



Situation Analysis on Children and Adolescents on Sint Maarten 2020



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List of acronyms

AIDS	Acquired Immune Deficiency Syndrome
ASVE	Advanced Secondary Vocational Education
BES	Bonaire, Sint Eustatius, Saba
CARICOM	Caribbean Community
CCSLC	Caribbean Certificate of Secondary Level Competence
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CNCD	Chronic Non-Communicable Disease
CoG	Court of Guardianship
CPS	Collective Prevention Services
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
CSEC	Caribbean Secondary Education Certificate
CXC	Caribbean Examination Council
DRM	Disaster Risk Management
ECCE	Early Childhood Care and Education
ECD	Early Childhood Development
ESF	Emergency Support Function
FAO	Food and Agriculture Organisation
FBE	Foundation-Based Education
GDP	Gross Domestic Product
GED	General Educational Development
HAVO	Higher General Secondary Education (in Dutch: Hoger Algemeen Voortgezet Onderwijs)
HIV	Human Immunodeficiency Virus
IEP	Individual Education Programme
	Istanbul Convention Council of Europe Convention on Preventing and Combatting Violence against Women and Domestic Violence
MAC	Methodist Agogic Centre Foundation
MECYS	Ministry of Education, Culture, Youth and Sport
MHF	Mental Health Foundation
MHPSS	Mental Health and Psychosocial Support
MoJ	Ministry of Justice

MoU	Memorandum of Understanding
NAf	Netherlands Antilles Florin
NGO	Non-Governmental Organisation
PAHO/WHO	Pan-American Health Organisation/World Health Organisation
PWAS	Prince Willem Alexander School
RTH	Return to Happiness
SDG	Sustainable Development Goal
SECD	Sint Maarten Early Childhood Development Association
SEMC	Safety and Emergency Management Committee
SER	State of Education Report
SIDS	Small Island Developing States
SJIS	Foundation Judicial Institutes Sint Maarten (in Dutch: Stichting Justitiële Instellingen Sint Maarten)
SKOS	Foundation for Catholic Education Sint Maarten (in Dutch: Stichting Katholiek Onderwijs Sint Maarten)
SMMC	Sint Maarten Medical Centre
SSSD	Student Support Services Division
STAT	Department of Statistics
TEATT	Ministry of Tourism, Economic Affairs, Transport and Telecommunication
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNICEF	United Nations Children's Fund
VROMI	Ministry of Public Housing, Spatial Planning, Environment and Infrastructure (in Dutch: Ministerie van Volkshuisvesting, Ruimtelijke Ordening, Milieu en Infrastructuur)
VSA	Ministry of Public Health, Social Development and Labour (in Dutch: Ministerie van Volksgezondheid, Sociale Ontwikkeling en Arbeid)
VWO	Preparatory Scientific Education (in Dutch: Voorbereidend Wetenschappelijk Onderwijs)
WB	World Bank
WISS	Worldwide Initiative for Safe Schools
WYC	White and Yellow Cross
10-10-10	Dissolution of the Netherlands Antilles on October 10th, 2010



Executive summary

Background and purpose

All children on Sint Maarten have rights. A child is any human being under the age of eighteen. Children's rights are enshrined in the Convention on the Rights of the Child. This Situation Analysis will be instrumental to better determine and monitor the realisation of children's rights and point the way to possible solutions and priority actions. The previous Situation Analysis for Sint Maarten was completed in 2013. The purpose of this Situation Analysis is to present the current situation and identify the main challenges for children and adolescents on Sint Maarten, especially following the devastation caused by Hurricanes Irma and Maria in September 2017.

This report places emphasis on a process which identifies context-specific opportunities at country level. They must be appropriate and relevant to the local operational, policy, and programming contexts. Therefore, consultations were organised with the support of a multi-sectoral Technical Committee for Sint Maarten throughout the process. The role of the Committee included reflection and dialogue on the Situation Analysis' key recommendations, with a view to ensure that the prioritization of children's rights issues can inform discussions on development in Sint Maarten and aid in achieving the Sustainable Development Goals (SDGs). The interviews, discussions, and consultations with the Committee revealed broad consensus on the challenges faced by children and adolescents on Sint Maarten, in relation to both underlying causality and the key actions to be prioritised.

Limitations

The main limitation of the Situation Analysis is the limited availability of recent, high-quality data for a wide range of key indicators. Weaknesses in data collection, analysis and dissemination had previously been identified in 2013, and efforts have been made to improve this. However, progress was also constrained by the impact of the 2017 hurricanes, which confronted the government with many competing priorities. It therefore proved difficult to determine a statistically accurate picture of the situation after the hurricanes in various sectors. Another limitation is that this report is not a comprehensive assessment of the situation of children in all aspects of the CRC, nor is it a substitute for in-depth thematic or sectoral technical reviews. Rather, this report provides an instrument to stimulate discussion about the development and well-being of children and

adolescents, puts forth recommendations as inputs for policy decisions, and functions as an advocacy tool, providing an overview of the most critical challenges. The reports looks specifically at child protection, education, health and mental health.

Analysis on the Right to Protection

Children have the right to be protected from violence, abuse, exploitation, and neglect. Key findings in the report are that 85% of the adult interviewees mentioned violence as a major issue facing children, adolescents and women, and 50% thinks child sexual abuse is a 'common' occurrence. Out of the 43 youth who were interviewed, 60% knows someone who has been sexually abused. Since these topics are very sensitive and taboo, they are always underreported. After the devastating hurricanes in September 2017, there was an increase in reported cases of child neglect (119 cases in 2018 against 49 cases in 2017). It is unclear whether this increase can be attributed to improved reporting, or whether more children were left by themselves while caregivers struggled to make ends meet with multiple jobs due to the economic hardship after the hurricanes.

Over the past few years, improvements were made to strengthen the child protection system. In 2015, the reporting protocol for child abuse was approved and the new 2015 Penal Code specifies acts that are considered as child abuse. In 2015, an action plan on child abuse was drafted as well as a policy to prevent domestic violence and child abuse, drafted in 2018. They have not yet been approved. In 2019, an inter-ministerial Child Protection Working Group was formed and began meeting regularly to implement a commonly agreed upon workplan. The workplan emanates from a 2019 analysis on how to strengthen the child protection system.

Key recommendations to protect children from violence and abuse are:

- Continue with the recently initiated (2019) bottom-up approach of discerning ways to identify and report child abuse with first-line response services, and strengthen knowledge and capacity to provide rapid and effective response measures.
- Implement awareness programmes, for the general population, about reporting violence against children, in languages appropriate to the various target groups.
- Expand parenting courses and identify new opportunities for providing parenting information through existing services, such as day care centres, the Baby Clinic of the Collective Prevention Services Department (CPS), and after-school programmes.
- In light of the high proportion of vulnerable female-headed households, develop programmes that encourage and support men to have a strong and positive role in the lives of their children.
- Establish clear and uniform definitions on child abuse, domestic violence, neglect, etc. to be utilised by all stakeholders. Uniform definitions will improve reporting, data collection and analysis, and support the standardised provision of services.

- Continue with the Child Protection Working Group as an active multi-stakeholder group, including service-providing NGOs, with a designated government lead and annual workplan.

Children in contact with the law should be treated fairly and in a manner specific to a child. In 2018, there were 76 juvenile arrests, all male. In 2015, with the revision of the Penal Code, juvenile criminal law was completely revised and became regulated separately. The new Penal Code also opens the possibility for a 'police transaction' (HALT measure) for a juvenile to have his case dismissed. However, this has not yet been implemented. A major achievement was the establishment in 2014 of a closed facility, the Miss Lalie Centre, for juvenile offenders who were sentenced. Due to severe damage, it had to be closed after the 2017 hurricanes and was reopened in October 2019.

Key recommendations regarding children in contact with the law are:

- Create options for alternative sentences, such as a HALT measure, as well as possibilities for institutional placement for psychiatric treatment.
- Strengthen the recently reopened Miss Lalie centre.
- Address the lack of a facility or treatment for female juvenile offenders.

The Situation Analysis identifies other protection risks for children and formulates recommendations. Some other key findings are:

- Foster care and group homes do not operate in line with the United Nations Guidelines for the Alternative Care of Children and the current capacity to place children in foster care is very fragile.
- Around schools, violent incidents take place mostly between pupils and just outside school premises. Conduct research to identify the magnitude and drivers of violence at and around school in order to address it.
- During emergencies, such as the devastating 2017 hurricanes, children were evacuated off of the island without proper screening on who they were travelling with, parental consent and their destination. Continue initiatives taken to address this which have until now included drafted protocols on disaster preparedness.
- Increase capacity to provide community—level psychosocial support and mental health services for children and adolescents, especially during and after emergencies.

Analysis on the Right to Education

All children have the right to grow up in a stimulating environment, to learn and reach their full potential. Among the key findings is that public spending on education is high, showing strong government commitment. The enrolment rates are high, but there is an unexplained gap between the number of children enrolled in primary education and in secondary education. In addition, it is unclear whether all undocumented children on the island are attending school. The average

repetition rates are high, which seems mostly related to the language of instruction, but there are also other factors at play. The percentage of youth aged 15-24 who are not in employment, education or training is very high at 31% out of 4,885 youth in that age group.

Key recommendations are:

- Design and implement a unified model for secondary education, aimed at all schools, using similar learning methodologies and the same language of instruction.
- Ensure that the education and training provided in the educational institutions matches the skills that are in demand from employers.
- Strengthen job training and job placement programmes for young people and offer training in entrepreneurship skills to youth.
- Reinstate the Youth Help Desk as an information centre for young people.

Other key findings are that the Early Childhood Development (ECD) sector for children aged 0-4 is poorly regulated. There are no quality standards for day care centres and home-based care. As the sector is not subsidised, children from poorer households have limited access to early stimulation programmes. Curriculum and programme delivery standards are not included in the regulatory framework for ECD centres. There is a draft Early Childhood Development Policy Plan that has not yet been approved.

Key recommendations are:

- Register and regulate ECD centres and home-based ECD services as educational institutions in accordance with quality assurance criteria.
- Dedicate staff capacity towards strengthening the ECD sector.
- Inform parents about the importance of ECD and the available services.
- Create innovative financing mechanisms for ECD to expand access.

The 2017 hurricanes revealed that schools had varying levels of disaster preparedness, which resulted in varying levels of damage and destruction to the properties. Since then, a lot of effort was put into improving school safety and disaster preparedness in schools. In 2019, the government signed the Antigua and Barbuda Declaration on School Safety, which is part of the Caribbean Safe School Initiative. Key recommendations are:

- Continue the efforts to ensure that the education sector is increasingly prepared for various types of hazards and risks.
- Develop official education resources on disaster risk management and integrate these into teacher training curriculum provided on Sint Maarten in order to increase the disaster resilience of staff and students.

Analysis on the Right to Health

Every child has the right to survive and develop healthily. Among the key findings is that there is a lack of data on the health situation of children and adolescents. No new studies have been carried out after the 2017 hurricanes to collect data on the health and mental wellbeing of children and adolescents. From older data, several key findings emerge. Vaccination levels are high on Sint Maarten, which is positive. Around 30% of the population is not insured for health care, among them undocumented families with children who are not eligible for public health insurance. Not being insured prevents access to health care. Obesity, also in children, has been on the rise on Sint Maarten as well as in the wider subregion. Of the adults on Sint Maarten, 29% are obese and 38% are pre-obese. Fruit and vegetables became 2,5 times more expensive between 2006 and 2016 and food in general doubled in price over the same period. In the Caribbean region, between 28% and 35% of children aged 4-20 years are overweight and around half of them are obese.

Key recommendations are:

- Work towards affordable universal access to health care for all, including undocumented migrants.
- Deepen the knowledge of the situation of the undocumented children on the island, the specific health risks among these groups and the level of accessibility to healthcare services.
- Develop and implement policies to strengthen preventative and curative services for chronic non-communicable diseases, most notably obesity, targeting children, adolescents and young people and their parents.

When looking at the health of adolescents and issues specific to them, a survey in 2013 about adolescents' mental health already showed alarmingly high rates of almost 30 percent of adolescents and young people from 13-19 years of age who thought of suicide and 13 percent who attempted to do so. Also, 51 percent of adolescents sometimes or always felt lonely, whilst 53 percent felt depressed and hopeless. When looking at sexual and reproductive health, two thirds of the sexually active adolescents used a condom during the last time they had intercourse, and 60% used a condom during the first time they had sex. A 2016 study comprising 6 island states, among them Sint Maarten, revealed a striking percentage of forced sexual initiation among both girls and boys, at close to or more than 50%.

Key recommendations are:

- Review and update progress made under the 2014-2018 National Mental Health Care Plan.
- Update the 2013 research on adolescent health and sexuality.
- Strengthen specialised services to reach adolescents and young people. The Youth Help Desk could serve as a suitable source of information for youth on sexual and reproductive health.

Overarching conclusions and recommendations

The first overarching recommendation is to invest in capacity building in data collection, data analysis, and data dissemination to monitor progress on the rights of children and adolescents. This has been an ongoing process, but the 2017 hurricanes created a major setback in available data and capacity for data collection.

The second overarching recommendation relates to the fact that all ministries are involved in advancing the rights of children; therefore, children's rights are an inter-ministerial responsibility. Five important policies have been drafted, but have not yet been approved for several reasons; political instability being one of them. The recommendation is to approve these policies. There is an important opportunity in the fact that the Council of Ministers approved the action plan on children's rights for Sint Maarten that was developed under the Kingdom-wide Children's Rights Inter-country Taskforce. There is a draft national decree ('landsbesluit') towards the establishment of a national child rights committee tasked to execute the action plan and to monitor and advance children's rights and policies for children.

The third overarching recommendation is to further research the situation of undocumented children and the extent to which they have access to public services on both the Dutch and French side of Sint Maarten.





1.

Introduction

1. Introduction

Introduction to Sint Maarten

The Kingdom of the Netherlands has two parts: a European part and a Caribbean part. The islands of Sint Maarten, Curaçao, Aruba, Bonaire, Sint Eustatius and Saba belong to the Caribbean part and the Netherlands is the European part. On 10 October 2010 (known as 10-10-10), the Netherlands Antilles (consisting of five Dutch Caribbean territories: Curaçao, Bonaire, Saba, Sint Eustatius, and Sint Maarten) was dissolved.¹

The islands of Curaçao and Sint Maarten became autonomous countries within the Kingdom of the Netherlands and have full autonomy over internal affairs with the Dutch Government responsible for defence and foreign affairs, whereas Bonaire, Sint Eustatius and Saba (the BES islands) became special municipalities of the Netherlands. The Kingdom of the Netherlands now consists of four countries: Aruba, Curaçao, the Netherlands (including the BES) and Sint Maarten.



Figure 1: Map of the Netherlands

Source: <https://www.nederlandenu.nl/over-het-koninkrijk/een-koninkrijk---4-landen>

Sint Maarten is located in the Leeward Islands Group in the northeast Caribbean Sea (300 km east of Puerto Rico). The northern border of Sint Maarten is shared with the French overseas collectivity of Saint-Martin; together these two entities uniquely make up the smallest landmass in the world shared by two self-governing states (Sint Maarten: 34 km² and Saint-Martin 54.4 km²).² There is no physical border and islanders are free to move between both sides, a benefit also available to tourists. In 1994 the Kingdom and France signed the Franco-Dutch Treaty allowing for joint

¹ Aruba seceded from the Netherlands Antilles in 1986. The dissolution of the Netherlands Antilles was preceded by referenda that took place between 2000 and 2005 on each of the remaining five islands.

² The Treaty of Concordia, signed in 1648, officially divided the island in two with minor adjustments to the border occurring 16 times until the present-day border was established.

border controls (ratified in 2006). With one of the busiest modern international airports and one of the largest cruise terminals in the Caribbean, both located on the Dutch side of the island, Sint Maarten serves as a gateway to both Europe and the United States and as a hub for the movement of people and goods to the Leeward Islands.

Caribbean islands are particularly vulnerable to natural disasters, such as hurricanes and other extreme weather events including tropical storms, which are now being exacerbated by the adverse impacts of global climate change. In September 2017, Sint Maarten was hit by Irma and Maria, two major hurricanes of the 2017 hurricane season. The cumulative damage of the two hurricanes was estimated at close to 260 percent of its Gross Domestic Product (GDP) on the Dutch side. The airport, bridges, houses, public buildings, hotels, businesses, and roads sustained major damage, with a general estimated loss of USD 1.38 billion. Sint Maarten's economy is heavily dependent on tourism, so the damage sustained threatens the industry's recovery which was on track following the 2008 global economic crisis' impact on tourism in the Caribbean.



Figure 2: Map of Sint Maarten and Saint-Martin
Source: CIA World Factbook.

Overview of the Situation Analysis

The CRC is a human rights treaty which sets out the civil, political, economic, social, health and cultural rights of children. The Convention defines a child as any human being under the age of eighteen. United Nations Children's Fund (UNICEF) is mandated throughout the world to uphold and advocate for children's rights as part of its work with governments, donors, other United Nations agencies and programmes, civil society, citizens and children. This Situation Analysis is fundamental to this mandate to better monitor the realisation of children's rights and point the way to possible solutions and priority actions.

Undertaking a Situation Analysis is realised through a process that builds consensus around key priorities and current and emerging themes of major importance to children, adolescents and policy makers at national and community level. Three events give particular importance and relevance to this Situation Analysis in current debates about the direction of development for children and adolescents in Sint Maarten: (i) with the dismantling of the Netherlands Antilles in 10-10-10, Sint Maarten has emerged as a new self-governing country within the Kingdom of the Netherlands with responsibility for its overall development; (ii) the adoption of the 2030 Agenda for Sustainable Development, and the SDGs; and, (iii) in November 2015, the Netherlands ratified the Council of Europe Convention on Preventing and Combatting Violence against Women and Domestic Violence (Istanbul Convention).

The firm commitment of the Government of Sint Maarten to achieve the SDGs means closing the gaps between the agenda for universal children's rights and inequitable outcomes for children in Sint

Maarten. The way forward includes fostering the concept of 'inclusive development' which seeks to ensure that all segments of the population contribute to creating opportunities, share in the benefits of development, and participate in decision-making. Respect for the standards and principles of human rights - accountability, participation, equity and non-discrimination - are employed to ensure inclusive development. After nine years of governance under a new constitutional structure and during widescale recovery efforts post-Irma, Sint Maarten is at an important junction, with opportunities to shape a sustainable development and economic recovery agenda through resiliency strategies. The findings from the Situation Analysis will help to highlight what can be done to improve the lives of children and adolescents on Sint Maarten.

Purpose and Methodology

The purpose of this Situation Analysis is to present the current situation and main challenges for children and adolescents on Sint Maarten, especially since the devastation of the 2017 hurricanes, and to provide recommendations that inform policy and programmatic decisions.

UNICEF emphasises an equity-focused approach that presents a critical assessment of trends in the realisation of children's rights. From this assessment and analysis, it is possible to make recommendations that can accelerate progress towards the fulfilment of rights. Emphasis is also placed on a process which maximises context-specific opportunities at country level. They must also be appropriate and relevant to the local operational, policy and programming environments.

Therefore, consultations were organised throughout the process, with a multi-sectoral Technical Committee for Sint Maarten. The Technical Committee received a one-day skills-building orientation on causal analysis, determinants analysis and the purpose and process at the onset of the Situation Analysis exercise. The role of the Committee includes reflection and dialogue on the Situation Analysis' key recommendations with a view to ensure that the prioritisation of children's rights issues can inform discussions on development in Sint Maarten and aid in achieving the SDGs.

The steps taken to conduct the Situation Analysis included the recruitment of an international consultant to oversee the process and included such tasks as: a desk review, three field missions for data collection (interviews with key informants, adolescents and focus group discussions), data analysis, facilitation of consultations with stakeholders, drafting of the report; the review of existing data, government policy and analysis; and the development of a conceptual framework and methodology. The interviews, discussions and consultations with the Committee revealed extensive consensus on the challenges faced by children and adolescents in Sint Maarten and the key actions to be prioritised.

Key informant interviews and focus groups

Data collection relied on a participatory methodology involving extensive consultations with programme administrators, partners, and stakeholders. Interviews with key informants and focus

groups with adolescents and adults took place during three field missions between November 2018 and February 2019.

The Situation Analysis exercise in Sint Maarten reached 110 percent of targeted interviewees. Over 60 percent of the respondents were female in the categories of planners, administrators and leaders, teachers and school personnel, civil society and health care personnel. Over 70 percent of the out-of-school adolescents and students interviewed were male. Most of the parents/caregivers interviewed were female. The focus group of single parents included two males. Nine of the single female head of households interviewed were recent immigrants.

The perceptions, observations and levels of appreciation by interviewees reveal how they perceive their social situation and believe it to be relevant from a policy perspective.

Table 1. Summary of interviews

Key stakeholders	Target	Reached	%
Social programme planners, administrators and leaders	30	34	114%
Teachers, principals and school personnel	20	11	55%
Civil society groups	5	9	180%
Secondary and tertiary pupils	30	34	113%
Out-of-school adolescents	15	13	87%
Health care administrators and personnel	10	4	40%
Parents and caregivers	15	32	214%
Total	125	137	110%

Data usage and limitations

The methodology for the analysis involved collecting, reviewing, and synthesising of quantitative and qualitative data. However, the absence of disaggregated statistical data was a critical issue, which was also noted in the 2013 Situation Analysis. The lack of systematic up-to-date data with which to monitor the implementation of the CRC, the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Convention on the Rights of Persons with Disabilities (CRPD), and the Istanbul Convention also continues to be a major challenge.

In some cases, the only available data were more than a decade old. Online databases of international agencies, including UNICEF, the United Nations Development Programme (UNDP), the World Bank (WB), the United Nations Population Fund, and United Nations Educational, Scientific and Cultural Organisation (UNESCO) are usually the primary sources for data, but these were rarely available from these sites for Sint Maarten.

On a positive note, the Statistical Yearbooks, published by the Department of Statistics (STAT), serve as a good source for locating a wide variety of basic data on key indicators. The Compulsory

Education Report was available for four consecutive years allowing for relevant trend analysis of some indicators. Despite these advantages, the caveats about these data are in order:

1. Availability of quantitative information varies by source and sometimes lacks consistency in methodologies for data reconciliation processes used for estimations, examining trends, and updating data. This was the case for several health surveys for the years of 2013 and 2015. Some data are expected to be updated or completed after the Situation Analysis.
2. Several important data collection systems were not fully operational, limiting trend analysis (e.g. juvenile justice, domestic violence, and child abuse).

This Situation Analysis report is not a substitute for in-depth thematic or sectoral technical reviews such as a multi-disciplinary poverty analysis, which are essential for designing, developing, and implementing specific policies and programmes intended to benefit children or achieve progress towards the SDGs. Nor is it intended to function as a review that comprehensively assesses and analyses the situation of children in relation to all articles of the CRC, or in relation to all SDGs and their corresponding targets. Rather, this report provides a platform for discussion around children and adolescents, puts forth recommendations as inputs for policy decisions, and functions as an advocacy tool providing an overview of the most critical challenges. The analysis focuses on protection issues (domestic violence, child abuse, neglect and juvenile justice), access to and quality of education and health.

Structure of this Situation Analysis

The report starts with a chapter about the overall social and economic situation of Sint Maarten, followed by three thematic chapters covering protection, education and health. Each chapter starts with the relevant articles of the CRC followed by a quantitative (to the extent possible) and qualitative description of the situation of children in relation to the topic, legislation and policies in that domain and it presents the available services. Each chapter ends with findings and recommendations. The final chapter comprises an overview of recommendations.



2.

The island context and development agenda for children

2. The island context and development agenda for children

Regional context

Across the Caribbean many children, adolescents, and families continue to endure multiple deprivations, are denied rights to reach their full potentials as citizens and are therefore unable to fully seize opportunities to make their best contribution to national development and global well-being. Rising income inequality within and between islands in the Caribbean, disparities of wealth and power, gender inequality, and discrimination based on nationality, migrant status, disability and age are barriers to pathways to sustainable development. Youth unemployment and underemployment are concerning, especially with an inadequate quality of education serving as a major drawback for a smooth transition from adolescence to tertiary education, vocational/technical streams, and the labour market. The risks of natural disaster, natural resource depletion and climate change increase levels of vulnerability that may exacerbate the challenges that children and adolescents in the Caribbean will face unless concerted action is taken.

Small Island Developing States (SIDS) are characteristic of the Caribbean region, and Sint Maarten is no exception to the set of challenges associated with this status. Small populations, diseconomies of scale, geographic remoteness from major markets, narrow resource bases and vulnerability to external micro-macro-economic fluctuations are all issues relevant to their development. For SIDS, climate change poses new jeopardies: not only does it intensify extreme weather events, but it additionally hampers incomes from the tourism sector through destruction of coral reefs (also threatening food security), ocean acidification, biodiversity loss, and rising sea levels.

Combatting these challenges serves as motivation for Sint Maarten's efforts towards closer regional integration, particularly in the areas of education, climate change, Disaster Risk Management (DRM), emergency response, and security. Sint Maarten's commitment is evidenced by its request for associate membership of the Caribbean Community (CARICOM) in March 2018, and discussions regarding membership of the Organisation of Eastern Caribbean States that commenced in 2019. Moves towards more integrated strategies are seen as essential in leveraging emerging opportunities and mitigating the risks and individual repercussions of current challenges on the political, economic, social, and cultural sectors of Sint Maarten.

Governance

The King of the Netherlands is the Head of State, and he is represented by the Governor. The Government of Sint Maarten is jointly made up of the Governor and the Council of Ministers, the latter is headed by the Prime Minister and consists of seven ministers. The Minister Plenipotentiary of Sint Maarten represents the country in the Council of Ministers of the Kingdom of the Netherlands.

The Parliament of Sint Maarten is the highest legislative body and consists of fifteen members elected for a four-year period. Aside from overseeing and appointing ministers, Parliament (together with the government) administers Sint Maarten's internal affairs, enacting and amending legislation appropriately. However, the Government of the European Netherlands is still responsible for defence, foreign affairs, and the Supreme Court. The judiciary branch on Sint Maarten consist of the Court of First Instance and the Court of Appeal.

The executive branch of government comprises seven ministries: Ministry of General Affairs; Ministry of Finance; MoJ; MECYS; VSA; Ministry of Tourism, Economic Affairs, Transport and Telecommunication (TEATT); Ministry of Public Housing, Spatial Planning, Environment and Infrastructure (VROMI).

During emergencies, a national disaster management structure, the Emergency Operations Centre is activated. This structure comprises 10 Emergency Support Functions (ESF) and is chaired by the disaster manager of the Government of Sint Maarten, who is also the commander of the fire brigade. The national disaster manager reports to the Prime Minister. All ministries play a crucial role in the coordination of the sectors. Depending on the type of disaster, intensive interaction exists with actors such as the Dutch Army, the Ministry of Interior and Kingdom Affairs of the Netherlands, Urban Search and Rescue Teams from abroad and, the Red Cross, UN agencies, and local, regional and international non-governmental organisations (NGOs). The most relevant ESF to the needs and protection of children is ESF 7, which is in charge of Evacuation, Shelters, Relief & Mass Care during disasters and crises.

International and national legal framework for children

The Kingdom of the Netherlands is a signatory party to a host of international treaties and conventions. Unless denounced, the treaties remained in force for Sint Maarten after 10-10-10. This excludes the Istanbul Convention and the Convention on the Rights of Persons with Disabilities (CRPD).

- Universal Declaration of Human Rights, signed on 10 December 1948
- International Covenant on Civil and Political Rights, ratified on 11 December 1978
- International Covenant on Economic, Social and Cultural Rights, ratified on 11 December 1978
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, ratified on 21 December 1988
- CEDAW, ratified on 23 July 1991
- CRC, ratified on 6 February 1995
- Convention against Transnational Organised Crime, ratified on 26 May 2004
- Optional Protocol to the CRC on the Involvement of Children in Armed Conflict, ratified on 24 September 2009
- Convention on the Elimination of all Forms of Racial Discrimination (1966)
- Convention on the Reduction of Statelessness (1961)
- European Convention for the Protection of Human Rights and Fundamental Freedoms (1950)
- European Social Charter (1961)

Nationally, some revision has taken place to align laws to the CRC and other treaties, thus forming a coherent base for rights-based ordinances and policies to be developed. The new Constitution of Sint Maarten came into force on 10-10-10. The Constitution explicitly mentions children and youth in two of its articles:

- “Every child has the right to obtain basic education” (Article 11.2)
- “The Government shall provide care directed to the protection of children and youth and the advancement of their education, welfare, cultural evolution and leisure” (Article 18.1)

On 1 June 2015, the new Penal Code came into effect replacing the outdated Penal Code of the Netherlands Antilles.³ The new Penal Code features some new sanctions for juvenile delinquents (ages 12-18) and provisions on the implementation of these sanctions.

Figure 3: List of international treaties applicable to Sint Maarten.

National policy environment on children’s rights

With only nine years since the constitutional change and achievement of the status of an autonomous country, Sint Maarten has a fairly well-established legal and policy domain that effectively sets out a vision for national development, economic growth and poverty reduction. It is important to mention that after 10-10-10, Sint Maarten had nine consecutive governments and seven different prime ministers. Frequent political changes are not conducive to a stable policy environment.

As a result of several conferences of the Kingdom-wide inter-country taskforce on children’s rights, Sint Maarten developed a draft action plan that was approved by the Council of Ministers. The

³ Retrieved from: <http://www.dutchcaribbeanlegalportal.com/news/crime/5325-new-penal-code-for-sint-maarten-per-1-june>

draft action plan is wide-ranging, with activities spanning from youth participation, to preventing and addressing abuse, to developing after-school programmes. The fact that several ministries were involved is a great opportunity for stronger inter-ministerial cooperation on children's rights. A draft national decree ('landsbesluit') on the establishment of a national child rights committee is awaiting approval. The committee will be tasked to execute the action plan. Several important draft policies, such as the Early Childhood Development Policy Plan, The Integrated Youth Policy Plan and the Safety Net Policy Plan are not yet approved.

The implementation of multi-sectoral policy will also benefit from an improved culture of monitoring and evaluation. In other words, methodically extracting, sharing and discussing lessons learned will improve programme efficiency and effectiveness, and assist stakeholders to continually refine implementation modalities through the mining and dissemination of good practice. Equally vital is to ensure ongoing investments in a national information system, and in strengthening capacity for the collection, analysis, cross-tabulation and utilisation of data to refine and report on programme implementation. One of the most central datasets, the Civil Registry is not reliable: it is urgent and important to clean the Civil Registry of invalid records and entries. There is also inconsistency in the way children are registered in the Civil Registry as compared to the school registers, which makes it impossible to reconcile the data.⁴

Expenditure on the social sector

The MECYS budget consistently represents a third of the total allocations to the Cabinet of

⁴ For example: in the Civil Registry the child is registered by father's surname, but by the mother's surname in the school records.



Ministers (excluding the Ministry of General Affairs). The largest portion of the MECYS budget goes towards subsidies for schools.

Table 2. Expenditures on social sectors in florins⁵

Ministry	2013 Expenses	2014 Expenses	2015 Expenses	2016 Expenses	2017 Expenses
Ministry of General Affairs	69,047,200	74,318,791	77,846,250	74,275,917	76,192,657
Ministry of Finance	41,543,641	41,263,538	42,117,760	49,384,652	54,134,920
Ministry of Justice	66,919,487	62,716,165	66,222,399	72,752,923	74,187,115
Ministry of Education, Culture, Youth & Sports	123,185,719	115,865,860	122,246,110	119,425,113	122,171,170
Ministry of Public Health, Social Development & Labour	77,869,064	55,176,157	57,598,735	52,184,937	53,366,574
Ministry of Tourism, Economic Affairs, Transport & Telecommunication	28,027,641	26,710,697	28,066,140	23,990,078	24,854,677
Ministry of Public Housing, Spatial Development, Environment & Infrastructure	34,485,181	33,492,772	34,285,206	34,380,842	35,161,975
Total	441,077,933	409,543,980	428,382,600	426,394,462	440,069,088

NB. (1 florin is USD 0.56)

The economy

Sint Maarten is a small and open island economy where tourism is the economic focal point. Due to its small size and lack of diversification, Sint Maarten is vulnerable to uncontrollable external factors and economic developments, most of all to natural disasters. To illustrate, in the aftermath of the September 2017 hurricanes, the economy contracted by 4.8 percent in 2017, and 8.1 percent in 2018, and the island continues to rebuild.⁶ The WB expected growth to rebound in 2019 and reach pre-hurricane levels by 2025.

Key developments for Sint Maarten's economy in 2018

- Estimated GDP growth for 2018: 11.4 percent
- Inflation: 3.1 percent
- Estimated unemployment rate: 9.9 percent
- Tourism revenues estimated to have decreased by 26.5 percent
- Total government revenues decreased by 9.1 percent
- Total government expenses decreased by 3.3. percent
- Cruise passenger arrivals decreased by 29 percent
- Stay-over arrivals decreased by 55.9 percent

Figure 4: Key developments for Sint Maarten's economy in 2018
Source: World Bank.

⁵ Annual budgets obtained from College Financieel Toezicht Curaçao and Sint Maarten.

⁶ TEATT. (2019).

According to the Year-end 2018 Outlook Report produced by the TEATT Ministry, Sint Maarten's public finances faced a sharp decline in tax revenue largely due to the economic contraction, despite government spending increasing to help repair public infrastructure and provide support to the affected population. Recovery and reconstruction is partly funded through the Recovery, Reconstruction and Resilience Trust Fund. It is financed by the Government of the Netherlands for up to 470 million euros (USD 553.4 million) and managed by the WB. The Government of Sint Maarten implements the activities financed by the fund in partnership with the WB.⁷

For a return to the pre-hurricanes economy, private property also requires attention. The tourism sector contributed around 45 percent of GDP and was good for 73 percent of the foreign exchange income in 2016.⁸ Therefore, restaurants, hotels and other tourism-oriented entities require finances for reconstruction, especially as many employees lost their livelihoods in the aftermath. The direness of the situation is exemplified by the 26.5 percent loss in tourism revenues in 2018. Hurricanes Irma and Maria took their toll on households as well, since many breadwinners faced the consequences of a tourism slump, and their problems were further exacerbated by price hikes in supermarkets, building materials and other hardware supplies and a lack of finances to compensate for loss and damage of property.

Labour force

Labour force participation rate in 2017 was 55 percent, slightly down from 2013 (58 percent) and 2011 (57 percent). According to the Labour Force Survey conducted in March 2017, the sectors employing the highest numbers are retail (1,913), hotels and restaurants (1,806), and public administration and defence (1,548).⁹

Prior to September 2017, unemployment rates were on the decline, dropping from 12.6 percent in 2009 to 6.2 percent in 2017. However, the hurricanes reversed this progress as unemployment climbed to 9.9 percent in 2018, with youth unemployment standing particularly high at almost 24 percent.¹⁰ The number of youth Not in Employment, Education or Training (NEET indicator) is high on Sint Maarten: 31 percent of youth aged 15-24 years on Sint Maarten are not in education or another form of training and also do not have paid work.¹¹ This makes a return to full economic vitality unlikelier, also hindering general reconstruction due to lower tax income for the government.

7 Retrieved from: <https://www.worldbank.org/en/country/sintmaarten/brief/about-sint-maarten-recovery-trust-fund>, accessed in January 2020.

8 Retrieved from: <https://www.worldbank.org/en/country/sintmaarten/overview>, accessed in January 2020.

9 STAT. (2017a).

10 Hermans, B. and Kösters, L. (2019)

11 Idem.

Poverty

According to the last census conducted in 2011, 20-25 percent of households have an income of NAf 1,000 or less per month (USD 550). The minimum hourly wage in 2015 was NAf 8.75. The results of the survey conducted in 2013 shows that 43.1 percent of the respondents indicated to be living in need, and 28.5 percent considered themselves poor.¹² Yet change was not marked in 2017: a UNDP benchmark for poverty based on the minimum wage indicated that about 27 percent of households were classified as poor and living on or below the minimum wage.

However, the government does provide some financial support to alleviate the effects of poverty. For example, financial assistance is granted to families who care for children with a physical or mental disability, and to parents needing to cover school-related expenses (e.g. uniforms). Furthermore, the National Ordinance makes financial support available for persons between 16 and 62 years who are unable to earn a livelihood due to factors beyond personal control such as unemployment. To be eligible, one must hold the Dutch nationality or permanent residency.

According to recent data, around 600 people were receiving assistance in 2018: 60 percent were seniors, 25 percent were female heads of households, and 15 percent had a disability.¹³ Although these benefits are helping people in need, questions regarding their adequacy could be raised given that the benefits amount to less than 67 percent of the minimum wage.

Demographics

Sint Maarten has an estimated official population of 40,614 inhabitants (January 2018).¹⁴ The child population (under 18 years) is 9,888, of which 2,037 are under the age of five. The adolescent group (19-24) is relatively small at 2,643, due to many leaving to study (mainly) in the Netherlands or the United States. In addition, the rising life expectancy (78 years) contributes to a growing elderly population, which adds stress to the demand for healthcare services. The number of unregistered people residing on Sint Maarten could be as high as 20 percent of the official population figure.

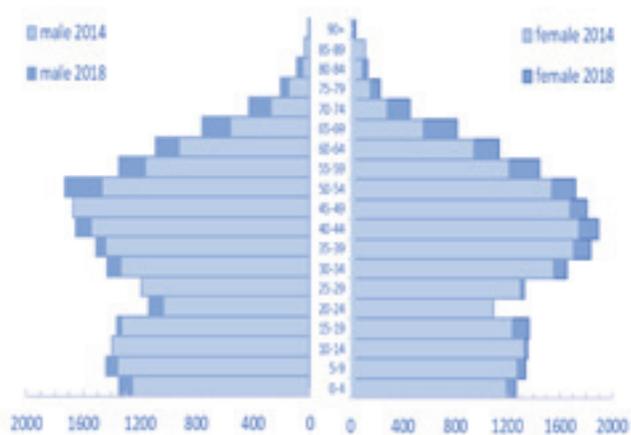


Figure 5: Population pyramid 2014-2018

Source: Factsheet Population 2018, Department of Statistics.

With regards to background, language and faith, Sint Maarten fits the sub-regional trend of heterogeneity. Consequently, a number of different cultural orientations shape social norms regarding treatment of women and children. The population is predominantly of Afro-Caribbean

¹² Obtained from STAT.

¹³ Obtained from the Social Services Department of the VSA.

¹⁴ STAT. (2018).

descent, with smaller Caucasian, Latino and Asian demographics (due to immigration). Immigration has also made Spanish, Creole, French and Papiamentu more commonplace, although the official languages in governmental, educational, and legal domains remain Dutch and English. Furthermore, Protestantism is followed by Roman Catholicism as the main religious practices (44.8 percent and 19 percent respectively), with smaller pockets of non-believers and other world religions also present. The heterogeneity speaks to the need for cultural sensitivity in designing programmes for children and their families.

Socio-cultural context

Like many of the SIDS in the Caribbean, Sint Maarten is also associated with a number of socio-cultural characterisations that can have an impact on policy reform and the realisation of children's rights. It has a small, close-knit community where transactions often take place among 'acquaintances'. Additionally, small island nations generally struggle with overextended civil servants who have too many responsibilities, and a limited pool of skilled labour to choose from, which is also the case on Sint Maarten.

Empirical research has defined violence and child abuse as regular features of many Caribbean children and women's lives.¹⁵ This too, is true of Sint Maarten: there are known cases of violence in domestic settings (generally against women and children) and educational domains (teachers towards pupils as well as between pupils). The prominence of traditional parenting (e.g. corporal punishment) can societally promote and reinforce violent practices. The influence of the socio-cultural context (cultural values, ideologies and social norms) is similar throughout the subregion when it comes to gender-role socialisation, as well as the problem of power and gender relations and parenting in Caribbean family systems. The complexity of this interaction is evident when looking into the underlying causes of child abuse and neglect and questioning why social tolerance for child abuse can be high in the Caribbean.

Another important feature of Sint Maarten's society is that 38 percent of households are female-headed households, which offers explanative power regarding children's circumstances.¹⁶ Female-headed households are more vulnerable than male-headed households for several reasons, not least due to having more dependents (children and elderly relatives).

Migration

Sint Maarten has a high immigrant population (see Table 3), and for many of its non-native inhabitants the island is an opportunity for (informal) employment in the tourism and construction sectors, or a steppingstone to potential US or Europe-bound migration. Certain specialist positions can only be filled by highly skilled foreign workers, thus necessitating migration.¹⁷ According to the available information from the Civil Registry of Sint Maarten, indications show the country has more than 104 nationalities presently that have legally settled on the island.

15 Jones, A. & Troman Jemmott, E. (2009)

16 Retrieved from: <https://www.worldbank.org/en/country/sintmaarten/overview>

17 UNDP. (2011).

However, anecdotal evidence and the Immigration Department indicated during the Situation Analysis that there are also significant and growing numbers of undocumented migrants on the island.¹⁸ Typically, undocumented migrants are young, lack formal education, and (due to their precarious status) live predominately in the shadows. They are hesitant to share their immigration status with officials thus making it more challenging for this population to receive the information and support they may need to obtain health insurance, welfare benefits, or enrol their children in school.

Undocumented children are vulnerable as they do not have equal access to public services, despite government measures to make such services available for undocumented children, such as education. Some interviewees indicated that despite this, there are practical barriers that hinder children from accessing education. Some interviewees indicated that undocumented children access services on both the French and the Dutch sides of Sint Maarten, using whichever allows them to obtain the service they require. Information provided on these matters was not consistent and requires further research.

Hurricane Irma significantly influenced immigration and emigration. The emigration in September 2017 and the months after, was much higher than in other years. At the same time in September 2017 immigration dropped to almost zero. Immigration went up during the last three months of the year 2017 but it remained at a much lower level than before.¹⁹

Often called “the melting pot” of the Caribbean, cultural diversity of Sint Maarten is often the topic of lively discussions. There are often two opposing views on preservation of culture in Sint Maarten and these views can be a source of tension. One school of thought holds the view that the cultural identity of the island should be described based on ‘their identity’, calling themselves ‘Native Sint Maarteners’. Another point of view presents the island as multi-cultural and prefers culture preservation to take this approach. These two views are popular discussions on social media, within communities and echoed by the body of those interviewed for the Situation Analysis.

The proclamation of a Ministerial Decree in 2013 in recognition of the ‘Decade of Revitalising Natural and Cultural Heritage’ pushed the issue of heritage onto the national agenda. It highlighted the principles of equal dignity and mutual respect in a country with a host of national and ethnic identities. In this socially heterogeneous country, the government emphasises the creation of a national identity and the preservation of culture, a sentiment fortified by the recency of autonomy, diversity in demographics, and Sint Maarten’s subscription to UNESCO’s ‘International Decade for People of African Descent’

Nationality	%
Netherlands	63.7
Haiti	6.7
Dominican Republic	5.7
Jamaica	5.4
Guyana	3.8
Dominica	2.9
India	1.7
Saint-Martin (French)	1.5
USA	0.9
St. Lucia	0.8
Other	6.7

Table 3: Top nationalities in Sint Maarten
Source: Press release Department of Statistics, Sint Maarten 2012.

¹⁸ Undocumented migrants can be described as “individuals who are not citizens of the country, do not have current permanent resident visas, and have not been granted admission under rules for longer-term residence and work permits”. Nienhuser, H.K. (2013).

¹⁹ STAT. (2018).

(2015-2024). Issues of identity and culture are perceived to be central in maintaining social cohesion, as well as being topics which fuel discussion. It is against this backdrop that the discussion surrounding undocumented migrants has emerged as an important and urgent issue.

What the interviewees said:

“they remain in the shadows because of cost for regularizing situation, process is complicated, they are unemployed, want to avoid paying taxes”

“it’s easy to find a job if you are undocumented”

“I think we should see why they come. It’s easy to get a job. They think they make money, get papers and move on”

“it’s such a normal thing to be undocumented. The attitude is that we like it that way too.”

“we tolerate the situation because its cheap labour and they do the jobs no local wants to do.”

“the poorest are mostly undocumented. I think it’s a pride issue”

“undocumented land on island, get a job the next day”

About going to register in the Civil Registry:

“they make it difficult for outsiders”

“they hear your language, see your ID and know immediately ... outsider”

“process is long”

“fear of deportation”

“company you work for does not want you to have papers”

“employer doesn’t want”

Conclusions and recommendations

This chapter describes the context of Sint Maarten in terms of demographics, economy, socio-cultural features, poverty, governance, legal framework and the policy environment. Several recommendations emanate from this chapter. Firstly, there is an important opportunity in the fact that there is an approved action plan on children’s rights that was developed under the Kingdom-wide inter-country taskforce. **It is recommended to ensure the approval of the draft national decree (‘landsbesluit’) to establish a national child rights committee to execute the action plan and monitor progress on the rights of children in the country.**

The implementation of multi-sectoral policy on children’s rights will also benefit from an improved culture of monitoring and evaluation. In other words, methodically extracting, sharing and discussing lessons learned, will improve programme efficiency and effectiveness, and assist stakeholders to continually refine implementation modalities through the mining and dissemination of good practice. It is also strongly **recommended to further research the situation of undocumented children and the extent to which they have access to public services** on both the Dutch and French parts of the island.



GOD'S BAPTIST CH...



3.

The Protective Environment:
Every child is protected from
violence, abuse, exploitation
and neglect

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What the CRC states about protection:

Article 19: States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child (...)

Article 34: States Parties undertake to protect the child from all forms of sexual exploitation and sexual abuse (...)

SDG 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children

All children have the right to a caring, capable, and committed network of parents, peers, communities and practitioners to help them survive. As outlined in the CRC, all nations are obligated to protect their children's right to a life free from conditions that violate their rights, devalue them, and draw them into adult roles prematurely. Especially vulnerable, are children deprived of parental care; victims of sexual, physical, emotional, domestic abuse and neglect; in conflict/contact with the law; living with one or more disabilities; or exploited for commercial purposes.

Children in need of care and protection on Sint Maarten

The Government of Sint Maarten strives to provide equal opportunities for all children and adolescents in order to achieve the best possible outcomes for every child. Though most children and adolescents in Sint Maarten are doing well, many face obstacles and social barriers such as: exposure to violence, substance abuse, neglect or poverty; undocumented residency status; unemployment; special needs; and being in contact or conflict with the law.²⁰ These conditions increase their vulnerability and require specialised services and additional support. Protection for undocumented children and families is even more challenging given the fact that they are given their residency status outside of the legal system. This status does not afford them the opportunity to benefit from many social services including access to health insurance. They cannot have health insurance policies. Though some doctors will not treat them, the Foundation Judicial Institutes Sint Maarten (SJIS) does have one doctor who will screen and treat all children in protective custody. There are also challenges in the educational system (access, support services overstretched) and limited opportunities once they turn 18 and age out of the system.²¹

Current global research on child protection finds that violence is a fluid and shifting phenomenon which transcends a child's life. Identifying and addressing unequal power dynamics - wherever they may occur - is of central importance to effective violence prevention. Research also shows that social tolerance and behaviours surrounding violence are shaped at an early age and transferred intergenerationally, demonstrating how these attitudes are societally reproduced. Data across countries also show how violence is intimately connected to how relationships are structured and defined by power dynamics within and among families, peers and communities.²² When a child is witness to domestic violence, it is also considered child abuse. If a child lives in a home where there is domestic abuse, then they are likely to be at risk of other types of abuse, such as physical, sexual or emotional abuse, or neglect.

What the interviewees said about dysfunctional homes:

"children can't vote but they take care of adults [parents]"

"when we book service for parental discussion, no one shows"

"truancy meetings. No one shows."

"the poor still spend money on cigarettes and casinos"

"most young people here are BET graduates" (Black Entertainment Television)

"too many lazy, lousy women -Kardashian groupies, raising children"

"something is wrong when you think R. Kelly is a hero"

Sint Maarten has a small scale and close-knit society, where 'everybody knows everybody'. This has positive and negative consequences when it comes to child protection. On the positive side, people know each other and each other's families, they know where children belong, so there is a

20 Department of Youth, MECYS. (2017). Integrated Youth Policy Framework (draft).

21 UNICEF Netherlands. (2017b).

22 UNICEF. (2016).

certain degree of looking after each other. However, interviewees said this social fabric has started to erode over the past decades. An important connecting factor in the communities are churches, that know their communities and provide various forms of support to individuals and families, mostly informal. The negative side of a small and close-knit society when it comes to protection, is that situations of violence and abuse are often kept quiet. Victims or witnesses hesitate to step forward and are not sure who to confide in, since 'everybody knows everybody'.

What the interviewees said about domestic violence:

Sixty-eight percent of interviewees (administrators, youth and parents) were unable to name the lead agency mandated to handle child abuse or domestic violence cases.

Over half were unclear on who to call regarding child abuse cases.

Over half interviewees agreed that the police "do not take domestic violence seriously".

Three quarters of those interviewed noted that cultural acceptance of domestic violence runs deep and/or is intergenerational.

All but one young persons interviewed said they either know someone who is a victim of domestic violence or they grew up in a household where domestic violence was a common occurrence.

Domestic violence and (sexual) abuse

Domestic violence and (sexual) abuse pose significant threats to women and children on Sint Maarten, as is the case in many countries. The indicators established in the 2013 Youth Knowledge, Attitudes, Beliefs, and Practices Survey show that 13 percent of children and adolescents face serious mental health challenges, suicide ideation, drug use, and violence in the home.²³

Although more victims are coming forward to formally report domestic violence, the numbers remain very low. There is a reluctance to report domestic violence due to threats from the perpetrator, or for fear of losing their financial contribution to the household, amongst other factors. Additionally, the taboo surrounding the subject discourages people from reporting to the competent authorities as well as a lack of trust in the formal system and a fear of breach of confidentiality which is linked to the small size and close-knit features of the society.

Regrettably, no comprehensive data was available on cases of domestic violence, although many

respondents indicated that it is a persistent problem showing increasingly serious forms. After Hurricane Irma, there was a perceived spike in violence which was possibly exacerbated by increased poverty linked to higher unemployment rates, and the stressful living conditions in (partly) unrepaired houses and uncertain future. Some professionals mentioned that the large number of female-headed households were left disproportionately vulnerable to neglect and violence post-Irma, which is in line with academic literature about child abuse in the aftermath of humanitarian crises. Nevertheless, it is problematic that neither the extent of the problem nor its relationship with poverty can be underpinned with data. Children living with disabilities and those in undocumented migrant communities experience added vulnerabilities specific to their status. For example, undocumented migrants may not report abuse cases for fear of deportation, even

23 VSA & PAHO/WHO. (2013).

though these children and women have a right to the same assistance as those with citizenship documents. The language barrier is perhaps another deterrent for the undocumented. Children with speech and other disabilities are further challenged.

Responses from interviews, focus groups, and consultation workshops for the 2019 Situation Analysis indicate that the issue is serious. Over 85 percent of interviewees mentioned violence as a major issue facing children, adolescents and women in their community or household. Even though over 50 percent of the adult interviewees believe child sexual abuse to be a “common” occurrence in their communities and families, it remains a taboo topic for discussion.

According to the CoG, the total number of child neglect and abuse cases reported in 2014 was 59 (14 cases of neglect), 2015 was 91 (61 cases of neglect), in 2016 it was 100 (67 cases of neglect), 49 in 2017 and 158 (119 cases of neglect) in 2018.²⁴ Disaggregated data categories for these years were not consistently available, making trend analysis impossible. The notable gradual increase of the number of cases of neglect from 14 in 2014 to 119 in 2018 is likely a reflection of increased reporting or can be related to the impact of the hurricanes.

What the interviewees said about abuse:

Over 60 percent of young people interviewed said they knew someone who had been sexually abused.

Many said they did not report it because they “were afraid”. Two said they could not report it for fear of “losing the rent money”.

“The community has a long memory when it comes to child abuse. No one wants their child to grow up being remembered as the ‘one who was abused’.”

Table 4. Cases of child neglect and abuse reported to the CoG in 2018

Neglect	Number of cases	Abuse	Number of cases
Physical	14	Sexual	2
Health/Mental	2	Physical	1
Supervisory	41	Emotional	5
Educational	15	Witnessing Abuse	11
Emotional	20	Family Conflict	10
Environmental	27	Abandonment	10
Total neglect	119	Total abuse	39

As of 2018, the precision of neglect and abuse categories indicates improvements in data collection. Prior to 2018, no data was available on the number of children affected in cases of domestic violence. For the first time, “family conflict” and “witnessing abuse” appeared as categories of abuse, although the victim’s relationship to the perpetrator remains unclear in data. Surveys conducted in the subregion have found that the prevalence of child abuse and domestic violence is severely underestimated in police statistics because cases are highly underreported.

24 Data provided by the CoG during the Situation Analysis process in 2019.

Violence in and around schools

There are frequent media articles and social media posts about violence in and around schools, but there is no comprehensive data to substantiate the magnitude of the issue. A 2015 study collected data from six government-subsidised secondary schools on the number of incidents over a period of three months.²⁵ Five of these schools are located in close proximity to one another. Assault was the most frequently reported type of violence, mostly occurring outside school premises, such as on the way to or from school, and around the school during breaks.

What the interviewees said on violence in and around schools:

“school fighting is not new but the intensity of girls fighting girls seems a little more these days”

“fighting in schools is a ticking time bomb”

“crazy fights with girls using brass knuckles”

During the three-month research period, secondary schools reported 85 incidents, with 116 students involved. Threat and theft followed assault as the most reported incidents. Schools also confirmed two cases of attempted sexual assault involving minors. Generally, the school takes disciplinary measures, although the schools involved the police in three instances. The most common penalty is a suspension and parents are informed of the incident in almost all cases. Most suspects were 14 or 15 years of age, and 53 percent of suspects were female.²⁶

What the interviewees said on violence in and around schools:

“school fighting is not new but the intensity of girls fighting girls seems a little more these days”

“fighting in schools is a ticking time bomb”

“crazy fights with girls using brass knuckles”

Corporal punishment

Corporal punishment (physical affronts) is a long-standing and, in most Caribbean countries, still legal method of disciplining children. It is legally prohibited on Sint Maarten. However, interviewees to the Situation Analysis said that the use of violent, threatening and/or intimidating language when disciplining children can still be observed in schools and in the home.²⁷

Despite long-standing legislation prohibiting corporal punishment, some older parents continue to believe that spanking is an acceptable form of discipline, although this belief is less widespread amongst younger parents. Older respondents were subject to “getting whippings” in the home and at school, and lauded it as the reason they “came out ok”, whereas younger parents now discipline their children by taking away privileges, such as access to social media. All single parents interviewed do not “lick or spank” their children.

25 Merkx, E. & Buurman, L. (2015).

26 Idem.

27 Source: interviews and focus group discussions for the Situation Analysis, 2019.

There is an explorative study on the child-rearing styles of parents and the 'village' in Sint Maarten published in August of 2018.²⁸ The study links the tradition of overall authoritarian and permissive parenting style (lower education levels result in parents who are more authoritarian) to absentee fathers and single mothers with low social status working multiple jobs in order to care for their children, thereby taking away time for listening to their concerns and helping with schoolwork.²⁹ Another factor is that some parents are not open and do not easily discuss their feelings and problems. This points to a Caribbean tradition of finding difficulty comforting and showing love and affection, especially in public. Children living in this environment tend to manifest anger when confronted with a structured school setting which clashes with the lack of structure in the home. Teachers and coaches offer structure and expect children to conform to rules without rebuttal. They transfer certain ethics, morals and values that parents do not always teach to their children.

One case recounts a mother's experience of using corporal punishment against her teenage daughter: "I slapped her once, and she called the police and we had to go to family counselling. So never again". Many other interviewees under 30 years of age reported never having used corporal punishment. Perhaps this indicates shifting attitudes and behaviours resulting from legislative reforms and their reinforcement through positive parenting initiatives and awareness-raising campaigns. Additionally, the Student Support Services Division (SSSD) of MECYS trains school care teams in alternative disciplinary approaches, and then uses peer monitoring to oversee their application.

28 Rikkert, H. (2018).

29 These trends are also well documented in VSA & PAHO/WHO. (2013).



Children in contact with the law



What the CRC states about children in contact with the law:

Children who (allegedly) break the law should not be treated cruelly or in an inhumane or degrading way (art. 37). On the contrary, they must be treated fairly and, in a manner specific to a child (art. 40 CRC). They are entitled to a special pedagogical approach. They must not be put in a prison or detention with adults and have the right to keep contact with their family (art. 37). Neither death nor life imprisonment without the possibility of release can be imposed for offences committed by adolescents under the age of eighteen (art. 37). Children who are accused of breaking the law should receive legal or other appropriate assistance and custodial sentences for children can only be used for the most serious offences and should be enforced in an institution for children. (Article 40)

Access to justice is an inalienable right of all children; this includes access to quick, effective and fair measures to protect their rights, prevent or resolve disputes, and control abuse of power through transparent, affordable and accountable processes. Children in contact with the justice system should encounter specialised, age-appropriate, speedy and diligent due process adapted to their needs, rights, and best interests.

Table 5. Juvenile arrests in 2018

The number of juvenile arrests in 2018 totalled 76 cases, all male.³⁰ See Table 5 for the various categories of offences committed. Until 2014, there was no facility for juvenile delinquents. Therefore, a very important achievement was the establishment of a youth care and rehabilitation centre in Sint Maarten on 20 December 2014: the Miss Lalie Centre. This closed facility offered 20 places for boys aged 12-18 years placed under both criminal and civil title. The closure of the Miss Lalie Centre in 2017 after Hurricane Irma created a major bottleneck

Reason	%
Burglary	12
Car theft	13
Assault	12
Theft	24
Vandalism	18
Hit-and-run	12
Fraud	3
Robbery	13

Source: Prosecutor’s Office, data provided during a Situation Analysis interview in 2019.

³⁰ Source: Prosecutor’s Office, data provided during a Situation Analysis interview in 2019.

as there was no other juvenile facility on the island. Residents present at that time were placed in families for temporary care, and then carefully monitored. The Miss Lalie Centre reopened in October 2019. During the time when the centre was closed, juvenile delinquents were released, regardless of the severity of the crime committed.³¹ There is no facility for girls.

Table 6. Overview of children placed in foster care (2011-2014)

Year	Children separated from parents	Children placed in residential homes	Children placed with foster families
2011	30	28	2
2012	37	34	3
2013	42	42	0
2014	62	57	5

Residential care and foster care

Should a child’s environment become dysfunctional and dangerous, and their removal from the home becomes necessary, they are admitted to residential care or foster families. Both of these options are available in Sint Maarten.

There were 123 children in protective care as per November 2017, in foster families, foster group homes and the residential facility Ujima Foundation.³² In 2017, the CoG processed 116 children (40 girls and 76 boys) from 64 families through the system, of these 13 children returned to their families. In 2018, the CoG processed 79 children (29 girls and 50 boys) from 45 families, of these 7 children went to foster families. They received 8 children from undocumented migrant families during 2018 (see Table 6 for 2011-2014 data).

What the interviewees said:

“children are in foster care on the French side and we know their parents are on the Dutch side.”

“instead of removing children, the government should invest in psychosocial workers who can go into homes and work with parents and children on all the issues that are the cause of poor family functioning.”

“he was passed around on probation and foster care. But he didn’t feel they were helping him because he was an outsider. Then he saw that others were being helped.”

31 Voortgangscommissie Sint Maarten. (2019).

32 UNICEF Netherlands. (2017a).

Adoption

Adoption, both national and intercountry, is an option for children without primary caregivers, provided that it is conducted in accordance with the pertinent laws and regulations and within the effective children welfare and protection system (CRC Articles 20 and 21).

The number of children adopted in 2011:5; 2012:2; 2013:3; 2014:2; 2015:3; 2016:2; 2017:10; 2018:5.³³ The CoG primarily handles persons adopting from neighbouring countries.

Sint Maarten is not yet party to the *The Hague Adoption Convention*.

Child protection in emergencies

Hurricanes Irma and Maria devastated the island in September 2017, displacing 5,000 people. Fifteen emergency shelters temporarily housed a total of 219 people (all but one shelter was closed by early March 2018). The post-Irma assessment on child protection found that in the immediate aftermath of the hurricanes, there had been little focus on protection issues outside of emergency shelter and food distribution. There were also some shortcomings within the crisis management team, with no dedicated support function for child protection, education, sexual and gender-based violence, and mental health and psychosocial support (MHPSS).³⁴ The gathering and sharing of accurate data were a challenge for all actors.

Directly before and immediately after the hurricanes, there were widespread voluntary evacuations to the other five Dutch Caribbean islands (and beyond). On the one hand, the family ties across the different islands were very valuable in keeping children safe during the disaster, which is a great asset. On the other hand, there are also protection concerns as there were limited procedures in place to register children, assess the adults travelling with them, and collect contact information from Sint Maarten or their final destination.

Following the hurricanes, many persons participated in looting, which deeply affected the psyche of children and adolescents witnessing it. The seven arrested youths were ordered to complete community service by the Youth Probation Office. Perhaps the looting can be explained by the incremental neglect linked to a lack of supervised, positive activities available to children and young people outside of school hours after the hurricanes.³⁵ There is a perception that the lawlessness and violence stemmed from gross insecurity about the availability of basic necessities such as food and water to be provided by the government in the days after the hurricanes, as well as to a lack of connectedness to or ownership of community resources.

Perceptions of interviewees on Adoption:

"The adoption process is not clear."

"In a small society, it can be difficult to maintain confidentiality."

"Families don't like to 'give up' rights to children."

"Fathers insist on 'keeping the child in name even though they don't pay maintenance and they don't spend time with them."

³³ Information obtained from the CoG.

³⁴ UNICEF Netherlands. (2017a).

³⁵ Idem.

Legal framework and policies

Domestic violence and abuse

The Constitution of Sint Maarten contains Article 3: “no person shall be subjected to torture or to cruel, inhumane or degrading treatment or punishment,” which can be applied to child abuse. Both the Civil Code and the Penal Code have provisions related to abuse.

The Civil Code of Sint Maarten gives the CoG the authority to act on behalf of a minor with Sint Maarten as their residency, last residency or their actual abode (Article 1:239). The Civil Code was adapted on the 9th of January 2014, with the inclusion of Article 1:243, which made the CoG becoming the official Central Registration Centre for child abuse.

The following is determined by law: (i) the CoG has the responsibility to register all cases of (suspected) child abuse and to examine, report and advise in cases where there is suspicion of child abuse (Article 1:243a); (ii) that the informants’ identity should not be disclosed, specifically when the informant has a professional relationship with the (family of the) minor and the disclosing of the identity can have a negative consequence (Article 1:243b.); (iii) that the person who took an oath of secrecy can report cases of abuse without being in breach (Article 1:243c); (iv) that a reporting code for professionals and entities that are working with minors is needed, and can be made mandatory by national decree. The code needs to include reporting guidelines and further requirements can be proposed by the MoJ (Article 1:243d).

Article 1:247 of the Civil Code on parental authority states that parents have the right and duty to care for and raise their child. The parents are responsible for the physical and mental welfare and safety of the child, as well as stimulating the development of the child’s personality. Physical or mental violence should not be used, nor any other degrading treatment. Parental authority includes the duty to help develop a bond between the child and the other parent.

The Civil Code also makes provisions for protective intervention measures to protect a minor (for a maximum period of 12 months) in the event that parents, in matters concerning the care and upbringing, choose their own interest over the best interest of their child (Article 1:250). Article 1:254 allows the judge to rule whether the moral or mental development and health of a minor is seriously endangered. These provisional measures can be revoked or changed.

The 2015 Penal Code specifies acts that are considered as child abuse:

- The carrying or disseminating of images of children, of sexual nature, on electronic storage devices. (Article 2:195-196)
- All acts of a sexual nature between a minor and an adult, (Article 2:199-200). The legal age of consent is 16 years (Article 2:200). This means that a minor of 16 years old can have consensual sexual relations with an adult, without this being punishable. Nonetheless, restrictions are applicable. The act is punishable if the minor has been coerced by the promising of gifts or money to actively or passively be engaged in or witness activities of a sexual nature. (Article 2:203, 2:206)
- Sexual relations with persons with whom the minor (until 18 years) has a relationship of dependence (e.g. a parent, a stepparent, a teacher, etc. Article 2:208, 2:209)
- Willingly witnessing sexual acts with a minor. (Article 2:205)
- Grooming, befriending and establishing an emotional connection with a child, to lower the child's inhibitions for child sexual abuse. (Article 2:207)
- Kidnapping. (Article 2:246)
- Harmful behaviour that results in the death of a newly born or unborn child. (Article 2:264-265, 2:270-271)
- Physical abuse, and other behaviours that cause harm to a child. (Article 2:273, 2:275-276)
- Causing a child to be drunk (15 years or younger). (Article 2:213b)
- Child labour. (2:214)
- Child neglect. (Article 2:216)
- Child abandonment. (Article 2:217- 2:220)
- Severe physical injury caused due to neglect. (Article 2:218)
- Refusal of or failure to pay child alimony. (Article 2:221-222)³⁶

At policy level, there are important draft policies that need to be finalised, adopted and implemented:

- In 2015, the Action Plan Child Abuse was developed, which provides an overview of legislation, policies, protocols and practical strategies. It was updated in 2019.
- In 2018, the 'Policy for Preventing Domestic Violence, Child Abuse, Forced Prostitution, Trafficking in Persons and Gender-based Violence in Sint Maarten' was drafted.³⁷ It is a comprehensive policy that has been initiated by the Ministry of VSA in collaboration with the MoJ; particularly the Prosecutor's Office, the police, the CoG, and the Department of Family Guardianship. The important objective of the policy is to regulate the legal and social procedural actions to prevent, treat and punish each type of violence observed in this policy.

³⁶ The paragraphs about the legal framework are copied from Department of Youth, MECYS. (2019).

³⁷ Government of Sint Maarten. (2018a).

- Another important draft policy is the Integrated Youth Policy Plan 2020-2025. It has two policy goals that pertain to protection:³⁸
 - Goal 2 of the policy: All youth grow up in safe and stable living environments that are conducive to their overall well-being and development
 - Goal 5 of the policy: Ensure that youth that come into conflict with the law and victims of crimes are properly protected, guided, counselled and rehabilitated.

There is currently no comprehensive policy for reporting child abuse, which contributes to the lack of responsiveness in certain cases. However, a reporting protocol was finalised in 2015 and is grounded in the CRC's principles and articles. It establishes six necessary basic steps for detecting and intervening in cases of child abuse and mistreatment. Successful detection, prevention and action processes will rely on efficient and effective intra- and inter-ministerial collaboration. Subsequently, a national decree containing general measures is needed to provide directives in accordance with reporting codes for professionals working with children (Civil Code art 243).

A 2019 analysis conducted by the Augeo Foundation recommends adopting a bottom-up approach, by jointly developing and equipping professionals with the tools to ensure cases are handled well, with strengthened services, and practical ways of working.³⁹

This must come prior to establishing reporting codes. Equally important are the social reintegration of victims, and preventative care for families, beyond parenting classes. Several islands in the subregion have established support groups in schools and local communities for child victims of violence and abuse.

The government's long-term commitment to end violence, abuse and domestic violence is enshrined in the Governing Programme (2018-2020) developed after Irma: 'Building a Sustainable Sint Maarten', with the most salient priority action points regarding protection outlined below:⁴⁰

- Mitigate youth delinquency and school dropout (safety and security)
- Assess social welfare benefits (eradication of poverty and inequality)
- Implement programme to assist with the repair of damaged roofs and houses for the vulnerable (short-term hurricane disaster preparedness)
- Assess and address the health, education and immigration needs of the undocumented residents (eradication of poverty and inequality)
- Expand after-school programmes (eradication of poverty and inequality)
- Repair and upgrade the Miss Lalie Centre (safety and security)
- Review and strengthen Department of Statistics

38 Department of Youth, MECYS. (2017).

39 Augeo Foundation. (2019).

40 Sint Maarten United Christian Democratic Coalition. (2018).



Despite progress, the data needed to assess and monitor the situation remain inadequate. Data collection, collation, analysis and dissemination on child abuse, domestic violence and other critical protection areas are weak. The generation of high quality, child-focused data is essential in creating national attention for and prioritisation of children's rights. Planning, decision-making, funding and coordination for child protection can only have a more powerful impact if evidence is grounded in quality data and analysis.

Achieving this progress must start with encouraging departments with specific mandates for child protection, as well as those without, to contribute to and use evidence. The need for data on domestic violence was evident in several recommendations emanating from the concluding observations on the sixth periodic report of the Netherlands to the Committee on Economic, Social and Cultural Rights. It requested the submission of "up-to-date disaggregated data in its next periodic report, with information from all the constituent parts of the State party on the number and nature of reported cases of domestic violence, on convictions and sanctions imposed on perpetrators and on any assistance and rehabilitation measures provided to victims, in accordance with the Committee's previous recommendation"⁴¹

A major barrier to data collection, collation and analysis would be removed by establishing common definitions among all stakeholders for the different categories of abuse and domestic violence. Recognition of all iterations of abuse is vital, together with acknowledging that violence can be gender-blind. For many interviewees, the link between domestic violence and child abuse is blurred unless the child is present or injured. The Penal Code and the draft Policy for Preventing

41 Committee on Economic, Social and Cultural Rights. (2017).

Domestic Violence, Child Abuse, Forced Prostitution, Trafficking in Persons and Gender-based Violence in Sint Maarten contain definitions.

Disaggregated data should routinely feed into coordination mechanisms and strategic discussions among frontline workers. At the same time, increased efforts are needed to inform the general audience and professionals about how and where to report violence, abuse and neglect. Clear ways of working should be in place within the formal system to ensure confidentiality and ensure that the individual or family receives the required assistance. This in turn will encourage more people to seek assistance and will generate more comprehensive data on the actual protection situation.

Corporal punishment

With the passing of the National Ordinance on Parental Authority in 2011 and the amending of the Civil Code, Sint Maarten is one of only four countries in the Caribbean (together with Aruba, Curaçao, and Trinidad and Tobago) that has completely outlawed all forms of physical punishment against children under penal law.⁴²

Children in contact with the law

National legislation and policies articulate bold targets aligned with the SDGs and strategic regional and global visions that aim to improve the lives of children in the areas of social protection, education, and health. Compared to the subregion, these efforts have been progressive because they, in some cases, offer greater or optimal redress. Law reforms emerging since 10-10-10 have constituted important contributions to the legislative framework of child protection. The Constitution of Sint Maarten contains several articles related to minors and juvenile justice.

⁴² See the National Ordinance on Joint Custody, 2013, which amends Article 247 of the Civil Code.



Other important legislation is the new Penal Code, passed in June 2015. With this, juvenile criminal law was completely revised and became regulated separately.

On Sint Maarten, juvenile detention can be administered to 12-18 year-olds for a maximum of 24 months, or up to four years in serious cases. Juvenile delinquents aged 16 and 17 years may also be sentenced according to adult criminal law dependent on the nature and severity of the crime, their personality, and the circumstances under which it was committed. The new Penal Code also opens the possibility for a 'police transaction' (HALT measure) for a juvenile to have his case dismissed.⁴³ This system has not yet been introduced; it would require a ministerial decree that stipulates which offences fall under HALT and the system would have to be designed, built, and implemented.

An institutional placement order (PIJ-measure) for psychiatric treatment can be administered by the Sint Maarten Court of First Instance as long as the crime warrants precautionary detention and the PIJ-measure is in the best interest of the minor's future development. Formally, juvenile delinquents who are sentenced to a PIJ-measure could be admitted to the Miss Lalie Centre, but practically the necessary treatment is not available there. Consequently, treatment would have to take place in the Netherlands.

While the legal reforms represent a major step towards aligning the legal framework with international treaties, work is needed to fully operationalise the Penal Code, including the training of professionals and upgrading the required facilities.

Residential care and foster care

Specialised care facilities receive difficult cases, whilst juvenile delinquents were previously transferred to Curaçao or the European Netherlands. The latter has not occurred in years, which is problematic considering Sint Maarten lacks the appropriate facilities to place such cases.

The foster care programme provides temporary out-of-home care following parental inability, neglect, abuse, abandonment, or exploitation. The CoG has the legal mandate to place abused children in residential care/foster homes, whilst a CoG process allows parents to voluntarily place their child (usually) within family circles. All out-of-home placements are intended as temporary until the biological parents/families are able to care for them again.

The foster home system currently does not meet the United Nations Guidelines for the Alternative Care of Children.⁴⁴ Policies and regulations are not yet in place for foster homes or group homes, and in the post-emergency phase after Irma it was clear that this lack of a regulatory framework can increase protection risks, as there were no regulations on the conditions necessary for residential care, or the establishment of new homes. It could pose protection risks if groups would want to

⁴³ HALT is a restorative justice programme targeted at juvenile first-time offenders, aged between 12 and 18, who committed a non-violent crime. HALT is incorporated in the Dutch juvenile justice system.

⁴⁴ UN. (2010).

establish foster/care homes without legal and regulatory frameworks managing it. The lack of an integrated child protection information management system also contributes to challenges in oversight.⁴⁵

Child protection in emergencies

Preservation of the family unity is one of the highest-priority protection concerns during emergencies. Reflecting on the evacuations during Irma, there was a meeting of the directors of the Courts of Guardianship in the Kingdom in October 2018. From that meeting came the draft of an inter-island protocol, which is ready to be signed. It covers legal oversight for evacuation, arrival and return of unaccompanied children, and other children needing protective services.

At that same meeting, there was an attempt to draft a similar document for the relevant ESF for social services during emergencies on each island, such as ESF 7 for Sint Maarten. This document outlines the responsibilities of each actor to identify and provide services to vulnerable evacuated children and families, as well as to share information about caseloads. Due to the different emergency management structures of each of the islands, and to the financial implications of caring for residents from other islands, the draft has not progressed.

In 2018, the CoG drafted its disaster preparedness and response plan for Sint Maarten, including inter-institutional cooperation agreements. These were formalised in Memorandums of Understanding (MoU) in December 2018, between the CoG and the SJIS, ESF 7, and the Court of First Instance. The MoU between the CoG and the police has not yet been developed, but is required. The focus is on ensuring the safety of their caseload, keeping the office running as consistently as possible, and taking care of the staff's well-being. The CoG also drafted its 2018-2020 Action Plan, which mainstreams disaster preparedness. Two "Child protection in emergencies" training workshops were organised (May 2018 and a follow-up in May 2019). Significant effort was made to mobilise the range of actors responsible for protecting children in a disaster (including immigration, police, teachers, social services and NGOs). ESF 7 drafted a sub-plan for shelter, evacuation, relief, and mass care, which provides more detail on its responsibilities to children and other vulnerable parts of the population.

45 UNICEF Netherlands. (2017a).

Services

The Government of Sint Maarten has pursued major changes in the institutional framework for child protection after the dismantling of the Netherlands Antilles. The Department of Youth has undergone several stages of development from the Dutch Antillean structure with insular responsibilities to the present where it is a policy department within the Ministry of Education, Culture Youth and Sport. As the advocate of the Convention on the Rights of the Child (CRC), the Department of Youth facilitates and supports MECYS, the other Ministries and executive bodies in the successful achievement of the youth related goals, in accordance with the CRC. Below section describes each Ministry's involvement:

Ministry of General Affairs:

- The Department of Foreign Relations coordinates ministries' contributions to and drafting of national reports on the several human rights conventions ratified by Sint Maarten, and is responsible for the appropriate representation of the country to the various committees.

Ministry of Justice:

Various departments within the ministry have a responsibility for child protection and justice for children:

- The Prosecutor's Office that is also responsible for juvenile cases and related protection matters.
- The Juvenile and Vice Department of the police that deals with youth crime and sex offences.
- The Miss Lalie Youth Rehabilitation Centre: a closed correctional facility for youth offenders.
- The CoG houses the Youth Probation Office as well as the central reporting agency for child abuse and conducts independent research, advises on legal proceedings and may propose measures or sanctions, in order to ensure the well-being of the child.
- The SJIS is subsidised by and accountable to the MoJ for certain tasks delegated by the ministry. Key tasks: probation services, rehabilitation, family guardianship and foster families' unit.

Ministry of Public Health, Social Development and Labour:

- Responsible for overall health programmes such as the Baby Clinic and vaccination programmes; oversight role on child health work through the Department of Public Health.

- The Department of Social Services ensures the support to vulnerable groups, such as families in need, with issues such as addiction.
- Unemployed youths are assisted by the Department of Labour.
- The Inspection Department ensures that all establishments adhere to the health and safety guidelines.
- The Department of Community Development, Family and Humanitarian Affairs focuses on the holistic development and continuous empowerment of people in the society and in particular the most vulnerable groups. They also house the “Women’s Desk”.

Ministry of Education, Culture, Youth and Sport:

- The Education Department is responsible for the preparation of policy, laws and regulation regarding education as well as monitoring, controlling, and evaluating if the departments, divisions and executing organisations are implementing the policies. This department considers the effectiveness and efficiency of the policies too.
- The Department of Youth facilitates many processes related to raising awareness for children’s rights and empowerment. The department has the responsibility for policy development and serves as advocate for the development of youth laws, policies and procedures. This is development for the areas of Children and Youth from 0 - 24 years.
- Truancy Officers of the Inspectorate check on students’ school attendance and can take measures when students break the Compulsory Education Law.
- Both the Departments of Culture and Sports emphasise awareness and promote the participation of youth in the various sports and cultural activities.
- Other divisions are responsible for portfolios on public education, student guidance, exams, student grants, educational innovations.

Ministry of Tourism, Economic Affairs, Transport and Telecommunication:

- The Department of Statistics under this ministry is responsible for gathering relevant statistical information in the areas of the economic, demographic, social, and environmental status of the Sint Maarten community. Vital information related to children and youth, such as demographics, education, labour etc. is gathered periodically through censuses, inter-censual surveys and administrative sources. The Department of Statistics will also play a key role in establishing the Youth Monitor.

Ministry of Public Housing, Spatial Planning, Environment and Infrastructure:

- The Inspection Department ensures safe environments for children and the youth. It inspects and visits sports facilities, schools and day care centres.

In addition to the government's direct management of these services and processes, the government funds NGOs to deliver essential services important to the realisation of child and adolescent rights. The UNICEF Netherlands post-Irma assessment of the child protection sector revealed some systemic challenges: a shortage of staff and high caseloads; a lack of specialised/therapeutic inpatient and outpatient (including therapeutic family-based support) services for children and youth on the island, particularly older adolescent girls and boys; mental health services are already stretched on the island, and are more catered to individual psychiatric/psychological counselling and not family-based care, or behavioural therapeutic care for children and adolescents; there are no group or therapeutic family-based placement options for girls with intensive needs, and many of the girls in the caseload with severe behavioural issues have exhausted their placement options, but must remain under protection.⁴⁶ Ujima is the only residential facility, but it is limited to boys with behavioural issues that cannot be addressed in community settings.

Domestic violence and abuse

Sint Maarten currently has one shelter: Safe Haven. It offers free shelter, counselling and supportive services to women and their children who are specifically victims of intimate partner domestic violence. It has 15 rooms and is almost always at full occupancy. Sint Maarten has no shelter facility for victims of other types of (domestic) violence.

Corporal punishment

With the legal framework to prohibit corporal punishment in place, teachers and parents should be encouraged and supported to use alternative, conscious discipline strategies, which teach the importance of addressing children with the appropriate tone and language. They should convey composure, encouragement, assertiveness, choices, empathy, positive intent, and consequences when disciplining children. Awareness raising and training are still needed to persuade parents and teachers of this approach's value, and to provide them with the skills to use these tools. SSSD builds skills on positive disciplining in the school care teams, organises parent support groups and does parent education. MECYS intends to develop and execute a 'positive parenting programme' in the future with a wider reach.

Children in contact with the law

Court of Guardianship

When a minor of 12 to 18 years commits a criminal offence, the Youth Probation Office at the CoG is responsible for the supervision of the judicial process and counselling of the suspect.

⁴⁶ Idem.

Police

The Juvenile and Vice Department (within the police) is responsible for processing the criminal trajectory of all cases involving minors. They are responsible for collecting evidence, interviewing witnesses and victims, and arresting suspects.

The community police officers work alongside community groups like the Voluntary Korps Sint Maarten, the Sint Maarten Youth Brigade and K1 Britannia. The idea is to reach troubled kids early and address their domestic issues. They work closely with schools as well.

SJIS

SJIS is responsible for the probation of young adults that turned 18 while under probation. SJIS also provides training, such as the Aggression Regulation Training, to offenders who mandatorily have to take the training course when they are sentenced to do so by a judge or prosecutor.

The Family Guardianship team supports families of juveniles who are put under protective measures by a judge, and also provides assistance to children and families as a preventative measure to ensure that at-risk juveniles do not engage in criminal activities or fall victim to such.

Miss Lalie Centre

The centre reopened in October 2019, after its closure in September 2017. The centre is run under reinforced management and strengthened infrastructure that includes an upgraded camera system and penitentiary-grade cell doors. Following education and day programmes is obligatory. The two-wing centre has the capacity to accommodate 20 boys (12-18 years). There is presently no facility for girls.

The centre offered placements for civil cases before closing in 2017, but that was discontinued after its reopening. After its establishment in 2014, personnel were trained under a programme in cooperation with Stichting Horizon in the Netherlands. A 2016 baseline report by the Law Enforcement Council about the centre concluded that despite many limitations, the centre was running well with very dedicated staff, but that the situation was also fragile due to a lack of resources and personnel.⁴⁷

What the interviewees said:

“we need swift justice like during post-hurricane looting, to ensure they are caught and detained. Now caught and released”

“our staff are not equipped to deal with children who commit crimes. Practice for holding them is 2 days, they stay with police for 8 days or more and then they are released.”

“prosecution services operate more informally for minors”

47 Raad voor de Rechtshandhaving. (2016).

Professionals working in Juvenile Justice system: "staff who received training in the Netherlands have now taken better jobs."

Residential care and foster care

There are two residential care facilities for foster children:

1. New Start: 25 children in September 2017 (aged 23 months-17 years). Also does summer camps: New Start is run by a couple, of which the husband passed away early 2020. This diminishes the capacity to run the home to such an extent that it is unsure whether it can continue to exist in the future.
2. Ujima (boys aged 8-14): founded in 2005, a residential therapeutic facility that works with at-risk boys and their families. They also have a day treatment programme. Capacity: 10. There is no such facility for girls.

The I Can Foundation provided foster care and shelter to the children of Sint Maarten for over twenty years. In 2019, the centre added 4 independent units on the property to serve as external houses for those who reached 18 years and were transitioning into adulthood. The capacity was 18. The centre closed as per 31 December 2019.⁴⁸ Given that also New Start is in a precarious situation, there is an urgent need to create new options for placements for children in foster families or group homes.

SJIS prepares foster parents to receive children and adolescents in the following categories: day foster parents (a few days per week), therapeutic foster parents (assisting children with psychosocial problems), weekend/vacation foster parents, guest and emergency foster parents (available immediately as need arises), boarding foster parents, and "mental foster parents" (they cannot have a child at home but they financially assist a child who is placed elsewhere). SJIS has been assisting foster families in Sint Maarten since 2002.

The government, as long as there is a protective measure in place, provides subsidies: NAf 225 for children placed with foster families, and NAf 500 for those placed in a children's home by court decision. Further subsidies are available to cover additional expenses via the CoG or the Sint Maarten Development Fund. In the case of voluntary placement of a child, payment is arranged between the foster homes and the child's parents/guardian. This modest subsidy is by far not sufficient to cover living expenses of foster children and is very low in comparison to the subsidy for foster parents living on the French side of the island (Saint Martin) where European levels of compensation are maintained.

⁴⁸ Retrieved from: <https://smn-news.com/st-maarten-st-martin-news/33586-exclusive-i-can-foundation-closed-as-it-loses-subsidy-efforts-are-being-made-to-establish-new-children-s-home.html>

Community initiatives to protect children

A Community-based Child Protection Mapping conducted in 2019, in support of this Situation Analysis, revealed that in almost every neighborhood on Sint Maarten there are a number of community-based mechanisms, led by individuals, organizations or churches, who work tirelessly in the interest of children and their well-being. Many of these initiatives are informal and some of the efforts include providing support to children from disadvantaged families for the provision of school uniforms, books, shoes, etc. In some cases children can access food provided by individuals or church feeding programs. A number of these initiatives also provide a “safe harbor”, in the hours after school or on weekends, for children whose home environments are impacted by violence or neglect. They also, in some cases, provide a structured environment and opportunities to develop socialization skills. These initiatives are largely self-funded, with a few of the more organized programmes, affiliated to churches or foundations, being subsidised by the government or community and private fundraising.

A number of persons interviewed expressed a lack of confidence in the formal justice system. Some of the issues highlighted included breaches of confidence when reporting cases of child abuse or neglect to the authorities, a feeling of frustration when perpetrators receive light sentences or are not prosecuted at all, and the lack of sufficient facilities and services aimed at the protection of children and young people, especially those with challenges.

In 2013, the Community Police unit was established. The goal of this unit is to bridge the gap between the community and the justice system. The Community Police officers, each assigned to specific neighbourhoods, work with community groups, including youth groups, community church groups and neighborhood watch groups. Alerts sent to the Community Police unit trigger additional alerts which are linked to the Victim Support Unit.

The Unit implements two programs with children and young people, TAPS and Cops & Kids. TAPS is designed for at-risk youth, where students partner with mentor officers to discuss issues including bullying, anger management, avoidance of gang life, drug usage and conflict management, as well as other youth and law enforcement-focused topics. Cops & Kids is designed to foster positive interactions between the police and young people. It consists of a series of community workshops that use performance, improvisational games and conversation to help teenagers and police officers to develop and improve their relationship.⁴⁹

Child protection in emergencies

During Hurricane Irma, support to children was mostly provided through the existing service providers in the child protection sector. NGOs such as the Red Cross, White and Yellow Cross (WYC) and K1 Britannia also provided assistance. The latter is building expertise in post-disaster

49 UNICEF Netherlands. (2020).

emergency support, including in child protection. There was no influx of new international or foreign NGOs during the aftermath of Irma.

Conclusions and recommendations

Legal framework and policies

The Civil Code and Penal Code contain adequate provisions related to domestic violence and child abuse. Nevertheless, the required policies to ensure adequate prevention and response services, have been in draft form for years. Since all ministries have responsibilities in child protection, adopting and implementing policies are complex inter-ministerial processes. **It is recommended to develop a roadmap towards the adoption and implementation (with sufficient resources) of the draft Action Plan on Child Abuse (2015 with update in 2019), the draft Policy for Preventing Domestic Violence, Child Abuse, Forced Prostitution, Trafficking in Persons and Gender-based Violence in Sint Maarten (2018), and the Integrated Youth Policy Plan 2020-2025, as well as possible other draft policies.**

Although the Civil Code appoints the CoG as the Central Reporting Centre for child abuse, and stipulates the establishment of reporting protocols, this reporting function based on the 2015 reporting protocol is not functioning optimally. **The recommendation is to continue the recently started (2019) bottom-up approach of discerning ways to identify and report child abuse with first-line response services, and strengthen knowledge and capacity to provide rapid and effective response measures.**

The Penal Code provides a clear legal framework for juvenile delinquents. However, there are hardly any alternatives to detention, such as diversion and restorative justice. The Miss Lalie Centre reopened in October 2019. **It is recommended to invest in strong capacity building efforts for personnel of the Miss Lalie Centre. Another recommendation is to create options for alternative sentences, such as a HALT measure and create possibilities for institutional placement for psychiatric treatment (PIJ), as this is currently not available. There is currently no facility or treatment for female juvenile offenders which needs to be addressed.**

The foster home and group home system on Sint Maarten currently does not meet the standards of the United Nations Alternative Care guidelines. Policies and regulations are not yet in place, which poses protection risks for children in these homes. **It is recommended to analyse the current situation of foster homes and group homes against the UN Alternative Care guidelines and develop a roadmap towards policy development and implementation for the restructuring and/or upgrading of these homes. Given the precarious situation of foster care placement capacity, it is recommended to address this challenge with high priority.**

Regarding child protection in emergencies, **it is recommended to finalise the development of an MoU between the CoG and the police on disaster preparedness and response, and to sign and operationalise the inter-island protocol on the evacuation of children during emergencies.**

Coordination and cooperation

Since all ministries have responsibilities in child protection, it is imperative to have an inter-ministerial group that pushes policy development and service delivery and advocates for the necessary resources. **It is recommended to establish and maintain a permanent and active multi-stakeholder group (including service-providing NGOs) with a designated government lead and annual workplans. The group should also include disaster preparedness activities in the annual workplans and maintain working relations with the national disaster management structure, particularly ESF 7.**

Data and information management

Due to the sensitive and taboo nature of child protection issues, such as violence against and (sexual) abuse of children, it is challenging to collect data. Due to a lack of consistent data collection, analysis and dissemination, the magnitude of child protection issues is unknown. Yet based on what interviewees mentioned during the Situation Analysis process, it can be surmised that the issue is serious. The lack of data hampers evidence-based policymaking and resource allocation. **It is recommended to establish clear and uniform definitions on child abuse, domestic violence and neglect etc., to be utilised by all stakeholders. Uniform definitions will improve reporting, data collection and analysis, and support the standardised provision of services.**

Data should be sufficiently disaggregated so as to gain a solid insight into the specific vulnerable groups and issues that can inform policies and service provision. A data mechanism or tool should be established, for example a 'Youth Monitor', to routinely collect and collate data from the various child protection actors, present them in an analysis, and disseminate this among the actors and other stakeholders. This will motivate all actors to keep feeding into the data mechanism. It is also recommended to structurally collect data from schools about incidences of violence on or around school premises to gain a better insight into the issue. For emergency situations, it is recommended to use a similar information management system and create robust tools to assess the safety and well-being of children after a disaster.

Service delivery

Child (sexual) abuse and other forms of violence are underreported. The general population does not know how or where to report, nor do they have faith in the formal child protection system because they may have heard about or experienced insufficient response to their case, or even a breach of confidentiality. Whilst creating improved reporting codes and service delivery, it is recommended to develop and implement awareness programmes about reporting, which target the general , in languages appropriate to the target groups.

There is also a need to train police officers in dealing with cases of domestic violence and child (sexual) abuse in an appropriate and sensitive manner. **It is recommended to sensitise the police force about this issue through trainings, and consider the establishment of a Special Victims Unit with trained staff, and inform the general population about this service.**

Given that the shelter, Safe Haven, only provides assistance to survivors of intimate partner violence, **it is recommended to strengthen child protection services to better address individual needs, including the provision of an integrated and comprehensive package of care and support services (housing, psychosocial support), for survivors of other forms of domestic violence, including child sexual violence.**

Interviewees to the Situation Analysis reported that "licking or spanking" is not acceptable among the current, younger generation of parents. Interviewees do mention the use of violent, threatening and/or intimidating language both at school and in the home. **It is recommended to further support parents and teachers in using positive, conscious disciplining methods by expanding access to parenting programmes. It is recommended to conduct a mapping of the existing parenting courses offered through the CoG, SSSD, and primary schools to identify and address any potential gaps and overlaps in target groups, content, and focus areas.**

The facility for juvenile offenders reopened in October 2019, and Ujima Foundation offers a programme for at-risk boys. **It is recommended to analyse the needs and requirements for such services for female juvenile offenders and at-risk girls.**

There is a lack of foster families, which can be linked to the low financial compensation to foster families, which does not cover the costs by far. It is recommended to develop funding models to support the strengthening of the foster care system to deliver timely and equitable support services to foster families and address the urgent issue of the strongly diminished foster care capacity on the island.

Right before and after hurricane Irma, children were evacuated off Sint Maarten without proper screening who they were travelling with and whether there was parental consent. For emergency situations, fortify protective services for all evacuating children, and improve screening at points of departure. It should also be ensured that cultural and age-appropriate community-level psychosocial support is provided, and that mental health services are made available.

Empowerment of parents and caregivers

Currently the reach of positive parenting information is very limited. It is recommended to identify new opportunities for providing parenting information through existing services, such as day care centres, the Baby Clinic of the Collective Prevention Services (CPS), and after-school programmes. This should emphasise reaching young parents to improve their parenting skills. Develop and execute parenting classes at a wider scale.

Identify opportunities to provide information to prospective parents about family planning.

In light of the high proportion of vulnerable female-headed households, develop programmes that encourage and support men to have a strong and positive role in the lives of their children.





4.

The Stimulating Environment:
Every Child Learns.

4. The Stimulating Environment: Every Child Learns



What the CRC states:

Children's education should develop each child's personality, talents and abilities to the fullest. It should encourage children to respect human rights and their own and other cultures. It should also help them learn to live peacefully, protect the environment and respect other people. Children have a particular responsibility to respect the rights of their parents, and education should aim to develop respect for the values and culture of their parents (CRC, Article 29).

The 2030 Agenda for Sustainable Development contains a new global education goal (SDG 4): to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all. The sub goals further specify: *ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes (SDG 4.1.); 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 (SDG 4.2.); ensure equal access to technical, vocational and tertiary education (SDG 4.3.); increase the number of people with skills for financial success (SDG 4.4.), eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations (SDG 4.5.); ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy (SDG 4.6.); education for sustainable development and global citizenship (SDG 4.7.), build and upgrade inclusive and safe schools (SDG 4.A.).*

Ensuring the realisation of the rights to inclusive and quality education is a key government priority and a seminal prerequisite for sustainable social and economic development. Education enables children's personal development by providing a safe and structured social environment where they can progressively acquire the knowledge and personal and technical skills to improve their lives and contribute to society.

Children's access to education

The education system caters to 9,888 children under the age of 18, of which 2,037 are under the age of five. In reality, it is estimated that on top of the 9,888 children, there could be up to an additional estimated 20 percent of children who were not registered in the census.⁵⁰ Sint Maarten provides eight years of primary education, followed by four to six years of secondary education. The system includes government-owned public schools, government-subsidised schools, and private schools.

There are seventeen primary schools, of which six are public, and eleven are government-subsidised. There are six secondary schools, one special education school (at primary level only), one technical and vocational institute, and one subsidised tertiary education institution in Sint Maarten. The schools offer different models of education depending on the school's system history and/or its language of instruction. Additionally, there are five private schools offering all levels of education. It is concerning that the private schools are registered as businesses rather than educational institutes and do not fall under central education laws and policies.

⁵⁰ See Chapter 2 about demographics.



School governance is managed by the school boards. There are seven school boards in Sint Maarten: Methodist Agogic Centre Foundation (MAC); Division of Public Education Services; Foundation for Protestant Christian Education; Foundation of Seventh Day Adventist; Foundation for Catholic Education Sint Maarten (SKOS); Stichting Voortgezet Onderwijs Sint Maarten, and there is the Charlotte Brookson Academy of the Performance Arts.

The boards of subsidised schools are said to have a higher degree of flexibility and autonomy than their public-school counterparts, since the latter have to adhere more closely to rules and regulations within the government system. Subsidised schools also engage and involve parents more in school management through their parent support groups and workshops. This gives parents a voice, whilst their involvement is financially beneficial for schools when it comes to fundraising. The ensuing endowment of parental contributions affords pupils with more opportunities: a greater diversity of classes is offered (e.g. gardening, arts and crafts), and student trips, sometimes to nearby islands, can be arranged (e.g. for sports or debating competitions).

Although education is free at the public and subsidised schools, the costs for books, uniforms and lunch can be a challenge for some families.⁵¹ The subsidised schools have no fees, but non-mandatory parental contributions are common, and they can be as high as USD 175 per child, per year. The government can provide assistance to low-income families (18 children received uniforms in the 2017-2018 school year), and the subsidised schools assist a small number of families in need. Free school bus services to all children needing transportation to and from school are also provided by the government.

“The difference in the subsidised vs public schools is easily observed during school events: more parents attend the subsidised schools.”

Administrator

⁵¹ Subsidies include operational costs (maintenance, teacher and admin salaries, learning materials and utilities), and is based on student numbers.

Table 7. illustrates the main statistics for the education sector.⁵²

Student numbers by year	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
Total Student Population				8729	8641	
Primary Education	4796	4812	4784	4775	4699	4474
Secondary Education	2939 ⁵³	2957 ⁵⁴	3008	3042 ⁵⁵	2964	2476
Advanced Secondary Vocational Education (ASVE)			288	246	245	
Private schools				666	733	
Home-schooled students					7 requests for primary or secondary education were submitted and 5 requests were granted.	5 requests were made: 1 elementary school level and 4 secondary school level. One is still pending by MECYS for Secondary Level Education.
Student Absenteeism			4.9%	4.96%	6.04% ⁵⁶	***
Student Absenteeism (secondary)	3.7%	3.8%	4.4%	5.0%	5.2% ⁵⁷	*** ⁵⁸
Teacher Absenteeism		7.6%	7%	7.1%	7.1%	N/A
Repetition (s - Forms 1 & 2)	15.6%	17.9%	20.2%	17%	16.1%	N/A
Suspension (primary)		34	60	62	105	78
Suspension (secondary)		43	154	126	121	95

The gap between the number of students enrolled in primary and secondary education (see Table 7) continues to go unexplained. Anecdotal evidence suggests that upon completing primary school in Sint Maarten, many students complete secondary education in the Netherlands, the US, Canada, or private schools in the region. However, rates of school enrolment are high.

52 Inspectorate of ECYS. State of Education Report (SER) 2016-2017. It is recognised that the 2016-2017 SER differs from the previous SERs because it consists of information compiled through inspections based on a new inspection framework introduced in 2016-2017.

53 Compulsory Education Report =2934

54 Compulsory Education Report =2958

55 Compulsory Education Report =2958

56 Some of the differences between schools of course occur, because some schools may be more consistent and precise in recording absenteeism than other schools.

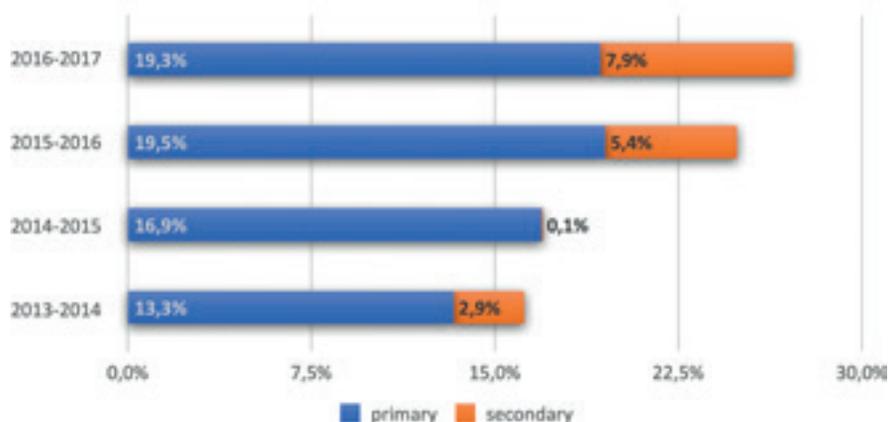
57 The SER 2016-2017 notes that “student absenteeism peaks in December (Christmas break) and April (Carnival), when parents add some extra vacation days to their vacation or simply allow their children to stay home. This is also the case in secondary education”. It should also be noted that the Inspectorate is seeing an increase in students with (dis)abilities at the secondary level who are given extended leaves and exempted from school based on Article 5 of the Compulsory Education Law.

58 As of the 2016-2017 academic year, schools were required to only report absenteeism of students for which intervention is needed. This affords three Inspectors/Truancy Officers the opportunity to physically execute their tasks in the field, e.g. schools and home visits. This will continue in the academic year 2018-2019.

Undocumented students

The issue of absorbing undocumented children into the school system was subject to discussion in the 2015 Millennium Development Goals Report, stating that “access to primary and secondary education in Sint Maarten is in theory at 100 percent. In practice though universal access is still to be achieved, mainly for vulnerable groups, including undocumented migrant children and disabled or mentally challenged children”.⁵⁹ In 2014, a total of 687 undocumented students were enrolled in public and subsidised schools.⁶⁰ Some interviewees for the Situation Analysis mentioned barriers to access subsidised schools. There is pressure on the public school system to accommodate pupils with immigrant backgrounds who have different levels of education and learning needs. There are also undocumented students who attend “unrecognised schools” run by foundations.⁶¹ The acute difference in the percentage of undocumented students in primary and secondary education remains unexplained. Future plans to improve the visibility of undocumented students will see the Truancy Officers use a registration system such as School Management and Registration Tool (S.M.A.R.T.), to immediately cross-check registrations with the Civil Registry’s data, and give all undocumented students a unique school ID number.

Table 8. Percentage of undocumented students in primary and secondary schools



Source: MECYS.

The 2016-2017 primary and secondary school registration systems reported the total of undocumented students to be at 962 (764 and 198 respectively). The government’s efforts to collect this data for four consecutive years reflect the commitment to no child being left behind. Nevertheless, the data collection process is not without some difficulties. To illustrate, not all schools routinely submit data, the private schools seldom communicate statistics, and children from Saint -Martin attending school on the Dutch side of the island are considered undocumented

59 ‘Undocumented student’ refers to a student who has not been registered at the Census Office (Civil Registry). MECYS. (2018).

60 UNDP. (2015).

61 Idem.

students as they are not registered in the Dutch Civil Registry system.⁶² There is gain in establishing stronger cooperation between the education authorities on both the Dutch and French side of the island to manage cross border issues. Consequently, these factors obstruct the attainment of a completely accurate picture regarding undocumented students, thus limiting the reliability of subsequent analysis.

Legal framework and policies

The advent of Foundation-Based Education (FBE) in 2002, introduced to provide every student with equality of opportunity, signalled educational reform gaining traction, which became amplified when MECYS assumed full responsibility for the education sector after 10-10-10.⁶³

Compulsory education was introduced in 1991 for all children between 6-15 years, before being extended to all between 4-18 years in 2008.⁶⁴ This applies until the end of the academic year in which a child turns 18, or until they receive a diploma of secondary education.⁶⁵ Article 11 of the 2010 Constitution consolidates this, guaranteeing access to education for all.⁶⁶ The law encompasses the children of undocumented migrants, the enforcement of which saw the number of immigrant children in primary education rise.⁶⁷

The Inspectorate of MECYS enforces the Compulsory Education Law through their Truancy Team, which has five officers and a van to patrol neighbourhoods and escort truant students back to school. Truancy Officers can make home visits, and have the ability to issue a *procès-verbal* if the Compulsory Education Law is infringed. Parents are punishable with warnings, fines, or incarceration (maximum of 60 days) for failing to ensure their child attends school. The introduction of the Truancy Team in 2015 was intended to combat the rising issue of students skipping school, and they have been effective in decreasing the dropout rates.

The law stipulates that responsibility for school enrolment lies with the child's parent/guardian, and attendance is that of the child once they turn 12 years of age (although the parent remains punishable for their child's truancy). However, MECYS may give permission for home school education, such as in cases where a child's mental or physical disability limits their school attendance.⁶⁸

62 nb. Data incomplete for 2014-2015 (one primary school missing); 2015-16 (one primary and secondary school missing); 2016-2017 (two primary schools and one secondary school missing).

63 This movement, likely not by coincidence, corresponded to worldwide commitment to the Millennium Development Goals and key regional frameworks designed to guide educational development and standards in the subregion including: CARICOM's establishment of the Ideal Caribbean Person (adopted by Heads of State in 1997) as the cornerstone for the approach to education, and, Education for All in the Caribbean: A Plan of Action for 2000-2015.

64 "Leerplichtlandsverordening" Article 3, AB 2013, GT NO 590. The law specifies not only a requirement for education, but a requirement that children are enrolled in and attend school (Article 2, sub-section 1).

65 "Leerplichtlandsverordening" Article 3, sub-section 2.

66 Constitution of Sint Maarten, Article 11.

67 MECYS. (2016).

68 "Leerplichtlandsverordening" Article 4, sub-section 2, Article 5.

MECYS is the ministry responsible for education in Sint Maarten. Education is a right and a duty for all between 4-18 years of age. The relative strength of the sector means that grand scale reform is not necessary, thus shifting the focus towards enhancing and standardising the quality of services offered. MECYS devised a 2016-2020 strategic plan with the following priorities:

- I. Implement education legislation and policies, and finalise pending legislation e.g. ECD, tertiary education, policy on behaviour, health, wellness and safety within the schools, extension of school hours and after-school programmes.
- II. Improve quality of primary and secondary schools, standardise and subsidise the ECD curriculum and programmes (0-3 years).
- III. Improve the quality of and accessibility to education (provide opportunities to more accessible special needs education, ensure continued upgrading of skills for teachers, managers, assistants and school board members).
- IV. Improve quality of educators (ensure teachers meet the required standards and qualifications to function optimally in the classroom).
- V. Establish tertiary and professional education as a vital pillar to Sint Maarten's economy (expand the University of Sint Maarten campus and ensure accreditation of the degree programmes it offers).
- VI. Stimulate life-long learning (adopt the UNESCO Global Network of Learning Cities approach).
- VII. Reduce repetitions and decrease dropout rates (evaluate and execute the social formation programme (sociale vormingsplicht) to reduce the number of dropouts and invest in extra guidance programmes with homework and tutoring sessions).

Since the launch of this plan, MECYS has made steady progress despite the pursuit of these outcomes being interrupted by the September 2017 hurricanes.

Disaster preparedness and response in the education sector

Like much of the Caribbean, Sint Maarten is inevitably affected by extreme weather events and natural disasters related to progressing climate change.⁶⁹ Hurricanes Irma and Maria in 2017 were among the 10 most powerful Atlantic hurricanes recorded since 1932, with winds of 185 and 175 MPH respectively. Although all classes resumed by 16 October 2017, school structures sustained extensive damage: 25 percent had major damage; 72 percent had flood damage; 70 percent had electrical damage; 70 percent lost materials and equipment; 45 percent had water supply difficulties; teacher availability was affected; and many day care facilities were in need of repair with five centres completely destroyed.⁷⁰

In the wake of the hurricanes' devastation, MECYS decided to critically reflect on how to better prepare, better pre-empt, and resiliently recover quicker. National strategies to implement school

⁶⁹ UNICEF. (2019).

⁷⁰ UNICEF Netherlands. (2017b).

safety build on the Comprehensive School Safety Framework (as outlined in the Caribbean Safe School Initiative roadmap), and they revolve around three pillars to secure an enabling environment:

1. Safe Learning Environment (disaster-resilient infrastructure)
2. School Disaster Management
3. Disaster Risk Reduction and Resilience Education

The work that was carried out determined changes and policy implications needed to chart a way forward in the longer term: to rebuild day care centres, schools, after-school programmes and sports- and cultural facilities in a safer, climate-resilient and child-friendly manner while factoring in risk. Sint Maarten endorsed the Worldwide Initiative for Safe Schools (WISS) launched in 2014.⁷¹ The government also signed the Antigua and Barbuda Declaration on School Safety in mid-2019, which is part of the Caribbean Safe Schools Initiative.⁷² These recent steps underscore the government's commitment to making schools in Sint Maarten safe learning facilities that are resilient to natural disasters.

As part of improved disaster preparedness and response in the education sector, a permanent SEMC was established in MECYS in 2018. Based on broad stakeholder consultation, the SEMC developed a roadmap towards comprehensive school safety. As part of the roadmap, Safety and Emergency Guidelines were developed for schools, day care centres, after-school programmes and sports and cultural facilities. Staff members of all entities were trained on the content of these guidelines, so they could use them to improve their preparedness and response measures. By 2019, 24 schools had established Safety and Emergency Teams and developed a school safety plan with guidance and support from the SEMC.

Recommendations were put forth regarding the reinforcement of the enabling environment, the most important of which were to create a Safety and Emergency Management Committee (which requires a Ministerial Decree), and to align the school safety plans with the Disaster Plan and the Contingency Plan (pieces of national legislation in effect since 10-10-10). Equally important is to clarify the official role of MECYS and institutionalise its mandate to oversee safety in subsidised schools. Clear indicators should be developed to ensure practical and routine monitoring and evaluation of safety and security events in the schools as laid out in the Safety and Emergency Response Guidelines for Schools in May 2018. The result of the monitoring and evaluation effort should feed into the international and regional reporting requirements.

71 Coordinated by the UN Office for Disaster Risk Reduction, WISS is a government-led global partnership for advancing safe school implementation. It provides support at the national level, with key partners from the Global Alliance on Disaster Risk Reduction Education and Resilience in the Education Sector.

72 UN Office for Disaster Risk Reduction. (2017).

Inclusive education

Under SDG 4 on education and the learning environment, Target 4.a recommends to “build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all”. Target 4.a assesses some of the most basic services and facilities that need to be in place for schools to be child-friendly, inclusive, nurturing and safe. Schools should have access to: (a) electricity; (b) the internet; (c) computers; (d) adapted infrastructure and materials for students with disabilities; (e) basic drinking water; (f) single-sex basic sanitation facilities; and (g) basic handwashing facilities. The latest Sint Maarten country profile for the SDGs shows no data for these indicators.⁷³ This target relates to SDG 9, which is concerned with DRM and building resilient infrastructure.

“I want my children to learn Dutch so they can go to university in the Netherlands. They will only get a job with government if they speak, read, and write Dutch.”

“I went to school in the USA and my brother studied in the Netherlands. He got a Government job with good benefits, but I didn’t.”

Interviewees

School System

Sint Maarten’s education system is based on that of the European Netherlands. All children receive the same primary education, whereas secondary education is tiered into different academic levels. The placement process is monitored by MECYS and determines whether students will follow an academic form of secondary education (CXC, HAVO or VWO) or a vocational form (PSVE), the latter of which is subdivided into placement criteria for several streams or programmes (either PSVE-TKL, or PSVE-PBL/PKL). This system affords the student an appropriately challenging academic environment, as well as mobility because they can stream into a higher academic level based on their performance. In such cases, the student enters the same year group they were in prior and continues their education from there.

There are two instruments which guide the initial secondary school placement: the FBE Exit Exam taken in the final year of primary education, and the student’s Educational Report. The Exit Exam is composed of four subjects (English, Dutch as a foreign language, Mathematics, and General Knowledge), and its results indicate the level of secondary education the child would be most suited to intellectually. The Education Report takes into account the child’s social context, as it details performance at primary level, socio-emotional development, and the school’s advice and parents’ wishes regarding placement. In principle, this ensures an academically and socially appropriate environment for a child’s secondary development.

⁷³ There is Technical Cooperation Group on the Indicators for SDG 4 – Education 2030 (TCG), co-chaired by UNESCO Institute for Statistics, which serves as a platform to discuss and develop the indicators used for monitoring the Education 2030 targets in an open, inclusive and transparent manner. <http://uis.unesco.org/sites/default/files/documents/countryprofiles/SX.pdf>

It is also possible to follow the regional Caribbean Examination Council system (CXC), for which the Government administers the Caribbean Certificate of Secondary Level Competence (CCSLC) and the Caribbean Secondary Education Certificate (CSEC). These exams were taken for the first time in 2016-2017, with 16 students sitting them.

The education system in Sint Maarten offers a choice in the language of instruction, curriculum, and testing standards that prepare students for further studies in the regional CXC education system, the Dutch system, or the American system. Parental preference about which system their children should follow is a strong determinant factor (assuming the test scores meet the entrance requirements), and, in some cases, religious affiliation can be a strong asset.

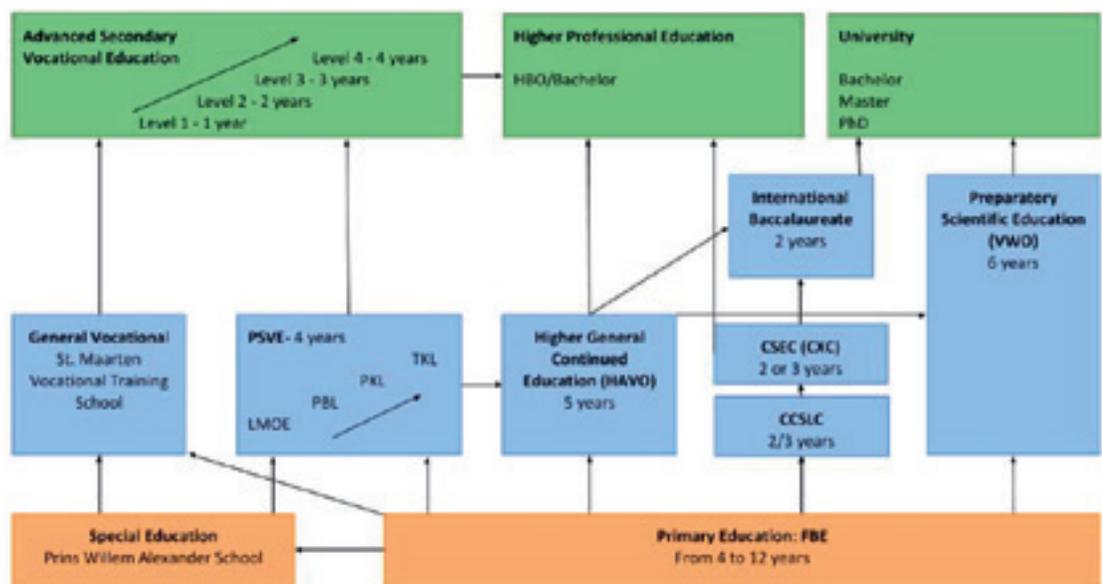


Figure 6: School system Sint Maarten (subsidised schools)

Teachers

The minimum requirements for being employed as a teacher at primary level on Sint Maarten are holding a bachelor's degree in elementary education and a certificate in didactical competence. To teach at secondary level, one must hold a certificate of didactic competence, and either a teaching degree, a bachelor's or master's degree in the subject of instruction. However, considering most teachers completed their studies abroad, their knowledge varies as per the curriculum of the different universities where they were educated.

In general, schools, institutes of learning, training centres or universities do not offer special continuing education programmes for teachers, that incorporate risk management and disaster response (beyond ad-hoc trainings on specific subjects). Currently the teacher training provided on Sint Maarten omits risk management as part of its curriculum, and no official education resources exist for DRM. Nevertheless, their development is incorporated in the timeline of the School Safety Roadmap.



Qualifications of school teachers

In 2016-2017, 77 percent of the 266 teachers at the secondary level were qualified, and 33 percent were qualified at ASVE level. This is a little lower than the 80 percent recorded for academic year 2015-2016.⁷⁴ In instances where no replacement for an unqualified or underqualified teacher can be found, dispensation may be requested from the Inspectorate. If granted, the school board must train the teacher until they are completely qualified. Dispensation was requested for 22 teachers in 2016-2017 (being granted for 20 cases), including seven teachers who were underqualified. In 2015-2016 there were 3 unqualified teachers and 17 were recorded as unqualified in 2014-2015. Teachers with bachelor's degrees are underqualified at the secondary level.⁷⁵

Performance

In response to the Inspectorate's concern about the low scores in Maths and Dutch, a study was conducted in 2014.⁷⁶ Corrective action led to a noticeable improvement in Mathematics, although progress in Dutch was not as promising (see Table 9 for details).⁷⁷ In the academic year 2016-2017, 48 percent of students scored lower than 40 percent in Dutch, which was slightly down from the previous year when 51 percent scored below 40 percent. Even within the four schools with Dutch as the language of instruction, only 14 percent scored 60 percent or higher. Performance in English, on the other hand, remained good with an average score of 70 percent in 2016-2017.

74 Inspectorate of ECYS. (2018).

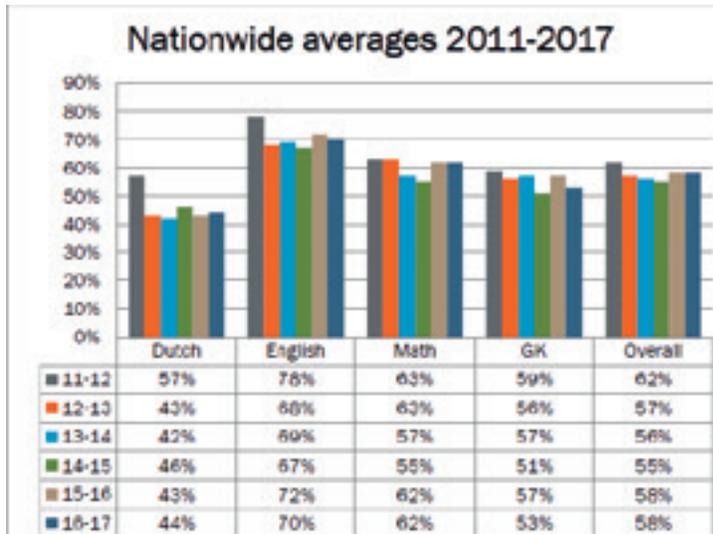
75 Idem.

76 Waschke, L. (2016).

77 Improvements focused on closer alignment of textbooks to the curriculum; adding extra math classes; peer tutoring and coaching to help teachers overcome insecurities when explaining arithmetic problems; and addressing the pace of transitioning from concrete to abstract phases of Math instruction.

This analysis feeds into the ongoing discussions around the language of instruction in schools. This is particularly relevant for Sint Maarten, where English is the day-to-day administrative language, language of communication, and the first language of the majority. The Government of Sint Maarten uses Dutch when communicating with the Dutch government and continues to produce official documents in the Dutch-language.

Table 9. FBE Exit Exam Nationwide Average Results 2011-2017



Source: State of Education Report 2016-2017.

As noted in the Waschke study, there are differences between the schools, that need to be considered in order to improve the learning outcomes in each of the systems. Subsidised schools tend to have greater opportunities in accessing state-of-the-art technical equipment such as Digi boards, computers and Wi-Fi-based games and programmes which enhance students’ interests and learning. Another factor is whether there is access to after-school programmes that include help with homework (in Dutch).

What the interviewees said...

“most parents already don’t understand the Maths and English being taught.”

Attitudes towards vocational education:

“Kids who go to vocational education streams go there because they cannot pass the academic requirements... you cannot expect society to look up to something you get by failing”

“Stigma – some don’t want to go because of the stigma”

“curriculum needs to be more relevant versus classic”

“seen as a last resort instead of a first resort”

Student absenteeism

The overall percentage of student absenteeism was higher in academic year 2016-2017 (6.04 percent) than in academic year 2015-2016 (4.96 percent). It was 4.9 percent in 2014-2015 and 4.1 percent in 2013-2014. Extended absences also occur, at which point the 3-month absentee policy enables a school to legally expel a student who has been continuously absent for three months. All schools have installed a student absenteeism policy which include consequences for truants.⁷⁸

It is mainly the vocational schools that complain about high levels of truancy, either in the form of students skipping certain classes, or staying away from school altogether. In one school it proved fruitful to have management and security direct students to their next class. Another school had teachers inspecting the premises in order to prevent students from skipping classes.

Teacher absenteeism

When a teacher is absent, most schools arrange a substitute, which is usually the school manager or another staff member with a teaching degree. Although most schools have established clear policies to minimise teacher absenteeism, only the Catholic schools and the MAC schools have a written policy in place to curb it. There are four schools without a policy. Smaller schools are impacted more heavily by teacher absenteeism than larger schools with more personnel. Within schools, teacher absenteeism is not perceived as a big challenge, but tardiness sometimes is.

Repetition

When a student does not pass a schoolyear, they must repeat the grade. Promotion can occur either by successfully passing a grade, or via social promotion (where a student has repeated a grade twice already or streamed into primary education at an older age). Boys experience repetition and social promotion more often than girls.

Repetition and promotion in 2016-2017

- 238 (5%) repeated their grade: (55% boys, 45% girls)
- 4086 (89%) were promoted: (49% boys, 51% girls)
- 299 (6%) were promoted, because of age (social promotion): (68% boys, 32% girls)

The average repetition rate has been very high in the past five years, varying between 21.1 percent in 2012-2013 to 16.1 percent in 2016-2017.⁷⁹ The number of social promotions tend to be high at most public schools, as they are open to all students. As a result, many non-English speaking students are admitted, which may contribute to a higher repetition and social promotion rate. The schools with high repetition rates in the first two forms also have high repetition in the pre-exam class. In particular Sint Maarten Vocational Training School (31 percent), Milton Peters College PBL (60 percent) and PKL (43 percent) and TKL (28 percent) have many students, who were not promoted to the fourth form.⁸⁰

78 Inspectorate of ECYS. (2018).

79 Idem.

80 Idem.

The repetition rate is much lower in the upper forms of most other schools. Only the HAVO stream of the Milton Peters College has a consistently high level of repetition in the 3rd and 4th forms. Besides the fact that youngsters in these years have reached the peak of puberty, the following underlying factors play a role.⁸¹

- Students struggle with Dutch as language of instruction. Their low level in Dutch hampers their performance in subjects such as Economics, Biology, History, Man and Society, which all require a high level in reading comprehension and writing skills in Dutch (this is also the case at TKL).
- Some TKL graduates, who decide to continue their secondary education and stream into HAVO 4, do not manage to attain the required level despite the fact that they met the steep entry criteria.

Some of the specific reasons given for high repetition rates:⁸²

- Many students are not serious about studying and their motivation is low. Consequently, they often do not do their homework and are forgetful in bringing books and stationery.
- Parental involvement is low, with some parents being uninterested in their children's education, whilst others do not have time for supervising homework.
- Many students are dealing with behavioural challenges or problems at home.
- The programme, especially in the first two years, is too theoretical for some students who need a more hands-on approach.
- Performance in Dutch and Mathematics is generally very low and prevents students from meeting the promotion criteria.
- Basic Secondary Education prescribes 14 subjects, which some schools consider an overload.

Suspensions

Table 10. Number of suspensions per academic year, 2013-2018

Number of Suspensions per Academic Year		
2013-2014	77 suspensions	34 primary school; 43 secondary school
2014-2015	214 suspensions	60 primary school; 154 secondary school
2015-2016	188 suspensions	62 primary school; 126 secondary school
2016-2017	226 suspensions	105 primary school; 121 secondary school
2017-2018	173 suspensions	78 primary school; 95 secondary school

Source: State of Education Report 2016-2017, Compulsory Education Report 2017-2018.

81 Idem.

82 Idem.

Suspensions are handed out when a child breaks the school rules, and they typically last one to three days. Rather than staying home, the child often completes the suspension in an alternative learning setting at school. From a legal standpoint, all schools must report suspensions to the Inspectorate, but in practice this does not always happen. Thus, the statistics in Table 10 may not be a completely accurate representation of school suspensions on Sint Maarten. It should be noted that a student can be suspended multiple times.

Expulsion

According to the law on FBE, if a primary school wishes to expel a pupil, they must make alternative schooling arrangements for the child. This has proven to be a hindrance, evidenced by the low number of expulsions granted: 13 at secondary level in the 2015-2016 academic year, 12 at secondary level in 2016-2017, and five in 2017-2018 (1 primary level; 4 secondary level).⁸³

Dropouts

Considerable effort has been made to prevent and monitor dropout rates over the past 2 or 3 years. No dropouts were recorded in primary schools.

For the 2017-2018 academic year, a total of 17 students dropped out of various secondary schools (slightly down from 19 in 2016-2017). Of the 17 dropouts, ten students were still subject to the Compulsory Education Law. Three of the dropouts joined the workforce, the 3-month absenteeism policy was applied to thirteen others, and one pursued General Educational Development (GED).⁸⁴ There was a notable 78 percent decrease in the number of dropouts between 2015-2016 and 2016-2017.

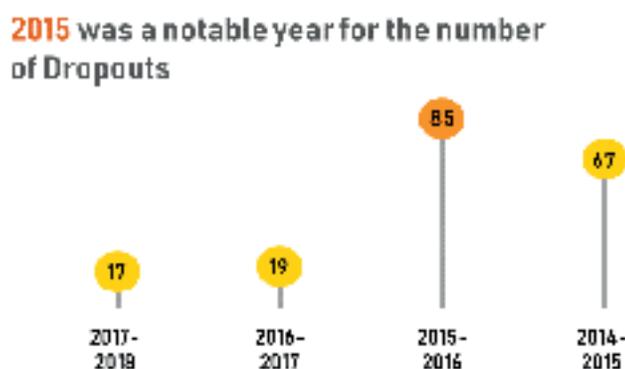


Figure 7: Dropout totals 2014-2018

Most schools have a welcoming and warm atmosphere, with 79 percent of students and 70 percent of teachers confirming that, in general, students and teachers treat each other with respect. In addition, 83 percent of students and 89 percent of teachers stated that they feel safe at school.⁸⁵ As mentioned in the protection chapter, interviewees to the situation analysis said that intimidating or threatening language, in the disciplining of children, can be observed in schools to discipline children.

⁸³ MECYS. (2019).

⁸⁴ Idem.

⁸⁵ Inspectorate of ECYS. (2018).

Table 11. Reasons for students dropping out from academic years 2015-2016 to 2017-2018

Reasons for dropping out	Academic Year 2015-2016	Academic Year 2016-2017	Academic Year 2017-2018
Joined work force	18	0	3
Issue with programme/school	23	0	0
Untraceable/absenteeism	23	12	13
Immigration issue	3	0	0
GED	15	3	1
Pregnancy	0	1	0
Incarceration	2	1	0
Deceased	1	0	0
Home Schooling	0	2	0
Total	85	19	17

Source: Compulsory Education Report 2017-2018.

Transition to the labour market

Youth unemployment is high on Sint Maarten, due to various factors related to the economy, demography and personal factors. 31 percent of youth aged 15-24 years is not in Employment, Education or Training (NEET). So about one third of the youth does not have paid work, but is also not enrolled in education or training.⁸⁶ The Department of Labour and the Department of Youth established the need to have a better synchronization of the training and education and the labor market and improve job readiness. Among the recommendations are: provide career guidance classes at school and via the Business Outreach Program and ensure harmonization between the skills that are in demand with employers and the training and education provided in the educational institutions.⁸⁷

The Department of Youth offers the Business Outreach and Placement Programme since over 20 years. It is a summer work experience programme for students aged 16-24 years: youth obtain the opportunity to attend training workshops, be interviewed by potential employers for a summer job with the possibility of obtaining employment. The plan is to expand this program to include the component of entrepreneurship training for this target group as this will contribute to building capacity with an outlook on impacting the unemployment rates amongst the youth on Sint Maarten.⁸⁸ The Youth Help Desk existed to provide information to youth regarding future opportunities in education and work but needs to be revived.⁸⁹

⁸⁶ Hermans, B. and Kösters, L. (2019)

⁸⁷ Department of Youth, MECYS. (2017).

⁸⁸ Retrieved from: <http://www.sintmaartengov.org/PressReleases/Pages/World-Youth-Skills-Day-on-July-15.aspx>

⁸⁹ Department of Youth, MECYS. (2017).

The care and counselling services

Many schools on Sint Maarten offer care and counselling services to their students internally. Schools achieve this by having homeroom teachers and mentors capable of identifying children requiring extra academic and psychological support. This is supplemented by teachers, many of whom have attended a signalling workshop which teaches early identification of disabilities, neglect and abuse. Cases necessitating observation, clinical intake and home visits are taken up by care teams made up of social workers, care coordinators and councillors.

Schools also provide basic care functions such as psycho-emotional, career, and academic guidance and support, adhering to treatment plans and confidentiality regulations at every step of the process. If necessary, schools can also refer cases to third parties such as SSSD, Mental Health Foundation (MHF), external psychologists or psychiatrists, or Turning Point Foundation for Drug Rehabilitation.

Student care functions are inspected annually. The 2016-2017 inspection identified the following areas for improvements:⁹⁰

- The need for effective prevention approaches to (cyber) bullying.
- The provision of an annual training for mentors.
- The need to explore more ways to improve access to care as many students find it difficult to believe that their information will remain confidential.

Special needs education

The Prince Willem Alexander School (PWAS) is the only school for special elementary education on Sint Maarten, mostly catering to students with learning problems. The students are divided into a Practical Stream (PO) and a Theoretical Stream (AO). Testing for admission is done by SSSD. Students begin school at PWAS at approximately 8 years old.

The institution has encountered many issues with its relocation, high absenteeism of both teachers and students. Additionally, the majority of the teaching staff are not trained to work with students with special needs.

Since PWAS has a maximum capacity of only 84 students, school board SKOS started the Individual Education Programme (IEP). It consists of two multi-age groups of students with socio-emotional/behavioural issues from all Catholic schools. SKOS aims to extend this initiative beyond the Catholic schools. The IEP took place on the premises of the Sister Marie Laurence School. Of the 55 students in the program, 34 (62 percent) showed improvement in their behaviour. Since 2015-2016 the IEP has also been applied in three other schools: Sr. Regina, St. Joseph and Sr. Magda.⁹¹

⁹⁰ Inspectorate of ECYS. (2018).

⁹¹ Idem.

Early Childhood Development

School attendance is mandatory from the age of four, so early childhood education covers the period from birth to four years of age. ECD refers to early stimulation of the infant mind to supplement their cognitive, creative, and social development.

ECD is not universally available on Sint Maarten. Working parents need ECD centres to ensure that their children are adequately cared for during workhours. Considering that the average day care fee is USD 250 per month, sending children to ECD becomes a privilege. Even though some day care centres offered reduced fees and part-time placements to some parents facing hardship, the high cost of day care was exacerbated by the spike in unemployment following the September 2017 hurricanes, especially as the hurricanes led to the closure of some day care centres. By 2018 there were 26 registered day care centres on Sint Maarten, down from the 39 centres noted in the 2013 Situation Analysis. The Catholic, Methodist, and Hillside Christian schools have long offered early stimulation classes. A review of the ECD sector conducted in 2018 revealed that day care enrolment, on average, was down by a third after Hurricanes Irma and Maria. This could partly be attributed to the financial hardship parents faced post-hurricanes, but also to the fact that some of the evacuated children did not return.⁹²

The quality and accessibility (especially for low-income families and children with disabilities) of the ECD centres is being addressed in the draft ECD Policy Plan. Not all centres work with evidence-based curricula, and the increasing demand, from working parents, for affordable day care is not being addressed. There is potential for the Sint Maarten Early Childhood Development Association (SECDA) to support MECYS in this. At least 18 of the 26 day care centres on the island are members of the SECDA, which receives financial support from MECYS.⁹³ It provides training and awareness-raising activities, as well as fulfilling a policy formulation function, being routinely consulted in the drafting of the ECD Policy Plan. However, SECDA will require additional support to strengthen their capacity should their role be expanded. Additionally, there is an absence of data on the demand for services in ECD, so data collection would be beneficial to developing effective policy.

Curriculum and programme delivery standards are not included in the regulatory framework for ECD centres. The National Ordinance for the establishment of minimum standards for childcare, last amended in 2015, makes provisions for care services for five or more children between 4 months and 4 years old (Article 1).

⁹² Williams, S. (2020).

⁹³ Idem.

A plan needs to be developed with key stakeholders to support the development of children from 0-4 years, especially those who are vulnerable. As part of the recommendations from the ECD review, this plan should focus on the following actions:⁹⁴

- Identify those children whose development is at risk due to poor stimulation, ill health, abuse and neglect, and those who have special educational needs and disabilities.
- Subsidise the allocation of placement for vulnerable children in early childhood care and education (ECCE) services in ECD centres, together with granting their families access to parent engagement programmes and access to support for their children with special educational needs, developmental delay and disabilities.
- Provide incentives to ECD centre operators to admit and provide programmes for children in need of development support including appropriate professional development of staff; national recognition of good quality provision; low-interest loans to improve infrastructure, equipment, and resources; and subvention for employing a qualified teacher on condition that pre-determined quality criteria are met.

According to the review of the ECD sector, key recommendations for action to improve governance, partnerships, policy, funding, and quality in the ECD sector are:⁹⁵

1. Ensure that the draft ECD policy is finalised with the inclusion of DRM and psychosocial support strategies, and that it is formally adopted and implemented according to a phased action plan.
2. Appoint an ECD coordinator to support the inclusion of the early childhood sector in mechanisms and processes for planning, statistics, governance, professional development, disaster management in MECYS, and to coordinate with other Ministries to include early childhood sector in protection, security, and social assistance mechanisms.
3. Secure public private partnership agreements with philanthropic organisations and private sector interests to create innovative financing mechanisms to support participation in registered ECCE services in ECD centres of good quality for vulnerable children identified as in need of support.
4. Register and regulate ECD centres as educational institutions in accordance with quality assurance criteria for the development and learning of children from a few months old to primary school entry age, differentiated to apply sector-wide to both home-based and centre-based settings.

⁹⁴ Idem.

⁹⁵ Idem.

In addition to the ECD centres, there are an unknown number of home-based infant and toddler services where less than five children are looked after by one caregiver in a private home. There is no regulatory framework protecting the safety, security and quality of the service provided. This is a critical concern to address for three reasons:⁹⁶

1. Given the current sparse capacity in ECD centres, coupled with the cost-factor that contributes to children being kept away, it is likely that parents in low income employment and unsocial hours of work, who need to leave their children in the care of others, are selecting the less expensive option of leaving their children with a neighbour or other home-based infant and toddler care arrangement. Thus, it is more likely that this is the default choice for poorer and more vulnerable children in the first three years of life.
2. The service being provided in home-based infant and toddler services is permitted on a ratio of one adult to four children. This is too high for a single caregiver outside of an institutional setting where other persons may not be available on site to call on in an emergency.
3. The home-based infant and toddler services are beyond the reach of the day care ordinance, so there is no provision for monitoring the extent and quality of the services, or for ensuring that persons providing the service are fit to do so.

After-school programmes

Eight organisations received funding to facilitate after-school programmes in 2017. After-school programmes provide a safe learning environment after regular school hours for children aged 4-12, as well as offering homework guidance and supervision that would otherwise be limited at home. Nevertheless, there is a limited variety of sports, cultural, social and academic after-school options that are free and easily accessible.

A survey among after-school programmes in 2019 yielded 35 responses out of the estimated 60 after-school programme. Of the 35 programmes that responded, 52% indicates they receive external support. 80% of the programmes charge an attendance fee. The vast majority of these programmes operate from Monday to Friday. About half of them are school-based, and the other half provides transportation.

Two-thirds of the programmes indicate they offer a balance between academic activities and social activities. Just over half of the programmes (53%) indicate that they provide a hot meal to the children. All programmes indicated they desire institutional strengthening, mostly in the areas of financial support (83%), training of staff (72%) and learning materials (71%).

96 Idem.

Table 12. After-school care enrolment 2016

After-school programme enrolment 2016	
Belvedere Community Centre	164
No Kidding with our Kids	158
Rupert Maynard	46
Oranje School	51
Methodist Agogic Centre	96
Hillside Christian School	134
Seventh Day Adventist	-
Foundation Catholic Education	-

The Department of Youth is mandated to guarantee programmes in 8 primary schools and community centres. The aim is to eventually cover all primary schools. However, at the moment there is no overarching policy to govern after-school programmes. The intention is to create a ‘safety net’ policy to outline proper guidelines and procedures for all activities that fall under the term ‘safety net’, including after-school programmes, cultural, arts and sports activities provided in a group setting. At the moment there is no clear oversight of the after school programme sector, including the geographic

distribution of services, data on participation and demand, funding situation, guidance on governance and management, and supported access to professional development and staff certification.

As part of the development of this ‘safety net’ policy, in 2019 the department conducted a mapping of the various after-school programmes, with the objective to determine the current number, types, availability, capacity, and needs of the programmes. The mapping yielded comprehensive information in the areas of programme structure and organisation, operations and safety and security.

The information collected will also be used by the department to form the basis for a complete inventory of the types of services and programmes being provided by the various after-school programmes, and upon which assistance can be provided to strengthen these programmes.

What the interviewees said:

“more sports and arts should be used for crime prevention”

“It’s not like it used to be... activities for children were plenty and free. Now the only alternative to hanging on the block is basketball.”

“youth centres lack more diverse activities and coaches, mentors”

“no path for sports, arts, music... Too expensive and most are private”

“many children have short-term goals... see themselves getting a job and staying on island”

“we need more activities for kids in the summer. What happens to them in the summer?”

Conclusions and recommendations

Legal framework and policies

MECYS drafted several important policies related to the development of children and youth but they have not yet been approved. **It is strongly recommended to approve these to improve learning outcomes and the safety and wellbeing of pupils: ECD Policy Plan, The Integrated Youth Policy Plan, the Safety Net Policy Plan (after-school programmes), and the Comprehensive School Safety Framework.**

Whereas the education sector (primary, secondary, vocational and tertiary education) are well developed in terms governance and quality, the early childhood education sector is not. The ECD sector should be strengthened in terms of governance, policy, partnerships, and funding. **The key recommendation is to ensure that the draft ECD Policy Plan is finalised. The curriculum and programme delivery standards have to be included in the regulatory framework for ECD centres as well as DRM and psychosocial support strategies.** It should be implemented according to a phased action plan.

Given climate change and the increased frequency and severity of extreme weather events, it is laudable that the Government of Sint Maarten is investing in comprehensive school safety and disaster preparedness in the education sector. It is recommended to **continue this effort to ensure that the education sector is increasingly prepared for various types of hazards and risks. Currently the teacher training provided on Sint Maarten omits risk management as part of its curriculum, and no official education resources exist for DRM. It recommended to develop these and increase resilience in teachers and students.**

Pupils from the French side of Saint-Martin attending school on the Dutch side of the island are considered undocumented students as they are not registered in the Dutch Civil Registry system.⁹⁷ **There is gain in establishing stronger cooperation between the education authorities on both the Dutch and French side of the island to manage cross border issues and data.** The movement of pupils across the border obstruct the attainment of a completely accurate picture regarding undocumented students, thus limiting the reliability of subsequent analysis.

The five private schools on the island are registered as businesses and do not fall under national education laws and regulations. Consequently, neither the quality level of the education nor the learning outcomes for students, who attend these schools is known by the government. It is recommended to **analyse the position of the private schools and to develop a policy to regulate private schools** as educational institutions. Promoting regulation within the education sector establishes the implementation of minimum quality standards, allows for the monitoring of the service, and supports policy refinement overtime.

⁹⁷ nb. Data incomplete for 2014-2015 (one primary school missing); 2015-16 (one primary and secondary school missing); 2016-2017 (two primary schools and one secondary school missing).

Coordination and cooperation

In order to strengthen ECD it is recommended to **appoint an ECD coordinator to support the inclusion of the early childhood sector** in mechanisms and processes for planning, statistics, governance, professional development, disaster management in MECYS, and to coordinate with other ministries to include early childhood sector in protection, security, and social assistance mechanisms.

In order to give continuity to the government's school safety efforts, it is **recommended that MECYS is integrated into the disaster management system through participative coordination meetings, use of shared protocols and information, and involvement in decision-making spaces related to disaster preparedness and response.**

Data and information management

Public spending on education is high, which shows a strong commitment from the government to learning. However, in order to improve efficiency and effectiveness in the sector, it is recommended to **build the capacity of the education sector in data collection, analysis and dissemination, as well as in the monitoring and evaluation of programmes (including programmes that fall under Culture, Youth and Sport) through evidence-based policies and programmes.**⁹⁸

Service delivery

In order to improve the quality of ECD centres, it is recommended to **register and regulate ECD centres as educational institutions in accordance with quality assurance criteria** for the development and learning of children from a few months old to primary school entry age, differentiated to apply sector-wide to **both home-based and centre-based settings.**

Another recommendation to strengthen ECD services is to **secure public private partnership agreements with philanthropic organisations and private sector interests to create innovative financing mechanisms**, to support the participation of vulnerable children in quality registered ECD centres.

Youth unemployment on Sint Maarten is high. It is recommended to ensure that the **education and training provided in the educational institutions matches the skills that are in demand** from employers. It is also recommended to **strengthen job training and placement programmes for your people and to offer entrepreneurship skills. Reinstate the Youth Help Desk** as an information centre.

Empowerment of parents and caregivers

It is recommended to **identify parents and caregivers with vulnerable children at risk of poor stimulation, ill health, abuse and neglect, and children with developmental delays or disabilities, and offer parent engagement programmes to support early stimulation.**

⁹⁸ The World Bank plans to publish a public expenditure review of the education sector in 2020, see <https://www.worldbank.org/en/country/sintmaarten/brief/about-sint-maarten-recovery-trust-fund>.



5.

Physical and mental health
of children and adolescents

5. Physical and mental health of children and adolescents



What the Convention on the Rights of the Child states:

Children have the right to live. Governments should ensure that children survive and develop healthily (CRC, Article 6).

Children have the right to good quality health care – the best health care possible – to safe drinking water, nutritious food, a clean and safe environment, and information to help them stay healthy. Mothers should have appropriate pre-natal and post-natal health care (CRC, Article 24).

Ensure healthy lives and promote well-being for all at all ages (SDG Goal 3). This includes 13 targets, many of which are relevant to the well-being of children and adolescents, including targets to reduce maternal and neo-natal mortality; end the epidemics of Acquired Immune Deficiency Syndrome (AIDS), tuberculosis, malaria; reducing premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being; strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol; ensure universal access to sexual and reproductive healthcare services, including for family planning, information and education; achieve universal health coverage, including financial risk protection, access to quality essential healthcare services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

Limitations of this chapter

There is an important constraint to this chapter, namely the limited availability of recent, comprehensive, and disaggregated health information on Sint Maarten, which has narrowed the scope of the analysis.

Understanding how diseases and unfavourable health patterns are distributed and which population groups are most affected depends on the availability of reliable and comparable data. It must be disaggregated (e.g. by age, gender, personal condition, economic status) and collected at different moments in order to keep records, and subsequently address equity issues. Especially for children, timely information around when and where nutrition and health interventions are necessary is important in order to prevent lasting harm.⁹⁹

Building data and knowledge on the well-being of adolescents is key to support appropriate policies and services, by collecting routine administrative data (standard indicators such as pregnancy, dietary habits, human immunodeficiency virus (HIV), sexually transmitted infections, mental health and so on); as well as by developing qualitative surveys that will support policy refinement with the identification of barriers to access, and existing bottlenecks in service delivery.

Since Hurricane Irma there have been no comprehensive health surveys, surveillance reports, or studies on public health, meaning that relevant studies date back as far as 2013 and 2015. In 2019 PAHO conducted a Situation analysis on the prevention and control of non-communicable diseases which also largely builds on the 2013 and 2015 studies.¹⁰⁰ There is a need to rebuild and update health data on the different health indicators to be able to assess the situation of children more accurately.

Children in need of health care in Sint Maarten

When considering how health and the well-being of children and adolescents manifest themselves on Sint Maarten, it is critical to emphasise the importance of family living environments and traditions. Fundamentally, safe drinking water and sanitation, adequate food and nutrient intake, and a healthy home environment are necessities for good child health and well-being. Additionally, the inadequate living conditions and challenging circumstances such as poverty and violence frequently correlate with household income poverty and often have a causal relationship with poor health outcomes and chronic non-communicable diseases (CNCD).¹⁰¹

99 UNICEF (2012).

100 PAHO (2019).

101 Retrieved from: <https://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>

The following indicators are taken from a report from 2013 that presents a snapshot of living conditions affecting the health and well-being of children and adolescents on Sint Maarten.

Table 13. Health indicators of children and adolescents in Sint Maarten

Indicator	Comment
88% of adolescents live with their biological father, biological mother, or both, while the remaining 12% live with neither biological parent.	The adolescent health survey in Sint Maarten was conducted with a sample of approximately 10% of adolescents aged 13-19, the majority of whom were attending educational institutions. ¹⁰²
Mental health 53.5% had been depressed and felt hopeless 29.8% had thoughts of suicide over the past year 13% attempted suicide once 14% attempted suicide more than once	
Involved in physical fight in the past year 12-14 year-olds: once (20%), twice (21%) 15-19 year-olds: once (16%), twice (18%)	
35.9% had smoked, and all of those first tried a cigarette before turning 16 61% had drunk alcohol, with 4.1% being heavy users of alcohol 20.2% had used marijuana, with 7.8% having first used it by the age of 13	
Causes of problems at home: 19.6% drinking issues 10.7% mental health issues 7.6% drug issues 13.3% violence	
Dietary habits In the past 7 days: 30% ate no fruit 26.9% ate no vegetables 46.1% drank soda/pop 2 or more times a day 28.4% ate fried foods 2 or more times per day 20% of adolescents experienced hunger over the past 30 days because there was not enough food in the house.	
Living accommodations:¹⁰³ 69.7% have 1 or 2 bedrooms in their home 24.4% live with more than 4 persons 63.2% have monthly rents between USD 280 and 1,120	

102 VSA & PAHO/WHO. (2013).

103 STAT. (2017b).

Mortality

According to PAHO data there is an average of 171 deaths per year.¹⁰⁴ The 2017 statistical yearbook notes for 2016 a total number of 160 deaths, and a mortality rate of 4.1 per 1,000 inhabitants.¹⁰⁵ There are no recent official data related to child and infant mortality rate on Sint Maarten.

Communicable diseases and immunisation

The VSA offers free vaccinations through the Baby Clinic and schools, and uses a bus to deliver its outreach vaccination programmes. Coverage levels have remained high since 2011 with approximately 97 percent of new-borns receiving the required vaccinations. Vaccination coverage for 2014: diphtheria, tetanus, pertussis, polio and haemophilus influenzae type B was 94.8 percent; measles, mumps, and rubella coverage reached 92.3 percent, and for hepatitis B it was 95.2 percent.¹⁰⁶ In 2013, the human papilloma virus vaccine was for 9-10 year old pre-adolescent girls. Thirteen cases of chicken pox were recorded in 2015.

HIV/AIDS

An increase in the number of new cases of HIV is noted over a period of 5 years with 18 reported cases in 2011, 19 in 2012, 21 in 2014, and 26 new cases recorded in 2015. New cases continue to affect the 20-44 age group. In 2013, 83.3 percent of adults diagnosed with HIV were being treated with antiretroviral drugs 12 months after diagnosis. In this period, there have been no vertical transmissions from HIV-positive mothers to children.¹⁰⁷

104 Retrieved from: https://www.paho.org/salud-en-las-americas-2017/?page_id=2235

105 STAT. (2017b).

106 UNDP. (2015).

107 STAT. (2017b).



Vector-borne diseases

On Sint Maarten, 35 percent of the respondents to the 2015 national health survey said they were severely exposed to mosquitoes at home, and severe exposure to rodents was reported by 10 percent of the respondents. The prevalent mosquito-borne diseases on Sint Maarten are chikungunya, Zika, and dengue fever. Twelve percent of the population contracted dengue fever during their lifetime, and 16 percent had chikungunya during their lifetime.¹⁰⁸ The first confirmed case of chikungunya was recorded in December 2013 and 8 cases were confirmed for the year. There were no autochthonous malaria cases reported in 2010-2013, although two imported cases were noted. The number of dengue fever cases rose from 24 in 2014 to 137 in 2015. Salmonellosis was the leading enteric disease reported: 15 cases recorded between 2010 and 2015.¹⁰⁹

Chronic non-communicable diseases

CNCDs are non-contagious diseases which cannot be transmitted from one person to another. Examples include: cancer, diabetes, asthma, and strokes. CNCDs are increasingly replacing malnutrition and infectious diseases as major health issues, which necessitates very different equipment and strategy to meet the new supply, demand, and quality standards in healthcare services. To achieve this, the following are required: (i) different equipment (lab set-ups and x-ray tools) to investigate and diagnose CNCDs using delicate imaging instruments; (ii) a change in outreach strategies including rigorous efforts to equip health personnel with the skills to monitor and communicate for behavioural change; and (iii) a higher quality of human resources prepared to handle patients dependent on drugs and alcohol as a result of stressful home and work environments. Additionally, unlike the fight against infectious diseases, efforts to reduce the incidence of CNCDs will not produce immediate results, but will rather require long and sustained input to register significant change.

In 2017, the Food and Agriculture Organisation (FAO) and Pan-American Health Organisation (PAHO) warned that obesity and overweight were on the rise throughout Latin America and the Caribbean, with higher prevalence among women and children.¹¹⁰ This trend is evident on Sint Maarten as well. Of the adults on Sint Maarten, 29% are obese and 38% are pre-obese. In the Caribbean region, between 28% and 35% of children aged 4-20 years are overweight and around half of them are obese.¹¹¹ Dietary habits among youth are worrisome and call for a change to healthier eating habits (see Table 13 for indicators). Reduced consumption of traditional foodstuffs and the increased consumption of ultra-processed products have become a problem for island populations who are net food importers. The change in dietary patterns is equally linked to economic growth, higher average incomes, and urban lifestyles (often including parents working two or three jobs) that are trending in the subregion. Inflation is another important factor: the price of food almost doubled between 2006 and 2016. The price of healthy products, such as fruits, vegetables and potatoes became even 2,5 times more expensive.¹¹²

¹⁰⁸ University of the Virgin Islands & University of Sint Maarten. (2015).

¹⁰⁹ STAT. (2017b).

¹¹⁰ FAO & PAHO/WHO. (2017).

¹¹¹ CARPHA. (2014).

¹¹² STAT. (2017b).

The PAHO/WHO 2013 KAP survey data also showed that 20 percent of adolescents have experienced hunger which indicates vulnerabilities regarding access to food.¹¹³

The 2015 Health Survey revealed that 85 percent of the population (based on a representative sample) said they were extremely happy and full of life. The status of their health was characterised by another set of data that includes the following: 48 percent do not participate in light activities, walking, stretching or light swimming; 7 percent of the population smokes actively; 28 percent consume alcohol monthly and 15 percent reported having driven under the influence; 38 percent are pre-obese and 29 percent are obese. Prevalent diseases or conditions include consequences of heart attacks (37 percent); high blood pressure (31 percent); diabetes-related complications (18 percent); and high cholesterol (18 percent).¹¹⁴

Data from PAHO/WHO 2013 KAP survey indicated that approximately 15 percent of the young people were physically active for at least 60 minutes for all seven days of the week. Almost 50 percent exercised for an hour on 1-3 days per week.¹¹⁵

What the interviewees said:

“community outreach... check blood pressure, etc. But they mostly see that root causes of poor health are behaviour, lack of knowledge and poverty”

“problem with health information system is getting data from private providers.... Therefore, we don't get the full picture”

“hard to know why children not getting vaccinated. Because of attitude. Maybe if system shifts to walk-in vs appointment.”

“generation change in health professionals... used to be older nurses, now staff is much younger.”

“too much extreme poverty... 3 people living in one-room shacks”

“Chinese medicines are cheaper but not always best”

Disability

The population with different forms of disability counted 3,843 people in 2011, with almost 62 percent (2,370 individuals) having visual impairments, followed by 29 percent (1,112 individuals) living with multiple disabilities.¹¹⁶ It was not possible to analyse child disability data as the information is not disaggregated per age group.¹¹⁷

113 VSA & PAHO/WHO. (2013).

114 University of the Virgin Islands & University of Sint Maarten. (2015).

115 VSA & PAHO/WHO. (2013).

116 STAT. (2011).

117 STAT. (2017b).

The Sister Basilia Centre is the only day care facility for persons with disabilities on Sint Maarten. It was opened in August 1984 by the Catholic Sister of Verschooten and is currently run by the WYC Foundation. A maximum of 65 clients can be accommodated, and presently 57 are enrolled. The centre has full wheelchair access and offers tailor-made daily programmes for people with physical and intellectual disabilities, so that each client's development and goals can be realised.

Environmental public health hazards

The landfill in Philipsburg is the most visible environmental public health hazard for the population, including new-borns, children, and adolescents. It is in the near vicinity of the city centre and densely populated residential areas. The debris of Hurricanes Irma and Maria formed 100,000m³ of additional landfill, with a new, smaller dump being created next to it in response.¹¹⁸ The landfill has grown over 30 years and various forms of waste, including toxic and chemical waste, is not separated. There have been regular spontaneous fires in the landfill since the hurricanes, sending black smoke in various directions across the island. Air pollution measurements that took place nearby the dump in early January 2019 did not detect any toxic fumes, but there were no open fires during the research period.¹¹⁹ Citizens notice and complain about increased health complications when there are open fires. Two citizens won a court case against the government in 2019, thereby obliging the government to pay a penalty for each day after May 2020 where there is still no plan to stop the open fires on the landfill.¹²⁰

Mental health

Mental health is an essential component of a person's health situation. For adolescents, mental health quality can influence adulthood and have an impact on accessing opportunities in the future. According to PAHO/WHO, multiple factors determine an adolescent's mental health condition, including stress, pressure to fit in, quality of home life, and their relationships with peers. Further issues such as exposure to violence, socio-economic problems, discrimination, stigma, and access to services are also attributed to deteriorating an adolescent's mental health condition. In this sense, adolescents from vulnerable groups and backgrounds should receive special attention in mental health care strategies. A 2016 PAHO/WHO study in 6 island states, among them Sint Maarten, found statistically significant associations between mental health and connectedness. Respondents with very low to low family and school connectedness were more likely to feel sad or hopeless for more than a day, to consider suicide, and to attempt suicide.¹²¹

According to the PAHO/WHO survey shown in Table 13, almost 30 percent of adolescents and young people from 13-19 years of age "thought of suicide and 13 percent attempted to do so". No recent update of existing data was found to enable the analysis of the trends concerning adolescents' mental health issues. The study also indicated that "female adolescents have significantly poorer

118 Retrieved from: <https://www.worldbank.org/en/news/press-release/2018/12/20/new-us25-million-grant-to-help-st-maarten-improve-debris-management>

119 Retrieved from: <https://www.rivm.nl/publicaties/investigation-of-air-quality-around-landfill-sint-maarten-2019-measurements-and-results>

120 Retrieved from: <http://www.dutchcaribbeanlegalportal.com/legal-documents/judgments/137-judgements/9250-sint-maarten-dumpsite-verdict>

121 PAHO/WHO. (2016).

mental health than males”, and that 51 percent of adolescents sometimes or always felt lonely, whilst 53 percent felt depressed and hopeless.

The Sint Maarten Mental Health Plan, launched in 2014, noted that undocumented information emerging from residing psychiatrists on Sint Maarten acknowledged suicide as a major challenge that is seriously neglected due to the absence of proper data reporting suicide and suicide attempts. Persons from age 18 to 35 is the most affected group.¹²²

Mental health during and after emergencies

Hurricanes Irma and Maria had a severe effect on the mental health and well-being of the population of Sint Maarten. The UNICEF Netherlands post-Irma protection needs assessment found that the Association of Psychologists and Allied Professionals (APAP) provided the core of mental health support through clinical care.¹²³ Immediately after the hurricanes, there were radio sessions sensitising people on typical reactions to stressful and traumatic events. The aim was to help people normalise their reactions, recognise whether they needed help, and to know from where to seek it.¹²⁴ There was little community-based or non-clinical psychosocial support. In addition to the work that the education sector had provided on psychosocial support, there was a need to strengthen the continuum of care in the protection and well-being services. First responders, those working directly with children and caregivers, and community leaders would benefit from Psychological First Aid trainings by culturally competent actors. In 2018, 98 teachers were trained in the Return to Happiness (RTH) method for psychosocial support. RTH is a psychosocial recovery programme for children aged 5-12 years who have experienced the trauma of natural disasters, conflicts or violence.

After Hurricane Irma, many respondents exhibited signs of mental health conditions including “cumulative stress, sleep difficulties, worry, irritation, verbal and physical aggressions and tendency to isolation”.¹²⁵ Furthermore, the respondents indicated stigma around the term ‘psychosocial’, as it is perceived as synonymous with being crazy. A possible impact of this cultural barrier is that it hinders open demand for mental health services, thus downplaying its importance.

According to the assessment, people were very stressed and there “was an elevated sense of competition to collaborate” and the “lack of social spaces and facilities for community activities” contributed to limited engagement and connectedness on the island. The youth groups described “not having anywhere to hang out”, and adult groups described “more youth on the streets at night”, which links to a general feeling that the “island is only for tourists and businesses”.¹²⁶

122 VSA. (2014).

123 UNICEF Netherlands. (2017a).

124 Netherlands Red Cross. (2018).

125 Idem.

126 Idem.

Sexual and Reproductive Health

The PAHO/WHO 2013 KAP survey among a sample of adolescents from 12-19 years-old, found that the median age at which females had their first sexual experience was 14, and 13 for males. Almost 57 percent reported that they had never had sex. Abstinence and protection were considered important attitudes for prevention. Abstinence was higher amongst girls, at 63 percent, than among boys: 49 percent.¹²⁷ A very worrying finding from the study published in 2016 by PAHO/WHO that was conducted in 6 island states, among them Sint Maarten, is the high reported level of forced sexual initiation among both girls and boys, at close to or more than 50%.¹²⁸

Concerning sexual behaviour, 60 percent of the adolescents stated they used a condom during the first time they had sex, with no significant differences in reported consistency of condom use by sex or age group. Two-thirds of the sexually experienced participants in the sample said they used a condom during the last time they had intercourse. Additionally, 34 percent of the female adolescents and 25 percent of the male adolescents showed a comprehensive knowledge of HIV.¹²⁹

On gender norms and patterns, 68 percent of the girls disagreed with the statement that “it is important for a girl to have a baby to feel like home”. Amongst male respondents a progressive attitude could be noted, as 97 percent disagreed with the statement that “it is acceptable to hit his woman, a wife or girlfriend”.¹³⁰

Adolescent pregnancy

Adolescent pregnancy prevents especially adolescent girls to fully enjoy adolescence and youth. It may be related to different factors such as poverty, low education level, gender inequalities and cultural issues such as negotiating safe sex with the partner, for instance. For some young people the learning of sexuality is experienced in the light of gender inequality, permeated by violence or little capacity for reproductive decision or planned pregnancy.

The 2013 PAHO/WHO survey indicated that among the research sample of 114 persons, “9 percent of sexually experienced in-school survey participants had either been pregnant or got someone pregnant”. In the out-of-school sample, the rate of pregnancy was 23 percent.¹³¹ The 2016 PAHO/WHO study found significant associations between low family connectedness and early sexual initiation and pregnancy, and low school connectedness and pregnancy.¹³²

Access to information and sexual and reproductive health services for boys and girls are essential, especially for out-of-school adolescents. Moreover, due to the higher prevalence of pregnancy among out-of-school adolescents, it becomes important to explore possibilities for an inclusive

¹²⁷ VSA & PAHO/WHO. (2013).

¹²⁸ PAHO/WHO. (2016).

¹²⁹ VSA & PAHO/WHO. (2013).

¹³⁰ Idem.

¹³¹ Idem.

¹³² Idem.

returning to school policy, parenting support services, and insertion into the labour market with government support for such adolescents.

Events of abortion were hardly found in the PAHO/WHO survey. The survey indicates that the fact that abortion is forbidden on Sint Maarten might have influenced the respondents. It should be noted that abortion is legal in Saint-Martin.

Concerning adolescents accessing health information and services, the internet was mentioned as a good source for health information. Almost “two-thirds of participants indicated that health providers treated them with equal care and respect”. Confidentiality was an issue as 23 percent of the adolescents involved in the survey were concerned about sharing information.¹³³

Legal framework and policies

Even though Sint Maarten has a privatised health care system, the Ministry of VSA remains responsible for securing quality health care and for developing legislation, guidelines, policy, and agreements/partnerships with specific entities. Sint Maarten has a 2015-2019 Country Cooperation Strategy with PAHO/WHO providing technical cooperation.

The SZV Social & Health Insurances administers and manages the national health and social insurance schemes, including general old-age insurance, widowers’ and orphans’ insurance, accident insurance, sickness benefits insurance, severance pay insurance and general insurance for exceptional medical expenses (long-term). According to PAHO/WHO, 30 percent of the population is uninsured, and 10 percent of the population has private health insurance.¹³⁴ There are several reasons for not being insured: too expensive (19%), prefer to pay on the spot (12%), and over half of the respondents cited “other reasons”, which include: unemployment, not having the required documentation, or their insurance expired.¹³⁵

With regards to mental health, Sint Maarten has invested in developing a strategic vision for its mental health system since 2012. In 2014, the National Mental Health Care Plan 2014-2018 was approved and launched with support from the World Health Organisation. The plan recognised the importance of addressing mental health issues with a comprehensive and participatory approach. An evaluation of the progress made since the plan was adopted would be an important basis for future work in the mental health services. No further information was available concerning the update of mental health legislation and policy.

¹³³ Idem.

¹³⁴ Retrieved from: <https://www.paho.org/salud-en-las-americanas-2017/?p=4304>

¹³⁵ University of the Virgin Islands & University of Sint Maarten. (2015).

Services

The health care delivery system on Sint Maarten comprises primary, secondary, and tertiary health care. Primary healthcare services are responsible for providing (preventative) measures that promote healthy lifestyles. Primary health care is delivered by general practitioners, family physicians, dental care providers, and paramedics.

Secondary health care entails specialised services consisting of clinical and outpatient care, provided by nurses and medical specialists. The Sint Maarten Medical Centre (SMMC) is a private, non-subsidised medical facility supplying primary and secondary health care. Ambulance services are provided by VSA under the Public Health Department. On Sint Maarten, tertiary care patients are referred to other countries for specialised diagnostic facilities, and specific operations and treatment.

Efforts to strengthen, update, and automate the health information system were underway when Hurricanes Irma and Maria devastated the island in September 2017. The damage to the SMMC will be repaired by the Sint Maarten Hospital Resiliency and Preparedness project, which includes construction of a new and larger facility that will be more resilient to climate shocks.¹³⁶ The new hospital will expand bed capacity from 66 to 110, improve the scope and quality of health services (with new operating theatres and larger areas for ambulatory care), reduce costly overseas medical referrals, and strengthen preparedness and delivery of medical services in case of future

136 Retrieved from: <https://www.worldbank.org/en/country/sintmaarten/brief/about-sint-maarten-recovery-trust-fund>

emergencies and extreme weather events. The hospital withstood the 2017 hurricanes and kept functioning throughout, though the building would benefit from being modernised.

A total of 135 doctors and specialists were registered in 2017 including: 28 physicians, 3 general surgeons, 3 paediatricians, 11 psychologists, and 4 psychiatrists. No dental hygienists or child health specialists are registered on Sint Maarten. Twelve pharmacies are located on the island with 18 pharmacists. The number of nursing personnel has significantly increased from 45 registered nurses, 17 licensed practical nurses, and 5 nursing assistants in 2013 to 115, 30, and 8 respectively in 2015. However, the number of midwives has decreased from 2 to 1 during the same period.¹³⁷

Collective Prevention Services

The CPS is one of the executing agencies of VSA. CPS is divided into two sections. Section General Health Care and section Youth Health Care. The key tasks of CPS are to promote public health of the population in general and of specific target groups; to ensure the registration, control and timely follow up of diseases, developmental conditions and disorders; and to ensure a collective preventive approach by means of dissemination of public health promotion and preventive information.¹³⁸

The Baby Wellness Clinic falls under the Youth Health Care section and covers pregnant women and 90 percent of children aged 0-4 years with regular check-ups, vaccinations, and screenings of height and weight. They also care for school-age youth and offer dental care.

Other health care providers

White and Yellow Cross (WYC): the WYC provides care for the elderly and a residence for the disabled, specialising in nursing home care, geriatric care, and rehabilitation. It also provides district nursing: home care, nursing care, and mother-child care. WYC is subsidised by the government.

Sint Maarten Health Care Clinic: the clinic provides various forms of physical therapy for all age groups, including to public facilities such as the hospital and prison.

Mental Health Foundation (MHF): persons needing mental health care make use of the subsidised mental health facility ran by the MHF, which has 10 beds available and also provides outpatient care. The MHF has 26 staff members.¹³⁹ Three new psychiatrics were introduced in 2020 and they “received acknowledgement from the Reno Foundation in the Netherlands” which allows MHF to train psychologists to handle patients with autism spectrum disorder. According to the foundation data, the MHF “had a record number of crises, upwards of 500”, yet there are currently 20 patients in need of homes.¹⁴⁰ MHF is subsidised by the government.

¹³⁷ STAT. (2017b).

¹³⁸ Retrieved from: <http://www.sintmaartengov.org/government/VSA/Pages/Department-of-Collective-Prevention.aspx>

¹³⁹ PAHO Country Cooperation Strategy 2015-2019.

¹⁴⁰ Retrieved from: <https://thedailyherald.sx/islands/mental-health-foundation-introduces-new-psychiatrists>

Windward Islands Emergency Medical Services: provides pre-hospital and emergency medical training to the community of Sint Maarten, in support of pre-hospital care providers, fire fighters, police officers, schools, sports organisations, corporations, and communities.

Sint Maarten AIDS Foundation: the foundation provides prevention services, such as awareness raising on HIV/AIDS among the general population, and provides care for people living with HIV/AIDS.

Sint Maarten Cancer Foundation: the goal of the foundation is to inform the general public about prevention, treatment of, and dealing with cancer.

Sint Maarten Diabetes Foundation: promotes awareness on diabetes and offers free blood sugar testing and blood pressure measuring, including outreach services.

The Turning Point Foundation: opened in 1989 as a substance abuse, rehabilitation and prevention centre. It provides drug rehabilitation programmes for voluntary and court-mandated clients, including through: inpatient treatment, outpatient treatment, early recovery, group recovery, after care, family support, urine drug testing, and drug prevention.

What the interviewees said about drugs:

“there is a crack house on the island. Mostly older guys living there...”

“drugs for poor: using Sprite with cough syrup vs pills with codeine.”

“drug counselling not available for youth... there is a substance abuse centre for adults.”

Conclusions and recommendations

As mentioned in the introduction of the chapter, the lack of more recent data (after 2015), limits the analysis of the current situation of children regarding their health, factors influencing health and access to health care services as well as trends.

Legislative frameworks and policies

Given the steady increase in CNCs, including obesity in children and adolescents, which are mostly related to lifestyles and eating habits, it is **recommended to develop and implement policies to strengthen preventative and curative services for CNCs, also targeting children, adolescents and young people.**

Given that around 30 percent of the population is not insured for health care, their access to health care services is probably limited. **It is recommended to work towards affordable universal access to health care for all, including undocumented migrants.**

Hurricane Irma increased the need for and demand of mental health services. It is **recommended to review and update progress made under the 2014-2018 National Mental Health Care Plan,**

evaluate, and to invest in easily accessible non-clinical psychosocial support services, for example in schools and communities.

Coordination and Cooperation

Strengthening cooperation and collaboration with other sectors is key. **It is recommended that the health sector strengthens inter-sector cooperation aimed at providing an integrated approach for individuals and their health needs, especially the most vulnerable groups.** For instance, consultations with representatives from the education sector indicated the need to strengthen cooperation the health sector on issues pertaining to the mental health of students and teachers, especially after the hurricanes.

Data and information management

There is a large data gap on health indicators on children and adolescents. **It is recommended to step up efforts to collect data and update the standard health indicators related to women, children, and adolescents. It is important to look at equity issues,** and the collection and analysis of data on qualitative determinants, shortfalls, and challenges concerning health. Improved data should identify and support the analysis of groups considered to be at risk of exclusion in the existing monitoring tools.

It is recommended to review and update information on the functioning of preventative and curative care after Irma, as well as access to health services for different segments of the population, including the undocumented children and adolescents.

It is recommended to continue with the efforts to build an automated Health Information System to deliver routinely quality data collection (accurate, reliable, valid) so that it could potentially link with different datasets once built. This creates an opportunity to better comprehend individual or familiar situations when linking the access of health, protection, education, and other inter-related services.

Health data gaps and needs can be supported by sectorial assessments and make use of consultations concerning children, and for some indicators, women, since the conditions in which mothers live allows for increased understanding of some of the determinants of children's health and well-being since conception.

It is recommended to collect, update and analyse age-disaggregated data on adolescents. Access to data on adolescents is important to build knowledge on what shapes the well-being of adolescents on the island. Reliable routine data from services can be complemented with research and surveys on the adolescents' access to health information, adolescents' health-related behaviour, and existing needs. **It is strongly recommended to update the 2013 VSA and PAHO/WHO research on adolescent health and sexuality.**

All children have the right to basic health care but for the group of undocumented children it is not known whether they do have access. It is recommended to deepen knowledge of the situation of

the undocumented children on the island, the specific health risks among these groups and the level of accessibility to healthcare providers.

Since the 2017 hurricanes, no comprehensive survey on mental health has been conducted, whereas the events did have a strong impact on the mental health and wellbeing of the population, including children and adolescents. **It is recommended to capture, collect, and analyse existing information on the mental health situation on the island focusing on vulnerable groups for sector policy and communication strategies.** The information can be used as a basis for awareness raising initiatives to minimise the stigma and misunderstanding around mental health.

After hurricane Irma, there was no survey or study on the psychological needs of the population and the preferred and required type of support services, which could range from public information to psychosocial support and from community support groups to clinical psychological aid. **It is recommended to promote the use and production of data on the psychological needs after an emergency** that will allow strategic decisions to be made so that the stress experienced by children, families, and professionals is minimised.

Service delivery

CNCDs have become major health issues. **The health care system should address the capacity to meet a shifting type of demand for services.** It is recommended to invest in: (i) different equipment (lab set-ups and x-ray tools) to investigate and diagnose CNCDs using delicate imaging instruments; (ii) a change in outreach strategies including rigorous efforts to equip health personnel with the skills to monitor and communicate for behavioural change; and (iii) a higher quality of human resources prepared to handle patients dependent on drugs and alcohol as a result of stressful home and work environments.

It is recommended to strengthen specialised services to reach adolescents and young people. The Youth Help Desk could serve as a suitable source of information for youth on sexual and reproductive health.

To better prepare for emergency situations, it is **recommended to develop and implement Psychosocial First Aid training programmes for first responders and those working directly with children and caregivers.**

Empowerment of parents and caregivers

Obesity, also in children, has been on the rise on Sint Maarten as well as in the wider subregion. Stimulating healthy eating habits among children and adolescents should support positive changes envisaged for Sint Maarten. **It is recommended to use different appropriate strategies to reach adolescents, together with delivering information on risky behaviours through education campaigns and engagement of key stakeholders such as schools and community health centres.**



6.

Overview of
recommendations

6. Overview of recommendations

In order to achieve and monitor progress against the rights of children as enshrined in the CRC, **it is recommended to approve the draft national decree ('landsbesluit') to establish a national child rights committee tasked with the execution of the approved action plan on children's rights and monitoring the advancement of children's rights in the country.**

A number of recommendations are related to data collection and data management. Policymaking is stymied by lack of information and analysis. Initiatives currently underway to build statistical capacity on Sint Maarten should be accelerated, so that policymaking can become more data-driven and so that the impact of policy decisions can be measured, and corrective action taken to boost progress. Efforts on Sint Maarten will be needed to improve data collection and data management and to train staff in the required skills. Information on the service implications and costs of proposed reforms is needed. One of the most central datasets, the Civil Registry is unreliable: it is urgent and important to clean the Civil Registry of invalid records and entries. There is also inconsistency in the way that children are registered in the Civil Registry in comparison to the school registers, which makes it impossible to reconcile the data.

It is also strongly **recommended to further research the situation of undocumented children and the extent to which they have access to public services** on both the Dutch and French parts of the island. Another overarching recommendation is to **ensure that important policies for children that have been in draft form, are adopted and implemented.**

Protection

1. Develop a roadmap (with sufficient resources) towards the adoption and implementation of the draft Action Plan on Child Abuse (2015 with update in 2019), the draft Policy for Preventing Domestic Violence, Child Abuse, Forced Prostitution, Trafficking in Persons and Gender-based Violence in Sint Maarten (2018), and the Integrated Youth Policy Plan 2020-2025, as well as any other draft policies.
2. Continue the recently started (2019) bottom-up approach of discerning ways to identify and report child abuse with first-line response services, and strengthen knowledge and capacity to provide rapid and effective response measures.
3. Invest in strong capacity building efforts for personnel of the Miss Lalie Centre.
4. Create options for alternative sentences, such as a HALT measure, as well as possibilities for institutional placement for psychiatric treatment (PIJ), as this is currently not available.

5. Address the lack of a facility or treatment for female juvenile offenders.
6. Analyse the current situation of foster homes and group homes against the UN Alternative Care guidelines and develop a roadmap towards policy development and the implementation of these homes. Given the precarious situation of foster care placement capacity, it is recommended to address this challenge with high priority.
7. Finalise an MoU between the CoG and the police on disaster preparedness and response, and sign and operationalise the inter-island protocol on the evacuation of children during emergencies.
8. Establish and maintain a permanent and active multi-stakeholder group, including service-providing NGOs, with a designated government lead and annual workplans.
9. The multi-stakeholder group should also include disaster preparedness activities in the annual workplans and maintain working relations with the national disaster management structure, particularly ESF 7.
10. Establish clear and uniform definitions on child abuse, domestic violence and neglect etc. to be utilised by all stakeholders. Uniform definitions will improve reporting, data collection and analysis, and support the standardised provision of services.
11. Adopt commonly agreed upon child protection definitions and indicators, and train all child protection actors to work with these in their day to day information management.
12. Ensure the disaggregation of data in order to gain a solid insight into the specific vulnerable groups and issues that should inform policies and service provision.
13. Establish a data mechanism or tool, for example a 'Youth Monitor', to routinely collect and collate data from the various child protection actors, present them in an analysis, and disseminate this among the actors and other stakeholders. This will motivate all actors to keep feeding into the data mechanism.
14. Structurally collect data from schools about incidences of violence on or around school premises to gain a better insight into the issue.
15. For emergency situations, use an information management system and create robust tools to assess the safety and well-being of children after a disaster.
16. Construct improved reporting codes and service delivery, and create and implement awareness programmes, for the general population, about reporting violence against children, in languages appropriate to the various target groups.
17. Sensitise the police force about dealing with cases of domestic violence and child (sexual) abuse in an appropriate and sensitive manner through trainings, and consider establishing a special Victims Unit with trained staff, and inform the general population about this service.
18. Strengthen child protection services to better address individual needs, including the provision of an integrated and comprehensive package of care and support services (housing, psychosocial support), for survivors of domestic violence, including child sexual violence.
19. Support parents and teachers to use positive, conscious disciplining methods by expanding access to parenting programmes. Map the existing parenting courses offered

through the CoG, SSSD, and primary schools to identify and address any potential gaps and overlaps in target groups, content and focus areas.

20. Analyse the needs and requirements of services for female juvenile offenders and at-risk girls.
21. Develop funding models to support the strengthening of the foster care system to deliver timely and equitable support services to foster families.
22. For emergency situations, fortify protective services for all evacuating children, and improve screening at points of departure.
23. Ensure that cultural and age-appropriate community-level psychosocial support is provided, and that mental health services are made available.
24. Identify new opportunities for providing parenting information through existing services, such as day care centres, the Baby Clinic of the CPS, and after-school programmes. Emphasise reaching young parents to improve their parenting skills.
25. Identify opportunities to provide information to prospective parents about family planning.
26. Develop programmes that encourage and support men to have a strong and positive role in the lives of their children.

Education

27. Adopt and implement key draft policies: the ECD Policy Plan, The Integrated Youth Policy Plan, the Safety Net Policy Plan (after-school programmes), and the Comprehensive School Safety Framework.
28. Ensure that the draft ECD Policy Plan is finalised with the inclusion of DRM and psychosocial support strategies, and that it is formally adopted and implemented according to a phased action plan.
29. Continue investing in comprehensive school safety to ensure that the education sector is increasingly prepared for various types of hazards and risks.
30. Include risk management as part of the teacher training curriculum, and develop official education resources for DRM and resilience education.
31. It is recommended to establish stronger cooperation between the education authorities on both the Dutch and French side of the island to manage cross border issues and data.
32. Design and implement a unified model for secondary education, aimed at all schools, using similar learning methodologies and same language of instruction.¹⁴¹
33. Explore and deepen knowledge to create the basis for introducing a unified model for secondary education.

¹⁴¹ The same recommendation appeared in the 2013 Situation Analysis.

34. Analyse the position of private schools and develop a policy to regulate them as educational institutions.
35. Appoint an ECD coordinator to support the inclusion of the early childhood sector in mechanisms and processes for planning, statistics, governance, professional development, disaster management in MECYS, and to coordinate with other ministries to include early childhood sector in protection, security, and social assistance mechanisms.
36. Integrate MECYS into the disaster management system through participative coordination meetings, use of shared protocols and information, and involvement in decision-making spaces related to disaster preparedness and response.
37. Build the capacity of the education sector in data collection, analysis and dissemination as well in monitoring and evaluation of programmes (including programmes that fall under Culture, Youth and Sport) through evidence-based policies and programmes.
38. Register and regulate ECD centres and home-based ECD services as educational institutions in accordance with quality assurance criteria.
39. Secure public private partnership agreements with philanthropic organisations and private sector interests to create innovative financing mechanisms for ECD services.
40. Ensure that the education and training provided in the educational institutions matches the skills that are in demand from employers.
41. Reinstate the Youth Help Desk as an information centre.
42. Strengthen job training and job placement programmes for young people and offer training in entrepreneurship skills to youth.
43. Identify parents and caregivers with vulnerable children at risk of poor stimulation, ill health, abuse and neglect, and children with developmental delays or disabilities, and offer parent engagement programmes to support early stimulation.

Health

44. Develop and implement policies to strengthen preventative and curative services for CNCDS, most notably obesity, targeting children, adolescents and young people and their caregivers.
45. Work towards affordable universal access to health care for all, including undocumented migrants.
46. Review and update progress made under the 2014-2018 National Mental Health Care Plan, evaluate, and to invest in easily accessible non-clinical psychosocial support services.
47. Strengthen inter-sector cooperation aimed at providing an integrated approach for individuals and their health needs, especially the most vulnerable groups.

48. Step up efforts to collect data and update the standard health indicators related to women, children, and adolescents. It is important to look at equity issues.
49. Review and update information on the functioning of preventative and curative care after Irma, as well as access to health services for different segments of the population.
50. Continue with the efforts to build an automated Health Information System to deliver routinely quality data collection.
51. Collect, update and analyse age-disaggregated data on adolescents, e.g. update the 2013 VSA and PAHO/WHO research on adolescent health and sexuality.
52. Research the situation of undocumented children on the island, the specific health risks and the level of accessibility to healthcare providers.
53. Capture, collect, and analyse existing information on the mental health situation on the island focusing on vulnerable groups.
54. Promote the production and use of data on psychological needs after an emergency.
55. The health care system should address the capacity to meet a shifting type of demand for services related to chronic non-communicable diseases.
56. Strengthen specialised services to reach adolescents and young people.
57. Develop and implement Psychosocial First Aid training programmes for first responders and those working directly with children and caregivers.
58. Use different appropriate strategies to reach adolescents, together with delivering information on risky behaviours through education campaigns and engagement of key stakeholders.



List of References

- Augeo Foundation. (2019). *A road towards better recognition and reporting of child maltreatment on Sint Maarten – Observations and a rough outline of a way forwards.*
- Caribbean Public Health Agency CARPHA. (2014). *Safeguarding our Future Development. Plan of Action for Promoting Healthy Weights in the Caribbean: Prevention and Control of Childhood Obesity 2014-2019.*
- Committee on Economic, Social and Cultural Rights. (2017). *Concluding observations on the sixth periodic report of the Netherlands.*
- Department of Youth, MECYS. (2017). *Integrated Youth Policy Framework (draft).*
- Department of Youth, MECYS. (2019). *Overview Legal Frame Child Protection on Sint Maarten.*
- Department of Youth, MECYS. (2020). *Integrated Youth Policy Plan 2020-2025.*
- Dutch Caribbean Legal Portal. (2015, June 1). *New Penal Code for Sint Maarten per 1 June.* Retrieved September 2019, from <http://www.dutchcaribbeanlegalportal.com/news/crime/5325-new-penal-code-for-sint-maarten-per-1-june>
- DutchCaribbeanLegalPortal.(2019,August1).*SintMaartenDumpsiteVerdict.*RetrievedJanuary2020,from <http://www.dutchcaribbeanlegalportal.com/legal-documents/judgments/137-judgements/9250-sint-maarten-dumpsite-verdict>
- FAO & PAHO/WHO. (2017). *Panorama of Food and Nutrition Security in Latin America and the Caribbean.*
- Government of Sint Maarten. (1991). *Leerplichtlandsverordening.* Philipsburg.
- Government of Sint Maarten. (2010). *Constitution of Sint Maarten.* Philipsburg.
- Government of Sint Maarten. (2015). *Sint Maarten Criminal Code.* Philipsburg.
- Government of Sint Maarten. (2018a). *Policy for Preventing Domestic Violence, Child Abuse, Forced Prostitution, Trafficking in Persons and Gender-based Violence in Sint Maarten.* Philipsburg.
- Government of Sint Maarten & World Bank. (2018b). *Sint Maarten National Recovery and Resilience Plan. A Roadmap to Building Back Better.* Philipsburg.
- Government of Sint Maarten. (2018, 14 July). *World Youth Skills Day on July 15.* Retrieved January 2020, from <http://www.sintmaartengov.org/PressReleases/Pages/World-Youth-Skills-Day-on-July-15.aspx>
- Inspectorate of ECYS. (2018). *State of Education Report 2016-2017.* Philipsburg.

- Hermans, B. and Kösters, L. (2019). *Labour force on the Dutch Caribbean Islands*. The Hague: Statistics Netherlands.
- Jones, A. & Trotman Jemmott, E. (2009). *Child Sexual Abuse in the Eastern Caribbean. The report of a study carried out across the Eastern Caribbean during the period October 2008 to June 2009*. Huddersfield: University of Huddersfield and Action for Children.
- MECYS. (2012). *Compulsory Education Legislation*. Philipsburg.
- MECYS. (2016). *Compulsory Education Report 2014-2015*. Philipsburg.
- MECYS. (2017). *Compulsory Education Report 2015-2016*. Philipsburg.
- MECYS. (2018). *Compulsory Education Report 2016-2017*. Philipsburg.
- MECYS. (2019). *Compulsory Education Report 2017-2018*. Philipsburg.
- Merkx, E. & Buurman, L. (2015). *Een onderzoek naar de jeugdcriminaliteit in Sint Maarten*.
- Ministry of Finance. (2020). *The Government of Sint Maarten Budget*. Retrieved October 2019, from <http://www.sintmaartengov.org/government/Pages/Budget.aspx>
- Ministry of Justice. (2013). *National Ordinance on Joint Custody*. Philipsburg.
- Netherlands Red Cross. (2018). *A rapid assessment of the Mental Health and Psychosocial Support (MHPSS) needs of people affected by Hurricane Irma, Sint Maarten*.
- Nienhuser, H. K. (2013). Role of Community Colleges in the Implementation of Postsecondary Education Enrolment Policies for Undocumented Students. *Community College Review*, 42(1), 3-22.
- PAHO/WHO. (2016). *The Health of Adolescents in the Dutch and British Overseas Caribbean Territories*. Washington.
- PAHO/WHO. (2017). *Health in the Americas, Sint Maarten*. Retrieved September 2019, from <https://www.paho.org/salud-en-las-americas-2017/?p=4304>
- PAHO/WHO. (2019). *Situation analysis on the prevention and control of non-communicable diseases on Sint Maarten*.
- Raad voor de Rechtshandhaving. (2016). *Justitiële jeugdinstelling Sint Maarten Nulmeting bij het Miss Lalie Center*.
- Rijksinstituut voor Volksgezondheid en Milieu. (2019, 20 June). *Investigation of the air quality around the landfill Sint Maarten 2019 : Measurements and results of the MOD field visit in*

- January 2019. Retrieved January 2020, from <https://www.rivm.nl/publicaties/investigation-of-air-quality-around-landfill-sint-maarten-2019-measurements-and-results>
- Rikkert, H. (2018). *The 'Pedagogical Climate' in Sint Maarten: An explorative study on the child-rearing styles of parents and the 'village' in Sint Maarten.*
- van Rossum, E. (2016). *The need for a transitional class for immigrant children whose mother tongue is not English in Sint Maarten.*
- Sint Maarten United Christian Democratic Coalition. (2018). *Governing Program 2018-2022: Building a Sustainable Sint Maarten.*
- STAT. (2011). *Census.* Philipsburg.
- STAT. (2017a). *Labour Force Survey.* Philipsburg.
- STAT. (2017b). *Statistical Yearbook.* Philipsburg.
- STAT. (2018). *Factsheet Population: the Population of Sint Maarten 2018.* Philipsburg.
- TEATT. (2019). *Year End Macro Monitor Report 2018/Outlook 2019.* Philipsburg.
- The Daily Herald. (2019, 21 December). *I Can Foundation closed as it loses subsidy, efforts are being made to establish new children's home.* Retrieved January 2020, from <https://smn-news.com/st-maarten-st-martin-news/33586-exclusive-i-can-foundation-closed-as-it-loses-subsidy-efforts-are-being-made-to-establish-new-children-s-home.html>
- UN. (1989). *Convention on the Rights of the Child.*
- UN. (2010). *Guidelines for the Alternative Care of Children.*
- UN Office for Disaster Risk Reduction. (2017). *Caribbean Safe School Initiative (CSSI).* Retrieved September 2019, from <https://eird.org/americas/safe-school-caribbean/2019/index.html>.
- UNDP. (2011). *First Millennium Development Goals report: Curaçao and Sint Maarten 2011.* New York: Author.
- UNDP. (2015). *The Millennium Development Goals Report Sint Maarten, 2011-2015 and Beyond.*
- UNESCO. (2017). Technical Cooperation Group on the Indicators for SDG 4. Retrieved September 2019, from <http://tcg.uis.unesco.org/>
- UNICEF. (2012) *Right in Principle and in Practice: a review of the social and economic returns of investing in children.* New York: Rees et al.
- UNICEF. (2013). *Situation Analysis of Children in Sint Maarten.*

- UNICEF. (2016). *The Multi-Country Study on the Drivers of Violence Affecting Children. A Cross-Country Snapshot of Findings*. Florence: UNICEF Office of Research.
- UNICEF. (2019). *Children Uprooted in the Caribbean: how stronger hurricanes linked to a changing climate are driving child displacement*.
- UNICEF Netherlands. (2017a). *Post-Hurricane Irma Assessment November 2017 – Child Protection Sector*. The Hague: Author.
- UNICEF Netherlands. (2017b). *Post-Hurricane Irma Assessment November 2017 – Education Sector*. The Hague: Author.
- UNICEF Netherlands. (2020a). *A Community-based Child Protection Mapping*. Sint Maarten.
- UNICEF Netherlands. (2020b). *An assessment of the situation of the Early Childhood Development Centre Sector in Sint Maarten after Hurricane Irma*.
- University of the Virgin Islands & University of Sint Maarten. (2015). *“How healthy is Sint Maarten Saint-Martin”, Health Survey Report*.
- Voortgangcommissie Sint Maarten. (2019). *Vierendertigste rapportage aan het ministerieel overleg over de periode 1 april 2019 – 1 juli 2019*.
- VSA. (2014). *National Mental Health Plan, 2014-2018*. Philipsburg.
- VSA & PAHO/WHO. (2013). *Adolescent Health and Sexuality*. Philipsburg.
- Waschke, L. (2016). *Why do Pupils in Primary and Secondary Education in Sint Maarten have Low Test Results in Dutch and Mathematics? An Explorative study of the Impact of Risk and Protective Factors experienced by principals and teachers*.
- Williams, S. (2020). *An assessment of the situation of the Early Childhood Development Centre Sector in Sint Maarten after Hurricane Irma*.
- World Bank. (2018, 20 December). *New US\$25 Million Grant to Help Sint Maarten Improve Debris Management*. Retrieved January 2020, from <https://www.worldbank.org/en/news/press-release/2018/12/20/new-us25-million-grant-to-help-st-maarten-improve-debris-management>
- World Bank. (2019). *About the Sint Maarten Recovery Trust Fund*. Retrieved December 2019, from <https://www.worldbank.org/en/country/sintmaarten/brief/about-sint-maarten-recovery-trust-fund>
- World Bank. (2019). *Sint Maarten Overview*. Retrieved December 2019, from <https://www.worldbank.org/en/country/sintmaarten/overview#1>
- World Health Organisation. (2018). *Non-communicable Diseases*. Retrieved January 2020, from <https://www.who.int/news-room/fact-sheets/detail/noncommunicable-diseases>

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