# Child Rights Situational Analysis

## Save the Children Fiji



*Child Led Child Rights Survey – Boy reflects on what child rights mean to him.*

<u>Photo Credits:</u> Save the Children Fiji, 2018

**March 2019**

Save the Children

Canada

# Acknowledgments

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# Acronyms

| | |
|---|---|
| ADB | Asian Development Bank |
| CAT | The Convention Against Torture and other cruel, inhumane degrading treatment |
| CEDAW | Convention on the Elimination of all forms of Discrimination Against Women |
| CPD | Criminal Procedure Decree |
| CRC | Convention on the Rights of the Child |
| CRPD | Convention on the Rights of People with Disability |
| CRSA | Child Rights Situation Analysis |
| CSEC | Commercial Sexual Exploitation of Children |
| CSO | Civil Society Organisation |
| CSU | Child Services Unit |
| DTP | Diphtheria, Tetanus, Polio |
| DSW | Department of Social Welfare |
| ECE | Early Childhood and Education |
| ECCE | Early Childhood Care and Education |
| FBO | Faith Based Organisations |
| FBS | Fiji Bureau of Statistics |
| FGD | Focus Group Discussion |
| FNCDP | Fiji National Council for Disabled Persons |
| FSL | Food Security and Livelihood |
| FWCC | Fiji Women Crisis Centre |
| FWRM | Fiji Women's Rights Movement |
| GCC | Great Council of Chiefs |
| GDP | Gross Domestic Product |
| GII | Gender Inequality Index |
| GMI | General Measures of Implementation |

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|---|---|
| HDI | Human Development Index |
| HIES | Household Income and Expenditure Surveys |
| HIV and AIDS | Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome |
| IERD | International Covenant on the elimination of all Forms of Racial Discrimination |
| ILO | International Labour Organisation |
| IMR | Infant Mortality Rate |
| IPV | Intimate Partner Violence |
| IWDA | International Women Development Agency |
| KII | Key Informant Interview |
| KLF | Kids Link Fiji |
| MDG | Millennium Development Goal |
| MoEHA | Ministry of Education, Heritage and Arts |
| MoFNP | Ministry of Finance and National Planning |
| MoHMS | Ministry of Health and Medical Services |
| MSP | Medical Services Pacific |
| MWCPA | Ministry of Women, Children and Poverty Alleviation |
| NCCC | National Coordinating Committee on Children |
| NCD | Non Communicable Diseases |
| NER | Net Enrolment Rate |
| NGO | Non-Governmental Organisations |
| NMR | Neonatal Mortality Rate |
| ODA | Overseas Development Aid |
| ODPP | Office of the Director of Public Prosecutions |
| OP-CRC AC | Optional Protocol to the Convention on the Rights of the Child on the involvement of children in Armed Conflict |
| OP-CRC SC | Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, child prostitution and child pornography |

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|---|---|
| OP-CRPD | Optional Protocol to the Convention on the Rights of the Child on the rights of persons with Disabilities |
| OPD | Office of the Director of Public Prosecutions |
| RFHAF | Reproductive and Family Health Association of Fiji |
| SDG | Sustainable Development Goals |
| STI | Sexually Transmitted Infections |
| SC Fiji | Save the Children |
| TFFG | Tuition Fee Free Grant |
| TVET | Technical and Vocational Education Training |
| U5MR | Under 5 Mortality Rate |
| UNCRC | United Nations Convention on the Rights of the Child |
| UNHRC | United Nations Human Rights Council |
| UNDP | United Nations Development Programme |
| UNICEF | United Nations International Children Fund |
| UPR | Universal Periodic Review |
| WASH | Water, Sanitation and Hygiene |
| WHO | World Health Organisation |

# Executive Summary

Protecting and promoting child rights is at the core of Save the Children's work, and as such, a Child Rights Situation Analysis (CRSA) is a central part of its planning cycle. This CRSA will assist Save the Children Fiji (SC Fiji) determine its country level strategies, as well as the thematic areas to pursue in the next planning cycle (2019-2021). It is based on an extensive literature review, interviews with key informants and children from the Northern, Central and Western divisions. An important element of this CRSA relies upon its child centred methodology – involving children in the design and conduct of child rights surveys, and allowing for the voice of children to be heard.

Fiji is making steady progress towards the realisation of child rights. Most notably, the improvement in maternal and child health across Fiji is the result of better antenatal services coverage, high immunization rates, the promotion of breastfeeding, the application of Integrated Management of Childhood Illness techniques, as well as improved access to clean water and sanitation.[1] Furthermore, Fiji achieves high primary and secondary school enrolment rates, as well as gender parity in schools.[2] Free basic education has been extended to twelve (12) years, and increased funding and grants for school tuition fees, as well as various assistance schemes have been established to ensure that every school-aged child has access to primary and secondary education since 2014.[3] Enrolment in Early Childhood Education (ECE) has also benefitted from a tremendous boost in recent years,[4] increasing from 14.1% in 2004[5] to 85% in 2017.[6]

Significant issues remain however, with clear implications for the realisation of child rights. Despite Fiji's status as an upper middle-income country,[7] an estimated 61% of children live in or are vulnerable to poverty, and UNICEF (2015) estimates that up to 80% of children live in families that do not have the means to provide for their adequate development. Inequalities between national and sub-national levels persist, and particularly disadvantaged are children living in rural areas, squatter settlements, low quality urban dwellings and the Northern division.[8] Urbanisation is on the rise, and with little land available and housing largely unaffordable, the growing urban population is increasingly pushed into living in informal settlements, many without basic amenities, adequate housing and tenure security.[9] Traditional social support systems increasingly struggle to cope with high levels of urbanization, migration and the increasing monetization of economies, impacting women and children in particular. Climate change is expected to exacerbate this pressure, especially for children,[10] with short and long-term impacts on health, safety, education and development.

## Health and Nutrition
The increasing dependency on food imports, and the leaning towards cheaper, but nutritionally inferior food, as well as the decline in local food production[11] are leading to poor health outcomes for Fiji's children. Under nutrition is the leading cause of childhood mortality, and micro nutrient deficiencies labelled a major public health issue.[12] The rise in childhood obesity is also concerning, and contributes to Fiji's growing Non Communicable Diseases (NCD) epidemic.[13] Food security at the household level is mostly a challenge for the poorer urban families due to lack of access to land and resources, together with increasing land degradation. Fiji's vulnerability to disasters also results

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[1] PIFS, 2015
[2] WB, 2015
[3] MoEHA, 2015
[4] UNICEF, 2017
[5] UNESCO, cited in UNICEF, 2017
[6] UNICEF, 2017
[7] WB, 2002; Ministry of Economy, 2017
[8] IWDA, 2017
[9] WB, 2017
[10] UNCRC, 2014
[11] SPC, 2011
[12] MoHMS, 2016
[13] MoHMS, 2016

in a degree of instability in food supply.[14] Despite availability of sexual and reproductive health services, [15] social taboos[16] and gender dynamics,[17] mean that many young girls do not have their need for family planning satisfied. Sexually Transmitted Infections (STIs) are common and the rate of teenage pregnancies is high and increasing, almost double that of the Asia Pacific regional average.[18]  Though access to water and sanitation has much improved since the 1990s, records suggest that adequate water and sanitation levels are only met in 75% of primary schools and that inequity of access persists.[19]

## Education
Despite increased and more equitable access to ECCE, issues of quality and teacher qualifications remain to be addressed. Retention rates at the secondary school level highlight that a relatively high number of students, particularly boys, drop out before completing their secondary education.[20] The government's promotion of inclusive education is an encouraging step towards ensuring more children living with disabilities access schooling, however a suspected large number are still out of school.[21] Low functional literacy and numeracy levels[22] hinder access to work opportunities and the ability to fully participate in society. The rate of child-to-child violence in school is concerning, with a new phenomenon, cyber-bullying, on the rise.[23]

## Child Protection
Social and cultural norms around masculinity and gender power relationships mean that violence is a form of discipline and conflict resolution. Rates of violence against women are among the highest in the world, with 64% of women reporting physical and/or sexual violence by a husband or intimate partner over their lifetime, whilst in comparison the global average is 30%.[24] Studies show that abusive behaviour in the home is likely to be passed down through families, and affects children's emotional and physical health, their behaviour and their schooling.[25] Violence against children as a form of discipline is the standard in 72% of households, and finds its justification in religious and cultural norms, as well as in the lack of known alternative disciplining strategies.[26] Rates of Child Sexual Abuse (CSA) are alarming, with 1 in 5 girls reporting having experienced sexual abuse before the age of 15.[27] Besides the damaging emotional and physiological impacts of CSA, other impacts include low self-esteem, depression, self-harm, suicidal thoughts, early sexual exposure, use of alcohol and substance abuse, and the risk of unwanted teenage pregnancy and of STI, including HIV. Child labour, mostly justified as the need to help the family, is increasing and is exacerbated by factors such as urban migration, poverty, homelessness and living away from parents.[28] The Commercial Sexual Exploitation of Children (CSEC) commonly referred to as the worst form of child labour, also takes place in Fiji, and mostly affects girls aged 13-17.[29]

## Child Rights Governance
Child Rights is often a misunderstood concept, seen as conflicting with traditional social, cultural and religious norms and customs. Parents interviewed for this CRSA commonly aired the perspective that child rights is a hindrance to disciplining, putting them at risk of being reported. Children also showed little understanding, with the overwhelming majority explaining that the best protection from abuse was to listen to parents and do as you were told.[30] Though there is a good amount of

[14] WB, 2017
[15] PIFS, 2015
[16] FWCC, 2013
[17] Fiji Women Crisis Centre, 2013
[18] UNDP, 2016
[19] UNICEF East Asia Pacific Regional Office WASH data (2012) cited in UNICEF, 2017
[20] MoEHA, 2018; Save the Children, 2018
[21] UNICEF, 2015
[22] MoEHA, 2018
[23] IDADAIT, 2018
[24] FWCC, 2013
[25] WHO, 2013 and UNICEF, 2015
[26] UNICEF, 2008
[27] UNICEF, 2015
[28] UNCRC, 2014
[29] ILO, 2010
[30] Save the Children, 2018

legislation and frameworks in place to protect child rights, more financial and human resources are needed to ensure the legislation is adequately implemented. More thorough monitoring and evaluation systems, as well as consolidated disaggregated data is also necessary to assess child rights related policies and report on their implementation.

A snapshot of key issues, which are highlighted in the above executive summary, is presented in the table below. These were outlined by Save the Children staff as part of the CRSA process:

### Health and Nutrition (Breakthrough 1: SURVIVE)
- Poor nutrition a growing concern for children in the face of the Non Communicable Diseases (NCD) epidemic.
- Adolescent birth rate almost doubles that of the Asia Pacific regional average.
- Adequate water and sanitation not always available in schools.

### Education (Breakthrough 2: LEARN)
- More and more children are enrolling in ECCE, but standards of quality remain to be addressed.
- Secondary school drop outs and low attendance a concern, particularly among boys.
- High child-to-child violence in schools.

### Child Protection (Breakthrough 3: BE PROTECTED)
- Critical level of violence against children in the home.
- Alarming levels of child sexual abuse.
- Children exploited to work to supplement the family income.

### Child Rights Governance
- Poor awareness and understanding of child rights amongst children and parents.
- Additional financial and human resources needed for implementation of child rights legislation.
- Stronger monitoring, as well as consolidated disaggregated data systems, required to assess the impacts of Child Rights related policies, and to inform decision-making and strategies.

### Cross-Cutting
- Children growing up in informal settlements and under-served rural communities most at risk of multidimensional poverty.
- Climate Change increasingly affects children in Fiji, with major short and long-term implications for their health, education, safety and development.
- Social norms and gender dynamics mean girls are the most vulnerable children in Fiji, across all sectors.

These key challenges for Fiji are elaborated upon in Section 4 of this report.

Each of these challenges were explored by staff alongside the country's capability analysis and funding portfolio, to determine which should be incorporated into the upcoming Save the Children Country Strategic Plan (2019-2021).

## Summary of strategic opportunities for Save the Children Fiji, based on the SC Theory of Change:
- **Save the Children Fiji must remain committed to working with the most vulnerable and marginalised children, identified through the CRSA as children living with disabilities, from poor families, and girls.** These are the children in Fiji who face many more barriers to the full realisation of their rights, affecting their ability to survive, develop and thrive. Save the Children Fiji must ensure their voices are acknowledged throughout its programming.

- **Child centred research, which was piloted through this CRSA, must be built upon to become a trademark of Save the Children Fiji.** The needs of children as voiced through

the child led CRSA surveys should be further investigated and prioritised, and annual planning processes, as well as strategies, must continue to be informed in this innovative manner by the perspectives and experiences of children and youth.

- **Save the Children Fiji should advocate, as well as develop training and capacity building for all those involved in the implementation process of child rights**. Through its partnership with the MoEHA, SC Fiji should consider opportunities to promote the dual concepts of child rights and responsibilities. The partnership with DSW should be strengthened to promote child rights education at the community level through advocacy work.

- **Save the Children Fiji must partner with Faith Based Organisations to promote and take positive disciplining initiatives to scale, and campaign for** the integration of child protection mechanisms within existing community structures. The 'steps to protect' approach should be rolled out through new partnerships at the regional level.

- **Save the Children Fiji ought to advocate for and support the development of a National Plan of Action for children.** This framework will enable the National Coordinating Committee on Children to analyse effective policy implementation and to perform its duties of monitoring progress of the realisation of child rights.

- **Save the Children Fiji must contribute to filling research gaps concerning vulnerable children**, as highlighted through this CRSA. This will assist Save the Children Fiji carry out **evidence-based advocacy** to influence the development of child rights laws and policies that recognise sub-national inequalities.

- **Save the Children Fiji should be innovative with this CRSA, and keep the analysis as a live document**. Save the Children Fiji should set up a CRSA coordination team tasked with organising periodic reviews and updates based on programme findings or research, and with engaging with the upcoming Universal Periodic Review.

# 1. Introduction

## 1.1 Background and scope

**Save the Children Fiji is a Non-Governmental Organisation dedicated to improving the lives of children in Fiji since 1972**. SC Fiji has worked in 52 informal communities and villages in Fiji, helping children access health and education programmes, and advocating at the national level for child rights on behalf of children.

**In 2018, Save the Children Fiji undertook a Child Rights Situation Analysis (CRSA).** A CRSA provides a current description of the extent to which children's rights are being realised, and an analysis of the barriers and enablers to their realisation. It is a central part of Save the Children's planning cycle, providing evidence-based information from which to engage strategically with donors and other stakeholders, and to inform the Country Strategic Plan (CSP). Furthermore, the CRSA process is an opportunity for capacity building, encouraging staff to think critically about the child rights situation in their country, and to reflect on the barriers, as well as the opportunities linked to the fulfilment of these rights.

**Central to a CRSA is the social contract between children (the rights holders) and those institutions in place to protect and fulfill their rights (the duty bearers)** (See *Fig.1*). For rights to be realized, systems of accountability and opportunities for rights holders, in this case the children, to participate and claim their rights are essential. The CRSA provides an opportunity to map out and analyze roles and responsibilities, as well as capacities to fulfill these, and to discuss what needs to be in place.

Fig. 1 Duty bearers and rights holders



*Source: Save the Children Resource Centre, CRSA Guidelines*

**This CRSA was undertaken to inform Save the Children Fiji's strategic planning cycle for 2019-2021**. It is focused on the organisation's key strategic areas of work, namely Health and Nutrition (Breakthrough 1: Survive), Education (Breakthrough 2: Survive), Child Protection (Breakthrough 3: Be protected) and Child Rights Governance. It also provides an overview of crosscutting issues affecting the realisation of child rights, which became apparent during the CRSA process. Importantly, this CRSA has provided Save the Children Fiji an opportunity to fulfil its mandate to children, by involving them in the research design and information gathering, and by including their voices on what matters most to them.

## 1.2 Structure of the CRSA Report

This CRSA Report presents key findings based on literature reviews, fieldwork and consultations with both duty bearers and rights holders. It is structured as follows:

- *Section 2* presents the methodology adopted to pursue the necessary research for this CRSA;

- *Section 3* provides an overview of the country context in which rights are realised, and includes a review of the geographic and demographic, political, economic and socio-cultural and religious landscape. A range of crosscutting issues, which may influence the realisation of child rights, namely gender, urbanisation, resilience and disability are also highlighted;

- *Section 4* presents a detailed analysis of how child rights are evolving in Fiji under Save the Children's key strategic areas of work: Health and Nutrition, Education, Child Protection and Child Rights Governance. Crosscutting issues such as child poverty, gender and resilience and climate change, disaster risk reduction, identified as critical, in terms of how they influence the realisation of child rights, are also presented in detail. An overview of the key challenges identified by Save the Children staff during Stage 2 of the CRSA process, is presented under each heading;

- *Section 5* shares the often-marginalised voice of children with a focus on children's understanding of child rights in Fiji, their perception of inequalities in their community and of their capacity to influence change, and their aspirations.

- *Section 6* examines strategic opportunities that have been identified through the CRSA process and draws upon Save the Children's areas of work to inspire breakthroughs through the Theory of Change model.

# 2. Methodology

This section presents the methodology adopted to pursue the necessary research for this CRSA Report.

2.1 Research design

**Research methods.** This report relies on the collection and analysis of both primary and secondary data. <u>Primary data</u> was obtained from semi-structured Key Informant Interviews (KIIs) with relevant stakeholders, a Focus Group Discussions (FGD) with parents, and child led surveys with children. Key findings from KIIs are shared in *Section 4*. Findings from the FGD and the child rights surveys are shared in *Section 5*. Data collection tools for the child rights surveys can be found in *Annex A.*

<u>Secondary data</u> was obtained through a literature review of relevant documents including national policies and strategies, progress and assessment reports, journal articles and consulting reports. Key findings from the literature review are shared in *Sections 3* and *4*.

**Research stages.** This report is the outcome of a staged CRSA process that took place in the Save the Children Fiji from April to December 2018.

**During Stage 1** (April to June 2018), a literature review was conducted with the aim of gathering information on the context in which child rights evolve. Information gathered was presented through a dashboard under the headings of: Politics, Economics, Socio-Cultural and Religious, Child Rights, and Natural Geography/ Demographics, and reviewed collectively by a cross-section of Save the Children staff during a one-day workshop. This provided staff an opportunity to come together to discuss openly how politics, economics, power and socio-cultural norms affect children's rights in Fiji. It was an opportunity to examine the social contract between the duty bearers and the rights holders, and how these two actors engage in the country context. This process drew on Save the Children staff's implicit knowledge and expertise.

**During Stage 2** (July to September 2018), a second literature review was conducted focusing this time on the child rights situation in Fiji, through the lens of Save the Children's global breakthroughs (1: Survive; 2: Learn; 3: Be protected) and key thematic areas of work: Health and Nutrition, Education, Child Protection, Child Poverty and Child Rights Governance. Cross-thematic issues, such as gender, disability, urbanisation and resilience were also examined in detail. A two-day workshop involving staff took place to examine the information gathered. The workshop discussions and analysis of data resulted in a table presenting key challenges to the realisation of child rights in Fiji (as highlighted in the *executive* summary and under each heading *in Section 4*).

Fieldwork took place **during Stage 3** (September to December 2018), and consisted of seven KIIs with stakeholders from partner organisations, 161 child surveys and one FGD with parents. KIIs provided an opportunity to validate the Save the Children Fiji CRSA findings, follow-up where gaps had been identified and learn from different perspectives, identifying issues along the way that are important to stakeholders and which may not have been considered. It was an opportunity to learn what different actors are focusing on and their approaches to fulfilling child rights in Fiji. Child led surveys shed light on children's perception of child rights in Fiji, on the extent of child participation and discrimination in their communities and on the changes children want to see. The FGD with parents helped highlight parents' perspectives and understanding on child rights, the way they feel the world is changing for their children and the changes they want to see for future generations. This was important information given the very central role that parents play in shaping their children's life and the fulfilment of their rights.
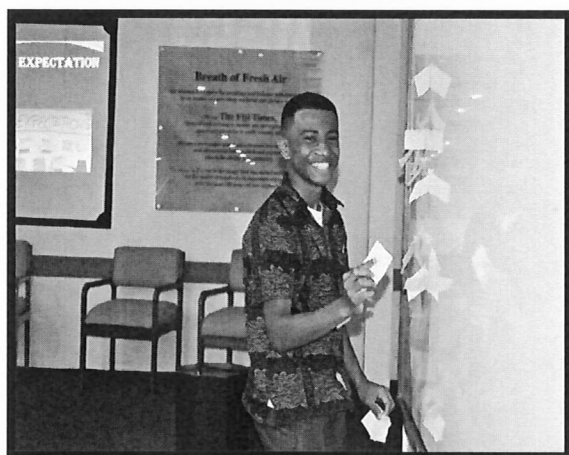
**Research scope.** Stakeholders working in the fields of health and nutrition, education, early childhood education, child protection, child governance, child labour and disability, were approached and a total of seven KIIs were conducted. The child interviews targeted 19 communities across the

Northern (Kia, Nacula and Naqai), the Western (Natawarau, Kashmir, Navutu, Saravi and Drasa Vitogo) and the Central (Kinoya, Naulu, Nausori, Koronivia, Nakasi, Kalekana, Narere, Raralevu, Vunisaleka, Wailoku and Tamavua-I-Wai) divisions of Fiji ensuring that a good representation of urban/semi-urban and rural areas was included. A total of 161 youth participated in the interviews (81 boys and 80 girls), aged from 11-18 years old. Details concerning the child survey respondents and a listing of key informants can be found in *Annex B* and *Annex C* respectively.

## 2.2 Research approach

**Participatory.** An independent consultant was engaged to collate the data and to write the report. The CRSA process, however was very much participatory and ensured that Save the Children Fiji staff were involved at regular intervals in reviewing the data, discussing it and analysing it, through one on one discussions with the consultant, and through two workshops that took place involving approximately 15 staff from a cross-section of thematic areas of work. Besides updating the staff's knowledge of child rights issues and building capacity within the Organisation, the CRSA process has helped inform the office's strategic focus, programme design, advocacy strategies and other aspects of work for the upcoming strategic cycle (2019-2021).

**Child-centred.** Importantly, the CRSA process was also as much as possible child-centred. As an organisation that works on behalf of children, it was important to give children a voice through this report, to understand what is most important to them, the main issues they are facing and how they want their world to change. Children provide the CRSA a unique and critical perspective on the violation of their rights, one that is seldom listened to and often marginalised. Involving children was an opportunity to understand who the most deprived children are and what they perceive to be the root causes of their deprivation. This information helps Save the Children be accountable in their work, as they support children and the fulfilment of their rights. The consultant actively engaged with Kids Link Fiji (KLF), a SC Fiji child-led initiative made up 45 local members aged from 14 to 17 years' old that was established with the aim of empowering children, turning them into agents of change in their communities. For this CRSA, 18 KLF members from the Western and Central divisions received training on the topics of child protection and safeguarding and 25 KLF members from the Central division received training on gender equality and social inclusion topics. KLF members were actively involved in designing children surveys on child rights and were dispatched around Fiji, in communities in which Save the Children already works, to conduct interviews with children. Three (3) workshops involving 90 children took place in the final stages of the CRSA to highlight the survey results and further give opportunities for children's voices to be heard on the changes they want to see. Much of this is reflected in *Section 5* of this report.

## 2.3 Research limitations

During the data collection phase, a number of limitations were identified. These are highlighted below, along with the steps that were taken to overcome these:

**A thorough analysis of child rights in Fiji is rendered difficult where gaps in recent data are identified and impact assessments of policies are yet to be conducted.** Some of the gaps highlighted by this CRSA concern <u>recent data</u> related to stunting/ wasting, data specific to children living with disabilities, data on the impacts of climate change on children, data on the unmet need for family planning, as well as <u>impact assessments of policies</u> such as the policy on Tuition Fee Free Grant (TFFG), on Special and Inclusive Education, WASH in school policies, and schemes and initiatives, such as the C and P Allowance and the DSW Positive Parenting programmes. Discussions with key stakeholders were essential and to some extent helped overcome some of these gaps.

**Child-led surveys only targeted children in three divisions** (Northern, Central and Western). Due to time and funding constraints, it was not possible to reach out to children in the Eastern division. As responses are fairly uniform across all three divisions, it is assumed that children in the Eastern division share similar experiences and concerns to those that were interviewed. At the end of the fieldwork, three workshops with children and youth took place. This was an opportunity to feedback on the fieldwork findings and to hear the thoughts and child rights perspectives of a further 90 children participants.

**Parents in the targeted communities did not always welcome the survey on child rights**, with a number of parents withholding their children's participation, and openly voicing their criticism. Child rights is a contentious issue, as was further revealed through a FGD with parents. Where possible talks took place with parents to explain the nature of the child rights survey and allow them a chance to voice their concerns.

**KLF members, children and youth themselves, were not always equipped to hear the stories that survey participants shared with them**. Some members found the accounts of children's experiences difficult to process. Debrief sessions were provided to KLF members to allow them to talk about the issues that arose during their interviews.

# 3. Analysis of country environment

This section provides an overview of the context in which child rights are evolving in Fiji.

## 3.1 Natural geography and demography

Fiji is a Pacific island country made up of 332 islands, of which 106 are inhabited. Most of Fiji's population, estimated at 884,887[31] resides on two main islands: Viti Levu, which hosts the capital Suva and over 75% of the population, and Vanua Levu.[32] Two main ethnic groups make up the bulk of the population: the I-Taukei (indigenous Fijians) who make up approximately 56.8% of the population and the Indo-Fijians (Fijians of Indian descent) who make up approximately 37.5%,[33] whose forefathers first came to Fiji in the late 1800s - early 1900s, as indentured labourers under the British colonial rule. Other ethnic groups to be found in Fiji are Chinese, people of European descents and people from other Pacific Islands. English, Fijian and Hindustani are the official languages of Fiji. Different regions also have their own dialects.[34]

The decline in birth rate and out migration means population growth has been steadily declining over the past decade, from 2% in 1986 to 0.6% in 2017.[35] Fiji's population is young, with 10.4% of the population under five years of age. By 2030, 34% of the population is expected to be less than 17 years old. A higher proportion of the young, aged from 0 to 14 live in the rural areas.[36]

There are few economic opportunities outside of the urban centres, with people in rural areas and the outer islands, mainly relying on subsistence agriculture as a source of livelihood and food security.[37] As a result, the proportion of Fiji's urban population continues to increase, from 37.2% in 1976, to 55.9% in 2017 (*See Fig.2*).[38] Fiji is the first Melanesian country to cross the 50% urbanisation threshold.[39]

Fig. 2 Urbanisation trend in Fiji from 1996-2017



*Source: Fiji Bureau of Statistics, 2017*

Lack of available land and largely unaffordable housing means that an increasing number of people live in squatter and informal settlements - from 77,794 in 128 settlements in 2007 to 96,510 in 212 settlements by 2015, meaning that 63% of total population growth in Fiji has occurred in unplanned,

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[31] FBS, 2017
[32] World Population Review, 2018
[33] FBS, 2007 (No updated data on ethnic composition)
[34] Fiji Government online, 2018
[35] FBS, 2017
[36] UNICEF, 2015
[37] FAO, 2003; UNICEF, 2015
[38] FBS, 2017
[39] UN Habitat, 2016

extra-legal, informal settlements.[40] The number of informal settlements has also grown, from 128 in 2007 to 212 in 2015,[41] the majority of which are found in the greater Suva area (*See Fig.3 and 4*).[42]

Fig.3 Population living in informal settlements
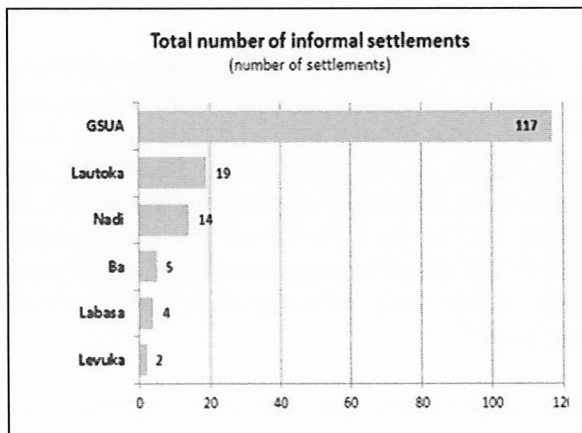
Fig.4 Number of informal settlements
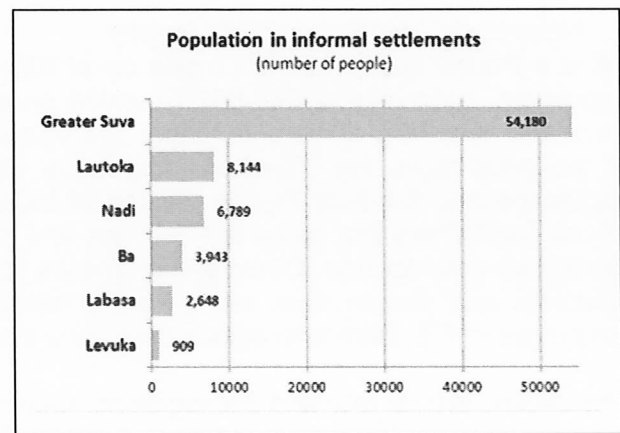




*Source:* IWDA (2017), Exploring multi-dimensional poverty in Fiji

UN Habitat (2016) describes informal settlements as representing extremes of poverty and social exclusion, and argues that the increase in such settlements is now mainly driven by factors within urban areas. Indeed, municipalities face many challenges to accommodate the population, related to urban poverty and employment, environmental risk, land administration, infrastructure provision and maintenance and population growth.[43] The vast majority of people living in informal settlements, besides having no proper legal title to their homes, also often do not have basic amenities such as piped water, sewerage, and electricity,[44] and are overall highly vulnerable to the impacts of climate change.[45]

Fiji is located within the ring of fire and the cyclone belt, rendering it strongly susceptible to disaster risks (See *Table 1*), including floods, cyclones, droughts and less frequently, though still a serious risk, tsunamis and earthquakes.[46] Socio-economic and psychological impacts of disasters on the affected population are tremendous.[47]

## Table 1. Direct impact of major disasters 1970-2016

| DISASTER | NUMBER OF EVENTS | NUMBER OF PEOPLE AFFECTED | NUMBER OF PEOPLE KILLED |
|---|---|---|---|
| Drought | 6 | 840,860 | 0 |
| Tropical cyclone | 66 | 1,888,490 | 355 |
| Flood | 44 | 563,310 | 103 |
| Severe local storm | 2 | 8,370 | 17 |
| Earthquakes | 10 | 0 | 5 |
| Tsunami | 2 | 0 | 0 |
| TOTAL | 130 | 3,299,030 | 480 |

*Source:* World Bank (2017), Climate Vulnerability Assessment: Making Fiji Climate Resilient

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[40] World Bank, 2017
[41] World Bank, 2017
[42] IWDA, 2017
[43] UN Habitat, 2016
[44] UNDP, 2014
[45] UN Habitat, 2016
[46] IASC and EC, 2017
[47] World Bank, 2017

Tropical cyclones and flood losses translate into an average of 25,700 people being pushed into poverty every year in Fiji.[48] The World Bank (2017) further highlights that *"Despite the population's resilience, the risk to livelihoods and wellbeing is high and natural hazards keep people in poverty."* Tropical cyclone Winston (2016) alone impacted 62% of the population, and caused the displacement of an estimated 55,000 people.[49] Climate change experienced in Fiji through an increase in extreme weather patterns and sea level rise, is expected to place substantial pressure on the Fijian Government's ability to deliver on its sustainable development plans and policies.

## 3.2 Politics

Fiji is a parliamentary republic headed by a President and a Prime Minister. Elections are held every four years, following a democratic Westminster style of government.[50] Central government, along with 14 provincial administrations and 17 districts are in charge of delivering services. Villages are headed by a Turaga ni Koro, a traditional custom chief who yields significant influence over village affairs.[51] Faith Based Organisations (FBOs), Non-Governmental Organisations (NGOs), and Civil Society Organisations (CSOs) also deliver various services and programmes.

Historical events have had a strong influence over Fiji's political landscape. Fiji was under British colonial rule for almost a century before attaining independence in October 1970. Between 1987 and 2006, Fiji underwent four political coups largely dominated by racial and ethnic discourse. In 2006, Voreqe Bainimarama, the head of the Fijian army, dismissed the government, and assumed presidency. Significantly, he also suspended the Great Council of Chiefs (GCC) or Bose Levu Vakaturaga, made up of around 55 hereditary chiefs, which traditionally had looked after indigenous Fijian interests, and assumed the role of nominating the President and of selecting 14 of the 32-senate members. In 2013, the GCC was formally removed from the Constitution. Fiji was suspended from the Commonwealth until 2014, when it was fully reinstated, following Voreqe Bainimarama's Fiji First party's democratic win in the general elections.

Important concerns remain however, with the freedom in the world Fiji Country report (2017) highlighting the ruling party's frequent interferences with opposition activities, the judiciary being subjected to political influence, and reported cases of military brutality. Freedom in the World (2018) gives Fiji's freedom of the press a poor ranking of 3 out of 7, with 1 being the least free and 7 being the most. Human Rights Watch (2014) raises concerns about the Media Decree, claiming it restricts freedom of expression, with tough penalties aimed at deterring media outlets from directly criticising the government. This claim is however strongly disputed by the ruling government, who view the Media Decree as a code of conduct for the media industry, establishing fair and professional reporting, to act in the best public and national interests.

## 3.3 Economy

Fiji is classified as an Upper Middle Income country,[52] with a steadily growing per capita gross domestic product (GDP) estimated at $7,685 in 2017.[53] Fiji's main GDP contributing actors are Services (67%), Industry (18%) and Agriculture (14%).[54] The tourism sector is currently the most significant international trade service sector, contributing FJD$ 2.94 billion to the economy.[55] Fiji's geographic isolation, scattered population, narrow resource base, strong reliance on subsistence farming (especially in the rural areas) and vulnerability to disasters (including droughts, floods, cyclones, earthquakes, tsunamis) however, represent serious constraints to its economic development and ability to attract foreign investments.[56] In recent years, Fiji has on average benefitted from 2% of its GDP in Overseas Development Aid (ODA), a very small percentage in

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[48] World Bank, 2017
[49] OXFAM, 2017
[50] Fiji Government, online http://www.parliament.gov.fj/our-story/
[51] Fiji Government, 2016
[52] ADB, 2015
[53] FBS, 2017
[54] WB, 2016
[55] Fiji Government, 2016 available online at:
http://www.fiji.gov.fj/Media-Center/Speeches/MINISTER-FOR-INDUSTRY-TRADE-TOURISM-LANDS-AND-M.aspx
[56] WB, 2006

comparison to its Pacific neighbours (35% in Samoa, 60% in Solomon Islands).[57] Its biggest donor has historically been Australia,[58] however, less traditional donors such as China have become increasingly important.[59]

The Labour Force Participation Rate (*labour force/ population aged over 15 years*) stands at 57.1%.[60] The overall prevalence of informality (60%),[61] however, raises serious concerns about the vulnerability of households. Particularly at risk are families working in the agricultural sector, Fiji's biggest employer (44.2%)[62], where informal employment accounts for 94.8% of professional activities.[63] Traditionally family social safety nets are strong in Fiji, and private donations as well as remittances from abroad are significant, as highlighted by the fact that 10.5% of households depend on remittances for income.[64] Gender gaps in labour participation are significant. Most men aged 15 and above (75.8%) are employed or actively looking for work, while less than half of women (41.6%) are.[65] Women's labour force participation also varies by ethnicity, with 53% of i-Taukei women belonging to the labour force, as opposed to only 37% of Indo-Fijian women.[66]

In terms of social and economic development, the UN has attributed a Human Development Index (HDI) of 0.721 to Fiji, placing it 101 in the world.[67] This is classified as a high human development. The incidence of poverty is overall steadily declining from 35% to 28.1% according to the 2013-2014 Household Income and Expenditure Surveys (HIES). Whilst rural poverty is declining however (from 43 in 2008 to 36.7 in 2014), urban poverty is on the rise (from 18 in 2008 to 19.8 in 2014).[68] The majority of the poor are concentrated in urban and peri-urban areas around Suva and Nadi.[69] Notably, inequality in wealth distribution is classified as very high, with a Gini index of economic inequality of 42.78 (based on HIES 2008-2009 data), which places Fiji as one of the most unequal countries in the region, just behind Solomon Islands and Papua New Guinea.[70]

The cost of natural hazard-induced disasters is likely to increase over the coming decades, driven by socioeconomic trends, such as increasing urbanization and concentrations of development along coastlines, and climate change.[71] The World Bank (2017) predicts that climate change is likely to significantly impact agricultural production, which will impact food availability and prices, making it harder for families living below or close to the poverty line to access nutritious diets. The report also highlights dire outcomes for the tourism sector, which contributes to 38% of the GDP and is an essential source of income for 90,000 people. The combination of cyclones, ocean acidification, and sea warming are likely to cause degradation or loss to the coral reefs and coastal areas on which tourism is heavily reliant. The loss of these environmental assets will affect many families and the economy, and adaptation costs are estimated to run into the billions. [72] As a recent example of disaster costs, tropical cyclone Winston in 2016 caused losses amounting to FJ$2 billion (or 20% of GDP) and impacted approximately 62% of the Fiji population.

3.4 Social, cultural and religious

Fiji presents a unique blend of cultures: Indigenous Fijian, Indian, Chinese, European and other Pacific Island groups have all contributed to Fiji's way of life and shaped the modern Fijian national identity. The indigenous Fijian community, which is predominant, is communal in nature, with importance placed on the family, the village and the vanua. The vanua is a key Fijian concept, and

[57] Asia and Pacific Policy Studies, 2016
[58] Asia and Pacific Policy Studies, 2016
[59] ODI, 2014
[60] FBS, 2017
[61] ILO and ADB, 2015
[62] ILO, 2016
[63] ILO and ADB, 2015
[64] FBS, 2013-2014
[65] ADB and ILO, 2015
[66] ADB, 2015
[67] UNDP, 2015
[68] HIES, 2013-2014
[69] UNDP, 2014
[70] IWDA, 2017
[71] WB, 2017
[72] Fiji Government, 2016

is understood by: *the people, their traditions and customs, beliefs and values, and the various other institutions established for the sake of achieving harmony, solidarity and prosperity within a particular social context. [...] It provides a sense of identity and belonging. [...] The vanua [...] is an extension of the concept of the self.*[73]

Fiji is a predominantly Christian country (539,536 of the population), with the majority of Christians belonging to the Methodist branch of Christianity.[74] Besides Christianity, Hinduism and to a lesser extent Islam, are also practiced. Fiji's Constitution guarantees that all are free to practice their religion, so long as they do not impose it on others. FBOs yield a very significant influence over people's lives.

Perception of the place that children hold in society and understanding of child rights is rooted in traditional norms, customs, and models of decision making that give more power to adults than to children.[75] Whilst children occupy a prime place in both Fijian and Indo-Fijian families,[76] they are also rarely given a voice and are socially dependent.[77] Raising Fijian children is often modelled on how this would be done in the village setting, where responsibility for the child's well-being does not only befall the parents, but the community as a whole. This model is often not replicable in the urban setting however, where lack of parental supervision and/ or the cultural practice of entrusting children to relatives, leave many children vulnerable to abuse and neglect.[78] Traditionally, Indo-Fijian families permit their children less freedom; in particular parents tend to be strict with girls who are given less independence than their male siblings.

Indigenous Fijian and Indo-Fijian communities are patriarchal with distinctly established traditional gender roles. The Global Gender Gap Report (2014) ranks Fiji 122 out of 142 countries, with a score of 0.629 (0.00 = inequality; 1.00 = equality).[79] A key marker of gender inequality in Fiji is violence against women. An estimated 7 in 10 women report being subjected to physical and/or sexual violence by either a partner or non-partner since turning 15 years old.[80] Other estimates claim that every day in Fiji 43 women are injured, 1 woman is permanently disabled, and 71 women lose consciousness.[81]

Though there are few women in positions of leadership or power (See *Fig.5*), the number of parliamentary seats held by women has gradually increased, from 0 in 1991,[82] to 16% in 2016.[83]

Fig. 5 Women in political leadership and senior public service in Fiji in 2015
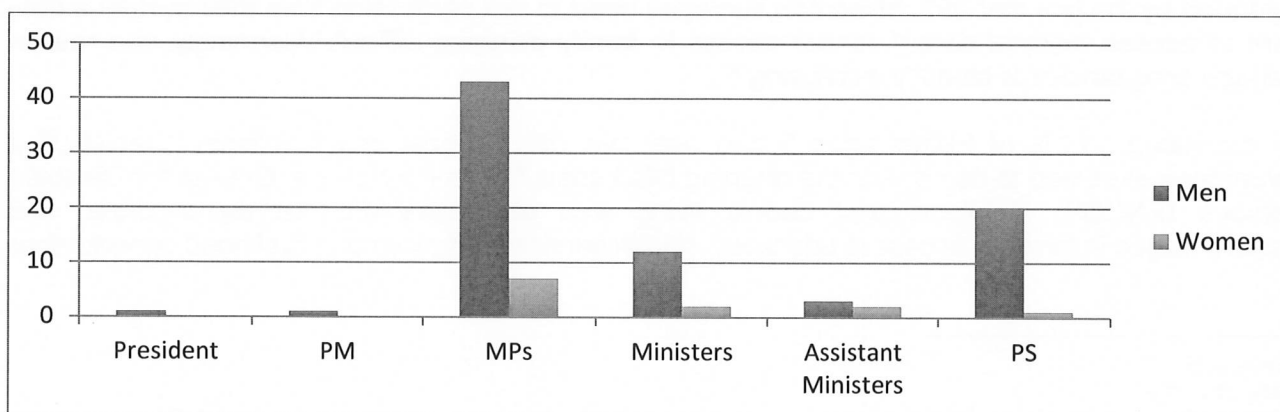
[73] Ravuvu, 1983 cited in Sienkiewicz, 2000
[74] FBS, 2007
[75] Jayaweera and Morioka, 2008, cited in UNICEF, 2010
[76] UNICEF, 2009
[77] Adinkrah, 1995; Monsell-Davis, 2000; Vakaoti, 2007. Cited in UNICEF, 2009
[78] UNICEF, 2009
[79] World Economic Forum, 2014
[80] MoHMS, 2016
[81] FWRM, 2017
[82] Ministry of Finance and National Planning, 2004
[83] UNDP, 2016

The Gender Inequality Index (GII), which looks at inequality in achievement between women and men through the dimensions of reproductive health, empowerment and the labour market, stands at 0.358 for Fiji,[84] an improvement from 0.468 in 2003 (*See Table 2*).[85]

Table 2. Fiji GII relative to other selected countries and groups

| | GII Value | GII rank | Maternal Mortality Ratio | Adolescent birth rate | Female seats in parliament (%) | Population with at least some secondary education (%) | | Labour force participation rate (%) | |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | F | M | F | M |
| **Fiji** | 0.358 | 75 | 30 | 44.8 | 16.0 | 73.9 | 66.5 | 37.0 | 71.3 |
| **Samoa** | 0.439 | 97 | 51 | 25.0 | 6.1 | 77.8 | 70.4 | 23.1 | 58.0 |
| **East Asia and the Pacific** | 0.315 | - | 63 | 23.1 | 19.6 | 64.1 | 73.0 | 62.3 | 79.1 |
| **High HDI** | 0.291 | - | 36 | 27.4 | 21.6 | 66.9 | 74.0 | 56.5 | 77.1 |

Women have overall more limited access to resources[86] and lack autonomy in the household, which directly impacts their decision-making capacity.[87] Women are found to have less say than men, and as such have less power in raising concerns or effecting change in the community.[88]

On average, Fijians can expect to live up to 70.[89] The vast majority (80%) of premature deaths are linked to NCD.[90] Most notably, Fiji recently ranked number 1 in the world for diabetes related deaths.[91] Obesity and malnutrition trends due to poor diets are growing concerns in the context of what the MoHMS has labelled the NCD epidemic.[92] Despite wide access to family planning services, social constraints, such as taboos surrounding reproductive health,[93] but also gender dynamics illustrated by the fact that 39% of women surveyed need to ask permission from their partner if they want to access medical care,[94] render access to family planning difficult. Alarmingly, the rate of teenage pregnancies is steadily increasing.[95]

An estimated 13.7% of Fijians aged 3 and over live with at least one functional disability,[96] a percentage expected to rise due to the ongoing NCD crisis.[97] The Fiji National Council for Disabled Persons (FNCDP) highlights that people living with disabilities are "largely invisible" and disadvantaged in terms of access to education, health services, employment, livelihood opportunities

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[84] UNDP, 2016
[85] HIES, 2008-2009
[86] UNICEF, 2015
[87] Chattier, Priya and Morgan, Emele 2012, cited in UNESCAP, 2018: https://egov4women.unescapsdd.org/country-overviews/fiji/gender-equality-and-women%E2%80%99s-empowerment-priorities-in-fiji
[88] IWDA, 2017
[89] WB, 2015
[90] MoHMS, 2016
[91] World Life Expectancy, 2018, cited online:
 http://fijivillage.com/news-feature/Fiji-has-highest-rate-of-diabetes-fatalities-in-the-world--k95rs2
[92] PIFS, 2015
[93] IWDA, 2017
[94] FWCC, 2013
[95] PIFS, 2015
[96] FBS, 2017
[97] ADB, 2015

and support services.[98] Many factors influence the experiences of people living with disability in Fiji, namely where they live and how easily accessible services such as health and education are for them, household income, and religious beliefs.[99]

## 3.5 Human rights

Over the last 45 years, Fiji has made a number of specific international and national commitments to upholding human rights: the International Covenant on the Elimination of all forms of Racial Discrimination (IERD), the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW), the Convention Against Torture and other cruel, inhumane degrading treatment (CAT), the Convention on the Rights of People with Disability (CRPD).[100] Fiji's commitment has been met with global approval with the international community backing Fiji's candidacy in 2018 as the first Pacific Island nation to have a seat on the United Nations Human Rights Council (UNHRC).

Rights specific to children include: the Convention on the Rights of the Child (CRC) ratified in 1993, the Optional Protocol to the CRC on the involvement of children in Armed Conflict (OP-CRC AC) signed in 2005, the Optional Protocol to the CRC on the Sale of Children, Child Prostitution and Child Pornography (OP-CRC SC) signed in 2005, the Optional Protocol to the CRC on the Rights of Persons with Disabilities (OP-CRPD) signed in 2010, [101] as well as the minimum age ILO Convention ratified in 1973 and the Worst forms of Labour Convention ratified in 1999.

The government's commitment is demonstrated through the significant number of policies and legislations that are now in place to enable the realization of child rights in Fiji, and through the roles assigned to various government ministries, such as the Ministry of Women, Children and Poverty Alleviation and the Department of Social Welfare (DSW), and the Ministries of Health and Medical Services (MoHMS) and of Education, Heritage and Arts (MoEHA). The National Coordinating Committee on Children (NCCC) was specifically established to monitor child right implementation. Budget allocation for the realization of child rights is also progressively increasing.

Public demand for compliance with some aspects of the CRC is steadily growing, with more and more coming forward to denounce situations of abuse. The government's toll free Child Helpline initiative in particular recorded 15,667 calls in 2016-2017 alone.[102] Anecdotal evidence, however as well as interviews carried out with community members for this CRSA suggests that child rights is still perceived as a foreign concept, largely misunderstood as a hindrance to parental authority and to children's discipline.

[98] FNCDP, 2010
[99] UNDP, 2009
[100] SPC, 2016
[101] SPC, 2016
[102] Ministry of Women, Children and Poverty Alleviation, 2017

# 4. Child Rights in Fiji

This section examines the realisation of child rights, under Save the Children's key strategic areas of work, namely Health and Nutrition (Breakthrough 1: Survive), Education (Breakthrough 2: Survive), Child Protection (Breakthrough 3: Be Protected) and Child Rights Governance. It also provides an overview of crosscutting issues, such as poverty, gender and resilience, affecting the realisation of child rights, which became apparent during the CRSA process.

4.1 Health and nutrition (Breakthrough 1: SURVIVE)
Under Health and Nutrition, three key challenges to the realisation of child rights in Fiji were identified, namely:

1. Poor nutrition a growing concern for children in the face of the NCD epidemic.
2. Adolescent birth rate almost doubles that of the Asia Pacific regional average.
3. Adequate water and sanitation not always available in schools.

A detailed description and analysis of the health and nutrition landscape affecting the realisation of child rights in Fiji is provided below.

### 4.1.1 Child survival and maternal health
*The right to maternal health and early childhood health is referenced in the CRC under **Article 6** (Right to Survival). It is also addressed under **SDG 3**: ensuring healthy lives and promoting well-being for all ages, and more specifically under **SDG 3.1**: which encourages all countries to reduce the global maternal mortality ratio to less than 70 per 100,000 live births by 2013 and **SDG 3.2**, which encourages countries to end all preventable deaths of children under 5 years old, reducing Neonatal Mortality Rates (NMR) to at least as low as 12 per 1,000 live births and Under 5 Mortality Rates (U5MR) to at least as low as 25 per 1,000 live births.*

Overall improvement in child health across Fiji, as illustrated in *Table 3* below, can be seen as the result of increased access to antenatal services, high immunization coverage, exclusive breastfeeding, application of the Integrated Management of Childhood Illness techniques, as well as improved access to clean water and sanitation,[103] all of which have been encouraged through the **Ministry of Health and Medical Services Strategic Plan** (2016 – 2020) and the **Child Health Policy and Strategic Plan** (2012-2015).

Table 3. Child and Maternal Health Indicators against international targets

|  | Indicators | 1990 | Latest indicators | International Targets |
|---|---|---|---|---|
| Maternal Health | Maternal mortality ratio/ 100,000 live births | 41 | 20.9 (MoHMS, 2016) | 70 (SDG - 2030) |
|  | Proportion of births attended by a skilled health personnel |  | 99.6% (MoHMS, 2016) | 100% (MDG - 2015) |
|  | Antenatal Care Coverage |  | 99% (UNICEF, 2013) | 100% (MDG - 2015) |
|  | Contraceptive prevalence |  | 48.3% (MoHMS, 2016) | 56% (MDG - 2015) |

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| Child Survival | Infant Mortality Rate (IMR)*/ 1,000 live births | 25 | 13.9 (MoHMS, 2016) | 5.5 (MDG - 2015) |
|---|---|---|---|---|
| | Neonatal Mortality Rate (NMR)**/ 1,000 live births | | <6.5 | 12 (SDG - 2030) |
| | U5MR***/1,000 live births | 30 27 (ACSD) | 17.9 (MoHMS, 2016) | 25 (SDG - 2030) |

*Probability of dying between birth and the first birthday per 1,000 live births*
**Probability of dying between birth and less than 28 days per 1,000 live births*
***Probability of dying between birth and the 5th birthday per 1,000 live births*
*Source: Table compiled with data from UNICEF (2013), Fiji: Tracking Progress in Maternal and Child Survival; PIFS, 2015 Pacific Region MDG Tracking Report; MoHMS (2016), Health Status Report and SPC (2015), Trends in Neonatal and Infant Mortality Rates in the Pacific Island States*

The Ministry of Health and Medical Services (MoHMS) reports close to 100% skilled birth attendance,[104] a significant indicator of health status given its importance for maternal and infant pregnancy outcomes. [105] Though less than 20% of women seek antenatal care in the first semester (See *Fig.6*), antenatal coverage is overall deemed high,[106] with 99% of women reporting at least one antenatal visit during their pregnancy.[107]

Fig. 6 Antenatal care coverage rate
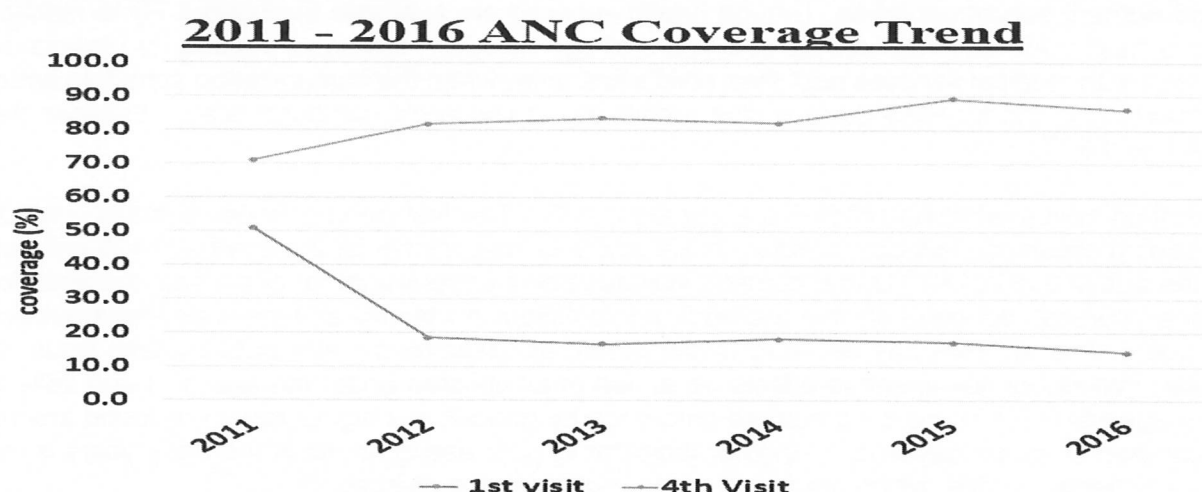


*Source: MoHMS (2016), Health Status Report*

This high antenatal coverage rate is consistent with Fiji's low maternal mortality rates (20.9/100,000 live births) and NMR (<6.5/1,000).[108] The Under 5 Mortality Rate (U5MR) has also been declining steadily, from 30 in 1990 to 17.9 in 2016, thus Fiji meets its SDG 3.2 targets.

The time and travel cost of accessing quality healthcare however, places rural children at a disadvantage.[109] The U5MR is for instance significantly higher in the Eastern and Northern Divisions, where the remoteness of villages and lack of easily accessible health services are contributing factors.[110] Though the U5MR has been declining steadily, the Infant Mortality Rate (IMR) remains

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[104] MoHMS, 2016
[105] WB, 2015
[106] PIFS, 2013
[107] MoHMS, 2016
[108] MoHMS, 2016
[109] ADB, 2015
[110] UNICEF, 2013

moderately high, hovering around 15 for 1,000 live births since 2010, and reaching 13.9 in 2016.[111] Notably, 50% of child deaths below the age of 5 occur between birth and the first 28 days.[112] The first week of life is especially critical, with 60% of deaths occurring in the first year of life classified as perinatal or neonatal deaths.[113]

Fiji has achieved almost universal immunisation coverage, with 94% of 1 year olds immunised against Measles,[114] 99% immunised against DTP and Polio, and over 90% immunized against pneumonia.[115] Furthermore, 91% of children have received all ten antigens on the national schedule.[116] This has proven a cost effective strategy, significantly contributing to reducing child morbidity and the country's health burden.

### 4.1.2 Nutrition
*The right to good nutrition is referenced in the CRC under **Article 6** (Right to Survival) and **Article 24** (Right to nutritious food). It is also addressed under **SDG 2**: End hunger, achieve food security, and promote sustainable agriculture, and in particular under **SDG 2.1**, which encourages all countries to end all forms of malnutrition by 2030, and **SDG 2.2**, which encourages all countries to meet the internationally agreed targets on stunting and wasting for children under the age of 5 by 2025.*

The **Fiji Plan of Action for Nutrition** provides a framework to address nutrition issues and includes children in its strategy. A number of health programmes are carried out by the MoHMS around various communities in Fiji, mostly aimed at teaching what constitutes healthy eating. Some programmes target mothers and infants, with a focus on encouraging breastfeeding, as well as infant milk and nutrient supplementation. Though health services are available throughout Fiji to monitor children's health and development up to 5 years of age however, the great majority of parents do not consult with medical services past their child's first year, when the immunization schedule ends, thus according to the MoHMS there is little monitoring of children's nutritional status between the ages of 1 and 5.[117]

Two nutrition trends affecting children are apparent in Fiji. The first trend is under nutrition – which is the leading cause of childhood mortality in Fiji, and was responsible for the deaths of 420 children under the age of 5 in 2013.[118] Under nutrition includes being underweight for one's age, too short for one's age (stunted), dangerously thin (wasted), and deficient in vitamins and minerals (micronutrient malnutrition). The MoHMS has declared micronutrient deficiencies a major public health issue. In particular, iron deficiency anaemia affects up to half of all children under the age of 5 and 25% of children aged 5-11.[119] There is no marked difference by gender, but higher rates are found among Fijian children of Indian descent.[120] Another indicator of poor eating habits in the early years is the high rate of dental carries, which are found among school going children.[121]

A relatively small number, 7.5% of children, are classified as stunted in 2007, with the highest percentage recorded among children of Fijian children of Indian descent.[122] Female children were found more likely to be stunted than male.[123] Stunting is a largely irreversible outcome of poor nutrition and repeated infections in early childhood, which carries consequences for future health, reproductive functions, cognitive capabilities and overall development.[124] Wasting also affects a

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[111] MoHMS, 2016
[112] UNICEF, 2013
[113] UNICEF, 2013
[114] UNICEF, 2013
[115] WHO, UNICEF, MoH, 2014
[116] MoHMS, 2013
[117] KII with MoH, 2018
[118] MoHMS website
[119] MoHMS, 2016
[120] UNICEF, 2013
[121] MoHMS, 2016
[122] *National Food and Nutrition Council, 2008*
[123] *National Food and Nutrition Council, 2008*
[124] WHO, 2014

small number, 6.3% of children,[125] predominantly those of Indo-Fijian descent [126](see *Fig. 7 and 8*). Wasting is a significant health issue, associated to risks of morbidity.[127] The agreed international target for wasting is to reduce the number of children under 5 who are wasted to less than 5%. In Fiji, this target is not reached as far as Fijian children of Indian descent are concerned, however more up to date statistics are required to reach a conclusion.

Fig. 7 Prevalence of Stunting*                          Fig. 8 Prevalence of Wasting**
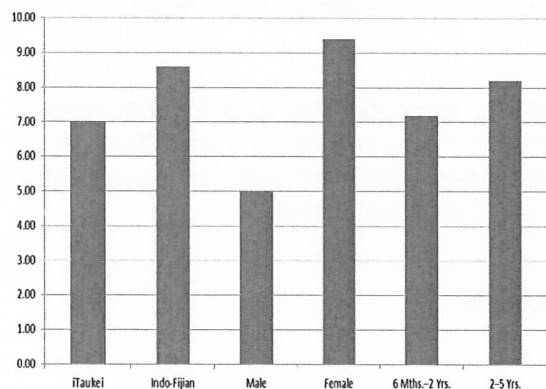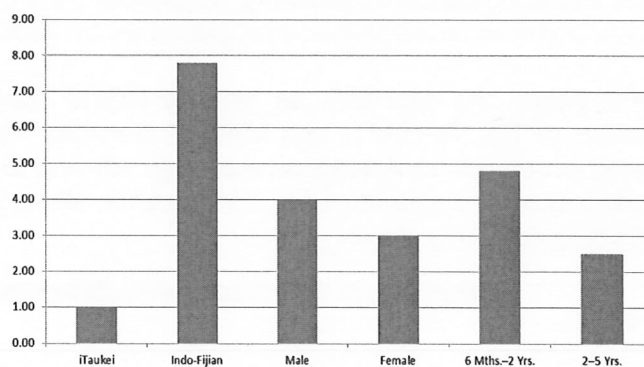


*Percentage of children under 5 whose height for age was, at least, two standard deviations below the median
**Weight for height more than two standard deviations below the median
Source: National Food and Nutrition Council (2008), Micronutrient Status of children aged 6 months to 5 years

Childhood obesity, defined as abnormal or excessive fat accumulation that presents a risk to health, is another concerning nutrition trend that has been observed. Consequences of childhood obesity can lead to a number of serious physical health issues (early onset diabetes, heart disease, lifestyle related cancers, etc.), as well as mental health issues (bullying, low self-esteem, depression).[128] In Fiji, 9% of school-aged children are classified as obese.[129] This percentage is steadily on the rise since 2013, though this may be explained by better reporting mechanisms through more recent school health programs (See *Fig.9*), which target school going children in three key areas: nutrition and physical education, WASH and mental health. These are supported by the **Fiji School Health Policy**, which establishes the MoHMS and the Ministry of Education, Heritage and Arts (MoEHA)'s commitment to ensuring that school going children achieve their optimal growth and development, and to following the WHO School Health Guidelines in Fiji.

Fig. 9 Fiji School Obesity Trend (2013-2016)



2013-2016 School Obesity Trend

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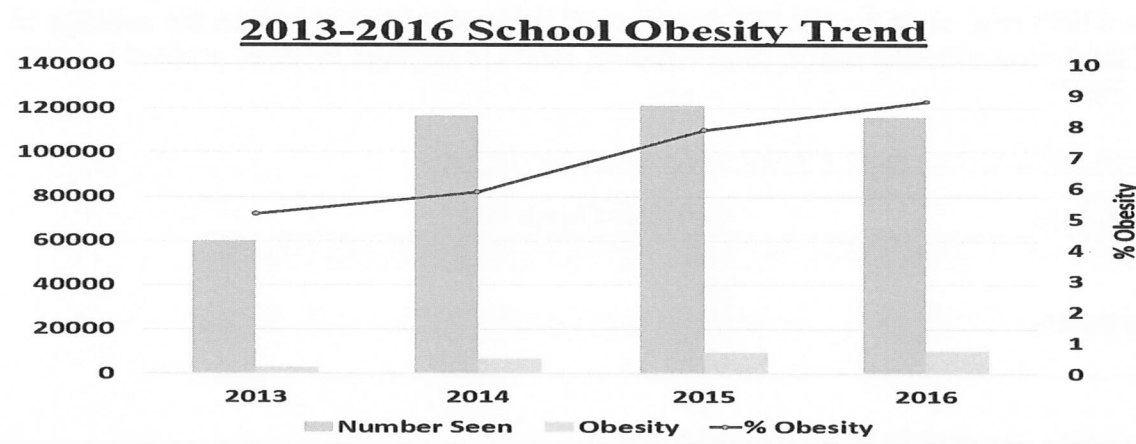
[125] WB, 2004 accessible online:
https://tradingeconomics.com/fiji/prevalence-of-wasting-percent-of-children-under-5-wb-data.html
[126] *National Food and Nutrition Council, 2008*
[127] WHO, 2014
[128] MoHMS, accessible online http://www.health.gov.fj/?page_id=1374
[129] MoHMS, 2016

### 4.1.3 Sexual and reproductive health

*The right to sexual and reproductive health is referenced in the CRC under **Article 13** (Right to information), **Article 24** (Right to quality health care), **Articles 5** and **14** (Right to be guided as children grow and gain autonomy in their decision making). It is also addressed under **SDG 3**: ensuring healthy lives and promoting well-being for all ages, and more specifically under **SDG 3.7**, which encourages all countries to ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes by 2030.*

In recent years, the MoHMS, as well as NGOs such as the Reproductive and Family Health Association of Fiji (RFHAF)) and Medical Services Pacific (MSP), have turned their attention to increasing access to contraception (see *Fig. 10*) and to making reproductive health services widely available, including some targeting adolescents, albeit less so in the rural areas.[130]

Fig. 10 Contraceptive Prevalence Rate



**2000-2016 Contraceptive Prevalance Rate**
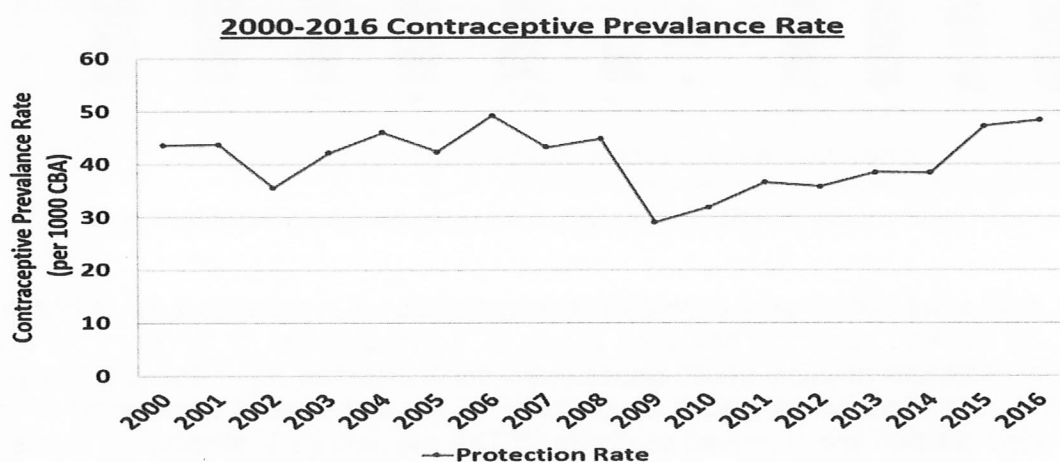
*Source: MOHMS (2016), Health Status Report*

Despite the MoHMS's promotion of services, contraception use among currently married women (aged 15–49) is relatively low (38%)[131] and there is no data on the unmet need for family planning, which is the percentage of childbearing age women who want to stop or delay pregnancy, but who for a number of factors, such as lack of information, fear of approaching doctors, lack of decision-making power, socio-cultural and religious factors, are not using contraceptive methods.

Fiji's adolescent birth rate, at 44.8 per 1,000 live births[132] is significantly higher than the average of 23.1 for the East Asia and Pacific region (See *Table 4*). Births to teenage mothers account for 10% of all births in Fiji.[133]

Table 4. Fiji Adolescent birth rate relative to selected countries and groups

| Countries or groups | Adolescent birth rate * |
|---|---|
| Fiji | 44.8 |
| Samoa | 25 |
| East Asia and Pacific | 23.1 |
| High HDI | 27.4 |

* Number of births per 1,000 live births for women aged 15-19
*Source: Table compiled with data extracted from UNDP (2016), Human Development Report*

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[130] PIFS, 2015
[131] ADB, 2015
[132] PIFS, 2015
[133] MoHMS, Reproductive Health Policy

Historically, teenage pregnancies affect more I-Taukei girls, but an upward trend amongst Fijian girls of Indian descent girls is now seen.[134] The 2007 census showed that teenage pregnancy rates were higher in the rural areas (42 v. 30),[135] though more recent data is required to assess whether this is still the case. According to research, teenage pregnancies carry a number of detrimental socio-economic and psychological consequences for the young mother and her child, amongst others an increased risk of dropping out of school, of ending up unemployed or in low paid employment, of living in poverty and of suffering from depression.[136] Pregnant teenagers in Fiji also report facing social stigma and often, high levels of abuse from their families and communities,[137] whilst teenage male partners are rarely affected by the pregnancy at all.[138] Teenage pregnancies also carry medical risks, such as premature births or low birth weight, greater risks of medical complications at the time of the birth, with girls younger than 20, twice as likely to die in childbirth.[139]

Contributing factors to high adolescent birth rates in Fiji may include poor communication between parents and children about reproductive health and sex in general, absence of comprehensive sex education in schools, young men not sharing responsibility and consequences of pregnancies, low awareness among teenagers about contraception methods, and high rates of sexual abuse and rape of young girls.[140] A high rate of Sexually Transmitted Infections (STI), which disproportionately affects young people, suggests that condoms are seldom used. Over 70% of STI cases recorded in Health Clinics across Fiji are attributed to young people aged 15-25 years,[141] and 37% of women under the age of 25 tested positive for chlamydia in 2012.[142] HIV prevalence is low in Fiji (730 people living with HIV in 2016),[143] yet findings indicate that behavioural risk factors for HIV and unwanted pregnancies are high. Though the MoHMS acknowledges the need to specifically address adolescent health through its **Adolescent Health Programme**, and to protect the health of young people, including adolescents, in relation to sexual and reproductive health, there are no specific health services, including that provided by NGOs, for adolescents that can provide gender responsive and life skills based information, counselling and care specifically targeted at this vulnerable age group.

### 4.1.4 Water, Sanitation and Hygiene (WASH)

*The right to WASH is referenced in the CRC under **Article 24** (Right to clean water and clean environment). It is also addressed under **SDG 6**: Ensure availability and sustainable management of water and sanitation for all, and in particular under **SDG 6.1**, which encourages all countries to achieve universal and equitable access to safe and affordable drinking water for all, and **SDG 6.2**, which encourages all countries to achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations, by 2030.*

WASH programmes take place around the country through health care facilities, as well as through schools. Hygiene, closely linked to sanitation and public health, is often taught through these programmes. The MoEHA has established **National Standards for WASH in Schools**, as well as toolkits to support WASH in target areas. The WASH in Schools **(WinS) Policy**, which relies on UNICEF's three star approach,[144] encourages schools to take simple, inexpensive steps to ensure that all students wash their hands with soap, have access to drinking water, and are provided with clean, gender-segregated toilets at school every day. WASH initiatives also take place at times of

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[134] MoHMS, 2016
[135] FBS, 2007
[136] UNICEF, 2009
[137] UNICEF, How Teenage Pregnancies affect Teenagers online https://www.unicef.org/pacificislands/1849_2919.html
[138] UNICEF, How Teenage Pregnancies affect Teenagers online https://www.unicef.org/pacificislands/1849_2919.html
[139] UNICEF, 2009
[140] ADB, 2015
[141] WHO website
[142] MoHMS, 2012
[143] WHO, 2016
[144] UNICEF, Field Guide: The Three Star Approach for WASH in Schools. Accessible at https://www.unicef.org/wash/schools/files/UNICEF_Field_Guide-3_Star-Guide(1).pdf

disaster when water sources and sanitation facilities may have been destroyed, giving children the tools and knowledge to practice hygiene to fight off water born infections and diseases.

Overall access to improved water sources has increased by 13% since 1990, and disparities in access between urban and rural areas have significantly reduced.[145] According to the MoHMS (2016), 96% of the population is now using improved drinking water sources.[146] Some disparities still exist however, with the IWDA (2017) highlighting that informal settlements and rural areas are the most deprived in the water dimension.[147] Informal settlement residents often struggle with water reliability, as reflected by the fact that 40% of respondents reported that they rarely or never have enough water for their personal needs. More women respondents than men highlighted this issue. Rural area residents on the other hand sometimes experience issues to access water, traveling in some cases up to 90 minutes each way to find a source.[148] Water collection traditionally befalls women and children, thus exposing them to potential risks of violence, as well as using up their productive time. For children in the rural areas, the most common source of water is communal standpipes. A high proportion of rural children also obtain water from boreholes, roof tanks, wells and rivers.[149]

Access to improved sanitation has increased by 52% since 1990.[150] According to the MoHMS (2016), 91% of the population is now using improved sanitation facilities.[151] The great majority of people have access to private flushing toilets, regardless of settlement type, followed by ventilated pits (mostly found in informal settlements and rural areas). Open defecation is no longer an issue in Fiji, though in rural areas people report more secondary toilet facilities, which include the bush, fields or rivers. Rural areas are overall more deprived when it comes to sanitation, with WHO-UNICEF (2014) estimating that 18% of rural households do not have access to improved sanitation. This problem can be further exacerbated during and after a natural disaster event,[152] when pit latrines for instance risk over spilling and exposing people to health issues.[153]

The situation in schools around Fiji is more difficult to gauge. Disaggregated data is needed to establish the impact of the WinS Policy, and whether or not National Standards are being met,[154] but records suggest that only 75% of primary schools have access to adequate water and sanitation for their pupils, and that whilst most schools claim access to improved water facilities, inequity of access persists. [155] Access to basic facilities for hand washing is important for public health, and is also very important for menstrual hygiene. Lack of access to these facilities can negatively impact girls' health, dignity and safety, as well as attendance in school. A recent UNICEF study (2017) on Menstrual Hygiene Management (MHM) found that in Fiji, schools often have insufficient resources and that in particular, toilet paper and sanitation products were often lacking.


## 4.2 Education (Breakthrough 2: LEARN)

Under Education, three key challenges to the realisation of child rights in Fiji were identified, namely:

1. More and more children are enrolling in ECCE, but standards of quality remain to be addressed.
2. Secondary school drop outs and low attendance a concern, particularly among boys.
3. High child-to-child violence in schools.

A detailed description and analysis of the education landscape affecting the realization of child rights in Fiji is provided below.

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[145] WHO-UNICEF, 2014
[146] MoHMS, 2016
[147] IWDA, 2017
[148] IWDA, 2017
[149] UNICEF, 2015
[150] WHO-UNICEF, 2014
[151] MoHMS 2016
[152] IWDA, 2017
[153] UN HABITAT, 2016
[154] MoHMS, 2016 WASH in schools accessible online: http://washinschoolsmapping.com/projects/fiji.html
[155] UNICEF East Asia Pacific Regional Office WASH data (2012) cited in UNICEF, 2017

## 4.2.1 Early childhood education

*The right to Early Childhood Education (ECE) is referenced in the CRC under **Article 28** (Right to Education). It is also addressed under **SDG 4:** Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all, and in particular **SDG 4.2**, which encourages all countries to ensure that all girls and boys have access to quality early childhood development, care and pre-primary education, so that they are ready for primary education by 2030.*

ECE has benefited of a boost in recent years. It has been included in Fiji's **Education Act** (2015), and a national **ECE Policy** has been established, which provides guidelines to assist schools, organizations and third parties providing ECE centre-based programming for young children aged three to eight years old. Furthermore, the government has made grants available to Early Childhood Care and Education (ECCE) centres (FJ$50 per term for each 5-year old child in the country), subsidized pre-primary education for 1 year, increased teachers' pay, and supported a national ECE curricula, including guidelines for child outcomes, teaching and caring practices, and monitoring and assessment strategies.[156]

As a result, enrolment in ECE has risen sharply, from 14.1% in 2004[157] to 85% in 2017.[158] Notably, Fiji now has one of the highest ECE Net Enrolment Ratio (NER) in the region, just behind the Cook Islands (See *Fig. 11*).[159]

Fig. 11 Coverage level of ECE across the Pacific Island Countries
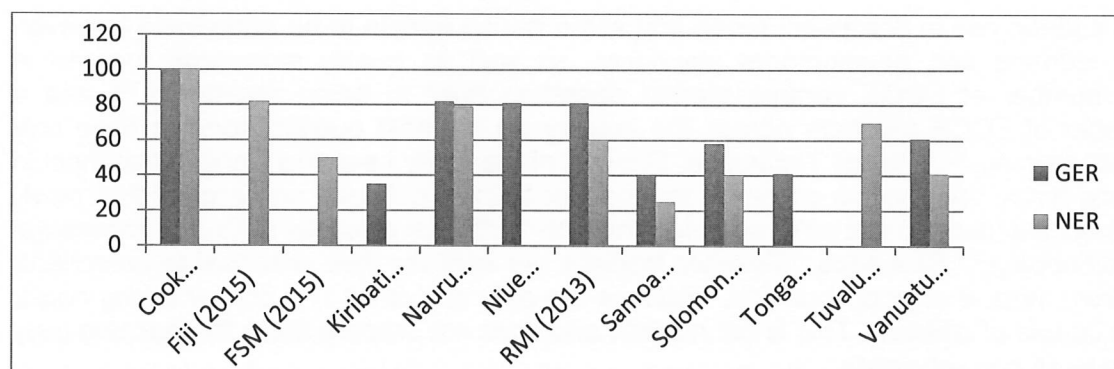


*GER:* The number of children enrolled in a level (primary or secondary), regardless of age, divided by the population of the age group that officially corresponds to the same level.
**NER: Ratio of the number of school age children who are enrolled in education, relative to the total population of children of school going age, expressed as a percentage
Source: UNICEF (2017), Status Report on Early Childhood Care and Education in the PICS

Geographical disparities in terms of ECCE provision have significantly reduced. The number of ECCE centres in the Eastern division has risen from 43 in 2011 to 111 in 2019. Similarly, in the Northern division, the number of ECCE centres has risen from 83 in 2011 to 270 in 2019 (See *Fig. 12 and 13*).
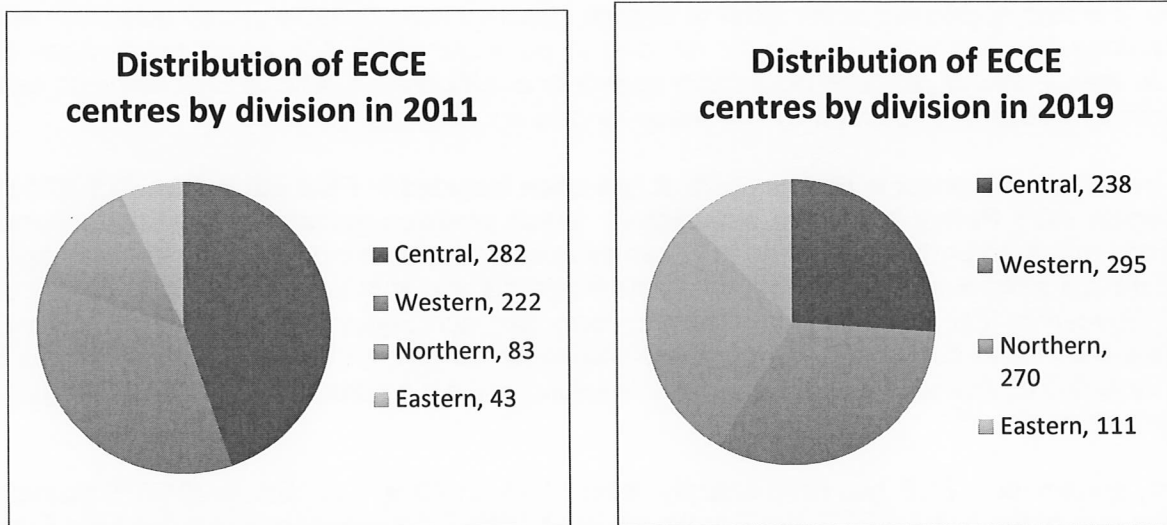
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[156] MoEHA, cited in UNICEF, 2017
[157] UNESCO, cited in UNICEF, 2017
[158] UNICEF, 2017
[159] UNICEF, 2017

Fig. 12 and 13 Distribution of ECCE Centres across Fiji in 2011 versus 2019



**Distribution of ECCE centres by division in 2011**

- Central, 282
- Western, 222
- Northern, 83
- Eastern, 43

**Distribution of ECCE centres by division in 2019**

- Central, 238
- Western, 295
- Northern, 270
- Eastern, 111

*Source: MoEHA, 2019*

The great majority of pre-schoolers still live in the Western and Central divisions, 39% and 40% respectively, whilst 15% live in the Northern division, and 6% in the Eastern division.[160]

The sharp and sudden rise in enrolment mean that some issues remain to be addressed however. Notably, early learning and development standards, as well as quality standards are still in progress,[161] a number of ECCE centres started operating prior to being registered,[162] and a significant number of ECCE teachers across the country do not hold qualifications or have only undergone basic training.[163] Analesi Tuicaumia, Director of the Early Learning Centre preschool in Suva and Mobile Kindy operator, is critical of the teacher training colleges and argues that newly qualified preschool teachers do not join the profession with *"sufficient practical skills and knowledge of teaching methodology."* She adds, *"Teacher trainees are sent for their practical to preschools which are far from models of good practice. Trainees are then told to sit in a corner taking notes, and evaluate a couple of children. This is not realistic and does not prepare them for teaching busy classes with up to 45 pre-schoolers."*

The MoEHA is currently focused on addressing teaching quality in ECCE centres, along with better aligning the preschool and primary school curriculum, to ensure a sound learning foundation for numeracy and literacy.

Finally, despite financial investment in this sector of Education increasing in the last year, the figure as a percentage of the overall Education budget remains low (See *Table 5*).

Table 5. Investment in Early Childhood Care and Education across the Pacific region

| Country | ECCE as percentage of Education Budget |
|---|---|
| Fiji | **3 %** (2018-2019, Fiji Government - Budget Estimates) |
| Cook Islands | 12% of total budget into operating schools according to education statistics |
| FSM | 8.5% (2014 World Bank FSM Public Expenditure Analysis) |
| Kiribati | None |

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[160] MoEHA, 2019
[161] UNICEF, 2017
[162] KII with MoEHA, 2019
[163] FEMIS, 2013

| Samoa | 1.5% |
|---|---|
| Solomon Islands | 4.8% (2016 MEHRD Performance Assessment Report) |
| Tonga | 0.02% (2015 response by survey respondents) |
| Vanuatu | 0.09% (2015 Annual Statistics Digest) |

*Source: Table compiled with data extracted from UNICEF (2017), Status Report on Early Childhood Care and Education in Pacific Island Countries and from the Fiji Government Budget Estimates (2018-2019).*

Adequate levels of investment into ECCE are important given the proven correlation between early investments in child development and later academic achievement, as established by the UNICEF (2017) Pacific study clearly demonstrating that attendance at an ECCE programme results in higher achievements in literacy and numeracy in Grade 4.

### 4.2.2 Basic education

*The right to basic education is referenced in the CRC under **Article 28** (Right to Education, which stresses that primary education in particular should be free). It is also addressed under **SDG 4**: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all, and in particular under **SDG 4.1**, which encourages all countries to ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes by 2030.*

Since 2014, the government has extended free basic education from year 1 to year 13, as set out in the **Tuition Fee Free Grant Policy** (TFFG), ensuring that all school aged going children have access to primary and secondary school education. A number of other incentive mechanisms, such as bus and boat fare voucher assistance, school textbooks, improvement in physical infrastructure, the introduction of distance education and the removal of lower level examinations, are all mechanisms put in place to ensure that every school-aged child has access to primary and secondary education. More recently, the government also significantly increased its spending on education, as reflected in the 2017-2018 budget, from $432.2m to $964.4m, representing approximately 22% of the total budget.[164]

Since the introduction of the TFFG, NER at primary school level have slightly increased. There is no significant difference between female and male NER (See *Table 6*). Notably, the World Bank places Fiji among the top 30 countries globally for achieving the highest primary school female NER (rank 27).[165]

Table 6. Primary education statistics

| Description | Value |
|---|---|
| Primary Completion rate, male | 107% |
| Primary completion rate, female | 108.4% |
| Net Enrolment rate, male | 100% |
| Net Enrolment rate, female | 100% |
| Retention rate, male | 93% |
| Retention rate, female | 97% |

*Source: MoEHA, 2018*

At secondary school level Fiji also achieves a high NER, in particular for female pupils. Secondary school retention rates however suggest that a significant number of students, particularly male, do not complete their secondary school education[166] (See *Table 7*).

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[164] MoEHA, 2017
[165] WB, 2015
[166] MoEHA, 2018

Table 7. Secondary Education Statistics

| Description | Value |
|---|---|
| Secondary Completion Rate - Male | 70.4% |
| Secondary Completion rate - Female | 91.8% |
| Net Enrolment Rate - Male | 78.8% |
| Net Enrolment Rate – Female | 90.9% |
| Retention Rate – Male | 77% |
| Retention rate - Female | 92% |

*Source*: *MoEHA, 2018*

A number of students who chose to opt out of the secondary school system are instead absorbed into the newly introduced technical colleges, which are strongly promoted by the MoEHA. Children interviewed for this CRSA however highlighted that many school dropouts remain out of the education system all together. The Fiji Bureau of Statistics (FBS) identifies 26% of children out of school in rural areas, versus 13% in the urban areas in 2012. The IDADAIT study (2018) reports 777 children dropping out of secondary schools across the country in 2017, with the majority (693) from Suva and Nausori.[167] Lack of money, dysfunctional family backgrounds and peer pressure are the main explanations for school dropouts provided by children respondents through the CRSA child surveys.

This is concerning, as studies suggest that children who leave school early are more likely to engage in child labour and antisocial activities.[168] Without adequate education, children also have more limited skills to offer to the labour market, as a result of which they often find themselves unqualified for professions outside of the informal sector, thus perpetuating the family poverty cycle.

### 4.2.3 Learning outcomes

*The right to education (**Article 28**) is not only the right to access education, but also the right to access education that leads to quality learning outcomes. This is highlighted under **SDG 4.6**, which encourages all countries to ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy, by 2030.*

Fiji has a high literacy rate with over 90% of the population over the age of 15 years considered literate.[169] This percentage however is an estimate based on the number of adults captured by the census that have attended at least 4 years of schooling. It does not provide a measure of functional literacy,[170] meaning a measure of the ability to manage daily and employment tasks that require reading and writing skills beyond a basic level. Assessments conducted in Year 7 reveal that only 34% of students reach proficient and above levels in literacy. The situation is similar for numeracy, with only 22% of students reaching proficient and above levels (See *Table 8*).[171] More boys than girls are in the bottom quartile of primary school literacy and numeracy test results.[172]

Table 8. Literacy and Numeracy Rates in Fiji, 2018

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[167] IDADAIT, 2018
[168] UNICEF, 2015
[169] MoEHA, 2015
[170] Ministry of Finance and National Planning, 2004
[171] MoEHA, 2018
[172] ADB, 2015

| Description | Value |
|---|---|
| Primary Completion Rate - Male | 107% |
| Primary Completion rate - Female | 108.4% |
| Net Enrolment Rate - Male | 100% |
| Net Enrolment Rate – Female | 100% |
| **Numeracy Rate for Year 7** | |
| Advanced | 5% |
| Proficient | 17% |
| Basic | 58% |
| Critical | 21% |
| **Literacy Rate for Year 7** | |
| Advanced | 17% |
| Proficient | 17% |
| Basic | 55% |
| Critical | 11% |
| Retention Rate – Male | 93% |
| Retention rate - Female | 97% |

*Source: MoEHA, 2018*

A number of factors that may explain these results:[173] Some factors are social and related to the family environment: a lack of exposure to literacy building blocks (books, magazines, pens, paper), poverty (not being able to financially access resources that promote literacy), violence in the home (when the child is focused on survival rather than on his education). Very often, low literacy is intergenerational. Some relate to schooling: lack of preschool education (essential building block for a child's speech and language development), interruptions to education (due to the necessity to supplement the family income or to disasters), lack of learning support facilities, the style of teaching (may not be suited for multiple intelligences), the language of instruction (different from the home language), vision and hearing problems (may go undiagnosed and hinder a child's progress in acquiring basic skills).

Lack of proficiency in literacy and numeracy has been linked with the likelihood of poverty, dropping out of school, being excluded from accessing work opportunities, other than manual or unskilled labour, and the inability to participate fully in society.[174] A factor for Fiji's high youth unemployment rate (18.76%)[175] is that many children do not obtain adequate skills and knowledge, and in particular children who leave school early. Investment in Technical and Vocational Education and Training (TVET), decentralisation of vocational colleges and the Matua Programme for out of school youth, are initiatives the MoEHA has put in place to address this issue and ensure that youth attain skills and knowledge necessary to enter the labour market.

### 4.2.4 Violence in school

*The right to protection from physical abuse is referenced in the CRC under* **Article 19** *(Right to care and protection from violence, abuse and neglect). It is also addressed under* **SDG 16**, *which encourages all countries to promote peaceful and inclusive societies.*

The previous CRSA conducted by Save the Children in 2013 revealed a high level of violence inflicted on children in schools. Corporal punishment inflicted by teachers in schools has since been outlawed and the MoEHA has adopted a zero tolerance approach to deal with teachers who do not comply with the law.

Violence in schools, however, reveals itself in a different form through this CRSA, with children inflicting violence on children. The IDADAIT (2018) study highlights that 20,462 cases of violence in schools were reported in 2017, namely name calling, bullying, swearing, punching, slapping, beating and cyber-bullying. Violence impacts an estimated 1 in 10 students. The highest cases of violence

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[173] ABC Lifeline Literacy Canada; The Literacy Foundation
[174] Project Literacy accessible online: https://www.projectliteracy.com/about/why-literacy; the Kangan Institute accessible online on: https://www.kangan.edu.au/students/blog/importance-literacy-and-numeracy-skills
[175] ILO, 2017 stats

are found in Suva (4,320), followed by Nadroga/Navosa (3,228).[176] In addition, 578 cases of sexual violence reportedly took place in schools, resulting in 121 teenage pregnancies (24 of which at primary school level).[177] Cyber-bullying affecting children in school was highlighted as a recent trend with many ramifications for child protection, prompting the Fijian Parliament to pass the Online Safety Bill. Currently, 48% of Fiji population has access to the Internet, a figure expected to grow to 99% by 2030.[178] Lifeline Fiji, a local call centre set up to prevent suicides in Fiji states that cyber bullying is behind the majority of suicide cases.[179] There were 234 cases of cyber bullying in schools reported for the period 2016-2017.[180]

### 4.2.5 Inclusive education

*Article 2 of the CRC clearly states that child rights apply to all children regardless of their abilities. The right to equal and quality education is set out under CRC **Article 28**, as well as under **Article 24** of the Convention on the Rights of Persons with Disabilities. It is also addressed under **SDG 4**, which encourages all countries to ensure inclusive and equitable quality education and to promote lifelong learning opportunities for all by 2030.*

To increase access to education for children living with disabilities in remote rural or outer island areas, the government has focused its efforts, through the **Policy on Special and Inclusive Education**, on piloting inclusive education for children living with disabilities within mainstream schools.[181] The curriculum has also been modified to provide for students with special needs, for example training a number of teachers in braille, and improving some school facilities to accommodate for children living with disabilities. In addition, Fiji provides special education centres throughout 17 district town centres around the country. The special schools in Suva cater for specific disabilities, whereas those outside of Suva cater for multiple disabilities. The only Early Intervention School is located in Suva. Special Schools in Fiji only cater for primary education.[182]

The lack of data concerning children living with disabilities renders assessing whether they have good access to education incomplete. Anecdotal evidence suggests that a large number of children living with disabilities still do not attend any form of schooling, with girls in particular even less likely to attend school than boys.[183] Findings from the DFAT funded Access to Quality Education Programme found that despite training, teachers struggle with adequately addressing the needs of children living with disabilities in their classes, and that continuity of training is required for sustainability, particularly as teacher mobility is high. The MoEHA is currently focusing on training modules on teaching children living with disabilities to be an integral part of the teacher training courses available. More resources are also needed to provide teaching aids, assistive devices and to render schools more accessible. Quality education is particularly important for children living with disabilities to access economic opportunities, as disability surveys conducted in the Pacific Island Countries (PICS) conclude that almost all people living with disabilities live in poverty.[184]

## 4.3 Child protection (Breakthrough 3: BE PROTECTED)

Under Child Protection, three key challenges to the realisation of child rights in Fiji were identified, namely:

1. Critical level of violence against children in the home.
2. Alarming levels of child sexual abuse.
3. Children exploited to work to supplement the family income.

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[176] IDADAIT, 2018
[177] IDADAIT, 2018
[178] Fiji Parliament, 2018
[179] Fiji Times, 2018 accessible online: *http://www.fijitimes.com/cyberbullying-relates-to-the-use-of-technology/*
[180] IDADAIT, 2018
[181] MoEHA, 2017
[182] UNICEF, 2010
[183] UNICEF, 2015
[184] UNICEF, 2010

A detailed description and analysis of the child protection landscape affecting the realization of child rights in Fiji is provided below.

### 4.3.1 Violence in the home

*The right to protection from physical abuse is referenced in the CRC under **Article 19** (Right to care and protection from violence, abuse and neglect). It is also addressed under **SDG 16**, which encourages all countries to promote peaceful and inclusive societies, and in particular under **SDG 16.2**, which encourages all countries to end abuse, exploitation, trafficking and all forms of violence against and torture of children by 2030.*

Fiji has developed a comprehensive legislative framework to address violence against children. The **Fiji Constitution** 2013 determines that children have the right to be protected from abuse, neglect, harmful cultural practices, any form of violence and inhumane treatment (section 41). The **Child Welfare Decree**, the **Fiji Juvenile Act,** as well as the **Policy on Child Protection in School,** establish the responsibility to come forward as witnesses in the event of suspected or actual abuse of a child that can prove detrimental to his/ her health and development. The **Domestic Violence Decree** protects all relationships in the context of domestic violence. The **Toll Free Child Helpline** has also provided a platform for anyone, especially children to report abuse.

Despite the legislation in place however, the practice of inflicting corporal punishment on children in the home is widespread (72%) and rarely goes punished. It finds its justification in religious and cultural norms, making it harder to achieve behavioural change.[185] A lack of education and awareness of alternative ways of raising children is also a contributing factor.[186] Research by Save the Children (2006) highlights that the vast majority of corporal punishments inflicted on children are direct assaults, which include being beaten, hit, slapped or lashed, smacked, whacked, given a hiding, spanked, punched, 'donged' on the head and pinched (see *Table 9*).[187]

Table 9. Types of punishments reported by children

| Groups | Girls 10-13 | Boys 10-13 | Girls 14-17 | Boys 14-17 |
|---|---|---|---|---|
| **Physical punishment** | | | | |
| Direct Assault | 52 (84.5) | 82 (83) | 42 (67) | 36 (70) |
| Other direct assaults | 1 (0) | 0 (14) | 0 (3) | 0 (7) |
| Indirect assaults | 3 (13.5) | 4 (0) | 6 (20) | 13 (16) |
| Deliberate neglect of physical needs | 0 (0) | 0 (0) | 1 (0) | 3 (1) |
| Use of hazardous tasks | 15 (0) | 4 (0) | 21 (6) | 27 (0) |
| Confinement | 0 | 0 | 1 | 0 |
| **Total** | **71 (98)** | **90 (97)** | **71 (96)** | **79 (94)** |
| **Emotional punishment** | | | | |
| Verbal assault | 8 | 5 | 18 | 14 |
| **Alternative methods of discipline** | | | | |
| Counselling | 1 | 0` | 1 | 1 |
| Grounding | 0 | 1 | 2 | 1 |
| Withdrawal of privileges | 4 | 1 | 2 | 2 |
| Extra work. Chores | 14 | 3 | 3 | 4 |
| Other | 1 | 0 | 2 | 0 |
| **Total** | **100** | **100** | **100** | **100** |

*Source: Save the Children (2006), The Physical and Emotional Punishment of children in Fiji*

The same study established that younger children experience more physical abuse than older groups of children. Whilst there is no good age to be experiencing violent disciplining at, the younger the child the more at risk they are of serious injuries, as well as being unable to cope with the distress caused by being physically hurt by an adult they are meant to trust.[188] Research shows that physical punishment is detrimental to a child's development, sense of self-esteem, and teaches children that

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[185] UNICEF, 2009
[186] DSW, 2019 (KII)
[187] Save the Children, 2006
[188] UNICEF, 2018

violence is acceptable.[189] A more up to date study is required to assess behaviour changes over the last decade.

Whilst the Ministry of Women, Children and Poverty Alleviation (MWCPA), along with other local NGOs, focus their efforts on raising awareness of alternative disciplining strategies, these initiatives would benefit from follow-up assessments and need to be taken to scale. The Department of Social Welfare (DSW) is currently promoting positive parenting in partnership with SC, working with communities and schools. It is also focusing on developing partnerships with FBOs, seen as key in addressing this issue. According to Rupeni Fatiaki, Director of the DSW, *'FBOs have an existing platform to work from in the communities, and need to be empowered on positive parenting and child rights'*. Interviews conducted in the community for this CRSA highlight how much corporal punishment is accepted as the norm, with children almost always blaming themselves for the physical punishments inflicted on them, and parents stressing that corporal punishment is essential for control over their children, without which children will rapidly fall into anti-social activities.

### 4.3.2 Sexual violence

*The right to protection from sexual abuse is referenced in the CRC under **Article 34** (Right to protection from sexual abuse). It is also addressed under **SDG 16**: Promoting peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels, and more specifically under **SGD 16.2**, which encourages all countries to end abuse, exploitation, trafficking and all forms of violence against and torture of children by 2030.*

By Child Sexual Abuse (CSA) is understood all forms of sexual violence, including incest, early and forced marriage, rape, involvement in pornography and sexual slavery. CSA may also include indecent touching or exposure, using sexually explicit language towards a child and showing children pornographic material.[190] CSA is a criminal act. The **Child Protection Guidelines** provide directions for the police to conduct criminal proceedings in cases of sexual or other serious offences against children, and the **Policy on Child Protection in Schools**, developed by the MoEHA, affirms zero tolerance on sexual abuse, trafficking, and exploitation of children, and provides a framework for the protection, identification, and managing and reporting incidents of CSA, wherever organized educational programmes are conducted. To address the issue of CSA, special units have been established within the Fiji Police Force. The government has also set up a toll free Child Helpline through which children and the public can report CSA.

Though more and more children are coming forward and reporting their abusers, a suspected large number of cases remain unreported, in particular if the crime is incestuous. Yet, rates of CSA are alarmingly high in Fiji, with an estimated 16% of women (approximately 1 in 5) reporting they have experienced CSA by the time they turn 15 (see *Fig.14*).

Fig. 14 Child Sexual Abuse Rate below the age of 15



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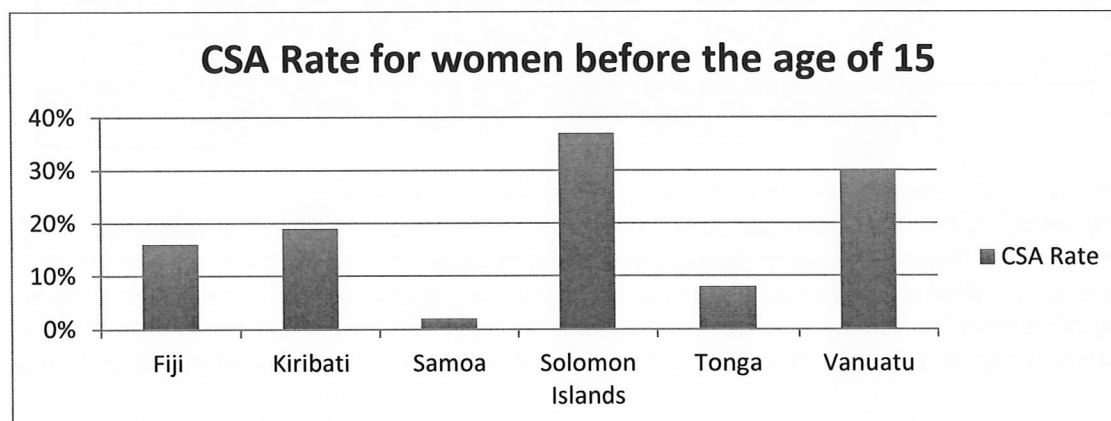
[189] Save the children, 2006
[190] Save the Children definition

A total of 649 cases of CSA were reported to the police in 2016. Victims were overwhelmingly girls (587).[191] Similarly, statistics from the Office of the Director of Public Prosecutions (ODPP) reveal 444 cases of rape and sexual offences for the year 2017 (See *Table 10*). These cases affected 200 victims, 184 of which were female, with 130 below the age of 18. Of the accused, 24 were found to be younger than 18, with the youngest charged with rape aged 12 years old.[192]

Table 10. ODPP Rape and Sexual Offences Statistics for the year 2017

| Rape | Attempted rape | Assault with intent to rape | Abduction with intent to rape | Indecent assault | Defilement | Sexual Assault | TOTAL |
|------|------|------|------|------|------|------|------|
| 300 | 7 | 10 | 6 | 17 | 23 | 81 | 444 |

*Source: ODPP (2017), Rape and Sexual Offences Statistics for the Year 2017*

Other statistics suggest that approximately 200 adolescents under the age of 16 are raped every year.[193] Women and girls with disabilities, in particular those with intellectual disabilities or mental illnesses, are especially vulnerable to sexual violence.[194] These women and girls are also less likely to seek support, refuge or legal action.[195]

CSA leads to physical, psychological and social traumas that can last a lifetime. Roffee, James and Whitehead, John (2016) suggest that risk factors for CSA in Fiji are unique in their relation to the communal nature of Fijian society. Besides static factors such as alcohol consumption, some culturally dynamic factors highlighted in their study include: entrusting children with extended families; seeing the abuse solely as a matter for the family to deal with; the potentially damaging consequences of CSA not just on the immediate family unit, but on the clan as a whole; the acceptance that violence against children is 'normal'; the low status of women and girls; and the prime importance given to the consumption of kava within I-Taukei communal relationships, with its associated mythologies promoting masculinity and sexual violence. Though sexual offence legislation is in place to protect children, the rural isolation of many communities means that traditional restorative justice systems or *bulubulu* still take place. Though these ceremonies may benefit the community as a whole, they are often not appropriate for the victims of sexual abuse. The same study further argues that for the legal system to be effective in responding to the needs of victims of CSA, Fiji's unique cultural risk factors need to be better understood and taken into account.

### 4.3.3 Harmful work

*The right to protection from harmful work is referenced in the CRC under **Article 32** (Right to protection from work that is dangerous or might harm a child's health or education) and **Article 36** (Right to protection from activities that can harm a child's development). It also relates to **SDG 8**: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all, and more specifically to **SDG 8.7**, which encourages all countries to take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms.*

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[191] FWCC, 2017
[192] CEDAW committee, 2018
[193] Fiji Police Crime Statistics quoted in MOH, 2016
[194] UNDP, 2009
[195] UNDP, 2009

Children's contribution to the household economy is by in large considered normal in Fiji. [196] Some types of work may be acceptable, when they do not harm the child. However, children are considered child labourers when they are too young to work or are involved in work that is hazardous and constrains their physical, mental, social and educational development.[197] In Fiji, labour outside the home is most common in the poorest families,[198] and according to the latest Universal Periodic Review (UPR) (2014) it is increasing, exacerbated by factors such as urban migration, poverty, homelessness and living away from parents.[199]

The **ILO minimum age for employment Policy** sets the minimum age for employment in Fiji at 15. The Ministry of labour's **Employment Relations Promulgations Act** also provides clear guidelines to minimise the economic exploitation of children in the workplace. However, a lack of resources within the ministry means that dedicated child labour officer roles no longer exist. Instead, labour inspectors have been trained to include children as part of their focus, but as they mostly work in the formal sector, most child labour cases are not recorded through their work.[200] Interviews with various stakeholders suggest that since this shift within the Ministry of Labour took place, more children are seen selling or doing odd jobs on the street.

The most common type of child labour in Fiji is agricultural activities (see *Table 11*), often under hazardous conditions. This type of work, mostly seasonal, means that children miss out on education for extended periods of time. In urban centres, children as young as 6 are found working in garages, supermarkets or as street vendors.[201] Most vulnerable are street children, with 75% engaged in labour activities deemed hazardous.[202]

Table 11. Types of child labour in Fiji

| Country | Types of Child Labour | Rank (1=most) | Age of children most affected |
|---------|----------------------|---------------|-------------------------------|
| **FIJI** | Agriculture | 1 | 13-17 |
| | Street vendors | 3 | 6-17 |
| | CSEC | 5 | 13-17 |
| | Scrap metal | 8 | 10-17 |
| | Begging | 6 | 1-13 |
| | Domestic help | 7 | 11-17 |
| | Child trafficking | 11 | 10-17 |
| | Supermarkets | 4 | 6-15 |
| | Illicit activities | 10 | 6-14 |
| | Construction | 9 | 13-17 |
| | Backyard garage/ car wash | 2 | 6-15 |

*Source: ILO (2015), Sub regional trafficking and child labour report*

A University of the South Pacific (USP) survey across informal settlements revealed that many families see their child's education as a secondary priority to earning an income.[203] An ILO report (2010) also highlights that the majority of children working do so to aid the family (See *Fig. 15*). Tackling the root causes of social problems in the community, highlighted as dysfunctional families,

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[196] UNICEF, 2015
[197] UNICEF, 2018
[198] UNICEF, 2015
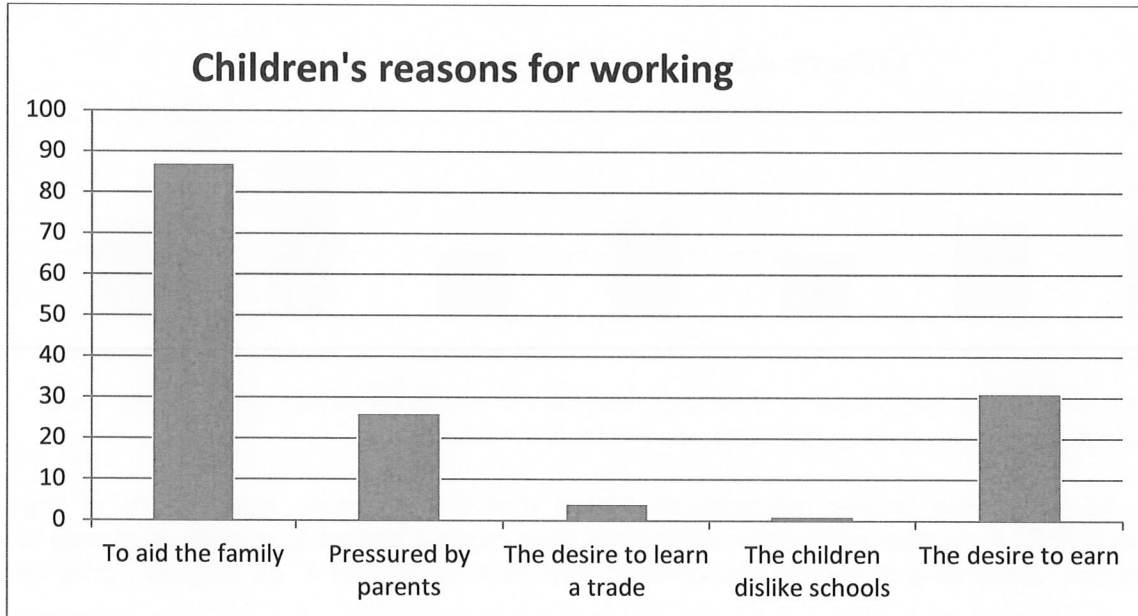[199] UNCRC, 2014
[200] KII with ILO, 2018
[201] ILO, 2015
[202] ILO, 2010
[203] USP, 2009

substance abuse and the intergenerational cycle of poverty, are seen as key elements to tackling child labour.[204]

Fig. 15 Reasons for child labour

## Children's reasons for working



Source: Graph extracted from *ILO (2010) Child Labour in Fiji - A survey of working children in commercial sexual exploitation, on the streets, in rural agricultural communities, in informal and squatter settlements and in schools.*

The Commercial Sexual Exploitation of Children (CSEC), which is considered to be a worst form of child labour, is also present in Fiji. CSEC is defined by the ILO as the exploitation by an adult of a child or an adolescent (under 18 years old) accompanied by a monetary payment or in kind to the child or adolescent, or to one or more third parties.

The ILO (2010) reveals that CSEC in Fiji takes the form of child prostitution, child pornography, sex tourism and, in some cases, child trafficking.[205] Urban migration, poverty, homelessness, and living away from parents are factors that increase a child's chances of being sexually exploited. The same report highlights that the majority of children engaged in CSEC are females aged 13-17, but that children as young as 10 are not unheard of. A great majority of the children identified as engaged in CSEC (78%) are I-Taukei.[206] Save the Children (2009) also reveals that a large number of children engaged in CSEC were sexually abused prior to falling into this type of work. Besides prior sexual abuse, key factors that push children into CSEC are identified as poverty and parental neglect.[207] As explained by a child involved in CSEC, *"I live with my aunty and uncle in Suva, sometimes my parents are late in sending money for my schooling. I learnt from my friends that I can easily make a lot of money if I sell myself. I am now able to pay my bus fare and buy other school things."[208]*

Two thirds of the children surveyed in the ILO (2010) report reveal that they always take the money for CSEC, indicating that in one third of cases others benefit financially, possibly indicating 'forced sexual exploitation' (See *Fig. 16*).
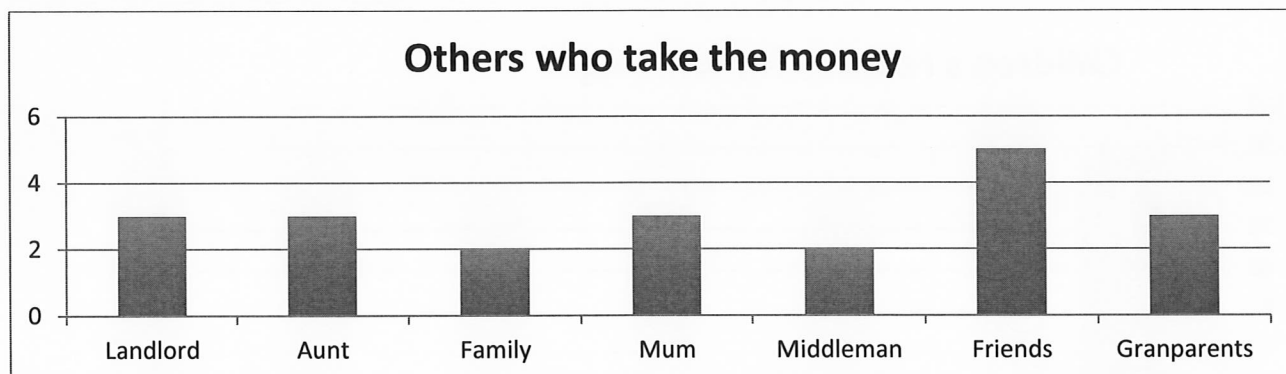
[204] USP, 2009
[205] ILO, 2010
[206] ILO, 2010
[207] ILO, 2010
[208] Save the Children, 2010

Fig. 16 CSEC financial beneficiaries



**Others who take the money**

*Source: ILO (2010), Child Labour in Fiji - A survey of working children in commercial sexual exploitation, on the streets, in rural agricultural communities, in informal and squatter settlements and in schools*

Furthermore, 15.4% of the survey respondents stated that their parents were aware of their involvement in CSEC. A number of children stated that their income serves to contribute money for the family's needs. According to a child respondent, "*My mum is ok with it, as long as I give her money.*"[209]

Stakeholders report that identifying children involved in CSEC is more difficult since many now have access to mobile phones or the internet to organise meetings with their clients. Taxi drivers reportedly often act as go between, connecting children with the clients by distributing phone numbers. Children working in CSEC have also reported abuse and request for bribes from police officers, which some stakeholders believe may be a further factor why CSEC has gone underground.[210]

### 4.3.4 Appropriate care
*The right to appropriate care is referenced in the CRC under **Article 10** (Responsibility of the State to ensure that children are properly cared for), **Article 9** (Right to be separated from parents if it is for the child's own good) and **Article 39** (Right of children who have been neglected or abused to receive special help). It also relates to **SDG 16**: Promote inclusive and peaceful societies, and in particular **SDG 16.2**, which encourages all countries to end abuse, exploitation, trafficking and all forms of violence against and torture of children by 2030.*

Under the **Juveniles Act 1978**, which is currently under review to reflect emerging issues, the DSW is responsible for the care and protection of children, along with the police, and must intervene when they believe a child is at risk of neglect or abuse. Child welfare cases may be reported to the DSW or the police, by professionals who come in contact with the child and suspect or witness abuse, or by the public and children themselves. The DSW ensures that children are taken care of in approved institutions or, whenever possible, placed with extended family, guardians or other interested persons. According to the DSW however, the rise in the cost of living means that it is becoming harder to find families willing to take on an extra child.

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[209] ILO, 2010
[210] ILO, 2015

In 2017, 1,145 child welfare cases were recorded in Fiji. The majority of cases are that of child neglect (416), followed by cases of sexual abuse (328) and physical abuse (206) (See *Table 12* below).

Table 12: Child Welfare Decree Statistics 2012-2017

| No. | Main category | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|---|---|---|---|---|---|---|---|
| 1 | Circumstantial Cases* | 13 | 20 | 35 | 47 | 113 | 62 |
| 2 | Emotional/ Psychological Abuse | 4 | 17 | 25 | 89 | 100 | 69 |
| 3 | Beyond Control | 18 | 18 | 15 | 78 | 72 | 64 |
| 4 | Physical Abuse | 56 | 35 | 113 | 156 | 192 | 206 |
| 5 | Child Neglect | 65 | 107 | 164 | 221 | 340 | 416 |
| 6 | Sexual Abuse | 152 | 183 | 344 | 354 | 260 | 328 |
| 7 | Not Stated | 5 | - | 9 | 1 | | |
| | TOTAL | 313 | 380 | 705 | 946 | 1077 | 1,145 |

*Source: DSW (2019), Child Welfare Decree Database*

Approximately 150 child placements took place in 2018 in the nine residential homes that currently operate in Fiji,[211] the majority of which are run in partnership with FBOs. These homes are reviewed on an annual basis according to a set of **Minimum Standards of Audit,** which ensure quality care and management of the homes.

## 4.4 Child rights governance

The role of governments, as referenced in **Article 4** (*Governments must make child rights available to children*) in ensuring that rights are realised is central to the CRC. The steps a government must take to ensure it fulfils its role appropriately are referred to as 'General Measures of Implementation' (GMIs) and form the basis upon which to assess child rights governance.

Under child rights governance, three key challenges to the realisation of child rights in Fiji were identified, namely:

1. Poor awareness and understanding of child rights amongst children and parents.
2. Additional financial and human resources needed for implementation of child rights legislation.
3. Stronger monitoring, as well as consolidated disaggregated data systems, required to assess the impacts of Child Rights related policies, and to inform decision-making and strategies.

A detailed description and analysis of the child rights governance landscape affecting the realization of child rights in Fiji is provided below.

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[211] KII with DSW, 2019

### 4.4.1 Monitoring and demanding child rights

*Central to good Child Rights Governance and to the full realisation of child rights in the long term, are achieving the UNCRC's GMIs. Such measures include establishing good monitoring systems to report to the UNCRC on progress made on measures and enjoyment of child rights (**Article 44**) and ensuring that the Convention is known by all (**Article 42**), so that children may demand their rights.*

Overall compliance with the CRC seems to be improving, with a wide array of policies are in place to address child rights, and the budget for child protection programmes (currently $FJD 2,000,000) increasing year by year. Many challenges remain however. Capacity building is required to fully implement the legislative framework, as interviews with the DSW reveal that children generally have poor access to legal services, and that the majority of cases of abuse go unprosecuted.[212] The CRSA process also strongly highlights that many of the child rights related policies or initiatives have not been assessed for their impacts on children. Stakeholder interviews highlight that competing priorities, a lack of resources and systemic training on operational processes often impact the Ministries' capacity to deliver this aspect of their work. The absence of centralised, consolidated and disaggregated data on issues pertaining to child rights is a further challenge for decision-making and planning.

The NCCC, a multi-sectorial cabinet sub-committee formed of governmental and NGO stakeholders established in 1993 following Fiji's ratification of the CRC, is tasked with implementing, regulating and monitoring the protection and welfare of children under the CRC. Its secretariat lies within the MWCPA. Two major challenges faced by the NCCC are the attendance and participation of NCCC members at the meetings and the absence of funds to sustain a Secretariat.[213] As a result, the NCCC is yet to develop a National Plan of Action for children, which would define realistic objectives, sub-objectives, strategies, action points and indicators for measuring progress in four key priority areas: survival; health and nutrition; education and development; participation and protection.

Among beneficiaries at the community level, awareness of child related policies and of child rights in general is low. Child rights are mostly perceived as a foreign concept, with little relevance in the Fijian context. A FGD with parents conducted as part of this CRSA found that parents overwhelmingly viewed child rights as an obstacle to children's disciplining, and put parents at risk of being reported. A significant number of children interviewed had never heard of child rights. Those who had were only able to name a few. The majority of children interviewed had little to no knowledge of policies in place to protect them, and most often cited the need to be obedient and to better listen to parents, as the best way to ensure their rights were upheld, and as their best protection from harm (See *Annex D* for a summary of child survey responses).

There are also limited avenues for children to be considered in decision-making at the community or national levels, yet we are seeing progress towards a more child-centred approach of governing. In 2017 for instance, the NCCC took two children on board from Save the Children KLF. That same year, KLF youth were able to present a manifesto to government highlighting their concerns about violence against children in the country. Some policies, such as the National Disaster Management Act and the Disaster Management Plan are currently being revised, with an effort to incorporate children's perspectives. Most famously, the government took Timoci Naulusala and Shavi Shakshi, two Fijian children to be the voice of children on the global stage at the COP23, to offer their perspectives on the impacts of climate change in Fiji. These are encouraging steps towards recognising children's voices and promoting their participation in society.

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[212] KII with DSW, 2019
[213] Save the Children, 2015
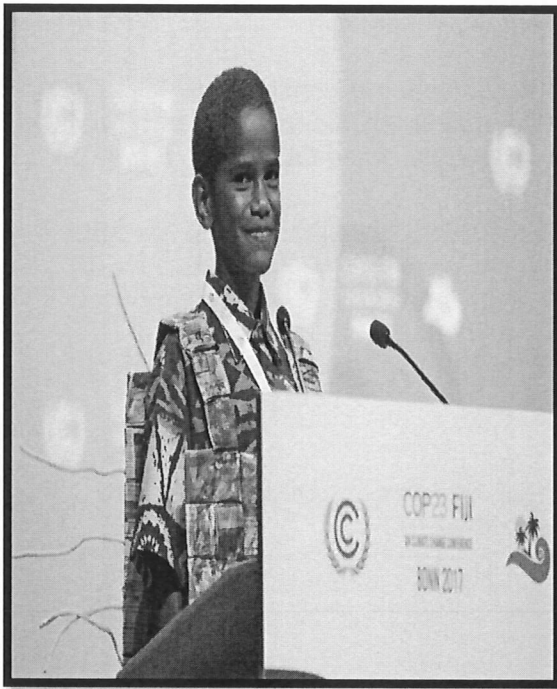
*Timoci Naulusala is the voice of the children of Fiji on the global stage at the COP23 in 2017.*
*Photo Credits: IISD Reporting Services*
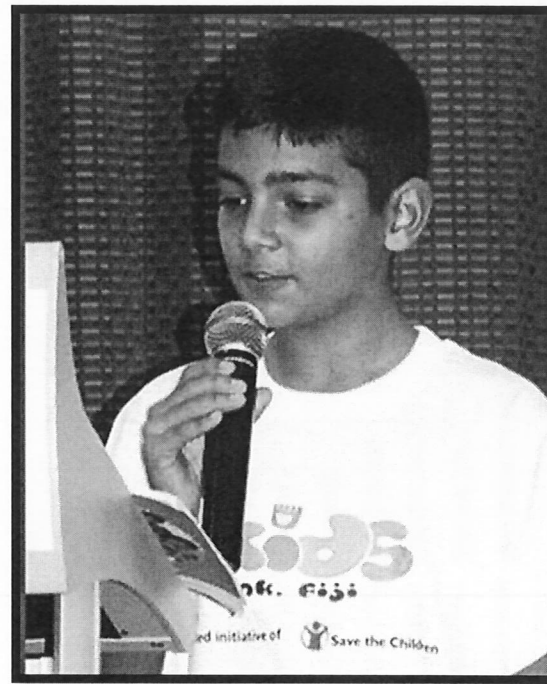


*Kids Link Fiji youth member presenting a manifesto to government, 2017*
*Photo Credits: Save the Children Fiji*

### 4.4.2 Public investment in children

*Public investment in children is necessary for the rights expressed in the CRC (Health, Education, and Protection) to be realised. Public investment in children is also necessary to ensure that all children enjoy a decent standard of living, as referenced under **Articles 26** and **27.***

Fiji's scattered geography makes the task of delivering services to children in Fiji financially and logistically difficult. In recent years however the government has substantially increased its spending on essential services such as health, education and various social protection programmes, which ultimately benefit children. Notably, the Child Protection Allowance, more commonly referred to as the Care and Protection (C and P) Allowance, increased from FJD$ 3.5M in 2016 to FJD$ 6.8M in 2017 (See *Table 13*).

Table 13. Budget Allocation for Child Rights

| Government assistance for social protection benefiting children ($ M) | 2016-2017 | 2017-2018 |
|---|---|---|
| Poverty Benefit Scheme | 23.2 | 38.1 |
| Allowance for people living with disability | 0 | 8.0 |
| Food voucher programme rural pregnant mothers | 0.5 | 1.7 |
| Extension and refurbishment of Fiji juvenile rehab centre | 0 | 0.1 |
| Child protection allowance | 3.5 | 6.8 |
| Child protection programme | 1.0 | 1.3 |
| Bus Fare Subsidy | 20.0 | 20.0 |
| Free medicine and medical supplies | 10.0 | 10.0 |
| Domestic violence helpline | 0.2 | 0.2 |

The investment in child benefits, through the C and P Allowance scheme is still however a relatively small investment, as compared to investment in child benefits in other middle-income countries. Data available from 2015 places the investment in child benefits at 0.08% of the GDP (See *Fig.17*).

Fig. 17 Level of investment in child benefits across a range of high income and middle-income countries
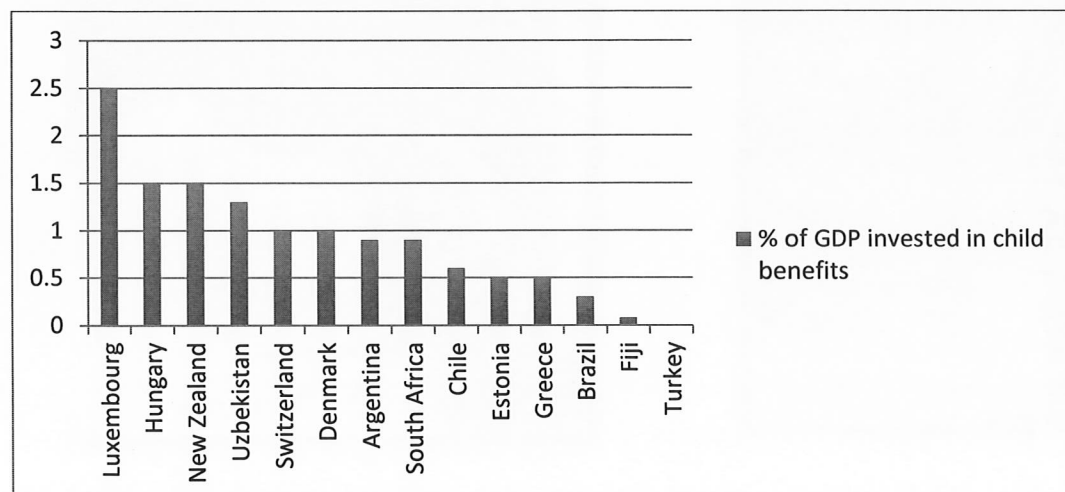


*Source: Data extracted from UNICEF (2015), based on Kidd and Huda (2013); Roca (2011); SASSA (2012) and OECD Social Expenditure Database*

Research suggests that regular, predictable, social security cash transfers can significantly impact on family and child wellbeing and development. They can potentially enable families to invest in income-generating activities or gain employment, and are generally good for the broader economy. In particular, social benefit schemes coupled with investments in public services are good for the growth of the nation.[214]

## 4.5 Cross cutting issues

A number of crosscutting issues, which exacerbate the issues raised above and further challenge the realisation of child rights in Fiji, stood out during this CRSA process, namely:

1. Children growing up in informal settlements and under-served rural communities most at risk of multidimensional poverty.
2. Climate Change increasingly affects children in Fiji, with major short and long-term implications for their health, education, safety and development.
3. Social norms and gender dynamics mean girls are the most vulnerable children in Fiji, across all sectors.

A detailed description and analysis of the crosscutting issues affecting the realization of child rights in Fiji is provided below.

### 4.5.1 Child poverty

*The right to protection from poverty is referenced in the CRC under **Article 26** (Governments should provide money for children of families in need) and **Article 27** (Right to a standard of living that is good enough to meet their physical and mental needs). It also relates to **SDG 1**: End poverty in all its forms everywhere, and more specifically to **SDG 1.1**, which encourages all countries to eradicate extreme poverty for all people everywhere, currently measured as people living on less than $1.25 a day by 2030, **SDG 1.2**, which encourages all countries to reduce at least by half the proportion of*

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[214] UNICEF, 2015

*men, women and children of all ages living in poverty in all its dimensions according to national definitions by 2030 and **SDG 1.3**, which encourages all countries to implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable.*

The DSW is responsible for administering several social benefit transfer schemes, including a Poverty Scheme for the poorest 10% of households, a social pension for older people, and a Care and Protection (C and P) Allowance targeted at children living in low-income or vulnerable families. An estimated 70,000 individuals receive social benefits in Fiji.[215] The C and P Allowance currently reaches out to over 6,000 households[216] (an increase from 5,000 children recipients in 2015),[217] and provides them with between FJD$30 and FJD$60 per month, supplemented by a FJD$50 food voucher.[218] Since 2018, families receiving the C and P Allowance are also no longer excluded from receiving other social benefits, making it easier for them to move out of poverty and from needing assistance.

Nevertheless, UNICEF (2015) estimates that 61% of children in Fiji live in or are vulnerable to poverty, and are more likely to live in poverty than the rest of the population. The same study further argues that 75% of children live on less than FJD$9.30 a day, meaning their families are unlikely to be able to adequately meet all their needs. Child poverty rates are highest in the Northern and Eastern divisions (See *Fig.18*), whilst the highest concentration of children living in poverty, due to population density, is in the Western division.[219]

Fig. 18 Child Poverty Rates across different divisions
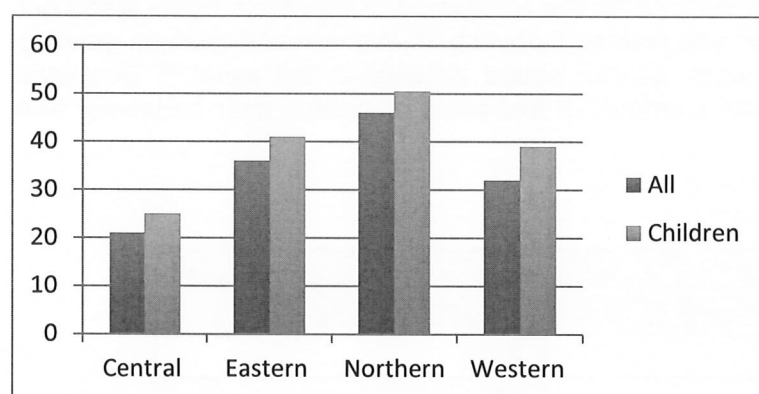


*Source:* UNICEF (2015), Child Sensitive Social Protection in Fiji (based on author's analysis of HIES 2008/2009).

More specifically, an IWDA study (2017) found that 59% of children were deprived in at least one dimension of poverty, reflecting the high vulnerability faced by the majority of families in Fiji. The same study highlights that approximately 1/3 of children are deprived in at least two dimensions, and 14% deprived across three. Whilst various studies argue that squatter settlements have higher poverty rates than the rural areas, [220] 79% of those who are multi-dimensionally deprived are found living in rural households.[221]

Different family and ethnicity makeups also affect children's exposure to poverty, with the poorest children often found in households headed by single females (comprising 14.7% of all households).[222] Young I-Taukei children (below 4 years of age) experience higher poverty rates than

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[215] DSW, 2019 (KII)
[216] KII with DSW, 2019
[217] UNICEF, 2015
[218] UNICEF, 2015
[219] UNICEF, 2015
[220] WB, 2011; UNDP, 2014
[221] UNICEF, 2015
[222] UNICEF, 2015

other young children, while school going children of Indo-Fijian descent are more impacted by poverty than other ethnic groups.[223]

### 4.5.2 Gender
*The right to equality and equity is central to the UNCRC and fundamental to the realisation of child rights. It is best captured under **Article 2** (the CRC is applicable to all, without discrimination). It also relates to **SDG 5**, which encourages all countries to achieve gender equality and empower all women and girls by 2030.*

It is worth highlighting that under every sector studied for this CRSA, girls fare worse than boys. Girls are most at risk of poor nutrition: Fijian girls of Indian descent in particular, are most at risk of under nourishment, whilst I-Taukei teenage girls are most at risk of obesity. Girls are most affected by the culture of silence surrounding reproductive health, leading many to get pregnant too early, and to alone bear the short-term and long-term physical, emotional and socio-economic consequences. Though girls did well in terms of schooling relative to boys, their academic success does not translate into better work opportunities and they are under represented on the labour market, and mostly confined to the informal sector, leaving them economically very vulnerable and most at risk of poverty. Girls are the overwhelming victims of sexual abuse, and as highlighted by the high IPV rates in Fiji, further abuse, whether physical, sexual and/or emotional, is a reality for a majority of girls once they partner up. Finally, girls have less voice than boys, even on issues that affect them directly such as their health.

Two critical gender equality issues with implications for the realisation of children's rights stand out through this CRSA: Violence against women and women's poverty.[224] Women and children growing up in the Pacific experience some of the worst gender based violence in the world.[225] Domestic violence has tremendous impacts on children's emotional and physical health, their behaviour and their schooling (See *Table 14*).

Table 14. Impacts of domestic violence on children

| Children's symptoms | Mothers who experience IPV | Mothers who do not experience IPV |
|---|---|---|
| Aggressive behaviour | 36% | 23% |
| Having nightmares | 29% | 17% |
| Repeating a year at school | 10% | 4% |
| Dropping out of school | 5% | 3% |

*Source*: *UNICEF (2015), Harmful Connections: Examining the relationship between violence against women and violence against children in the South Pacific*

Domestic violence also promotes a cyclical pattern of violence where the victim of violence eventually becomes the perpetrator, and increases the risk of children being abused.[226] Furthermore, UNICEF (2015) establishes a very clear correlation between being abused as a child, growing up in a household where domestic violence occurs and the acceptance of violence as part of life.[227] The study also highlights that children who witness domestic violence, share the same behavioural and psychological impacts as children who have been abused.

By in large a culture of acceptance and silence exists around domestic violence. A Fiji Women Crisis Centre (FWCC) survey (2011) revealed that 1 in 4 women had experienced sexual or physical abuse

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[223] UNICEF, 2015
[224] UNESCAP, 2018 online
[225] FWCC, 2013
[226] UNICEF, 2015
[227] UNICEF, 2015

by an intimate partner in the last 12 months (approximately 45,452 women based on the 2007 census). Yet in 2016, only 3,358 women took steps to report domestic violence.[228] Traditionally, abuse has been dealt with through customary reconciliation procedures. The **Domestic Violence and Crimes Act** and the **Family Law Act** however have given women a legal voice to fight back against abuse, and progressively women are speaking out. The number of restraining orders initiated by women through the courts in 2016, is double that of five years ago.[229] Importantly though, Fiji Women's Rights Movements (FWRM) surveys show that women wait on average 868 days before reporting abuse to the police or to the courts, many who seek legal advice do not take the matter further, and two in three women who approach the police are told to deal with the matter with the help of their families or village.[230] The lack of specialist support services for women and children victims of abuse, and the cost of accessing courts are some of the obstacles they face.

A significant number of children in Fiji are growing up without a father. An estimated 14.7% of households are headed by single females, who have either experienced the death, desertion or imprisonment of their partner. Without the male breadwinner, household incomes tend to drop dramatically, leaving women alone in charge of supporting the family financially, as well as raising the children. A great majority of these households have been identified as living below the poverty thresholds, with weekly incomes estimated between FJD$ 70-96. To offer a perspective, the FBS draws the most recent Basic Needs Poverty Line (2012) at FJD$ 175 per week. The Food Poverty line threshold was established at FJD$ 87 per week. Single female caregivers are the main recipients of the C and P Allowance.

### 4.5.3 Resilience
*Though not specifically raised through the CRC, Climate change is a key challenge to sustainable development and as such its consequences are likely to impact all of the CRC rights, in particular the rights of children to food, water, health, education and safety. Climate change is highlighted in SDG 13, which encourages all countries to take urgent action to combat climate change and its impacts.*

For children growing up in Fiji, learning to recover from disasters is part of life. Disasters tend to bring along new hardships, increased poverty, a loss of education, and adaptation to periods of need for assistance and precarious housing. Recovery conditions are often very stressful, with increased risks for children in terms of exposure to violence, abuse and exploitation.[231] Some children may miss out on education, until the family has recovered enough means to afford sending them to school and replacing lost schooling equipment. Other children may simply have no choice but to earn a living to help the family recover.[232]

Climate change is expected to exacerbate this already difficult situation. Most at risk are children living in coastal and low-lying areas, where climate change is resulting in the loss or salinization of land and fresh water resources, and in fewer opportunities for agriculture and subsistence living.[233] Tikinas classified as most vulnerable to climate change and natural hazards include: Wainikoroiluva, Nalawa, Rakiraki, Nakorotubu, and Saivou (Ra Province).[234] Vulnerability and adaptation assessments at community level, as well as statistics collected from both the Ministry of ITaukei Affairs and the Climate Change Division, indicate that approximately 800 communities in Fiji have already been significantly impacted by climate change. A projected forty-five of these communities, located along the coasts and Fiji's major riverbanks, will have to be relocated in the next 5 to 10 years.[235] It can be expected that, with the displacement of people, which tends to occur towards already overcrowded urban centres, human security issues will be heightened.

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[228] FWRM, 2017
[229] FWRM, 2017
[230] FWRM, 2017
[231] Bartlett, 2010
[232] UNICEF, 2010
[233] UNCRC, 2014
[234] FSL Cluster, 2016
[235] MoHMS and WHO, 2015

Climate change is also expected to significantly impact food production, thus impacting food availability and prices, making it harder for children from families living below or close to the poverty line to access nutritious diets. Interviews with children for this CRSA reveal that many families are already struggling to provide adequate food to their children. A youth interviewed describes the situation as such *"They (the children) are mostly munching on snacks because there is hardly anything to eat."*

Finally, the rise in temperatures predicted to happen as a consequence of climate change carries increased risk of heat stress, and is conducive to the spread of disease, both of which children are most vulnerable to.[236] This may be especially true for children living in unsanitary overcrowded informal settlements.

With Climate Change a growing threat to the region, there is an evident need to assess its impacts on children, as well as the need to take children's voices into account when developing climate change and Disaster Risk Reduction (DRR) legislation and monitoring and evaluation frameworks.

[236] Bartlett, 2010

# 5. Children's perspectives

The objective of this section is to assess the strengths and gaps of children's knowledge of child rights, based on the views of children interviewed from the Northern, Western and Central divisions in Fiji, through the exploration of 3 key themes: 1) Children's level of understanding of child rights, civil society and legislation in place to protect them; 2) Children's perceptions of inequalities in their communities; and 3) children's perceived capacity to influence change and their aspirations. A summary of findings from the CRSA child surveys can be found in *Annex D.*
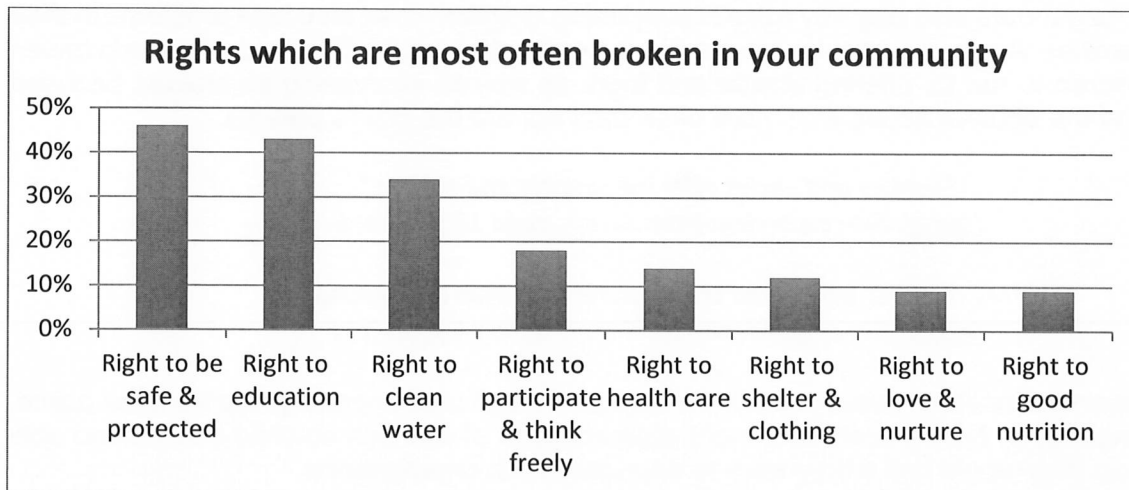
5.1 Level of understanding of child rights

### 5.1.1 Knowledge of child rights

According to our short survey, approximately a third of children in Fiji have never heard of child rights. Children from the Northern division were by far the most knowledgeable on their rights with 95% of children having heard about child rights and 73% of children aware of laws and policies that protect the child. The Western and Central divisions presented a different scenario with only approximately half of children interviewed having heard of child rights, and only 16% and 19% respectively being aware of child rights legislation. Interestingly, the best-informed children are also those with the most exposure to youth clubs (Save the Children, Red Cross, Reef Rangers) in their communities - 64% of respondents have knowledge of child led clubs and initiatives in the Northern division, as opposed to 24% and 23% in the Western and Central divisions respectively. Child led clubs are presumably avenues where concepts of child rights and child participation have been reinforced.

Across all three divisions surveyed, children and youth who are aware of child rights report that the school is a key source of information. The rights they most know about are the right to education (cited by 41% of respondents), followed by the right to feel safe and protected (cited by 23%). A very small percentage of children have knowledge of any other rights, such as the right to participate and be heard (4%) and the right to be loved and nurtured (3%). Interestingly, the rights, which are best known to the children, are also the rights, which children feel are most often not respected in their communities with 46% of all respondents reporting that children are not safe and protected in their communities and 43% reporting that the right to education is not upheld. Other rights which children feel are broken in their communities include the right to participate and think freely, the right to clean water, the right to health care, the right to shelter and clothing, the right to good nutrition and the right to love and care (See *Fig. 19*).

Fig. 19 Rights, which are most often broken in the survey participants' communities



**Rights which are most often broken in your community**

Source: Save the Children CRSA Children surveys, 2018

### 5.1.2 Reasons children believe these rights are broken

Children have their own understanding of why these rights are broken in their communities. Almost a third of children respondents, report that their parents do not care, or that children are not important members of the community.

Religion is presented as a justification for the mistreatment of children, with children explaining that the Bible mentions nothing about child rights. Culture or tradition is blamed for girls' rights not being upheld. Alcohol, kava and drug abuse is also repeatedly mentioned throughout the surveys as lifestyle obstacles to the realisation of their rights.

> *"Rights are hard for parents to cope up with due to traditions."*
> <u>Source:</u> *Boy respondent from Natawarau, aged 12 years old.*

Surprisingly, a number of children blame themselves for their rights not being upheld (7%). Many believe that if they listened better, their life would improve significantly. For these children, love, safety, protection and care is not so much perceived as a right, but as something to strive for and that needs to be deserved.

> *"Our rights are not respected because we are just children, we should just listen to what we are told."*
> <u>Source:</u> *Girl respondent from Navutu, aged 15 years' old*

> *"Rights are not respected because children should just always listen to parents and do as they tell them."*
> <u>Source:</u> *Girl respondent from Wailoku, aged 14 years old.*

Children from the Northern division, who have a better understanding of child rights, do not blame themselves for their rights not being respected.

### 5.1.3 Support that children perceive is available to them in the community

Children are able to identify help available to them in the community. The majority of respondents refer to the police as the main source of help, and the Child Helpline was mentioned repeatedly. Police are seen as key actors, who are present and recognised at the community level. When detailing the type of help they could obtain from the police, a majority of children acknowledged the police's limitations, mentioning that more often than not, children who seek help from them get sent back home or are told to change their behaviour to avoid the abuse in the first place.

> *"Sometimes a child can go to the police officer of the village. He will advise, give instructions and tell you to ask for forgiveness."*
> <u>Source:</u> *Boy respondent from Wailoku, aged 17 years old.*

Relatives and neighbours also play key roles in supporting children when they face problems in their own nuclear families. Aunts in particular are mentioned as trusted adults. They provide a safe haven for abused children to run to, offering shelter and food, as well as intervening as brokers between the children and the abusive adults who more often than not are the child's parents.

> *"Aunties and uncles offer me support and shelter."*
> <u>Source:</u> *Girl respondent from Saravi, aged 12 years old.*

> *"My relatives will go and tell my parents to stop the beating."*
> <u>Source:</u> *Girl respondent from Saravi, aged 14 years' old*

NGOs were also mentioned as possible places of refuge, though unlike seeking help from the police, relatives or neighbours, NGOs seemed a more abstract point of call with no child interviewed able to detail the help they would find if they were to approach such organisations.

### 5.1.4 Awareness of laws that address child rights

Most children interviewed in the Northern division, where awareness of child rights is high, felt confident to disclose that they knew about laws and policies that protect child rights. Most children referred to child protection policies, though no one was able to name any specifically. One child mentioned that there was a law associated with education being compulsory. In other divisions, awareness of laws that protect the child was very limited. A small number had general knowledge of child protection laws, and one child mentioned the child labour policy. Many children were confused and referred to their parents' law as child rights law – described as *"obey your parents"*, *"do your chores"*, *"listen"* and *"respect elders."* Several children identified that laws exist, but that these are contradictory with the teaching of the Bible, and therefore dismissed.

> *"Parents say that children have no rights in a Biblical sense."*
> Source: *Girl respondent from Saravi, aged 14 years old.*

Though knowledge of laws and policies was limited, many children across the country mentioned the Child Helpline as a tool in place to protect their rights.

## 5.2 Perceived inequalities

### 5.2.1 Access to basic needs

Approximately a third of all children interviewed feel that the basic needs of healthcare, education, food and shelter are well met in their communities. In the Northern division, a third of children report that their families always or often struggle in providing education, food and shelter, however 87% report that their families are financially able to meet their health care needs. In the Western division, just over half the children surveyed feel that their families always or often struggle to pay for shelter, and 43% report that their families struggle to pay for the costs involved in educating them. Children in the Central division are overall better off in accessing all their basic needs. The most significant need which families in the Central division struggle to meet is education (25%) (See *Table 15*).

Table. 15 Does your family sometimes lack money to pay for you to get the following basic rights? (Question 6)

| | NORTHERN | | WESTERN | | CENTRAL | |
|---|---|---|---|---|---|---|
| | Always/ Often | Sometimes/ never | Always/ often | Sometimes/ never | Always/ often | Sometimes/ never |
| Health | 13% | 87% | 25% | 75% | 18% | 82% |
| Education | 30% | 70% | 43% | 57% | 25% | 75% |
| Food | 33% | 67% | 23% | 77% | 11% | 89% |
| Shelter | 33% | 67% | 52% | 48% | 10% | 90% |

Source: *Save the Children CRSA Child and Youth surveys, 2018*

The struggle to send children to school is evident across Fiji, despite the government's best efforts to make school compulsory and affordable. Most children interviewed know children who have dropped out of school, particularly in the Western and Central divisions. Reasons given for why children drop out of school usually pertain to the family being unsupportive or too poor to afford the expenses associated with schooling, the shame of going to school with second hand clothes or without adequate food, and the pressure to drop out to supplement the family income. Peer pressure and association with antisocial behaviours, such as drugs, alcohol or stealing is also mentioned as key factors.

> *"Only some of us go to school because parents can't provide or are unemployed."*
> Source: *Boy respondent from Marata, aged 14 years old.*

*"Some kids are asked to leave school to help out the family."*
<u>Source:</u> *Girl respondent from Natawarau, aged 16 years old.*

*"Children are forced to stay home and go and sell."*
<u>Source:</u> *Boy respondent from Nacula, aged 11 years' old*

Though the majority of children do not feel that their families struggle financially to access health care, the right to health care is mentioned by 14% of respondents as a right that is not upheld in their communities (more often than shelter, clothing or food). Throughout the surveys, many children complain that their parents do not take them for medical treatment when they need it, and blame their parents' mistrust of medical services.

*"The right to medical services is broken because my parents prefer herbal remedies. My mum is afraid of injections."*
<u>Source:</u> *Boy respondent from Tavarau, aged 13 years old.*

*"My parents think that hospitals are a waste of time."*
<u>Source:</u> *Girl respondent from Navutu, aged 14 years old.*

*"My parents don't bother with doctors. They think they know better."*
<u>Source:</u> *Boy respondent from Kashmir, aged 14 years old.*

## 5.2.2 Children identified as most vulnerable
Children across Fiji identify children who are most vulnerable and most susceptible to struggle to access their basic rights, as those coming from families on one income, headed by single parents or coming from dysfunctional families. Children living with disabilities are also mentioned in the Northern and in the Central divisions. These vulnerable children are also the ones most likely to be discriminated against by the children themselves, along with children who are young and perceived as weak.

*"Children who have no fathers have the most problems accessing basic needs."*
<u>Source:</u> *Boy respondent from Nacula, aged 11 years' old*

*"Children whose parents drink a lot of kava have the most problems accessing things."*
<u>Source:</u> *Girl respondent from Nacula, aged 12 years old.*
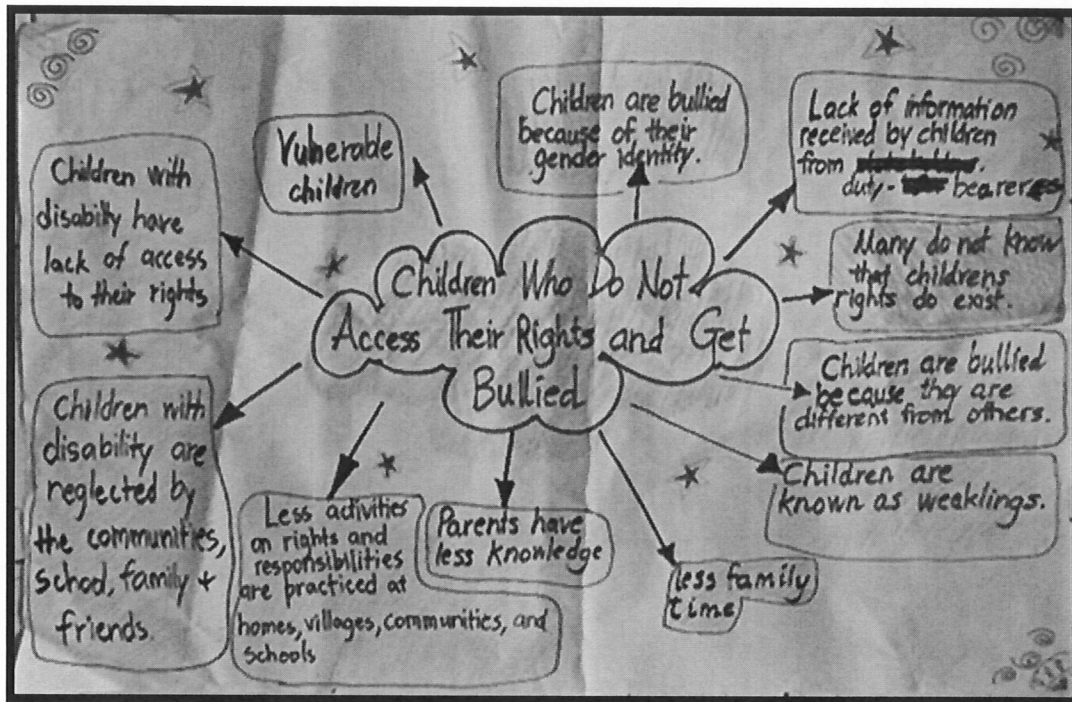
*Children and youth investigate the theme of discrimination through the Children's Forum in the Western division, December 2018 – <u>Photo Credits:</u> Save the Children Fiji.*

Discrimination against girls is mostly mentioned in the Northern division, where 83% of children acknowledge that girls are treated differently to boys. The gender gap is slightly less obvious in the other divisions, with approximately 67% of children recognising a difference in treatment between the genders. Mostly differences in treatment of girls refer to restrictions in freedom of movements, stricter moral rules and dress codes, and more house chore duties. This difference in treatment is mostly perceived as negative by the girls themselves who lament not being able to leave the home freely, and partake in sports or outdoor activities as much as the boys.

*"When the boys go out to play, I cannot because I am a girl and my job is to stay inside."*
<u>Source:</u> Girl respondent from Navutu, aged 13 years old.

*"The girls have to stay home and help her mother with household chores, and the boys mostly roam around the village."*
<u>Source:</u> Girl respondent from Naqai, aged 15 years' old

*"Girls always face a lot of problems such as domestic chores and violence compared to boys."*
<u>Source:</u> Boy respondent from Vunisaleka, aged 12 years' old

*"Girls are always told to stay home and cook and clean the house, while the boys go to school or to work."*
<u>Source:</u> Girl respondent from Vunisaleka, aged 14 years' old

Many children however offer justifications, and explain that treating girls differently is for their own good, necessary for their protection, and is a sign that they are more 'precious'.

*"Girls are treated differently to boys. They are always kept safe and secure indoors."*
<u>Source:</u> Boy respondent from Naqai, aged 17 years' old

*"Girls have curfews because they are important."*
<u>Source:</u> Boy respondent from Kia, aged 12 years' old

When referring to their own vulnerability, a significant number of respondents (46%) feel neglected. Many refer to violent treatment, and to the fact that their parents are too busy to care. Children attending the children forums following the CRSA surveys also highlighted the theme of neglect as one that is close to their heart.

*"My parents don't care about me. I mostly get growled at."*
*Source:* Boy respondent from Navutu, aged 13 years old.

*"After work my father goes for his grog session. My mother is always too busy to care."*
*Source:* Girl respondent from Tatawarau, aged 12 years old.

*"Mostly I'm neglected. I just wander around the village."*
*Source:* Boy respondent from Makata, aged 12 years old.

*"Children have the right to be loved. Normally when going to school or anywhere we don't get hugs at all and not even anything to motivate us."*
*Source:* Girl respondent from Lomanikono, aged 12 years old.

*"It never comes to their minds to ask me how I am, how my day was or anything."*
*Source:* Boy respondent from Navutu, aged 14 years old.



*Children and youth reflect on the themes that touch them the most at the Children's Forum in the Western division, December 2018 – Photo Credits: Save the Children Fiji.*

Children from the Northern division mentioned neglect more often, but this may be due to the fact that youth surveyed in the North are more aware of their rights, and therefore have higher expectations of their parents and family environments. Again, children who feel neglected, often put the blame on themselves for failing to inspire parental love, and argue that if they were more obedient or listened better, they would not be neglected. A very significant number of children across all three divisions aspire to a future in which they feel acknowledged, loved and nurtured by their parents.

## 5.3 Children's voice and aspirations

### 5.3.1 Children's voice

Traditionally children are discouraged from sharing their views, and are instead expected to obey without questioning parents' authority. This is evident throughout the surveys, with many children going back to their role as 'listeners,' a role which they feel is key to their rights being respected and to their protection from abuse. There is generally little arena for children to express themselves and share their concerns, and when these arenas exist they are seldom taken seriously. Close to a third of children interviewed feel that their families do not value their opinions. A similar number believe that their opinions are only occasionally taken into account.

> *"The voices of children are not heard. Children are left by themselves."*
> <u>Source</u>: *Girl respondent from Kia, aged 13 years old.*

> *"My parents don't want to listen to my opinions. People underestimate children."*
> <u>Source</u>: *Girl respondent from Navutu, aged 14 years old.*

It is significant that many of the youth interviewed, though aged between 11-18 justified their lack of say by the fact they are too '*young*', '*too weak*' or that their '*minds are too small.*' A good number of respondents however are not so resigned. 37% of children interviewed in the Northern division and 17% in the Central division are keen to take on a more proactive role and have their voices recognised. Approximately 10% of children in the Western and Northern divisions are interested in creating clubs as avenues to participate and have their voices heard.

When asked what advice they would give organisations and institutions in charge of child rights in Fiji, they offer many suggestions and demonstrate that indeed their voice has potential. Principally they want more information on child rights, but also understand the need to educate and sensitise the parents in their communities.

> *"We need training so that children can protect themselves on their own."*
> <u>Source</u>: *Boy respondent from Naqai, aged 18 years' old*

> *"Organisations should counsel parents so that they treat children with love."*
> <u>Source</u>: *Girl respondent from Kia, aged 14 years' old*

In second place they urge organisations and institutions to keep up the fight for child rights. Many children recommend that organisations take the time to visit their communities to research the child rights' situation.

> **"Provide questionnaires in villages and communities since we face a lot of abuse."**
> <u>Source</u>: Girl respondent from Nacula, aged 12 years' old

> **"Carry out research in the community with regards to child rights."**
> <u>Source</u>: Girl respondent from Nacula, aged 13 years' old

Many children ask for support in getting their voices recognised, and encourage organisations to support the creation of child led clubs in their communities and to listen to their experiences.
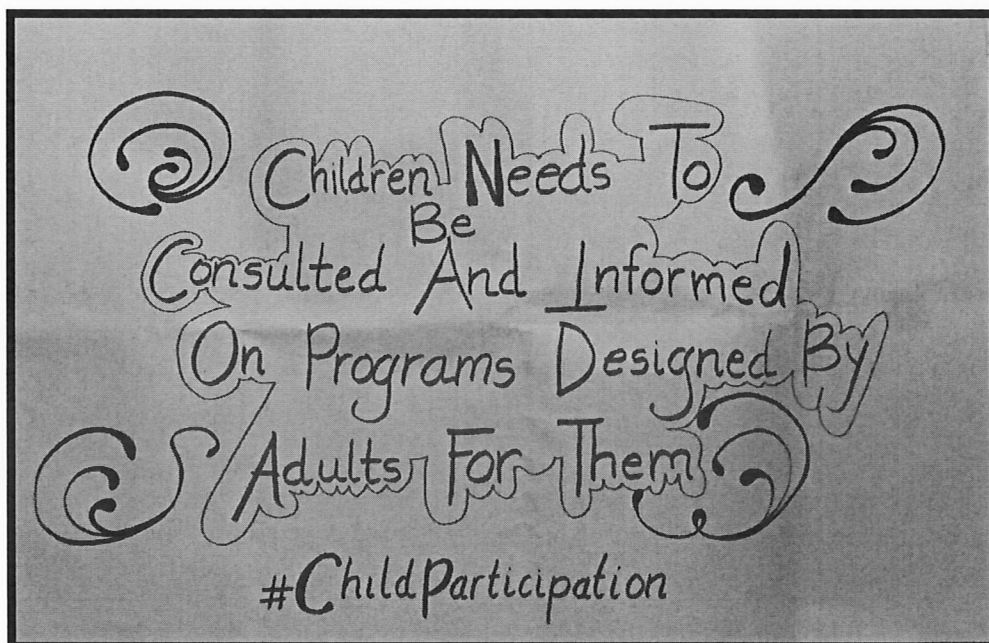
*Children and youth present their advocacy messages at the Children's Forum in the Western division, December 2018 - Photo Credits: Save the Children Fiji.*

Child abuse, bullying, suicide and school dropouts are areas that children are keen for duty bearers to focus on.

### 5.3.2. Children's ability to protect themselves

When asked what children can do to protect themselves from abuse, the most common answer from the children was to listen and obey parents. Parents are key to the fulfilment of children's rights, whether as sound counsel to children on how to avoid trouble in the first place, or as adults that children should avoid displeasing if they want their rights to be upheld. Sadly, the majority of the surveys highlight that many homes in Fiji are prone to violence and abuse, and that children have to tread carefully to avoid 'being growled at' or physically hurt.

> *"Children have the right to be protected. Not all kids are actually treated with kindness, they are mostly abused."*
> *Source: Girl respondent from Natawarau, aged 16 years old.*

Many of the children's responses identify the parents as the main perpetuators of child rights abuse. Common refrains include:

> *"The people that assist abused children usually talk to the parents"; "Adults can help the abused child by talking to his/ her parents"; "We are always told that our dad is not a bad man"; "I go to the neighbours and they tell my parents to stop hitting me"; "My uncle helps me out and tells my parents to stop hurting me."*
> *Source: Quotes extracted from Save the Children CRSA children surveys 2018.*

Asking for help from neighbours, relatives, the police or organisations that campaign for child rights are another resource 28% of children feel they can turn to, to protect themselves from abuse. Where children are the least aware of their rights, is also where more respondents feel helpless and report living in fear. A few children mentioned running away from home or suicide as options available to them.

### 5.3.3 Changes children want to see

Significantly, most of the changes the children wish for pertain to their home environment. 40% of children in the Western division wish for a more peaceful and respectful home. 23% of children in the Northern division wish for homes where children are loved and nurtured, and 37% wish for parents to recognise they have rights and have a voice. Similar findings emanate from the Central division with 26% of children wishing for less violence, and 17% for love, respect and recognition. The words peace and respect were repeated throughout the child surveys. Across all divisions, children also want an end to school dropouts. Gender equality is mentioned as an aspiration across Fiji, albeit by a minority of children.

*"I want to see peace and joy in our communities for the betterment of children and women."*
*Source: Girl respondent from Kalekana, aged 12 years' old*

*"I want children to be free and safe from abuse."*
*Source: Boy respondent from Koronivia, aged 15 years' old*

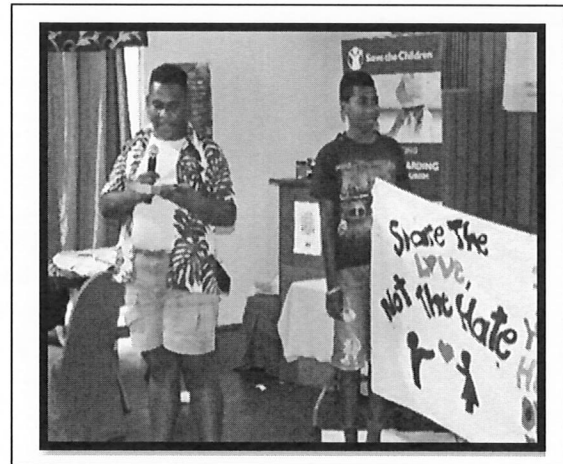*"I want to see parents spend more time with their children."*
*Source: Boy respondent from Vunisaleka, aged 12 years' old*

*"I want a peaceful environment."*
*Source: Girl respondent from Vunisaleka, aged 16 years' old*

*"For all to be safe and respect each other. Parents have to see that their child is protected."*
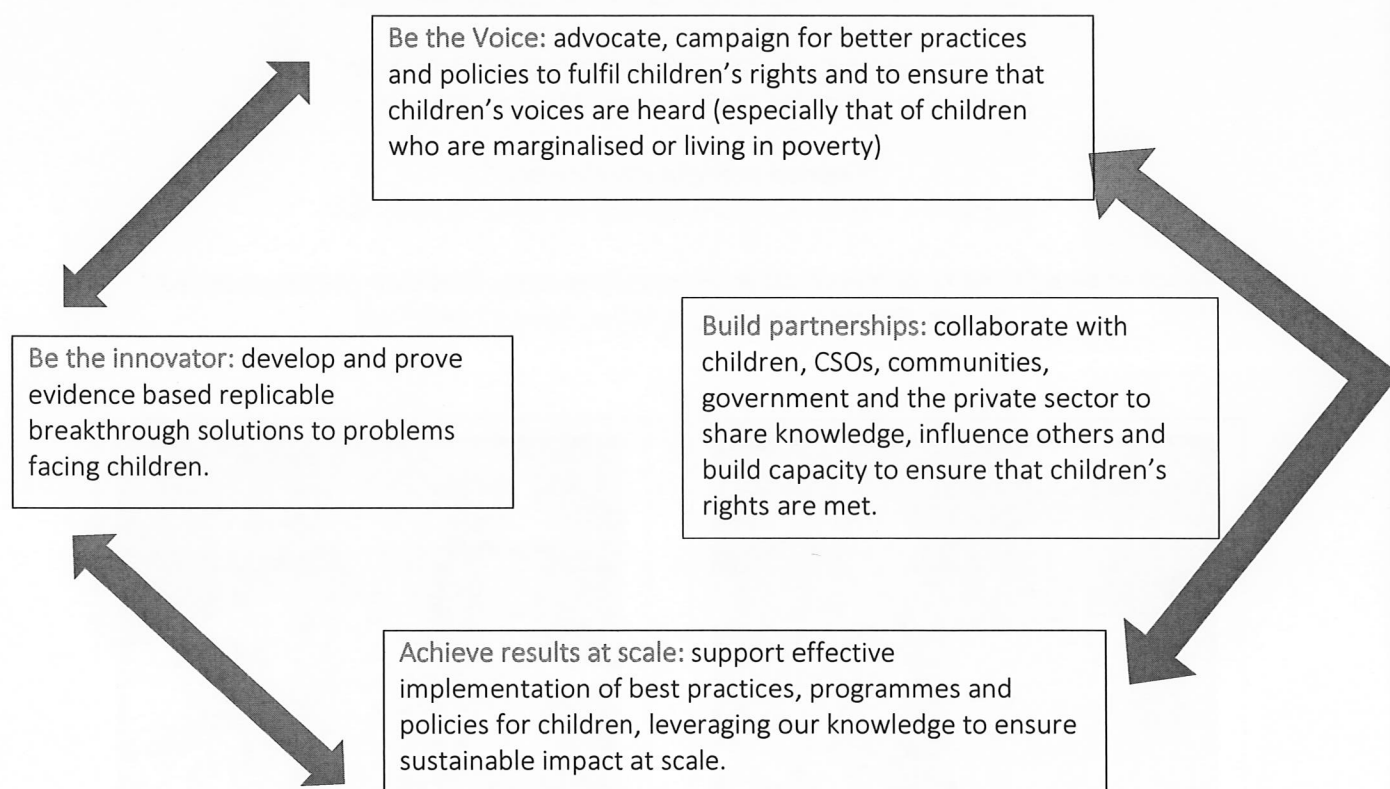*Source: Girl respondent from Naqai, aged 15 years' old*
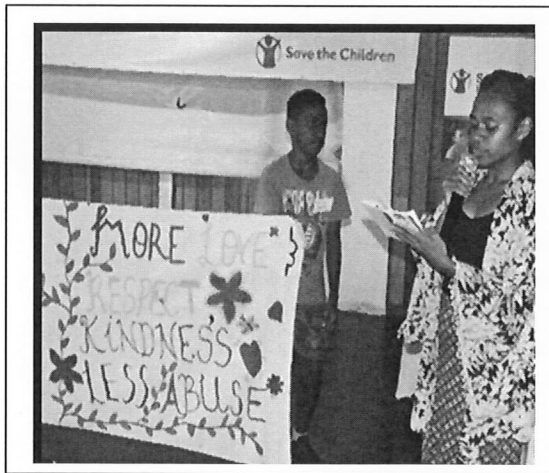


*Children and youth present their advocacy messages at the Children's Forum in Suva, December 2018*
*Photo Credits: Save the Children Fiji.*

# 6. Strategic opportunities for Save the Children Fiji

This section examines strategic opportunities that have been identified through the Child Rights Situation Analysis process, and draws upon Save the Children's areas of work to **inspire breakthroughs** through the **Theory of Change** model (See *Fig.20* below).

Fig. 20 Save the Children Theory of Change

Be the Voice: advocate, campaign for better practices and policies to fulfil children's rights and to ensure that children's voices are heard (especially that of children who are marginalised or living in poverty)

Be the innovator: develop and prove evidence based replicable breakthrough solutions to problems facing children.

Build partnerships: collaborate with children, CSOs, communities, government and the private sector to share knowledge, influence others and build capacity to ensure that children's rights are met.

Achieve results at scale: support effective implementation of best practices, programmes and policies for children, leveraging our knowledge to ensure sustainable impact at scale.

*Source:* Based on Save the Children, CRSA guidelines

Based on this theory of change and on the CRSA findings, Save the Children Fiji should consider the following strategic opportunities as part of its next programming cycle (2019-2021):

- Save the Children Fiji must remain committed to working with the most vulnerable and marginalised children, identified through the CRSA as children living with disabilities, from poor families, and girls. These are the children in Fiji who face many more barriers to the full realisation of their rights, affecting their ability to survive, develop and thrive. Save the Children Fiji must ensure their voices are acknowledged throughout its programming.

- Child centred research, which was piloted through this CRSA, must be built upon to become a trademark of Save the Children Fiji. The needs of children as voiced through the child led CRSA surveys

should be further investigated and prioritised, and annual planning processes, as well as strategies, must continue to be informed in this innovative manner by the perspectives and experiences of children and youth.

- **Save the Children Fiji should** advocate, **as well as** develop training and capacity building **for all those involved in the implementation process of child rights.** Save the Children Fiji is in a unique position to do so as the main child rights organisation in Fiji, working with up to 52 communities. Central to the challenge of fully realising children's rights in Fiji is the fact that child rights are perceived as a foreign concept. This misunderstanding often leads to discriminatory practices, a lack of avenues for children to voice their concerns, and a low prioritization of child rights in general. A partnership with the Ministry of Education, Heritage and Arts should be envisaged to further promote the dual concepts of child rights and responsibilities through the schools, possibly taught as part of life skills education. The partnership with the Department of Social Welfare should be strengthened through advocacy work at the community level, with a focus on educating parents about child rights.

- **Save the Children Fiji must** partner **with Faith Based Organisations to promote and take positive disciplining initiatives** to scale. The alarming levels of violence and abuse described by the children in the CRSA surveys are a call for action, and clearly demonstrate that child protection is the number 1 concern of children in Fiji. Furthermore, Save the Children Fiji must seize the opportunity to campaign for the integration of child protection mechanisms within existing community structures and innovating features such as the Family Safety App. New partnerships at the regional level should also be considered to roll out the 'steps to protect' approach.

- **Save the Children Fiji ought to** advocate **for and** support **the development of a National Plan of Action for children,** which would define objectives, sub-objectives, strategies, action points and indicators for measuring progress in four key priority areas: survival; health and nutrition; education and development; participation and protection. This framework will enable the National Coordinating Committee on Children to analyse effective policy implementation and to perform its duties of monitoring progress of the realisation of child rights.

- **Save the Children Fiji must** contribute **to filling** research **gaps concerning vulnerable children,** as highlighted through this CRSA. This can include research on the current state of child labour, the situation of street children and that of children involved in commercial sexual exploitation or the impacts of climate change on children. This will assist Save the Children Fiji carry out evidence-based advocacy to influence the development of child rights laws and policies that recognise sub-national inequalities. Disaggregated child-focused data is an important contribution to policy dialogue and provides a much-needed basis for child rights policy and interventions.

- **Save the Children Fiji should** innovate **with this CRSA, and keep the analysis as a live document.** For the organisation to speak of child rights in Fiji with authority, knowledge and analysis of the situation of children needs to be current. Save the Children Fiji should set up a CRSA coordination team tasked with organising periodic reviews and updates based on programme findings or research. The team must engage with the upcoming Universal Periodic Review as an opportunity to share, but also review and add to this analysis.

# Bibliography

Adinkrah, (1995); Monsell-Davis, (2000); Vakaoti, (2007), cited in UNICEF (2009), Protect Me with Love and Care

ADB (2015), Fiji Gender Country Assessment

ADB and ILO (2015), Creating Quality Jobs: Employment Diagnostics Study

Asia and Pacific Policy Studies (2016), Foreign Aid to the Pacific: Trends and Developments in the Twenty-First Century

Bartlett, S. (2010), Urban Children: Discussion of UNICEF Programming Direction

CEDAW (2018), Fiji Date Provisions

CIVICUS (2018), Fiji Country Profile, available online at: https://monitor.civicus.org/country/fiji/

FAO (2003), WTO Agreement on Agriculture: The implementation Experience – Developing Country Case Studies

FBS (2013-20147), Household Income and Expenditure Surveys (HIES)

FBS (2017), Population and Housing Census Release

Fiji Government (2016), Post Disaster National Assessment

Fiji Government (2016), ITaukei Affairs Act

Fiji Government (2016), Post Disaster Needs Assessment

FNCDP (2010), Making Women with Disabilities Visible

Fiji Parliament (2018), Report on the online safety bill

FSL (2016), Food Security and Livelihoods Needs Assessment

FWCC (2013), Somebody's Life, Everyone's Business

FWRM (2017), Balancing the Scales: Improving Fijian Women's access to Justice

IASC and EC (2017), INFORM Risk - Fiji: Country Profile

IDADAIT (2018), Supplementary Book, NSAAC

ILO (2010), Child Labour in Fiji: A survey of working children in commercial sexual exploitation, on the streets, in rural agricultural communities, in informal and squatter settlements and in schools

ILO (2015), Sub Regional Trafficking and Child Labour Report

ILO (2016), Fiji Labour Market Update

ILO and ADB (2015), Creating Quality Jobs: Employment Diagnostics Study

IWDA (2017), Exploring Multidimensional Poverty in Fiji

Jayaweera and Morioka (2008), Giving South Pacific Youth a Voice: Youth Development through Participation, cited in UNICEF, (2010), Urbanization and Children in the Pacific

Ministry of Economy (2017), 5-Year and 20-Year National Development Plan: Transforming Fiji

MoEHA (2014), Policy on Tuition Fee Free Grant for Primary and Secondary Schools

MoEHA (2015), Fiji Education for All National Review

MoEHA (2017), Special and Inclusive Education Policy

MoFNP (2004), Millennium Development Goals: Fiji National Report

MoHMS (2012), Fiji National Strategic Plan on HIV 2012-2015

MoHMS (2013), Fiji National Immunization Coverage Survey

MoHMS and WHO (2015), Fiji Climate Change and Health Adaptation: Proceedings of the Symposium

MoHMS, (2016), Health Status Report

MoHMS (2016), Adolescent Health Situation Analysis

MoHMS (2016), The Ministry of Health National Strategic Plan (2016-2020)

MWCPA (2017), 2016-2017 Annual Report, Parliamentary paper no. 122 of 2018

Mott Mac Donald (2016), Strengthening Development Partner Support to Immunisation Programs in the Pacific

National Food and Nutrition Council (2008), Micronutrient Status of Children Aged 6 months to 5 years

ODI (2014), The Age of Choice: Fiji and Vanuatu in the new aid landscape

OXFAM (2017), Uprooted by Climate Change: responding to the growing risk of displacement

PIFS (2015), Pacific Regional MDGs Tracking Report

Ravuvu (1983), cited in Sienkiewicz S. (2000), Ethnic Relations in Fiji: Peaceful coexistence and the recent shift in the ethnic balance

Roffee, J. & Whitehead, J. (2016). Child Sexual Abuse in Fiji: Authority, Risk Factors and Responses. Current Issues in Criminal Justice. 27. 323-334. 10.1080/10345329.2016.12036049.

Save the Children (2006), The Emotional and Physical Punishment of Children in Fiji

Save the Children (2010), CSEC Survey Report

Save the Children (2015), Child Rights Situation Analysis

Save the Children Fiji (2018), Child Rights Situation Analysis Surveys

SPC (2011), Towards a Food Secure Pacific: A Framework for Action on Food Security in the Pacific 2011-2015

SPC (2015), Trends in Neonatal and Infant Mortality Rates in the Pacific Island States

SPC (2016), Human Rights in the Pacific Situation Analysis

UNCRC (2014), Fiji Universal Periodic Review

UNDP (2009), Pacific Sisters with Disabilities

UNDP (2014), Human Development Report

UNDP (2016), Human Development Report

UNESCAP (2018), available online at: https://egov4women.unescapsdd.org/country-overviews/fiji/gender-equality-and-women%E2%80%99s-empowerment-priorities-in-fiji

UN Habitat (2016), Fiji Informal Settlement Situation Analysis

UNICEF (2010), Urbanization and Children in the Pacific

UNICEF (2008), Protect me with Love and Care

UNICEF (2009), Plan your Future, Plan your Families

UNICEF (2010), Urbanisation and Children in the Pacific

UNICEF (2010), Pacific Children with Disabilities

UNICEF (2011), Children in Fiji: An Atlas of Social Indicators

UNICEF (2005-2012), Child Protection Indicators

UNICEF (2012), WASH Country Office Annual Reports

UNICEF (2013), Fiji: Tracking Progress in Maternal and Child Survival

UNICEF (2015), Harmful Connections: Examining the Relationship between Violence Against Women and Violence Against Children in the South Pacific

UNICEF (2015), Child Sensitive Social Protection in Fiji

UNICEF (2015), Snapshot of Water and Sanitation in the Pacific

UNICEF (2017), Status Report on Early Childhood Education and Development in the Pacific Island Countries

UNICEF (2017), WASH in Schools Empowers Girls - An Assessment of Menstrual Hygiene Management

UNICEF (2018), Progress for Every Child in the SDG Era

USP (2009), Informal and Squatter Settlement Survey

World Bank (2006), Obstacles to Economic Growth in Six Pacific Island Countries

World Bank (2015), Development Indicators

World Bank (2016), Indicator Database

World Bank (2017), Climate Vulnerability Assessment: Making Fiji Climate Resilient

World Economic Forum, (2014), The Gender Gap Report

WHO (2013), Fiji Country Statistics, available online at:
http://apps.who.int/gho/data/node.country.country-FJI

WHO (2014), Global Nutrition Targets 2025

WHO (2016), Fiji Country Profile, available online at:
http://apps.who.int/gho/data/node.country.country-FJI

WHO and UNICEF (2014), Joint Monitoring Programme

WHO and UNICEF (2017), Estimates of Immunization Coverage

World Life Expectancy (2018), cited online at:
http://fijivillage.com/news-feature/Fiji-has-highest-rate-of-diabetes-fatalities-in-the-world--k95rs2

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