COMMITTEE GUIDE

UNICEF



United Nations Children's Fund

Emilia Arabia & Mariana Riascos

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1. Presidents' Letter

Dear delegates,

It is an honour to welcome you all to the nineteenth version of the Colegio Colombo

Britanico's Model United Nations and to the United Nations Children's Fund. This

committee focuses on ensuring a bright future for millions of children around the world

through the establishment of fair treatment in multiple areas. As delegates, you will put

yourselves in the role of the representative of a country and you will research, discuss and

strive to solve different issues that affect children worldwide.

The Model United Nations is a unique experience that will help you broaden your

worldview and build your perspective on important issues based on information and

debates. This model will challenge you to develop your research, debate, and

communication skills. Most importantly, this model will shape you into a responsible and

sensitive citizen of the world, and it will leave lasting knowledge that will help you

throughout your life.

As your presidents, we hope that you all will cherish and take advantage of this experience

as much as we have during our years as delegates. We expect you to put the biggest effort

into every part of the model in order to make it as enjoyable and beneficial as possible.

Finally, we hope that you will find interest and passion in the topics of the committee, as

we truly believe that they are important and essential issues that need to be discussed

and solved.

You are taking on a huge challenge, so we want to thank you and congratulate you for

giving the MUN a chance. In order to make this process as easy as possible, we want you

to know that we are there for you whenever you need help or advice. Lastly, we are very

excited to be your presidents and we look forward to meeting all of you. Good luck!

Best regards,

Emilia Arabia and Mariana Riascos

UNICEF Presidents

UNICEF

2. Committee Information

I. History

"After the Second World War, millions of children in Europe lived without shelter, clothing, or food, due to the humanitarian crisis caused by the conflict. On 11th December 1946, the UN General Assembly founded the United Nations International Children's Emergency Fund to help the vulnerable children of the continent. This programme vowed to aid children without discrimination. The work of UNICEF has been guided by principles of equity since the very beginning.

In the 1950s, UNICEF shifted its efforts to the general improvement of children's welfare around the world, particularly in developing countries. It changed its name to the United Nations Children's Fund in 1953. UNICEF was awarded the Nobel Prize for Peace on 26th October 1965 because of its efforts towards fostering peace and a brotherhood among nations. In 1989, world leaders came together to establish the United Nations Convention on the Rights of the Child. The idea of this convention was ground-breaking, as it was one of the first treaties to address the special rights and needs of children. The Convention on the Rights of the Child is the most widely ratified human rights treaty in history, with 196 countries becoming State Parties to it.

UNICEF works in many areas, such as adolescent development, education, sanitation and hygiene, HIV/AIDS, nutrition, and child protection. With the help of nations, other committees, and organizations, UNICEF builds a better world for children.

II. Structure

UNICEF's policies are shaped, managed, and administered in New York, United States. In Copenhagen, Denmark, the Supply Division provides essential products and services to children in need. The Global Shared Services Centre in Budapest, Hungary, administers the UNICEF staff. The Innocenti Research Centre, with branches in Florence, Japan, and Brussels, is in charge of fund-raising and communication with leaders.

The governing body of UNICEF is called the Executive Board, which is made up of 36 government representatives. The members of this group are chosen by the United Nations Economic and Social Council (ECOSOC) for three-year terms, and they are in charge of establishing policies and approving programmes.

The 33 National Committees work as the public face of UNICEF, as they promote the rights of children in difficult situations. The National Committees raise about one-third of UNICEF's annual income, and they also partner up with different organizations and corporations to address issues on children's rights." (Arabia and Serrano, 2020)

III. Special Procedures

UNICEF has no special procedures.

IV. Bibliography

Arabia, E & Serrano, L. (2020). Commission Guide UNICEF. CCBMUNXVIII

3. Simulation: International policy regarding treatment of immigrant children at borders

I. History/Context

The earliest instances of child migration Child according to the Migration Programmes Investigation Report by the Independent Inquiry Child Sexual Abuse occurred in 1618 when European children were sent to colonies on the American continent. The reason for these migrations were "humanitarian claims to be rescuing children from poor and unsuitable environments and providing them with new opportunities overseas, imperialist plans to consolidate the white, Anglo-



Library and Archives Canada, (2021). *Home Children, 1869-1932*. [Photograph]. Library and Archives Canada. https://www.bac-lac.gc.ca/eng/discover/immigration/immigration-records/home-children-1869-1930/Pages/home-children-aspx

Saxon population in imperial territories, [and] religious concerns with safeguarding children's Catholic faith or ensuring that a particular denomination was well represented amongst imperial settlers" (Constantine, 2017). In order to control the migrations, programs and organizations were established over the years. These include the Children's Friend Society, founded by Edward Brenton in 1830 to send "juvenile vagrants" to South Africa, Canada and Australia to be reformed; Barnardo's, founded by Thomas Barnardo in 1866, which sent children to Australia in order to care for them better; and Home Children, founded by Annie Macpherson in 1869, which sent thousands of British children to Canada, South Africa, New Zealand and Australia. However, there are reports and allegations that the children that migrated with these programmes were abused and forced to work.

In 1850, England and Wales established the Poor Law Act, allowing wealthy guardians to "finance the emigration of suitable children in their care" (Constantine, 2008). This migration, which started as an effort to prevent juvenile delinquency, became an Imperial initiative to populate the British Empire and to generate cheap labour in under-populated and

underdeveloped parts of the empire. In the 1920's, child labour wasn't acceptable in Great Britain, and so the migration to other parts of the empire for this motive virtually ceased, especially after Canada introduced tight migration regulations in 1925. The Children Act of 1948 protected children, united families and established a childcare service in Great Britain, which made the practice of child migration under the aforementioned programmes unpopular, as they were based on separating children from their families without their parents' knowledge or permission. In order to prevent this phenomenon from ever occurring again, multiple international treaties regarding the rights of children and the rights of migrant children were established.

International law/treaties

Refugee, migrant, unaccompanied child are terms used throughout this report. Most have specific legal meanings enshrined in international conventions and laws that correlate to a child's status in a country. But no matter what terms are used, a child is a child.

Migrant: A person who is moving or has moved across an international border or within a home country regardless of whether the move is voluntary or involuntary and regardless of the length of stay.

Refugee: A person who lives outside his or her country of nationality or habitual residence and is unable to return because of persecution or fear of persecution based on race, religion, nationality, political opinion or membership in a particular social group.

Asylum seeker: A person who seeks refuge in a country to which he or she has fled because of persecution.

Internally displaced persons: People who fled their homes – but not their countries – because of armed conflict, violence, disaster or a violation of human rights.

Unaccompanied child: A child who has been separated from both parents and is not being cared for by an adult legally responsible to do so.

Separated child: A child separated from both parents or a previous legal guardian but not necessarily other adult family members.

Uprooted: A general, non-legal term used in this report for people who have left their place of origin for any reason. They may be migrants, refugees or internally displaced. Some are forced to leave home; others are not. The term comes from the UNICEF report *Uprooted: The growing crisis for refugee and migrant children*.

Source: United Nations Children's Fund, *Uprooted: The growing crisis for refugee and migrant children*, UNICEF, New York, September 2016, p. 14; Inter-agency Working Group on Unaccompanied and Separated Children, *Field Handbook on Unaccompanied and Separated Children*, March 2017, p. 15; United Nations Children's Fund, *Education Uprooted*, UNICEF, New York, September 2017, p. 5.

According to the United Nation of Human Rights, the ILO and the Parliamentary Union, these migration laws, policies and practices have been separated into seven branches of international law, which can be seen in the following links:

- International human rights law
 (https://www.un.org/en/udhrbook/pdf/udhr booklet en web.pdf)
- International labour law/standards
 (https://www.ilo.org/global/standards/subjects-covered-by-international-labour-standards/occupational-safety-and-health/lang--en/index.htm)
- International refugee law
 (https://www.unhcr.org/publications/legal/3d4aba564/refugee-protection-guide-international-refugee-law-handbook-parliamentarians.html)
- International criminal law
 (https://phap.org/PHAP/Themes/Law and protection/ICL/PHAP/Themes/ICL
 .aspx?hkey=ed1f5fc7-5278-40a4-b45c-074626104af2)
- International humanitarian law
 (https://www.icrc.org/en/doc/resources/documents/misc/57jmuk.htm)
- International consular relations
 (https://legal.un.org/ilc/texts/instruments/english/conventions/9 2 1963.pd
- International maritime law
 (https://www.un.org/depts/los/convention_agreements/texts/unclos/unclose.pdf)

According to the Migration Data Portal, the International Human Rights treaties and the associated protocols that provide migrants' rights are divided into ten branches, which are shown below:

- 1948-Universal declaration of Human Rights
- 1965-International Convection on the Elimination of All Forms of Radical Discrimination

(https://www.ohchr.org/EN/ProfessionalInterest/Pages/CERD.aspx)

- 1966-International Covenant of Civil and Political Rights (http://www.cirp.org/library/ethics/UN-covenant/)
- 1966-International Covenant on Economic, Social and Cultural Rights (https://www.ohchr.org/EN/ProfessionalInterest/Pages/CESCR.aspx)
- 1979-Convention on the Elimination of All Forms of Discrimination against
 Women
 - (https://www.ohchr.org/Documents/ProfessionalInterest/cedaw.pdf)
- 1984-Convention against Torture and Other Cruel, Inhuman or Degrading
 Treatment or Punishment
 (https://www.ohchr.org/EN/ProfessionalInterest/Pages/CAT.aspx)
- ·1989-Convention on the Rights of the Child (https://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx)
- 1990-International Convention on the Protection of the Rights of all Migrant
 Workers and Member of their Families
 (https://www.ohchr.org/EN/ProfessionalInterest/Pages/CMW.aspx)
- 2006-Convention on the Rights of Persons with Disabilities
 (https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html)
- 2007- International Convention for the Protection of All Persons from Enforces
 Disappearance

(https://www.ohchr.org/EN/HRBodies/CED/Pages/ConventionCED.aspx)

There are multiple laws for migrants, but the Rights of the Child are laws that must be followed in any part of the world as long as the individual is under 18 years old. That being said, the Convention on the Rights of the Child was adopted and opened for signature by the General Assembly on November 20th of 1989. In which the United Nations, the Universal Declaration of Human Rights and the International Covenants of Human Rights have reaffirmed their faith in "fundamental human rights and in the dignity and worth of the human person and have determined to promote social progress and better standards of life in larger freedom." (Convention on the Rights of the Child, 1996-2021)

Recalling that, it was proclaimed that "the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth" (Declaration of the Rights of the Child, 1989) and must grow up in a family environment, in an atmosphere of happiness, love, and understanding.

Having that in mind, the Declaration on Social and Legal Principles relating to the Protection and Welfare of Children, the Special Reference to Foster Placement and Adoption Nationally and Internationally, the United Nations Standard Minimum Rules for the Administration of Juvenile Justice, and the Declaration on the Protection of Women and Children in Emergency and Armed Conflict, have recognized that many children are living in harmful conditions. That is why all the members have agreed that (these are just 10 articles of the 54 articles):

- Every human being below the age of 18 years old is a child by law.
- Children's rights must be respected without discrimination.
- In all actions concerning children, without exception, the best interest of the child is the primary consideration.
- State parties must ensure institutions, services and facilities which are respectable in areas such as safety, and health.
- State parties must undertake all appropriate legislative and administrative measures for the implementation of the children's rights.
- Children must be registered as soon as they are born, and they have the right to a name, and a nationality.
- A child has the right to preserve his or her identity and appropriate assistance must be offered.
- State parties shall ensure that the child is not separated from his or her parent
 against their will, unless a judicial review determines that such separation is
 necessary for the best interest of the child, (the person under review has the right to
 express their point of view)
- State parties should respect the right for the child to maintain personal relations or direct contact with both parents, unless it is not beneficial for the child.

It is important to mention that migration laws can be viewed from two different approaches:

- Derived by the state, which means they have the right to protect their borders, confer nationality, admit, and expel non-residents, to combat trafficking and to ensure national safety.
- 2) Derived by human rights, which means it follows the international laws mentioned above.

UNICEF committee policies:

In 2018, political leaders of the UNICEF committee adopted six essential policies, which were highlighted in the UNICEF Agenda for Action.

The essential policies are:

1) "Protect refugee and migrant children from exploitation and violence." The moment children immigrate from their homes they become vulnerable to new dangers such as threat of abuse, violence, exploitation, extortion, trafficking, smuggling and discrimination. In 2014, 21 000 migrants (it is not clear how many were children) died worldwide due to the lack of regulations to guarantee their safety.

For example: 75% of the children who arrived in Italy from the Central Mediterranean route were held against their will or forced to work without pay. That is why this policy asks governments to increase safe and legal ways for children to migrate, expand access to information, and provide assistance that can help keep uprooted children safe.

"Article 3 of the Convention on the Rights of the Child stipulates that governments and partners must act in a child's best interests. Meeting this obligation for refugee and migrant children starts with a rights-based approach that aims to secure children's physical, psychological, moral and spiritual integrity and promote their dignity. The process requires a comprehensive assessment of children's identity including nationality, upbringing, vulnerabilities, protection needs and ethnic, cultural and linguistic background. Starting as soon as possible from their identification, and at each stage of a child's journey as a refugee or migrant, a best interests assessment should be documented before decisions are made

about a child's life. " (The United Nations Committee on the Rights of the Child Committee, Treatment of unaccompanied and separated children outside their country of origin, General Comment no. 6, June 2005.)

2) "End the detention of refugee and migrant children." Children are usually detained in refugee camps because of their migration status, and this is something which is present in more than 100 countries. For this reason, the International Detention Coalition, a network of 300 NGOs and 70 countries, was formed to advocate for alternatives such as foster care, supervised independent living, or community-based accommodations for families. Additionally, the Inter Agency Working Group (IAWG) which has 28 members, and was formed in March 2014, is an international alliance which provides the government the support needed to stop the detention of children due to their immigration status.

In the case of Zambia, in 2014 the government launched guidelines *for Protection Assistance* to Vulnerable Migrants. These are some of the guidelines:

- "Identify the immediate- and long-term needs for categories of migrants including victims of trafficking and unaccompanied and separated children
- Outline the principles for service delivery including respect of rights, confidentiality,
 consent and non-discrimination
- Describe the importance of the best-interests determination for child refugee and migrant
- Provide principles for assisting unaccompanied and separated children that include family unity
- Identify protection needs including case management, needs assessment and identification of different kinds of vulnerabilities'' (Beyond the Borders, UNICEF)
- 3) "Keep families together and give children legal status." This policy calls for measures that prevent children from being separated from their families, and faster procedures to reunite them, just as countries such as Afghanistan and South Sudan are doing.
- 4) "Keep refugee and migrant children learning and healthy." Migration causes legal, procedural, financial, cultural and social barriers that keep children from health,

education, employment and without access to social services. Data shows that 50% of refugee children are enrolled in primary school, that refugee children are five times more likely to be out of school than the rest of the children, and that less than 25% of refugees are enrolled in secondary school. This is why Australia, Canada, Denmark, Dubai, France, Germany, Netherland, the United Kingdom, and the United States supported the movement "Education Cannot Wait" which was launched in May of 2016, and seeks to "generate greater shared political, operational and financial commitment to fulfil the educational needs of children in emergencies." (Beyond the Borders, UNICEF)

- 5) "Press for action on the causes that uproot children from their homes." Problems should be solved from the root, which is why governments and partners are addressing the main causes of migration such as poverty, conflict, violence, disasters, limited job opportunities, and lack of education, health care, water and sanitation services. In the case of reduction of violence three essential component have been stated:
 - "Increase community participation in the schools
 - Identify potential student leaders and provide support as they build schoolbased committees engaged in theatre, arts, music and sports
 - Diagnose schools' security issues through interviews with students, teachers and parent associations, and work with community members and school officials to address them" (Beyond the Borders, UNICEF)
- 6) "Combat xenophobia and discrimination" Migrating children must integrate into their new surroundings, but in these new destinations they still struggle with poverty and lack of access to services. Most of them have to confront xenophobia and discrimination due to their inability to speak the new language, or to integrate into a new culture, for example, in Germany there were 3,767 attacks on refugee seekers in 2016. That is why this policy asks governments to create laws for those refugee and migrant children which will protect them and allow them to adapt to their new destination.

Consequences of treatment

Migration is mainly caused by demographic factors, economic disparity, violent conflicts, state failure and natural disasters. This causes children to become trapped in their status as just migrants, which makes officials give little consideration to their vulnerabilities and their needs as children. Usually, they end up in detention facilities, in conditions that are mostly inhumane, and they might even be held in cells with adults who are strangers. Many spend several months in asylums where they are subject to new traumas, or where previous ones are exacerbated, and suffer physically and mentally.

Most of the challenges faced by migrant children is when they migrate without proper documents or without their families. This puts children at a high risk of exploitation and vulnerability to labour, which is why many end up in agriculture services or domestic work, with no opportunities to study, or they might become victims of trafficking.

Childhood and adolescence are key life stages that involve great changes for the individual. Their development is influenced by their social, cultural and family environment, which are areas that are commonly affected when they migrate, impacting their family relationships, and their social and educational performance. When children migrate, they might have to learn a new language, and adapt to new social norms or a different cultural environment.

Effects on:

<u>Family:</u> "Family is a unit and the most significant emotional foundation in the life of an individual." (Migration and its impact on children's lives, June 2015)

Migration creates multiple changes within the family and creates a new life cycle for them to adapt and grow in. They experience the search for identity while establishing themselves in new sociocultural environments. Additionally, the physical presence of the parents or the emotional availability and the socioeconomic background of the family are also key influences in the children's migration process.

<u>School:</u> Experts say that the level of adaptation of children in the place of settlement is reflected by their school performance.

Migrant children who live in refugee camps or in detention centres lack education and often do not have access to it at all. This is a major problem for their development, not only in their knowledge but also psychologically, since in appropriate schools their values, culture and language will be respected.

Public views on migrants:

Education, values, beliefs, nationalist sentiments and age are factors that influence how people interact with migrants. Studies have indicated that attitudes towards refugees and asylum seekers are different to those towards regular migrants. Furthermore, attitudes towards migrants vary on gender and level of adjustment of the migrant. Additionally, migrants might suffer from xenophobia, racism and discrimination which are attitudes that might cause them different kind of traumas.

In 2016, an analysis was done of the data published in 2014 by the Australian Human Rights Commission Inquiry into Children in Immigration Detention. The analysis examined the impacts among 129 children aged 17 and under who had been detained for an average of 7 months. The results showed that 83% of the adults and 85.7% of the teenagers showed severe co-occurring depression and anxiety, and 75.7% of the children had a high probability of a psychiatric disorder.

The child might experience:

- Suicidal attempts
- Anxiety and depression
- Post-Traumatic Stress Disorder (PTSD)
- Weight loss and sleep problems
- Poor self-esteem
- More likely to take drugs and be bullied when they leave camps
- Isolation
- Violence
- Substandard working conditions with no payment of wages

- Face higher death rates at work than local children
- Constant fear of being reported to the authorities

These acts are experienced in detention centres, refugee camps, or when children leave these areas. Often the detention centre conditions mean that there is inadequate access to time outdoors, to food, and to water. These centres have even been described as similar to prisons in appearance with cages, fences, and harsh overhead lighting that is left running for 24 hours a day. Lastly, poor conditions have created the spread of flus, death in custody, older children caring for younger children, mistreatment, abuse, and neglect from the guards.

II. Current Situation

According to UNICEF, as of 2020, 36 million of the 281 million international migrants were children. Migration, especially from origin countries with political, social and economic issues, can pose a great danger to children, not only because of the precarious conditions of the migration itself, but because of the mistreatment, violation of human rights or lack of fair opportunities they may experience in the country of destination.

Migrant children faced multiples risks, so there is an international obligation for every country to make a safe and fair space for child migrants, regardless of how or why they got there, because, "A child is a child, no matter why she leaves home, where she comes from, where she is, or how she got there." (UNICEF, 2020).

International situation

United States

As of May 2021, 155 accompanied minors, 3,931 individuals in a family unit and 252 unaccompanied minors have entered the United States through the southwest border according to the U.S Customs and Border Protection. The Biden administration has taken

several steps to overturn the measures implemented by the last administration regarding the treatment of child migrants, including the placement of approximately 16,000 children with family members residing in the country, placement of children in Department of Health and Human Services controlled shelters and the establishment of more emergency centres to ensure a safe environment for the children. According to the New York Times, migrant children have been in these shelters for an average of 37 days when the recommended time is 20.

According to the BBC, unaccompanied children are first held in U.S. Customs and Border protection custody and then transferred to the

U.S. Customs and Border Protection (CBP) Encounters Southwest Land Border Encounters for Fiscal Year (FY) 2021 Citizenship Grouping Title of Authority Reset Filters 5,168 173,686 178 854 APR FY21 MAY FY21 8,023 172,011 180,034 PERCENT CHANGE ▲ 55.2% **▼-1.**% **▲.7**% Demographic: Todo: Citizenship: Todo: Title of Authority: Todo

FYTD Southwest Land Border Demographic by Month										
		ост	NOV	DEC	JAN	FEB	MAR	APR	MAY	FYTD Total
Office of Field Operations	Accompanied Minors	112	89	87	105	145	159	134	155	986
	FMUA	113	130	156	230	301	719	1,797	3,931	7,377
	Single Adults	2,544	2,606	2,493	2,631	2,871	3,028	2,999	3,685	22,857
	UC / Single Minors	131	124	140	163	160	227	238	252	1,435
	Total	2,900	2,949	2,876	3,129	3,477	4,133	5,168	8,023	32,655
U.S. Border Patrol	FMUA	4,634	4,172	4,248	7,066	19,287	53,396	48,297	40,708	181,808
	Single Adults	59,727	60,518	62,043	62,560	69,084	97,084	108,479	117,397	636,892
	UC / Single Minors	4,690	4,475	4,852	5,687	9,269	18,724	16,910	13,906	78,513
	Total	69,051	69,165	71,143	75,313	97,640	169,204	173,686	172,011	897,213
	FYTD Total	71,951	72,114	74,019	78,442	101,117	173,337	178,854	180,034	929,868

Figure 1: U.S Customs and Border Protection, (2021).
Southwest Land Border Encounters. [Graph]. U.S Customs

https://www.cbp.gov/newsroom/stats/southwest-land-border-encounters

and Border Protection.

Office of Refugee Resettlement within 72 hours. Facilities run by the U.S Customs and Border Protection are reportedly overcrowded and lack the proper conditions for security against COVID-19.

Lastly, President Biden presented the U.S. Citizenship Act of 2021, which if implemented, would: provide pathways to citizenship; protect migrant labourers; keep families together; promote integration of immigrant and refugees; implement technology and infrastructure at border controls; protect communities around the borders; and address the causes of migration and support asylum seekers.

Canada

The Immigration, Refugees and Citizenship Canada office provides various services to migrant and refugee children, such as facilitating arrivals, providing protection and granting citizenship. In Canada, individuals under 22 years of age qualify as dependent children, which helps include children in immigration applications to the country. This also makes immigrants

and refugees eligible for the Canada Child Benefit which is an amount of money paid monthly to families with children under 18 years of age.

In the case of unaccompanied children seeking asylum, the provinces of British Columbia, Alberta, Manitoba, Ontario, Quebec, and Newfoundland and Labrador, have special procedures to manage unaccompanied children. These include crisis units, foster families and contacting the child's family. However, there are instances where there are little to no procedures, or procedures that may be counterproductive, such as sending the child back to their country of origin or placing them in detention centres.

The Canada Border Services Agency states that children are only detained or housed as a last resort and that all alternatives should be considered beforehand. However, Human Rights Watch reports that between April 2019 and March 2020, 136 children were detained with their parents to avoid separation. According to the Global Detention Project, children in Canada can be detained for reasons of identity, flight risk, irregular arrival or simply because their parents were detained. Multiple organizations, such as Amnesty International and International Human Rights programme have described these facilities as "woefully inadequate and unsuited for children" (International Human Rights Program, Amnesty International, et. al, 2018).

In order to amend these faults, the Canada Border Services Agency presented the National Directive for the Detention or Housing of Minors, which seeks to stop the detention and separation of minors and to preserve the family unit. However, as of June 2021, there are still accounts and instances of immigration detention of children in Canada according to the Human Rights Watch.

Europe

UNICEF states that of the 50,000 refugees and migrants who arrived in Europe during January and August 2020, 25% were children. The organization also estimates that about 10,000 of these children were unaccompanied and separated. Due to Europe's huge influx of migrants and refugees, children who arrive in European countries are at risk of mistreatment, separation and detention.

According to the UNHCR, UNICEF and IOM, about 870 children, including 329 who were unaccompanied and separated, arrived in Spain between January and June of 2020, with most of them originating from Morocco. Currently, Spain is experiencing an irregular influx of migrants through Ceuta, a city located near Morocco, and 1,500 people, according to Save The Children, have been affected by the crisis. There are reports of poor conditions in facilities where children are identified and possibly deported.

The Ministry of Labour of Italy reports that in April 2020, 6,633 unaccompanied minors, most aged 15 to 17, were accommodated in different regions, including 1,946 in Sicily, 760 in Friuli-Venezia Giulia and 683 in Lombardy. Most of these minors came from Bangladesh and Tunisia. However, Save the Children stated in June 2021 that, "Hundreds of unaccompanied minors travelling through Italy and other countries in Europe are being abused, they are facing unprecedented violence and are illegally rejected at borders" (Save the Children, 2021). Save the Children also alleges that Italian authorities in Trieste would treat the children as adults so they could deport them to the Slovenian side of the city.

Middle East

Armed conflicts and crises taking place within the Middle East currently have left thousands of children in need of asylum in nearby countries. UNICEF estimates that 5.8 million children are refugees in the Middle East and North Africa region. These children are at risk of mistreatment, separation and lack of access to proper sanitation and nutrition in detention centres.

Figure 2: UNICEF, (2021). *Humanitarian Action for Children*. [Graph]. UNICEF. https://www.unicef.org/appeals/syrian-refugees

According to Amnesty International, migrant detention centres in Saudi Arabia violate the

human rights of Ethiopian migrant workers and their children who were expelled from Yemen. The organization reported, "prevalence of disease, lack of food, water and health care" (Amnesty International, 2020). However, the World Bank reported on a reform to migrant

workers' rights, which would allow them to enter and exit Saudi Arabia freely. This reform will hopefully prevent the detention of migrant workers and their families.

UNICEF estimates that 2.5 million Syrian children are refugees in Egypt, Iraq, Jordan, Lebanon and Turkey. According to UNICEF, these countries, with the help of the organization, have provided education and health services to thousands of Syrian refugee children, including 774,257 children enrolled in formal education in Turkey and 42,000 children screened for malnutrition in Lebanon. Egypt has a regional refugee and resilience plan that seeks to respond to the Syrian refugee crisis in the country, which includes responses in the education, health and food security sectors.

South America

The Venezuelan refugee and migrant crisis due to the economic, social and political state of the country, has led to the migration of about 5 million Venezuelan citizens to all over the world, especially to South American countries. According to the IOM, 80% of these migrants and refugees live in Latin America, the Caribbean and Central America, primarily in Colombia, Peru, Chile and Ecuador. Thousands of children have been affected by the situation, so it is important that the countries with high influx of Venezuelan migrants and refugees are prepared to receive the children and provide them with the necessary aid and opportunities.

Colombia is the country with the biggest number of Venezuelan refugees and migrants, with approximately 1.7 million as of January 2021 according to the official statistics of Migración Colombia. Venezuelan children have been taken care of by multiple organizations, especially the Instituto Colombiano de Bienestar Familiar. This institution has supplied nutrition aid to underweight migrant children with a programme called 1000 Días para Cambiar el Mundo. It has also attended to about 457 unaccompanied children and designed a path to re-establish the rights of migrant children through the Chancellery and other entities. Most importantly, the ICBF has protected Venezuelan migrant children from being recruited to armed groups by using different programmes and strategies. However, a report by the IOM found that 84.3% of Venezuelan children and adolescents in six Colombian departments do not have an immigration document and that 41.5% do not attend school. Therefore, it is important that

the Colombian government provides these children with immigration documents in order to secure their rights as migrants, and gives them fair opportunities to attend school.

In Ecuador, a UNICEF report found that 14% of Venezuelan children migrated to the country unaccompanied and that 24% were separated from their families. The provision of places to sleep during the journey to Ecuador, provision of water and sanitation, monitoring of health and nutrition of children and legal advisory and economic aid to non-accompanied adolescents. The second area includes protection from risk situations and the strengthening of the identification and reunification of families through a protocol established by UNICEF, the UNHCR and IOM. The final area includes activities for the prevention of xenophobia and monetary help to about 5,185 families.

Current efforts

As seen above, UNICEF and the IOM are currently helping multiple countries accommodate and provide for migrant and refugee children. However, many children in various countries, including European and North American countries, are still at risk of mistreatment, detention and separation during their migration process. For this reason, UNICEF continues to respond to the migrant and refugee situation in Europe with about 13.8 million US dollars to fund different services for migrant and refugee children. This response is focused primarily on Greece, Italy, Bulgaria, Serbia, Bosnia and Herzegovina and Montenegro, which have received aid and funds to address the following areas:

- 1. Health and Nutrition
- 2. Child Protection
- 3. Gender-based violence
- 4. Education and Skills Building
- 5. Youth Empowerment/Participation
- 6. Water Sanitation and Hygiene
- 7. Communication for Development, Community Engagement and Accountability to Affected Population

UNICEF has also sought to improve the situation of child migrants in the United States through recommendations in a report named, "Building Bridges for Every Child: Reception, Care and

Services to Support Unaccompanied Children in the United States". This report calls for the United States to: uphold the rights of children to seek asylum, be protected and remain with family members; abolish the expulsion of children; strengthen border and reception processes; establish alternatives to immigration detention; ensure the inclusion and fair treatment of children in care; respect and support the best interest of the child; and ensure the safe return and reintegration of children who return to their home country.

III. Key Points of the Debate

- National and international law and guidelines regarding migrant children
- Family separation and detention of child migrants
- Consequences of the mistreatment, detention and separation of migrant and refugee children
- Implementation of new national and international laws protecting migrant children
- Reunification of migrant children with their families

IV. Participating Organisms

- Human Rights Council
- Human Rights Watch
- Save the Children Fund
- International Bureau for Children's Rights

V. Guiding Questions

- 1. What is your country's national law regarding immigrant children?
- 2. Does your country separate migrant families in any way? If so, what are the reasons for separations?
- 3. Does your country have detention facilities for migrants? If so, what are the conditions in them?
- **4.** What are your country's border policies and security measures? Does your country have special border policies for children?
- 5. Does your country invest in the protection and safety of the children in refugee camps?
- 6. Does your country have special procedures for the protection of child and adolescent

migrants?

7. If your country has been more affected by the way their citizens have been treated by migration authorities of other countries, please describe the sort of situations they have experienced and what, if anything, your government has done about this.

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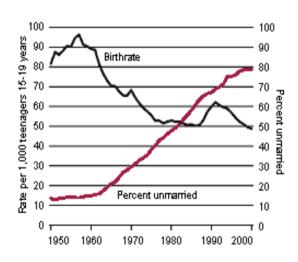
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4. Topic 1: Adolescent pregnancy and its effects on children

I. History/Context

<u>History</u>

Adolescent pregnancy is defined by UNICEF as, "a girl, usually within the ages of 13-19, becoming pregnant" (UNICEF, 2016). Women can become pregnant once they begin to ovulate after their first menstruation, which averagely happens at 13 or 14 years of age in current times. This phenomenon has been the norm and the expectation throughout most of human history, as life expectancy was much lower because of poor health conditions and dangerous working environments in the world. Also, the mean age of the first menstruation, or menarche, was much higher in the past, reaching 16.5 years in Europe in the 1840s (Kirchengast, 2016). Due to this, women married and became mothers at a much younger age, once they reached puberty in most cases.



National Center for Health Statistics, (2001). *Births to Teenagers in the United States, 1940-2000.* [Graph]. National Vital Statistics Report. https://www.guttmacher.org/gpr/2002/02/teen-pregnancy-trends-and-lessons-learned

healthcare increased However, once in industrialized countries, mostly Western and countries after the European Industrial Revolution, and especially after the beginning of the 20th century, adolescent pregnancy wasn't necessary and it became frowned upon in some countries, such as the United States and other Western countries. According to the Guttmacher Institute, the rate of adolescent pregnancy in the United States reached an all-time high in 1957 with 96 births per 1,000 women from the ages of 15 to 19, but throughout the 1960s and 1970s this number fell to 70-50 births per 1,000 women

(ages 15-19), probably due to the availability of birth control, other contraceptives and abortion. There was a rise in teenage pregnancy in 1988 through 1991, rising back to 60 births per 1,000 women because of increased sexual activity in teens, then fell to an all-time low in 2015 of 22.3 births per 1,000 women.

Developing countries, on the other hand, have experienced little fluctuations in rates of adolescent pregnancy throughout history, since the lack of proper healthcare and sexual education, as well as socioeconomic conditions have led to high rates of adolescent pregnancy, even in modern times.

Causes

The causes of adolescent pregnancy vary from country to country, as they depend on the socioeconomic conditions, availability of education and healthcare and culture of each nation.

Developing countries and marginalized and underprivileged communities are most at risk due to lack of resources, education and employment. This leads to unwanted pregnancies, with approximately 10 million unintended pregnancies in teenage girls from the ages of 15 to 19 in developing countries (WHO, 2020), or early marriage and childbirth to escape the conditions of their community. In underprivileged communities within India, young girls are married off young in exchange for monetary resources to alleviate the economic problems of their families. The Borgen Project states that, "Young girls are often deemed an economic burden by their parents. The greatest expenses that families must bear are paying for education and housing and these expenses increase as a child gets older. To alleviate the economic pressure that female children create, they are transferred to a husband, that can be viewed as a guardian" (Borgen Project, 2019).

The lack of education or availability of contraception in both developed and developing countries affects the rate of adolescent pregnancy. The World Health Organization found that the use of contraception, due to pressure to have children, among married 15 to 19-year-olds in the Southeast Asian region is low in East Timor (6.8%), India (6.9%) and Maldives (9.6%), which causes a high risk of unintended teenage pregnancies. The United States has the highest rate of adolescent pregnancies of developed countries where 75% of pregnancies among 15 to 19-year-olds, according to the Guttmacher Institute, are unplanned. Lack of access or use of contraceptives plays a major role in the rate of teen pregnancy in the U.S. Although the Guttmacher Institute found that most adolescents use contraceptives when they have intercourse, there are still misconceptions and factors that lead to a lower use of

contraceptives, including expensive contraceptive services, lack of confidentiality of contraceptive services or lack of education about reproduction.

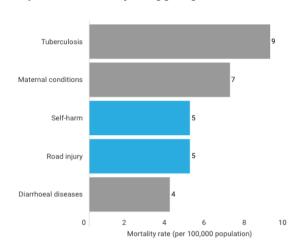
In multiple societies, young girls are pressured and forced to give birth and marry at an early age for religious or cultural beliefs. An example of this is the practice of child brides in ultra-orthodox Jewish communities in the United States and other countries, which leads to early pregnancies. In Niger, social and religious traditions, as well as a cultural fear of childbirth out of wedlock lead to a high rate of child marriages and adolescent pregnancy. A religious environment affects the teenage pregnancy and birth rate as it might restrict or not educate on contraception, it might encourage early pregnancy, and it might educate against and prohibit abortion (Kappe).

Another cause of adolescent pregnancy is sexual violence, which is common in both developed and developing countries. The Sub-Saharan African region has the highest rates of adolescent pregnancy in the world, with 102.8 teenage pregnancies per 1,000 females aged 15 to 19, as well as high rates of violence against women, especially in South Africa. A study by Anthony Idowu Ajayi and Henrietta Chinelo Ezegbe found that 93% of women aged 17-24 experienced sexual abuse and unintended pregnancy before the age of 19. This link between sexual violence and unintended adolescent pregnancy is caused by the non-use of contraceptives, underreporting of sexual violence and lack of care to survivors of sexual violence.

Consequences

Adolescent pregnancy has multiple physical, psychological, social and economic consequences on both the mother and the children. According to the World Health Organization, complications during pregnancy and childbirth are one of the main causes of death in 15- to 19-year-old girls, because their bodies are not developed enough to safely carry and deliver a child. Young mothers have higher risks of multiple postnatal complications including puerperal endometritis, urinary tract infections, preeclampsia and eclampsia (which is often fatal). The children also face many health risks, including a higher chance of perinatal mortality, premature birth, low birth weight, low heart rate and respiratory effort.

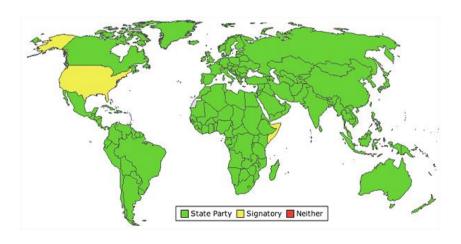
Top 5 causes of mortality among girls aged 15-19



Mentally, adolescent pregnancy has multiple negative effects on the mother, including depression (according to the Family and Youth Services Bureau, teen mothers are twice as likely to experience postpartum depression than adult mothers), anxiety, frustration, difficulty bonding with her baby, or suicidality due to either traumatic pregnancy or childbirth or rejection by her family and community.

The latter poses a great social consequence to teen mothers, as they might be stigmatized, rejected or experience violence by their partner, family or community, which can lead to difficulty advancing economically and socially due to stigma, especially in small communities. Other social consequences include dropping out of school, which leads to less educational and employment opportunities and thus less economic prosperity, and marital violence and instability due to economic problems and stigma. These issues also affect the children as they make them more likely to experience adolescent pregnancy themselves, thus creating a cycle of stigma, violence and lack of opportunities for the family.

Convention on the Rights of the Child



European Commission, (n.d). CRC Map. [Map]. European Commission. https://europa.eu/capacity4dev/sites/default/files/learning/Child-rights/2.4.html

The Convention on the Rights of the Child, of which 193 countries are state parties to, has multiple articles that relate to the causes and effects of adolescent pregnancy, including:

Article 19: This article's first point states that:

"States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child." (UNICEF, 1989).

This article addresses the lack of sexual education, lack of resources, lack of availability of contraceptives and sexual abuse, among other causes and risk factors of adolescent pregnancy, and thus obliges State Parties to protect children from the physical and mental injuries that early pregnancy and childbirth may cause through educational, legislative and social measures.

Article 24: This article states that:

"States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.

This article obliges State Parties to: allow children complete access to health care services, including preventive healthcare and family planning services; to do everything in their power to diminish infant and child mortality, which can be caused by adolescent pregnancy; and to provide appropriate care to mothers before and after birth, which includes mental and physical rehabilitation.

Article 34: This article states that:

"States Parties undertake to protect the child from all forms of sexual exploitation and sexual abuse. For these purposes, States Parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:

(a) The inducement or coercion of a child to engage in any unlawful sexual activity." (UNICEF, 1989).

This article obliges State Parties to protect children from sexual abuse, which is a cause of adolescent pregnancy.

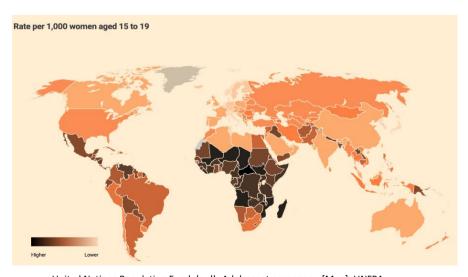
Article 39: This article states that:

"States Parties shall take all appropriate measures to promote physical and psychological recovery and social reintegration of a child victim of: any form of neglect, exploitation, or abuse; torture or any other form of cruel, inhuman or degrading treatment or punishment; or armed conflicts. Such recovery and reintegration shall take place in an environment which fosters the health, self-respect and dignity of the child." (UNICEF, 1989).

This article obliges State Parties to provide appropriate physical and mental rehabilitation to child victims of neglect, abuse or other forms of degrading treatment, all of which are causes or consequences of adolescent pregnancy.

However, the Convention on the Rights of the Child doesn't have a specific article solely on the prevention or rehabilitation of adolescent pregnancy, which leaves children unprotected and vulnerable.

II. Current Situation



United Nations Population Fund, (n.d). *Adolescent pregnancy*. [Map]. UNFPA. https://www.unfpa.org/adolescent-pregnancy

Situation by continent

<u>Africa</u>

According to Getachew Mullu Kassa, A.O Arowojolu, et.al, about one-fifth of teenage girls become pregnant in Africa, especially in East Africa, as they found a 21.5% prevalence of adolescent pregnancy in this region. This study also found that multiple risk factors, including lack of education about sexual and reproductive health, increase the prevalence of adolescent pregnancy in the continent.

UNICEF states that the median age of first birth has decreased in multiple countries in West Africa, and that young girls in this region are more likely to become pregnant before 18 if they live in rural and impoverished areas. This region, due to its dire socioeconomic and political conditions as well as cultural values and gender norms, practices child marriages and thus, has a high rate of adolescent pregnancy.

A study by UNICEF found that Mali has the highest percentage of women aged 20 to 24 that gave birth before they were 15 in the West Africa region with 13.57%, while Chad had the highest percentage of Central Africa with 12.85%. There was a much higher percentage of women from these ages that gave birth before age 18; in West Africa, the percentages ranged from 16.15% in Ghana to 48.21% in Niger, and in Central Africa, from 25.07% in São Tomé and Príncipe to 47.43% in Chad. This study also found that in most countries, early birth was more prevalent in uneducated women that live in rural areas.

South America

A report by UNFPA, PAHO and UNICEF found that in 2020, the adolescent birth rate in the Latin America and Caribbean region was 60.7, making it the second region with the highest adolescent fertility rate in the world. UNFPA also estimates that 2% of women in the region had their first child before they were 15. In this region, the main causes of adolescent pregnancy were misconceptions or lack of use of contraceptives, lack of sexual education, forced sexual relations, among others.

Multiple South and Central American countries, including Panama and Venezuela have adolescent birth rates per 1,000 women aged 15 to 19 that exceed 70, with Venezuela having

one of the highest of the continent with 95. The socioeconomic conditions of these countries create a high risk of adolescent pregnancy, as there are less educational and healthcare opportunities for young girls, as well as the social and economic pressure to marry and bear children at a young age. Also, restrictive laws regarding abortion in the continent, especially in Honduras and Nicaragua (where abortion is completely prohibited), and the lack of education and availability of effective contraception affect the rate of adolescent pregnancy in South America.

South America, especially the Latin America and Caribbean region, has had an increase of gender-based violence towards women, which according to the World Bank, increased by about 30% to 50% in 2020. The violence stems from patriarchal cultural values. The Sexual Violence Research Initiative states that, "Sexual violence against girls and women is one of the clearest manifestations of patriarchal cultural values, norms and traditions that encourage men to believe that they have the right to control women's bodies and sexualities" (Sexual Violence Research Initiative, 2010). Multiple countries, including Nicaragua, Brazil and Peru, report various cases of child sexual abuse, with the Sexual Violence Research Initiative stating that 74% of women in an anonymous survey in Nicaragua reported sexual abuse before age 12. This sexual abuse can have many consequences, including unintended and dangerous early pregnancy.

North America

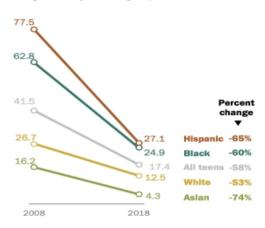
The rate of adolescent pregnancy in North America is lower than in the other part of the continent due to the higher socioeconomic condition of most regions of the area. According to UNFPA, the rate per 1,000 women aged 15 to 19 is 19 in the United States and 8 in Canada. However, it is 71 in Mexico, making it the country with the highest adolescent birth rate in the OECD. The Barcelona Institute for Global Health identified several risk factors and causes for the high rate of adolescent pregnancy in Mexico, including early menarche (first period), family history of early pregnancy, lack of family planning methods and lack of education about sexual health. Most of these causes stem from the socioeconomic conditions of impoverished, rural and underprivileged areas in which girls live. Save the Children found that some Mexican states do not offer the same access to contraception as other states; for example, Chiapas, a

southern state, has a prevalence of contraceptive use of 35.5% while the rest of the country has a prevalence of about 59%.

The overall United States adolescent pregnancy rate has declined, although some ethnic groups still have relatively high teenage birth rates compared to other ethnic groups in the country. Pew Research estimates that in 2018, the Hispanic adolescent birth rate was 27.1 and the Black adolescent birth rate was 24.9, compared to the White adolescent birth rate of 12.5 and the Asian one of 4.3. This can be attributed to the different social and economic conditions that the different ethnic groups have, which lead to different educational and healthcare opportunities. The American birth rate has fallen due to less sexual activity in girls aged 15 to 19 (42% in 2011-2015)

Across race and ethnicity, teen birth rates are less than half of what they were a decade ago

Births per 1,000 females ages 15-19



Livingston, G. (2019). Why is the teen birth rate falling? [Graph]. Pew Research Center. https://www.pewresearch.org/fact-tank/2019/08/02/why-is-the-teen-birth-rate-falling/

versus 51% in 1988) and use of contraceptives (especially more effective contraceptives such as IUDs).

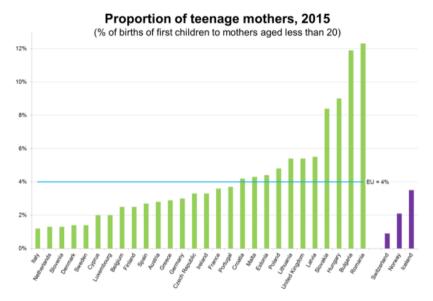
Asia

The Southeast Asian region has a high rate of adolescent pregnancy, and WHO estimates that about 6 million adolescents give birth each year in the region. The countries with the highest adolescent birth rates in the region are Nepal, with an adolescent birth rate of 88 per 1,000 women aged 15 to 19, Bangladesh, with one of 74 births and Laos with 83. Most of these births are due to child marriages, either for economic or cultural reasons. UNESCO states that, "Traditional arranged child marriage, where one or both partners are minors under the age of 18, stems from cultural norms and tradition, much like those in South Asia. Self-decided marriage or unions, which include love marriage or cohabitation, are when adolescents and young people make their own decisions to live together. 'Circumstantial' marriage or union, with or without girls' consent, is when marriage occurs to counter the social stigma associated with having a baby out of wedlock or to 'resolve' sexual activity, including violence or rape. A

subset of child marriages may also include trafficking, where girls are sold or otherwise forcibly married off in environments often marked by poverty and violence" (UNESCO, 2018).

Europe

Eastern Europe, comprising countries such as Russia, Ukraine, Turkey, has a higher rate of adolescent pregnancy



Eurostat, (2017). Teenage and older mothers in the EU. [Graph]. Eurostat. https://ec.europa.eu/eurostat/web/products-eurostat-news/-/DDN-20170808-1

than Western European countries or members of the European Union. The Russian Federation has an adolescent birth rate of 22 per 1,000 women from the ages of 15 to 10, Ukraine has one of 19, Moldova and Turkey have one of 21, and the countries with the largest rate in the region are Georgia with 32 and Azerbaijan with 45. UNFPA states that the most vulnerable populations with respect to adolescent pregnancy are those who live in rural and impoverished areas where education and healthcare are scarce, and migrants and ethnic minorities, especially the Roma people. This is due to cultural values that lead to child marriage and early pregnancy, as well as socioeconomic conditions caused by their exclusion from European society. UNFPA states, "Roma girls often have no choice but to follow tradition, leave school and get married with the onset of adolescence, thus perpetuating a cycle of lack of education, poverty and early child birth" (UNFPA, 2013).

Amongst countries in the European Union, the highest rate of adolescent pregnancy as of 2015 can be found in Romania, with Sweden having the lowest rate of adolescent pregnancy in the union. Most countries in the European Union provide different sexual and reproductive health services, for example, government-funded youth counselling services in Estonia and health centres in schools in Finland. Likewise, contraceptives are widely available in most countries, with Ireland offering free birth control pills for a year to people with no insurance and Sweden offering free IUDs to minors in some areas. Additionally, more flexible abortion

legislation (such as no parental consent needed for adolescents) is present in multiple countries, including Belgium and Germany.

Action taken by organizations

UNFPA, along with PAHO and UNICEF have designed programmes to tackle the high rates of adolescent pregnancy in Latin America and the Caribbean, including the development of intervention and education programmes for vulnerable populations. They aim to create a healthy environment that promotes gender equality, sexual health and education, as well as monitoring and researching these programmes to continue improving them. These organizations prioritize the following:

- "1. Make adolescent pregnancy, its drivers and impact, and the most-affected groups more visible with disaggregated data, qualitative reports, and stories.
- 2. Design interventions targeting the most vulnerable groups, ensuring the approaches are adapted to their realities and address their specific challenges.
- 3. Engage and empower youth to contribute to the design, implementation, and monitoring of strategic interventions.
- 4. Abandon ineffective interventions and invest resources in applying proven interventions.
- 5. Strengthen intersectoral collaboration to effectively address the drivers of adolescent pregnancy in LAC.
- 6. Move from boutique projects to large-scale and sustainable programs.
- 7. Create an enabling environment for gender equality and adolescent sexual and reproductive health and rights." (UNFPA, 2020).

In 2018, UNICEF also worked in Southeast Asia, with participants from countries such as Cambodia, Indonesia, Malaysia, Mongolia and Philippines in order to draft a call to action to countries of the region. This call to action includes: the establishment of legal frameworks that acknowledge the sexuality of adolescents; the education of communities about equality in order to change gender norms that harm women; the development and implementation

of sexual education everywhere; and the provision of tailored and accessible services to adolescents.

However, there is still a lack of research and effort in general regarding the prevention and rehabilitation of adolescent pregnancy, which is why there are still large rates of adolescent pregnancy and birth around the world, especially in developing countries.

III. Key Points of the Debate

- Causes of adolescent pregnancy and ways to address them
- Consequences of adolescent pregnancy on the mother's and child's overall wellbeing
- Prevention of adolescent pregnancy
- Religious or cultural causes of adolescent pregnancy or arguments against prevention
- Physical, psychological, social and economic rehabilitation for the mother and child
- Possible solutions to adolescent pregnancy that respect cultural values and have the children's best interests

IV. Participating Organisms

- WHO (World Health Organization)
- UNFPA (United Nations Population Fund)
- PAHO (Pan American Health Organization)

V. Guiding Questions

- 1. What is the rate of adolescent pregnancy in your country?
- 2. What are the causes and risk factors of adolescent pregnancy in your country?
- 3. How does your country address the physical, psychological and social consequences of adolescent pregnancy on mothers and children?
- 4. What is the availability of contraceptives, sexual education and abortion in your country? If they are not widely available, why?
- 5. How is your country preventing the causes of adolescent pregnancy?

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5. Topic 2: Child exploitation by drug trafficking mafia

I. History/Context

In 2002, the ILO stated that the involvement of children in illicit activities, in terms of production, sales and trafficking of drugs is considered to be one of the worst forms of child labour. Before 1988, the drug trafficking convention did not refer to children or teenagers, which means that they were not taken into consideration when problems related to drug mafia were being discussed. Neither was the use or involvement of children in the drug trade considered to be a serious crime until 2009, when the UN Political Declaration and Plan of Action on drugs decided to address this specific problem. Though the international drug policy was not to be considered a priority in the UN General Assembly until 2016.

On September 2nd, 1990, the UN Convention on the Rights of Child (UNCRC) stated in the article 33 that "States Parties shall take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances as defined in the relevant international treaties, and to prevent the use of children in the illicit production and trafficking of such substances."

The main problem with children's involvement in the drug trafficking mafia is the fact that tracing and identifying who they are is extremely hard to do, so they are easily exposed to security risks, social conflicts, disintegration of families and illegal activities, which lead to several physical and physiological consequences.

Children are number one targets for drug dealers due to the fact that adults suffer higher penalties for trafficking, which may even result in life imprisonment or the death penalty.

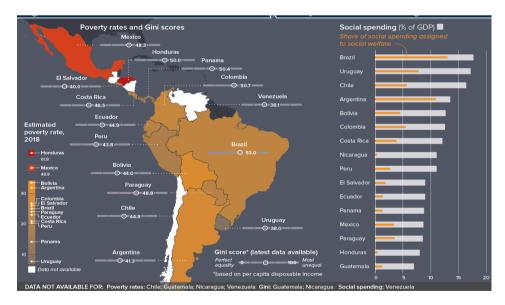


Figure 1:"Latin America Poverty Progress Is Being Reversed." *Dailybrief.oxan.com*, 10 Dec. 2019, https://dailybrief.oxan.com/Analysis/GA249332/Latin-America-poverty-progress-is-being-reversed

Additionally, they are used because children between 7-18 years old (the most common years in which children are involved in the business) have lower chances of being identified as dealers by the police, and because they are cheaper to employ.

A study done by the International Labour organization (ILO) in 2002 determined that most of the children involved in the drug mafia were: socially, culturally and economically disadvantaged; lived in households with high levels of stress generated by poverty; had fewer or no access to social services; and lived through family conflicts that involved separation, substance abuse, unemployment and other vices. In this study it was also mentioned that most of the children involved in drug trafficking in Brazil were black, and it can be considered a current characteristic, since they are still seen as a poverty race.

Also, engagement in drug abuse, sale and trafficking is a phenomenon which is more likely to be experienced by males than by females. Boys are used for drug dealing, robbery, extortion and violent activities, girls are normally victims of sexual and gender violence, where they are forced to have sex with members of the criminal groups, and are abused, trafficked and exploited. Relating this to statistics about violence, it is clear that the highest levels of crime are committed in large urban areas where there is little government presence, and where people live in vulnerable conditions where human rights are not guaranteed. All of this sets the path for the expansion of criminal gangs and organizations to take control. These organizations will jeopardize residents and expose them to a constant violation of rights, to fear, and to violent activity.

According to the book *Children of the Drug Trade: A case study of children in organised armed violence in Rio de Janeiro,* by Luke Dowdney, children involved in the mafia in Brazil were from favelas (slums) where 40% of children lived in poverty, and 5.8 million lived in extreme poverty. Almost 70% of children from 0-3 had no access to public day care centres, and 1.6 million students between the ages of 15-17 dropped out of school. These children started suffering racial discrimination and became involved in the mafia due to the lack of educational tools and lack of self-confidence they had due to the discrimination they suffered.

The following paragraph is a short testimony of a favela resident, which stated that children who get into the mafia have, "A lack of hope because everything is so difficult. They already live in a place where nothing's good [...] and they already have that coexistence [with the traffickers...]. In their view they think that trafficking is the easiest option. " and "Sometimes they get involved because they think it's normal. They've seen this [drug trafficking] every day."

As mentioned previously, poverty is one of the main causes of children's involvement in the mafia. In the case of Canada, a study was made of 529 street-involved young people between the ages of 14-26 years old; those who sold drugs were more likely than the others to be crack

cocaine users, to be homeless, and to be motivated by drug dependence and basic survival needs.

Furthermore, once children are integrated into criminal gangs, it is almost impossible for minors to leave the business due to the violent reprisals. Since most of the children who are drug dealers are also drug users, and because the drug mafia is a full-time job, children stop attending school. Later on, they have trouble finding jobs, which makes drug trafficking their only way of survival. It basically becomes a vicious circle with no escape.

The vicious circle of depending on an illicit economy is explained by the Global Partnership on Drug Policy and Development (GPDPD). Without access to legal markets, and with previous contact with armed conflict, crime and violence, doing business with criminal groups dealing in illicit drugs and engaging in illicit drug crop cultivation is the only source of income to support their families. The drug product is then sold to local intermediates which allow them to have an income that is enough for basic needs and services. The problem is that if they plan to leave the business, death threats force people to continue in the business and it becomes a circle that can't be broken.

In 2008, Human Rights Watch (HRW) reported that in Cambodia 25% of detainees in government drug detention centres were aged 18 or below. A testimony given to HRW by one recruited child said that he had been beaten and shocked with electric batons and forced to work. Which is clearly a violation of the International legal safeguards for children in conflict law, which states in article 37, that all parties shall ensure that "No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment. Neither capital punishment nor life imprisonment without possibility of release shall be imposed for offences committed by persons below eighteen years of age". The same law and same articles states that:

- (A) "No child shall be deprived of his or her liberty unlawfully or arbitrarily. The arrest, detention or imprisonment of a child shall be in conformity with the law and shall be used only as a measure of last resort and for the shortest appropriate period of time.
- (B) Every child deprived of liberty shall be treated with humanity and respect for the inherent dignity of the human person, and in a manner which takes into account the needs of persons of his or her age. In particular, every child deprived of liberty shall be separated from adults unless it is considered in the child's best interest not to do so and shall have the right to maintain contact with his or her family through correspondence and visits, save in exceptional circumstances.
- (C) Every child deprived of his or her liberty shall have the right to prompt access to legal and other appropriate assistance, as well as the right to challenge the legality of the

deprivation of his or her liberty before a court or other competent, independent and impartial authority, and to a prompt decision on any such action."

II. Current Situation

The presence of drug mafia is strictly related to the increment in violence and conflict. The relationship between the drug trafficker and the level of violence and insecurity in a place are affected by the following variables:

- "Rivalry between criminal organizations for control of the drug route and for shares of the illegal market
- Relations between criminal groups and local communities
- Ties between the authorities and the criminal organizations
- The ways in which the authorities intervene in those areas
- The State's strategies for confronting organized crime through its public policies."

The following are a couple of examples:

In 2006, deaths in Mexico related to drug-related violence have increased to over 100.000 cases (According to OHCHR)

In the Colombian war against drug trafficking 50 thousand children and young people have been killed and injured, tens of thousands have lost their parents in drug related violence, and more than 4 000 families have been displaced. (According to the UNDP and Colombian Centro Nacional de Memoria Histórica)

Homicide rates among children and adolescents are also an indicator that can be used to understand the scale of the problem. In Latin America, the leading cause of death among male adolescents is homicide. According to OHCHR, in Mexico, which accounts for approximately 12-14 percent of the world's population, more than one third of the violent deaths in the world occur there. In Salvador, the average rate of homicides among adolescents and youths aged from 15 to 24 is 92.3 per 100,000 inhabitants, in Colombia it is 73.4, in Venezuela 64.2, in Guatemala 55.4, and in Brazil 51.6. (Hemispheric Citizen Security Observatory) .

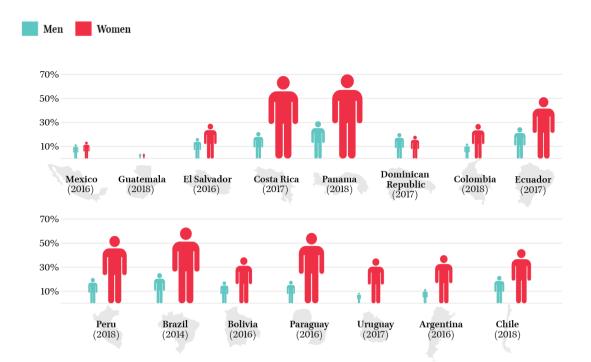


Figure 2: People in prison for drug offences in Latin America (percentages) by sex in selected conturies. Source: Giacomello, Corina. "The Gendered Impacts of Drug Policy on Women: Case Studies from Mexico." International Development Policy, 1 Sept. 2020. https://journals.openedition.org/poldev/3966

Adding to this, one in four women in prison in Europe and Central Asia are incarcerated for non-violent drug acts. (London: Harm Reduction International in 2012) In Ecuador 75-80% of women in prison are involved in drug offences, in Mexico 30-60%, in Costa Rica 64%, in Brazil 60% and in Argentina 70% (Washington Office on Latin America, 2014). The problem with this is that many of these women are mothers, usually single mothers, who have limited economic options, which leads them to turn to the illegal drugs trade to help feed and clothe their children. With this in mind, UN Women has described women's involvement in the drug trade as a crime of poverty.

According to Refugees and Migrants in the United States and the Inter-American Commission on Human Rights (IACHR) the consequences the drug business has on communities has become one of the main causes of migration, due to the constant contact with violence, threats and fear of gangs and organized crime. For example, in Mexico more than 9 million people have migrated due to fear of insecurity. (Mexican Commission for the Defence and Promotion of Rights).

Below is a brief explanation of the situation in a few specific countries or areas:

Philippines:

In 2003, over 2000 people died due to the war on drugs in the Philippines (OHCHR). The extrajudicial execution of people involved in drug trafficking has ended the lives of 122 girls and boys between the ages of 1-17 between July 2016 and December 2019 according to the

ILO. In July 2004 there were 3.4 million drug users in this nation, though it rapidly increased to 9 million users over the years according to another report. The increment in drug use resulted in drug-related crime; in 2017, the NCR regional police office estimated that 14 thousand crimes involved the use of drugs. In 2004 the UN Office on Drugs and Crime said that drug trafficking in the Philippines had earned more than \$5 billion dollars a year, which is the equivalent to 8% of the GDP of this nation.

United Kingdom:

More than 1000 children have been trafficked to the UK for the drug trade and more than 1173 children were enslaved by drug dealers (Home Office of UK, 2019). In 2018, the number of trafficked children was 721 but the data increased by more than 270 cases, and it will continue to rise. It is also estimated that more than 156 children have been forced to work in cannabis cultivation in the UK.

Latin America:

In Colombia, it has been estimated by the Inter-American Commission on Human Rights (CIDH) that 50% of people who work in illicit drug groups are under 18 years old. In Brazil, at the age of 8, children are recruited by criminal gangs to work as messengers, but as soon as they reach 15-17 years old, they are forced to traffic and cultivate drugs, and are allowed access to firearms.

In Mexico, it was mentioned by the ILO that in 2006 hundreds of children were killed due to the beginning of the drug war. Since then, it was estimated in 2011 by the Right of the Child in Mexico that a minimum of 30,000 girls and boys have actively participated in organized drug-related crime, and in 2018 this number increased by about 150% to 460,000 (Secretary of Security and Citizen Protection of the Government). Here, nine-year-olds are recruited as informants for the shipment of illicit drugs, but at 12 they get to be employed as guards for the hiding places, and at 16 they get involved in violent acts that include homicide, extortion and kidnapping. Because of this, more than 3000 children have been detained by Mexico during federal operations against organized crime.

Actions taken by governments:

Most governments respond to the involvement of children and adolescents in criminal activity and organized crime through the juvenile justice system. However, this system does not consider children and adolescents as victims, but rather as criminal offenders. According to the OHCHR report, adolescents have been victims of imprisonment, despite the fact that the international law on human rights states that deprivation of liberty should be the last action taken and for the shortest amount of time possible when children are involved. On the other hand, the justice system created by the Inter-American Commission on Human Rights (IACHR), with the mission to protect and promote human rights in the American hemisphere,

has not yet been implemented for children under the age of 18, due to the fact that governments have not prioritized the policies rewarding children and adolescents involved in criminal groups and gangs, even though children rights are severely violated.

In order to combat this "war" against the drug mafia and the use of children in it, governments must provide, report and monitor procedures to keep children out of the trade by improving the quality of life of people in marginalized areas. This is a theory stated by Harvey Slade, a research and policy officer at Transform Drug Policy Foundation.

As an example, the Philippines have applied the following measures:

- 1. "Stringent enforcement of the law and the creation of a special process to control and suppress traffickers and all those involved in the manufacturing and trafficking of drugs in a strict, swift and just manner.
- 2. Strict control of the importation of chemicals that may be used in the production of drugs.
- 3. Cooperation with international organizations and the international community in order to control and eradicate drug production bases as well as transnational networks for the distribution of drugs.
- 4. Amendment and revision of laws that pose an obstacle to obtaining medical treatment as well physical and mental rehabilitation for drug addicts. " (*The use of children in the production, sale and trafficking of drugs.* ILO, 2004)

III. Key Points of the Debate

- Causes of the involvement of children in drug trafficking
- The physical and psychological consequences of the involvement in drug trade on children
- Consequences of the criminal activities related to drug trafficking
- Current laws and measures being taken by governments regarding children in drug trafficking
- Technology that could be used to track children involved in the mafia
- Organizations that use children for drug trafficking
- Strengthening of prevention and laws regarding children in drug trafficking

IV. Participating Organisms

- OHCHR (Office of the United Nations High Commissioner for Human Rights)
- UNHRC (United Nations Commission on Human Rights)
- ILO (International Labour Organization)
- UNODC (United Nations Office on Drugs and Crime)

V. Guiding Questions

- 1. How many children are involved in the drug mafia in your country? From which sectors are they part of? How does this affect children's lives?
- 2. State briefly the economic, social, and political consequences the drug mafia has on your country. How unequal is your county, and how has this affected the involvement of children in the drug mafia?
- 3. What are the causes and risk factors of children involved in the drug mafia?
- 4. How many people have migrated from your country due to the illicit business of drugs?
- 5. What effects does the drug business in your country have on your country's economy and GDP?
- 6. How does your country address the physical, psychological, social and legal consequences of children in the mafia, if at all?
- 7. What actions is your country willing to take to address this problem?

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