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The Challenge of Creating “A World Fit for Children”

by Jonathan Todres*

In May 2002, for the first time in its history, the United Nations convened a special session of the General Assembly dedicated entirely to children. Attended by nearly 180 country delegations, including over 60 heads of state, approximately 1,700 NGO representatives from over 100 countries, and several hundred youth delegates, the UN Special Session on Children (Special Session) provided governments the opportunity to assess their countries’ progress on issues affecting children since the adoption of the UN Convention on the Rights of the Child (CRC) in 1989 and the 1990 World Summit for Children (World Summit). The Special Session also offered states the opportunity to reaffirm their commitment to improving the well-being of all children. Despite progress since the World Summit in a number of areas, the Special Session reinforced that a significant amount of work remains. The Special Session culminated with the production of a final outcome document entitled “A World Fit for Children,” establishing a plan of action and specific goals for improving children’s lives in four priority areas: promoting healthy lives; providing quality education for all; protecting children against abuse, exploitation, and violence; and combating HIV/AIDS.

Priority Areas for Children

Healthcare remains an essential element in the survival and development of children, particularly in the early years of life. Since the World Summit, which established a uniform plan of action focused primarily on healthcare and basic education for children, over 100 countries have reduced their under-five mortality rate by one-fifth, and 63 of these countries achieved the World Summit goal of a one-third reduction. As a result, the lives of three million children are saved each year. Still, each year over ten million children die before the age of five, largely due to preventable causes. An additional 150 million children suffer from malnutrition. In 2000, malnutrition was associated with 60 percent of all childhood deaths. Such figures highlight the continued importance of improving children’s access to healthcare.

While the CRC has recognized “the right of the child to education” and the World Summit set the goal of universal access to basic education, reality has fallen short, as approximately 120 million out of 700 million children of primary school age remain out of school. Such lack of access to education heightens the vulnerability of these children. Not only do these children miss opportunities that can arise through education, but they are also at much greater risk of exploitation through child labor, forced prostitution, and involvement in armed conflict.

Abuse and exploitation of, and violence against, children continue to be enormous problems, as children are particularly vulnerable to human rights violations. Political obstacles, such as not having the right to vote, as well as developmental issues not only make children more susceptible to exploitation, but also leave them less capable of drawing attention to violations of their rights once they occur. As a result, children are at great risk of becoming victims of violence and exploitation, whether as targets of trafficking for purposes of sexual exploitation or child labor; as victims of armed conflict, often either forced into fighting at a young age or caught in a war they did not start; or as refugees fleeing their homes in hopes of a safer place to live and survive. Today, for example, over one million



Credit: UNICEF/HQ02-0185/Paula Bronstein

Accompanied by performers and Nobel Peace Prize laureate Rigoberta Menchu, UNICEF executive director Carol Bellamy addresses the audience at the close of the gala concert at the Special Session.

children enter the global sex trade industry each year, with increasingly younger children, many under the age of 10, drawn into the sex trade. Further, an estimated 250 million children between the ages of 5 and 14 work for a living, nearly half of them full time. In the past decade, approximately 2 million children have died as a direct result of armed conflict, and 20 million children remain displaced as a result of armed conflict and human rights violations. Such victimization and exploitation of children are among the most tragic examples of human rights violations today.

Finally, the priorities of the Special Session and its outcome document reflect the reality that the HIV/AIDS epidemic is such cause for concern that it must be recognized as its own priority area and not just one of the many issues under the rubric of healthcare. By 2000, over 10 million young people were infected. According to UN estimates, 500,000 children under the age of 15 died of AIDS in 2000, while another 600,000 of the same age were newly infected with HIV. In addition, the HIV/AIDS crisis has led to numerous other problems, ranging from the growing number of orphans due to AIDS (in 2000, an estimated 2.3 million children lost their mothers or both parents to AIDS), who are often increasingly vulnerable to various forms of exploitation, to the global sex trade industry’s demand for younger and younger children as a result of the often mistaken belief that younger children are less likely to be infected.

The Outcome Document of the Special Session

Although the Special Session was the first such session of the UN General Assembly dedicated entirely to children, the development of international standards on the rights of the child dates back to the early part of the 20th Century with the adoption of International Labor Organization conventions on child labor and the prevention of trafficking, as well as other broader declarations, such as the Declaration of the Rights of the Child by the League of Nations in 1924. Since then, the international community has promulgated numerous declarations and conventions reflecting its vision of a better world for children, the most recent of which is the Special Session’s

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outcome document. The outcome document offers a focused set of goals on which governments can concentrate for the next decade in order to alleviate the suffering of millions of children, and also proposes methods for mobilizing resources to achieve these goals.

Unlike the CRC, the final outcome document is not a legally binding document; however, it remains very important in the global effort to improve the lives of children around the world. The role over the past decade of the World Declaration and Plan of Action, promulgated at the World Summit, suggests the importance and potential impact of the outcome document from the Special Session. The World Declaration and Plan of Action are among the most closely monitored and implemented international commitments of the past decade. Some 155 countries prepared national programs of action to implement the World Summit goals, with many countries producing annual reports tracking progress toward attaining these goals.

Like the World Declaration and the Plan of Action from the World Summit, the Special Session's outcome document calls upon countries to develop or strengthen their national plans of action for improving children's lives, and to report regularly on their progress. In addition, the outcome document calls upon the UN Secretary-General and UNICEF to continue monitoring the progress of nations in reaching the Special Session's goals. The outcome document also offers NGOs a detailed agenda for use in lobbying their governments to make progress on key issues affecting children. Already, a number of NGOs, including the NGO Committee on UNICEF and Amnesty International, have produced reports outlining the promises and commitments made by individual governments at the Special Session, and have indicated that they intend to monitor governments to ensure that they fulfill these promises.

The outcome document provides an additional benefit, in that it offers a level of specificity as to the goals in each of the four priority areas that generally cannot be found in a legally binding convention like the CRC. These goals include setting precise levels of improvement, expressed as a percentage, that governments are expected to achieve in the areas of healthcare, education, and the fight against HIV/AIDS. Working in tandem with the CRC, the outcome document helps to establish clear goals in the most important areas affecting children, so that governments can work more effectively toward bettering the lives of all children.

Key Issues at the Special Session

Efforts to reach agreement on the remaining issues and produce a final outcome document by the close of the Special Session highlighted two important points, neither of which should be overlooked. First, while a tremendous amount of work is necessary to create "a world fit for children," widespread agreement exists on the majority of issues, and a clear majority of governments are committed to action in these areas. Second, there are a small number of contentious issues that should not detract from the success of achieving consensus on almost all the issues but must be handled carefully to avoid having them become obstacles to progress on all issues affecting children.

The final negotiations on the outcome document during the Special Session reflected this dynamic. Eighteen months of negotiations leading up to the Special Session had resulted in agreement on all but a few particularly sensitive issues



Youth delegates respond to questions during a press conference at the Special Session.

including how the outcome document should treat each of the following issues: (1) child rights and the CRC in particular; (2) abortion, sex education, family planning, and reproductive health; (3) the death penalty in juvenile justice cases; and (4) specific financial commitments by industrialized countries to developing countries. That the United States found itself in the midst of the debate over these final issues only complicated matters, given the prominent role it plays in the international arena.

Child Rights and the Convention on the Rights of the Child

Coming into the Special Session, 192 countries had ratified the CRC, so there was strong support for language recognizing the CRC as the most important resource on the rights of the child. The United States and Somalia were the only countries that had not ratified the CRC; the United States signed it in 1995, and Somalia signed the CRC during the Special Session and announced its intention to ratify the CRC in the near future (East Timor, which gained independence in July 2002, has indicated that the CRC will be the first international treaty it ratifies). The Bush Administration, which to date has indicated that it will not seek to ratify the CRC, objected to language stating that the CRC was *the* authoritative expression of child rights. As a result of U.S. objections, the final outcome document avoided speaking about child rights in a number of contexts and described the CRC only as "contain[ing] a comprehensive set of international legal standards for the protection and well-being of children."

Assuming that Somalia and East Timor ratify the CRC in the near future, the United States will stand alone as the sole nation preventing the CRC from becoming the first human rights treaty to achieve universal ratification. Universal ratification would be a significant milestone, not only symbolically but also in the further development of customary international law. Moreover, the impact of universal ratification of the CRC would extend to other human rights treaties and the international human rights movement in general. Any concerns about the current U.S. position, however, must be addressed in a balanced and constructive manner, as support already exists in the United States—within the government, among many NGOs, and in the public—for many provisions of the CRC, as well as the CRC as a whole. Particularly notable is that in June

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2002 the Senate voted to give its advice and consent to ratify the two Optional Protocols to the CRC on the involvement of children in armed conflict and on the sale of children, child prostitution, and child pornography. The Bush Administration has indicated its support for the Optional Protocols but has not stated if or when it would ratify them.

Given this support for many of the provisions of the CRC, it is important to understand the precise nature of the Bush Administration’s objections, determine what ratification of the CRC would actually mean in practice in the United States, and explore ways in which both sides can bridge the gap and find a position that all can support. Moreover, whether the Bush Administration formally seeks to ratify the CRC should not prevent the United States from examining the principles underlying provisions of the CRC and taking steps to improve the lives of children in the United States and around the globe. Equally important, the United States, as arguably the most influential player on the international scene today, must balance its concerns regarding the perceived impact of ratification within its borders with an awareness that its support of the CRC or lack thereof can have a significant impact on the CRC’s effectiveness. This is particularly important given that the majority of the most vulnerable children in terms of the four priority areas highlighted in the outcome document live in developing countries.

Reproductive Health and the Issue of Abortion

The United States expressed strong reservations to several provisions related to reproductive health in an effort to ensure that any references to reproductive healthcare could not be read to include abortion, or family planning programs that include abortion. Instead, the United States pushed to include language calling for the promotion of sexual abstinence as a key element in ensuring healthy lifestyles. While the United States received support from the Vatican on this point, many countries in Europe, Latin America, and Africa supported broader language related to reproductive health issues involving children. In the end, the final outcome document adopted a compromise position, including neither the language that the United States wanted nor the language it sought to avoid. Even after this compromise was reached, the Bush Administration took the additional step of placing an explanation of its position on abortion and family planning in the official record of the Special Session. Included as part of this statement was the following:

The United States understands the terms “basic social services, such as education, nutrition, health care, including sexual and reproductive health,” “quality health care services,” “reproductive health care,” “family planning,” or “family planning services,” “sexual health needs,” “sexual health,” and “safe motherhood,” in the document to in no way include abortion or abortion-related services or the use of abortifacients.

Although the above statement suggests a hard-line stance by the Bush Administration on this issue, other portions of the United States’ official explanation of its position suggest a more balanced view and possibility of future opportunities for dialogue. For example, the U.S. statement also read, “The United States fully supports the principle of voluntary choice in family planning and reiterates that in no case should abortion be promoted as a method of family planning, and that women

who have had recourse to abortion should in all cases have humane treatment and counseling provided for them.” This issue likely will continue to be divisive, as demonstrated just by the range of views on abortion within the United States. Even while disagreement persists on the issue of abortion, efforts must be made to address related reproductive health issues affecting children, such as teenage pregnancy and the spread of HIV/AIDS among young people.

Use of the Death Penalty in Juvenile Justice Cases

A majority of countries, led by European Union members, sought to include language in the final outcome document abolishing the imposition of the death penalty on individuals under the age of eighteen at the time the crime was committed. The United States objected to the inclusion of any language that barred the use of the death penalty in juvenile justice cases. Although the United States was the primary opponent of those calling for the abolition of the death penalty, it did have some support, primarily from Sudan and certain Arab countries. As a result of the dispute on this issue, the final outcome document resolved to call upon governments to:

Protect children from torture and other cruel, inhuman or degrading treatment or punishment . . . [and] to comply with the obligations they have assumed under the relevant provisions of international human rights instruments, including in particular articles 37 and 40 of the [CRC] and articles 6 and 14 of the International Covenant on Civil and Political Rights.

Because the United States is not a party to the CRC, and it has limited the application of the International Covenant on Civil and Political Rights (ICCPR) through a reservation preserving its right to impose capital punishment on any person under 18 years of age, the above language imposes no obligation on the United States. In addition, because the compromise language is similar to language previously used in resolutions by the UN Commission on Human Rights, it adds little in the way of additional obligations for other countries.

Like the issue of abortion, the death penalty figures to remain a point of contention, as the general trend toward abolition of the death penalty in many parts of the world conflicts with the current U.S. government’s continued support of capital punishment. The United States’ insistence on reserving the right to issue death sentences to youths angered many delegates to the Special Session, as well as many NGO representatives from U.S. organizations. Despite this disagreement, common ground can be found in developing approaches to other areas of juvenile justice and in developing programs that help keep youth out of the juvenile justice system.

International Development Assistance

Finally, as to specifying levels of international development assistance, industrialized countries ultimately resisted including language committing them to reaching the aid target of 0.7 percent of gross domestic product, and therefore such language was dropped. Underlying the debate over development assistance is the very real concern that resource-constrained countries simply are limited in how much they can do without any additional assistance. More than half of the people on earth – over 3 billion – subsist on less than \$2 per day, and 1.2 billion – half of whom are children – live in absolute poverty, surviving on less than \$1 a day. Poverty and economic

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growth, or lack thereof, are clearly key factors; according to a WHO/World Bank special report, poor children are up to six times more likely to die before age five than are children from families with greater economic resources. Poverty's impact extends well beyond the first five years of a child's life, and additional steps must be taken, both within these poor countries and by wealthier industrialized nations, to promote economic development and ensure that greater resources are available to help these children and their families.

That said, economic development alone cannot account for all variations in health status. For example, both Honduras and Senegal have roughly the same per capita income – \$600 per year – yet life expectancy in these countries is 69 and 51 years, respectively. Thus, not only is it important to ensure the availability of adequate resources, but governments and international organizations must do a better job of ensuring that such resources are used more effectively. Recently, the issue of debt relief has garnered increasing support, which should help alleviate some of the financial strain on the poorest countries of the world. Development assistance nonetheless remains at levels of approximately one-third of the 0.7 percent target agreed by the UN General Assembly over 30 years ago. Although there was no agreement at the Special Session to commit to any specified target, nothing exists to prevent industrialized countries from increasing their commitments to support the children of developing countries.

Opportunities in the Face of Disagreement

Despite the areas of disagreement described above, it is important to remember that consensus was reached on many of the issues affecting children, and the language of the final outcome document reflects governments' commitment to a number of important policies and goals, including: reducing infant mortality by at least one-third over the next decade and by two-thirds by 2015; increasing primary school enrollment or participation in good quality, alternative primary education programs to at least 90 percent by 2010; protecting children from all forms of abuse, neglect, exploitation, and violence; and reducing the prevalence of HIV infection among young men and women aged 15 to 24 by 25 percent globally by 2010, and reducing by 50 percent the number of infants infected with HIV.

These issues, and others, provide large areas of common ground on which to work to improve the protection of children's rights and to ensure their well-being. Moreover, many of these issues are interconnected and can, and must, be approached from multiple angles, ranging from recognizing and protecting the rights of each child to developing and implementing better social services to address the needs of all children. From the outset of a child's life, her rights and well-being are implicated. Birth registration and the right to a name and nationality, which are provided for in Article 7 of the CRC, are essential first steps, as the lack of a birth certificate may prevent the child from receiving immunizations and other health care and social assistance that would otherwise reduce the chances of infant mortality. Proper documentation is also needed so that the child is permitted to enroll in school. In turn, better primary healthcare and the opportunity to attend school help keep the child healthy and reduce the chances that she will become a victim of child labor or sexual exploitation. Additional resources are necessary to ensure that the child remains healthy, stays in school, and continues to develop

through the adolescent years. The end to, or prevention of, armed conflict will further ensure that the child can develop in a safe environment, and that available resources can be invested in the child's health and education rather than arms. In other words, governments must adopt a comprehensive approach to the well-being of children, providing not only access to healthcare and education but also ensuring that the child's right to life and to freedom are adequately protected, as are the child's right not to be subjected to abuse, violence, and exploitation.

This understanding was evident among the sessions involving NGOs from around the world that engaged in thoughtful dialogue on pressing issues such as child protection, healthcare, education, trafficking in children, violence against children, HIV/AIDS, and child labor. Governments need to commit to this as well. The Special Session and its outcome document have outlined priority areas for the next decade which, if its goals are met, should help to create a world that is better "fit for children."

Even though issues on which there is disagreement, such as abortion or the use of the death penalty, may garner more attention due to their sensitive nature, governments and NGOs must not allow them to detract from the fact that there is agreement on the vast majority of issues affecting children today. Accordingly, it is essential that all governments take the necessary steps to meet the goals set forth in the outcome document of the Special Session and to remain open to constructive dialogue on the few remaining issues where differences persist. This balanced approach will offer children the best hope of developing to their fullest potential. ☺

**Jonathan Todres is vice chair of the ABA Subcommittee on the Rights of the Child. Mr. Todres served as a member of the ABA delegation to the UN Special Session on Children. The views expressed in this article are those of the author.*

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