MIGRATION, MAINSTREAMING, EDUCATION AND HEALTH

***Draft 2B***

Introduction

If well-managed, migration has been recognized by the UN System-wide Task Team’s report Post 2015 Agenda: Realizing the Future We Want for All as an important tool “to ensure that globalization becomes a positive force for all the world’s peoples of present and future generations”. Migration can be an enabler of human development by enhancing people’s income, health and education. An improved standard of education and of physical, mental and social wellbeing not only empowers migrants, but also allows them to substantially contribute towards the social and economic development of their home communities and host societies. However, this can only happen when the rights and wellbeing of all those affected by migration are fulfilled and they are recognized as “positive agents of innovation with human rights.”

The post-2015 development agenda concerns more than anyone the generation being born now. Healthy, safe and well-educated children are the cornerstone of thriving societies, sustainable growth and proper management of natural resources. For over a decade, the Millennium Development Goals (MDGs) have widely benefited children, both boys and girls, and young people. However, “there is major unfinished business as well as emerging and neglected issues that must be addressed boldly in the post-2015 development agenda, to ensure a world fit for children”. One of the flaws of the MDGs is that by relying on national averages they tended to mask inequalities and overshadow structural causes of prolonged deprivation. UNICEF’s decision to refocus on equity for children in 2010 stemmed from this conclusion. Universality is key to ensuring that states take measures to ensure equality of access, opportunity and outcomes.

Education and health for all beyond 2015

Education and health are central to UNICEF’s mandate and key programmatic priorities. Health and education are not only human rights, but also the basis for the realization of all other rights. As such, they are the foundation for human rights-based, equitable and sustainable development and can contribute to specific outcomes such as reduced child mortality and child nutritional growth and cognitive development.

The current global development agenda prioritizes both rights. Three of the MDGs relate directly to health and one to education. Whatever replaces these goals after 2015, health and education are certain to feature prominently. The thematic consultations on health and education in the post-2015 development framework have both highlighted the need to focus not only on access but also on outcomes, and have proposed overarching goals that are universal but allow for targets and indicators that pay special attention to marginalized, disadvantaged and stigmatized groups.

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1 This paper is an overview of some of the issues UNICEF feels deserve attention in the areas of mainstreaming migration, education, health and the post-2015 development agenda from a perspective of children’s rights. Based on survey work and partnerships with governments, it is not intended to be exhaustive but rather as an input to a conversation on these themes which could be addressed more fully through further research into migration’s contribution to health and education and the synergies between these two sectors and mainstreaming concerns.


3 The European Report on Development 2013, page 7

4 UNICEF, Narrowing the Gaps to Meet the Goals. 2010

and address the current exclusion of these vulnerable populations, such as children, adolescents, women, the disabled and migrants, including irregular migrants.

Under the international human rights framework, States “recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health” (Art. 12 ICESCR) and “the right of everyone to education” (Art. 13 ICESCR). When it comes to children, it has been emphatically stated in the Convention on the Rights of the Child (CRC) that all human rights, including economic, social and cultural rights, must be fulfilled for all children within the jurisdiction of States party to the CRC. The CRC Committee and other experts have asserted that the enjoyment of rights stipulated in the CRC is not limited to children who are nationals of a State. In the case of children in the context of migration, the Committee has recently stated that “States should ensure that the rights enshrined in the Convention are guaranteed for all children under a State’s jurisdiction, regardless of their own or their parents’ migration status and address all violations of those rights.”

If the right policies are in place, migration has a great potential to improve access to, and outcomes in, health and education, both for migrants and their families and the societies they leave and join. However, millions of migrants face obstacles in accessing health and education in countries of origin, destination and transit. These represent marginalized populations who must be taken into account in national policies, which in turn must be implemented in the next decade. In addition, children in the context of migration require protection from violence, abuse, exploitation and neglect, to which they are particularly vulnerable, if they are to grow into healthy and well-educated adults.

**Generation 2025**

The world’s population, which reached 7 billion in late 2011, is expected to increase to 8 billion by 2025. Ninety per cent of that extra billion – all of whom will still be children in 2025 – are likely to be born in less-developed regions. The child population in sub-Saharan Africa is growing: by mid-century, one in every three births – and almost one in every three children under 18 – will be African. A significant minority of these children are likely to become migrants. As UN/DESA notes, “all things being equal, younger people are more likely to migrate than older people”. More than two-thirds of migrants originate from the global South, with South-South migration at almost the same level as South-North migration. Increasingly, migration trends, including South-South migration, are blurring the distinction between countries of origin, transit and destination, and a number of middle-income countries facing challenges on all three fronts.

UNICEF has gathered considerable evidence from its experience in the fields of education and health as they relate to children and adolescents in the context of migration. However, these issues should not be seen in isolation. UNICEF supports a holistic and cross-sectorial approach to migration policy-making and believes that planning should be promoted to address the needs of children and young migrants, in transit and destination countries, as well as those of children who remain in countries of origin. In the field of migration and elsewhere, UNICEF has addressed

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7 2012 CRC DGD Report and Recommendations, paragraph 57.
9 UNICEF. Generation 2025 and beyond, Occasional Papers No.1, November 2012
10 Joint GMG Thematic report, Adolescents, Youth and International Migration: Challenges and Opportunities, to be published 2013
health and education issues within the broader social policy context in its national dialogues with counterparts in governments, identifying gaps in provision for the most vulnerable children and promoting social inclusion. UNICEF has also integrated migration into its social protection framework as part of a rights approach to human development.

A good example of this approach is UNICEF’s participation in the Mainstreaming Migration into National Development pilot initiative, led by UNDP and IOM, in four countries, in partnership with other Global Migration Group agencies. UNICEF, alongside other agencies, works closely with a wide range of national government ministries, in countries such as Jamaica and Moldova, to mainstream migration into national development planning. This involves accompanying them through the entire process of situation assessment and analysis, strategic goal-setting, programmatic planning, capacity development, implementation mechanisms and monitoring and evaluation, to ensure the visibility of children and adolescents in the context of migration.

In the same way that migration is being mainstreamed at the national level, the post-2015 development agenda provides an opportunity to integrate migration into the broader development framework, to maximize its positive and minimize its negative impacts on equity outcomes, including on health and education, for children and adolescents.

UNICEF has devoted particular attention to migration’s effect on education and health for children and adolescents left behind by migrating parents. Migration can affect children’s access to education and health care, and possibly education and health outcomes, through economic channels, principally the financial remittances sent back by migrants to their families in their country of origin. It can also affect these sectors through cultural channels (“social remittances”) of communication between migrants and left-behind families and through the effects of family disruption. For adolescents education can equip them with skills that provide them with options in addition to migration. This same age group, though, is also particularly susceptible to psychosocial problems associated with parental separation and changed household dynamics (boys and girls may be affected differently), which may be expressed in terms of risky behaviour (including drug abuse and teenage pregnancy) or mental health issues.

Below is a brief review of the literature on migration’s health and education impacts on children and adolescents left behind along with examples from UNICEF’s own experience in the field.

**Education**

While there seems to be consensus that by increasing household income – primarily through remittances – migration has a positive impact on child school attendance and literacy, the results vary by country, gender and the socioeconomic backgrounds of households. Studies in the Philippines suggest that a 10 per cent increase in remittances relative to initial income increases school attendance by more than 10 per cent and reduces child labour by approximately three

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11 “Mainstreaming migration in development planning may be defined as the process of assessing the implications of migration on any action (or goals) planned in a development and poverty reduction strategy. This means mainstreaming M&D concerns into legislation, policies and programmes at all levels (local, national and, if applicable, regional). It also means integrating M&D concerns at all stages of development planning, including design, implementation, and monitoring and evaluation.” GMG, 2010, Mainstreaming Migration into Development Planning: A handbook for policy-makers and practitioners, page 16

12 UNICEF has also addressed the issue of migrant children in wealthy host countries, including their health and education outcomes. UNICEF Innocenti Research Centre (2010), Children in immigrant families in eight affluent countries. Available at: http://www.globalmigrationgroup.org/uploads/gmg-topics/children/2_A_Children_in_immigrant_families_in_eight_affluent_countries_UNICEF_IRC.pdf

hours a week.14 In Mexico remittances improve child literacy and school attendance rates15, in El Salvador remittances are correlated with a reduction in dropout rates16, in Ecuador remittances have enabled many migrant children to regularly attend school including more elite institutions,17 while in Guatemala remittance-receiving households seem to spend more on education than on consumption.18

Improvements are evident in the Philippines, where remittances are used to send children to private schools, which are considered to be better than public schools.19 Children of Overseas Filipino Worker (OFW) parents exhibit not only better academic performance, but also greater involvement and participation in academic organizations and extra-curricular activities.20 A similar array of positive outcomes has been found in Albania and Moldova.21 The impact of remittances on education is also mediated by the parents’ educational background; in some cases, low educational attainment by parents is correlated to increased years of schooling for girls.22

The effects of migration on education, however, are more nuanced; moderated by age, gender, type of migration (whether international, regional or internal), frequency of parental visits and the socioeconomic characteristics of migrant households.23 Rural Mexico, for instance, has witnessed a decrease in schooling among 16-18-year-old children influenced by migration.24 Remittances tend to increase the number of girls who complete schooling.25 In Ghana households receiving remittances (from both internal and international migrants) do not spend more on education, food and housing than their counterparts who do not receive remittances.26

Overall, children’s academic performance is subject to change following their parents’ migration. Some children do worse because of the lack of parental support and control, as well as the emerging need for them to devote more time to family duties. This is mostly problematic in rural areas with a shortage of labour, where children can be forced to drop out of school to engage in farming in order to support the family.27 Adolescents are particularly affected due to the expectation either to become the new caregiver or the new breadwinner for the family after the migration of one or both of the parents. Improvement in performance at school may be prompted

23 Other factors include mother versus father migration, remittance behaviour, length of absence, frequency of visits, means of communication, household dynamics.
24 World Bank, 2006, International Migration Agenda
26 Adams et al. (2008)
27 Institute for Economy, Finance and Business 2007
by children’s desire to reward their parents’ efforts or to meet their parents’ expectations.\textsuperscript{28} Academic performance is also influenced by the presence of the mother in the household; children whose mother is abroad tend to reject non-compulsory education.\textsuperscript{29}

Most of the studies gauging the impact of migration on education tend to focus on quantity rather than quality; they provide evidence of increases in spending on education but little on outcomes. It is still unknown, for instance, how remittances contribute to the quality of learning among children who have either one or both parents absent for extended periods of time.\textsuperscript{30} Some studies conclude that remittances have minimal or insignificant effects on academic attainment, though they may help children to complete secondary education.\textsuperscript{31} Moreover, evidence regarding the positive impact of remittances on education must be weighed against the negative effect that parental absence – particularly that of the mother\textsuperscript{32} – has on the development and overall school performance of children left behind\textsuperscript{33} and on their rights to maintain personal and direct contact with both parents on a regular basis, as well as their right to parental guidance to support their evolving capacities.\textsuperscript{34}

In countries of origin, inequalities and constraints in the education system may influence adolescents’ decision to migrate. In Jamaica, for example, where for want of opportunities many young people aspire to follow the example of their parents’ generation and migrate, a youth consultation which formed part of the development of a National Policy and Plan of Action on International Migration and Development stressed education and training, including social skills, as a top priority for young Jamaicans. However, education can increase the likelihood of migration from countries of origin. In Ecuador those who migrate are on average better educated than the general population. Likewise migrants’ socioeconomic level tends to be higher than the national average.

\textbf{UNICEF research} in a number of countries confirms that migration’s effects on education for children left behind are mixed. There is evidence that remittances can play an important role in increasing the access to better quality education of children left behind, but that gender differences can play a significant role and large variations in impacts occur.

- \textbf{In Ecuador} a UNICEF study found remittances are frequently directed towards enrolling children in private schools that offer better quality education. In the canton of Cañar, remittances have allowed migrants from rural areas and small towns, including those of indigenous origin, to send their children to bigger cities where schools provide higher quality education.

- \textbf{Work by UNICEF Morocco} indicated that remittances received by migrant households often allow parents to send their children to better quality schools, which in some cases is the primary

\textsuperscript{28} Camacho, Z, and Hernandez B. (2007); Gavriliuc, Cezar, Daniela Platon, and Viorica Afteni. 2006. The Situation of Children Left Behind by Migrating Parents. CIDDCC Study Report. UNICEF
\textsuperscript{30} Gavriliuc, Cezar, Daniela Platon, and Viorica Afteni. 2006. The Situation of Children Left Behind by Migrating Parents. CIDDCC Study Report. UNICEF, page 18
\textsuperscript{31} Sawyer, Adam, and David Keyes. 2008. “Going to School, Going to the USA: The Impact of Migration on the Education of Oaxacan Students.” Paper presented at Working Group on Childhood and Migration: Emerging Perspectives on Children in Migratory Circumstances, June 20-21, Drexel University, Philadelphia, PA
\textsuperscript{33} UNICEF Moldova, undated, 21.
\textsuperscript{34} Convention on the Rights of the Child, Article 5
motivation for the parents’ migration. Remittances have led to better education outcomes and more balanced diets.

- In Guatemala, remittances have led to better access to education and increased consumption, as well as increased access to information technologies that feed into educational processes.

- In the Philippines, remittances were used to send children to private schools which were considered better than public schools.

- In Jamaica education and health were the second set of uses (after day-to-day expenses) to which survey respondents in migrant households said remittances were put. Boys left behind by migrating parents were more likely to stop attending school completely and display more decline in school performance than girls in the same situation.

- In Tajikistan, where education up to 16 is free and universal, remittances appeared to have no effect on pupil enrolment.

- In Moldova, UNICEF surveys found increased household responsibilities for children left behind can lead to a decline in educational performance, particularly for girls. The majority of respondents (99%) believed that a lack of parental support and care, psychological suffering, and the increase in family duties associated with an absent parent negatively impacted education. Almost all children, caregivers, teachers and local authorities surveyed agreed that the academic performance of children left behind was lower than children living with their parents.

**Health**

Migration also affects the health of children. Its effects seem to be mediated by the time since parental migration took place and the age of the child. A study on Mexico shows that the general health of children declines during the first years of their parents’ migration. In later years, however, it improves in part because remittances enable children to have improved access to health-care facilities.

Similarly, a study in Albania reports that remittances improve children’s overall health because they enable families to provide better diets and to attain access to health care. Experiences in Mexico, Guatemala and Nicaragua further support the conclusion that positive health outcomes are mainly due to remittances, which over time improve access to health care due to the relaxation of household budgets.

In Pakistan migration can have a positive impact on the weight and height of girls. Young girls in migrant households are taller than girls of the same age in non-migrant households. Boys are taller than girls in non-migrant households, but given that girls benefit more than boys from

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36 ibid.
38 Institute for Economy, Finance and Business 2007
39 Cortés, 2007, page 20
migration, girls in migrant households actually do better than boys in absolute terms. Similar results are obtained for the weight-for-age measure.\textsuperscript{40}

Mexico-based research also indicates that migration’s impact on children’s health depends on the age of children.\textsuperscript{41} This conclusion was based on the finding that infant mortality increased in the period immediately following parental migration. Additionally, there is evidence that, despite the higher living standards afforded by remittances, negative effects on children’s health are generally linked to this initial phase of migration, when the sense of family disruption may be at its height. Among the possible negative health impacts cited in the research are symptoms of psychological disturbance.\textsuperscript{42} Health repercussions associated with migration also include increased risk of sexually transmitted disease contracted from returning migrants.\textsuperscript{43}

Children left-behind may also experience depression and feelings of abandonment at different stages of their migrating parents’ absence,\textsuperscript{44} which can have significant negative behavioural consequences for children transitioning to adolescence. Adolescents whose parents have migrated often experience difficulties in social relations, which can lead to the isolation of the adolescent from mainstream society in favour of small groups of peers who share similar experiences, limiting social interaction and development.\textsuperscript{45}

Some of these findings were borne out by UNICEF’s own research and policy work in certain countries.

- **In Tajikistan** migrant households who were receiving reliable remittances (55\%) found it substantially easier to cover the health costs associated with their children. Evidence from this study shows the direct link between access to health care and household income, testifying to the huge role played by remittances in smoothing access to health care for migrant households.

- **In Moldova** households receiving and not receiving remittances exhibit similar consumption patterns on health and education services, but those receiving remittances save three times as much as other households.

- **In Jamaica** a joint UNICEF/Jamaican government study found no evidence of differences in health outcomes between children living in households that receive remittances and those in households that do not. This was despite remittance-receiving households devoting more money to health and educational expenditures.\textsuperscript{46}

- Children left behind in **Tajikistan** by migrating parents had a tendency to become withdrawn, sad and depressed. This was more common for girls than boys and particularly pronounced for children in abandoned households—where the male breadwinner has migrated and severed

\textsuperscript{43} Cortés, 2007, 20
\textsuperscript{44} Camacho Z., Gloria and Kattya Hernandez B. 2007. Children and Migration in Ecuador: Situation Diagnostic. Centre for Social Planning and Research. UNICEF.
contact with the family. Abandoned households reported facing major difficulties in covering their health needs. The abandonment phenomenon, a particular problem in Tajikistan, demonstrates the negative impacts of migration on those left behind when remittances are taken out of the equation.

• The departure of Moldovan mothers to work abroad represents an indicator of increased vulnerability to HIV/AIDS and a lower level of HIV/AIDS awareness. Only 13% of respondents of the “Study on teenagers with parents working abroad” answered correctly all four questions in a questionnaire designed to measure knowledge about HIV/AIDS.

• In Ecuador, a 2005 study found that children in migrant households are thought to be particularly susceptible to alcoholism, drugs, teen pregnancy and other problems.47

• UNICEF Kosovo, in cooperation with Kosovo Health Foundation, has produced a report48 assessing the situation of the psychosocial health of children repatriated to the country from the European Union. It reveals the high levels of post-traumatic stress disorder and other psychological problems among repatriated children and the serious shortcomings of the Kosovan health system in attending to their needs.

**Brain drain**

Migration can have a direct impact on health services in sending countries when skilled healthcare professionals leave to work abroad. Children are one of the vulnerable groups who will most feel the effect of understaffed health systems. Writing in 2004, the Panamerican Health Organization noted: “The nursing shortage in the Caribbean is a major challenge to the delivery of safe and efficient health services. It is likely to be intensified by the continuing and aggressive recruitment of highly trained, competent Caribbean nurses by developed countries including the UK, US and Canada.”

At that time Jamaica had 2,256 nurses but a nurse vacancy rate of 58.4%, meaning the country could count on fewer than half the nurses it needed despite having one of the highest concentrations of nurse training institutions in the region. This resulted in a nurse to ambulant patient ratio of 1:30-40; international standards require 1:6. More recently, however, there have been signs of improvement. By 2007 the number of nurses had risen to 2,835, with a vacancy rate of 34.2%. The Jamaican Ministry of Health has outlined a 47% shortage in midwife cadre, lost to migration. This may have contributed to Jamaica’s lag on Goal 5 of the Millennium Development Goals – reduction in maternal mortality.

A survey in Ecuador in 2005 found that 1,273 doctors, 243 nurses and 2,364 mid-level health professionals had left the country to work abroad. A considerable number of these had moved to Chile, assisted by an agreement between the two countries not to demand revalidation of professional qualifications to be able to practise.49

Elsewhere, in Ghana for example, improved salaries and allowances have been provided to health workers, as have other benefits such as new cars, in order to try to retain them in the country’s public health system.50

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48 UNICEF Kosovo/Kosovo Health Foundation (2012), *Silent Harm*
50 GMG (2010) *Mainstreaming Migration into Development Planning*, page 83
HIV/AIDS

UNICEF, in partnership with UNAIDS, has been working as a corporate priority on HIV/AIDS for the last decade and has always sought to include migrant children. Young people tend to be less experienced; they may lack life skills to protect them in destination countries and hence may be at greater risk of HIV and drug use, as well as discrimination. In Asia and the Pacific, youth account for approximately 50 per cent of all new HIV infections, but expenditures on HIV prevention are low and affected migrants are often further discriminated against.

Because of the nature of the epidemic, and benefiting from the significant level of funding made available, governments have included migrants alongside the general population in their efforts to tackle HIV/AIDS, although, in general, work in this area has not fed directly into the effort of mainstreaming migration into national development plans.

Examples of UNICEF activities
UNICEF has worked closely, through policy dialogues, with select governments to bring the issue of children and adolescents affected by migration, including their health and education concerns, into the heart of public policy. This includes, but is not limited to, the four countries (Bangladesh, Jamaica, Moldova and Tunisia) in which UNICEF is participating in the mainstreaming migration pilot projects, led by UNDP and IOM and funded by the Swiss Agency for Development and Cooperation (SDC).

• In Ecuador, in 2008, UNICEF joined with the National Migration Bureau (SENAMI), the National Child and Education Council (CNNA) and the National Institution for Children and Families (INFA) in an institutional agreement to support the design and implementation of human rights-based public policies targeted at children and adolescents directly or indirectly involved in migration processes. UNICEF is supporting the National Policy Task Force on Children and Migration to develop rights-based policies to protect and assist all children affected by migration in Ecuador. UNICEF is also collaborating with the CNNA to include migration as a priority in the Children and Adolescents Agenda, the key instrument that defines the government of Ecuador’s priorities in relation to children’s and adolescents’ rights and orientates public policy and the allocation of resources.

• UNICEF Jamaica is working closely with IOM, UNDP, and other UN agencies as well as the Planning Institute of Jamaica (PIOJ) to support the Jamaican government in developing a national policy on international migration and development. UNICEF Jamaica participated in the working group on family and migration and contributed to the overall policy which addresses the preservation of the family and the protection of the vulnerable (including children). This policy aims to reduce the children’s levels of vulnerability as a result of the migration process through resource mobilization and increased equity of access to relevant goods and services.

The recently published Jamaica Migration Profile highlights the high level of female migration. Although the resulting remittances provide means for material needs, education and health expenses, it also leads to emotional and behavioural problems among the children left behind. Vision 2030, the Jamaica National Development Plan, is an example of migration being mainstreamed into formal institutions. One of the national desired outcomes of this plan is a healthy and stable population, in which monitoring migration and its impact is a crucial component. A youth consultation which formed part of the development of a National Policy
and Plan of Action on International Migration and Development stressed education and training, including social skills, as a top priority for young Jamaicans.

UNICEF Jamaica hopes to conduct a MICS survey for 2014/15; contribution could be made to the research agenda in relation to migration by including a module that would address some of the existing data gaps. This could include an update of the previous research mentioned above on the contribution of remittances to the health and education outcomes of children left behind by migrant parents. This new study would therefore have to investigate additional factors that may affect the lives of these children. The timing would also be ideal to inform the development of a new country programme for the period 2017-2021, subject to further consultation with national partners, the PIOJ and UNDP/IOM.

- UNICEF Moldova has worked closely with the Government of Moldova, providing technical support to it and the Swiss chair of the Fifth Global Forum on Migration and Development (GFMD) and supporting the organization of the GFMD thematic workshop on “Mainstreaming Migration into Strategic Policy Development” ahead of the GFMD held in November-December 2012. Major policy outcomes include: the 2008-2011 National Development Strategy, which calls for the identification of the causes of exclusion among children left behind and the creation of mechanisms to ensure that children with insufficient parental supervision receive special attention in school, and a new, nationwide network of more than 1,100 community-based social workers created by the Ministry of Social Protection, Families and Children in 2007 to address the challenge faced by children left behind.

- The Philippines Overseas Employment Administration (POEA) is revising its operational manual with the support of UNICEF to include children and families in its pre-departure programmes, as well as supporting the development of modules around psychosocial reintegration of migrants and their families and children. The Overseas Workers’ Welfare Administration (a sub-office of the POEA) manages a trust fund to support Filipino migrant workers and their families. Workers who contribute are eligible for a range of services, including insurance, health care and loans. In addition, their children have access to education and training programmes. For example, the Tuloy-Aral or “Continuation of Education” project helps cover the expenses of school students in financial need by providing them with $100 a year to pay for books and other necessities.

With the support by UNICEF and other partners, the NGO Atikha offers livelihood training and economic opportunities to help children and families left behind to become more self-reliant. The Department of Education included Atikha’s modules in the school curriculum in regions with large populations of children and families left behind.

The National Action Plan on Children Left Without Parental Care adopted for 2010-2011 addressed the multiple aspects of vulnerability of children left behind. It established social services for children at the community level; promoted awareness-raising among the general public and potential migrants on the potential negative impacts of migration on children; and strengthened capacity-building for professionals working with children (teachers, psychologists, police, health workers, etc.) on the vulnerabilities of children left behind and protection of their rights. The plan also envisaged the introduction of life-skills education in school curricula and a monitoring and evaluation system of children left behind.51

51 Crépeau, F, Special Rapporteur on Migrants, UNICEF, the University of Lanús and the Platform for International Cooperation on Undocumented Migrants (PICUM), 2013, “Human Rights of Undocumented Adolescents and Youth”.
UNICEF has also worked on a number of educational projects targeted at young potential migrants as part of the Millennium Development Goals Achievement Fund thematic window on Youth, Employment and Migration joint programmes (see annex).

Conclusions and recommendations

To enhance the benefits of migration for development, and for children and adolescents in particular, policy coherence is essential. This means both integrating migration into the post-2015 development framework and strengthening migration mainstreaming in development strategies and cooperation. All countries have a shared responsibility in the effort to maximize the positive potential of migration. Health and education are fundamental to human development and therefore key sectors within the post-2015 agenda and mainstreaming migration initiatives, and both can potentially benefit from the positive effects of migration. For this potential to be unlocked, policy interventions must simultaneously promote the contribution of migration while seeking to mitigate its negative consequences.

Children and adolescents are at the heart of sustainable development, which must be the cornerstone of the post-2015 world. Healthy, safe and well-educated girls and boys are the foundations of a thriving and equitable society, sustainable growth and proper management of natural resources. Societies can only develop in a sustainable manner if the basic needs and rights of children, particularly the poorest and most vulnerable, are met. Evidence shows that investing in children – including those affected by migration – yields high and long-lasting returns, not only for individuals and families but for entire societies and the future that we want.

All children, including those in the context of migration, have a right to health and education, as has been recognized in goals proposed for the post-2015 development agenda in the thematic consultations. As the evidence in this paper indicates, migration’s impact on health and education is not straightforward and its effects are highly context-specific. For children and adolescents left behind, migration, principally through the sending of remittances, may have positive health and education impacts. “Social remittances” can also have an empowering effect, for example on gender equality. However, those impacts are not systematic or consistent across contexts. Furthermore, the evidence is stronger for impacts on expenditure on, and access to, health and education than for impacts on outcomes for children in these areas.

Health, education and child protection policies should identify children and adolescents left behind as particular populations with specific needs, which may be gender-related. However, while recognizing that the needs of the left-behind are highly specific, the solutions should be broad. Children and adolescents left behind will benefit from an effort to improve general public services such as rural schools and health care. Services for special needs can be effectively delivered only when general infrastructure is in place.

This idea was expressed in a UNICEF report which considered the case of Moldova but may apply to other countries of high out-migration. “The situation of children without parental care does not call for the development of specific, targeted services but rather recognition of the special needs of children with and without migration experience. Many of these children live in communities with a general lack of service and recreational facilities. What is needed is therefore the development of services that are accessible for all children and families, like drop-in centres or one-stop services that offer information, counselling, as well as practical support. This should

include support and information for parents who plan to migrate as well as for caregivers. Finally, health and social care professionals should be trained and sensitized for the specific needs of children deprived of parental care.”

It is one of the tasks of migration mainstreaming – as the pilot initiative enters its second phase – to recognize the left-behind as an important population and take their needs into account when developing national development plans. Likewise, the task of the post-2015 development agenda will be to set universal goals while targeting policy responses to the most vulnerable.

1 Equal access to education and health care as part of a post-2015 vision
(see CRC recommendations February 2013)\textsuperscript{54}

1.1 Making rights explicit

- Migration can have positive effects on health and education. To enhance these benefits, it is essential that the rights of children in the context of migration are guaranteed.

- States should be encouraged to honour their commitments voluntarily entered into under the Convention on the Rights of the Child. All children in the context of migration should have access to economic, social, and cultural rights and to basic services on equal terms with national children, regardless of their or their parent’s migration status, and their rights should be made explicit in legislation.\textsuperscript{55} They should enjoy equal access to equitable, affordable health care and education to that enjoyed by nationals, without discrimination.

1.2 Mainstreaming child rights

- Children’s rights should be included in the design of social, childhood and family policies, with particular attention to children and families in migration situations and including children left behind and/or in an irregular migration situation.

1.3 Removing barriers in law and in practice

- States should be encouraged to reform legislation, policies and practices that prevent or discriminate against children affected by migration and their families, in particular those in an irregular situation, from effectively accessing services and benefits such as health care, education, long-term social security and social assistance, among others. Attention should be paid to addressing the gender-specific impacts of reduced access to services, such as sexual and reproductive health rights and security from violence.

\textsuperscript{53} UNICEF CEE/CIS, 2006, “I want us to be a family again” Impact of migration on children in the CEE/CIS countries, page 10

\textsuperscript{54} The recommendations in this section are based on the recommendations stemming from the 2012 Day of General Discussion of the Committee on the Rights of the Child. \url{http://www2.ohchr.org/english/bodies/crc/docs/discussion2012/2012CRC_DGD-Childrens_Rights_InternationalMigration.pdf}. The Committee on the Rights of the Child adopted in February 2013 a number of recommendations on the rights of all children in context of international migration. The recommendations stress that the Convention on the Rights of the Child (CRC) is a powerful tool for advancing the rights of all children in the context of migration. In addition to legislative and policy reform processes, the CRC periodic reporting mechanisms should be actively used by States and civil society to systematically evaluate implementation of the Convention in relation to all children affected by migration. This should include collaboration between children’s rights and migrants’ rights organizations, as well as a stronger role for national human rights institutions. Three fundamental tenets should guide actions in this field: non-discrimination, a comprehensive approach that goes beyond categorization, and the principle of the best interests of the child.

\textsuperscript{55} 2012 CRC DGD Report and Recommendations. Paragraph 86
• The difficulties faced by children left behind when accessing rights and services should be specifically addressed by States in collaboration with civil society and local communities. Administrative and financial barriers to accessing services should be removed. Training and guidance for civil registries and public-service providers should be carried out to ensure effective access to them in practice.

• States should be encouraged to ensure effective safeguards on information-sharing between civil registries, public-service providers and immigration. Clear guidance should be given for service providers and awareness-raising on these safeguards instituted among irregular migrants.

1.4 Including children affected by migration in social policies

• States should be encouraged to ensure that social protection systems address all situations of vulnerability directly or indirectly related to migration and that children affected by migration and their families are made a specific target group of social policies and programmes in countries of origin, transit and destination, regardless of migration status and without discrimination of any kind. Such an approach will promote social inclusion and address some of the key principles advocated in the UN System Task Team’s report Realizing the Future We Want for All.

• States could target their social services to address the consequences of parental migration. The needs of women and children left behind should be considered, rather than assuming that they are receiving remittances and therefore able to care for themselves. Families/children left behind should be included in social protection programmes as vulnerable populations, including community-based social services. Health, education and social work professionals should be made aware of the migration factors which may underlie specific problems.

• States could ensure and implement adequate and accessible measures for addressing trauma experienced by children in the context of migration. Special care should be taken to make mental health services available to all children affected by migration, including adolescents, who may be a group particularly at risk. Whenever possible, health and education officials should be trained to recognize traits associated with the psychosocial effects of parental migration and to support families left behind, caregivers and migrant children.

• Mentorship or tutoring schemes could be established in communities of out-migration to offer guidance to children and adolescents left behind. Schools and other community organizations can be an important focal point.

2 Remittances

• Remittances are often partially invested in health and education. Such investments can have significant positive consequences for education and health.

• Awareness and information campaigns could help guide receivers of remittances about how best to use them to reap positive benefits for children’s health and education.

• Schemes to encourage migrants to invest in health and education projects in their home communities, including through public authorities offering matching funds, could be promoted.
However, such investments cannot happen in a void; institutional structures need to be in place, particularly at local level.

• Hometown associations or diaspora organizations could be enlisted by local authorities to strengthen direct links with communities of origin. Community members living abroad can, and are often willing to, make contributions to communities of origin, especially in the areas of health and education. This kind of initiative could involve student or teacher exchange programmes, mentorship, cash transfers and support for infrastructure improvements.

• Remittances are not substitutes for, and can only supplement, government policies and institutional frameworks that need to address exclusion, inequalities and the provision of social services.

• More research is necessary which distinguishes between the impact of remittances and the impact of migration per se, and analyses the relationship between them. Households which have an absent migrant member or members but which do not receive remittances should not be overlooked.

3 Monitoring at local, national and international level

• Monitoring efforts at national, sub-national and local level should be strengthened so that data and evidence from the field can be used to identify and invest in the most disadvantaged, excluded and vulnerable populations. The post-2015 agenda should include an institutional mechanism that monitors the impact of migration on the education and health sectors and provides strategic management of labour movement.

• States should be encouraged to systematically evaluate their implementation of the Convention on the Rights of the Child in relation to all children affected by migration present in their territory as part of their periodic reporting to the CRC Committee.

• National institutions responsible for guaranteeing human rights (ombudsmen, equality bodies, etc.) have a key role in monitoring outcomes for children affected by migration and should be empowered and supported. The judiciary also has an important role to play in ensuring accountability of public institutions. Mechanisms could be established as part of the post-2015 framework for civil society groups to both participate in the setting of and monitoring of disaggregated goals and targets – including at district and municipality level – and for them to hold public sector agencies to account for their performance.

• In the context of mainstreaming migration into national development planning, budget allocations to the health and education sectors could be monitored along with outcomes at the national, sub-national and local level. Focus should not be merely on access to education and health but on the quality of those services and the outcomes for vulnerable populations.

4 Data and research

• States should be encouraged to ensure concrete measures for enhancing and expanding data collection and analysis on the conditions and impact of migration on children, disaggregated by age, sex, education and other relevant criteria. For example, Phase II of the ‘Mainstreaming Migration into National Development Project’ in Jamaica will include capacity development and a research programme in the area of migration.
• Households affected by migration should be identified in local statistical and data systems as well as in nationally representative living standards, expenditure and labour force surveys. It is recommended that such data and information is used to ensure the inclusion of children affected by migration in the development of evidence-based social policies, local planning and budgeting processes.

• More research is needed to identify the different types of vulnerabilities to which children left-behind are exposed and which may have health or educational impacts. It would be useful to conduct an institutional mapping in order to show the gaps in public service delivery related to the social demands and needs of migrant families. Research should focus not merely on access to services but on health and educational outcomes.

• UNICEF’s Multiple Indicator Cluster Survey (MICS) framework has recently been broadened to include a module targeting migration information. The MICS methodology could be applied to more countries to expand the evidence base. UNICEF Jamaica hopes to address some of the existing data gaps in the MICS survey planned for 2014/15.

5 Education and training

• States could invest in education and training. States should be encouraged to extend compulsory schooling to the secondary level, abolish primary and secondary school fees and make good quality education equally accessible to all. Secondary education improves earnings and boosts overall economic growth and equips young people with the necessary skills to give them more life options, whether in the home country or abroad.

• States could invest in their human capital by offering opportunities for quality tertiary education and vocational training matching domestic labour market needs.

• States should be encouraged to promote equitable access to education for migrant children and adolescents in order to support effective school-work transitions towards sustainable growth; enhance integration through the promotion of socioeconomic mobility; and promote positive encounters that would not happen otherwise therefore reducing the likelihood of discrimination and xenophobia.

• Equity in access and opportunities is a shared responsibility between Governments and migrants. Curriculum changes should reflect new cultural realities experienced by destination countries. Language immersion programmes should be promoted for migrant children and their parents.

6 Social inclusion and participation

• States could strive to protect migrants, including the most vulnerable, from xenophobia and discrimination through education, public advocacy and communication campaigns, in partnership with civil society organizations, especially those working at grassroots level.

• Migrants and their families should be empowered as rights holders. States should increase and adequately fund legal aid programmes to support effective access of migrants to courts and tribunals.
• The voices of children affected by migration and their families should be heard and their participation encouraged in addressing challenges in the fields of health and education.

7 Protection against violence, abuse, neglect and exploitation

• If societal and institutional systems fail to protect children against violence, abuse, neglect and exploitation in all settings, their short- and longer-term health and educational outcomes will tend to suffer severely. Children in the context of migration are more vulnerable to violence in countries of origin, transit and destination. States should be encouraged to review and reform their national violence-prevention legal frameworks, policies and programmes to ensure that they explicitly include children in the context of migration and address their particular vulnerabilities.

8 Brain drain/brain gain

• To tackle brain drain, in particular from the health and education sectors, states could invest in incentives for personnel to remain in or return to their home country.

• Circular migration and returning migrants facilitate significant “brain gain” and “brain circulation”. During their stays abroad, migrants have major opportunities to acquire new knowledge and experience that can have significant development impacts when transferred to their countries of origin.56 Educational and health professionals might be willing to return to their country of origin if the salary on offer were competitive, an issue which might be addressed in bilateral agreements between countries of origin and countries of destination.

• Service for a defined period or periods in the country of origin could also be made a condition of grants to study in institutions abroad on courses related to the health, education and social service sectors.

• More data is required on the phenomenon of “brain drain” in specific contexts. For example, as outlined in the International Migration Profile on Jamaica “The trend in the high level of emigration of nurses and teachers that had begun in the 1990s, continued into the 2000-2010 period. The details of the trend cannot be assessed due to the lack of data on these movements.” The extent to which the high level of emigration has affected the quality of health care and education has not been assessed. The Ministry of Health has identified the desirability of a migration study as part of its activities under the Medium Term Socio-Economic Policy Framework 2012-2015. It may be advisable for the Ministry of Education to consider conducting a similar study with regard to the impact of the emigration of teachers on national education outcomes.

9 Girls and women

• There is a need to recognize the special vulnerabilities of girls and women in the context of migration. The experience of migration can strengthen women’s empowerment, particularly when it is associated with financial opportunities. Besides the knowledge and contact networks generated, migration can also contribute to the transfer of new values and ideas,. The experiences of returning migrants and diaspora groups can lead to the transfer of behaviour and values that help to increase gender equality, for example. Women migrants could be encouraged to return by providing economic opportunities in communities of origin to promote

independence. Women’s associations could also provide support at community level for female heads of household and adolescent girls left behind.

10 Social protection

• Social protection is an important instrument for the pursuit of at least six of the eight present MDGs by ensuring universal access to key essential services in quality basic and maternal health care, education, nutrition and environmental health and is certain to feature prominently in the post-2015 agenda.

• A basic social protection floor should be guaranteed without discrimination to the whole population, including children in the context of migration, and must be explicitly inclusive of the most vulnerable and disenfranchised, including all those affected by migration and their families, regardless of status. In countries with large numbers of migrating children and young people, bilateral and multilateral agreements with destination countries should be promoted to ensure access to, at least, basic social protection for children, adolescents and youth. In countries where multilateral and bilateral agreements are in effect, policies should explicitly ensure the social protection rights of adolescents and youth. Bilateral and multilateral agreements could also address the portability of social benefits, including pensions.  

57 “The legal status will determine whether and to what extent migrants and their family can have access to social protection and services. While some migrants will benefit from a social protection regime where they have full access to social services and social security benefits through bilateral agreements, others, particularly irregular migrants, will have limited or no access to social protection in host countries. Undocumented children, as well as children of migrant parents with irregular status, may have difficulty accessing education, health care and other social services. Such children usually have no access to proper and appropriate identification, registration, documentation or legal advice.” UNICEF, 2009, “Social Protection”, pages 2-3

58 “These agreements guarantee comprehensive social security protection to migrants by ensuring that social security rights acquired in the host country are maintained and transferred to the country of origin.” UNICEF, 2009, “Social Protection, pages 2-3
ANNEX

UNICEF field experience on migration and education

UNICEF participation – alongside ILO, UNDP, IOM and other partners – in the Spanish-funded Millennium Development Goals Achievement Fund thematic window on Youth, Employment and Migration joint programmes in 11 countries has frequently included an education element. A common theme of these experiences is the need for the education system to tackle the realities of migration in sending countries, either in preparing young people for the challenges of migrating or in offering them alternatives to leaving the country.

- The Youth, Employment and Migration programmes in which UNICEF is participating in eastern Europe, among other things, encourage entrepreneurial skills in high schools; influence the development of National Youth Action Plans; and established counselling and training centres serving an estimated 12,000 youth. In Serbia, an advocacy campaign, led by one of the largest Serbian national NGOs, has revolved around the introduction of entrepreneurial learning into the Serbian education system and tailoring education outcomes to labour market needs. Their inclusion into national policies and action plans resulted in, inter alia, the signing of a memorandum of understanding between two key ministries – the Ministry of Economy and Regional Development and the Ministry of Education – on the introduction of entrepreneurial learning into the Serbian education system.

- In Bosnia and Herzegovina, the YEM programme, working closely with the government, private sector and civil society, focuses on improving the employability of BiH youth. To ensure easier intervention in the education system, implementation is organized through the Agency for Pre-primary, Primary and Secondary Education, a body of the BiH Council of Ministers. Eleven centres for information, counselling and training are being established. A survey was undertaken in 2010 in 100 primary and secondary schools which found high dropout rates. To ensure rights-based access to schooling, Operational Guidelines for Gender Sensitive Education were conceived. Life skills and competency-based education modules were then created for a number of primary and secondary schools. A modular teacher training package was elaborated.

- In the Philippines, the Alternatives to Migration programme targets disadvantaged youth in poor provinces with low school cohort survival rates and high migration outflows. The programme also addresses gender inequities, since young Filipino women disproportionately experience high unemployment and underemployment. UNICEF Philippines, in partnership with the Atikha Overseas Workers and Communities Initiative, has provided financial literacy seminars to migrants, adolescents and youth in migrant households. The Joint Programme provided support to the development of Career Pathways-Technology and Livelihood Education (CP-TLE) courses at secondary education level, along with the elaboration of gender-sensitive learning materials, life skills and safe migration training.

- In Paraguay, the UNICEF-supported YEM joint programme seeks to broaden the skills and employment opportunities for youth through entrepreneurship, technical and vocational training; use of remittances; and greater respect for labour rights.

- In China, a Baseline Skills Survey on Improving Skills Level and Employability of Potential Young Migrants through Education was conducted in 2010. An assessment of the education and skills level of young people in rural areas was also undertaken with an analysis of the
training needs of rural youth and migrants. A mobile health promotion policy was developed to increase access to health services by migrant youth. In China, a health promotion model was designed and tested in Tianjin, Xi’an, Cang and Zhashui counties to encourage the use of health services by young people. In addition, a high-level policy advocacy forum was convened to discuss the outcomes of the programme and to contribute to national reforms for promoting migrants’ health. Positive changes in migrants’ awareness and behaviour were reported.

- **In South Sudan**, occupational skills training was facilitated by the Joint Programme in rural and hard-to-reach areas for adolescents, with special focus on girls, returnees and ex-child soldiers. Some 150 young returnees received training in various skills areas and, in the long term, there is both improved access to training in the community and improved capacities for sustainable productive employment in the areas of return. Young leaders, representatives of youth groups and university volunteers received training on how to raise awareness about reproductive health, family planning issues and HIV/AIDS at community level. Putting this into practice, two mobile HIV Counseling and Testing (HCT) campaigns were then carried out.