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Chaired by Meghana Dantuluri

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Topic A: Addressing Malnutrition in Children

Topic B: Eliminating Violence Against Children

Committee Overview

UNICEF was first established on December 11, 1946 by the United Nations in order to meet the needs of children in post-war Europe and China¹. Hence, its full name United Nations International Children's Emergency Fund. In 1950, the goal of UNICEF was broadened to include combatting long-term issues women and children face in numerous developing countries. In 1953, it became a permanent part of the United Nations. Its name was shortened to the United Nations Children's Fund, but the acronym of UNICEF remained intact. UNICEF is now active in nearly every country in the world. Their work is carried out in 192 countries through country programs and National Committees. There are seven regional offices in addition to country offices all around the world. UNICEF even has a center for research in Florence, a supply operation in Copenhagen, a shared services center in Budapest, and some of their biggest offices in Geneva, Tokyo, and Brussels. The UNICEF headquarters, however, are in New York.²

UNICEF's primary commitment includes promoting the rights and wellbeing of every child in every country around the world. They work in all these countries to translate that commitment into real action. This includes focusing effort and resources into the most vulnerable and excluded populations of children. UNICEF is especially unique in that it takes a life-cycle approach, meaning that they understand the importance of an individual's formative years and thus attempt to ensure safety in children's developmental and adolescent years. They focus on the most disadvantaged children such as those living in fragile environments or those with disabilities, children affected by rapid urbanization or being displaced from their homes, and even children facing environmental toxins or degradation.³

UNICEF upholds the Convention on the Rights of the Child. They also work for the Millennium Development Goals and for progress as promised in the United Nations Charter.⁴ They are also part of the Global Movement for Children, a broad coalition dedicated to improving the life of every child.

¹"FAQ." UNICEF, October 3, 2017.
https://www.unicef.org/about/who/index_faq.html.

²Ibid

³"FAQ." UNICEF, October 3, 2017.
https://www.unicef.org/about/who/index_faq.html.

⁴Ibid



Topic A:

Addressing Malnutrition in Children

Introduction

Malnutrition is one of the biggest causes of death in children under 5 years of age. Not only does malnutrition make children more susceptible to common infections, it also increases the severity and frequency of these infections and delays their recovery.⁵ Malnutrition also slows down growth in children, which can lead to developmental delays and worsened performance in work and school. It affects overall quality of life and unfortunately ends children's lives at a very early age.

Malnutrition is not only prevalent in developing countries. It is also a major issue in prosperous countries, as malnutrition does not simply mean not having enough food to eat, but rather that the body is lacking enough protein, calories, or nutrients to properly sustain itself.⁶ Therefore, malnutrition affects children worldwide and can be addressed on a national level.

Historical Background

In the 20th century, malnutrition was one of the biggest problems affecting children's health. However, for a long time there were issues with the assessment of whether children were actually malnourished. Despite this, it was widely

known that this problem affected children all over the world and thus sparked the creation of public health agendas to address the problem. By the 1940s, even though there were still many issues with diagnostic tools for malnutrition in children, public health nutrition policy shifted to include universal education about nutrition, fortification of foods, and food security advances that would address the widespread problem.⁷

These advances led to the understanding of the partnership between malnutrition and infection. This is a vicious cycle: the more nutritional degradation, the more opportunity there is for infection. These infections are then what causes children's bodies to inadequately store bodily materials such as proteins, vitamins, and minerals. Thus, there was a transition in clinical practices to address these infections to lower the mortality rate in children. By the late 1900s, there were even more advancements in vitamins and other nutritional supplements for children which lowered the mortality rate of malnutrition even further.⁸ With even more research conducted in the 2000s, scientists can now further understand the interaction between immune function and nutrients in the body. There are now considerably better

⁵ "Malnutrition in Children." UNICEF DATA. Accessed November 10, 2019.

<https://data.unicef.org/topic/nutrition/malnutrition/>.

⁶ Torpy, Janet M. "Malnutrition in Children." JAMA. American Medical Association, August 4, 2004.

<https://jamanetwork.com/journals/jama/fullarticle/199199>.

⁷ Ruis, A R. "'Children with Half-Starved Bodies' and the Assessment of Malnutrition in the United States, 1890-1950."

Bulletin of the history of medicine. U.S. National Library of Medicine, 2013.

⁸ Keusch, and Gerald T. "History of Nutrition: Malnutrition, Infection and Immunity." OUP Academic. Oxford University Press, January 1, 2003.

<https://academic.oup.com/jn/article/133/1/336S/4687573>.

methods in assessing nutritional status and immune function. The improvement in diagnostic tools allows the problem to be better addressed. And a better understanding of immune function allows clinical practices to further reduce the number of mortalities that occur as a result of undernutrition.

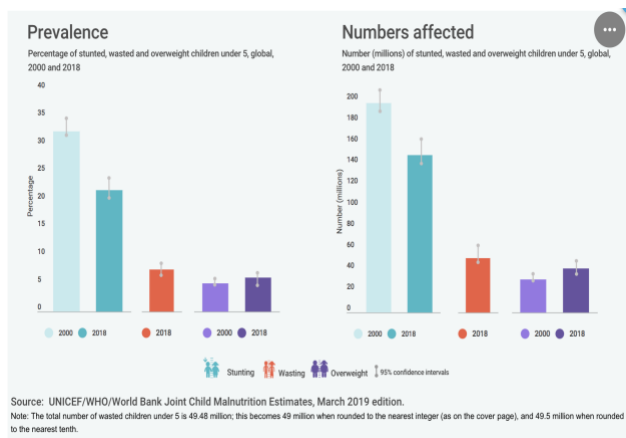


Figure 1: Advancements in Malnutrition since 2000⁹

While this figure shows that stunting prevalence has declined since 2000, nearly 1 in 4 children under 5 (almost 149 million) were stunted in 2018 and over 49 million suffer from wasting.¹⁰

Although malnutrition is a worldwide problem, it disproportionately affects developing countries, often due to sanitation issues. And when children are exposed to such high levels of germs and bacteria in their environments, their bodies are not only prone to infection, but also because they are constantly fighting these infections, they have less bodily energy and resources to spend on cognitive functions.¹¹

⁹ "Malnutrition in Children." UNICEF DATA. Accessed November 10, 2019.

¹⁰ Ibid

¹¹ Pulitzercenter. "The Link Between Sanitation and Malnutrition." Pulitzer Center, June 19, 2019.

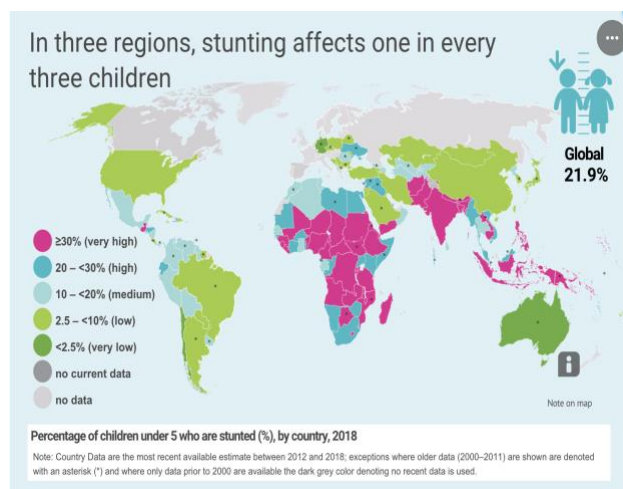


Figure 2: How malnutrition affects different parts of the world. 12

Contemporary Conditions

The Double Burden of Malnutrition

The double burden of malnutrition is a unique phenomenon where people are afflicted by both undernutrition as well as obesity or other diet-related noncommunicable diseases. This double burden can exist at many different levels. At the individual level, it can be an individual who is obese and still suffers from deficiencies in certain vitamins or other nutrients, or an individual who was stunted as a child but then became overweight as an adult. This also exists at the household level, most commonly with a parent being overweight and the child being underweight. Lastly, at the population level, a group of people all coming from the same background can include people suffering from both undernutrition and obesity.

Many of these co-occurrences can be explained by epidemiology. For example, undernutrition earlier in life may make people more susceptible to complications

<https://pulitzercenter.org/blog/link-between-sanitation-and-malnutrition>.

¹² "Malnutrition in Children." UNICEF DATA. Accessed November 10, 2019.

<https://data.unicef.org/topic/nutrition/malnutrition/>.

later in life such as being overweight which can then lead to noncommunicable diseases such as diabetes and heart disease.

This double burden of disease allows for integrated action which can affect both issues on the same level. Thus, addressing the issues of malnutrition and obesity on the same front can allow many public health and development goals to be addressed very quickly.¹³

Food and Nutrition Security

Food and nutrition security is considered by the World Health Organization (WHO) to be a basic human right. Understandably, food insecurity is a major cause of malnutrition in low-income countries. Household food insecurity means not having access to a reliable, substantial, or a nutritionally well-balanced food supply. Not having enough food to meet one's dietary needs leads to undernutrition. Common barriers to food insecurity include insufficient income, high food prices, poor infrastructure, unreliable food supply, and lack of access to cultivatable land.¹⁴ Households with low income often rely on cheaper and easier to find foods such as rice, wheat, cassava, or maize. These are more accessible than fruits, vegetables, and meats, however they are significantly less nutritious. Although it is filling, rice and other grains do not have essential nutrients that the body needs to survive. Furthermore, changes in economic and political landscapes often cause fluctuations in food prices which affect households with low socioeconomic statuses the most. Likewise, during threats to national security or during

environmental emergencies, food supplies become scarce and food security is threatened. Poor infrastructure, lack of safety and emergency response plans, and limited food supplies can further perpetuate these problems.¹⁵

The WHO Department of Nutrition and Development conducted a multi-country study in China, Egypt, Ghana, Myanmar, Indonesia, and South Africa. The main purpose of this study was to determine the main causes of malnutrition. The conclusion of the study was that globally, there is enough food for all people, but the main issue is inequitable access to sufficient food supplies.¹⁶ Thus, a better understanding of the factors affecting household food security is essential to improve health and limit the burden of malnutrition. Furthermore, household food security also entails meaningful equity between men and women, encouraging equitable distribution of food and other nutrients within the household.¹⁷

Severe Acute Malnutrition

Severe acute malnutrition (SAM) is characterized by an extremely low weight for height by visible severe wasting or by nutritional edema. The under-five case-fatality rate for SAM typically ranges from 30-50%. However, management of SAM according to WHO guidelines can reduce the case-fatality rate by almost 55%.¹⁸ The most common community-level intervention is the use of specially formulated ready-to-use therapeutic foods (RUTFs). WHO has trained health workers to apply this scheme and administer the

¹³ "Double Burden of Malnutrition." World Health Organization. World Health Organization, May 17, 2017. <https://www.who.int/nutrition/double-burden-malnutrition/en/>.

¹⁴ "Unite For Sight." Food Insecurity. Accessed November 10, 2019. <http://www.uniteforsight.org/nutrition/module2>.

¹⁵ "Unite For Sight." Food Insecurity. Accessed November 10, 2019. <http://www.uniteforsight.org/nutrition/module2>.

¹⁶ "7. Significance." World Health Organization. World Health Organization, June 14, 2013.

https://www.who.int/nutrition/topics/foodsecurity_7/en/.

¹⁷ Ibid

¹⁸ "Severe Acute Malnutrition." World Health Organization. World Health Organization, June 3, 2019.

https://www.who.int/nutrition/topics/severe_malnutrition/en/.

supplements with institutional partners in African, American, South-east Asian, and Western-Pacific regions.¹⁹ Until recently, the solution was to send children with SAM to hospitals to receive therapeutic diets along with medical care. However, the use of RUTFs now allows for these children who face SAM (without any major health complications) to be addressed in an outpatient setting. And by addressing SAM in an efficient manner, the global child mortality rate can go down significantly.

Past United Nations and International Actions

The UN has conducted several studies to develop a deeper understanding of how malnutrition affects children. However, now that the issue is better understood, they are taking a new approach in creating development goals to improve the issue on individual, community, and population levels. The UN Decade of Action, proclaimed in 2016, sees various member states coming together to address the numerous issues associated with nutrition across a number of policy areas. This includes an investment in healthy food production, providing nutritional services in primary health care, adequate educational information to consumers, and changing rules of trade.²⁰

Significant steps have been made to address malnutrition, however there is still much to be done. Stunting in children under five years of age has gone down from 32.6% in 2000 to 22.2% in 2017.²¹ We are now much better equipped to address malnutrition problems as well. We know more about what people eat and can compare that to an ideal diet because of our better understanding of the nutrients needed for children. New data is also constantly being collected, and especially after years of collecting data under UN multinational studies, more effective action can be taken.

Countries have also been seen to take multisectoral action. For example, Tanzania had created a plan with a wide range of targets to address multiple burdens of malnutrition and in order to do so calls for action across multiple sectors including social protection, education, and food.

Lastly, national governments have also been seen stepping up. For example, China's government, which faces the second largest undernourished population, has released a National Nutrition Plan which addressed a wide range of malnutrition targets. The political and administrative commitment to bettering food security is admirable and is mirrored in other countries as well.²²

¹⁹ Ibid

²⁰ "A Decade of Action to Improve Child Malnutrition." World Health Organization. World Health Organization, October 19, 2018. <https://www.who.int/nutrition/decade-of-action-improve-child-malnutrition/en/>.

²¹ "2018 Global Nutrition Report Reveals Malnutrition Is Unacceptably High and Affects Every Country in the World, but There Is Also an Unprecedented Opportunity to End It." UNICEF. Accessed November 10, 2019.

<https://www.unicef.org/press-releases/2018-global-nutrition-report-reveals-malnutrition-unacceptably-high-and-affects>.

²² "2018 Global Nutrition Report Reveals Malnutrition Is Unacceptably High and Affects Every Country in the World, but There Is Also an Unprecedented Opportunity to End It." UNICEF. Accessed November 10, 2019.

<https://www.unicef.org/press-releases/2018-global-nutrition-report-reveals-malnutrition-unacceptably-high-and-affects>.

Questions a Resolution Must Address

1. *What are the largest burdens of malnutrition that exist in your bloc?*

Malnutrition affects all countries differently. So, it is important for the countries in each bloc to see the most prominent issues and address them accordingly.

2. *What kind of sanitation issues exist in your bloc and how can they be addressed to improve nutrition?*

Sanitation issues are one of the biggest causes of malnutrition in children. How will these issues be addressed? This can also include a discussion of improving infrastructure and access to proper food supplies.

3. *How can education tools be implemented to combat malnutrition?*

Education is an extremely common public health tool that is used to prevent many problems from occurring in the first place. What kind of educational interventions can be implemented for the issue of malnutrition?

4. *What can be done to incentivize schools into administering nutritionally sufficient foods?*

Schools play a major role in ensuring that children have nutritionally sufficient meals. Thus, what can countries do to ensure that schools are meeting nutrition standards, and how can interaction with schools help address the problem of malnutrition?

5. *How will household food insecurity be addressed?*

Equitable access to food is essential in ensuring children are properly nourished. How can equity among food supplies in households be ensured at both an individual and population level?

6. *What is the prevalence of SAM and what are the main ways that will be attempted in order to combat this?*

It is important to explore the prevalence of SAM in the respective blocs. Then, each bloc should see how RUTFs and other solutions can be used to address these cases since SAM is the most common cause of child mortality.

7. *What initiatives will be taken that can target the double burden of malnutrition?*

Targeting the double burden of malnutrition can be very efficient in addressing both undernutrition and obesity on many levels. Thus, it is important to explore various ways in which this can be done.

8. *How can the gap between how malnutrition affects developing and developed countries be addressed?*

Although malnutrition in children is a global issue, developing countries are still disproportionately affected. Thus, it is important to create resolutions that will help these countries more and make an effort to reduce this gap that exists.

Bloc Positions

- *West and Central Africa*

Central Africa has the highest child mortality rate in the world. Six million children are affected by life-threatening severe acute malnutrition in West and Central Africa.²³ There are many factors that contribute to the high rates of malnutrition in this region such as land and crop degradation, weather-related disasters, limited resources in terms of food and nutrients, and population growth.

- *South/Southeast Asia*

South and Southeast Asia has the second highest rate of child mortality as a result of malnutrition. Even in countries from this region who have strong positive economic growth, there are still high rates of malnutrition in children. Some contributing factors include traditional diets which lack proper nutrients, poor infant feeding practices, inadequate sanitation, and limited crops.²⁴ These countries also have high rates of RUTF implementation to help address their high rates of child malnutrition.

- *Middle East and North Africa (MENA region)*

The next highest rates of child mortality as a result of child malnutrition comes from MENA. Since the implementation of the Millennium Development Goals, this region has made lots of progress in this area. However, since the uprisings that started in 2011, there has been unprecedented displacement and new conflicts which have affected the health of children in these countries. Thus, inequities in resources and peacefulness in these countries can be addressed to aid in the combatting of the malnutrition problem.

- *Central/South America*

Around 10-20% of the population in Central and South America is afflicted by malnutrition issues in children. This region is one of the world's largest producers and exporters of food. Thus, the main issue in this region is not a lack of food but instead that the poorest members of society don't have the same access to this food as wealthier communities.

²³ "Malnutrition." UNICEF West and Central Africa. Accessed November 10, 2019. <https://www.unicef.org/wca/malnutrition>.

²⁴ ASEAN Post Team. "Malnutrition in Southeast Asia." The ASEAN Post, November 4, 2018. <https://theaseanpost.com/article/malnutrition-southeast-asia>.

- *European Union*

The European Union does not face that severe malnutrition issues, less than 10% of children are affected by this issue in some way. However, they have been very strongly taking initiative to find solutions through a multi-sectoral nutrition strategy which combines assessment of nutritional status in children, treatment of acute malnutrition, and prevention of all forms of malnutrition.²⁵ Thus, these countries can use their advanced prevention to aid the countries suffering more from these issues.

- *North America, Western Countries*

North America and Western countries have the least burden of child mortality from malnutrition with around 2.5% of the population affected by severe malnutrition. Changes in the healthcare environment have improved nutrition practices greatly reducing the burden of malnutrition in children. These countries can also use their knowledge of advanced healthcare systems to aid others.

²⁵ Amy. "Nutrition." European Civil Protection and Humanitarian Aid Operations - European Commission, October

28, 2019. https://ec.europa.eu/echo/what/humanitarian-aid/nutrition_en.

Conclusion

Even in the most developed countries, the burden of child malnutrition is highly prevalent. There are many infrastructural problems that contribute to this burden such as lack of resources, agriculture, poor sanitation, improper diets and feeding patterns, etc. However, there are also many systematic issues such as food insecurity, the double burden of nutrition, and food inequity. Even in places where food is produced in sufficient quantities, some communities don't have access to it because of their circumstances and environment. Some regions such as Central and West Africa, and Southeast Asia face higher burdens of this issue with severe acute malnutrition affecting a high percentage of their children and attributing to a high percentage of child mortality.

Many nations have been taking efforts to minimize this burden, and the number of deaths as a result of child malnutrition has significantly gone down. However much more could be done to further suppress the issue. The first of which is that the double burden of disease can be addressed to effectively address the issue. Often, undernutrition is found in as high of a prevalence as overnutrition and can be adjusted with the promotion of good

lifestyle choices and proper access to healthy and nutritious resources. So addressing this double burden on an individual, household, and population level can take steps in reducing deaths from child malnutrition. Furthermore, food insecurity and food inequity can be addressed in all nations. This means ensuring that all communities have the same access to food resources and that the production of food is distributed equally across all populations. Lastly, severe acute malnutrition is the biggest contributor to child mortality and can be addressed by improving things such as sanitation, diet, feeding patterns, agricultural patterns, etc. in developing countries. Furthermore, initiatives the education and implementation of RUTFs will significantly help in addressing the burden of SAM.

There are many approaches that can be taken to address the issue of malnutrition in children. It is important for all countries to explore these avenues despite this problem disproportionately affecting developing countries. As a result, even if the more developed countries make more advancements, they can use their successful initiatives and influx of resources to better help other countries.



Topic B:

Eliminating Violence Against Children

Introduction

Children from all over the world, from all different environments and background, experience violence in a myriad of forms. Violence against children can take many forms, including physical, sexual, or emotional abuse and psychological abuse such as neglect or deprivation.²⁶ Children are exposed to violence in many different environments, such as in homes, schools, workplaces, or even over the Internet.

Furthermore, children experience such violence from many different perpetrators in their lives. These people can vary from family members, teachers, neighbors, and even strangers. Such violence can not only affect the physical health of children, but also their mental health. All children, however, have a right to be protected from such forms of violence to prevent these harmful effects on their life. There are many ways for this right to be protected and it is imperative that data is collected on the patterns of violence against children to properly understand and combat this issue.

Historical Background

In 1875, Henry Bergh created the New York Society for the Prevention of Cruelty to Children after a child abuse case was unable to be prosecuted due to a lack of legal options available to New York police to deal with child cruelty.²⁷ This was the world's first organization created entirely for the protection of children against violence and abuse, followed by the National Society founded in Great Britain, which today has branches around the world.²⁸

Child abuse first became medically diagnosable after the Journal of the American Medical Association published an official report of potential symptoms in 1962.²⁹ Violence against children then became a national responsibility with both the creation of mandatory reporting laws, which required those who work with children, such as doctors and teachers, to report any suspected abuse to the authorities, and the Child Abuse Prevention and Treatment Act (CAPTA), which educated potential reporters and provided protective services for potential victims.³⁰

In the past decade, violence against children has become increasingly known and recognized. The phenomena, however, is still largely undocumented and underreported.³¹

²⁶ "Violence Against Children." UNICEF DATA. Accessed November 10, 2019. <https://data.unicef.org/topic/child-protection/violence/>.

²⁷ "Child Abuse: A Historical Perspective". Public Health Foundation of Georgia. Accessed November 20, 2019. <http://phf.org.ge/en/resources/child-abuse-a-historical-perspective/>

²⁸ Ibid.

²⁹ "Child Abuse Background and History". FindLaw. Accessed November 20, 2019. <https://family.findlaw.com/child-abuse/child-abuse-background-and-history.html>

³⁰ Ibid.

³¹ "Violence Against Children." UNICEF DATA. Accessed November 10, 2019. <https://data.unicef.org/topic/child-protection/violence/>.

This is due to a number of different reasons. Primarily, many forms of violence against children are normalized in societies. Whether this is due to certain cultural norms or the certain act of violence not being perceived as violence in the societies, many acts often occur without ever being reported or receiving punishment.

Therefore, setting international norms and definitions for terms like “child abuse” and “neglect” continue to be difficult tasks, which is why many argue that “there can be no universal standard for optimal child care or what constitutes abuse and neglect”.³² The recency of the issue as an area of international concern also means that different countries have different categories that fit into their definitions of reportable child abuse, from overall societal extra-familial abuses to child labor to prostitution to intra-familial abuses.³³ Furthermore, the victims of these violent acts are not always mature or aware enough to report nor do they understand that reporting the act is a form of protection.

The most important of the changes enacted to reduce the normalization and informational inconsistency in the study of violence against children is the systematic improvement in data generation and collection, which has helped provide timely and up-to-date information on current cases and national and international trends.³⁴ International agencies have time and time again run into the problem of getting accurate estimates of both the number of children in the country (nearly 50 million births are unregistered every year, mostly in South Asia³⁵) and the number of child abuse

cases (due to varying national definitions, the number of cases deemed abuse by official investigators may be different from the number of reported cases overall).

Future research on violence against children should focus on not only documenting more cases of violence against children but also focusing on understanding the underlying reasons for these acts.

Contemporary Conditions

The World Health Organization has identified six types of interpersonal violence that a child may encounter, some of which are explored in more detail below: maltreatment (physical violence or neglect by authority figures), bullying (in school or online), youth violence (may include gang violence), intimate partner/domestic violence, sexual violence, or emotional/psychological violence.³⁶ The short- and long-term effects of exposure to these forms of abuse may include physical injuries, impaired physical or cognitive development, negative coping behaviors or resulting mental health problems, unintended sexual problems or pregnancies, and decreased future opportunities that can impact their ability to stay in education, find and keep a job, and raise the next generation in a healthy environment.³⁷

These are not the only categories of abuse that can impact children, as other more indirect methods, such as witnessing violent acts or living under the stresses of a violent society, can also have harmful psychological effects on a developing child.

³² Crews, Gordon A. and Angela D. Crews. “Do you know how your children are? International perspectives on child abuse, mistreatment, and neglect”. Marshall University. 2010.

³³ Ibid.

³⁴ “Violence Against Children.” UNICEF DATA. Accessed November 10, 2019. <https://data.unicef.org/topic/child-protection/violence/>.

³⁵ Crews, Gordon A. and Angela D. Crews. “Do you know how your children are? International perspectives on child abuse, mistreatment, and neglect.” Marshall University. 2010.

³⁶ “Violence Against Children.” The World Health Organization. June 7, 2019. <https://www.who.int/news-room/factsheets/detail/violence-against-children>

³⁷ Ibid.

Normalization of Violence Against Children

In many places, violence against children has been normalized through cultural practices and the lack of legal protections. Even when laws do exist to protect children from violence, the legal system often fails to intervene, and protective services are often unavailable.³⁸

The widespread normalization and acceptance of violence against children is further compounded by the inability of many children to report violence perpetrated against them, especially in the home. Very young children are often incapable of reporting violence, and children of all ages often fear retaliation if they report, or fear the involvement of authorities.³⁹ Overall, 75% of 2 to 4 year olds suffer violent punishment at the hands of their parents or other caretakers.⁴⁰ Violence against children does not stop as they age; globally an adolescent is killed due to an act of violence once every 7 minutes.⁴¹

Child Abuse

Within households, children can be and are often subject to violent discipline by parents and other authority figures. A 2008 study found that parents made up nearly 80% of perpetrators of child maltreatment.⁴² UNICEF defines violent discipline to include both physical discipline, or corporal punishment, and psychological discipline, which can range from verbal aggression to

emotional manipulation.⁴³ Often compounded either together or with other forms of maltreatment, including neglect, child abuse within the household is a widespread phenomenon, as in “almost in all countries, it is only a minority of children who do not experience any violent discipline”⁴⁴.

Again however, these statistics are impacted by the varying definitions and cultural beliefs of what constitutes “child abuse”. For example, corporal punishment is considered abuse in some areas and a valid form of proper discipline in others, and that differences in boundaries and perceptions can impact both reporting and prevention efforts.

Violence in Education and Bullying

One critical area of violence against children is in the schoolroom. In over half the world’s countries, children face corporal punishment at school, including beatings.⁴⁵ In developing countries, 20% to 65% of school-aged children report experiencing bullying in the past month, and in Central and Eastern Europe, 35% of schoolchildren reported bullying in the past two months.⁴⁶

³⁸ “Violence Against Children.” UNICEF DATA. UNICEF, December 2015. <https://data.unicef.org/topic/child-protection/violence/>.

³⁹ “ELIMINATING VIOLENCE AGAINST CHILDREN.” UNICEF, 2007. https://www.unicef.org/publications/files/Eliminating_violence_against_children_eng.pdf.

⁴⁰ “Preventing and Responding to Violence against Children: UNICEF’s Approach.” UNICEF Child Protection Section, Programme Division, November 2017. https://www.unicef.org/protection/files/UNICEF_VAC_ToC_2_pager_WEB_051217.pdf.

⁴¹ Ibid

⁴² Crews, Gordon A. and Angela D. Crews. “Do you know how your children are? International Perspectives on child abuse”

⁴³ Ortiz-Ospina, Esteban and Max Roser. “Violence Against Children and Children’s Rights”. Our World in Data. 2017. <https://ourworldindata.org/violence-against-rights-for-children>

⁴⁴ Ibid.

⁴⁵ “ELIMINATING VIOLENCE AGAINST CHILDREN.” UNICEF, 2007. https://www.unicef.org/publications/files/Eliminating_violence_against_children_eng.pdf.

⁴⁶ Ibid

In recent years, cyberbullying has also become an international problem, with a 2012 poll by Reuters finding that 80% of those surveyed saw cyberbullying as a serious problem in their country, with 32% of Indian parents reporting their child being affected and 53% of Indonesians claiming to know a victim of it.⁴⁷ This problem does not equally impact all countries, as its prevalence depends on the country's average citizen's access to technology and the Internet, but it also presents unique challenges, as unlike traditional bullying, the "global reach...means that a child can be bullied by anyone who lives anywhere"⁴⁸, and cannot be solved by local action alone.

Unfortunately, violence in education goes beyond corporal punishment and bullying within the classroom. Schools are a frequent target of threats and attacks, in 2016, around 500 threats or attacks on schools were recorded.⁴⁹ Between 2013 and 2018, 21,000 students and teachers were attacked in schools and universities, with over 40 countries reporting five or more attacks in that time period, as terrorist and other armed groups "continue to turn [places of education] into sites of intimidation and violence."⁵⁰

The most affected countries are often already in sites of existing internal conflict, such as Syria, which is currently in the middle of a civil war that has caused the deaths of over 1000 students and teachers due to air strikes.⁵¹ This leads to both a more dangerous environment for children overall and the appropriation of educational

facilities by official armed forces, increasing the chances of child recruitment and sexual violence.

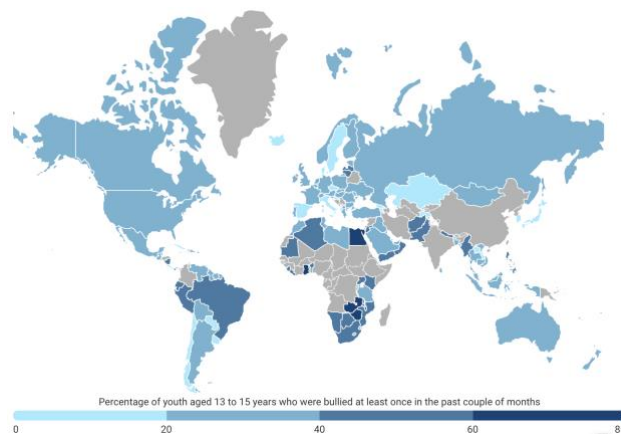


Figure 3: Prevalence of bullying against young teens globally.⁵²

Female students are often targeted, usually by extremist groups opposed to their education. The official Global Coalition to Protect Education from Attack (GCPEA) in 2017 found that female students were specifically targeted in 18 countries,⁵³ including Nigeria, the site of the 2014 abduction of over 200 schoolgirls by the terrorist group Boko Haram.

⁴⁷ Villines, Zawn. "Cyberbullying: A Global Trend." IDG Connect. May 22, 2014. <https://www.idgconnect.com/idgconnect/opinion/1019831/cyberbullying-global-trend>

⁴⁸ Ibid.

⁴⁹ "Preventing and Responding to Violence against Children: UNICEF's Approach." UNICEF Child Protection Section, Programme Division, November 2017. https://www.unicef.org/protection/files/UNICEF_VAC_ToC_2_pager_WEB_051217.pdf.

⁵⁰ "21,000 Students and teachers harmed in attacks on schools around the world". Their News Team. May 11, 2018.

<https://theirworld.org/news/thousands-children-teachers-harmed-in-attacks-on-schools-around-world>

⁵¹ Ibid.

⁵² "Peer Violence." UNICEF DATA. UNICEF, October 2019. <https://data.unicef.org/topic/child-protection/violence/peer-violence/>.

⁵³ Ibid.

Sexual Violence Against Children

Sexual violence against children (both boys and girls) is alarmingly prevalent. Surveys have found that 7% to 36% of females and 3% to 29% of males report having experienced sexual victimization as children.⁵⁴ Many girls also forced to marry at young ages, with tens of millions of girls forced to marry before age 18, a significant amount of whom are forced to marry far before turning 18.⁵⁵ Sexual violence at an early age can cause “unintended pregnancies, induced abortions, gynecological problems, and sexually transmitted infections, including HIV”,⁵⁶ according to WHO.

Additionally, many girls and women globally suffer female genital mutilation (FGM) and cutting, with over 100 million having undergone some form of FGM, and over 3 million females subject to FGM annually in Africa.⁵⁷ In some regions, 71% to 99% of females experience genital mutilation, some even before turning 4 years old.⁵⁸ This practice harms the victim both psychologically and physically, often causing infections, “chronic pain, infertility, hemorrhaging, and difficult labor⁵⁹” in cases of unintentional and intentional future pregnancies.

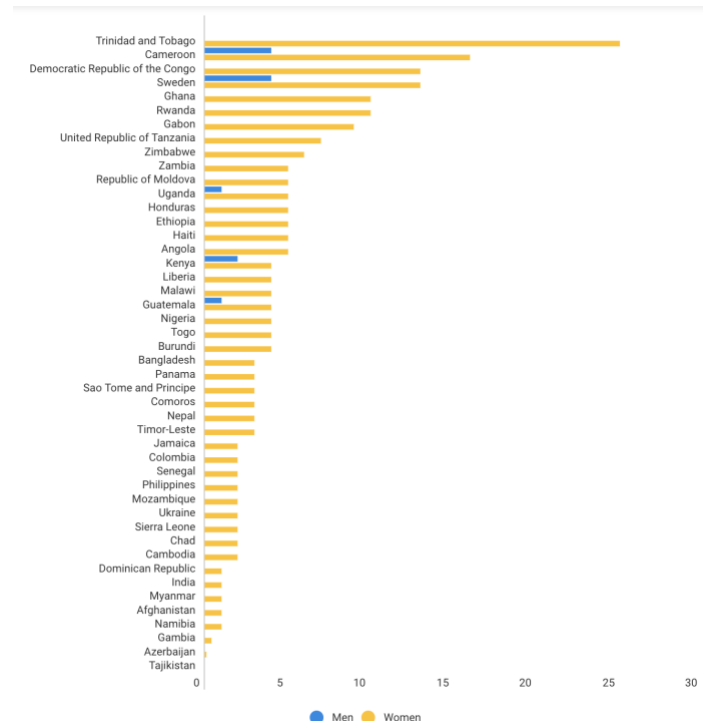


Figure 4: Percentage of the population in various countries who suffered from sexual violence before becoming 18 from the data available.⁶⁰

Past United Nations and International Actions #END Violence Campaign

As part of 2015’s U.N. Sustainable Development Goals, world leaders committed to work to end violence against children over the following 15 years.⁶¹ As part of this goal, UNICEF launched the #ENDViolence campaign. As part of the campaign, UNICEF asked young people about their experience with school violence, and compiled answers from over one million respondents from 160 countries into

⁵⁴ “ELIMINATING VIOLENCE AGAINST CHILDREN.” UNICEF, 2007.
https://www.unicef.org/publications/files/Eliminating_violence_against_children_eng.pdf.

⁵⁵ Ibid.

⁵⁶ “Violence Against Children.” The World Health Organization. June 7, 2019.

⁵⁷ “ELIMINATING VIOLENCE AGAINST CHILDREN.” UNICEF, 2007.

https://www.unicef.org/publications/files/Eliminating_violence_against_children_eng.pdf.

⁵⁸ Ibid.

⁵⁹ Mahmoud, Manal Ibrahim Hanafi. “Effect of female genital mutilation on female sexual function, Alexandria, Egypt”. Alexandria Journal of Medicine. March 2016.
<https://www.sciencedirect.com/science/article/pii/S2090506815000238>

⁶⁰ “Sexual Violence.” UNICEF DATA. UNICEF, October 2019.
<https://data.unicef.org/topic/child-protection/violence/sexual-violence/>.

⁶¹ “Global Partnership to End Violence against Children - United Nations Partnerships for SDGs Platform.” United Nations. United Nations, n.d.

<https://sustainabledevelopment.un.org/partnership/?p=9061>.

a #ENDViolence Youth Manifesto, presented in January 2019 at the Education World Forum.⁶²

UN Convention on the Rights of the Child

The United Nations Office of the High Commissioner for Human Rights (UNOHCHR) ratified the Convention on the Rights of the Child in 1990, which affirms the duty of the state to protect children from “all forms of physical or mental violence, injury or abuse.”⁶³ This can take the form of social programmes for impacted children as well as the establishment of proper bureaucratic and legal channels to identify, report, and rectify violations of that right.

All 194 countries which have currently ratified the resolution are bound by international law to implement the described measures in their country, with progress tracked by the UN Committee on the Rights of the Child. Additionally, 120 countries have ratified two optional protocols in 2000, which include measures against child soldier recruitment, child prostitution, and child slavery.⁶⁴ Uniquely, in Article 45, this resolution is the only international human rights treaty to be represented and advise on its implementation around the world.⁶⁵

A more recent iteration of the treaty came in the form of the 2017 General Assembly Resolution on the Rights of the Child, which specifically focused on violence against children.⁶⁶ This treaty called

for increased actions on the part of the states in the form of “well-coordinated and well-resourced national strategies for the prevention and elimination of all forms of violence against children,”⁶⁷ through research, increased data collection, more support for parents, teachers, and others who work with children, and better national monitoring tools. Other key issues in this updated version included the prevention of bullying and the more specific rights of migrant children, including those undocumented, to be the same as any other child of the nation, regardless of their immigration status.

World Health Organization

The World Health Organization has led multiple efforts to reduce global violence and maltreatment of children, including the technical package INSPIRE⁶⁸, which includes seven strategies to prevent violence targeted at children as well as overall improvement of the systems meant to support those affected. These include increasing parental training, changing norms and values, creating safe environments, and improving the quality and effectiveness of response services.

In 2016, WHO also released the “Global Plan of action on strengthening the role of the health system within a national multisectoral response to address interpersonal violence, in particular against women and girls, and against children.”⁶⁹ This plan commits WHO to improving global statistics and information on violence

⁶² “#ENDViolence in Schools.” UNICEF. UNICEF, n.d.

<https://www.unicef.org/end-violence/in-schools>.

⁶³ “Convention on the Rights of the Child”. UNOHCHR.

September 2,

1990.<https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>

⁶⁴ “Every child has the right to survival, protection, and education”. Save the Children.

<https://www.savethechildren.org.uk/what-we-do/childrens-rights/united-nations-convention-of-the-rights-of-the-child>

⁶⁵ “Convention on the Rights of the Child. UNOHCHR.

⁶⁶ “General Assembly resolution on the Rights of the Child highlights children’s protection from violence”. UN Special Representative of the Secretary-General on Violence Against Children. November 24, 2017.

<https://violenceagainstchildren.un.org/news/general-assembly-resolution-rights-child-highlights-children%E2%80%99s-protection-violence>

⁶⁷ Ibid,

⁶⁸ “Violence Against Children”. World Health Organization. June 7, 2019.

⁶⁹ Ibid.

against children, through increased monitoring, an information system to track research on the topic, and global status reports and guidance documents to help countries facilitate their strategies and track their progress.

Children and Armed Conflict

Recognizing the increased vulnerability of children living in and impacted by areas of intense armed conflict, the UN Security Council adopted Resolution 2143⁷⁰ in 2014, aimed at protecting students and educational facilities from attacks as well as increased peacekeeper procedures for protecting children in these conflict zones. This resolution also urges for increased measures against the recruitment of child soldiers and more considerations in the distribution of humanitarian aid, in security structures, and in peace processes for the specific needs of children.

With the passage of Resolution 2427⁷¹ in 2018, the Security Council continued to push for the same measures as in 2014, condemning child recruitment, mass abductions, and sexual and gender-based violence committed by terrorists and other armed groups. This treaty put additional emphasis on the long-term effects and post-conflict resolution treatment of children, including measures for the rehabilitation and reintegration of former child soldiers post-conflict, as well as the proper physical and psychosocial care of all children affected by the trauma of living in conflict zones through healthcare and education.

⁷⁰ "Resolution 2143". United Nations Security Council. March 7m 2014.
http://www.securitycouncilreport.org/atf/cf/%7B65BF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/s_res_2143.pdf

⁷¹ "Resolution 2427". United Nations Security Council. July 9, 2018.
http://www.securitycouncilreport.org/atf/cf/%7B65BF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/s_res_2427.pdf

Questions a Resolution Must Address

1. *What aspects must a workable definition of child abuse contain?*

Multiple definitions of what constitutes child abuse in different cultures remains a problem for international organizations aimed at preventing and collecting data on the issue. How might a new or reformed definition mitigate that issue?

2. *What measures might countries and the UN take to improve state and international actions surrounding child abuse and violence?*

The UN and other international organizations have already called for and helped multiple countries craft national strategies to improve data collection, prevention, and post-conflict rehabilitation. How can this body improve or increase the effectiveness of these measures?

3. *How can countries better protect students and educational facilities?*

Schools, universities, and other places of education have been the targets of extremist groups worldwide. How would this committee recommend the international community support states in protecting these institutions?

4. *How can countries better protect female children and students?*

Young girls, especially those seeking an education, are often specifically targeted and subject to sexual and overall violence. What can the UN and countries do to address both norms that facilitate this behavior as well as their direct targeting?

5. *What tools can countries utilize to educate about and prevent bullying?*

Especially with the relatively recent advent of cyberbullying, how might states ensure that their citizens, in particular parents, stay informed about the signs and effects of bullying?

6. *How should emotional or psychological abuse be addressed and mitigated?*

It is necessary for countries to acknowledge the prevalence and harmful effects of emotional and psychological violence on children, as well as establish the necessary social structures and programs to recognize and handle such cases.

7. *What can countries do to better support children in and affected by areas of conflict?*

Children are especially vulnerable to direct attacks, neglect, and exposure to violent situations when living in areas of dangerous conflicts, even more so when the state and the international community are ill-equipped to handle their specific needs. Additionally, how should states mitigate the effects of displacement and potential trauma on migrant and internally displaced children?

8. *How can the UN better enforce the measures outlined in the UN Convention on the Rights of the Child?*

Since its ratification, the Convention has undergone multiple iterations and changes in focus. How can countries more adequately ensure the rights protected in the document and potentially update it for the new situations of today?

Bloc Positions

▪ *Latin America and the Caribbean*

Countries in this region have the most homicides among children and adolescents,⁷² with a rate of 12 deaths per 1000,000 population in 2012. El Salvador, Guatemala, and Venezuela have the highest rates in the region and in the world. Countries in this bloc should work to address the systemic issues that facilitate this violent environment, and especially its impact on their young men, as homicide has become the leading cause of death for adolescent boys in seven of these countries.⁷³

▪ *West and Central Africa*

Countries in this region also suffer from high rates of homicide impacting children. Adolescent girls are also often targeted in this region, with Cameroon, the Democratic Republic of the Congo, and Ghana⁷⁴ reporting the highest levels of forced sexual acts for young women. While other African countries also report similar issues (Zimbabwe and Uganda are also at the top of the list), forced sexual initiation is especially prevalent in this region and should be addressed accordingly.

▪ *Middle East and Northern Africa (MENA Region)*

Countries in this bloc have the highest levels of children affected by severe physical punishment dealt by parents or other authority figures.⁷⁵ Yemen and Egypt are among the top of the list, where children experience high levels of both psychological and physical punishment.

▪ *South and Southeast Asia*

This bloc has high percentages of domestic violence by an intimate partner or spouse, especially affecting young married girls⁷⁶, as well as high rates of child abuse and physical violence towards children, again impacting young girls. For example, Nepal reported the highest rate in the world of forced sexual initiation before the age of 15.

▪ *Europe and the United States*

Although at a lower prevalence than other blocs, countries here still suffer from the same problems of violence against children, in particular violent punishment by parental figures and sexual violence. Countries here also report major problems with bullying, with over 50% of Romanian and Latvian children reporting bullying at school⁷⁷.

⁷² "Hidden in Plain Sight: A Statistical Analysis of Violence Against Children". UNICEF Data. September 2014. <https://data.unicef.org/resources/hidden-in-plain-sight-a-statistical-analysis-of-violence-against-children/>

⁷³ Ibid.

⁷⁴ Ibid.

⁷⁵ Ibid.

⁷⁶ Ibid.

⁷⁷ Ibid.

Conclusion

Violence against children remains a major issue that concerns the UN and the overall international community. This problem can take many forms, including corporal and psychological punishment, bullying, attacks targeting students, and gender-based violence. These acts can impact children in many direct and indirect short-term and long-term effects, including, but not limited to, severe injuries, death, mental and emotional trauma, health problems, and reduced levels of education and career attainment.

It is important that all countries work to reduce the prevalence of violence impacting children through both preventative methods and post-trauma support systems. This committee should work to improve global reporting and information collection methods, as well as strengthen systems to educate, protect, and rehabilitate students against both direct forms of violence and the indirect effects of violent environments.

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