>
<td>2007</td>
<td>4.8</td>
<td>4.5</td>
<td>5.2</td>
<td>7.2</td>
</tr>
<tr>
<td>2008*</td>
<td>4.9</td>
<td>4.5</td>
<td>5.4</td>
<td>7.6</td>
</tr>
</tbody>
</table>

Source: UNICEF based on ILO, 2008

The workforce was estimated at 46.7 million people in 2009. One important aspect of the Mexican labour market is that approximately half the economically active population (EAP) in urban settings is not covered by healthcare and/or pension programmes. This tendency has remained largely constant for the last 15 years, to the extent that between 1995 and 2007, the total population covered by healthcare went from 45.1 to 48.2 per cent. During the same period, the proportion of the EAP with a pension plan underwent a larger change, increasing from 35.5 to 42.9 per cent. As for the percentage of the EAP with access to both healthcare and pension programmes, this rose from 45.6 to 53.9 per cent. The differences between men and women were not significant under these headings, although the last few years have seen women receive slightly lower coverage than men under all headings.

In general terms, Mexico has been characterized by relatively low urban unemployment rates over the last two decades, with the exception of the 1995 crisis, even though this undoubtedly had a greater impact on women and, in particular, young people, as shown in table 1.3.

Mexico’s economic dependency on its main trading partner, the United States, has profound effects: 80 per cent of Mexican exports go to this country and a generous proportion of foreign investment also comes from the U.S., despite the fact that Mexico has entered into free trade agreements with a large number of countries.
While Mexico maintains a trade surplus with the United States, the majority of its trade with the rest of the world results in deficits.

There are other aspects of the Mexican economy that also inhibit its vitality, chief among which are monopolies, be they public or private, in key sectors for growth, such as energy, telecommunications and railroads. In light of the relative weakness of federal regulations encouraging greater competition, these and other factors among have become significant obstacles to the generation of wealth, innovation and greater equity in the country.

The economic situation in Mexico has been hit hard by the global economic crisis of late 2008 and 2009, which only added to the already serious effects of rising food costs and plummeting oil revenues, after many years of favorable prices. The magnitude of the global crisis not only resulted in contracting external demand, but also reductions in direct foreign investment, international remittances, tourism and oil prices, which all play an important role in the Mexican economy. It is estimated that by the close of 2009, the real value of annual GDP had shrunk by 6.8 per cent.

But beyond such temporary negative impacts, the country also faces structural challenges to increasing its level of growth and competitiveness. Among these is the improvement and reinforcement of regulation of competition, mentioned previously, and strengthening the capacity of regulatory agencies to reverse dominant monopolistic or oligarchic positions that persist in strategic sectors; as well as reducing public financial dependence on oil in view of the country’s declining energy reserves, and the legal and financial hurdles to exploration and extraction in this sector.

National legal framework and harmonization with international human rights instruments

The national legal framework encompasses the Political Constitution of the United Mexican States (1917), the international treaties to which the country is party, and federal and local law. The complexity of this legal framework is due largely to the country’s federal system.

Mexico has ratified a significant number of international treaties on human rights issues. Consequently, the Mexican Government has had to adapt many of its national and local legal systems to the minimum standards recognized under these conventions, and to make different amendments to its constitutional, federal and local legal frameworks.

Among the most recent and important advances are the amendments to article 2 of the Constitution (2001), recognizing that Mexico is a multicultural nation founded on its indigenous peoples, and to article 1 on non-discrimination issues (2006). Similarly, a range of laws have been adopted at the national level that have begun to result in passage of important local laws on compliance with international human rights treaties. Those that stand out include the Law on Prevention and Eradication of Discrimination (2003); the Law on Social Assistance (2004); the General Law on Social Development (2004); the General Law on Gender Equality (2006); the General Law on Women’s Access to a Life Free from Violence (2007); the General Law on Disabled Persons (2005); and the Law on the Prevention and Punishment of Trafficking of Individuals (2007), as well as numerous amendments to the civil and criminal codes.

On 21 September 1990, Mexico ratified the Convention on the Rights of the Child (CRC), which specifically addresses children’s rights issues. Since then, Mexico has been under the obligation to comply with its provisions and adopt all administrative and legislative measures, as well as any others, required to ensure that the rights recognized under the CRC are respected. Mexico also ratified the two CRC optional protocols on the participation of children in armed conflicts (2002) and the sale of children, child prostitution and child pornography (2002).

In this regard, the Mexican Government has undertaken significant amendments to the Constitution in order to advance the process of adapting internal legislation to the CRC. Of note are the amendments to article 4, enacted in 1999, which incorporate the concept that children are rights-holders, recognizing that children are entitled to nourishment, healthcare, education and play in order to develop to the fullest. This amendment also establishes the duty of parents, caregivers and legal guardians to protect these...
Panel 1.4 Economic impact of the 2009 Influenza A(H1N1) outbreak

In April 2009, Mexico was the first country in the world to experience a health crisis related to the outbreak of a new strain of the influenza virus known as A(H1N1). On April 23, the Mexican Government officially declared a state of emergency in response to the epidemic and announced a series of preventative measures to be established throughout the country and particularly, in the Mexico City Federal District.

These measures included the closure of schools, businesses and other public places for two weeks. Although the measures were successful in reducing and containing the spread of the epidemic, its impact on the economy was evident in the simultaneous closure of restaurants, bars and commercial venues, as well as in reduced demand for hotel and tourist services.

Some preliminary studies have estimated the number of jobs lost as a result of the health emergency at 850,000. In addition, the tourism industry, which represents 8 per cent of GDP, acknowledged significant losses as a result of the cancellation of foreign arrivals. Losses were estimated at 80 per cent of revenues forecast for the period, equivalent to a little over 359 million USD.

The health emergency occurred at a time when the macroeconomic situation of the country was particularly adverse due to the global economic downturn and Mexico’s high exposure resulting from close ties to the United States economy. Although Mexico’s annual GDP fell 6.8 per cent by year’s end, the impact of the outbreak was reflected more intensely in second quarter figures, which saw annual GDP fall by 10.4 per cent.

The Ministry of Treasury and Public Credit’s overall estimate of the impact of the Influenza A(H1N1) virus on the Mexican economy was 0.3 per cent of GDP.

Source: SHCP, 2009c, SHCP, 2009d and press articles.
rights, while it is the State’s responsibility to do everything possible to bring about a climate of respect for the dignity of children and the full exercise of their rights, as well as to empower individuals who work toward child-rights fulfillment.

This constitutional amendment paved the way for the Law on the Protection of the Rights of the Child in 2000, whose purpose was to ensure entitlement and respect of basic child rights recognized under the Constitution and establish guiding principles under which Mexican law must protect and guarantee these rights. This amendment also led to the subsequent enactment of similar laws in states throughout Mexico. Currently, 27 of the 32 states have passed local laws for the protection of children’s rights, and the only states yet to do so are Baja California, Chihuahua, Guanajuato, Morelos and Queretaro (see Table 1 under Appendices).

The reform of article 18 of the Constitution in 2005 is also worth highlighting. This amendment transformed the antiquated tutelary system of justice for young offenders and laid the groundwork for the creation of a comprehensive legal system for adolescents in conflict with the law in line with the CRC. The reform obligated the Federal Government41, as well as the states and Federal District, to establish this new system and create specialized institutions, tribunals and authorities to apply it within the scope of their respective jurisdictions. To date, almost every state in the country, with the exception of Guerrero and the Federal Government, has passed the relevant local law and begun to set up this new system.

Within the national legal framework there are also other laws that are essential for protecting the rights of children and adolescents. These include the General Law on Health (1984) and the General Law on Education (1993).
LOS DERECHOS DE LA INFANCIA EN MEXICO: UNA AGENDA PARA EL PRESENTE

© UNICEF Mexico
The right to survival and development

The right to life recognized in article 6 of the Convention on the Rights of the Child (CRC) is considered to be a universal principle of law in a range of legal instruments. State parties to this Convention are committed to guaranteeing, to the extent possible, the survival and development of children.

This implies the introduction of measures aimed not only at preventing the taking of life, such as prohibiting the death penalty, summary or arbitrary executions and forced disappearances, but also — and with special emphasis concerning children — positive measures aimed at reducing mortality, increasing life expectancy and eliminating malnutrition and disease (article 24 of the CRC).

The Political Constitution of Mexico states that in order for children to develop to the fullest, they have the right, among other things, to adequate food and healthcare. Similarly, the Law on the Protection of Children and Adolescents guarantees the child’s intrinsic right to live (article 15) in conditions that allow healthy and harmonious physical, mental, material and social growth. Consequently, and in light of the undisputed link between the health of mother and child, this law also provides for the mother’s right to receive medical and nutritional care while pregnant or breastfeeding, in accordance with women’s rights to health (article 20), and the obligations of the State to work toward reducing infant mortality, ensure proper medical and sanitary care, set up vaccination programmes, combat malnutrition, prevent teenage pregnancies and attend to disabled children, among others (article 28).

This chapter looks at the current situation, main causes and institutional responses to three topics that are directly related to fulfilling the right to survival and development: maternal and infant healthcare, nutrition and HIV/AIDS.

Maternal and child health

The health and survival of mothers and their newborns are closely intertwined, and many of the interventions that save the lives of mothers also benefit their newborn children. Countries with high maternal mortality rates also show high infant mortality rates. Reducing the risk of mortality among mothers directly improves the child’s chances for survival. Newborns whose mothers die within six weeks of giving birth have a greater chance of dying before their second birthday than newborns whose mothers survive.

Both mothers and newborns are extremely vulnerable during the first few days and weeks following childbirth, making it a crucial period for such critical interventions as postnatal visits, the use of appropriate hygiene and providing orientation on warning signs of the risks related to maternal and neonatal health.

Three women die each day in Mexico from complications related to pregnancy and childbirth. According to official data, this ratio fell from 63.4 maternal deaths per 100,000 live births in 2005 to 57 in 2008. A comparison of the data...
from 1990 to 2007 shows that there has been a decline of 37.5 per cent over the 17-year period. Progress then, on average, has been 2.2 per cent per year. However, this rate is insufficient to meet the Millennium Development Goal target set for 2015 which would require an annual reduction of at least 7.7 per cent; in other words, obtain a maternal mortality ratio\(^4\) of 22 deaths per 100,000 live births\(^5\). By the end of 2008, the number of maternal deaths in Mexico rose to 1,115, which represents an increase of 1.4 deaths compared to 2007\(^6\).

Measuring maternal mortality is a complex undertaking that is constantly improving in Mexico as the result of targeted tracking of maternal deaths and the creation of the Maternal Death Rapid Response Group\(^{47}\) (AIDEM). These actions made it possible to analyse perinatal deaths that occurred between 2005 and 2006 in 49 hospitals and were related to maternal deaths in 19 states. Of the 2,862 deaths analysed, 42 per cent were classified as fetal and 55 per cent neonatal. Of the neonatal deaths, 45 per cent were linked to maternal deaths that could have been avoided by interventions during pregnancy, according to international data describing greater risk of dying during the first hours of life, since these deaths occurred during the early neonatal stage\(^48\).

In addition, AIDEM’s work yielded disaggregated information by age. This data is vital, for example, for providing evidence of the risk of teenage pregnancies. In fact, during 2008, the highest number of deaths occurred in women aged between 15 and 39, while the lowest number was in the 40 to 49 year age group (see Graph 2.1).

In Mexico, maternal mortality is a reflection of poverty. It has already been mentioned that the national ratio in 2008 was 57 deaths per 100,000 live births; however, regional, state and municipal indicators reveal disparities hidden beneath these overall averages. A look at the top 100 municipalities with the worst human development indices reveals that this figure reaches as high as 148\(^49\), with the worst maternal mortality ratios occurring in the states of Guerrero (129.5), Chiapas (90.1) and Durango (90.7)\(^50\).

Between 2005 and 2007, 45 per cent of maternal deaths occurred in rural areas among beneficiaries of the Oportunidades programme; 29 per cent in semi-urban and 12 per cent in urban areas. This indicates that improving strategies for looking after these “captive” beneficiaries could reduce the annual death rate by almost 25 per cent (280 on average\(^51\)).

Maternal mortality, therefore, is not only a reflection and consequence of poverty, but also reflects gender inequality, resulting from the position that women occupy in the family\(^52\). Gender discrimination has direct repercussions on the health of mothers — for example, when they are prevented from receiving or seeking adequate medical attention, or when they are unable to make basic decisions concerning their

### Panel 2.1 Maternal mortality: indicator of disparity

In the developing world, women’s lifetime risk of dying from causes related to childbirth is 1 in 76, compared to 1 in 8,000 among women in industrialized countries.

Approximately 99 per cent of deaths worldwide that result from pregnancy or complications of childbirth occur in the developing world, where having a child continues to be one of the greatest health risks a woman faces.

The vast majority of these deaths occur in Africa and Asia where high fertility rates, scarcity of trained personnel and inefficient health systems spell tragedy for many young women. The Latin America and Caribbean region accounts for three per cent of total maternal deaths, with around 15,000 deaths each year.

As in the case of maternal deaths, a child born in a poor country is 14 times more likely to die during the first 28 days of life than one born in an industrialized country. Almost 40 per cent of deaths in children under the age of five occur in the first 28 days of life, and of these, three quarters happen during the first seven days. During this early neonatal period, newborns and their mothers are at their most vulnerable.

Graph 2.1 Distribution of deaths and proportion of maternal deaths, by age group 2008

* The maternal mortality ratio is a measure of maternal deaths per 100,000 live births.

Source: Visits Al-Dem/maternal mortality database/Grupo Al-Dem in the 2008 APV Report

The AIDEM Group has documented that, in the chain of attention a woman receives during pregnancy, childbirth and puerperium, the primary failure associated with maternal mortality stems from inadequate attention received during childbirth and obstetric emergencies, mainly in hospitals (40 per cent of cases). The second critical link is represented by prevention programmes, generally the responsibility of primary care facilities (36.6 per cent), and lastly, deaths associated with poor quality prenatal attention (20 per cent)54.

These analyses reveal the difficulties faced by public health services to steadily reduce maternal mortality rates, and at the same time, they provide valuable insights into existing problems and suggest strategies that are gradually being implemented in the country over the long-term.
Diagram 2.1, prepared by the Comite Promotor para una Maternidad sin Riesgos (Committee on Risk-Free Motherhood), provides a graphic summary of the different institutional strategies that have been implemented to reduce maternal mortality, as well as the movement of the indicator itself between 1990 and 2007.

In 1997, the launch of the Oportunidades programme (formerly, Progresa) helped get women in the areas it covered – primarily marginalized areas – to regularly visit healthcare services, particularly for prenatal care, as part of their co-responsibilities for receiving cash transfers. However, this action alone has not been sufficient in reducing maternal mortality, as mentioned earlier, where it was also stated that improving strategies for looking after beneficiaries served by the programme could reduce the annual death rate by almost 25 per cent (280 on average).

The principal objective of the Arranque Parejo en la Vida - APV (Equal Start to Life) programme is to enable women who do not receive social security benefits to exercise their reproductive rights, particularly those related to maternal health, while promoting the right to healthcare for all from birth, with emphasis on healthy development of newborns and the prevention of birth defects. The programme was launched in 2002 and was the first of its kind with specific objectives aimed at helping to fulfill Millennium Development Goals (MDG) 4 and 5. This programme, which receives funding from diverse public and private sources, has managed to reduce maternal mortality by almost 10 per cent. At the federal level its financing is labeled as part of Branch 12 (budget classification assigned to health issues), under the overall budget for the National Centre for Gender Equality and Reproductive Health, which represents 0.3 per cent of the programme’s total spending.

With the implementation of the Seguro Popular health insurance scheme, funds are currently being channeled from Branch 12 in order to guarantee the necessary resources for interventions in maternal and perinatal health (including catastrophic health spending to treat neonatal emergencies), decentralizing the management of these resources to each state.

In May 2008, the government launched the Estrategia Embarazo Saludable (Healthy Pregnancy Strategy) under the Seguro Popular health insurance scheme. This has meant that all pregnant woman without social security benefits are automatically enrolled, guaranteeing them medical attention during pregnancy, childbirth and puerperium. In 2009, with the intention of accelerating achievement of MDG 5, the Federal Government launched the Estrategia Integral para Disminuir la Mortalidad Materna (Comprehensive Strategy to Reduce Maternal Mortality). This strategy – based on a three delays approach (See Diagram 2.2) — includes, among other measures, free universal healthcare during pregnancy, childbirth and puerperium at any institution within the healthcare sector, regardless of whether the woman is entitled to social security benefits or not. This initiative is without doubt an important step.

<table>
<thead>
<tr>
<th>Table 2.1 Maternal mortality in Mexico, by cause of death, (2000-2007) (per cent)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cause of death</strong></td>
</tr>
<tr>
<td>Pregnancy-induced hypertension</td>
</tr>
<tr>
<td>Obstetric haemorrhage</td>
</tr>
<tr>
<td>Indirect obstetrical complications</td>
</tr>
<tr>
<td>Abortion</td>
</tr>
<tr>
<td>Puerperal infection</td>
</tr>
<tr>
<td>Other complications of pregnancy and childbirth</td>
</tr>
<tr>
<td>Other complications of puerperium</td>
</tr>
<tr>
<td>Unspecified causes</td>
</tr>
</tbody>
</table>

toward saving women from death due to preventable causes. Free universal medical attention is a vital tool in reducing the deep-seated disparities related to maternal health.

In the framework of the launch of this strategy, the Ministry of Health, the Mexican Social Security System (IMSS) and the Mexican Government Workers’ Social Security System (ISSSTE) signed the Inter-institutional Agreement on Universal Care in Obstetric Emergencies. Its objective is to ensure that the agencies provide healthcare services through their medical facilities to all women of reproductive age in cases of obstetrical emergency, so as to lower maternal mortality at the national level\(^6\), regardless of whether patients are covered by social security or any other insurance scheme.
**Infant mortality**

The infant mortality rate (IMR)\(^61\) is one of the principal indicators of quality of life and health of a community, given its direct relationship with the socioeconomic conditions of a country.

According to data from a recent study, public healthcare interventions aimed at children in Mexico have placed the country among the top seven in the world that are on track to achieve the Millennium Development Goal of reducing child mortality by 2015\(^62\). Over the last 25 years, mortality rates in children under the age of five have declined from 64 to 17.9 per 1,000 live births in 2008. The study found evidence of a temporal relationship between this drop in mortality and the high coverage of healthcare interventions, as well as a significant association with investment in women’s education, social protection, water and sanitation. The continuity of public policies, together with investment in institutions and strengthening of human resources, were two of the other reasons cited for these achievements.

Official figures show that overall child mortality dropped from 15.7 in 2007 to 15.2 in 2008 (per 1,000 live births). Despite this downward trend, child mortality in marginalized areas of Mexico continues to represent a serious concern. As with maternal mortality, disparities in child mortality rates are mainly evident in the 100 municipalities with the lowest human development indices, where the average IMR was 33.5 in 2008\(^63\). The states with the highest infant mortality rates are Guerrero (21.5 per cent), Chiapas (21 per cent) and Oaxaca (19.2 per cent)\(^64\).

The under-five mortality rate has also fallen over the last few years. Whereas in 2005 the rate stood at 19.6 deaths per 1,000 live births, in 2008 it was 17.9\(^65\), as noted previously. If this indicator is analyzed geographically, the highest rates are concentrated in the southern and southeastern states (See Graph 2.2).

Despite the progress made in reducing child mortality, socioeconomic disparities among different groups of children continue to take a toll. In 2002, close to 25 per cent of children (9.9 million) received no vaccinations beyond their second birthday\(^66\).

Generally, only half of all children receive antibiotic treatment for the prevention of pneumonia, and this rate drops considerably as family size increases (44 per cent); if the mother has no education (38 per cent); if the household is among the lowest wealth quintile (44 per cent); in relation to indigenous children (34 per cent); or in rural areas (38 per cent)\(^67\).

**Graph 2.2 Infant mortality and under-five mortality, by region (per cent)**

- **Northeast (Tamaulipas, Nuevo Leon, Chihuahua, Durango and Coahuila)**
  - Infant mortality rate (under one year): 18.7%
  - Under-five mortality rate: 26.1%

- **Northwest (Baja California, Baja California Sur, Sonora and Sinaloa)**
  - Infant mortality rate (under one year): 13.5%
  - Under-five mortality rate: 18.7%

- **Central (Federal District, Queretaro, Hidalgo, Tlaxcala, Morelos and State of Mexico)**
  - Infant mortality rate (under one year): 15.3%
  - Under-five mortality rate: 20.8%

- **Central-west (Jalisco, Michoacan, Colima, Aguascalientes, Nayarit, Zacatecas, San Luis Potosi and Guanajuato)**
  - Infant mortality rate (under one year): 13.6%
  - Under-five mortality rate: 19.3%

- **South and Southeast (Puebla, Campeche, Yucatan, Chiapas, Oaxaca, Quintana Roo, Tabasco, Guerrero and Veracruz)**
  - Infant mortality rate (under one year): 13.0%
  - Under-five mortality rate: 22.0%

Source: CONAPO, 2007
Panel 2.2 Early childhood development in Mexico

Early childhood — newborns through five years of age — represents a decisive phase in the physical, intellectual and emotional development of every child, and their most vulnerable stage of growth. Children going through this period of life form essential abilities and conditions for later life, including much of the development of their brain and its connections. For this reason, the surroundings in which they develop as well as the living conditions of the mother are so critically important.

In 2009, there were 11.6 million children in Mexico between the ages of zero and five, of whom 5.9 million were boys and 5.7 were girls. 61.2 per cent live in conditions of patrimony poverty and 27.4 per cent in food poverty. Inequality of income and opportunities varies according to geographical location. Hence, in a southeastern state such as Yucatán, 61.5 per cent of children under five live in patrimony poverty, whereas in a northern state, like Sonora, the percentage is 46.5 per cent.

Traditionally, basic education was mandatory starting at age six, but following education reform in 2003, preschool education for four- and five-year-olds became mandatory as of the 2005-2006 school year, and for three-year-olds starting with the 2008-2009 school year. This initiative has turned Mexico into the first OECD member country to establish mandatory schooling from the age of three. During the 2008-2009 school year, enrolment of five- and four-year-olds reached 93.9 per cent and 83.2 per cent, respectively, while enrolment of three-year-olds was 32.1 per cent.

In Mexico, basic education and childcare programmes operate under the aegis of a number of different government departments, such as the SEP, SEDESOL, IMSS, ISSSTE, DIF and CONAFE, as well as various private options. These agencies have different operational standards and there is no single system governing all programmes. The General Education Law seeks to consolidate regulation of these services under the Ministry of Public Education both at state and federal level. One of the main challenges that persists is to improve access to early education as well as to childcare for children under the age of three.

Recent research of childcare services suggests that this issue has not been a priority for social policy in Mexico and that existing programmes tend to focus more on facilitating the entry of women into the labour market rather than on fulfilling children’s rights. The study shows that there is no comprehensive evaluation of the quality of the services provided, due largely to the highly segmented nature of the market and the absence of a specific national strategy to improve the consistency and fairness of existing programmes. Furthermore, this research compiles and compares requirements and the cost of providing the services offered by different providers, and highlights the marked differences that exist in terms of resources allocated per child, coverage and quality. In some modalities, the cost of taking care of a child can reach 4,570 pesos per month (approximately US$350) compared to 665 pesos per month (around US$50) in others. In addition, only 10 per cent of all eligible children receive these types of services (with marked differences in the quality of care); the remaining 90 per cent of children in need of these services are uncovered.

There is solid evidence showing the importance of investing in the different stages of childhood and adolescence. Recently however, investment in early childhood has taken on even greater relevance, with research showing that social returns are higher at this stage than at others and there is greater impact in terms of equity. But investments in early childhood must be kept up over the life cycle if the progress achieved through early intervention is to be sustainable. In OECD countries, for example, with the exception of six — among them Mexico, where social spending is focused on primary education — the bulk of spending goes to adolescents and youth at a rate of 2.3 dollars for every dollar spent on early childhood.

Sources: CONAPO, 2006; INEGI, 2008a; UNICEF, 2008b; OECD, 2009b; Gerhard, 2009.
Children living in rural areas, who are indigenous or whose mothers have a low education level, tend to suffer more from diarrhoea and fevers, and when they do become ill, they are less likely to receive proper medical treatment. For example, 24 per cent of children between the ages of zero and four whose mothers had no education experienced fever in the month prior to sampling/apply the survey, and only 38 per cent of these children were treated with antibiotics to prevent pneumonia. In sharp contrast, 17 per cent of children whose mothers had a high school education or higher experienced fever and almost 58 per cent of them were given antibiotics. In addition, the area with the greatest incidence of illnesses among child populations is the south and southeast part of the country. These results suggest that children from poorer families not only become ill more often, but when they do, their treatment is less frequent than that received by children living in better economic conditions who also get sick.

Mexico has managed to reduce its infant mortality rate thanks to specific public policy interventions described below and to factors such as increasing access to safe drinking water and sanitary services; improved nutrition among children and mothers; increasing vaccination coverage; timely access to quality medical attention, and better education of mothers. It has been calculated that the children of mothers who did not complete primary school have a 50 per cent greater chance of dying during their first year of life than children of better educated mothers. The education of the mother also has an important influence on reproductive behaviors, which are closely associated with infant mortality. Some of the most significant reproductive behaviors that influence death in children under the age of one are the age of the mother, number of children and the interval between pregnancies.

The principal strategies of the Programa Nacional...
para la Reduccion de la Mortalidad Infantil (National Infant Mortality Reduction Programme - PRONAREMI) focus on strengthening vaccination efforts; raising awareness among the population as to how to manage diarrhoea and acute respiratory infections and promoting healthy eating habits to reduce the prevalence of child malnutrition. They also foster responsible sexuality to reduce pregnancy rates among adolescents, as well as disseminate the basic concepts required by healthcare personnel for the timely detection of paediatric cancer.

A recent creation is the Seguro Medico para una Nueva Generacion (Health Insurance for a New Generation — SMNG) programme. It provides voluntary health coverage for children born after December 2006 and their families who are not affiliated with any social security system. Under this initiative, children are entitled to practically any medical attention they may require, while their families have access to the 255 interventions covered under the Seguro Popular health insurance system. To date, more than one million children have benefited from the programme. Children affiliated with the SMNG are guaranteed the right to receive preventative healthcare and medical attention at no cost whatsoever. Few evaluations of the programme are available — likely because it is so new — but recent studies show no significant impacts on health to date. Nevertheless, other studies of the Seguro Popular health insurance scheme suggest it reduces household spending on health.

While government actions have had an effect on reducing infant mortality, public expenditure on child healthcare and nutrition programmes is proportionally insignificant compared to other areas of the budget. As will be further explored below, programmes such as Liconsa, Desayunos Escolares (School Breakfasts), Apoyo Alimentario y Abasto Rural (Rural Food Support and Supplies) receive less than one per cent of public spending. Expenditures on health-related areas that target impoverished populations — such as immunization, prenatal and neonatal care and reproductive health and maternal care programmes — have remained low and without major fluctuations between 2005 and 2007, as shown in Table 2.2.

### Table 2.2 Key budget allocations related to child health*

<table>
<thead>
<tr>
<th></th>
<th>Total spending in 2005 (millions of pesos)</th>
<th>Total spending as a % of government spending in 2005</th>
<th>Total spending in 2006 (millions of US$)</th>
<th>Total spending as a % of government spending in 2006</th>
<th>Total spending in 2007 (millions of US$)</th>
<th>Total spending as a % of government spending in 2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccination programme¹</td>
<td>0.03</td>
<td>0.0002</td>
<td>9</td>
<td>0.05</td>
<td>6.4</td>
<td>0.03</td>
</tr>
<tr>
<td>Prenatal care programmes¹</td>
<td>3.8</td>
<td>0.02</td>
<td>3.9</td>
<td>0.02</td>
<td>3.8</td>
<td>0.02</td>
</tr>
<tr>
<td>Neonatal care programmes¹</td>
<td>10.5</td>
<td>0.06</td>
<td>9.6</td>
<td>0.05</td>
<td>9.8</td>
<td>0.05</td>
</tr>
<tr>
<td>Reproductive health and maternal care¹</td>
<td>2.4</td>
<td>0.01</td>
<td>4.6</td>
<td>0.02</td>
<td>2.8</td>
<td>0.01</td>
</tr>
</tbody>
</table>

* Expenditures on immunization programmes include budgeted spending on vaccination programmes and provision of other resources for these programmes. Expenditures on prenatal programmes correspond to annual budgeted spending by the “Isidro Espinosa de los Reyes” National Institute of Perinatology. Expenditures on neonatal care programmes include budgeted spending of both the “Isidro Espinosa de los Reyes” National Institute of Perinatology and the National Institute of Pediatrics. Expenditures on reproductive health and maternal care correspond to budgeted spending by the National Gender Equality and Reproductive Health Centre.

2 The UN average exchange rate for 2009 is 13.44 per dollar.

The nutritional status of Mexican children

Mexico is currently undergoing a demographic and epidemiological transition that poses complex challenges for public policy and investment. With respect to nutrition, despite notable progress in recent years, chronic malnutrition continues to be a problem, principally during the first few years of life, and in the rural and indigenous areas of the south. These problems coexist with those caused by widespread overweight and obesity throughout the country, whose prevalence among the over-20 age group is almost 70 per cent, having grown exponentially in recent years — from 34.5 per cent in 1988 to 69.3 per cent in 2006.

Although malnutrition in children under the age of five has fallen significantly over the last 20 years as a result of diverse interventions — universal vaccination programmes, widespread vitamin A supplementation campaigns, deworming programmes and greater availability of food thanks to social development programmes — the National Health and Nutrition Survey 2006 (ENSAANUT) revealed that 472,890 children under the age of five were classified as underweight (five per cent); 1,194,805 were of short stature for age (12.7 per cent) or chronically malnourished, and around 153,000 were wasted (1.5 per cent), in other words, affected by acute malnutrition or low weight for their size.

Acute malnutrition in children under the age of five dropped from 6 to 1.6 per cent between 1988 and 2006; short stature for age fell 10.1 per cent and underweight decreased more than eight per cent over the same period. However, the fact that stunting or short stature for age occurs in 12.7 per cent children under the age of five is both high and alarming. The highest occurrences of these indicators are consistently found in rural areas in the south of the country (25.6 per cent), even though significant progress has been made in these areas as well. Indigenous children continue to be the most disadvantaged. The risk of an indigenous child dying from diarrhoea, malnutrition or anaemia is three times higher than among the general child population.

In light of this, the Committee on the Rights of the Child has recognized the advances in reducing malnutrition, mainly in urban areas, but it has also expressed concern over the persistently high
occurrence of malnutrition in rural and remote areas, as well as among indigenous populations. In 2006, the Committee recommended that the Mexican Government intensify its efforts to reduce these regional and ethnic disparities.

Graph 2.3 shows indicators of malnutrition among preschool children (under age five) which are indicative of the regional inequalities seen in Mexico, and highlight that chronic malnutrition prevalence in the south of the country is more than double that in the north (18.3 per cent compared to 7.1 per cent).

In respect to school-age children, between 1999 and 2006 stunting prevalence in boys and girls between the ages of five and 11 declined six per cent points on average for both genders. In 2006, it dropped 10.4 per cent for males and 9.5 per cent for females (See Graph 2.4)

In general terms, a similar regional pattern exists for chronic malnutrition and anaemia among school children: the highest prevalence is concentrated in the south of the country and the lowest in the north. Overall prevalence in the south is four times greater than in the north. Disaggregation by gender reveals no evidence for higher levels of malnutrition among girls in comparison to boys in this age group.

In adolescents, as with the age group discussed previously, there has been a considerable decline in the prevalence of stunting or chronic malnutrition over the last few years. Analysis of regional differences in indicators of malnutrition among adolescents (12 to 17 years old) once more reveals that the highest occurrences are concentrated in the south of the country, which is three times higher than in the north (See Graph 2.5).

When the population is grouped by geographical location, prevalence of chronic malnutrition and anaemia among practically all age groups is noticeably higher in rural compared to urban areas. In the under-five age group, underweight in rural areas was 6.6 per cent in 2006, compared with 4.4 per cent in urban areas; acute malnutrition was similar in both areas (1.8 per cent in rural areas and 1.6 per cent in urban areas). The dispari-
ties were greater in terms of chronic malnutrition, which reached 10.1 per cent among preschoolers in urban areas and practically double that (19.9 per cent) in rural settings. Anaemia prevalence among preschoolers was 22.8 per cent in urban compared with 26.1 per cent in rural areas. In the five to 11-year-old age group, chronic malnutrition was 7.25 per cent in urban populations and more than double that in rural areas (16.85 per cent), while anaemia prevalence was similar in both areas (16.1 per cent in urban and 17.9 per cent in rural areas)80.

Similarly, among adolescents aged between 12 and 17 years old, chronic malnutrition was 9.2 per cent in urban areas and 15.5 per cent in rural areas. Anaemia prevalence was one percentage point higher in rural (12.3 per cent) compared with urban areas (11.3 per cent). Unlike the other two age groups, which show no significant differences in terms of gender, the differences in adolescents are somewhat greater. For example, chronic malnutrition among women in urban areas was 10.4 per cent, compared to 8 per cent in men; while in rural areas, prevalence in men was 13.2 per cent compared to 17.1 per cent in women81.

Meanwhile, the alarming increase in overweight and obesity putting Mexico in second place only after the United States in terms of these medical conditions, is also present among children and adolescents, and even among preschoolers, but primarily in school-age children (5-11 years old) and in the 12 to 17 year age group. The combined prevalence among school-age children of overweight and obesity rose to 26 per cent on average for both genders (26.8 per cent in girls and 25.9 per cent in boys), which amounts to more than 4.1 million overweight or obese school children. Equally concerning is the rate at which this prevalence has increased: 39.7 per cent between 1999 and 200682.

In urban areas, the combined prevalence of overweight and obesity was 29.5 per cent in boys and 30.1 per cent in girls between the ages of five and eleven; while in rural areas this was 16.5 and 18.2 per cent, respectively. Notably, the highest combined prevalence of overweight and obesity in this age group is in Mexico City (36.1 per cent in boys and 34.2 per cent in girls)83.

In the case of adolescents between the ages of 12 and 19, the prevalence of overweight and obesity has also increased to the extent that, according to ENSANUT, it now affects one in every three male and female adolescents in the country (some 5.8 million people). Prevalence of overweight went from 21.6 per cent to 23.3 per cent between 1999 and 2006, while obesity climbed from 6.9 per cent to 9.2 per cent84.

There are significant differences between urban and rural areas among this age group. The combined prevalence of overweight and obesity in urban areas is 10 per cent higher than in rural areas (34.3 per cent compared to 24.9 per cent), and is slightly greater in females in both cases (35.2 per cent compared to 33.5 per cent of males in urban areas, and 25.1 per cent compared to 24.7 per cent of males in rural areas)85.

When prevalence is analyzed by region, the highest is in the north of the country, followed by the central region and Mexico City, as shown in Graph 2.7.

In adults over the age of 20, overweight and obesity are considered an epidemic, and have been recognized as one of the main public health concerns in the country, with prevalence of combined overweight and obesity standing at 71.9 per cent in women and 66.7 per cent in men86.

The rapid growth of this phenomenon has had a strong impact on mortality during the most productive years of life and is considered the cause of increases in chronic diseases, such as diabetes mellitus, which is the main cause of death among Mexican adults (33 per cent in women and 26 per cent in men), in addition to being directly associated with metabolic problems, hyperglycemia, hypercholesterolemia and hypertension87.

According to the Ministry of Health, the number one problem faced by the National Health System today is diabetes. It is not only a major cause of death among adults, but is also the main reason for hospitalizations and physician office visits. Diabetes is the disease that accounts for the highest percentage of spending on the part of public health institutions (around 30 per cent). Similarly, diabetes increases the risk of dying from heart conditions, cerebrovascular disease and kidney failure, in addition to being a significant contributing factor to the amputation of lower extremities and the main cause of blindness in the country.
It is important to note that diabetes occurs across the entire population, regardless of socioeconomic level. Diabetes mellitus is also the primary cause of death among women in indigenous communities throughout the country, and the third among men in similar regions.

As for the institutional response to these challenges, Mexico has a relatively long track record in designing and implementing nutrition programmes, especially ones targeting people living in conditions of poverty. For many years, these programmes lacked focus, but since conclusive statistical evidence emerged — such as in the 1988 National Nutrition Survey I — it became clear that there was a need for programmes based on scientific research, reliable evaluations of the nutritional status of the population and educational components reinforcing joint responsibility with programme beneficiaries.

Today, the main policies and strategies on child nutrition are reflected in the Plan Nacional de Desarrollo (National Development Plan — NDP) 2007-2012 and the Programa Sectorial de Salud (Health Sector Programme PROSESA) 2007-2012, in addition to the Action Plan 2002-2010 agreed at the United Nations Special Session on Children.

The Ministry of Health, Ministry of Social Development (SEDESOL) and the Sistema Nacional para el Desarrollo Integral de la Familia (National System for Integrated Family Development — DIF), in coordination with the states, are the primary agencies responsible for designing and implementing social programmes relating to child nutrition.

SEDESOL coordinates the Oportunidades Human Development Programme, which contains an important nutrition component that provides mothers with food supplements during pregnancy, during the child’s first two years of life.

The alarming increase in the prevalence of overweight and obesity is present among children and adolescents, and even in preschool children.
and – in cases of malnutrition — until they are five years old. Mothers attend monthly talks on health, good eating habits and hygiene practices. An assessment made by the Instituto Nacional de Salud Publica (National Institute of Public Health — INSP) on the impact of the nutrition and food programme in urban areas shows that, in comparison with the 2002 baseline, children less than six months old who received aid under the Oportunidades programme were, on average, one centimeter taller and weighed 0.5 kg more than children who did not. At the beginning of 2010, it was announced that the programme’s coverage would be expanded from five million to 5.8 million families, or some 28 million people.

Licosa is the entity responsible for coordinating the Programa de Abasto Social de Leche (Social Milk Supply Programme), which distributes milk fortified with vitamins and minerals at below-market prices to families who live in conditions of extreme poverty (mainly boys up to 12 years old, girls up to 15 and women between the ages of 45 and 59, and those who are pregnant or breastfeeding). The programme has a network of community stores which supply the milk to the eligible population. Licosa was benefitting close to 5.6 million people in 2007; a year later, this figure reached 6,030,725 beneficiaries.

The Programa de Apoyo Alimentario (Food Assistance Programme) run by the National Coordination Office for the Oportunidades Human Development Programme starting in 2010, promotes actions to improve diet and nutrition in households in extreme poverty that do not receive support from other federal government programmes, such as Oportunidades. The regulations governing its operations were reformed in 2009.

This programme benefitted close to 143,000 households in 2007. Given the similarities between it and the Programa Alimentario en Zonas de Atencion Prioritaria (Food Programme in High Priority Areas — PAZAP), the two were consolidated in 2009 into a single, stronger programme, under the name Apoyo Alimentario (Food Assistance). Between 2007 and 2008, the programme’s coverage was expanded significantly, from 118,881 households to 240,190 by the end of 2008.

There is also the Programa de Desayunos Escolares (School Breakfast Programme) which has been run by the DIF for more than 60 years. The programme provides healthy meals to preschool and school-aged children whose nutrition situation is considered to be precarious, in public schools throughout the country. This programme is carried out in coordination with local DIF offices in each state. It has been estimated that 5.5 million children are covered under the programme by federal funds, but no consolidated mechanism yet exists for the systematic collection of information that would allow the overall performance and results of the programme to be assessed.

Additionally, in order to address the worrying increase in overweight and obesity in Mexico, the Federal Government announced the Acuerdo Nacional para la Salud Alimentaria (National Agreement on Healthy Diet) at the beginning of 2010. This is a strategy, using a multifactorial and intersectoral approach, to combat overweight and obesity, conditions that are considered a public health priority by the country. It provides for the creation of a Foro Nacional para la Prevencion del Sobrepeso y la Obesidad (National Forum on the Prevention of Overweight and Obesity), made up of the Federal Government, state and municipal governments, the food industry, academia, civil society organizations, union representatives and stakeholders from other sectors, that will provide a space for the exchange of ideas and knowledge, joint responsibility and accountability regarding the national strategy.

There are ten points to this strategy: promote physical activity in all settings; increase availability, access to and consumption of safe drinking water; reduce the consumption of beverages high in sugar and fat; increase the consumption of fruit and vegetables, whole grain cereals, legumes and dietary fiber; improve labeling on food products to facilitate decision-making and healthier diets among the population; encourage and protect exclusive breastfeeding in the first six months of life and support appropriate complementary dietary practices thereafter; reduce intake of sugars and other sweeteners added to food products; reduce daily saturated fat intake in the diet and minimize consumption of industrial sources of trans-fat; provide the population with guidance on proper portion sizes for home-cooked meals and encourage restaurants and food vendors to serve smaller
portions, as well as decrease daily sodium intake\textsuperscript{97}.

Regarding public investment in nutrition, the last few years have seen nominal increases in areas such as community nutrition and health services (which basically refer to support given by Di-consa). However, as a percentage of total government spending between 2005 and 2007, these levels have remained very low at around 0.1 per cent. The same applies to other areas of nutrition spending, such as nutrition services in institutions for the treatment of acute malnutrition, that also do not exceed 0.1 per cent of government spending, despite the fact that these expenditures have grown significantly in absolute terms in recent years.

The food component of the \textit{Oportunidades} programme that relates to the provision of micronutrients and selective food assistance (and includes the \textit{Abasto Rural}/\textit{Rural Supply} and \textit{Apoyo Alimentario}/\textit{Food Assistance} programmes) grew significantly during the same period, but still represents a meagre proportion of total government budgets\textsuperscript{98}.

Although the Federal Government has made combating overweight and obesity a top public health priority, it is not yet possible to clearly identify the components and activities aimed specifically at achieving this objective within existing programmes. This makes calculating actual budget allocations for this effort a challenge. Nevertheless, research conducted in areas where programmes such as \textit{Oportunidades} or \textit{Apoyo Alimentario}/\textit{Food Assistance} operate has shown reductions in the percentage of body fat among female beneficiaries of these initiatives. This suggests that cash-transfer and/or food-assistance programmes are facing the dual challenge of promoting healthy diets and lifestyles at the same time\textsuperscript{99}.

**Children and HIV/AIDS**

Compared to many other nations, Mexico has a low prevalence of HIV (0.3 per cent in 2007). The epidemic is mainly concentrated in groups that practice risky behaviors: men who have sex with other men; sex workers and intravenous drug users. There are significant variations in the number of AIDS cases between states. For example, according to data up to 31 March 2009, the most affected areas were the Federal District, the state of Mexico and Veracruz, with 16.9 per cent, 11 per cent and 9.1 per cent of accumulated cases, respectively. States such as Zacatecas and Baja California Sur account for only 0.5 per cent of all cases, and Tlaxcala 0.7 per cent\textsuperscript{100}. According to estimates from the \textit{Centro Nacional para la Prevenci\~{o}n y Control del VIH/SIDA} (National Centre for the Prevention and Control of HIV/AIDS — CEN-SIDA), in 2007 around 200,000 adults were living with HIV\textsuperscript{101}.

After increasing slowly during the early years of the epidemic, there was an exponential increase in the number of cases recorded during the second half of the 1980s. By the beginning of the nineties, this growth began to slow and the epidemic has declined significantly from 1994 onward\textsuperscript{102}. Nevertheless, between 2007 and 2008, the number of AIDS cases registered at the close of each year increased markedly, from 7,687 in 2007 to 12,437 cases in 2008, which represents a 61.8 per cent increase\textsuperscript{103}.

A profile of the concentrated epidemic reveals that the highest number of cases diagnosed between 1983 and 2006 were among adult males, accounting for 81.6 per cent, whereas in adult women the accumulated case load stands at 16 per cent, or 17,496 cases. The proportion of affected children under the age of 15 has remained relatively stable during this period, at 2.4 per cent, culminating with 2.3 per cent in 2006, as shown in Table 2.3.

Examining the accumulated cases of AIDS by age and gender, using figures dating from 31 March 2009 (see Table 2.4), shows that, overall, the 0-to-14-year age group has remained steady at 2.4 per cent; but breaking the data down by gender reflects significant differences, with girls accounting for 6.2 per cent of cases and men, for only 1.5 per cent\textsuperscript{104}. The fact that the proportion of cases is higher in females between 0 and 14 years old suggests that perinatal transmission plays a more important role in women than it does among men, especially given that—as age increases— men account for a far larger number of cases than women. Indeed, men account for almost four times more cases than do women in the 15-to-29 year age group and five times more in the 30-to-44-year age group, which may be indicative of a higher tendency toward sexual transmission between men.
Despite the lack of disaggregated data for the 15-to-29-year age group, this cohort accounts for the second largest concentration of accumulated cases between 1983 and March 2009 (almost 30 per cent), exceeded only by the 30-to-44-year age group, which represents 47.8 per cent.

For many years, and in the majority of countries, the HIV/AIDS epidemic was not directly associated with children and adolescents. Nowadays, it is well understood that young people are particularly vulnerable to its impacts and transmission. HIV/AIDS also has a devastating effect on children, going well beyond the public health problems it poses.

The presence of HIV/AIDS in the lives of children and adolescents has a special impact, with multiple collateral effects. Diagram 2.3 illustrates the ways in which children’s rights to health, equality, education and family life may be put in jeopardy if either parent becomes infected.

Children and adolescents (under the age of 18) make up a significant proportion of Mexico’s total population. According to projections from the 2005 population census, this group represented 35 per cent of the total population in 2009, equivalent to 37.5 million people, 19.1 million males and 18.4 million females. Although children and adolescents are not the main group directly affected by HIV/AIDS, the epidemic does constitute a vulnerability factor for them, given the risks they are facing.

In Mexico, AIDS constitutes the fourth most common cause of death in the 15-to-29-year age group. Recent data shows that the number of accumulated cases in the 0-to-14-year age group between 1983 and March 2009 stands at 3,099 (1,664 boys and 1,453 girls). Between January and March 2009 alone, eleven new cases in this age group were diagnosed.

Between 1983 and March 2009, of the 3,099 recorded cases in the 0-to-14-year age group (which also included the category of “cause unknown”), 63.8 per cent resulted from perinatal transmission (59.13 per cent for boys and 69.33 per cent girls); the average number of cases for both sexes caused by blood transfusion was 7.68 per cent; and sexual transmission accounted for 2.8 per cent (1.8 per cent males and 1.0 per cent females). Worth noting is the fact that Mexico’s high standards and procedures for donating, obtaining, processing, storing and clinical usage of blood have virtually eradicated HIV transmission via blood transfusions.

It is evident, therefore, that the predominant means of transmission in this age group is perinatal, although sexual transmission represents a significant mode among men (4.5 per cent of accumulated cases between 1983 and 2009 resulted from this means of transmission).

In addition to the challenges of preventing mother-to-child transmission of HIV in Mexico, children and adolescents in specific circumstances face varying degrees of vulnerability. Children living or working on the street; those who are institutionalized or deprived of their liberty; young people affected by the consumption of addictive substances or who are victims of abuse or commercial sexual exploitation — all face a higher risk of contracting HIV/AIDS and thus require specific social and institutional responses.

In order to ensure that HIV/AIDS programmes are of high quality and based on the best available

<table>
<thead>
<tr>
<th>Population groups</th>
<th>Cases diagnosed in 2006</th>
<th>Cumulative cases 1983-2006</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>per cent</td>
</tr>
<tr>
<td>Under 15 years</td>
<td>115</td>
<td>2.3</td>
</tr>
<tr>
<td>Adult males</td>
<td>3,893</td>
<td>77.0</td>
</tr>
<tr>
<td>Adult females</td>
<td>1,047</td>
<td>20.7</td>
</tr>
<tr>
<td>Unknown age</td>
<td>0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Note: 2006 is the latest year for which information disaggregated in this manner is available.
Source: Ministry of Health, Department of Epidemiology; National AIDS Registry. See www.censida.gob.mx
Diagram 2.3 How HIV/AIDS can impact the lives of children and families

- HIV infection
  - Increasingly serious illness
    - Children may become caregivers for sick relatives
    - Psychosocial stress
      - Deaths of parents and young children
      - Children without proper care by adults
        - Discrimination
        - Exploitative child labour
        - Sexual exploitation
        - Life on the streets
      - Problems with inheritance
        - Reduced access to healthcare services
          - Increased vulnerability to HIV infection
          - Economic problems
            - Children drop out of school
            - Inadequate nutrition
            - Problems with shelter and material needs


empirical evidence, national monitoring and assessment systems are essential. This requires the systematic collection of disaggregated data on both the impact of the epidemic on children and adolescents as well as the programmatic response. Improving current information systems is thus a key priority.

Mexico’s legal framework contains various provisions relating to the prevention, care and control of HIV/AIDS in the general population, which may also be applied to children and adolescents. These are set forth in the Constitution and several subordinate laws, as well as in official Mexican regulations specifically issued to guide their implementation. Likewise, the commitments contained in a number of international treaties and conventions are binding on the country, following their ratification by the Mexican Government. There are also a number of international documents which, while not mandatory, help guide the actions and policies of Governments, in order to enforce the rights of people living with HIV/AIDS.

According to the Constitution, all individuals must be free to exercise their rights and guarantees on an equal basis. These rights include the right to health protection and access to healthcare, and the right not to be discriminated against as a result of a health condition or for any other reason contrary to human dignity whose purpose is to deny or diminish the rights and freedoms of individuals.

The Constitution also states that all children and adolescents are entitled to special protection, ensuring the full satisfaction of their needs for food, health, education and play, in order to develop to their full potential. Furthermore, it is the State’s responsibility to do everything possible to bring about a climate of respect for the dignity of children and the full exercise of their rights.

These constitutional rights are regulated by a number of subordinate laws which include the General Law on Health; the Federal Law on Pre-
vention and Eradication of Discrimination and the Law for the Protection of the Rights of Children and Adolescents. These contain general provisions on the prevention, treatment and care of HIV/AIDS, especially in benefit of vulnerable groups; prevention of discrimination and stigmatization, and promotion of equal opportunities and treatment. Regarding children and adolescents, these laws also establish the obligation to provide special HIV/AIDS care, and encourage prevention and information programmes, in order to assure that affected individuals are able to develop to their fullest, which means opportunities to develop physically, mentally, emotionally, socially and morally in conditions of equality, according to the principles of non-discrimination and the best interests of the child.

Specific provisions on HIV/AIDS prevention, treatment and care in Mexico are also provided for in a range of official regulations and standards which set forth measures, guidelines and criteria that must be observed in all public, social and private healthcare facilities in the country, and by the authorities responsible for prevention, control and medical attention of HIV/AIDS. These standards and agreements regulate different issues relating to treatment of patients; confidentiality of information; lawful access to and use of information; access to medication; obligation to create specific information, education and communication programmes and campaigns on the prevention of HIV/AIDS; prohibiting and reducing stigma and discrimination against these patients, among others.

The rights to health protection, non-discrimination and equality laid out in the framework of actions for the prevention, control and treatment of HIV/AIDS in children and adolescents are also spelled out in a number of international treaties and conventions to which Mexico is party, such as the International Covenants on Civil and Political Rights, and Economic, Social and Cultural Rights; as well as the American Convention on Human Rights, the Elimination of All Forms of Discrimination against Women, and most specifically, the Convention on the Rights of the Child.

In response to the World Health Organization’s urgent call to address the worldwide HIV/AIDS epidemic, in 1986, Mexico established the Comite Nacional para la Prevencion del SIDA (National Committee on the Prevention of AIDS — CONASIDA), which two years later became the Consejo Nacional para la Prevencion y Control del Sindrome de la Inmunodeficiencia Adquirida (National Council for the Prevention and Control of Acquired Immune Deficiency Syndrome).

In 2001, CONASIDA became the Centro Nacional para la Prevencion y Control del VIH/SIDA (National Centre for the Prevention and Control of HIV/AIDS — CENSIDA), a decentralized agency under the Ministry of Health. Since then, CENSIDA became the interagency coordinating body dedicated to strengthening initiatives for the prevention and control of HIV/AIDS and other sexually transmitted diseases.

Table 2.4 New and cumulative cases of pediatric AIDS (0-14 years old), by mode of transmission and gender, (1983-2009)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cases diagnosed in 2009*</td>
<td></td>
<td>Cases diagnosed in 2009*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number</td>
<td>per cent</td>
<td>Number</td>
<td>per cent</td>
</tr>
<tr>
<td>Perinatal</td>
<td>5</td>
<td>62.5</td>
<td>984</td>
<td>79.0</td>
</tr>
<tr>
<td>Blood</td>
<td>0</td>
<td>0.0</td>
<td>182</td>
<td>16.6</td>
</tr>
<tr>
<td>Sexual</td>
<td>3</td>
<td>37.5</td>
<td>56</td>
<td>4.5</td>
</tr>
<tr>
<td>Unknown***</td>
<td>0</td>
<td>(0.0)</td>
<td>442</td>
<td>(27.1)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>8</td>
<td>100.0</td>
<td>1,532</td>
<td>100.0</td>
</tr>
</tbody>
</table>

* Data as of 31 March 2009.
** The category of “unknown” was excluded from the calculation of percentages, but is shown in parentheses to show its magnitude.
Source: SSA, DGE, RNCS, see: www.censida.gob.mx
Panel 2.3 Prevention of mother-to-child transmission of HIV: the work of the National Institute of Perinatology

In 1988, the first HIV-positive pregnant woman was given medical attention at the “Isidro Espinosa de los Reyes” National Institute of Perinatology (INPER) in Mexico, which provides specialized care for women experiencing high-risk pregnancies, gynecological or infertility problems, and other pre-gestational risks (risks prior to conception).

Despite the fact that national HIV prevalence among pregnant women was very low at the time – estimated at 0.04 per cent – it was decided that a Comprehensive Programme for the Care of Pregnant Women with HIV was needed to provide quality care for women who came to the Institute for help in managing their infection and to reduce the chances of passing HIV to their children. From its inception through December 2007, 198 HIV-positive women have received care under the programme, which has evolved in three stages: the first, centered on obstetric care of the mother and paediatric follow up of their children, showed a 22 per cent incidence of HIV transmission. The second stage focused on preventative monotherapy for pregnant women who were treated with the antiretroviral drug Zidovudine, which managed to reduce mother-to-child transmission to 10 per cent. The third stage, beginning in the year 2000, involved a new approach based on the following insights:

1. Providing mothers with optimal treatment is the best way to prevent mother-to-child transmission and keep both of them healthier longer;

2. Monotherapy (treatment based on a single medication) has a greater risk of failure due to the chance of drug resistance and limits the effectiveness of antiretrovirals (medication for the treatment of HIV) in subsequent treatment of mother and/or child;

3. Combined therapy, which includes treatment with several different types of antiretrovirals, is available in Mexico for all women who require it during and after pregnancy. This treatment obtains better results for both mother and child by decreasing the viral load in the mother, thereby reducing the risk of mother-to-child transmission of the virus.

The use of combined treatment and/or highly active antiretroviral therapy (HAART) was adopted as standard because of its ability to reduce mother-to-child transmission in more than 98 per cent of cases. It provides a greater chance of preserving and restoring function in the maternal immune system, thereby arresting progression of the illness in the mother and reducing the risk of resistance to antiretrovirals in both mother and child.

These treatments, together with elective caesareans and the inhibiting of maternal lactation, made it possible for 150 women taking part in the programme to maintain a 0 per cent perinatal transmission rate. Unfortunately, three women — whose serological status was unknown at the time and therefore were not given preventative treatment during gestation — transmitted HIV to their children.

The timely identification of a larger number of women with HIV is one of the principal challenges facing the programme run by the National Institute of Perinatology. To address this, the Institute is experimenting with a project that employs rapid oral HIV testing, under an assisted consent model, which over a period of six months has led to the identification of four women who were previously unaware that they were HIV-positive.

The programme also features ongoing research into the design of improved antiretroviral treatments for HIV-positive pregnant women, seeking greater safety and effectiveness. The research seeks to gain a deeper understanding of co-morbidity in pregnancy, highly active antiretroviral therapy and the effects of exposure to antiretrovirals on unborn children not infected by the virus.

Source: UNICEF, 2008a
CENSIDA’s key role is to propose national policies and strategies for the prevention, treatment and control of HIV/AIDS and sexually transmitted diseases (STDs), including preventing and combating the stigma and discrimination associated with these diseases, as well as encouraging concerted efforts between institutions in the public, social and private sectors.

Mexico’s institutional responses and public policies are reflected in a number of key documents which set forth the actions for dealing with the HIV/AIDS epidemic.

Panel 2.4 The “Four P’s”: goals of UNICEF and UNAIDS’ Unite for children, Unite with youth, Unite against AIDS campaign

**Prevent mother-to-child HIV transmission:** by 2010, offer services to prevent mother-to-child transmission of HIV to 80 per cent of women in need;

**Provide pediatric treatment:** by 2010, provide antiretroviral treatment and/or Cotrimoxazole to 80 per cent of children needing treatment;

**Prevent infection among adolescents and young people:** by 2010, reduce the percentage of young people living with HIV by 25 per cent globally;

**Protect and support children affected by HIV/AIDS:** by 2010, reach 80 per cent of children most in need.

Promoting sexual and reproductive health is one of the strategies laid out in the National Health Programme 2007-2012. The strategy promotes dissemination of information and education on reproductive health issues; fosters sexual and reproductive rights; and ensures reproductive health services for the entire population, with emphasis on adolescents.

Actions contemplated by the strategy, particularly those more closely linked to children and adolescents, include:

- **Carry out**, in coordination with the Ministry of Public Education, an ongoing sex-education campaign that fosters responsible sex and encourages the use of condoms among young people;

- **Introduce** an inter-institutional model for adolescent sexual and reproductive health with the goal of reducing fertility rates among adolescents between the ages of 15 and 19.

Specifically, the HIV/AIDS and Sexually Transmitted Disease Action Plan establishes the following goals for 2012 regarding children, adolescents and young people:

- **Ensure** that 100 per cent of pregnant women who receive medical treatment in public-health institutions are tested for HIV and syphilis;

- **Increase** condom use during sexual intercourse between young people, including young indigenous people, by 70 per cent;

- **Promote** negotiation of safer sexual relations;

- **Ensure** that at least 87 per cent of newborns born to HIV positive mothers do not acquire the virus by perinatal means.

Beneficiaries of the Seguro Popular health insurance programme have the right to receive treatment for diseases included under the Catastrophic Health Expenditures Fund, including intensive neonatal care, cervical-uterine and breast cancer, and antiretroviral treatment for HIV/AIDS, among others.

The Health Insurance for a New Generation scheme, mentioned earlier, covers Mexican children under the age of five born since 2006, and provides free healthcare related to prevention, diagnosis, treatment and rehabilitation. Newborns are protected against the main diseases that occur during the first five years of life, and children affected by HIV/AIDS receive antiretroviral treatment. By 2008, it was estimated that out of the 51,861 people living with the virus and receiving antiretroviral treatment, 24,581 of them received treatment supported by federal resources.

The Federal and state governments have made great strides in providing specialized attention to people living with HIV/AIDS: by August 2008, 52 Outpatient Clinics for the Treatment and Prevention of HIV/AIDS and Sexually Transmitted Diseases (CAPASITS) had already been established.
LOS DERECHOS DE LA INFANCIA EN MÉXICO: UNA AGENDA PARA EL PRESENTE

© UNICEF México / Mauricio Ramos
The right to education

The right to education is enshrined in the framework of civil, political, economic, social and cultural rights, as well as in the principles and goals set forth in the main international summits and treaties. Mexico has not only embraced these principles, but has incorporated the right to education in article 3 of its Constitution. The international legal framework on the right to education is provided for in numerous international agreements. This framework establishes that all children are entitled to quality education at no cost, and that the State is responsible for guaranteeing this right throughout the different stages of their lives. The law also states that minorities have the right to engage in their own educational practices and that the State must offer special attention to the education of vulnerable and/or minority groups, without discrimination, as well as eradicate gender disparities.

Mexico has made significant progress in terms of education rights fulfillment. The Committee on the Rights of the Child has recognized the country’s constitutional reforms making schooling mandatory and the measures enacted to close gaps in education and improve the quality of teaching. Nevertheless, in its recommendations to the Mexican Government following the country’s third report on compliance with the Convention on the Rights of the Child, issued in 2006, the Committee also expressed concern over “continuing low enrolment rates, especially among migrants and indigenous children; the insufficient resources allocated to education; the considerable disparities in the coverage and quality of education between urban and rural areas; high dropout rates, particularly among adolescents as well as rural, indigenous and migrant children; and the low quality of teaching.”

This chapter looks at the progress made in these and other areas of the national education system, as well as the challenges that stand in the way of achieving broader and more comprehensive fulfillment of the right of children and adolescents to education in Mexico.

Opportunities to access education and stay in school

Over the last three decades, average years of schooling among Mexicans more than doubled, going from 3.4 years in 1970 to 7.7 in 2008. This indicator shows significant differences between states; for example, the average number of years of schooling is 9.3 in the Federal District and 8.8 in Nuevo Leon, while in Oaxaca it is 6.4 and in Chiapas 5.7.

Making preschool education mandatory as of the 2004-2005 school year resulted in a rapid increase in the enrolment rate at this level of schooling. However, in 2007-2008, national coverage of preschool education (76.4 per cent) remained well below the levels reached by primary (101.4 per cent) and secondary schooling (83 per cent). This pattern extends to the majority of states, with the exception of ten where preschool education coverage exceeded that of secondary. The state with the lowest average at this education level is Baja California (60.7 per cent).

By the beginning of the 2007-2008 school year, practically the entire population had access to
primary schooling (101.4 per cent). Coverage at this level of schooling among children between the ages of six and 11 is almost universal, with the highest number of enrolments recorded in Baja California Sur (110.5 per cent), the Federal District (107.8 per cent), Baja California (106 per cent), Morelos (104.5 per cent) and Chiapas (104.3 per cent). Nevertheless, there are still several states, such as Quintana Roo (94.8 per cent), Aguascalientes (95.0 per cent), Yucatan (95.5 per cent), Campeche (96.7 per cent) and Colima (97.1 per cent), where there are significant numbers of children out-of-school at this level of education.

However, the same pattern is not evident among adolescents and their access to secondary schooling (81.5 per cent national average) during the 2007-2008 school year. The Federal District (100.9 per cent), Coahuila (92.3 per cent) and Baja California Sur (91.8 per cent) are the states with the highest levels of access. States such as Chiapas (64.6 per cent), Guerrero (69.9 per cent) and Campeche (72.6 per cent), with high levels of poverty, have the lowest coverage at this level.

Chiapas is one of the top five states for primary education coverage, but holds last place in terms of secondary education coverage.

Senior high school (for students 16-18 years old) coverage is lower than that of secondary schooling. During the 2007-2008 school year, the national average was 60.9 per cent in respect to the total population of 16 to 18 year olds, with a completion rate of 59.6 per cent. The Federal District (112.5 per cent) is the state with the highest level of access, whereas Chiapas (80.9 per cent) has the lowest.

Regarding gender equality in opportunities for access to education, much progress has been made in Mexico toward eradicating discrimination against women. Net coverage rates for women are higher than those for men at all levels of schooling, although the gender differences in enrolment do not exceed five per cent. In preschool, the rate for girls is 2.1 per cent higher than that of boys; in primary schooling, it is 1.2 per cent higher, and the largest differences are in secondary schooling, with 4.3 per cent, and senior high school with 3.4 per cent.

In general terms, widespread coverage of primary schooling for children is a significant achievement by the Mexican education system. However, there is still a long way to go toward guaranteeing full access to preschool and secondary schooling (which are mandatory levels of education) and above all, toward narrowing the education gap that exists between the states in all three levels of education.

The 2007 National Survey on Occupation and Employment (ENOE) indicates that there is still a significant number of children and adolescents between the ages of five and 17 who do not attend school (close to 1.6 million boys and 1.46 million girls). It is estimated that between one and two per cent of children in Mexico between the ages of six and 11 do not attend school because they are engaged in farm work or due to physical impediments.

Unequal opportunities for access persist, particularly in rural and highly marginalized areas,
where the likelihood of attending school remains low for children living in conditions of poverty.

In Mexico, children and adolescents who attend school the least live in low-income households or in rural areas. In 2008, although basic education attendance was high among children between the ages of five and 14 identified as poor (94.6 per cent of this age group attended school compared to 97.7 per cent of non-poor children), only 25.4 per cent of young people 15 and older attended school whereas attendance among non-poor children reached 35.5 per cent, a difference of 10 percentage points.

Among poor groups living in conditions of extreme food poverty, only 91.6 per cent of children and 18.9 per cent of adolescents and young people attended school. These percentages are worse among those who live in rural areas (18.1 per cent). This is largely due to the fact that children from extremely poor households are more likely never to have been enrolled in school or to drop out at one point or another to help support the family.

In respect to children between the ages of eight and 11 who attend school, three out of every 100 are lagging behind their age group due to extremely-delayed enrolment and are much more likely to drop out of primary schooling. Guerrero (7.4 per cent), Chiapas (6.9 per cent), Oaxaca (6.3 per cent), Veracruz (5.3 per cent) and Campeche (5.0 per cent) are the states with the highest levels of delayed enrolment. Oaxaca, Chiapas and Guerrero are critical states because they show higher levels of delayed enrolment in all three age groups.

These disparities begin to increase from the age of 11 to 7.1 per cent at national level, and rise to 8.6 per cent among 12-year-olds, which is the age that students should normally enter secondary schooling. Guerrero (19.1 per cent), Chiapas (18.9 per cent) and Oaxaca (17.6 per cent) are the states with high risk of age-grade disparity among its population about to reach secondary school; the situation is the opposite in Nuevo Leon (2.5 per cent), Tlaxcala (3.5 per cent) and the Federal District (3.6 per cent). Among young people between the ages of 15 and 17, seven out of every 100 are several years older than their standard grade level. In this group, the states with the highest age-grade disparities are — once more — Chiapas (14.7 per cent), Guerrero (13.4 per cent) and Oaxaca (13.1 per cent), in addition to Yucatan (11.3 per cent) and Veracruz (10.4 per cent).
Figures on extremely-delayed enrolment in all age groups are higher for male students than for females. Looking at students between the ages of eight and 11, 3.7 per cent of the boys and 2.5 per cent of the girls are at least two years older than their standard grade level. In the 12 to 14 years age group, the figure reaches 10.2 per cent among male and 6.6 per cent among female students. And in the third group — students between the ages of 15 and 17 — the figures stand at 8.4 per cent for boys and 5.7 per cent for girls. Graph 3.2 shows the differences by gender.

Extremely-delayed enrolment is a phenomenon that warrants attention because late access to education, failure and overage are factors that make school a less attractive and interesting place for children and adolescents, and tend to encourage drop-out.

The drop-out rate in primary schooling at the national level is 1.5 per cent. The rate is slightly lower for girls than for boys (1.3 per cent and 1.7 per cent, respectively). A state-by-state breakdown shows that Oaxaca, Michoacan and Chiapas are those with the highest primary school drop-out rates, standing at 5.5 per cent, 3.2 per cent and 2.6 per cent, respectively. In contrast, drop-out is close to zero in the states of Nayarit (0.01 per cent), Queretaro and Aguascalientes (0.2 per cent).

The national drop-out rate in secondary schooling is 7.4 per cent; in other words, seven out of every 100 students do not immediately enroll in the next higher grade. The state of Nuevo Leon has the lowest drop-out rate at this level (4.4 per cent), while Coahuila has the highest (at 11.6 per cent), followed by Michoacan (10.7 per cent) and Zacatecas (9.8 per cent).

Graph 3.3 shows that male students drop out of secondary school more than their female peers: nine out of every 100 boys and six out of every 100 girls drop out of school. Notably, drop-out rates among males in secondary are higher than those in primary schooling, which is a trend that can be observed across all Latin American countries.

The drop-out rate for senior high school (students between the ages of 16 and 18) is double that of secondary education. The national average for the 2007-2008 school year was 15.3 per cent, ranging...
from 22.7 per cent in Oaxaca to 11.0 per cent in Tlaxcala.\(^{30}\)

In 2006, 65.8 per cent of young people between the ages of 15 and 17 attended school (18 per cent were working and 16 per cent neither studied nor worked). Only 65.3 per cent of girls and 35.2 per cent of boys between the ages of 15 and 17 had completed their basic education.

The percentage of young people who only attend school is higher among females than among males in the 15 to 17 year age group (60.4 per cent compared to 52.7 per cent). In contrast, the percentage of males who only work is almost double that of females (24.4 per cent of males and 11.3 per cent of females between the ages of 15 and 17). Similarly, the percentage of young people who attend school as well as work is higher among males.

The most vulnerable groups among young people not attending school are those who drop out early, are employed or neither work nor study. The percentage of girls who neither work nor attend school was much higher (24.4 per cent of males and 11.3 per cent of females between the ages of 15 and 17). Interestingly, almost 90 per cent of these young women stated that they were engaged in housework. Similarly, of the males who neither studied nor worked, more than 50 per cent were seeking employment and a small percentage engaged in domestic chores (14 per cent in the case of young men between the ages of 15 and 17). But even more important is the fact that the highest percentage of young people who neither attended school nor worked had not completed their basic education.\(^{31}\)

These figures reveal a strong tendency for greater participation in the labour market among males than females. This phenomenon is influenced by the pressure faced by young men to contribute to family income, especially in more marginalized areas. This population is most likely to migrate in search of better work opportunities. According to the Migration Survey along the Northern Mexican Border, 896,709 crossings are made annually, of which 55 per cent are young migrants between the ages of 15 and 29. The vast majority migrate without having completed their basic education (54 per cent in 2000 and 40 per cent in 2005), and have an average of 7.7 years of schooling (average between 2000, 2005 and 2007).\(^{32}\)

Fulfilling the right to education not only implies universal access to schools, but also guaranteeing continuity and completion of the different levels of schooling at the expected age throughout the
different stages of early childhood, childhood, adolescence and youth. This section demonstrates that not all children and adolescents in Mexico enjoy this right under equal conditions.

**Beyond access: quality and equity in education**

Mexico has increased the average length of schooling of its citizens, which on average now extends to the second year of secondary school; however, there are a number of significant challenges that stand in the way of guaranteeing the appropriate conditions for quality education that assures equality in achieving the outcomes of learning, regardless of income, ethnic background or place of residence. There are still significant gaps in performance between students attending different kinds of schools (private, public, general or indigenous schools, etc.), which are directly related to the differences in quality of educational services, among other factors.

In 2008, while 50 per cent of private primary school students performed well in the *ENLACE* test, which is in Spanish, this figure dropped to 25 per cent in general primary schools, 7.7 per cent in community centres of the *Consejo Nacional de Fomento Educativo* (National Council for Promotion of Education — *CONAFE*) and 7.3 for indigenous primary schools. In mathematics, 42 per cent of private school students performed well, followed by 22 per cent in general primary schools, 8.5 per cent in indigenous schools and 6.9 per cent in *CONAFE* schools. In third year of secondary school, 47 per cent of students in private schools performed well in Spanish, compared to 16.7 per cent in general schools, 16.5 per cent in technical schools and seven per cent in *telesecundaria* (audiovisual-based learning) schools. Math test results were very similar.

There are also differences within the public education system itself. In the case of primary school students, their mathematics scores have improved; while only 16 per cent performed well in 2006, this percentage rose to 23 per cent in 2008 (the proportion of those scoring *excellent* rose from 1.6 per cent to 4.7 per cent over the same period). The percentage of secondary students who passed with a level of *good* was 3.8 per cent in 2006 and rose to 8.3 per cent in 2008, in the same subject. However, it is important to point out that there are clear differences in performance in the different kinds of schools. For example, while 8.5 per cent of students in indigenous schools achieved a score of *good* on their mathematics test in 2008, in private schools this percentage was 41.8. A similar situation prevailed in third year of secondary school, given that 27 per cent of students in private schools performed well, compared with 6.3 per cent in technical schools, 6.9 per cent in general schools and 6.7 per cent in *telesecundaria* schools.

Particularly worrisome are the results achieved by indigenous children; not only are they among the population with the least schooling, but they also obtain lower levels of learning achievement than the rest. As mentioned earlier, the test scores attained by indigenous students are lower than those of the urban-middle-class or non-indigenous groups. In rural areas it has been demonstrated that when indigenous children speak Spanish (as a first or second language), they tend to achieve grades comparable to those of their non-indigenous counterparts. However, non-Spanish speaking indigenous children barely manage to complete half the grades of schooling completed by their Spanish-speaking indigenous peers. This corroborates the fact that indigenous children face serious disadvantages in education. For example, in primary school, fully 52 per cent of children in indigenous schools obtained a score of unsatisfactory on the *ENLACE* test in Spanish; 40 per cent were graded as satisfactory; 7 per cent were rated as good and only 0.5 per cent scored *excellent*.

The data cited so far underscores the fact that educational inequality is not only reflected in the lack of opportunities for access, but also in the varying paths taken through school and the learning outcomes of Mexican children, adolescents and young people.
The sharp disparities in educational results are explained by a range of factors that relate to the school environment and the context in which schooling takes place. In other words, the education system offers education to a profoundly unequal population, in terms of socioeconomic and cultural conditions, as well as differing expectations — and the real possibility — of schooling and upward mobility.

Factors attributable to the school itself include those related to teachers, their training and work conditions, the material resources available at the school, and to pedagogical and administrative processes, as well as to parental participation in the classroom and overall life of the school.

A particular feature of education in Mexico is the multi-grade classroom. Created to meet demand in unfavorable contexts — such as locations with small populations where it would be very costly to provide a teacher for each grade — this mode of education is clearly unable to provide better learning conditions for disadvantaged groups.

Data for the 2007-2008 school year shows that 36.7 per cent of preschoolers are organized into multi-grade classes, the large majority of which are part of community courses (21.2 per cent), followed by general preschool services with 10.4 per cent, and only 5.2 per cent in indigenous services. A significant number of these preschoolers are living in adverse social contexts: 60.4 per cent of them are in general service programmes and practically all (94.2 per cent) in indigenous centres located in highly to very highly marginalized areas. There are 43,658 general, indigenous and community primary schools operating under the multi-grade school system, which represents a little over 44 per cent of the total number of primary schools in Mexico.
the country (the state of Chiapas has the largest number of multi-grade primary schools, with almost 70 per cent of its schools organized in this way). Lastly, there are 17,330 telesecundaria schools; just over 19 per cent of them have one or two teachers (3,359); 7.6 per cent have just one teacher and almost 12 per cent are staffed by two.

A fifth of the full-time telesecundaria schools operate with one or two teachers. In addition to the potential pedagogical difficulties of trying to teach students from three different grades at the same time, some of these schools do not have the infrastructure needed to work properly: they lack electricity, televisions, decoders and satellite dishes, and there are insufficient teaching materials.

Furthermore, wide disparities exist in terms of the quality of public services that go hand in hand with the level of household income/spending. When it comes to providing more comprehensive services (such as computers, libraries and number of classrooms, among other components), the schools attended by children from families in the lowest income quintile tend to be the worst equipped and maintained. Generally, these households are located in rural parts of the country, in the south and southwest and in indigenous communities.

There are also marked differences in terms of allocation of government resources to education services that do not favor groups with the greatest needs. For example, there are significant differences in school infrastructure and equipment. Close to 79 per cent of schools attended by low income children between the ages of six and seven have bathrooms, compared to 96 per cent of schools attended by children in the same age group but in the highest income quintile. Similarly, there are fewer classrooms in the poorer schools than in those attended by children from higher income households (10 classrooms compared to 13). The student-to-computer ratio is far from evenly balanced in terms of varying income and poverty levels: poorer children attend schools with fewer computers. There are almost four textbooks per student in the highest quintiles (3.7), while in the lowest income/poverty quintile, the student-to-textbook ratio is 2.4. Moreover, the student-to-teacher ratio (a proxy measure of the resources allocated to schools) is 23 students per classroom in schools attended by children from the lowest income quintile, compared to 19 students in the highest income quintile.

The education of migrant children also deserves special attention. In 2008, 90 per cent of students who attended the Preschool and Primary Education Programme for Children of Migrant Farm Workers (PRONIM) were over-age in all grades; 70 per cent of the enrolment was in first and second grades, and the incidence of repetition was high. This is due in part to the high mobility among migrant families, which constantly interrupts students’ studies. In addition, enrolment and accreditation can pose problems since many children lack identification documents and the certificates that demonstrate prior studies. One problem worth noting is that most teachers, both in the states of origin and destination, are not bilingual and only speak Spanish; therefore, they cannot offer relevant education that addresses the different cultural and linguistic backgrounds of students who migrate from state to state. Classes for migrant populations are offered in four educational models: general schooling; indigenous schooling under the Department of Indigenous Affairs; Intercultural Education for Migrant Children (MEIPIM) operated by CONAFE, and PRONIM, which comes under the Office of the Under-Secretary of Basic Education.

The quality of teachers in indigenous communities has a strong influence on the quality of education. Initial training of these teachers is often inadequate; teachers enter service with only a senior high school diploma and receive in-service, distance training for their certification. In addition, their initial training does not prepare them to teach Spanish as a second language, which is a crucial part of their work at school.

Thus, children who live in conditions of vulnerability are attending schools that are the most lacking in resources. Instead of compensating for the disadvantages students face, these schools tend to exacerbate them.

The right to be respected in school
Quality in education is also reflected in learning environments that respect social and gender differences and are healthy, safe and protective.
Quality schools aim to enable children and adolescents to develop their abilities to the fullest.

A recent study\textsuperscript{148} aimed at listening to the voices of children and adolescents in Mexican public schools (primary and secondary) shows that 80.6 per cent of children from 4th and 5th grades feel good about being in school; to a lesser extent, some see school as a kind of “refuge” that provides sanctuary and protection, particularly when there is violence in the home or the family is going through difficult times. The survey showed that 64.9 per cent of 6th graders said that boys and girls participate equally in the classroom, which suggests that both groups feel comfortable about expressing their points of view in front of their classmates. This leads to good communication at school, which is crucial because it reflects the freedom of children to exercise their right to express their opinions on questions that affect them.

The study found that teachers consider boys and girls equally capable of succeeding in any subject, with the exception of handicrafts, where girls are considered to be better. This is an encouraging sign of a more egalitarian vision among teachers in terms of the ability of boys and girls to develop equally. However, strong gender prejudices still prevail. For example, girls are seen to suffer greater pressure with respect to their personal appearance (they report that they are often scolded for using nail polish or wearing lipstick, very short skirts, fashionable hairstyles or large earrings); boys, for their part, report being called out for behaviour deemed “feminine” or for having long hair or wearing earrings.

Violence in schools often goes undetected, and it is seldom understood that schools can be venues for sexual and psychological abuse, or verbal taunting that makes children feel uncomfortable, such as in the case of sexist jokes. For example, the study found that 50.2 per cent of teachers believe that gender-related problems do not exist; 19.2 per cent of teachers acknowledge that there are groups that use intimidation in their classrooms in the form of threats of physical violence, verbal aggression and harassment; 11.7 per cent recognize the existence of verbal aggression and discriminatory attitudes; and 10.7 per cent detect mild insults as part of games and competitions. The fact that such a large proportion of teachers do not acknowledge any problems whatsoever may indicate that violence has become invisible and routine.

A survey conducted among senior high school students between the ages of 15 and 18 in 2008\textsuperscript{149} underscored certain characteristics of the school environment experienced by adolescents and young people. For example, while the majority of the respondents said they were against violence, a high percentage reported having suffered abuse (43 per cent of males and 23 per cent of females said that they had been insulted and called offensive nicknames). Furthermore, students reported being under high levels of stress and having difficulties interacting; 56.9 per cent felt overly criticized at home; 58.5 per cent found it difficult to make friends; 62.9 per cent frightened easily and 72 per cent said they felt anxiety. Also, a high percentage of young people felt there was poor communication at home: 61.8 per cent stated that they did not get along with their parents.

These results indicate that significant challenges lie ahead in order for schools to become safer and more inclusive learning environments. The environment schools offer children must assure protection and not prove counterproductive to learning and the full development of students’ abilities. The difficulties identified suggest that students should be encouraged to open a dialogue aimed at addressing problems that arise at school, in order to discourage negative behaviours that are often viewed as something natural.

Teachers have the opportunity to confront violence. They can undergo training and take action jointly with students to document, identify and counteract violence, by creating school environments founded on the principle of zero tolerance for violence. The attitudes of teachers — the habit of discussing with students the problems that arise in class; listening to the different parties involved in conflicts; keeping in contact with parents and actively intervening to resolve disputes — will make it possible to reduce hostile school environments\textsuperscript{150}.

Bringing about learning environments that are friendlier and less violent requires children and adolescents to exercise their right to participate; in other words, the existence of institutional mechanisms that allow them to speak out and have their views considered on issues that affect their lives and development. Learning to participate
begins in the family and at school, the most common environments for children and adolescents. Encouraging participation in these settings helps to strengthen self-esteem, as well as democratic values and the exercise of good citizenship, in addition to involvement in their community and the feeling of belonging.

Regarding the legal framework on the right to education, the right of all citizens to receive education is established in diverse legal instruments in Mexico. The country’s Constitution views education as the primary means for development and strengthening the abilities of individuals so that they may participate actively in social and economic development. By providing and regulating educational services, the State seeks to build a more democratic, equitable and inclusive society, and one with a national identity. Article 31 also holds parents and other caregivers jointly responsible for assuring that their children or wards receive an education.

Article 2, chapter III of the General Education Law establishes that individuals may exercise their right to education under equitable conditions. It holds the State responsible for implementing strategies to ensure access to education and improve the coverage of all educational services, while providing every opportunity for students, parents or guardians, and society in general, to participate in this undertaking. In other words, the law establishes the State’s obligation to provide education so that the entire population may attend preschool, primary and secondary school (children and adolescents between the ages of three and 14), which corresponds to the period of mandatory basic education in Mexico.

Panel 3.2 Adolescence: participation to unleash potential and face challenges

Adolescence is a transitional phase between childhood and adulthood that can be broken up into three stages for analysis: early (from 10 to 13 years old), middle (from 14 to 16) and late (from 17 to 19). It is a critical stage during which the experiences, knowledge and abilities acquired have significant implications for life as an adult. The people in this age group experience enormous challenges that range from interpersonal relationships and building an identity, to cultivating behaviors and capabilities that lay the foundations of a productive life as an adult.

The design of policies for adolescents must start with a holistic framework that generates environments which comprehensively protect their rights, bolster their abilities and opportunities, while reducing the risks they face, especially for those from poor or vulnerable sectors. To achieve this, listening to what they have to say and understanding their needs are key factors.

The Convention on the Rights of the Child establishes that all children and adolescents capable of forming their own views have the right to express those views freely in all matters affecting them. It also stipulates that it is the State’s obligation to assure that their views are given due weight in accordance with their age and level of maturity.

However, in practice, public policy has not made young people between the ages of 10 and 17 a priority; their specific needs are often overlooked in programme design, primarily due to the lack of suitable channels for making their opinions heard.

The participation of adolescents in their everyday environments, such as school, family and the community, has numerous benefits for their own development and that of their families and communities. This participation increases opportunities for interaction and generates competencies for channeling their creativity and energies toward new ideas needed to resolve social problems. Participating and exercising life skills gives adolescents a greater awareness of their rights which, in turn, helps to protect them from violence, exploitation, stigma and discrimination, the lure of criminal networks and other risks that are present at this stage in their lives.

Panel 3.3 Young people as protagonists of their own life project: the Construye-T programme

Created in 2008, the Construye-T programme is an innovative public policy initiative aimed at senior high school students that fosters the comprehensive development of young people in inclusive, equitable and democratic educational environments. During the 2008-2009 school year, 1,634 federal and state schools took part in the programme, which involved around 1.5 million young people between the ages of 15 and 18.

The programme is a joint initiative of the Office of the Vice Minister for Senior High School Education coming under the Ministry of Public Education; a network of 26 civil society organizations; the United Nations Children’s Fund (UNICEF), the United Nations Development Programme (UNDP) and the United Nations Educational, Scientific and Cultural Organization (UNESCO).

The programme addresses situations of vulnerability faced by young people that may hinder their full development, by offering educational alternatives and creating spaces for protection, inclusion, participation and recognition of rights.

The main goals of the Construye-T programme are participation of young people in the design and execution of projects, as well as working with parents to analyse and address the challenges faced by young people today and provide them with tools to help them develop their own life project.

The programme focuses on the following dimensions:

1. Self-awareness. By developing actions so that young people become more aware of their internal world and creative and expressive potential through play, artistic and poetic creation;

2. Healthy life. This dimension seeks to go beyond the prevention of substance abuse or the detection and referral of cases of abuse and addiction, by fostering an all-around state of wellbeing linked to healthy diet, increased fitness, improvements in environmental health and encouraging greater consciousness and commitment to their surroundings;

3. Culture of peace and non-violence. Encourages reflection on the social and cultural significance of violence, as well as on the fear of being victims, in order to lay the groundwork for peaceful conflict resolution;

4. School and family. The objective is to strengthen links between different members of the educational community to build a healthy coexistence based on dialog and interaction, which favors interrelation between the worlds of adults and young people;

5. Youth participation. Promotes interaction between young people and a range of other social actors, identifying rights, needs, obligations and roles that come together to make decisions about socialization processes, in order to strengthen construction of good citizenship;

6. Building a life project. This is about going beyond the traditional focus of vocational orientation as a tool for choosing a profession, and taking a broader approach that addresses the individual’s history and potential, capabilities and aspirations, in order to achieve personal fulfillment and meaning.

Construye-T operates under an organizational structure created expressly for each school: the “Construye-T Committee,” made up of specially trained teaching and administrative personnel, invites students and their families to participate in its activities. The committees are supported by advisors and fulltime facilitators from networks of participating civil society organizations in each state of the country, whose purpose is to establish, implement and evaluate the programme at each of its different stages.

Source: Office of the President of Mexico, 2009; SEP, 2008c.
Under the *Un Mexico apropiado para la infancia y la adolescencia* (Mexico, A Country Fit for Children and Adolescents) 2002-2010 Action Plan that came out of the UN General Assembly Special Session on Children, Mexico committed itself to the Millennium Development Goals of increasing enrolment in basic education and preschool coverage, eliminating the gap in coverage in primary and secondary education and increasing the percentage of students with satisfactory levels of communicative competencies and mathematical skills.

The current Education Sector programme (2007-2012), and the *Alianza por la Calidad Educativa* (Alliance for Quality in Education 2008) signed by the Federal Government and the National Education Workers’ Union (*SNTE*), set forth the current administration’s educational goals and policies aimed at the effective fulfillment of children’s right to education.

The programme, drafted in accordance with the National Development Plan, establishes goals and targets on issues pertaining to education in Mexico. One of the objectives aims at increasing quality in education. To achieve this, one of the strategies is a comprehensive reform of basic education, centered on the adoption of a competencies-based education model that is in line with Mexico’s 21st century development imperatives.

Senior high school education is also undergoing reform to bring together a single, nation-wide system in a framework that respects the diversity of models, provides a sense of belonging and relevance to the studies, allows students to move freely between subsystems and offers a national senior high school diploma.

The main objective of the Alliance for Quality in Education is to bring about a widespread education movement in which society oversees and takes ownership of the commitments required under this far-reaching transformation of the national education system. Although the Sector Plan provides the main framework for the current administration’s term in office, the Alliance is a key component in the creation of public policies at all levels of government in that it establishes a vehicle for interaction between the main political forces in education and provides the *SNTE* with far greater legitimacy to take part in the formulation of education policy.

The decentralization of education in Mexico dates back to 1992, with the *Acuerdo Nacional para la Modernización de la Educación Básica* (National Agreement on Modernization of Basic Education — *ANMEB*). The Federal Government transferred resources and responsibilities for the operation of basic education (preschool, primary and secondary) to the 31 states, which took charge of teacher training, curriculum, evaluations and compensatory programmes. One year later, the General Education Law codified the ideas outlined in the agreement.

This process resulted in the creation of numerous federal programmes aimed at addressing regional disparities that could be exacerbated by decentralization, given the fact that each state now had to pay for its own educational services. Through these programmes, the Federal Government contributes to the education provided by the states. These programmes may be grouped according to their focus — on quality or equity in education.

The first group of programmes includes: *Escuelas de Calidad* (Quality Schools — *PEC*) and the *Programa Nacional de Lectura y Enciclopedia* (National Reading and Encyclopaedia Project), both run by the Ministry of Basic Education. Prominent among the second group of programmes are the *Educación Comunitaria* (Community Education) and *Acciones Compensatorias para Abatir el Rezago Educativo en Educación Inicial y Básica* (Compensatory Actions to Narrow Gaps in Basic Education) programmes, operated by the National Council for Promotion of Education, as well as the *Oportunidades* programme coordinated by *SEDESOL*. All of these initiatives are aimed at populations with low lev-
els of educational achievement and high poverty. Other programmes include initiatives of the Office of the Under Secretary of Basic Education targeting children with disabilities, children of migrant farm workers and young mothers-to-be.

Two programmes among those mentioned earlier that are worth highlighting represent efforts to improve educational opportunities through social participation of all stakeholders. The PEC gives school principals, teachers and parents greater responsibility and decision-making powers. CONAFE’s programmes help children and adolescents in vulnerable and marginalized areas to enter and remain in school. This is achieved through administrative and educational infrastructure initiatives; distribution of teaching materials; training and advice for parents and teachers and economic support for parents associations – all of which is aimed at strengthening school management, providing incentives for teachers and administrators and building stronger institutions.

In remote and isolated settlements, the community education approach emphasizes local knowledge and encourages community members to participate in education.

Social participation in education dates back to the ANMEB agreement, which set the stage for the establishment of councils for social participation in basic education in municipalities and states throughout the country. Subsequently, in 1999, the Consejo Nacional de Participación Social en la Educación (National Council for Social Participation in Education—CONAPASE) was created as a national institution for consultation, collaboration, support and information. Its purpose is to encourage participation by society and promote activities aimed at strengthening and improving the quality of basic education, as well as broadening coverage.

Although these strategies to promote participation involve a range of stakeholders in the school community, they are not particularly focused on the participation of children and adolescents in classroom pedagogy or in other matters affecting them at school. Furthermore, while regulations allow for formal participation in student associations, these bodies are seldom effective where they are established at all.

Introduced more recently are Escuelas de Tiempo Completo (Full Time Schools) and Escuela Segura (Safe Schools) programmes aimed at improving educational opportunities. The Full Time Schools programme involves extending school hours (offering up to 1,200 hours of classes annually). This programme operates in public schools providing basic education, preferably those in poor, urban areas, or for indigenous or migrant children, and in schools already offering extended hours but showing poor results. The Safe Schools programme (PES) provides economic support to schools to improve the security of students, teachers, administrators, parents and the community.

The Oportunidades programme, in coordination with the Ministry of Public Education, provides scholarships for 2.48 million children in primary school (1.26 million boys and 1.22 million girls); 1.76 million adolescents in secondary and 849,776 young people in senior high school, who live in conditions of extreme poverty156. The scholarships are offered to students from third grade in primary school through third year in senior high school; girls receive larger scholarships than boys starting in the first year of secondary school. Evaluations of the programme demonstrate that it effectively increases school attendance and reduces failure rates157.

Another programme aimed at supporting the family economy so children can exercise their right to education is the National Senior High School Scholarship programme. The programme helps academically promising students living in conditions of patrimonial poverty in rural and/or urban areas with high and very high poverty rates, to enroll or continue senior high school studies. Likewise, the Young Pregnant Women’s Scholarship programme helps these women to continue and complete their basic education. This is yet another programme aimed at fostering greater equity and nondiscrimination among adolescents who become mothers at an early age.

The Ministry of Public Education also offers a number of specific programmes and study plans for the most vulnerable groups, such as indigenous and migrant populations.
The Department of Indigenous Education (DGEI), which is part of the Ministry of Public Education, is responsible for assuring that the states offer indigenous populations quality basic education in a framework of diversity and equity. Educational models are applied that include students’ language and culture as part of the curriculum, enabling them to develop competencies for successful participation in school, work and as citizens in the knowledge society, contributing to human and social development as a people and as a nation.158

In the 2007-2008 school year, indigenous education services were attended by 1,283,049 indigenous students, 49 per cent of them girls and 51 per cent boys. These were distributed across preschool, for children between the ages of three and six, accounting for 29.8 per cent of total coverage; and primary school, for pupils between the ages of six and 14 and above, which corresponds to 65.3 per cent of programme coverage. General schools were also attended by indigenous children, of whom 312,886 were girls and 331,376 boys (49 and 51 per cent, respectively). Of the total enrolment, preschool accounted for 2.73 per cent of indigenous pupils, primary 48.63 per cent and secondary 48.65 per cent.

The Programa de Educación Básica para Niños y Niñas de Familias Jornaleras Agrícolas Migrantes (Basic Education Programme for Children of Migrant Farm Workers — PRONIM) offers education to the children of migrant farm workers in 21 states. This programme has an integrated model of basic education adapted to the specific circumstances of the lifestyle this population leads; the programme develops special institutional and school administration schemes, and adopts an intercultural approach both in terms of curriculum and teacher training. Enrolment in the programme increased from 14,024 students in 2002 to 20,634 in 2008.

Similarly, the CONAFE operates the Modalidad Educativa Intercultural para Población Infantil Migrante (Intercultural Education for Migrant Children — MEIPIM), whose primary objectives are to reduce fragmentation of the school experience of children of migrant farm workers through the design and implementation of the single primary school initiative and a national school administration system for migrant populations. The system fosters equity for migrants in public schools, permanency, timely certification of studies and improved learning opportunities. This programme caters to approximately 10,000 children in preschools and secondary schools in 18 states throughout the country.

The Programa de Atención a Jornaleros Agrícolas (Farm Workers Assistance programme) of the Ministry of Social Assistance Development complements the efforts of other institutions, helping to overcome the educational obstacles faced by these groups. It does so by coordinating actions between the three levels of government, and the various social and private sectors. It seeks to create conditions that enable migrant farm workers and their families to access equitable opportunities in education and broaden their abilities, using an approach that is sensitive to gender and ethnic perspectives. Among the actions worth highlighting are the “single grade report card” project for beneficiaries attending primary school and additional formal education support to overcome gaps (economic incentives, food vouchers, packages of school supplies and uniforms).161

Another programme aimed at migrants is the Programa Binacional de Educación Migrante Mexico-Estados Unidos (Mexico-United States Bi-national Migrant Education programme — PROBEM), which supports Mexican migrant children and young people by providing basic education through Community Plazas in the United States (spaces with tutors, educational television and Internet). In 2008, the programme helped approximately 15,000 individuals to continue their self-directed studies.

Table 3.2 outlines the purpose, coverage and 2009 budget of some of Mexico’s major educational programmes.

As already pointed out, fulfilling the right to education requires the availability of schools and teachers as well as the elimination of obstacles that stand in the way of this endeavour. To accomplish this, it is essential that education be free and mandatory: the former urges the State to provide services without restrictions or conditions, while the latter refers to...
decisions that jeopardize children’s education. Indeed, both are interdependent, given that education cannot be mandatory if it is not accessible and free. Consequently, free and mandatory education requires that this right be regulated by law and guaranteed by the State. The General Education Law sets forth teaching standards to which the Federal Government, states and municipalities, decentralized agencies and private parties must conform. For this reason, the Federal Government transfers resources and responsibility for operating basic education systems to the 31 states.

Graph 3.4 shows that between 2003 and 2007, an average of 7.02 per cent of GDP has been channeled into education in Mexico.

National spending on education increased between 2003 and 2007, according to the Instituto Nacional de Evaluación de la Educación (National Institute for the Evaluation of Education — INEE). The highest real growth took place during 2003, while the lowest was reported in 2007. Increases were progressive, reaching a total of 64,324 million pesos.

Graph 3.5 shows that public and private spending on education has grown over the period analysed. This fulfills the government’s obligation under article 27 of the General Education Law, which requires the federal and state governments to allocate increased funding, in real terms, to public education.

The OECD reports that in 2005, the member countries that spent the most on education were Denmark, Iceland, Korea and the United States, allocating at least seven per cent of GDP to this budget line, followed by Mexico and New Zealand, each with 6.5 per cent. Israel — the country that allocates the highest percentage of its GDP to education — outspends Mexico by 1.5 per cent, while Korea, Iceland and the United States invest at least one per cent more in this sector than Mexico. Worthy of note is the fact that Mexico allocates a higher percentage of its GDP to education than either Canada or Chile. Also, Mexico’s expenditures on education account for the highest percentage of total government spending (23.4 per cent) of all OECD countries — almost doubling their average (13.2 per cent). Federal contributions to states and municipalities for education (Branch 33 of the budget) represent approximately 10 per cent of public spending in the entire country, as detailed below.

Comparing Mexico with Israel, Iceland and Denmark — which have similar numbers of school-age children as a percentage of total population — we see that these countries allocate on average 7.8 per cent of GDP to education, while Mexico only invests 6.5 per cent of GDP. This figure is used to meet the needs of more than 30 per cent of the country’s
### Table 3.2 Principal educational programmes in Mexico

<table>
<thead>
<tr>
<th>Programme</th>
<th>Department/Agency</th>
<th>Purpose of the programme</th>
<th>Number of people covered (2008-2009)</th>
<th>Approved budget in 2009 (mdp)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Model of Early Childhood and Basic Education for Mestizo Populations</td>
<td>CONAFE</td>
<td>Education coverage in locations with high to very high levels of poverty.</td>
<td>31,327 children and adolescents</td>
<td>2568.61</td>
</tr>
<tr>
<td>Basic and Community Education Model for Migrant Indigenous Populations.</td>
<td>CONAFE</td>
<td>Education coverage in locations with high to very high levels of poverty.</td>
<td>4,778 children and adolescents</td>
<td>159.23 in 2008</td>
</tr>
<tr>
<td>Compensatory Actions to Narrow Gaps in Basic Education.</td>
<td>CONAFE</td>
<td>Support for children and young people from vulnerable sectors who have access to and are in basic education.</td>
<td>5,947,868 children and adolescents</td>
<td>2,090.85</td>
</tr>
<tr>
<td>Preschool and Primary Education Programme for Children of Migrant Farm Workers</td>
<td>SEP</td>
<td>Children of migrant farm workers receive basic education.</td>
<td>22,385 children of migrant farming families in school centres</td>
<td>71.82</td>
</tr>
<tr>
<td>Scholarship Programme to Support Basic Education for Young Mothers and Mothers-to-be</td>
<td>SEP</td>
<td>Help young mothers and mothers-to-be between the ages of 12 and 18 living in vulnerable conditions to complete their basic education within three years.</td>
<td>4,438 adolescent and young women</td>
<td>52.2</td>
</tr>
<tr>
<td>Programme to Strengthen Special Education and Inclusion in Schools</td>
<td>SEP</td>
<td>State education systems that have programmes to assist students with special educational needs.</td>
<td>23,089 schools</td>
<td>662.36</td>
</tr>
<tr>
<td>National Reading Programme</td>
<td>SEP</td>
<td>Bolster school strategies to promote reading.</td>
<td>102,822 children</td>
<td>26.63</td>
</tr>
<tr>
<td>Farm Workers Assistance Programme</td>
<td>SEDESOL</td>
<td>Greater access to basic education services and infrastructure by farm workers.</td>
<td>650,277 migrant farm workers and their families living in conditions of poverty 27,747 children from 0 to 5 years; 48,110 children from 6 to 14 years</td>
<td>228.25</td>
</tr>
<tr>
<td>Quality Schools Programme</td>
<td>SEP</td>
<td>Effective school administration in public basic education schools.</td>
<td>39,993 schools</td>
<td>1,499.83</td>
</tr>
<tr>
<td>Oportunidades Human Development Programme</td>
<td>SEP, IMSS, HEALTH, SEDESOL</td>
<td>Expand basic abilities in terms of education, health and nutrition of families that receive scholarships</td>
<td>5,049,206 families with 4,209,081 children with basic education scholarships and 728,638 adolescents with senior high school scholarships</td>
<td>46,340.9</td>
</tr>
</tbody>
</table>

* The UN average exchange rate for 2009 is 13.44 pesos per dollar.

Source: UNICEF with information from CONEVAL, 2009a.
population. According to the INEE\textsuperscript{169}, spending on education is increasing, but not at the same pace as population growth and demand for educational services. Looking at spending allocated to education in Latin America, Mexico comes in second place behind Cuba, but ahead of Costa Rica and Colombia, and exceeds the world average by 0.6 per cent, developing countries by 1.1 per cent and Latin American countries by 1.5 per cent\textsuperscript{170} (see Table 3.3).

Education spending in Mexico is shared among the federal government, which provides 80 per cent of all resources, the states, which provide 19 per cent, and municipalities, which contribute a small fraction, 0.2 per cent of the total, as shown in Table 3.4.

\begin{figure}
\centering
\includegraphics[width=\textwidth]{graph3.6.png}
\caption{Graph 3.6 Public and private spending on education as a percentage of GDP in selected OECD countries.}
\end{figure}

\begin{figure}
\centering
\includegraphics[width=\textwidth]{graph3.7.png}
\caption{Graph 3.7 Decentralized federal spending on education, by state, 2007}
\end{figure}

\textsuperscript{*} The UN average exchange rate for 2009 is 13.44 pesos per dollar.

\begin{table}
\centering
\begin{tabular}{|l|c|c|c|}
\hline
\textbf{Country} & \textbf{Public spending} & \textbf{Private spending} \\
\hline
Canada & \% PIB & Total & Public spending & Private spending \\
\hline
Chile & \% PIB & Total & Public spending & Private spending \\
\hline
Korea & \% PIB & Total & Public spending & Private spending \\
\hline
USA & \% PIB & Total & Public spending & Private spending \\
\hline
Iceland & \% PIB & Total & Public spending & Private spending \\
\hline
Israel & \% PIB & Total & Public spending & Private spending \\
\hline
Mexico & \% PIB & Total & Public spending & Private spending \\
\hline
\end{tabular}
\caption{The rights of children and adolescents in Mexico: a present day agenda.}
\end{table}
Federal education expenditures are distributed among the different levels of education as follows: 60 per cent to basic education; 10 per cent to senior high schools; 20 per cent to higher education and the remainder to other educational services, such as job training, adult primary and secondary schools, and the promotion of culture and sports. Since 1997, with the objective of strengthening the decentralization process, the federal government annually transfers funds to the states for allocation to educational services coming under Branch 33 and Branch 25 of the budget, the latter covering basic education, teacher education and training services in the Federal District.

The main fund through which these federal resources are channeled to the states is the Fondo de Aportaciones para la Educación Básica y Normal (Fund for Basic Education and Teacher Training — FAEB), which represents 9.6 per cent of total public spending and the vast majority of which (99.6 per cent) is allocated to personnel services, in other words, the payment of wages and salaries. According to the OECD, 92 per cent of spending on primary, secondary and post-secondary education in Mexico goes to pay wages and salaries.

In 2007, the states which received the largest share of these resources were the Federal District, the State of Mexico, Veracruz, Oaxaca, Jalisco and Chiapas. All of them, with the exception of Oaxaca, recorded the highest numbers of students enrolled in basic education at the start of the 2007-2008 school year (see Graph 3.7).

Secondary schools receive more public spending per student than any other level of basic education, while for post-basic education, expenditures are highest at the university level. A comparison of investments made between 2000 and 2008 shows that there was a slight increase in spending per student over the period, with 2003 and 2005 recording the highest investments at national level (see Table 3.5).

Spending on education by families themselves must also be taken into account. This includes school uniforms, transportation and contributions to parent or community associations, all of which constitute a direct expense for families.
Mexico is the OECD country that allocates the highest percentage of public spending to education; however, it has been unable to convert this into improved quality of education or universal access to preschool and secondary schooling for all children.

Table 3.5 Public spending on education per student, by educational level, (1994-2008) (in pesos¹ 2003*)

<table>
<thead>
<tr>
<th>Year</th>
<th>National education spending per student</th>
<th>Preschool</th>
<th>Primary</th>
<th>Secondary</th>
<th>Professional technical school</th>
<th>Senior high school</th>
<th>Higher education</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>15,278</td>
<td>9,247</td>
<td>8,395</td>
<td>12,897</td>
<td>13,019</td>
<td>18,616</td>
<td>41,490</td>
</tr>
<tr>
<td>2001</td>
<td>15,121</td>
<td>9,317</td>
<td>8,540</td>
<td>12,977</td>
<td>13,088</td>
<td>18,744</td>
<td>41,815</td>
</tr>
<tr>
<td>2002</td>
<td>14,911</td>
<td>9,303</td>
<td>8,467</td>
<td>12,962</td>
<td>13,171</td>
<td>18,815</td>
<td>42,125</td>
</tr>
<tr>
<td>2003</td>
<td>15,829</td>
<td>9,390</td>
<td>8,546</td>
<td>13,082</td>
<td>13,142</td>
<td>18,774</td>
<td>42,033</td>
</tr>
<tr>
<td>2004</td>
<td>15,791</td>
<td>9,438</td>
<td>8,534</td>
<td>13,153</td>
<td>13,002</td>
<td>18,660</td>
<td>41,687</td>
</tr>
<tr>
<td>2005</td>
<td>15,981</td>
<td>9,444</td>
<td>8,536</td>
<td>13,168</td>
<td>12,895</td>
<td>18,526</td>
<td>41,410</td>
</tr>
<tr>
<td>2006</td>
<td>15,200</td>
<td>9,597</td>
<td>8,732</td>
<td>13,401</td>
<td>13,141</td>
<td>18,848</td>
<td>42,191</td>
</tr>
<tr>
<td>2007</td>
<td>15,426</td>
<td>9,703</td>
<td>8,806</td>
<td>13,535</td>
<td>13,046</td>
<td>18,672</td>
<td>41,828</td>
</tr>
<tr>
<td>2008e</td>
<td>15,612</td>
<td>9,825</td>
<td>8,889</td>
<td>13,724</td>
<td>13,100</td>
<td>18,714</td>
<td>42,029</td>
</tr>
</tbody>
</table>

¹ Estimate
* Nominal values of national education spending were deflated in accordance with the National Producer Price Index (NPI) for education services by origin of production, and the remaining categories with the sub-index for public and additional education. The monthly NPI was annualized taking December 2003 as a base and the same year as a reference.

Source: INEE, estimates from data reported by the Department of Planning and Programming, SEP and the NPI for education services by origin of production calculated for January 1994 through September 2008, BANXICO.

Data from the National Survey on Income and Household Expenditure (ENIGH 2008) shows that per household, at national level, the percentage of total household expenditure (quarterly average) allocated to education is 9.9 per cent. This represents a gradual increase of 3.3 per cent since 2000, when it stood at 6.6 per cent; in other words, there has been a 50 per cent increase. However, taking into account the reduction in total household expenditure in real terms caused by food price inflation and the financial crisis, the increase in household expenditure on education between 2000 and 2008 was closer to 30 per cent rather than 50 per cent.

In summary, Mexico has increased spending on education over the last five years and is the OECD country that allocates the highest percentage of public spending to this sector. Nevertheless, compared to other countries with similar demand for education services in terms of population, Mexico invests less. The efforts made so far to address growing education demand have not resulted in improved quality of education or universal preschool and secondary schooling for all children. Poor results in terms of educational achievement and high drop-out rates demonstrate the need for a more strategic approach to spending on education in order to empower the most disadvantaged sectors of the population. Access, permanency, quality and equity in education continue to be the challenges that budgeting for education must address.
The right of children and adolescents to protection in contexts of high vulnerability

Article 2 of the Convention on the Rights of the Child establishes that the States Parties are responsible for guaranteeing the rights set forth in the Convention and assuring that they apply to all children within their jurisdiction without exception.

Furthermore, article 4 stipulates that the States Parties are obligated to adopt all administrative, legislative and other measures for the implementation of the rights recognized in the Convention. In other words, they must create a comprehensive child rights protection system. The Convention requires the adoption of specific measures to guarantee special protection of the rights of children in highly vulnerable contexts, as in cases where they become separated from their families for whatever reason. Further examples of this are article 19, related to special protection from violence; article 20, referring to a child deprived of his or her family environment; article 32, which refers to protection from economic exploitation and from performing any work that is likely to be hazardous or to interfere with the child’s education, or to be harmful to the child’s health or development; and articles 37 and 40, which refer to special protection for children illegally deprived of their liberty and the obligation to create specialized justice systems for adolescents accused of committing a crime.

The Mexican Constitution, as well as federal and local laws, also recognizes a number of rights that must be respected for all children and adolescents, equally and without distinction, to assure they develop to the fullest. To accomplish this, the State, in coordination with families and the community, must adopt specific laws, policies, programmes and actions aimed at implementing these rights, above and beyond mere recognition under the law.

When laws guaranteeing effective fulfillment of the rights of children and adolescents fail, for whatever reason, or in other words, if the rights recognized by international instruments and national legislation are not fulfilled or they are violated, a special response is required to restore the unfulfilled rights and ensure comprehensive protection. Thus, a comprehensive system for the protection and respect of rights is a necessity.

As in many other countries in the region, children and adolescents in Mexico are exposed to diverse forms of rights violations. This chapter will look at four highly vulnerable contexts which require special attention:

1) Unaccompanied migrant children;
2) Children exploited for their labour;
3) Children who experience violence; and
4) Adolescents in conflict with criminal law and subjected to the juvenile justice system.

Generally speaking, there is a dearth of in-depth, systematic, up-to-date and disaggregated information on children and adolescents who find themselves in these vulnerable contexts. This has been noted by the Committee on the Rights of the Child which, based on observations it made to the third State of the Mexican Nation report on compliance with the Convention, recommended...
that the Government intensify “its efforts to develop a system for the comprehensive collection of data covering all children below the age of 18 years and disaggregated by sex and by groups of children who are in need of special protection”\textsuperscript{175}.

**Unaccompanied migrant children and adolescents**

The flow of migrants is explained to a large extent by the existence of development gaps and conditions of inequality between regions or countries. Currently, international money transfers to families in their countries of origin, the creation of migrant networks in destination countries and job opportunities in developed countries facilitate and encourage international migration. In addition, people may be forced to migrate for political reasons, generalized violence, natural disasters and internal conflicts, among others\textsuperscript{176}.

Mexico shares a border of 3,200 kilometres long with the United States in the North and a frontier of more than a thousand kilometres with Guatemala and Belize in the south, across which there are abundant and complex migratory flows. One of the least visible faces of these flows are children and adolescents who travel without an adult, whether seeking to link up with their families or secure a better future, through opportunities for education or work, or the need to escape family violence, trafficking or exploitation\textsuperscript{177}.

Migrating alone exposes children to a range of dangers that put their health, physical integrity, dignity and even their lives at risk. They are vulnerable to exploitation, sexual trafficking and sex work, as well as to physical and sexual abuse.

In Mexico, there are three main sources of data on unaccompanied migrant children: the Ministry of Foreign Affairs (\textit{SRE}), the National Migration Institute (\textit{INM}) and the National System for Integrated Family Development (\textit{DIF}). Although these three sources do not agree in all respects (since they have different information systems and records linked to each institution’s role during the migration process), their figures provide valuable information on the scale of the problem.

According to data from the \textit{SRE}\textsuperscript{178}, in 2008, Mexico’s Consular Network along the United States border repatriated 17,772 unaccompanied migrant children and adolescents. Eighty-three per cent of them were males and 17 per cent females. According to the same source, that year saw the repatriation of 493 indigenous children (included in the overall count mentioned above), of whom 123 (25.89 per cent) were Mixtecs, 70 (14.74 per cent) Zapotecs and 68 (14.32 per cent) Nahuas.

The \textit{INM}, on the other hand, reported that more than 32,075 children and adolescents were repatriated\textsuperscript{179} in 2008 to Mexico from the United States, of whom 18,192 were unaccompanied.

Mexico repatriated 4,314 unaccompanied children and adolescents to their countries of origin. In 2009, 25,993 children and adolescents were repatriated to Mexico from the United States, of whom 15,561 were traveling alone.

The main origins of the unaccompanied migrant children repatriated in 2008 were Michoacan (9
In 2008, Mexico undertook the repatriation of 5,204 migrant children and adolescents from Central America, of whom 3,565 (68 per cent) were migrating alone. Forty-seven per cent of them came from Honduras, 38 per cent from Guatemala, 15 per cent from El Salvador and the rest from Nicaragua.

As regards to caring for the unaccompanied migrant children and adolescents who are repatriated, the Network of Halfway Houses for the Care of Children and Adolescents in Transit, coordinated by the DIF, reports that the number of children and adolescents passing through their doors has been growing over the last few years, going from 7,620 in 2001 to 21,366 in 2007.

Breaking down the information by gender shows that over a seven-year period (2001-2007), the proportion of boys increased from 66 per cent in 2001 to 80 per cent in 2007, whereas the proportion of girls dropped from 34 per cent in 2001 to 20 per cent in 2007, even though in real terms the number of migrant girls actually doubled. An analysis of the annual statistics between 2001 and 2007 from the DIF’s Network of Halfway Houses — which collects information on migrants under the age of 18 — shows that a significant proportion of children and adolescents it cared for over this period had had access to primary schooling, and a good number of them had even studied one or two grades in high school.
As a result of stricter border security measures over the last few years, migratory flows are diverting to ever more dangerous regions, which exacerbates the already risky practice of crossing borders, increases the involvement of human traffickers and multiplies the chances of rights violations.

The number of people who die attempting to cross the border has increased in recent years. In only seven years, there have been 2,839 documented deaths of people attempting to cross the Mexico-United States border -101 of them were children181.

The growing risks described here have brought increasing public and institutional attention in Mexico to the situation of unaccompanied migrant children and the need to protect their rights. Since the mid-1990s, a number of studies and discussion forums have focused specifically on child migration, making the problem more visible and leading to the design of strategies, procedures and mechanisms to protect migrant children and adolescents.

At the same time, Mexico has ratified international legal instruments related to the protection of migrant children, such as the Convention on the Rights of the Child (1990) and the Convention on the Protection of the Rights of All Migrant Workers and their Families (1999)182, in addition to signing bilateral agreements on consular protection and border cooperation in matters of migration183.

Of great relevance, therefore, are the bilateral agreements between Mexico and the United States of America for the safe and orderly repatriation of unaccompanied minors, which date back to 1997. These arrangements signifies great progress in migration matters given that, among other things, they allowed for special procedures for repatriations of unaccompanied minors and specified the points of entry and times for carrying them out. There are similar accords between Mexico and Central American countries governing repatriations via land crossing points and for the protection of women and child victims of trafficking. Likewise, in 2007, the Regional Conference on Migration (RCM)184 approved regional guidelines for special protection in cases of the repatriation of child and adolescent victims of trafficking.

In 2009, the RCM also passed regional guidelines to help the eleven country members of the RCM ensure the protection of the rights of children and adolescent in cases of repatriation.

In this context, the Programa Interinstitucional de Atención a Menores Fronterizos (Inter-institutional Programme for the Care of Minors in Border Regions), headed by the DIF, in coordination with the INM, the SRE and other public institutions, is the strategic framework for the protection of the rights of migrant children. This programme has been strengthened considerably since 2007.

Additionally, there has been one particularly innovative initiative aimed at responding to the child migration phenomenon: the Inter-institutional Roundtable on Unaccompanied Migrant Children, Adolescents and Women (referred to here as the Roundtable), set up by the Office of the Deputy Minister for Population, Migration and Religious Affairs, coming under the Ministry of the Interior, in March 2007. Several federal institutions and international organizations participate in the Roundtable185, which constitutes a strategic mechanism for inter-institutional coordination to address this multidimensional phenomenon. It also promotes binding agreements on measures and mechanisms to guarantee the rights and foster effective protection of women and unaccompanied children and adolescents who enter and leave Mexico.

One of the most relevant results of the work undertaken by the Roundtable has been the design and implementation of a Model for Protecting the Rights of Unaccompanied Migrant Children and Adolescents in Cases of Repatriation. The model covers the various stages and institutions that intervene to assure suitable protection of children and adolescents during the migratory process. Diagram 4.1 illustrates the model that is used in cases where children are repatriated to Mexico from the United States.

The model begins with the intervention of the SRE, which coordinates the Network of Mexican Consulates in key cities along the United States border, and provides consular assistance to Mexican children and adolescents repatriated from the United States.
Diagram 4.1 Model for protecting the rights of unaccompanied migrant children and adolescents, northern border region

START

The child is located

Sent to DHS*

Is the child Mexican?

NO

NO

Verify respect of child’s rights

Are the child’s rights respected?

NO

The INM receives the child in Mexico

NO

CONSULATE receives child and verifies nationality

NO

CONSULATE issues repatriation

YES

The INM receives the child in Mexico

YES

Taken to shelter in border state

Does the family come to pick up the child?

NO

The INM receives the child to Care Facility in border state

YES

Activation of local inter-institutional protection system

Activation of the Local Inter-institutional Protection System in place of origin

DIF delivers child to Care Facility

DIF delivers child to family in state DIF

DIF delivers child to family in community of origin

END

* Department of Homeland Security

Source: Inter-institutional Roundtable on Unaccompanied Migrant Children, Adolescents and Women
Once in Mexican territory, the children are received by the INM and sent to the Network of Halfway Houses for the Care of Children and Adolescents in Transit, coordinated by the DIF, which is made up of 27 public and private shelters. There, the repatriated children are provided with food, lodging, healthcare and clothing. The authorities then try to locate family members and verify the relationship; finally, the children are reunited with their families and sent to their respective states of origin.

To properly apply the model, a group of Child Protection Officers (OPIS) was created in 2008, made up of INM officers who are especially trained to deal with unaccompanied migrant children and adolescents. The OPIS are tasked with protecting the rights of migrant children and adolescents who are being repatriated. Mexican children repatriated to Mexico from the United States are received on the northern border and sent to the DIF. In order for the OPIS to fulfill their role as defenders of child rights, they receive specialized training and work hand in hand with the national and state DIF, the Mexican Refugee Assistance Commission (COMAR), UNICEF, the United Nations High Commissioner for Refugees (UNHCR) and the International Organization of Migration (IOM).

The Roundtable is finalizing the design of another rights-based repatriation model for unaccompanied foreign children and adolescents who are repatriated by Mexico to their countries of origin (see Diagram 1 in Appendices).

These actions constitute significant steps toward fulfilling the recommendations of the Committee on the Rights of the Child to provide special protection for unaccompanied migrant children, including closer institutional and operational collaboration, the identification of children who require international protection (refugees or asylum seekers) and international cooperation to safeguard the rights of children who are repatriated.

**Child labour**

Child labour constitutes a violation of the rights of children and adolescents, especially the right to protection from exploitation, healthy growth, education, play, culture and sport; in short, a violation of their right to develop to the fullest. Child labour is an obstacle to social and economic development in every country, as it undermines the competencies of future workforces, drives the intergenerational transmission of poverty and perpetuates existing disparities.
The causes of child labour in Mexico can be elucidated by different levels of analysis. In many social sectors, child labour is associated with myths and cultural norms handed down from generation to generation. One of the most widespread beliefs is that child labour is unavoidable, acceptable and even beneficial. In addition, and especially in times of crisis, households are often faced with falling incomes, unemployment or low job security, and wages that are insufficient to cover family needs, so that child labour may come to substitute – or at least complement – parents’ incomes.

The most recent official figures available indicate that in Mexico, there are 3,647,067 children between the ages of five and 17 who work, out of a total of 29,203,394 children in this age range. This means that 12.5 per cent of the child population between the ages of five and 17 (in other words, one out of every eight) currently works.

Of the total number of child workers in the country, the majority (69 per cent) are aged between 14 and 17; but 1.1 million (or 31 per cent) are between five and 13 years old, which means they have not reached the legal working age set forth in the Constitution and the Federal Labour Law.

Child labour manifests itself differently in boys and girls. Among children between the ages of five and 17 who work, 67 per cent are boys (2,441,070) and 33 per cent girls (1,205,997). These percentages do not vary when calculated independently for the two age ranges, which means that boys’ involvement in child labour is approximately double that of girls in both the five to 13 year age group and the 14 to 17 year age group (see Table 4.1).

Approximately seven out of every 10 child workers between the ages of five and 17 live in rural areas of Mexico, and three out of every 10 live in cities. Around 24 per cent of workers between the ages of five and 17 are concentrated in three states: State of Mexico, Jalisco and Puebla.

Almost a third of all workers between the ages of five and 17 engage in activities related to the farming and livestock sectors (29 per cent), which is equivalent to 1,058,063 children. The second most common form of work for child workers is...
commerce (25.3 per cent), followed by services (23.7 per cent), manufacturing (14.2 per cent) and construction (6 per cent).

More boys (37.4 per cent of the total) work in the farming and livestock sectors than girls. Girls are heavily represented in commerce and services, accounting for 36.9 per cent and 31.6 per cent, respectively.

The number of boys who work may be practically double that of girls, as mentioned above, but the true picture becomes clearer when domestic chores carried out by both genders, in their own homes, are taken into account.

Nationally, 19.3 million children between the ages of five and 17 (six out of every 10) help out with domestic chores, whether caring for other family members; contributing to the maintenance of the home or other property; carrying water or washing and ironing clothes; food preparation; doing the housecleaning or taking care of the shopping and other activities. Approximately 40 per cent of them have turned 14, whereas 60 per cent are aged between five and 13. This means that children under 14 are engaged in domestic chores far more than children aged 14 and over. This contrasts sharply with the age makeup of child workers overall (where more than two thirds have already turned 14). It is also important to note that girls in both age ranges participate more than boys in domestic chores (10.5 million and 8.8 million, respectively).

As mentioned, the incidence of participation in domestic chores (understood as work carried out around the home, generally without pay) is very different for boys and girls, regardless of age, considering that almost 60 per cent of all boys engage in these kinds of activities compared to more than 72 per cent of girls — a difference of close to 13 percentage points between the groups. This difference remains constant across both age groups, and even increases among children between the ages of 14 and 17. In other words, 63.2 per cent of girls compared to 55.5 per cent of boys in the five to 13 years age group, and almost 93 per cent compared to 69.3 per cent, respectively, between girls and boys in the 14 to 17 years age range. It seems evident, therefore, that the number of children who work will vary when participation in domestic chores — in which girls
are significantly overrepresented — is taken into account (see Table 4.2).

Similarly, if we estimate the percentage of children who engage in domestic chores, either exclusively or in combination with other activities, the incidence in boys reaches 59.8 per cent, but exceeds 72.5 per cent among girls\(^1\). In other words, not only do girls participate more than boys in domestic chores and the care of other children, but they undertake these household tasks simultaneously with other activities, such as going to school and engaging in paid labour.

One of the most reprehensible consequences of child labour is the difficulty that child workers have attending school; and when they do, achieving adequate performance. At its worst, child labour has a harmful affect on the process of schooling, interfering with one of the most fundamental rights that children possess. There are a variety of reasons why children do not attend school – and not all of them are linked with child labour – however, it is important to be aware of the magnitude of poor attendance or drop-out among working children.

In Mexico, the enrolment rate among the total population between the ages of five and 17 is 89.5 per cent, which means that 10.5 per cent of children in this age range do not attend school. In absolute terms, this means that 3,074,874 children are not receiving an education — 52 per cent boys (1,611,669) and 48 per cent girls (1,463,205).

School absenteeism is notably higher among child workers than that seen in the total number of children: 41 out of every 100 child workers between the ages of five and 17 do not attend school, which is almost four times the rate for the overall child population (10.5 per cent). This situation is worse among boys, where the incidence of absenteeism is close to 44 per cent, compared to girls whose rate of absenteeism is just under 37 per cent.

One of the most marginalized and vulnerable groups are the children of migrant farm workers. In Mexico, farm workers are seasonal workers from the countryside who are responsible for sowing, harvesting, picking and preparation of farm products. Due to the unequal regional development of the country, many workers from rural

### Table 4.2 Number of children who participate in domestic chores, by gender and age group, 2007 (per cent)

<table>
<thead>
<tr>
<th>Age group</th>
<th>Boys</th>
<th>%(^1)</th>
<th>Girls</th>
<th>%(^1)</th>
<th>Total</th>
<th>%(^1)</th>
<th>%(^2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 to 13</td>
<td>5,618,001</td>
<td>55.5</td>
<td>6,246,844</td>
<td>63.2</td>
<td>11,864,845</td>
<td>59.3</td>
<td>61.5</td>
</tr>
<tr>
<td>14 to 17</td>
<td>3,193,696</td>
<td>69.3</td>
<td>4,249,335</td>
<td>92.9</td>
<td>7,443,031</td>
<td>81.0</td>
<td>38.5</td>
</tr>
<tr>
<td>Total</td>
<td>8,811,697</td>
<td>59.8</td>
<td>10,496,179</td>
<td>72.6</td>
<td>19,307,876</td>
<td>66.1</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: UNICEF from INEGI, 2008b.

1. Incidence of participation in domestic chores in terms of total population in the categories of gender and age group.
2. Percentage distribution of all children between the ages of five and 17 who engage in domestic chores by age group.

### Table 4.3 Total child population, number of working children (between the ages of five and 17), by school attendance, 2007 (per cent)

<table>
<thead>
<tr>
<th>Attendance</th>
<th>Boys</th>
<th>per cent(^1)</th>
<th>Girls</th>
<th>per cent(^1)</th>
<th>Total</th>
<th>per cent(^1)</th>
<th>Boys</th>
<th>per cent(^1)</th>
<th>Girls</th>
<th>per cent(^1)</th>
<th>Total</th>
<th>per cent(^1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attend</td>
<td>13,124,232</td>
<td>89.1</td>
<td>13,004,171</td>
<td>89.9</td>
<td>26,128,403</td>
<td>89.5</td>
<td>1,370,501</td>
<td>56.1</td>
<td>763,333</td>
<td>63.3</td>
<td>2,133,834</td>
<td>58.5</td>
</tr>
<tr>
<td>Do not attend</td>
<td>1,611,669</td>
<td>10.9</td>
<td>1,463,205</td>
<td>10.1</td>
<td>3,074,874</td>
<td>10.5</td>
<td>1,070,569</td>
<td>43.9</td>
<td>442,664</td>
<td>36.7</td>
<td>1,513,233</td>
<td>41.5</td>
</tr>
<tr>
<td>Not specified</td>
<td>117</td>
<td>0.0</td>
<td>-</td>
<td>-</td>
<td>117</td>
<td>0.0</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>14,736,018</td>
<td>100</td>
<td>14,467,376</td>
<td>100</td>
<td>29,203,394</td>
<td>100</td>
<td>2,441,070</td>
<td>100</td>
<td>1,205,997</td>
<td>100</td>
<td>3,647,067</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: UNICEF from INEGI, 2008b.

1. Percentage distribution of total child population in each category (boys, girls and total), by school attendance.
areas migrate to places where they can find work and in many cases, they bring their families with them.

Ensuring that the children of migrant farm workers are included in national statistics is an ongoing challenge. It is vitally important to determine just how scarce their access to basic services really is, and the resulting impacts on their nutrition, health, development, education and future prospects, given the fact that their rights require special protection.

According to the National Survey on Employment 2003, there were 3,000,623 farmhands and other farm labourers in the entire country, of whom an estimated 1,200,000 were migrants (40 per cent), most of them traveling with their families. The survey reported that 44 per cent of migrant farm worker households had at least one child who worked; these children accounted for 41 per cent of total household income.

This same survey estimated that approximately 300,000 children left their communities to migrate with their families to other states in search of work and income. In 2003, there were 19 child workers under the age of 14 for every 100 workers aged 15 or older; in other words, practically one out of every five farm workers was under the age of 14. Also noteworthy was the estimate that 44.9 per cent of farm workers’ families with children who also work are indigenous, which implies a radical change in customs, culture and language for children of migrating families.

According to the findings of the CLM of the 2007 ENOE, the main reasons children give for the need to work are related to their material contributions that go to pay for a variety of goods and services. Indeed, 68.4 per cent of all child workers indicated the need to cooperate in some way around the home, whether

---

Panel 4.1 Generating high-quality, up-to-date information: ENOE’s Child Labour Module

Mexico has made significant advances in terms of the availability and generation of data and information on child labour. A case in point is the Child Labour Module (CLM), which is part of the National Survey on Occupation and Employment 2007 (ENOE).

The module provides disaggregated information on the number of child workers, broken down in each state by gender, age, location and economic sector.

By including the module in the ENOE, Mexico will have at its disposal up-to-date, comparable information that can be used to track and address child labour trends over time.

The module was designed by an inter-institutional working team of technicians, led by the Ministry of Labour and Social Welfare and the National Institute of Statistics and Geography, with advice from the ILO and UNICEF.

---

Graph 4.2 Principal reasons for child labour (per cent)

- To learn a trade: 29.4 per cent
- To pay for school and/or personal expenses: 27.6 per cent
- The household needs their labour: 27.6 per cent
- The household needs their economic support: 11.4 per cent
- Other reasons: 8.1 per cent
- Does not want to go to school: 5.9 per cent

Source: UNICEF with information from INEGI, 2008.

* Includes payment of debts owed to employer and other reasons.
by providing income (11.4 per cent), labour (27.6 per cent), or payments toward the cost of schooling or to cover their own expenses (29.4 per cent). The study found that 17.6 per cent of children claim that they work in order to learn a trade, which is one of the strategies employed in certain situations as a way of accumulating human capital, often in tandem with attending school. A little less than six per cent of children who work – 214,648 boys and girls – explained this in terms of a desire not to go to school.

Boys and girls offer different explanations for working, clearly linked to roles culturally assigned to men and women. More girls (32 per cent) than boys (25 per cent) said they worked “because their help was needed around the home”, whereas more boys (21 per cent) than girls (10 per cent) said they worked “to learn a trade”.

Gender differences are less pronounced when it comes to the need to pay for school and/or personal expenses (28.4 per cent of boys and 31.3 per cent of girls), and the desire not to go to school (7.1 and 3.5 per cent, respectively). When asked about their contribution to the family economy, 11.7 per cent of boys gave this reason for working compared to 10.9 per cent of girls, a differential of less than one percentage point.

The Convention on the Rights of the Child and its Optional Protocols, as well as International Labour Organization (ILO) conventions, form the basis for adapting national legislation to the minimum criteria agreed by the international community for the protection of children and adolescents against economic exploitation and against performing work that could be harmful or hazardous.

Article 123 of the Mexican Constitution specifically prohibits use of the labour of persons under the age of 14; limits the working day for children between the ages of 14 and 16 to six hours, as well as limits night work for individuals over the age of 16 to seven hours; prohibits unhealthy or dangerous work, industrial night work and all labour after 10 o’clock at night for children under the age of 16. In addition, the Federal Labour Law (1970) regulates and expands on constitutional provisions related to work for persons over the age of 14.

Beyond current legislation regulating permissible forms of work performed by minors, there are problems that the country has not addressed in terms of child and adolescent labour that lie outside the framework of the law.

Although Mexico ratified ILO Convention 182 on the eradication of the worst forms of child labour, it has yet to issue a list of the kinds of work falling into this category that would open the way to their immediate elimination. This refers to unhealthy and hazardous labour, as well as clandestine and illegal work, including sexual exploitation, which jeopardizes the development of adolescents. Furthermore, the National Commission on Child Labour has not been established yet, nor has the tripartite commission which will be responsible for defining the list of worst forms of child labour and the formulation of the national plan to eliminate them under the terms of the Convention.

Despite the specific recommendations issued by the Committee of the Rights of the Child, Mexico has yet to ratify ILO Convention 138 on the minimum working age, which is considered to be one of the most important instruments for the gradual eradication of child labour, and is the only Latin American country that has not done so. Moreover, according to Mexican law, the minimum working age is 14 — one year younger than that recommended by ILO Convention 138, which is 15 years or the age equivalent to the completion of basic education.

The evident progress toward generating data on child labour made by the CLM of the 2007 ENOE, opens the door in Mexico to developing public policies and solid national strategies on child labour which translate into the creation and implementation of a National Child Labour Eradication Programme.

There are currently two federal programmes dealing with child labour in the country: the Programa de Prevención, Atención, Desalentamiento y Erradicación del Trabajo Infantil Urbano Marginal (Programme for the Prevention and Eradication of Urban Marginal Child Labour — PROPADDETUM) run by the DIF, and the Programa de
Atención a Jornaleros Agrícolas Migrantes (Farm Workers Assistance Programme — PAJA) under SEDESOL, both of which contain certain components for the eradication of rural child labour.

PROPANDETIUM includes actions to prevent children and adolescents from joining the workforce and enable them to reenroll in school (in the event they are already working), by providing academic scholarships and training; advice and training of personnel responsible for coordinating and operating the programme; and advisory and follow-up visits to state DIF systems.

For its part, PAJA seeks to combat the poverty faced by farm workers and their families by creating equitable opportunities and broadening their capabilities. The programme is a joint effort between the three levels of government, agricultural producers, social agencies and potential beneficiaries. The programme gives different kinds of monetary support. It encourages education of farm workers’ children between the ages of six and 14 by providing monetary support to families, school supplies and uniforms, as well as food vouchers. The amount of support varies according to the number of children attending school and their grade level. It also offers support for children up to the age of five.

The Ministry of Labour and Social Welfare leads the Inter-institutional Group for the Prevention of Child Labour, which comprises the Federal Government and relevant actors from civil society, as well as inter-institutional working groups (made up of government departments, unions, chambers of commerce and civil society) to address the problem of child labour. The Ministry has also encouraged dialogue with state agricultural producers for the purpose of sharing, exchanging and disseminating experiences and good practices relating to the prevention and eradication of child labour.

Violence against children and adolescents

Violence against children is complex and multifaceted, and has multiple causes. It is not exclusive to one country or region and requires comprehensive responses to prevent and eradicate it. One of the causes of violence against children and adolescents in Mexico—and probably in other countries as well—is the social perception that children are the property of adults. Viewing them as rights-holders and therefore, worthy of respect and care, is not a very widespread notion and achieving a true culture of rights remains a challenge. Recent studies confirm that there is a gap in Mexico between the rhetoric of child rights protection and certain practices which violate human rights and the dignity of children and adolescents.

Violence committed against children and adolescents in the home, at school, in the community, work places and institutions, is widely rationalized and accepted by society. The logical consequence of this is that violence becomes something natural and invisible, factors that help to perpetuate and replicate it.

The absence of a comprehensive and reliable information system on the different forms and consequences of violence against children, makes it very difficult to overcome the social acceptance and invisible nature of violence. The lack of information is also an obstacle to determining the precise characteristics of violence and developing appropriate public policies to prevent and eradicate it. In order to gain a better understanding of the problem, data from institutional records and surveys on the topic needs to be compiled and analysed systematically, a task made all the more difficult due to the absence of a comprehensive legal framework that provides universal and homogenous criteria for tracking the problem statistically and systematically—which in turn reflects the absence of a coordinated special protection system aimed at

Including the children of migrant farm workers in national statistics is an ongoing challenge. It is vitally important to determine just how scarce their access to basic services really is, and the resulting impacts on their nutrition, health, development, education and future prospects, given the fact that their rights require special protection.
Panel 4.2 The challenges of preventing and combating commercial sexual exploitation of children in Mexico

The Special Rapporteur on the Sale of Children, Child Prostitution and Child Pornography visited Mexico in May 2007 to evaluate the country’s progress and prepare a detailed report on commercial sexual exploitation of children (CSEC). The conclusions drawn from the recommendations contained in the report are:

- **Mexico has made progress on matters of CSEC.** In 2007, in keeping with the recommendations of the Committee on the Rights of the Child, the country’s federal legal framework was reformed to classify, for the first time, sexual tourism against persons under the age of 18, trafficking of persons under the age of 18, child pornography and pimping of persons under the age of 18 as serious crimes. However, the country needs to reinforce actions to address these issues, as only five of the 32 Mexican states have legally classified these as crimes against minors, which in practice weakens the effectiveness of the federal provisions. In addition, only three states punish child prostitution as a serious crime.

- **An effective system needs to be established aimed at protecting and assisting the victims of child sexual exploitation or trafficking,** strengthening the capacity of prosecutors to act quickly on the complaints they receive, in addition to implementing appropriate measures for the protection of witnesses and designing social reintegration programmes for victims.

- **Although specific situations may vary from state to state and city to city,** it is assumed that there is a certain level of tolerance toward impunity and corruption in some police forces, which obstructs the prosecution and punishment of offenders. This may strengthen the linkages between child sexual exploitation and organized crime and illegal sex-trade rings.

- **The main victims of child sexual exploitation are children living or working in the street.** Given the precarious conditions and abandonment in which they live, these children are frequent victims of sexual abuse, prostitution and trafficking networks.

- **The social conditions that children face along the northern border place them at particular risk.** The climate of rootlessness that prevails in some border towns increases the vulnerability of children living or working in the streets, often exposing them directly to the illegal drugs trade, trafficking of people or forced prostitution.

- **The situation of unaccompanied migrant children and adolescents who sporadically cross the northern border is especially alarming.** There is no data available to estimate the number of children who fall victim to abuse and exploitation as they migrate north toward the United States. What happens to these children once they reach their destinations is simply unknown.


addressing violence against children at all State levels.

The most brutal form of violence against children is, of course, murder. Between 1979 and 2002, the Health Information System recorded a total of 14,745 homicides in children aged 14 and under, while the 2007 National Report on Violence and Health, over the same period, puts the average number of homicides
in children at approximately 600 per year. This means that during the last 25 years, two children under the age of 14 were murdered every day\textsuperscript{202}.

Table 4.4 shows that the highest homicide rate in children in the under-15 year age group is found among children less than a year old, with an average rate of 3.8 homicides per 100,000 inhabitants between 2000 and 2007. This rate invariably decreases as children’s age increases, 2.1 being the average in the one-four years age group and 1.1 in the five-14 years age group. The rate increases dramatically among 15-24 year olds, reaching 11.1 per 100,000 inhabitants\textsuperscript{203}. Worthy of note is the fact that the rate among this last age group is higher than that of the national average, which is 9.78 per 100,000 inhabitants and that, compared to the overall population aged 25 years or older, incidence is quite high, given that the average for this broad age range is 14.9 per 100,000 inhabitants.

According to figures from the National DIF, there is an upward trend in terms of both the number of complaints and the number of substantiated cases related to child abuse between 1995 and 2007. However, it is not clear whether this increase is due to an actual rise in abuse and/or a greater tendency of the population to file complaints, perhaps out of increased awareness of the rights of children\textsuperscript{204}.

Graph 4.3 Number of child abuse complaints received and substantiated by DIF-PRENAI, (1995-2007)

* Information is unavailable for several states between 2005 and 2007.

Table 4.5 Total number of abused children registered by the DIF, by year and type of abuse, (1999-2007)

<table>
<thead>
<tr>
<th>Type of Abuse</th>
<th>1999</th>
<th>2000</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004*</th>
<th>2005*</th>
<th>2006*</th>
<th>2007*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>8,354</td>
<td>8,920</td>
<td>8,074</td>
<td>7,118</td>
<td>7,828</td>
<td>3,213</td>
<td>10,001</td>
<td>8,460</td>
<td>6,310</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>1,060</td>
<td>1,120</td>
<td>1,185</td>
<td>1,123</td>
<td>1,257</td>
<td>566</td>
<td>1,664</td>
<td>1,446</td>
<td>638</td>
</tr>
<tr>
<td>Abandonment</td>
<td>1,830</td>
<td>1,615</td>
<td>1,858</td>
<td>1,474</td>
<td>2,518</td>
<td>682</td>
<td>3,378</td>
<td>3,761</td>
<td>539</td>
</tr>
<tr>
<td>Emotional</td>
<td>5,378</td>
<td>6,941</td>
<td>6,064</td>
<td>4,744</td>
<td>7,301</td>
<td>3,090</td>
<td>8,156</td>
<td>7,861</td>
<td>4,235</td>
</tr>
<tr>
<td>Inadequate care</td>
<td>5,448</td>
<td>7,921</td>
<td>7,888</td>
<td>5,338</td>
<td>6,879</td>
<td>3,455</td>
<td>10,809</td>
<td>10,950</td>
<td>3,836</td>
</tr>
<tr>
<td>Sexual exploitation</td>
<td>110</td>
<td>39</td>
<td>17</td>
<td>64</td>
<td>59</td>
<td>39</td>
<td>156</td>
<td>81</td>
<td>19</td>
</tr>
<tr>
<td>Negligence</td>
<td>2,781</td>
<td>2,397</td>
<td>2,843</td>
<td>3,080</td>
<td>2,069</td>
<td>1,082</td>
<td>2,482</td>
<td>4,684</td>
<td>1,155</td>
</tr>
<tr>
<td>Labour exploitation</td>
<td>650</td>
<td>203</td>
<td>330</td>
<td>257</td>
<td>246</td>
<td>98</td>
<td>397</td>
<td>765</td>
<td>47</td>
</tr>
<tr>
<td>Total</td>
<td>25,611</td>
<td>29,156</td>
<td>28,259</td>
<td>23,198</td>
<td>28,157</td>
<td>12,225</td>
<td>37,043</td>
<td>38,008</td>
<td>16,779</td>
</tr>
</tbody>
</table>

* Preliminary information. ** The decrease in the 2005-2007 figures is believed to result from lack of information from some states.

Analysing the data currently available on the magnitude of violence against children in the country, according to type of abuse (Table 4.5), reveals that in 2007, the DIF recorded 16,779 cases of child abuse, of which 37.6 per cent were physical abuse and 25.2 per cent emotional abuse.

The data shows that the number of complaints of child abuse has increased by close to 50 per cent from 1999 to 2006, going from 25,611 cases to a little over 38,000. Although physical violence has remained more or less steady at about 8,400 cases per year, the incidence of neglect recorded during 2005 and 2006 is practically double that of 1999. It is important to draw attention to existing information on levels of child sexual abuse and sexual exploitation. Not once did the proportion of registered cases of these forms of violence exceed 5.2 per cent of the total over the years in question. However, it must be remembered that sexual violence is the least-reported form of violence in the world.

An analysis of four surveys on the different dimensions of violence highlights the following findings, which are extremely revealing of the problem of violence against children:

- Seven out of every 10 young people in the country experience violence in romantic relationships — 76 per cent of this violence is psychological; 16.5 per cent is sexual and 15 per cent consists of physical abuse. Women are more affected by physical violence compared to men (61.4 per cent and 46 per cent respectively).206

- Between 55 and 62 per cent of adolescents in secondary school state that they have experienced some form of abuse at some stage in their life.207

- 10.1 per cent of senior high school students have suffered physical violence in school; 5.5 per cent of students have experienced sexual violence and 16.6 per cent of students have endured emotional violence within the confines of school.208

- There is less physical violence against children in households with only female children; the risk of child abuse is greater in mixed households, where there are male and female children.

- There is no clear evidence that physical and/or emotional violence against children is currently on the decline compared to past levels.

- Physical violence against boys and girls is greater when they are very young (be-
between two and five years old), decreasing as they get older.

- Emotional violence, on the other hand, increases as children grow older.

- Parents’ level of schooling associates inversely with the risk of physical and emotional violence against children: the higher their education, the lesser the risk.

- Only 34 per cent of women aged 15 years and older stated that they never witnessed physical violence between their parents, never suffered it themselves and do not exercise it against their own children. The remaining 66 per cent had experienced at least one (or more) of these forms of violence, which indicates that it constitutes a life experience for two thirds of the female population.

- Two thirds of children in basic education in Mexico said they were the victims of at least one act of physical aggression over the preceding two years, with the most frequent forms being kicks and punches among boys, and hair pulling and shoving among girls. Only 33.9 per cent of girls and 25.5 per cent of boys said that they had not experienced physical aggression at school. In addition, 10.6 per cent of boys and 7.7 per cent of girls in 4th and 5th grade of primary school indicated that their father hit them, while 13.5 per cent of boys and 12.1 per cent of girls said their mother struck them.

- Boys are responsible for committing a greater proportion of acts of aggression at school than girls, but both boys and girls experience aggression in almost equal share; 6.3 per cent of children spontaneously stated that the first thing they would change about their school was the high level of violence. Psychological violence directed at both boys and girls is the most prevalent form of violence, although it has a greater affect on girls. Boys and girls in 4th and 5th grades reported that almost a fifth of girls had experienced attempts at sexual abuse from their fellow students.
Panel 4.3 Corporal punishment: a grave lack of child rights protection

Like other forms of violence against children, corporal punishment is a culturally accepted way of imposing discipline in Mexico. However, beyond the social acceptance that it enjoys, it is obvious that when it comes to corporal punishment, legal frameworks afford very little protection for children, as illustrated in the following points:

a) The laws that govern welfare and other social service institutions neither prohibit nor punish corporal punishment.

b) Barely half the education laws in the country identify corporal punishment as an offense, and the punishments laid down in the legislation are imprecise and not proportional to the seriousness of the offense. Furthermore, they do not apply to public education institutions, because the offenses committed by school personnel and the punishments they entail are contained in separate disciplinary standards contained in their labour contracts, which are not linked to the potential punishment established in education laws.

c) Criminal law does not adequately protect children from violence, inasmuch as the minor age of the victim is not considered an aggravating factor; on the contrary, there are extenuating and exonerating circumstances which fail to recognize the high value of legal rights, such as those that safeguard the life, integrity and development of the child.

d) The situation in civil matters is similar to that of criminal law: while the former facilitates impunity among adults who mistreat children, the latter confirms it, through the so-called right to impose discipline, which enables adults to mistreat children if they feel it is necessary to educate them.

In the case of the last two points, it is not the children who are receiving protection from mistreatment, but the adults who perpetrate it as a consequence of their inability to treat children as people and help them to develop by employing practices that are respectful of their rights, with limits and clear rules, but at the same time free from the negative effects of physical violence or insults.

The Committee on the Rights of the Child has expressed its concern that corporal punishment is still legal in the home and has not been expressly prohibited in schools, penal institutions and alternative-care facilities, and has recommended that the Mexican Government reform federal and state laws to assure it is prohibited in all settings.

tions between children and adults in families, schools and social service agencies — go unnoticed by the prosecutors and tribunals tasked with applying the law. These include physical violence that does not leave a mark; aggression that is harmful to children’s health when repeated over time, and ill-treatment that detracts from children’s self-esteem and confidence, and impedes their development.215

There are a number of official institutions in Mexico whose task is to look after child and adolescent victims of violence, and pursue and punish offenders. Essentially, they are the Ministry of Health, the National System for Integrated Family Development (DIF) and the state and municipal DIF, all of which are empowered to protect and care for child victims of violence. The Federal Attorney General’s Office, state prosecutors, and federal and state courts have specific powers to investigate and administer justice in cases of violence against children. In addition, there are numerous civil society organizations throughout the country that use different methodologies to care for child and adolescent victims of violence, such as in family and street environments.

Despite the actions taken by these institutions against certain forms of violence toward children, and progress such as the creation of the Coordinacion Nacional para Prevenir, Atender y Erradicar la Explotacion Sexual Comercial Infantil (National Alliance to Prevent, Combat and Eradicate Commercial Sexual Exploitation of Children)216, there is still no comprehensive public policy or national strategy to coordinate institutions to prevent, punish, combat and eradicate all forms of violence against children, wherever it occurs (in the family, school, workplace, institutions and society at large). In 2007, the Ministries of Education, Health and the DIF signed a Joint Commitment to design a national strategy to address violence against children, which has not yet been adopted.

Adolescents in conflict with the law
In 2005, a constitutional reform was promulgated in the country which changed the existing tute-lary system into a rights-based juvenile criminal justice system in keeping with the Convention on the Rights of the Child, called the Sistema Integral de Justicia para Adolescentes (Comprehensive Justice System for Adolescents). Although this reform introduced profound changes conducive to fulfilling the rights of adolescents, its application has not been without difficulties.

As a result, the states and Federal District found themselves bound by the obligation to create specialized laws and institutions in order to implement the new system at local level, in line with relevant recommendations from the Committee on the Rights of the Child.217 This has resulted in each local authority compiling and maintaining its own information and statistics. These new laws did not generally make allowances for a single, coordinated information system between different authorities, and between the states and the Federal Government, or any central authority responsible for compiling national data. For this reason, in the majority of cases, the data not only lacks uniformity, but is difficult to access, identify and interpret. In addition, the federal legislation has not yet been approved.

Therefore, the data available in Mexico relating to the number and characteristics of adolescents in conflict with the law is very limited. According to the latest data collected by the INEGI — which, for reasons outlined above, presents serious limitations — in 2007 there were 22,970 adolescents in conflict with the law, of whom 20,923 were males and 2,046 females.
The latest data available under the previous tutelary system, despite its limitations mentioned above, provides an approximation of the situation of adolescents in conflict with criminal law in Mexico.

The variation in figures between 2005 and 2006, particularly those related to the number of adolescents who were incarcerated, is a direct response to the changes brought about by the constitutional reform, given that one of the main modifications was to standardize the minimum and maximum ages for the application of the juvenile justice system in the country. This made incarceration a last resort for individuals between the ages of 14 and under 18, and eliminated this punishment altogether for individuals between the ages of 12 and under 13. Furthermore, the system would only apply to criminal offenses.

The phenomenon of adolescents in conflict with criminal law – in other words, accused or found guilty of committing a crime – is related to the diverse social problems faced by adolescents in Mexico and other countries. There are structural issues, such as exclusion, poverty and inequality, which to one degree or another weaken family, community and institutional protection mechanisms, causing adolescents to lack real opportunities for development, drop out of school at an early age, run greater risk of getting involved in criminal activities, fall into drug problems or commit acts of violence.

The majority of adolescents who find themselves in conflict with criminal law are male, between 15 and 17 years of age. They are, on average, more than four years behind in school or have dropped out altogether. They reside primarily in marginalized urban areas. They perform informal activities that do not require formal training; their income goes to help maintain their immediate family or affinity group, and they tend to live in violent environments. In other words, they have a history of vulnerability which generally involves threats to or violation of several of their rights.

An analysis of the phenomenon of criminal behaviour among adolescents and young people in the Federal District carried out in 2006 indicates that 49 per cent of adolescents in conflict with the law had attended primary school, 35 per cent secondary schooling, 11 per cent senior high school and 2 per cent tertiary education; 3 per cent of them were illiterate. Since the vast majority of the adolescents were aged between 15 and 18 — normally the years for secondary and senior high school — it is evident that falling behind in education was a key factor in most cases.

Another important piece of information about adolescents in conflict with the law uncovered by the study was their occupation at the time they committed the crime, indicative of their high level of vulnerability. The most representative segments, in terms of occupation, were students (32 per cent); traders or peddlers (15 per cent — generally in informal sectors or as street vendors, which implies working in unfavorable conditions outside the law); street workers (7 per cent - such as windscreen cleaners, clowns and fire-swallowers); and construction workers (6 per cent). Other occupations that scored less than 10 per cent include domestic workers (normally restricted to women) and trades, such as carpenters, chauffeurs, collectors, ironworkers, printers or mechanics, jobs mostly performed by males.

<table>
<thead>
<tr>
<th>National statistics</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescents in conflict with the law (remanded to authorities)</td>
<td>58,128</td>
<td>48,009</td>
</tr>
<tr>
<td>Adolescents arraigned</td>
<td>29,503</td>
<td>24,438</td>
</tr>
<tr>
<td>Adolescents found guilty</td>
<td>22,667</td>
<td>14,213</td>
</tr>
<tr>
<td>Adolescents incarcerated (deprivation of liberty)</td>
<td>8,481</td>
<td>4,502</td>
</tr>
<tr>
<td>Adolescents given probation (not imprisoned)</td>
<td>10,583</td>
<td>7,502</td>
</tr>
<tr>
<td>Adolescents subject to other penalties</td>
<td>3,611</td>
<td>2,642</td>
</tr>
</tbody>
</table>

In 2005, 3,765 males and 401 females, which represents 90 per cent and 10 per cent respectively, entered the then Youth Offenders System for the Federal District. That young women made up the minority in respect to this phenomenon leads to further discrimination and lack of protection, since the programmes and actions aimed at this group do not always function with a gender perspective and are otherwise deficient or non-existent. The higher proportion of males may be due to the fact that they are more often branded as “problematic” or viewed as more violent than women.

The most common crime committed by adolescents is robbery in all its forms (87 per cent of all cases). The second was assault of different kinds (5 per cent); property damage (3 per cent); crimes against health (2 per cent) and illegal deprivation of liberty (1 per cent)\(^2\)\(^2\). The most serious crimes against other individuals were homicide and rape, both reaching one per cent of all crimes.

The new Comprehensive Justice System for Adolescents seeks to ensure that all adolescents accused of committing a crime have access to a fair trial which respects their fundamental rights, and in the event they are found guilty, assume the consequences of their actions through socio-educational measures that encourage social and family reintegration, and full development of their abilities and as individuals.

Under the reform, “adolescents” are considered as any individual between the ages of 12 and under 18. Persons under the age of 12 are not subject to this specialized system on the assumption that they cannot be held legally responsible for breaking the law. In the event they do, they should be provided with social support services.

This new system must be operated by institutions, tribunals and authorities that specialize in administering and imparting justice for adolescents, acting at all times in accordance with the principles of integral protection and the best interest of the child.

One of the most important changes introduced by this reform is a limitation on the use of incarceration as an extreme measure, applicable only to adolescents aged 14 years and over, and only in the most serious of cases. Other measures that do not involve the deprivation of liberty, such as community service, supervised liberty and reparation of damages, are thus given precedence. Likewise, the reform provides for other kinds of measures, such as mediation or conciliation, which prevent many adolescents from having to go to trial.

This is nothing less than a radical change in the system for young offenders that had been operating in Mexico since the beginning of the 20th century. The reform standardizes, for the first time, the age of criminal responsibility in the country and establishes it at 18, without exception, and provides for a specialized justice system in the event that persons under the age of 18 are accused of committing a crime.

These reforms entered into effect on 12 March 2006. As of that date, all states in Mexico had six months to create the laws, institutions and agencies needed to apply the new system (see Table 2 in Appendices). Today, all states — with the exception of the state of Guerrero and the Federal Government — have begun applying the new juvenile justice system in accordance with the Constitution.

However, four years after the reforms were approved, implementation of the system continues to face significant challenges and difficulties. Applying the new system has met with diverse obstacles stemming from the complexity of the institutional and cultural changes it entails. It is not only about establishing rights-based processes, but also the comprehensive development of an entire specialized system, capable of providing adolescents with real opportunities to take responsibility for the crimes they commit and discover life options that allow them to develop all their abilities and potential in a positive and constructive way for society.
Chapter 5

Toward an agenda for children and adolescents in Mexico

This document has described and analyzed the complexities of Mexico as a multicultural society, rich in diversity and contrasts, fruit of a long history and process of development which has taken the country to a high level of economic wellbeing. At the same time, significant economic and social disparities persist. This contrast presents Mexico with a significant challenge in terms of fulfilling the rights of children and adolescents, but also offers potential opportunities for overcoming the disparities and exclusion that have been passed on from generation to generation.

On the one hand, the Mexican economy occupies thirteenth place in the world; Mexico is one of two Latin American members of the OECD —together with Chile, which joined recently— and is a trading partner of the United States and Canada under NAFTA. On the other hand, the country has maintained a constant pattern of social inequality and exclusion reflected in worrisome asymmetries in the distribution of wealth. The more than 50 million Mexican men and women who live in poverty are a constant reminder of the unresolved challenges to the country’s political and social conscience.

Mexico has made significant progress over the last few years toward guaranteeing greater levels of wellbeing for children and adolescents, with innovative approaches aimed at reducing child mortality, expanding coverage of basic education and providing higher levels of protection for children and their families.

However, this contrast is also present in the levels of child wellbeing. Poverty and exclusion have a disproportionate affect on children, particularly those who live in indigenous, rural communities and highly marginalized urban areas.

Therefore, it is vitally important that children’s issues be put at the heart of political debate, as a strategic opportunity for development. In this sense, one of the main challenges faced not only by Mexico, but by the majority of countries, is to translate the principles of the Convention on the Rights of the Child into concrete and effective interventions to make the guarantee of rights a reality. The Committee on the Rights of the Child, an independent body of experts set up under the Convention to oversee its compliance, recommends that the States Parties to this international treaty adopt a series of specific actions aimed at progressive fulfillment of child rights. These include the following key dimensions:

- A legal framework that is fully compatible with the principles and provisions of the Convention on the Rights of the Child, which requires an exhaustive review of internal legislation to prevent legal provisions from becoming scattered throughout the legislation.

- A system of institutions that involves the three levels of government (federal, state and municipal) and the three branches of the State (legislative, executive and judicial), in constant dialogue with civil society, as well as intersectoral discussion, according to the principle of integrality and indivisibility of rights, as
well as the multidimensional nature of children’s issues.

- **A model for managing child and adolescent public policy** that facilitates cooperation between institutions, and favors a systemic management model rather than one centred on a single agency or office.

- **A programmatic framework, national plan of action or strategy** in favor of children and adolescents, which reflects the application of CRC provisions, built on an appropriate platform for encouraging effective coordination between sectors, levels of government and social actors.

- **Sufficient, timely and equitable budget allocations** to support policies and programmes that directly or indirectly benefit children and adolescents.

- **A knowledge and data base** on the progress of child rights fulfillment, with quality, up-to-date and disaggregated data that can be used to provide solid evidence for the design and evaluation of policies and programmes.

- **A long-term, child rights-based strategy for strengthening the ability of institutions** to provide adequate care for children and adolescents in all relevant issues.

- **Consolidation of civil society’s commitment to child rights** as a question of rights, with stronger backing from the private sector and increased awareness and mobilization among society in general.

It would take the design of a new institutional architecture, based on widely legitimate policies, and with the capacity to influence all sectors of government, to create an environment that is truly protective of children in Mexico. This environment would constitute a reference framework for a new national alliance that benefits children, with political backing from the highest levels. Horizontal, holistic and coordinated care, and revitalized, vertical mechanisms for enforceability, as well as dialogue and involvement of civil society, would constitute the essential conditions for the functioning of an environment that protects the rights of children and adolescents in Mexico.

In addition to the core imperative of building a comprehensive and strategic response to children in the country, there are a series of specific challenges that could be considered as fundamental for the national agenda on children and adolescents in Mexico.

**Right to survival and development**

- The close relationship between maternal health and survival and child development must be part of a political commitment at all levels of government and form the basis for all interventions aimed at reducing the risk of maternal mortality and morbidity so as to increase children’s chances of survival, above all during early infancy.

- It is important to simultaneously address the expansion of access and quality of services. We know from the financial crises of the last 30 years in different regions of the world that public spending on health is one of the first areas to suffer budget cuts; therefore, it is essential that social investment in health be safeguarded.

- A system for monitoring the availability of healthcare and nutrition services requires solid information to be able to identify not only gaps in coverage, but also the emergence of new vulnerable groups that may not be covered under existing care programmes.

- It is very important to strengthen intersectoral linkages between maternal and infant health services and programmes to reduce inequality and social exclusion, in light of the strong causal relationship between poverty and the status of maternal and infant health.

- Interventions aimed at saving the lives of women and their babies must respect their rights, provide quality education and a decent quality of life, and protect them from mistreatment, exploitation...
Panel 5.1 Building an environment that protects the rights of children and adolescents

Children and adolescents have the right to grow up in surroundings that assure their protection, that is, to develop in an environment in which all actors — civil society, families, the State, the private sector — fulfill their responsibilities to assure that children may exercise their rights; so that they are protected against every form of abuse or exploitation; and so they have suitable conditions that allow them to play an active role in issues that concern them. UNICEF has identified eight interdependent dimensions which constitute key factors for building a protective environment for children and adolescents, and contribute to the functioning and consolidation of comprehensive protection systems that assure effective fulfillment of rights and their restoration in the case they are violated. These dimensions are:

1. **Legal framework and its enforcement.** - In addition to harmonizing national legal frameworks with international instruments, creating an environment that effectively protects rights must be accompanied by mechanisms that strengthen compliance and enforceability of the laws, as well as transform local or private practices that help perpetuate violation of the rights of children and adolescents. In this sense, narrowing the gap between what the law says and its application and practical implementation is one of the main challenges.

2. **Policies and programmes.** - This dimension embodies the commitment on the part of the government to rights fulfillment. It is desirable that the public policy framework be comprehensive and favor coordinated action between different sectors (education, health, social welfare, reduction of poverty), with a cross-cutting perspective of the rights of children and adolescents.

3. **Institutional network.** - A comprehensive system for the protection of rights requires a coordinated network of services and measures that operate cohesively to encourage access to health, education, child and adolescent wellbeing and development, as well as to protect them from violence, exploitation and abuse, and guarantee them access to justice and to rehabilitation in the case their rights are violated. Likewise, it is important to strengthen the capacities of people who interact with children and adolescents so that they have the motivation, abilities and authority to contribute to fulfilling their rights, and to identify and respond to eventual violations.

4. **Budgets.** - The allocation of resources for comprehensive child policy implementation is another concrete example of the State’s commitment to fulfilling the rights of children and adolescents, at both the national and sub-national levels.

5. **Information.** - The availability of accurate and trustworthy sources of information on the fulfillment of child rights and rights violations is essential for compiling precise diagnostics, designing appropriate institutional responses and measuring progress and challenges in matters of child protection.

6. **Participation.** - Resolutely encouraging the participation of children and adolescents, and progressively promoting their autonomy are fundamental steps toward building a protective environment and the proper functioning of a rights protection system. Under the Convention, children and adolescents have the right to be heard and have their views taken into consideration in all matters that affect them; but in addition, the probability of children falling victim to abuse or other violations of their rights decreases as they become more aware of them, the potential risks they may face, and the information, abilities and services they are able to access to protect them.

7. **Attitudes, traditions, customs and behaviours.** - In order to build a protective environment for children it is necessary to encourage cultural changes aimed at recognizing children and adolescents as rights-holders, while eradicating practices – often deeply rooted and tolerated – conducive to their violation.

8. **Social mobilization.** - Through public dialogue on issues that affect children, this dimension seeks to foster commitment and mobilize different social sectors in favor of children. This is also linked with the availability of reliable and disaggregated information on the situation of children and adolescents, and fulfillment of their rights on the part of all sectors of society, so that they contribute as essential agents in the building of an environment protective of rights.

and violence. Women who have received an education are more likely to delay marriage and motherhood, make sure their children are vaccinated, be better informed about proper nutrition for themselves and their children and choose safer child-spacing practices.

■ Despite the progress made by several government programmes, further reduction of maternal mortality will require additional spheres of action. Topics such as encouraging family planning to prevent undesired and potentially dangerous pregnancies; promoting sexual education at an early age; facilitating timely access to relevant information about the reproductive cycles of girls and adolescents, as well as access to services and their quality — are all areas of opportunity for institutional action and collaboration with civil society and other sectors.

■ It is necessary to assure that healthcare services receive investment in innovative technology and knowledge. The influenza A (H1N1) outbreak in the country highlighted the importance of maintaining a response system capable of adapting rapidly to new and complex situations.

■ The demographic and epidemiological transition that Mexico is experiencing has given rise to imperatives that require immediate and coordinated attention, such as malnutrition, particularly in rural and indigenous areas, and the emergence of new phenomena, such as overweight and obesity, which are a direct result of rapid lifestyle changes and the accelerated urbanization process. The complexity of mounting an integrated, simultaneous response to apparently conflicting phenomena presents an obvious technical challenge. At the same time, comprehensive action is needed to prevent these overlapping phenomena and their associated health problems from increasing and becoming a burden that national healthcare system will be unable to bear in the future.

■ The political response to overweight and obesity must be widespread and comprehensive, and not just limited to encouraging healthier, more active lifestyles. It is necessary then to understand and accept the complexity of these phenomena in order to attack their causes, which include scant regulation of the production and sale of food, the absence of a consensus in society on the risks associated with unhealthy eating habits and lifestyles, and the inadequacy of dietary education campaigns in communities and schools.

■ In terms of the HIV/AIDS epidemic and its impact on Mexican children, it is important that this remain visible, despite the fact that persons under the age of 18 are not affected by this epidemic more than other population groups. This is because new infections are being detected at ever younger ages. As a result, building up an information and monitoring system that provides data broken down into age groups (currently there is information on 0-to-14 year olds and 15-to-29), geographical areas (by states and municipalities, in rural or urban areas) and channels of transmission, must play a central role in order to develop differentiated analyses and responses.

■ Since perinatal transmission is the predominant form of contracting HIV/
AIDS among minors, it is important to continue to raise awareness among health personnel of the importance of timely detection and the procedures that need to be followed to prevent mother-to-child transmission, as well as continue to strengthen capacities for identifying, caring for, referring and following up on positive cases.

- The prevention of HIV/AIDS among adolescents and young people must be strengthened to curb new infections by means of a comprehensive approach aimed at developing life skills and guaranteeing access to friendly and relevant services, as well as fostering communication and education among peers.

**Right to education**

Primary education coverage in Mexico has become almost universal, which is an undoubted accomplishment for national public policy over the last few years. This result has also been made possible thanks to significant progress toward producing an education information system, both through the annual implementation of the *ENLACE* test, which led to the availability of a measuring and general diagnostic system on school performance over time, and the data generated by the National System for Education Information.

Regardless of these significant achievements, there are a number of key challenges that may form part of the education agenda in the years to come.

- The reality of the strong disparities and social exclusion in the country is still reflected in primary education coverage, with significant gaps at preschool and secondary levels, as well as in senior high school, which a significant proportion of children of poor or vulnerable sectors do not attend, and many of those who enroll are unable to finish. There are also disparities in the availability of services provided in the different states, in rural and urban settings, as well as in private and public schools — in particular, general, indigenous, community and migrant education schools.
- Combating inequality in the availability of education implies ensuring that education budget commitments are fulfilled in order to sustain adequate investment in infrastructure, technology and teacher training, particularly with a view toward increasing the quality of teaching.
- Achieving quality education that is inclusive is a challenge that also entails addressing a range of factors such as creating a climate of tolerance and respect in the school environment; the fight against all forms of discrimination; establishing channels for participation, above all for adolescents, as well as effective mechanisms to promote participation by children and adolescents in school issues that affect them. This challenge is directly related to the establishment of greater cooperation between actors in the school community, particularly the closer involvement of parents in school and the vital process of bolstering democracy in education.
- Participation, dialogue and consensus building are learning experiences that not only favor coexistence in the school environment, but also the development of attitudes and conduct for coexistence in the broader community.
- The decentralization of education has brought about countless programmes that address a range of issues arising from the current demand for education in the countryside. As a consequence, new challenges have emerged associated with fragmentation of services, and the resulting dispersion of associated spending. The fragmentation of spending may lead to a lack of effectiveness and efficiency, given the duplication that arises between programmes and inter- and intra-institutional coordination problems. Greater rationalization of programming and strengthened coordination between the different levels
of government constitute significant challenges.

- Mexico has made great efforts to increase the percentage of its GDP allocated to education and to respond to the growing demand for educational services. However, comparing this level of spending against other OECD countries with similar demographic structures reveals that Mexico still comes in below the OECD average and in second-to-last place among member states in terms of the resources it invests per student. Despite the fact that education is one of the areas receiving a high percentage of total public spending in the country, evidence suggests that it has not all been used efficiently, inasmuch as this increased investment has not been matched by improvements in performance. In this respect, a restructuring education spending would be desirable — both in terms of its source and its destination — in order to involve as many actors as possible in the generation of resources and in making their redistribution more efficient and equitable.

Right to protection
The complex reality of children in Mexico and the specific nature of the different situations that warrant special protection measures deserve a detailed analysis of the remaining challenges.

- **Unaccompanied migrant children.** Despite the somewhat fragmented nature of the information on this population group, in terms of the roles performed by government departments during the repatriation process of unaccompanied migrant children, Mexico has solid experience in generating data and developing projects along the northern border. However, now is a good time to strengthen policies on the protection of the rights of unaccompanied migrant children along the southern border. Access to justice, guaranteeing the principle of family unity and special international protection are issues requiring further attention in order to achieve comprehensive rights protection for this vulnerable group. At the same time, one of Mexico’s greatest challenges is to focus efforts on other stages of the migratory process and not just on the repatriation and return of migrants to their place of origin; in other words, on prevention, on a deeply rooted sense of belonging to their place of origin through the creation of protective environments and real opportunities for a dignified life, in addition to policies aimed at preventing the separation of families as a result of migration.

- **Child labour.** The country faces enormous challenges in this respect which require political will and the participation of all sectors in society. Some of these challenges include:
  - Mobilizing society and raising social awareness aimed at accomplishing a cultural change in the way child labour is perceived in order to achieve a consensus on its eradication;
  - The creation of an intersectoral public policy for the eradication of child labour in Mexico and its conversion into a national programme against child labour;
  - The strengthening of child labour inspection and monitoring systems;
  - The establishment of sector-wide alliances to combat child labour; and
  - Comprehensively guaranteeing the rights of migrant farm workers’ children.

Although Mexico ratified ILO Convention 182 on the eradication of the worst forms of child labour, the country has still not defined them, in order to take steps to eliminate them immediately. The Convention refers to unhealthy and hazardous work, as well as to clandestine and illegal work, including sexual exploitation, all of which jeopardize the development of adoles-
cents. Furthermore, the National Commission on Child Labour has not yet been established, nor has the tripartite commission which will be responsible for defining the list of worst forms of child labour and the formulation of the national plan to eliminate them under the terms of the Convention.

- **Violence against children.** Protecting children and adolescents from violence is one of the most important challenges that Mexico faces. A comprehensive, nationwide policy that involves the executive, legislative and judiciary branches at the federal, state and municipal levels must be developed to prevent and eradicate violence against children and adolescents, while providing care for victims. Zero tolerance for violence and the fight against impunity are key challenges for the child rights agenda in Mexico. To achieve this it will be necessary to overcome acceptance of violence, eradicate the social permissiveness that surrounds it and provide families and institutions with tools to transform the way they view children; namely, to stop viewing children as the property of adults or institutions and recognize them as rights-bearers themselves.

It is essential that the quality of information on violence against children in Mexico be improved. To accomplish this, it is urgent that this area of concern be regulated and that effective mechanisms be set up to assure full compliance with provisions that the State may issue to govern the collection of statistics on violence against children. It is also necessary to establish and adopt a universal system of definitions, as well as a standard and universal strategy for using them, in order to ensure minimum levels of homogeneity in compiling data and producing statistics.

The Mexican Government has a widespread institutional infrastructure that it could employ to generate this information and assure — together with the production of homogenous, periodic and reliable national statistics — that there are mechanisms which facilitate access to this information by all citizens.

- **Specialized justice for adolescents.** Almost four years after the reform of the juvenile justice system was approved, implementing the system continues to face significant challenges and difficulties. Adopting the new system has met with obstacles related to the complexity of the institutional and cultural changes it requires. It is not only about establishing rights-based processes, but the comprehensive development of an entire specialized system that is capable of providing adolescents with real opportunities to take responsibility for the crimes they commit and discover life options that allow them to develop all their abilities and potential in a positive and constructive way for society. The creation of a specialized justice system for adolescents requires several conditions to function properly:

  - Training and specialization of new officials and institutions (judges, magistrates, public prosecutors and defenders, interdisciplinary programmes and teams);
  - Timely and adequate budget allocations;
  - Coordination and communication between the different operators of the system; and
  - Development of diverse and broad alternatives to incarceration in order to offer adolescents (and the system itself), greater opportunities for reintegration.

Raising the awareness of society as a whole so that it understands all dimensions of the system will help prevent the stigmatization and criminalization of adolescents and lay the groundwork for their successful reinsertion into society.
Final considerations
The range of challenges presented here is no doubt broad and complex, both in terms of the specific nature of the issues involved and their multiple causes. However, it is worth underlining some of the reasons why it is imperative to provide renewed momentum to the agenda for children.

Investing in children and child rights protection is, first and foremost, an ethical and moral imperative that no member of society can put aside, whether or not they are in a position of authority. Ratifying such a fundamental tool as the Convention on the Rights of the Child consolidates Mexico’s commitment, adding the legal weight of having to comply with an international treaty, which transcends mere ethical obligations.

However, placing children at the centre of the public policy agenda goes beyond ethical and legal spheres — it also implies political and development opportunities. Investing in child rights is to adopt a long-term vision toward strengthening the capabilities of people and institutions that ensure social cohesion and wellbeing.

Discussing the challenges faced by children carries with it the risk of painting a scenario of actions whose outcomes are only perceived in the future; in other words, at a later date when children have turned into what we call “citizens of tomorrow”. But such a perception of childhood — as a preparatory stage for adulthood — often produces an immediate reaction of postponement, of overlooking the importance of immediate action amid the multitude of priorities faced by society.

Children are essentially “citizens of today”, which is why the pending agenda for children represents an imperative for Mexican society that is impossible to postpone. Child rights fulfillment is a present day task because children are the protagonists of current, not future reality.

Therefore, through this publication, UNICEF seeks to provide a broad panorama of accomplishments and challenges, and reaffirm its commitment to support the country’s efforts to respond to the pending agenda for child rights fulfillment. A present day agenda.
Notes

2. Mexico is categorized as a medium-high income country, according to World Bank classification. http://go.worldbank.org/D7SN0B8YU0
3. In 2006, these figures were 1.6 and 39.3., respectively, demonstrating that inequality increased during this period. Hernandez Licona, Gonzalo, 2009.
4. CONAPO, 2008a.
6. In 2008, 24.5 million people (23 per cent of the national population) resided in 185,000 towns with fewer than 2,500 inhabitants; 14.3 million (13 per cent) resided in 2,700 towns with between 2,500 and 15,000 inhabitants, and the remaining 68 million in 578 towns and cities with over 15,000 inhabitants. The state of Oaxaca has the highest percentage of population that lives in towns with fewer than 2,500 inhabitants (52.5 per cent), followed by Chiapas (51.5 per cent), which highlights the difficulty of providing these towns with the infrastructure and services needed to offer the inhabitants real options for development. Villagómez, 2008.
7. This figure was 558,000 in 2008, Leite and Ramos, 2008.
8. According to figures from 2008, only 15 per cent of Mexicans repatriated by the United States had received schooling above secondary level. Leite and Ramos, 2008.
12. Since the 2000 General Population Census, the indigenous population is defined in statistical terms as all members of a household in which at least one speaks an indigenous language or self-identifies as belonging to a particular ethnic group. CONAPO, 2005.
13. CONAPO, 2008b.
15. CONAPO, 2005.
17. The value was 0.842 in 2006, according to the 2006-2007 Human Development Report on Mexico. UNDP, 2008.
19. According to the latest estimates of income poverty at national level for rural and urban settings, undertaken by CONEVAL from the results of the ENIGH, 2008 (INEGI, 2008a).
21. See more detailed information in the following chapters.
22. CONEVAL, 2009b.
23. Idem
25. Scott, 2009
29. Idem.
31. For example, in December 2000, income from international wire transfers stood at $1,809.49 million, whereas by the close of 2008, this amount was $6,159.69 million. International wire transfers represent an important component in Mexico’s growth due to the high percentage of Mexicans living in the United States (11 million in 2007) who transfer money in this way to around 1.5 million households in Mexico. The growing trend of wiring money was affected by the global
financial crisis, showing a drop in 2009. According to the Ministry of Finance and Public Credit, between October 2008 and October 2009, the value of international wire transfers fell 35.8 per cent. Direct foreign investment also constitutes an important source of income.

34. ECLAC, 2009.
35. CONAPO, 2009.
37. Cordera, Rolando et al., 2009.
38. SHCP, 2009d.
40. These treaties include: the International Covenant on Civil and Political Rights (1981); the Covenant on Economic, Social and Cultural Rights (1981); the American Convention on Human Rights (1981); the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (1986); the Inter-American Convention to Prevent and Punish Torture (1985); the Convention concerning Indigenous and Tribal Peoples in Independent Countries (1990); the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW, 1979); the Inter-American Convention on the Prevention, Punishment and Eradication of Violence Against Women (Convention of Belem do Para, 1996); the Inter-American Convention on the Forced Disappearance of Persons (2002); the Convention on the Rights of Persons with Disabilities (2007); the International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families (1999).
43. Office of the President of Mexico, 2008.
44. The maternal mortality ratio refers to the number of maternal deaths per 100,000 live births. The maternal mortality rate refers to the number of maternal deaths per 100,000 among women of reproductive age, WHO, 2008.
46. Office of the President of Mexico, 2009.
47. The AIDEM group is an initiative of the National Centre for Gender Equality and Reproductive Health which arose in 2004 as part of the Equal Start to Life Programme of the Ministry of Health.
52. Idem.
53. Globally, three quarters (77 per cent) of maternal deaths are caused by complications during labour or shortly after childbirth. The leading causes are: hemorrhage (25 per cent of maternal deaths); infections (15 per cent); abortions practiced in unsafe conditions (13 per cent); eclampsia or pregnancy induced hypertension (12 per cent); and obstructed labour (8 per cent). The risk of death to mothers and newborns are especially high during the first two days following childbirth. The State of the World’s Children, UNICEF, 2009c.
55. This Committee is made up of a diverse and multidisciplinary group of civil, government and academic organizations, as well as international cooperation agencies, concerned with improving the health of women during pregnancy and preventing the vast majority of premature deaths in women as a result of complications during pregnancy, childbirth and puerperium. It commenced activities in 1993 with the mission of helping to reduce maternal mortality and to pro-
mote safe motherhood for all Mexican women, enabling them to enjoy their maternity, of their own free will, without
violence, and with quality medical care.

56. CNEGYSR, 2009.
59. The three delays model was developed by the University of Columbia and adopted by WHO. The model attributes maternal mortality to at least one, or a combination of the following three delays: 1. Delay in deciding to seek appropriate medical assistance; 2. Delay in reaching an appropriate facility and 3. Delay in receiving adequate care when a facility is reached.
60. First article of the Inter-institutional Agreement on Universal Care in Obstetric Emergencies, entered into by the Ministry of Health, the IMSS and the ISSSTE on 28 May 2009.
61. The infant mortality rate is defined as the number of deaths in children under the age of one (between 0 and 364 days after birth) for every 1,000 live births over a given period of time. The mortality rate in children under the age of five years is the number of deaths in children under the age of five years per 1,000 children in the same age range in a given year.
63. Office of the President of Mexico, 2009.
64. CONAPO, 2008. Estimated figures.
67. Idem.
68. Idem.
73. Idem.
74. INSP 2006.
75. Idem.
76. There are three main indicators of nutritional status that may be identified through anthropometrical characteristics. These are underweight or severe malnutrition, which often manifest themselves in the short term as a result of significant health and economic crises; and chronic malnutrition, or undersize for age, reflecting poor diet over prolonged periods, which is mainly associated in Mexico with micronutrient deficiencies. Another important indicator is anaemia, which is a condition that usually arises from a lack of iron in the diet and has serious effects on the development of children and adults, especially among women of reproductive age (Barquera, 2009).
79. INSP 2006.
81. Idem.
82. INSP 2006.
84. INSP 2006.
86. INSP 2006.
88. Idem.
89. The Oportunidades programme provides the following support to families living in conditions of extreme poverty:
   i) Food assistance: per family, in addition to providing food supplements;

102
ii) Education: monthly financial support for each child or adolescent, varying according to school grade and gender;

iii) Energy: monthly financial support per family;

iv) Older adults: monthly financial support per family;

v) “Live Better” support: monthly financial support per family to counteract the rise in international food prices and compensate loss of purchasing power in poor households;

vi) Health: guaranteed basic health package;

vii) Youth Oportunidades: one-time financial support upon graduating from senior high school before students’ 22nd birthday. UNICEF, 2009a.

90. UNICEF, 2009a.
91. Idem.

92. In 2010, the Food Support Programme will contain the following components:

i. Monthly food support in cash;

ii. Financial support every two months to compensate families for the rise in international food prices;

iii. Visits every two months to towns to provide advice on topics such as hygiene practices and preventative health, good eating habits, as well as prevention of obesity and overweight;

iv. Food supplements for families with children under the age of five and/or nursing mothers; and

v. Nutritional follow up for families that receive food supplements.

94. Idem.


96. The strategy considers it essential to reinforce existing coordination schemes between authorities and the food industry in the development of new products; to improve and make the nutritional composition of food and drinks clearer; adopt marketing and publicity measures, especially those aimed at children, as well as to promote physical activity and healthy lifestyles.

98. UNICEF, 2009a
100. UNICEF, 2008a.
103. CENSIDA, 2009.
104. Idem.

105. The Committee on the Rights of the Child has expressed its concern regarding “the lack of data on children infected by HIV/AIDS and on orphans because of HIV/AIDS, disaggregated by age; at the relatively high prevalence rate of infection among adolescents...” Consequently, it recommended that the Mexican Government redouble its efforts in these areas. United Nations, 2006.

106. CENSIDA, 2009.
107. CONAPO, 2008b.

11. Office of the President of Mexico, 2008.
12. The most prominent ones include: the Convention on the Rights of the Child, ratified by Mexico in 1990; the International Covenant on Economic, Social and Cultural Rights, which entered into force in Mexico in 1981; the San Salvador Protocol, ratified by Mexico in 1996 and more recently, in 2000, the Millennium Development Goals, agreed to by Mexico and United Nations member countries.
15. UNICEF, based on the INEGI, 2008a.
16. San Luis Potosi (95 per cent), Tabasco (92.3 per cent), Guerrero (88.3 per cent), Chiapas (84.7 per cent), Yucatan (84.5), Guanajuato (81.1), Oaxaca (79.8 per cent), Jalisco (79.5), Michoacan (74.1 per cent) and Campeche (74.1 per cent).
17. According to the INEE (2008), values in excess of 100 per cent enrollment are due to several reasons. The data was taken from the SEP’s 911 statistical database which is compiled by schools; it may also be due to grade repetition or overestimation of the mean population used in population projections by the National Council for Population.
22. INEE, 2008.
23. Severe age-grade disparity is an indicator which measures the number of students enrolled in classes at least two grades below the standard grade that would normally apply to their age, for every 100 people in the reference population.
27. Idem.
32. Idem.
33. The National Council for Promotion of Education offers basic education in isolated and dispersed rural communities. The services offered are known as community courses. Young people with high school or senior high school diplomas are brought in from nearby communities to serve as instructors. School organization and pedagogy are multigrade and the students vary in terms of age and years of schooling.
34. SEP, 2008b.
35. Idem.
36. Idem.
40. Idem.
42. For a more detailed analysis, see UNICEF, 2009a.
44. UNICEF, 2009a. Figures are calculated in accordance with the National Survey on Household Standards of Living, (EN-NVIH), 2002.
45. See detailed reference to this programme below in the section on institutional response.
47. INEE, 2007.
149. SEP-SEMS, 2008.
151. Political Constitution of the United Mexican States, articles 2 and 3.
152. In 1993, mandatory schooling was expanded to include secondary education. In 2002, a constitutional reform was approved which also made preschool mandatory for all children between the ages of three and five, and set a timetable for phasing in the new regulations: third year in the 2004-2005 school year; the second year in the 2005-2006 school year and the first year in the 2008-2009 school year. In 2008, the deadline for mandatory inclusion of three-year-olds was extended.
153. The processes generated in the framework of this alliance were grouped under five main lines based on three fundamental principles: better schools, better teachers and better student support in order to improve the quality of their education: SEP-SHCP-SEDESOL-SALUD-SNTE, 2008.
154. Some agencies, such as the Organization for Economic Cooperation and Development and the Inter-American Development Bank, as well as important opinion leaders in Mexico, warmly received the proposal; however, other groups, such as the teaching profession at the state level, openly rejected it—especially the evaluation of teaching staff—to the extent that schools were shut down. The measure was the focus of much criticism and debate from the National Coordinator of Education Workers, researchers, education experts and sectors in civil society (Citizen Education Watchdog, 2009).
155. The Federal District is unlike the other states in that it is the only one where education services are still under federal jurisdiction. In this framework, the Government of D.F. has also created its own education services and offered free benefits to education centres and students: books, school meals, uniforms, infrastructure improvements. In this way, federal education services coexist in the D.F. with a number of programs established by the local government itself.
156. Follow-up indicators for Oportunidades, November-December 2008. www.oportunidades.gob.mx
158. The states with higher enrollment in indigenous basic education are Chiapas, Oaxaca, Guerrero, Puebla and Veracruz, which account for 72 per cent of total enrollment, while the remaining states represent 28 per cent, SEP-DGEI, 2009a.
159. SEP-DGEI, 2009b.
160. SEP, 2008a.
161. SEDESOL, 2009a.
164. Figures expressed in millions of 2003 pesos.
165. OECD, 2008.
166. Unlike the INEE (2008), the percentage GDP that the OECD (2008) reports as national spending on education is 7.12. The data presented is based on that compiled by UNESCO Institute for Statistics, OECD and EUROSTAT (Statistical Office of the European Union).
167. INEE, 2008
169. INEE, 2008.
171. INEE, 2008
172. According to the INEE (2008), the specific budget items transferred under Branch 25 to the Federal District are comparable to transfers made under Branch 33 to the states.
174. Office of the President of Mexico, 2008.
179. The INM uses the term “repatriation event” to refer specifically to the process of repatriation. In some cases, the individual who enters the United States is repatriated more than once, which means the number of “repatriation events” does
not correlate with the actual number of repatriated individuals. According to the General Law on Population, national emigrants are considered to be repatriated if, as a result of exceptional circumstances, they require the assistance of the Mexican authorities to reenter the country. Included in this category, according to practice, are unaccompanied children and adolescents (articles 81 and 82).


181. Information sent by Mexican consulates in the United States from investigations conducted into each death.


184. The Regional Conference on Migration is a forum for dialogue and exchange of information that promotes development of new public policies on migration matters by member states. The RCM was a Mexican initiative launched in 1996 and currently includes Panama, Nicaragua, Mexico, United States, Canada, Honduras, Guatemala, El Salvador, Dominican Republic, Costa Rica and Belize.

185. Office of the Deputy Minister for Population, Migration and Religious Affairs; National Institute of Migration; Ministry of Foreign Affairs; National System for Integrated Family Development; Mexican Commission on the Assistance of Refugees (COMAR); UNICEF; IOM and UNHCR, among other institutions and organizations.

186. See diagram 1 in Appendices, which contains a preliminary design of the model that applies to the southern border.


188. UNICEF, 2009d.

189. In order to interpret the figures correctly, it must be taken into account that, according to the definition of child labour adopted by the ENOE, only those children who have engaged in paid labour are classified as workers. For this reason, the calculation does not include child workers who engage in activities that form part of survival strategies in poor families, such as: looking after cars parked in the street; cleaning windshields at traffic lights; singing in public transport or other types of street entertainment. The survey also does not reflect the number of migrant child farm workers in the country because it does not cover the private estates of agricultural producers, and because the residences there are collective. Lastly, the Child Labour Module (CLM) does not include household chores under the category of child labour.

190. It should be remembered that the CLM does not include migrant child farm workers.

191. These percentages correspond to the sum (boys and girls separately) of the incidence of labour in the following categories: working and performing household chores; working, performing household chores and attending school; only performing household chores; and performing household chores and attending school.

192. Migratory flows relating to agricultural labour vary and affect the entire country. The main states of origin are Oaxaca, Guerrero, Puebla, Hidalgo, Michoacan and Veracruz; the main destination states are Sinaloa, Sonora, Baja California, Baja California Sur, Nayarit, Michoacan, Morelos, San Luis Potosí, Jalisco, Veracruz, Colima, Chihuahua, Durango and Tamaulipas.

193. The only information currently available that offers a basic picture of this group can be found in the National Employment Survey 2003 and the Survey of Farm Workers 2003 conducted by SEDESOL.

194. INEGI-STPS, 2003 (addition of day labourers and farm workers, blocks 3.31 2nd part and 3.41). It is important to note that this figure does not include temporary workers in packing plants, given that this job is excluded from the questionnaire used in the survey.

195. SEDESOL’s Farm Worker Assistance Programme using statistics and demographic trends compiled in the course of the programme as well as data on migrant families collected in the National Survey on Farm Workers in 2003, estimated that there are 1.2 million migrant workers. Appendix 1 of the database for inter-sector coordination on farm workers.

196. Likewise, at federal level, there is only one law that punishes child labour. This is article 201 of the Federal Criminal Code which prohibits the employment of persons under the age of 18 and persons of insufficient capacity to understand the risks involved in: cantinas, taverns, bars, discos, brothels or any other place that may negatively affect their healthy physical, mental and emotional development.
201. Idem.
203. Idem.
204. On the other hand, the information offered by the DIF is often incomplete since it relies on the state welfare agencies to send timely and properly formatted data to the national level. In the case of graph 4.3, the apparent decline shown in 2005-2006 is more likely to be attributable to this factor than to any real decrease in violence against children.
207. EMyIA, 2006.
208. EEIV, 2006.
212. Idem.
216. Created in October 2001, the “National Coordinating Body to Prevent, Combat and Eradicate Commercial Sexual Exploitation of Children,” headed by the DIF, is made up of several public institutions, civil society organizations and international agencies. Its objective is to promote policies and systematic actions for the prevention, care and protection of children and adolescent victims of CSEC.
217. The Committee recommended the allocation of additional financial and human resources, together with the promulgation and application of laws in each state, to ensure proper implementation of the new rights-based system. United Nations, 2006.
218. Figures from 2005 still come from the Young Offenders System, whereas those from 2006 take into account data provided by the federal states under the new system.
220. Idem.
221. UNICEF, 2009f.
Sources consulted

Anzaldo Gómez, Carlos; Esquivel, Juan Carlos Hernández and Rivera Vázquez, Ahidé (2008). “Internal Migration, population distribution and sustainable development” (Migración interna, distribución territorial de la población y desarrollo sustentable), in The Demographic Situation in Mexico 2008. Mexico: CONAPO. Available at: www.conapo.gob.mx


CENSIDA (2007). Epidemiology and monitoring (Epidemiología y monitoreo). Available at: www.censida.gob.mx

CENSIDA (2009). Epidemiology and monitoring (Epidemiología y monitoreo). Available at: www.censida.gob.mx


Committee to Promote Safe Motherhood in Mexico (2009). Inter-institutional Agreement on the Care of Obstetric Emergencies, signed on the 28 May 2009. Available at: www.maternidadesintegros.org.mx


THE RIGHTS OF CHILDREN AND ADOLESCENTS IN MEXICO: A PRESENT DAY AGENDA

LOS DERECHOS DE LA INFANCIA EN MEXICO: UNA AGENDA PARA EL PRESENTE
In its Concluding Observations on Mexico’s third country report on compliance with the Convention on the Rights of the Child, on June 8, 2006, the Committee on the Rights of the Child expressed its concern over “the lack of effectiveness of the measures taken to implement the rights contained in the Convention and to allow rights holders to claim them.” The Committee also urged the Mexican Government to take all necessary measures to harmonize federal and state laws with the Convention and relevant international standards in order to assure their effective implementation.

The table below describes the current status of state laws for the protection of the rights of children and adolescents, as well as local juvenile justice legislation, in order to present an overview of the harmonization of both federal and state legislation with the Convention.

<table>
<thead>
<tr>
<th>State</th>
<th>Law</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aguascalientes</td>
<td>Law on the Protection of Children and Adolescents for the state of Aguascalientes</td>
<td>2001</td>
</tr>
<tr>
<td>Baja California Sur</td>
<td>Law on the Rights of the Child for the state of Baja California Sur</td>
<td>2001</td>
</tr>
<tr>
<td>Campeche</td>
<td>Law on the Rights of Children and Adolescents for the state of Campeche</td>
<td>2004</td>
</tr>
<tr>
<td>Chiapas</td>
<td>Code on the Care of the Family and Vulnerable Groups in the Free and Sovereign state of Chiapas</td>
<td>2006</td>
</tr>
<tr>
<td>Coahuila</td>
<td>Law on the Protection of the Rights and Obligations of Children and Adolescents for the state of Coahuila</td>
<td>2005</td>
</tr>
<tr>
<td>Colima</td>
<td>Law on the Rights and Obligations of Children and Adolescents for the state of Colima</td>
<td>2004</td>
</tr>
<tr>
<td>Durango</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Durango</td>
<td>2002</td>
</tr>
<tr>
<td>Estado de Mexico</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Mexico</td>
<td>2004</td>
</tr>
<tr>
<td>Guerrero</td>
<td>Law on the Protection and Development of Minors for the state of Guerrero</td>
<td>2002</td>
</tr>
<tr>
<td>Hidalgo</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Hidalgo</td>
<td>2003</td>
</tr>
<tr>
<td>Jalisco</td>
<td>Law on the Rights of Children and Adolescents for the state of Jalisco</td>
<td>2003</td>
</tr>
<tr>
<td>Michoacan</td>
<td>Law on the Rights of Children for the state of Michoacan de Ocampo</td>
<td>2001</td>
</tr>
<tr>
<td>Nayarit</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Nayarit</td>
<td>2005</td>
</tr>
<tr>
<td>Nuevo Leon</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Nuevo Leon</td>
<td>2006</td>
</tr>
<tr>
<td>Oaxaca</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Oaxaca</td>
<td>2006</td>
</tr>
<tr>
<td>Puebla</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the Free and Sovereign state of Puebla</td>
<td>2007</td>
</tr>
<tr>
<td>Quintana Roo</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Quintana Roo</td>
<td>2004</td>
</tr>
<tr>
<td>San Luis Potosi</td>
<td>Law on the Rights of Children and Adolescents for the state of San Luis Potosi</td>
<td>2003</td>
</tr>
<tr>
<td>Sinaloa</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Sinaloa</td>
<td>2001</td>
</tr>
<tr>
<td>Sonora</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Sonora</td>
<td>2002</td>
</tr>
<tr>
<td>Tabasco</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Tabasco</td>
<td>2007</td>
</tr>
<tr>
<td>Tamaulipas</td>
<td>Law on the Rights of the Child for the state of Tamaulipas</td>
<td>2001</td>
</tr>
<tr>
<td>Tlaxcala</td>
<td>Law on the Protection of the Rights of the Child for the state of Tlaxcala</td>
<td>2004</td>
</tr>
<tr>
<td>Veracruz</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Veracruz</td>
<td>2008</td>
</tr>
<tr>
<td>Yucatán</td>
<td>Law on the Protection of the Rights of Children and Adolescents for the state of Yucatán</td>
<td>2008</td>
</tr>
<tr>
<td>Zacatecas</td>
<td>State Law on the Rights of Children and Adolescents for the state of Zacatecas</td>
<td>2007</td>
</tr>
</tbody>
</table>
### States lacking updated laws

<table>
<thead>
<tr>
<th>State</th>
<th>Law</th>
<th>Approved</th>
<th>In force</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baja California</td>
<td>Law on the Protection and Defense of the Rights of Families and Persons Under the Age of 18</td>
<td>1999</td>
<td></td>
</tr>
<tr>
<td>Chihuahua</td>
<td>Code on the Protection and Defense of Minors</td>
<td>1994</td>
<td></td>
</tr>
<tr>
<td>Guanajuato</td>
<td>Does not have any laws</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Morelos</td>
<td>Law on the Development and Protection of Minors for the state of Morelos</td>
<td>1997</td>
<td></td>
</tr>
<tr>
<td>Queretaro</td>
<td>Does not have any laws</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: UNICEF, 2009.*

### Table 2. Local juvenile justice laws

<table>
<thead>
<tr>
<th>State</th>
<th>Law</th>
<th>Approved</th>
<th>In force</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baja California</td>
<td>Juvenile Justice Law for the state of Baja California</td>
<td>12/09/2006</td>
<td>01/03/2007</td>
</tr>
<tr>
<td>Chiapas</td>
<td>Law to establish the Comprehensive Juvenile Justice System for the state of Chiapas</td>
<td>22/02/2007</td>
<td>07/10/2007</td>
</tr>
<tr>
<td>State of Mexico</td>
<td>Juvenile Justice Law for the State of Mexico</td>
<td>21/12/2006</td>
<td>25/01/2007</td>
</tr>
<tr>
<td>Guerrero</td>
<td>Not yet approved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hidalgo</td>
<td>Juvenile Justice Law</td>
<td>12/09/2006</td>
<td>25/03/07</td>
</tr>
<tr>
<td>Nuevo Leon</td>
<td>Juvenile Justice Law for Young Offenders for the state of Nuevo Leon</td>
<td>31/08/2006</td>
<td>12/09/2006</td>
</tr>
<tr>
<td>Oaxaca</td>
<td>Juvenile Justice Law for the state of Oaxaca</td>
<td>5/09/2006</td>
<td>01/01/2007</td>
</tr>
<tr>
<td>San Luis Potosi</td>
<td>Comprehensive Juvenile Justice Law</td>
<td>09/08/2006</td>
<td>05/03/2007</td>
</tr>
<tr>
<td>Sonora</td>
<td>Law to establish the Comprehensive Juvenile Justice system for the state of Sonora</td>
<td>7/09/2006</td>
<td>12/12/2006</td>
</tr>
</tbody>
</table>

*Source: UNICEF, 2009.*
Diagram 1. Preliminary proposal for the Unaccompanied Migrant Children and Adolescents Protection Model, Southern Border Region

* This preliminary proposal is still under construction by the Inter-institutional Roundtable on Unaccompanied Migrant Children, Adolescents and Women
1 Boy, girl or adolescent
Source: Inter-institutional Roundtable on Unaccompanied Migrant Children, Adolescents and Women
Acronyms and abbreviations

AIDEM  Maternal Death Rapid Response Group
ANMEB  National Agreement on Modernization of Basic Education
APV  Equal Start to Life Programme
BANXICO  Bank of Mexico
CAPASITS  Outpatient Clinics for the Treatment and Prevention of HIV/AIDS and Sexually Transmitted Diseases
CAUSES  General Health Services Catalogue
CDI  National Commission for the Development of Indigenous Peoples
CEDAW  Convention on the Elimination of All Forms of Discrimination against Women
CENSIDA  National Centre for the Prevention and Control of HIV/AIDS
CESOP  Centre for Social and Public Opinion Research
CIESAS  Centre for Advanced Research on Social Anthropology
CNEgySR  National Centre for Gender Equality and Reproductive Health
CLM  Child Labour Module
COMAR  Mexican Refugee Assistance Commission
CONAFE  National Council for Promotion of Education
CONAPASE  National Council for Social Participation in Education
CONAPO  National Population Council
CONASIDA  National Committee on the Prevention of AIDS
CONEVAL  National Committee on Assessment of Social Development Policy
CRC  Convention on the Rights of the Child
CSEC  Commercial Sexual Exploitation of Children
DGE  General Directorate of Epidemiology
DGEI  General Directorate of Indigenous Education
DHS  Department of Homeland Security
DIF  National System for Integrated Family Development
DOF  Official Federal Gazette
EAP  Economically Active Population
ECLAC  Economic Commission for Latin America and the Caribbean
EEIV  National Survey on Exclusion, Intolerance and Violence in Public High Schools
EMiyA  Survey on the Mistreatment of Children and Adolescents
ENDIFAM  National Survey on Family Dynamics
ENDIREH  National Survey on Dynamics of Household Relationships
ENIGH  National Survey on Income and Household Expenditure
ENLACE  National Evaluation of Academic Achievement in Schools
ENNVIH  National Survey on Household Standards of Living
ENOE  National Survey on Occupation and Employment
ENSANUT  National Health and Nutrition Survey
ENVINOV  National Survey on Violence among Couples
EUROSTAT  Statistical Office of the European Union
FAEB  Fund for Basic Education and Teacher Training
GDP  Gross Domestic Product
HDI  Human Development Index
HIV/AIDS  Human Immunodeficiency Virus /Acquired Immune Deficiency Syndrome
ILO  International Labour Organization
IMR  Infant Mortality Rate
IMSS  Mexican Social Security System
INEE  National Institute for the Evaluation of Education
INEGI  National Institute of Statistics, Geography and Informatics
INM  National Institute of Migration
INPER  National Institute of Perinatology
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>INSPI</td>
<td>National Public Health Institute</td>
</tr>
<tr>
<td>IOM</td>
<td>International Organization for Migration</td>
</tr>
<tr>
<td>ISSSTE</td>
<td>Mexican Government Workers’ Social Security System</td>
</tr>
<tr>
<td>MDG</td>
<td>Millennium Development Goals</td>
</tr>
<tr>
<td>MEIIPIM</td>
<td>Intercultural Education Model for Migrant Children</td>
</tr>
<tr>
<td>MP</td>
<td>Millions of Pesos</td>
</tr>
<tr>
<td>NDP</td>
<td>National Development Plan</td>
</tr>
<tr>
<td>NPPI</td>
<td>National Producer Price Index</td>
</tr>
<tr>
<td>OECD</td>
<td>Organization for Economic Cooperation and Development</td>
</tr>
<tr>
<td>OPIS</td>
<td>Child Protection Officers</td>
</tr>
<tr>
<td>PAJA</td>
<td>Farm Workers Assistance Programme</td>
</tr>
<tr>
<td>PAZAP</td>
<td>Food Programme in High Priority Areas</td>
</tr>
<tr>
<td>PEC</td>
<td>Quality Schools Programme</td>
</tr>
<tr>
<td>PES</td>
<td>Safe Schools Programme</td>
</tr>
<tr>
<td>PRENAM DIF</td>
<td>Programme for the Prevention of Mistreatment of Minors</td>
</tr>
<tr>
<td>PROBEM</td>
<td>United States-Mexico Binational Migrant Education Programme</td>
</tr>
<tr>
<td>PRONAREMI</td>
<td>National Infant Mortality Reduction Programme</td>
</tr>
<tr>
<td>PRONIM</td>
<td>Basic Education Programme for Children of Migrant Farm Workers</td>
</tr>
<tr>
<td>PROPADETIUM</td>
<td>Programme for the Prevention and Eradication of Urban Marginal Child Labour</td>
</tr>
<tr>
<td>PROSESA</td>
<td>Health Sector Programme</td>
</tr>
<tr>
<td>RCM</td>
<td>Regional Conference on Migration</td>
</tr>
<tr>
<td>REINTEGRA</td>
<td>Mexican Foundation for Social Reintegration</td>
</tr>
<tr>
<td>RWMM</td>
<td>Maternal Mortality Ratio</td>
</tr>
<tr>
<td>RNCS</td>
<td>National AIDS Registry</td>
</tr>
<tr>
<td>SEDESOL</td>
<td>Ministry of Social Development</td>
</tr>
<tr>
<td>SEMARNAT</td>
<td>Ministry of Environment and Natural Resources</td>
</tr>
<tr>
<td>SEMS</td>
<td>Office of the Deputy Minister for Senior High School Education</td>
</tr>
<tr>
<td>SEP</td>
<td>Ministry of Public Education</td>
</tr>
<tr>
<td>SHCP</td>
<td>Ministry of Finance and Public Credit</td>
</tr>
<tr>
<td>SINAIS</td>
<td>National Health Information System</td>
</tr>
<tr>
<td>SMNG</td>
<td>Medical Insurance for a New Generation</td>
</tr>
<tr>
<td>SNDIF</td>
<td>National System for Integrated Family Development</td>
</tr>
<tr>
<td>SNTE</td>
<td>National Education Workers’ Union</td>
</tr>
<tr>
<td>SP</td>
<td>Seguro Popular health insurance scheme</td>
</tr>
<tr>
<td>SRE</td>
<td>Ministry of Foreign Affairs</td>
</tr>
<tr>
<td>SSA</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>STD</td>
<td>Sexually Transmitted Disease</td>
</tr>
<tr>
<td>STPS</td>
<td>Ministry of Labour and Social Welfare and Social Welfare</td>
</tr>
<tr>
<td>TLC</td>
<td>Free Trade Agreement</td>
</tr>
<tr>
<td>UIS</td>
<td>UNESCO Institute for Statistics</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
</tr>
<tr>
<td>UNAM</td>
<td>National Autonomous University of Mexico</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>UNICEF TACRO</td>
<td>UNICEF Regional Office for Latin America and the Caribbean</td>
</tr>
<tr>
<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
</tr>
<tr>
<td>WFP</td>
<td>World Food Programme</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>