

Solomon Islands

**“Plus 5” Review of the 2002 Special Session
on Children and World Fit for Children Plan
of Action**

Country Report

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1. Introduction

The Solomon Islands is in a post conflict situation having faced major civil and military disturbances for almost a decade. The Solomon Government and donor and development partners have been investing a significant amount of resources into the reconstruction and redevelopment efforts in order to overcome the ‘lost years’ of the civil and military disturbances. In April of 2007, an earthquake and tsunami also contributed to the seriousness of the situation.

Relevant and up-to-date development indicators are generally scarce in the Solomon Islands, as the Annex in this report demonstrates. However, there are also recorded some significant achievements, as this report notes. Overall, the country is striving to implement many of the MDG and WFFC goals and objectives with various levels of commitment and efforts.

The first paragraph of the National Children’s Policy, Strategy and Outline Plan Of Action For Children (Draft 2003) is worth quoting in order to highlight the importance of the investment in children’s welfare as a basis for the solid national development and why this Policy needs to be passed in the Cabinet and implemented.

In our National Children’s Policy, Strategy and Outline Plan of Action for Children we affirm the unassailable: Investment in children’s health, nutrition and education is the foundation for national development. Our dedication to the children and young people of Solomon Islands will create a better, richer, and more peaceful country today, filled with support and promise, and the development and social contribution of our children and young people will in turn shape a future that joyously reflects the environment of their upbringing.

2. Major national actions taken for children towards the WFFC targets since 2002.

Key points are as follows:

- Drafted National Children’s Policy and Plan of Action (2003) (not endorsed by Cabinet)
- Continued work on the Child Rights Bill and Child Protection Bill (draft legislation)
- Grand Coalition for Change Government Commitments (2006 Prime Minister’s Office)

- Establishment of Ministry of Women, Youth and Children's Affairs (MWYCA) (2007)

3. Resource trends for children

Education:

In 2004 the total expenditure on education amounted to 25.97 % of the total budget.

% expenditure by sector of total education expenditure	
Early childhood education	2.6%
Primary	48.1%
Secondary	32.2%
Tertiary	16.6%
TVT	0.3%

Source: Solomon Islands Digest of Education Statistics, 2005

In the *Development Funds* administered jointly by donors and government (estimate)

Ministry	Total amount (operating cost+ equipment+ TA/Non-cash) of assistance *(2007)	% of Total Funds Administered jointly (2007)
Ministry of Education and Human Resource Development	152,195,405	8%
Ministry of Health and Medical Services	59,343,628	3%
Ministry of Provincial governments and rural development	7,802,718	0%
Ministry of Home Affairs (including Child Protection)	11,958,523	0%
Total Funds administered jointly	1,760,386,588	100%

*The amount does not include the consolidated funds.

Source: Solomon Islands Government, Approved 2007 Development Estimates

4. Development and use of monitoring instruments to track WFFC/MDG targets

- CRC Report and CRC report update
- MDG Monitoring for the MDG Report of 2004 and on going monitoring.
- Household Income and Expenditure 2005/2006
- Demographic Health Survey (DHS) conducted in 2006 and analysis and report being finalized.
- Draft Plan of Action for children 2004
- National Children's Policy Strategy and Outline were drafted in 2003
- Health and Education SWAp performance frameworks is in the process of development

5. Enhancing partnerships, alliances for children and participation

- National Advisory Committee for Children (NACC) was established in 2005

- Children's Development Division (in the Department of Home Affairs and now MWYCA) established in 2003 with support from Solomon Island Government, Save the Children and UNICEF to act as a secretariat to NACC.

6. Achievement of WFFC Plan of Action set against related MDG targets

A. Promoting Healthy Lives:

- EPI – high coverage of SIA measles campaign (2006) attaining the above 90% coverage.); routine EPI coverage improving
- IMCI – focal points established throughout the country
- Nutrition – breastfeeding promotion conducted annually.

B. Promoting quality education

- Increase in net primary education enrolment rates since the tensions - 94% (2005) up from 85.97% in 2004 (estimated by Ministry of Education and Human Resource Development (MEHRD) Education Digest Statistics 2005)
- Policy statement on free primary education (2005)
- Child Friendly School initiative in Isabel province
- Education SWAp maximising resources for children

C. Protecting Against Abuse, Exploitation and Violence

- Social Welfare Division at the Ministry of Health and Medical Services (MHMS) and Family Support Centre (NGO) continue to provide services for women and children who experience violence through the tensions and tsunami.
- Solomon Islands Police Force established Domestic Violence Unit (and drafted Family Violence Policy) and Sexual Assault Unit
- Refuge for women and children who experience violence established at the Christian Care Centre in 2005.
- National level research on Commercial Sexual Exploitation of Children and Child Sexual Abuse was conducted by the Christian Care Centre in 2004 and follow-up research is conducted in 2006.

D. Combating HIV/ AIDS:

- National HIV Policy and Multi-sectoral strategic Plan 2005 – 2010 (MHMS)
- MHMS HIV Unit and Solomon Islands National Aids Council established (with MHMS as secretary)
- HIV and vulnerable groups research conducted by Save the Children in 2006
- Consistent support by UNAIDS in promoting prevention, care, treatment and support of those effected and affected by the epidemic.
- Community based life skills activities (supported by UNFPA, SPC and UNICEF) and youth radio programme

7. Lessons learned

- Importance of partnership and allegiances is to be re-emphasized to make progress for children following the tensions. This is vital in order to promote greater harmonisation of programmes amongst the many donor and development partners that have provided assistance in the post conflict. What has been observed is that a lack of harmonisation amongst such agencies and the Government departments means that there is a high degree of duplication and inefficiency.
- Of importance also is the drain on the already limited capacity of local staff who is involved in implementing, monitoring and evaluating projects. Government needs to take immediate measure to increase the retention of trained and qualified officials.
- Political stability and government commitment to increase the welfare of children is essential to accomplish the goals of WFFC. What was evidenced in the conflict period was a deterioration of services for children and their families. Building governance and making structural reforms that enhance political processes that are inclusive and participatory is vital in order to promote children's welfare.

Annex 1: Achievement of WFFC Plan of Action and related MDG targets.

Goal: Reduce child mortality: Reduction in the infant and under five mortality rate by at least one third in pursuit of the goal of reducing it by two thirds by 2015			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Infant mortality rate	66 (1999)	24 (2005)	PIC Regional MDG Goals Report 2004
Under 5 mortality rate (death per 1,000 live births)	73 (1999)	29 (2005)	ChildInfo database
Proportion of newborns with low birth weight (%)	12.8 (1996)	-	Country Health Information Profile, 2002, MOH/WHO
Neo-natal mortality rate (%)	12 (2000)	-	WHO, vital registration and household survey
Proportion of one year old children immunized against measles (%)	67 (2002)	72 (2005)	National Coverage rates, WHO/UNICEF estimate, 2005, Immunization Summary 2007 edition

Target 1: Promoting Healthy Lives

Goal: Reduce maternal mortality: Reduction in the maternal mortality ratio by at least 1/3 in pursuit of reducing it by ¾ by 2015			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Maternal mortality ratio (per 100,000 live births)	120 deaths (2000) ¹	169 deaths ² (year unknown)	PIC Regional MDG Goals Report 2004:Solomon Island Situational Analysis of Children, Youth & Women
Proportion of births attended by skilled health personnel (%)	85 (1999)	-	WHO, Country health information profile 2001 revision

Goal: Reduce child malnutrition: Reduction of child malnutrition among children under 5 by at least 1/3, with special attention to children under 2 years, and reduction in the rate of low birth weight, weight for at least 1/3 of current rate.			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Prevalence of underweight –moderate and severe (%)	21% ³ (1999)	-	PIC Regional MDG Goals Report 2004
Prevalence of Stunting (%)	12 (1989)	-	National survey, MOH, 1989

¹ 130 (Lower estimate: 33- Upper estimate: 240), 2000 data, WHO database; www.who.int/reproductive_indicators/showdata.asp: In 2000, Total number of births was recorded at 12,503.

² No figure for total number of live births

³ 23% (1989), National Survey MOH, 1989

Prevalence of Wasting (%)	21% (1989)	-	Same as above
Prevalence of Anaemia among children under 18 years old (%)	25.8% (6-12 yr old) (2002)	-	Hughes et al, Study in 2 schools, 2002
Proportion of infant less than 4 months who are exclusively breastfed (%)	65 (2000)	-	UNICEF Pacific Island Country Profile, 2000

Goal: Enlarge the access to hygienic sanitation facilities and affordable and safe drinking water: Reduction in the proportion of households without access to hygienic sanitation facilities and affordable and safe drinking water by at least 1/3			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Proportion of households with sustainable access to an improved water source (%)	Total: 29.8 Urban: 80.9 Rural: 21.8 (1999)	Total: 70 Urban: 94 Rural: 65 (2004)	Pacific Island Regional MDG Report, 2004; WHO/UNICEF Joint Monitoring Programme on Water Supply and Sanitation
Proportion of households with sustainable access to an improved sanitation (%)	Total: 22.4 Urban: 85.3 Rural: 12.5 (1999)	Total: 31 Urban: 98 Rural: 18 (2004)	Pacific Island Regional MDG Report, 2004; WHO/UNICEF Joint Monitoring Programme on Water Supply and Sanitation

Target 2: Providing quality education

Goal: Expand early childhood care & education for children Expand and improve comprehensive early childhood care and education, for girls and boys, especially for the most vulnerable and disadvantaged children			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Early Childhood Education Net enrolment Ratio (%)	Total: 20.2 Male: 19.3 Female: 21.3 (2004)	Total: 22 Male: 21.7 Female: 22.4 (2005)	Solomon Island Government, Digest of Education Statistics 2005
Primary school net enrolment ratio (%)	Total: 56% ⁴ (2000)	Total: 94 Male: 94.9 Female: 93.3 (2005) ⁵	Solomon Island Government, Digest of Education Statistics 2005
Secondary school net enrolment ratio (%)	Total: 26.4 Male: 28.4	Total: 23.3 Male: 25.1	UNESCO/UIS database; Solomon Island Government,

⁴ Male = 78.2%. Female = 74.6% ** (1999), Solomon Is. Situational Analysis of Children, Youth & Women. 2003

⁵ Total 79.6, Male: 80.1, Female: 79 (2004) PIC Regional MDG Report 2004

	Female: 24.3 (2003) ⁶	Female: 21.3 (2005)	Digest of Education Statistics 2005
Survival rate to grade 5 (administrative data)	85 (1991)	-	PIC Regional MDG report, 2004
Years of education that is compulsory to attend (years)	No		Elimination of All forms of Discrimination and Violence against the Girl Child, 2006
Years of education that is free from charge	No (primary school fees were eliminated in 2004 but secondary school fee still exists)		Same as above

Goal: Eliminate illiteracy amongst adults Achieve a 50% improvement in levels of adult literacy by 2015, especially for women			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Adult literacy	62% (1991)	Males: 62% Females: 45% (2000-2004)	Pacific Regional MDG report, 2004; Elimination of All forms of Discrimination and Violence against the Girl Child, 2006;

Target 3: Protecting Against Abuse, Exploitation and Violence

Goal 1: Protect against abuse, exploitation, and violence	
CRC ratification	Established the National Advisory Council on Children (NACC) in 1993 and ratified the CRC in 1995 and presented the initial report to CRC.
NACC	In 2003, a Children's Desk Officer (CDO) was established within Youth, Women and Sport Division of Ministry of Home Affairs (MHA). The CDO mandate is to monitor the coordination of national programme and actions focused on children. CDO assumes the role of NCCC Secretariat and MHA Permanent Secretary chairs the NACC. From 2007, the newly established Ministry of Women, Youth and Children's Affairs will be the focal point for the implementation of the child related programmes and policies.
Measure to protect children from abuse, exploitation & violence	The legal representative of the NACC was charged with coordinating the formulation of a 'Child Rights Bill'. However, focus is now on the formulation of the 'Child Protection Bill' instead. In 2003 the NACC finalized a National Children's Policy and Plan of Action; however it has not received Cabinet endorsement. Children's issues have not been a main priority for the Government since early 1997 due to Government being more concerned with matters of national law and order due to civil unrests in 1999 and 2000. The minimum age of criminal responsibility is 8 years old.
Goal 2: Protect children from the impact of armed conflict	
OP status	The Government has signed the UN Convention Relating to the Status of Refugees (1951) and to its Protocol of 1967. However, there is no national refugee law in effect. In the absence of a refugee law, there is no legal method for determining refugee status of Bougainvilleans in Solomon Islands.
Legislative	

⁶ Male: 33.6, Female: 24.8 (1999), SITAN 2005

environment to protect the children in armed conflict	<p>There are no armed forces in Solomon Islands. Border reconnaissance forces are drawn from the domestic police forces; therefore, there is no conscription for adults or children.</p> <p>Minimum age for recruitment into the disciplined force is 18 years</p>
Goal 3: Fight against sexual exploitation	
Measure taken to protect children from sexual abuse	<p>Has not adopted the Stockholm Declaration and Agenda for Action.</p> <p>No legislation exists to deal specifically with CSEC.</p> <p>Ratified CEDAW in 2002</p> <p>The Penal Code, Cap 5, Part XVI deals with offences against morality. Sections 128 to 146 would cover certain particular situations relating to sexual abuse of children, especially girls.</p> <p>The Penal Code section 133 (1) states that a person who unlawfully and indecently assaults any woman or girl is guilty of a felony, and liable for imprisonment for a term of five years.</p> <p>Legal age of marriage is 15 years with father’s consent. Age of sexual consent is also 15 years.</p> <p>Above codes need to be broadened to include language that protects boys from similar crimes. The Law Reform Commission is the legal entity through which such changes would be channelled. However, it is up to interested individuals and advocacy organizations to submit the specific requests for such changes in the laws.</p>
Goal 4: Eliminate child labour	
ILO convention ratification status	<p>The Solomon Islands is a member state of the ILO conventions since 1985 but has not ratified C182 Worst Forms of Child Labour Convention or C138 Minimum Age Convention.</p> <p>However, 14 conventions have been ratified to date, two deal specifically with children and young people; C 16 Medical examination of Young Person (SEA) and C 81 Labour Inspection Convention.</p> <p>The Labour Act Section 84 sets out minimum age for admission to employment at 12 years old with exception allowed for children employed by or in the company of their parent or guardian in light work or agricultural/domestic or other forms of employment as may be approved by the Minister. Children under 12 are not allowed to work in any capacity in the industrial or commercial sectors.</p>
Goal 5: Improve the plight of millions of children who live under especially difficult circumstances	
<p>Improve the plight of children who live under especially difficult circumstances</p> <p>Refugee children</p>	<p>At least one group of Solomon Islands citizens-those from Kiribati, are disadvantaged because of their lack of customary land ownership rights. Other groups from small, remote outlying islands such as the Temotu Group, Ontong Java and Sikiana are greatly disadvantaged by their geographically remote positions and the associated difficulties in receiving services provided by government or businesses. Women and children are generally disadvantaged by the lack of power in social and economic spheres.</p> <p>The Solomon Islands Government de facto refugee policy is at the moment in conflict with existing immigration laws. It allows to some extent illegal entry, informal employment and residence for Bougainvilleans seeking medical treatment in the Solomon Islands and not wishing to return.</p>

Target 4: Combating HIV/AIDS

Goal: Time-bound national target & fight against gender based discrimination in relation to HIV/AIDS By 2003 establish time-bound national targets to achieve the internationally agreed global prevention goal to reduce by 2010 HIV prevalence among young men and women aged 15-24 by 25%			
Indicator	Baseline 2002 (or most recent data available)	Most recent data available	Source of Data
Status of HIV and AIDS policies and policies to fight against gender stereotypes and attitudes, and gender inequalities in relation to HIV / AIDS	Policies in place in 2002 through National HIV policy. By 2002 SI had held training for parliamentarians, the public sector, key church leaders, schools and communities. Policies in place in 2002. Solomon Islands is a signatory to CEDAW and CRC.	Solomon Islands' national HIV strategy is in place and has specific HIV activities around prevention, gender, and youth but does not provide identifiable targets. Solomon Islands' national HIV strategy is in place and has specific HIV activities around prevention, gender, and youth but does not provide identifiable targets.	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS reports; UNAIDS
Cumulative HIV cases (including AIDS)	-	5 (2005)	AIDS Section, Public Health Programme, SPC 2005
Cumulative HIV incidence-crude rate per 100,000 (99% CI)	-	1.1 (0.2 to 3.1) (2005)	AIDS Section, Public Health Programme, SPC 2005

Goal: Reduce HIV vertical transmission By 2005, reduce the proportion of infants infected with HIV by 20% and by 50% by 2010, by: ensuring that 80% of pregnant women accessing antenatal care have information, counselling and other HIV prevention services available to them; Increasing the availability of and by providing access for HIV infected women and babies to effective treatment to reduce mother-to-child transmission of HIV, as well as through effective interventions for HIV infected women, including VCCT; Access to treatment, especially ART and, where appropriate, breast milk substitutes and the provision of a continuum of care			
Indicator	Baseline 2002 (or most recent data available)	Most recent data available	Target for 2015 Source of Data
Mother to child transmission cases	There is no documented mother to child HIV transmission cases in Solomon Islands.	There is no documented mother to child HIV transmission cases in Solomon Islands.	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS reports; UNAIDS; UNIFEM; MoH; UNICEF Situation Review.
Status of PMTCT policy	No PMTCT targets have been set.	No PMTCT targets have been set.	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS reports; UNAIDS; UNIFEM; MoH; UNICEF Situation Review.
Access to treatment, especially ART and,	Treatment available to those identified	Treatment available to those identified	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS

where appropriate, breast milk substitutes and the provision of a continuum of care	and compliant. No milk substitute policy at baseline.	and compliant. No milk substitute policy.	reports; UNAIDS; UNIFEM; MoH; UNICEF Situation Review.
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