

Welcome to the conference delegates! I am so excited to meet you all! I have put a lot of time into this background guide, so I hope that you use and it helps you begin your preparation for our conference in November!

I'm a Political Science and French studies major here at UConn. I'm a sophomore on my second year here working with UCMUN. I graduated from being an assistant director for UNICEF to the director. Aside from school and Model UN I have a variety of interests and hobbies that I do when I have the time. I am a very active, outdoorsy person. I love to go hiking during the spring, summer, and fall, and going snowboarding and snowshoeing in the winter. I play guitar and love to learn new songs. I know this might sound lame, but I love to read! Reading for pleasure is a relaxing activity for me to do, I love to be able to spend time immersing myself in the literature that I have chosen. Above all, I *love* to cook and bake. Every chance I get when I am home I cook dinner and make desserts for my family. Sometimes it comes out as well as what I want, I still have fun while doing it!

Now that I have told you a little bit about myself I want to let you know about the topics that I have chosen for our conference. Both of the topics are pretty straight forward. For Topic A, how are we going to provide all children with proper health care so that they grow and have a healthy life? How does your country handle the health care? What is the state of your country's healthcare? Together you delegates will plan to provide all children with healthcare to ensure that they are given their rights spelled out in the Declaration of the Rights of the Child. For Topic B, how will we as a committee work together to end the exploitation of children in armed conflicts? How does your country handle armed groups that utilize child soldiers? What actions will your country take to actively work to end this issue?

I chose the two of these because in the last few years I have seen both of these topics in the news quite a bit. I believe they are also important topics to be discussed and worked on to ensure that all children are able to live safely and are able to have the rights they are given in the Rights of the Child.

Now, go on and do some research! This will be such an exciting and lively conference with you all, but in order for that to happen you all must do your part in researching for your countries and how they relate to these topics. As well as reading this background guide, I strongly encourage you to do some outside research, as what I have provided you is just the beginning of the process. I know, doing research on your own is dull, boring, and not interesting, but these topics are *very* important and prevalent. You can do it! You'll be able to contribute a great amount during debate.

I am so excited to meet you all and spend the weekend seeing your hard work come to life in front of me. If you need any help or have any questions please reach out to me — do not hesitate! You all have great potential. Best of luck with your research and preparation! :)

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Committee History

The United Nations Children's Emergency Fund (UNICEF) was created on 11 December 1946 after World War II left countries devastated and their children vulnerable. Children were without food, clothes, and healthcare, all of which UNICEF worked to provide. The organization's hopes were to provide aid to those children affected by World War II and other conflicts.

Seven years later, in 1953, the United Nations General Assembly voted to extend UNICEF's role in providing aid to nations in need (explain in what ways). In the years following, the organization led a global campaign to fight diseases. The first task was to fight yaws, a deadly disease that is cured with penicillin (unicef.org). Following this crisis, The Declaration of the Rights of the Children was adopted by the UN General Assembly, defining a child's rights to protection, education, nutrition, health care, and shelter (unicef.org). An emphasis on education increased in 1961, which brought teacher training and classroom equipment under the responsibilities of the committee in newly independent countries.

Considered the leading voice in the 1970s for advocating for children's rights, UNICEF partnered up with the United Nations Commission on Human Rights to draft the Convention on the Rights of the Children in the 1980s (history.com). The Convention was ratified in 1989 and today it is still considered "the most widely ratified human rights treaties in history," (history.com).

Since the founding of the organization, millions of children's lives have been positively impacted by the committee's commitment to ensuring child protection and survival.. UNICEF was awarded the Nobel Peace Prize in 1965 for..... It has energized countries' commitments to children's rights countless times, such as during the World Summit for Children (1990), Say Yes to Children campaign (2001), and the Special Session on Children in the UN General Assembly (2002), keeping its original intentions of providing nutrition, health care, shelter, clothes, and education to children in need of such aid in countries that have been impacted by armed conflicts alive today.

Topic A: Proper Healthcare for Children

Introduction

Healthcare has been recognized by the United Nations International Children's Emergency Fund (UNICEF) as a child's right since 1959 via the Declaration of the Rights of Children (UNICEF). High-income countries are known to be more likely to have easier or guaranteed access to healthcare for children through national health systems, while many middle and low-income countries have no such guarantee ("Global Access to Healthcare"). The inequities of access vary not only between countries but also within countries. For example, in the United States the more money that parents have, the more likely they are to have private health insurance. If parents do not have much money, they are likely to have Medicaid, a public healthcare. If parents make too much to qualify for Medicaid but not enough to purchase private healthcare, then they will have to pay out of pocket when they go to the hospital. This creates a divide in access in the United States. Places that are most likely to have children without healthcare are those in low-income countries, primarily sub-Saharan Africa, Afghanistan, Cambodia, Haiti, and Nepal. UNICEF devotes a large portion of time and resources in these areas, as well as those impacted by armed conflicts, such as in the Middle East. Children are vulnerable in these regions, and have higher rates of mortality as infants until the age of five ("Under Five Mortality Rankings").

There are a multitude of reasons for a lack of access to healthcare for children; however, the most prominent reason is due to income. Throughout the world, income is an issue when it comes to providing healthcare to children due to the low budgets for healthcare and over capacity of needs throughout countries. In developing countries there tend to be higher rates of mortality in young individuals due to preventable infectious diseases, yet according to UNICEF there have been "significant improvements" made to child healthcare since 1990. These low and middle-income countries are known for having "unstable" and "weak" healthcare systems that are unable to provide

the children of their country with immunizations to prevent these diseases and illnesses. UNICEF works with governments and partners across the globe to develop ways to prevent, prepare, respond and recover from emergency health situations (“Health In Emergencies”). There is also the Core Commitments for Children in Emergencies (CCCs) program, which lays out how to ensure children and women have access to quality maternal, newborn and early childhood healthcare from the household to community level. There are also health facilities operated in collaboration with governments and non-governmental organizations to provide the care to those affected by the emergency situations (“Health in Emergencies”).

Along with income being the foremost issue affecting children’s access to healthcare, there are environmental factors to take into consideration. Many at-risk regions have problems with supplying children with clean, accessible water. This adds to the spread of disease and illness, and prevents communities from eradicating it (“Environmental factors influencing the spread of communicable diseases”). The lack of proper nutrition also has an impact on children’s health, which prompts UNICEF and other organizations, such as the World Health Organization (WHO), to work together with governments and partners to provide children with sustenance (“Environmental factors influencing the spread of communicable diseases”). While improving these environmental factors have an effect on the health of children, they are not quick fixes. That being said, having accessible healthcare would prevent the contraction of illness and disease and heal those that are sick from these environmental components. Communities must focus on finding ways to provide clean water and nutritional foods to their citizens.

There are numerous countries that do not provide children with the proper healthcare to ensure they grow to see adulthood. Millions of children every year still die from diseases and illnesses that could be prevented through vaccinations and regular check-ups from health clinics (“Immunization Programme”). In the 1980s, UNICEF recognized that it is a right for children to have

proper child care through the ratification of the Declaration of the Rights of Children, this being acknowledged by the countries that receive aid (“Children”). That being said, countries that do not give children access to healthcare are violating the rights of said children. This reality must change, as childhood illness impacts the child’s development and general health the rest of their lives. Additionally, a generation of unhealthy children grows up only to raise a second generation with even more vulnerability to disease.

History and Description of the Issue

Healthcare is the “efforts made to maintain or restore physical, mental, or emotional well-being especially by trained and licensed professionals,” which is an important part of society. This can be argued to be even more so important for children, because the early years of their lives are very important for the development of their mind and body. Without healthcare, children are at high risk of contracting preventable illnesses and diseases, which can easily be contracted by the people around them if they as well do not have healthcare. UNICEF believes that healthy children will grow to become healthy adults who are less likely to live in poverty and more likely better their lives, communities, and even their countries (“Millennium Development Goals”).

The idea and implementation of healthcare is considered a new proposal in history. Many of the origins began in wars fought between the 1850s-1860s in England and America, when Florence Nightingale and Clara Barton were sent to army camps to care for their soldiers (“History of Healthcare Quality”). Their discoveries of how to keep army camps sanitary and cure illnesses such as gangrene and diarrhea were the beginning of the advances of modern medicine. From there, Germany in 1883 created a rudimentary state-funded healthcare insurance system, giving treatment and sick pay for up to 13 weeks to keep citizens healthy (“History of Healthcare Quality”). The United States created programs to assist the elderly and poor, as well as healthcare options for those that could

afford to pay for it (“History of Healthcare Quality”). This is the method that America uses today. Britain decided to recreate its healthcare system after in the 1940s after World War II ended, as it had modeled the United States private sectors, and established the National Health Services, providing all citizens with free healthcare (“History of Healthcare Quality”). Since these discoveries and the establishing of healthcare systems, the majority of the world has incorporated them into their countries.

Children are at a disadvantage when it comes to affording healthcare. In countries that do not provide universal healthcare, there is no guarantee that all children will have access to healthcare. There is a connection between low-income countries that do not have universal healthcare and infant and children mortality rates before the ages of two and five due to curable diseases (UNICEF). The absence of healthcare in a child’s life affects more than just their physical well-being, but also their education. Children have a higher risk of more absences from school due to illness if they do not have healthcare to keep them feeling well (“Health Care Coverage”). This is a loss for children, as they fall behind in their studies, putting them behind the rest of the children their age (“Health Care Coverage”). These communities take a toll when children that live in it are not provided healthcare. Many times illness comes from environmental factors, so everyone in the community is impacted by these circumstance. In the low and middle-income countries they do not have the proper medical care for children to get treated, or to have ways to lower the chance of spreading the illness or disease (“Children Need Communities”). When UNICEF goes into communities to provide vaccinations and basic care to children, it is successful in its teachings to promote healthcare for children. Community health workers have seen the success through their teachings, and believe they are some of the most important factors for working towards health goals (“Children Need Communities”).

Current Status

In recent times, health care has become a center point for political discussions. At the Millennium Summit of the United Nations in 2000, the Millennium Development Goals (MDGs) all of which influence the health of citizens across the world, were set with a goal of accomplishing by 2015. Among these goals were intentions of eliminating poverty and hunger, reducing child mortality, combating HIV/AIDS, malaria and other such life threatening diseases, and improving maternal health (“Millennium Development Goals”). All UN state members signed this in agreement to make an effort towards reaching these goals (“Millennium Development Goals”). While great strides were made to achieve these goals, there was inconsistent progress made throughout the fifteen years (“Children”). The inconsistency came from many factors, such as climate change affecting the environment and outbreaks of pestilences. In light of this, another set of goals were adopted by world leaders in 2015, the Sustainable Development Goals (SDGs), until 2030 (“Children”). These SDGs are mostly the same as the MDGs, however they build off of them, adding more goals that the states felt there was a need to address (“Sustainable Development Goals”). These efforts have addressed the need to work towards healthier lives for children. This will ensure that they can grow to be successful adults that participate positively in their communities because “better health enables children to learn and adults to earn,” (“Millennium Development Goals”).

There are 191 countries that UNICEF works with as of 2018 (“FAQ”). There are on the ground operations, as well cooperation with governments and non-governmental organizations. Many ground operations are conducted in refugee camps, where large amounts of the population are children. These camps have dire need for the water, sanitation, and hygiene (WASH) program, as illness and disease spread quickly throughout them due to the lack of these and close living conditions (“Water, Sanitation, and Hygiene”). The WASH program gives children clean water (“Water, Sanitation, and Hygiene”). These programs and organizations are essential to children’s health ,as they

prevent the contraction and advancement of illness and diseases. Children are extremely susceptible to illnesses and diseases, and have higher chances of mortality in these camps than adults that contract them. In response, UNICEF provides the children with vaccinations and antibiotics to prevent and cure disease, while also making sure the children are getting proper nutrition and clean water to ensure they stay healthy (“Water, Sanitation, and Hygiene”) (“Nutrition”).

Similar situations occur in areas of the world that have outbreaks in diseases, such as the upsurge of measles in Somalia (March, 2018) and Kenya (June, 2017). Campaigns have been set up to distribute millions of vaccinations to the children worldwide to prevent the further spread of the deadly disease. UNICEF has worked with the governments of the countries in which they set up the vaccination campaigns and their partners to make this goal happen (“Immunization Programme”). UNICEF strives to reach out to all countries in need, yet there are limited amounts of resources to be spread. Unfortunately, some areas get priority over others depending on how urgent the situations are.

The areas that receive larger amounts of aid are those affected by armed conflicts that have displaced millions; however, these additional resources are still not enough for said countries. Due to situations such as the Syrian Civil War, conflicts in Yemen, conflicts in Sudan, Rohingya people fleeing persecution in Myanmar, and more, there is a large amount of assistance based in many countries in Asia, Africa, and the Middle East (“UNICEF Middle East and North Africa”). Thousands of vaccinations are distributed throughout camps and towns to children that have yet to be inoculated against diseases due to poor access to healthcare, or financial restrictions. Children make up a large portion of the population in these areas, so UNICEF plays a principle role in working with governments to provide healthcare for children in unstable situations and areas affected by armed conflicts (“Children”).

There are a multitude of endemics that are still to be eradicated in the world, and UNICEF is working towards being a part of ending them through its work in communities and refugee camps. The most prominent way that on-ground UNICEF staff put effort toward preventing maladies is through vaccination campaigns (“Immunization Programme”). These campaigns are functioning throughout all areas to which UNICEF provides aid, administering vaccinations for measles, malaria, diphtheria, tetanus, pertussis, polio, and more to children who have not been able to receive them before the crucial age of five years old (“Immunization Programme”). Along with immunizations, pharmaceutical medicines are also given to staffers to supply to their stations for those in need. There are a range of medicines — from focused on prevention to curing , as well as diminishing pain — available to children at the location they are living (“Medicines”). Common illnesses treated with these medicines are diarrhoeal disease and pneumonia (“Medicines”).

In recent years there have been outbreaks across the world of different ailments that UNICEF has worked tirelessly to eliminate. In Kenya and Somalia in 2017 and 2018 there were outbreaks of measles, which were controlled by distribution of immunizations to the affected communities. Malaria is a prominent disease in sub-Saharan African countries; however, there has been a significant decrease in child mortality rate due to medicinal breakthroughs in fighting the malaria viruses (“Malaria”). UNICEF has provided communities with insecticide-treated nets for people to sleep under, resulting in a 65% decrease in deaths caused by malaria (“Malaria”). This is still a persistent disease that UNICEF is working towards ending with help of governments and non-governmental organizations. Diarrhoea is “the second most common cause of child deaths worldwide,” which is treated by UNICEF and the World Health Organization (WHO) through oral rehydration salts and oral rehydration therapy (“Diarrhoea”). These two methods have successfully cured diarrhoeal diseases in children that have been treated, and have decreased the mortality rate by 50% in children under five as of 2015 (“Diarrhoea”). Polio has been nearly eradicated due to a successful vaccination campaign

in all countries where UNICEF actively works, collaborating with communities to ensure that children can get the vaccine to ensure the spread of the disease does not occur (“Immunization Programme”). Pneumonia is the leading cause of death in children, accounting for a total of 16% (“Pneumonia”). The struggle to end the spread and contraction of this disease has been long and arduous; however, it has made remarkable strides, decreasing the frequency of pneumonia by 51% from 2000 to 2015 (“Pneumonia”). There is still much progress to be made with these major endemics, but they will not be eradicated without taking into consideration the condition of environment in which these impacted children live.

The majority of these children who have benefitted from the help of UNICEF have not been able to get medical attention due to the fact that they cannot afford to go to the hospital. Many do not have proper sanitary living conditions to be able to keep themselves clean and ensure that they do not spread diseases to the rest of the community (“Water, Sanitation, and Hygiene”).

Bloc Positions

Following the destruction wrought upon Europe during the Second World War, millions of children were at risk from the effects of poverty, famine, and disease. To counter this threat, the UN General Assembly adopted the ‘Declaration of the Rights of the Child’ in 1959, which codified children’s rights to education, shelter, nutrition, protection, and health care. To this day the declaration is still being upheld by all countries that are a part of the UN (“Children”). After this ratification came, ‘The Convention on the Rights of the Child’ (1989), also known as the “most rapidly and widely ratified international human rights treaty in history” (“Children”). This re-emphasized the previous declaration, as well as made it a point that children are human beings, not just tools for charity to use (“Children”). The next two declarations passed were the Millennium Development Goals (2000) and the Sustainable Development Goals (2015), both working towards providing food, health, and

assisting children to get out of poverty to ensure healthier lives for those impacted by these issues (“Millennium Development Goals”) (“Sustainable Development Goals”). These all show that countries do not support children living in conditions that affect their health, as each discuss working toward eradicating main contributors to childhood illnesses and diseases.

There are three main types of healthcare providers to individuals in a country. The most common is socialized or universal healthcare (single-payer), which is comprised of medical services being free through collective taxation and other governmental methods of raising revenue. With every benefit there is a downside, with universal healthcare being no exception. In comparison to privatized healthcare, there are longer waiting lists for those who are in need of being seen by physicians, as well as physicians leaving the public health sector for the private so that they are able to make more money in a more competitive field. An example of universal healthcare is the National Health Service (NHS) in Britain, set up by Clement Attlee after World War Two. Along with the United Kingdom, there are a plethora of countries that have universal healthcare. There are many universal healthcare systems in Europe; however, it is not limited to this region. Norway set the example for universal healthcare and had Japan, Sweden, Canada, the United Arab Emirates, Ghana, and Iceland following in suit.

The second model in question is privatized healthcare (insurance mandate), whereby healthcare is provided by entities other than government. This style of health care is more efficient and productive due to the profit motive; however, through the lense of human rights, a profit maximizing healthcare system is often looked down upon since it favors those that have more money to pay over those that can not afford it. When thinking of privatized healthcare, America is one country that comes to mind. More than just the United States that utilize the private healthcare system, as this policy has been in use since the early 20th century in Greece, Russia, Pakistan, and Switzerland. Not all of these countries have only private sectors in the healthcare field; however, they all require that citizens have health insurance.

The third system is the two-tiered system, in which basic, government-provided healthcare is on the first tier, and on the second is a more comprehensive plan for those who can afford to pay more for services. New Zealand has the most established two-tier system, setting an example for those countries that have put it into effect later. Among the others that have this system are the Netherlands, Denmark, France, Ireland, Israel and Hong Kong.

Developing countries tend to have healthcare systems that are changing or nonexistent. In Kenya there has been recent changes, in hopes for them to try to design their healthcare system to model the Dutch (“Kenyan Healthcare Sector”). For the time being, there are three systems, the public sector, the private sector, and faith based organizations. While the public sector covers the largest majority of citizens (25%), there are still high out of pocket costs for care, forcing people into poverty (“Kenyan Healthcare Sector”). Somalia has mainly private healthcare regulated by the Ministry of Health, however in 2013 they began to work on a national healthcare system due to the fact that many of their citizens do not have access. Somalia has been rated as having one of the worst sub-Saharan health standards, and Kenya is not far behind (“Kenyan Healthcare Sector”) (“Health Systems Profile-Somalia”). Yemen has a public healthcare system, but the majority of those seen have to pay high out of pocket costs. The system is on the verge of collapse due to the wars occurring (“Health System in Yemen Close to Collapse”).

Committee Mission

UNICEF has actively strived towards getting children the care that they need, and has recognized main causes of illness and disease. UNICEF is committed to providing children with medical care to ensure a healthy life, as it is their right. UNICEF must work with governments and nongovernmental organizations to discuss the best methods to provide children with healthcare across the globe, whether this be publicizing healthcare systems only for children, or a continuation of

funding medical research into finding more cost effective cures, treatments, and medicines. Communities must also be informed of how to prevent illness in an effort to keep all communities safe and healthy. Children must also receive the emergency healthcare that UNICEF provides. UNICEF must also continue their immunization campaigns in at risk areas. Countries must work actively with UNICEF toward the goal of providing children with proper healthcare to ensure their human right to a healthy life. A cost-effective method of providing this healthcare to all children must be established in all countries, whether they are the same approaches to the issue or not, as each country is unique in their child's needs. UNICEF continues its commitment to providing children across the world with healthy beginnings to ensure they become successful adults in the future.

Questions to Consider

1. What type of healthcare system does your country operate under?
2. What are the major endemics in your country that impact children the most?
3. In what ways can your country work towards eliminating aforementioned endemics?
4. Has your country made efforts to ensure that children are able to receive necessary healthcare?
5. Are there any international programs that can be implemented to ensure children their human right to health?
6. Which programs work well in your country? Which programs need work? What can you learn from other countries?

Works Cited

“Children” *United Nations*, United Nations, <<http://www.un.org/en/sections/issues-depth/children/index.html>>

The United Nations is an intergovernmental organization that comprises of 193 nations. Together they put emphasis on international peace and order. This site specifies the devotion that the UN has for caring about children. It has information from the origination of UNICEF and the Declaration of the Rights of the Child to present day resolutions and goals.

“Children Need Communities” *UNICEF Connect*, 1 March 2016,
<<https://blogs.unicef.org/blog/children-need-communities/>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. This experience written by Geeta Rao Gupta details her time in non-developed countries while working with UNICEF. It provided evidence that when children are not provided healthcare, the community suffers in return.

“Diarrhoea” *UNICEF*, <https://www.unicef.org/health/index_92007.html>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. This site provides facts about how severe diarrhea is for children around the world. UNICEF has worked tirelessly to assist children in need so that they can recover after being affected by this. There has been a drastic decrease in the under five deaths due to the efforts by this organization, however there is still progress to be made.

“Environmental Factors Influencing the Spread of Communicable Diseases” *World Health Organization*, World Health Organization, 12 December 2010,
<http://www.who.int/environmental_health_emergencies/disease_outbreaks/communicable_diseases/en/>

The World Health Organization is a United Nations council that specifies on public health around the world. This site describes factors that are caused by the environment that impact how communicable diseases are spread in countries. This proves that there are multiple factors to children not having adequate healthcare.

“FAQ” UNICEF USA, <<https://www.unicefusa.org/about/faq#>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. This site answers common questions that the public wants to know about the organization. It tells what the organization does, works with, and how they run their operations.

“Global Access to Healthcare” *The Economist*, 2017, <<http://accesstohealthcare.eiu.com/wp-content/uploads/sites/42/2017/06/Globalaccesstohealthcare-3.pdf>>

The Economist published this research finding in 2017 after looking at healthcare across the world. Its findings showed that developed countries are more likely to have better quality healthcare than non-developed countries, as well as citizens are more likely to be able to be covered with healthcare in developed countries than non-developed.

“Health in Emergencies” UNICEF, 9 August 2016,
<https://www.unicef.org/health/index_emergencies.html>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. This site describes the circumstances of the areas that they assist and what they classify as emergency situations. It tells what type of care they are able to give to those in need and how they are able to do these operations.

“Health Care Coverage” *Child Trends*, <<https://www.childtrends.org/indicators/health-care-coverage/>>

Child Trends is a research center that studies development of children and works toward improving outcomes in life for children. They collect data from around America, but however applied their findings to situations around the world and have found similarities.

“Health System in Yemen Close to Collapse” *World Health Organization*, World Health Organization, 30 September 2015, <<http://www.who.int/bulletin/volumes/93/10/15-021015/en/>>

The World Health Organization is a United Nations council that specifies on public health around the world. This site discusses how the armed conflicts occurring in the country are severely affecting the already weak health system. WHO is implementing emergency health services to Yemen to counteract the lack of healthcare to children.

“Health Systems Profile- Somalia” *Health Systems Profile- Somalia*, 2006, <<http://apps.who.int/medicinedocs/documents/s17309e/s17309e.pdf>>

The World Health Organization is a United Nations council that specifies on public health around the world. This report goes into detail about the conditions of the Somalian healthcare system and the changes that the country is trying to implement. While they are working to fix their system, there is still much for them to do to ensure children can get proper healthcare.

“History of Healthcare Quality: The First 100 Years 1860-1960” *International Journal of Africa Nursing Sciences*, Elsevier, 10 June 2014, <<https://www.sciencedirect.com/science/article/pii/S2214139114000043>>

Sciencedirect is an online database for scientific and medical research. This site goes in depth about the history of healthcare. It specifies how it changed in specific countries, when it became common, and how the systems developed to what they are now overtime.

“Immunization Programme” *UNICEF*, <<https://www.unicef.org/immunization-programme>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. This site briefly describes what exactly the immunization programme is, what challenges it faces, solutions to this problem, key facts, and provides further links to go into specific locations that have had or currently have the programme assist them.

“Kenyan Healthcare Sector” *Kenyan Healthcare Sector*, September 2016,

<https://www.rvo.nl/sites/default/files/2016/10/2016_Kenyan_Healthcare_Sector_Report_Complete.pdf>

This report discusses how the healthcare system is set up in Kenya. It shows downfalls to it, and how the system works in detail. This was written in 2016 with information from years prior.

“Malaria” UNICEF, 22 July 2016, <https://www.unicef.org/health/index_malaria.html>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. The immunization campaigns that UNICEF holds has drastically lowered the risk of children dying. They also provide thousands of families with insecticide nets to prevent mosquitos that carry the virus. While there is still much progress to go to rid the world of malaria, UNICEF is actively making measures to help prevent deaths from this disease.

“Medicines” UNICEF, 26 June 2016,

<https://www.unicef.org/supply/index_ecd_drugs.html>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. Medicine campaigns occur around the world to help those that cannot afford the necessary medication on their own. From the common cold to curing diseases, UNICEF strives to get those that need it the help they deserve.

“Millennium Development Goals (MDGs)” *World Health Organization*, World Health Organization, 25 June 2015,

<http://www.who.int/topics/millennium_development_goals/about/en/>

The World Health Organization is a United Nations council that specifies on public health around the world. The Millennium Development Goals were signed in 2000 and were hoped to have been accomplished by 2015. They focus on ending poverty and hunger, maintaining peace, health of children and mothers, and more.

“Nutrition” UNICEF, <<https://www.unicef.org/nutrition/>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. UNICEF has campaigns around the world to reduce, and in hopes rid, malnutrition. The first two years of the life is the most crucial for being properly fed, and UNICEF has specific interventions to reach out to mothers and children in need of proper nutrition.

“Pneumonia” UNICEF, 22 July 2016 <https://www.unicef.org/health/index_91917.html>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. Pneumonia is one of the largest killers in children, with an estimated of one child per every 35 seconds dying from it. UNICEF has made great strides toward eradicating pneumonia through inoculation campaigns, though there is still much more to do in order to rid the world of this.

“Sustainable Development Goals” UNDP,

<<http://www.undp.org/content/undp/en/home/sustainable-development-goals.html>>

The United Nations Development Programme is a council that works to eradicate poverty and work to end inequality. The Sustainable Development Goals came into effect in 2016 and work to, just like the UNDP, reduce inequality and put an end to poverty, as well as protecting the planet and maintain peace. Children are an important factor in the peace keeping process, as they are the most vulnerable and can easily be exploited.

“Under Five Mortality Rankings” UNICEF, 2010,

<<https://www.unicef.org/sowc2012/pdfs/UNDER-FIVE-MORTALITY-RANKINGS.pdf>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. UNICEF has actively worked to have this rate lower across the world. This site shows the ranking of countries in the world and their under five mortality rankings.

“UNICEF Middle East and North Africa” UNICEF, <<https://www.unicef.org/mena/>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. This site links to many research articles for the Middle East and North Africa region and how they assist children in need.

“Water, Sanitation, and Hygiene” UNICEF, <<https://www.unicef.org/wash/>>

UNICEF is a United Nations council that promotes the wellbeing of children around the world. The WASH program is key to children in impoverished areas that cannot get clean water, sanitization, and keep themselves clean. These are all important to the health of children, which is a major concern for UNICEF.

Topic B: Child Soldiers in the Middle East and North Africa

Introduction

A child soldier is any person under the age of 18 that is conscripted by a state, or non-state, group for armed conflicts. A majority of these children are abducted by the militant groups and forced to join their cause, while others join in hopes to find a better chance at surviving the conflict. There are many types of jobs that these children must do. Among them are: fighting in the front lines, executing spy missions, relaying messages, cooking, and patrolling. The females that are captured are forced into sexual slavery and to be maids around the camps they are held in (Child Soldiers). Children as young as eight years old are recruited and seen carrying out tasks for these organizations (Child Soldiers). While there is international law forbidding the use of children in armed conflicts, there has been a continuation of, and, in some instances, rises in this heinous act. This situation then begs the question: why do these organizations continue to blatantly ignore the laws banning child soldiers?

The unfortunate answer to that question is found in how vulnerable and easily manipulated children are. Those that are in charge of recruiting children are given “conscription targets” and locations to go and begin their enlisting. Schools, marketplaces, orphanages, and children that live on the streets are the most vulnerable to abduction and recruitment (Aftunion, Child Soldiers). These children are either abducted or “voluntarily” join the organizations, which is followed by intimidation tactics, as well as physical and sexual abuse. The organization does this to ensure that the children create a dependency on them (Aftunion, Child Soldiers). The children who join voluntarily do so because they are scared of what would happen with their lives if they were not a part of the militant groups. Joining without the threat of violence can make their transition easier, as well as a feeling of security in an armed group as opposed to being unarmed on their own (Aftunion, Child Soldiers).

The state and non-state actors that continue to take advantage of children in their armed conflicts are violating international law, depriving these children of a happy, healthy, educated

childhood. These countries in the Middle East and North Africa (MENA) region must stop this criminal act and allow children to live free. The countries that have signed and ratified resolutions demanding the end of the use of child soldiers must properly report findings and make efforts to rehabilitate and assist children affected by armed conflicts. Protecting vulnerable citizens is a job that all countries have and are obligated to fulfill. UNICEF believes that action must be taken to ensure that the children of all countries are safe from armed conflicts.

History and Description of Issue

There is an extensive history involving the use of children in armed conflicts, dating back to thousands of years ago. In Greek and Roman times, there were boys under the age of 18 that both volunteered and were forced to expand and remain in control of empires. During the Crusades young boys were recruited to spread word of religion. There is record of children participating during World War I and World War II as spies and on the battlefields for all sides (Rosen 55).

There was no international law pertaining to the use of child soldiers ratified by the United Nations prior to the Additional Protocols to the Geneva Convention added in 1977. This stated that any recruitment and use of children under the age of 15 was forbidden by any non-state and government controlled armed group. The Convention of the Rights of the Child in 1989 the UN reasserted this law, as well as recognized that childhood ends at age 18 (International Laws and Child Rights). Since then, there have been numerous laws reaffirming the previous prohibitions of children involvement in militant groups. In 1999 the United Nations Security Council voted on Act 1261 which denounced targeting children in armed conflicts and hostile areas (Meetings Coverage and Press Releases). The UN Security Council passed six different resolutions (each reaffirming the one before it) during the progress toward ending this criminal act. In 2005, Resolution 1612 was unanimously ratified by the UN Security Council which focused on stopping the exploitation of children in armed

conflicts, and expanding measures to protect children throughout countries through collection of information (Resolution 1612 (2005)).

The Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict (OPAC) was the first international treaty to focus solely on ending the misuse of children in armed conflicts (International Laws and Child Rights). The majority of countries in the world have signed this agreement since 2000, stating that children under 18 must not be recruited; however, if they are 16 they may voluntarily join a militant group without participating in the conflict until they become an adult (Optional Protocol to the Convention on the Rights of the Child).

Though child soldiers have been used for thousands of years, the last half century has had a large push to end the manipulation of them. Civil wars in countries such as Sierra Leone and Liberia shed light on the state and non-state organizations that recruit children to fight for them and carry out various other tasks to assist their cause. When the United Nations Security Council learned of this it created campaigns and drafted resolutions to put an end to utilizing children for war. There has been a decrease in known amounts of countries that illegally recruit, and the number of child soldiers has appeared to stay around a constant 300,000 (Children as Weapons of War). The circulation of information made raising awareness of the situation easier than in the past, forcing countries to make a decision on where they stand with the issue. In more recent times we have seen campaigns such as Kony 2012, drawing attention to the Lord's Resistance Army and Joseph Kony and how they recruit and train child soldiers.

The effect that armed conflicts have on children is both physically and mentally traumatic. The international community recognized this in a report ordered by the UN General Assembly called *Impact of Armed Conflict on Children* (1996). The study showed that children were being murdered, mutilated, and psychiatrically injured according to the participants (Machel 50). Since that report, new

conclusions have been made: half of those that survived armed conflicts had PTSD, nine in ten had depressive moods, higher chances of alcohol and substance abuse and they were more likely to be aggressive and socially awkward (Boothby et al. 13). Along with the international community recognizing these effects on children, there has been a direct link between the children exposed to war and trust issues when they grow up. Adults also tend to not trust these people once they grow older due to their past, making it harder for them to become employed and live a normal life (Boothby et al. 12).

The repercussions that these children go through have been combatted throughout the processes of reintegration. Disarmament, Demobilization, and Reintegration (DDR) are programs that help child soldiers transition back into life without war, drugs, abuse, and many times family. While many kids are eligible for the official DDR programs, girls are not always because they were not on the fields carrying weapons (Boothby et al. 15). However, there are programs that are unofficial or unaffiliated, such as crisis counseling and homes for battered women. These DDR programs allow them to return to their lives and access education, psychiatric assistance, technical training, life skills, and how to be successful community members (Boothby et al. 16). Child soldiers above the age of 15 used to be able to be tried in court for breaking humanitarian laws, but the Paris Principles ruled that child soldiers must be considered victims (The Paris Principles 9). Because of this, children are now able to be rehabilitated, and learn that the atrocities that they committed were wrong leading them to cut their ties with the militant groups that forced them to do such things.

To combat the use of child soldiers, many countries have changed their military recruitment ages to 18. While there are exceptions, such as the United Kingdom, the majority of countries have put their foot down when addressing this situation (Children as Weapons of War). This has discouraged thousands of children from voluntarily joining armed forces, as well as countries from recruiting children under the age of 18. Because of the rising public outcry to end the use of child

soldiers, there has been non-governmental armed groups that have denounced it. Among those groups in North Africa is the Sudan People's Liberation Party, and in the Middle East there has been none to denounce the use of child soldiers. There have been 167 countries to sign and ratify the OPAC and the United Nations Security Council Resolution 1612 was unanimously ratified. This shows progress in the world, proving that someday we may reach the goal of a world without the exploitation of children in the military. Today we may not be where we wish we were, but the efforts that are being put forth are stabilizing the estimated amount of child soldiers in the world. However, there is still much work to be done.

Current Status

Today, the Human Rights Watch believes there is around 250,000 to 300,000 child soldiers worldwide (Child Soldiers). There is no exact number because the organizations that exploit them are not honest about their usage, as it is condemned by the international community. There has been a multitude of resolutions ratified in the United Nations Security Council to combat this issue. Today, the Resolution 2225 is the recent law that combats the abduction and use of children in armed conflicts. When ratified in 2015, this reaffirmed the previous resolutions that had been written before it on the topic and added measures to end child abduction and manipulation for the benefit of any armed group. This has made countries take a strong stance on the subject and acknowledge the atrocities that are occurring on their own land. It has also encouraged organizations, such as UNICEF, to work harder to find children that are needed to be saved from armed conflicts.

In December 2008 the United States of America passed a bill in Congress addressing American military and financial assistance being given to countries in which governments use children in battle. While this money was not used to directly fund the use of child soldiers, it was used to support armed conflicts that continued the use of them. This is known as the Child Soldiers Prevention Act of 2008

and is still a law that is followed when dealing with foreign countries (Child Soldier Prevention). This law stemmed off the Victims of Trafficking and Violence Protection Act of 2000, as it was authorized funding for that year and lead to a more direct approach toward children in militant situations – The Child Soldiers Prevention Act of 2008. Since this was signed into law, there have been numerous countries in the Middle East and Northern Africa (MENA) region that were on the list, such as Yemen, South Sudan, Sudan, Iraq, Libya, Syria, and Afghanistan. The president is able to waive the practice of the law for individual countries if it is in the national interests. For example, Yemen was waived from the list in October 2010 because it impeded the progress the United States military was making with fighting al-Qaeda (Obama Waiver Allows U.S. Aid to 4 Countries Using Child Soldiers). Sudan was also waived because the United States was working alongside with the country to attempt to stabilize South Sudan (Obama Waiver Allows U.S. Aid to 4 Countries Using Child Soldiers). The current president has since waived South Sudan from the list after having been reinstated for recognizing that they had previously used child soldiers (Presidential Determination With Respect to the Child Soldier Prevention Act of 2008).

The current Sustainable Development Goals (SDGs) address the breach in child rights that occur when a child is forced to be a soldier. So far 193 countries have committed to the SDGs, therefore taking a stance against the exploitation of children in armed conflicts. These goals address that thousands of children who are soldiers are deprived of education and healthy lives, thus denouncing any child being used in armed conflicts. To ensure that children are able to have normal childhoods, the campaign of “Children, Not Soldiers” was created to work with countries – Afghanistan, South Sudan, Sudan, Yemen – that are known to continue to recruit children to assist in their warfare (Harnessing the Potential of Boys and Girls to Fulfill the Promise of the Sustainable Development Goals).

There are records of a drastic increase in child soldiers in the MENA region in 2015 and 2016, mainly in Yemen, South Sudan, Afghanistan, Iraq, Somalia, and Syria. In Yemen, there was a “five-fold increase” in the number of recruited child soldiers. The Islamic State of Iraq and the Levant (ISIL) is a well-known group that recruits children and displays them on social media committing heinous acts. The Lord’s Resistance Army has also increased efforts in recruitment via social media and abductions. The Security Council passed the resolution 2225 in 2015 condemning the abduction of children by any government or non-government organization for use in armed conflicts. There have been five non-State armed groups and one government security force put on the list of resolution 2225 for abducting children. Among these groups is ISIL in Iraq, the Taliban in Afghanistan, and the Sudan People’s Liberation Army in South Sudan (Shock at the Scale of Grave Violations Committed Against Children In 2015).

While there has been the increase in child soldiers, there has also been an active process to peacefully work with these organizations to release and end their exploitation of children. In 2015 there were 8,000 children released from seven countries, two of which were South Sudan and Sudan. Due to the tragic rise in numbers, the Special Representative of the Secretary General for Children and Armed Conflict Leila Zerrougui “call[ed] upon Member States to treat these children primarily as victims to ensure the full protection of their human rights and to urgently put in place alternatives to detention and prosecution of children,” (Shock at the Scale of Grave Violations Committed Against Children In 2015). While there has been an increased effort in protecting vulnerable children, there is still a great amount of work to be done.

Bloc Positions

There is a universal agreement among the states that are members of the UN that condemn the use of children in armed conflicts. This was adopted in the Convention of the Rights of the Child

(CRC) in 1989, and in the Optional Protocol to the Convention of the Rights of the Child on the involvement of children in armed conflict (OPAC) in 2000. Since then, there have been nine resolutions regarding various ways for children to be exploited, such as through abductions in target areas (schools, hospitals) in resolutions 2225 (International Standards).

There are currently twelve countries in the MENA region that actively recruit children to fight for their causes. These countries are Syria, Iraq, Israel, Palestine, Libya, Sudan, South Sudan, Afghanistan, Yemen, Turkey, Lebanon, and Jordan (Middle East and North Africa Region). These countries have recorded numbers of tens of thousands of child soldiers being used in their armed conflicts. Most of these governments have no way to stop this problem as it is not them that are committing the crime, but instead separate organizations. One reason is because it can possibly inflict harm on the children themselves if they were to act. Yemen's Defense Ministry admitted that their previous Defense Ministry had employed over 20,000 child soldiers, about 30 percent of their fighters, but has since stopped using them. In Syria, Iraq, Israel, Palestine, Sudan, South Sudan, and Afghanistan the main organizations that use and recruit child soldiers are the extremist groups that are in those countries (Overview of Child Rights Situation in Arab Countries). Yemen, South Sudan, Afghanistan, and Sudan all signed Action Plans with the United Nations to work toward stopping the recruitment and use of child soldiers in their country (Children, Not Soldiers).

There are many countries working toward ending the use of children in armed warfare that do not currently have issues with the recruitment and use in their own country. The United States, the United Kingdom, Canada, France, Iceland, the United Arab Emirates, Japan, Russia, and many more countries have all ended their use of child soldiers and are working globally to have the rest of the world to follow. Their countries work with their member states in UNICEF to provide support and funds for those who work to release children from armed conflicts (Top Organizations Helping Child Soldiers Recover).

Committee Mission

UNICEF is committed to working peacefully alongside governments and non-governmental organizations to actively work towards ending the use of child soldiers around the world. This will, therefore, protect their rights as children and lead them in the direction of a happy, healthy life. This committee has created and will continue efforts to reach out to at-risk regions around the world to release all children used in armed conflicts. UNICEF works peacefully with governments and NGOs to release children from warfare and army camps and enlists them in programs to help them begin their transition back into society. So far, more than 100,000 children have been released and reintegrated into their homes and communities (Top Organizations Helping Child Soldiers Recover). The long-term goal for the involvement in these circumstances is to eradicate the use of children in armed conflicts and ensure that they are integrated back into society after receiving the care services that they need.

Questions to Consider

1. Has your country had issues with child soldiers since the turn of the century?
2. What steps has your country taken to combat this issue?
3. Does your country use any loopholes to allow children to join armed forces?
4. Has your country passed all resolutions created by the Security Council in relation to children in armed conflicts?
5. Has your country committed to the SDGs? Had they committed to the MDGs?
6. What more can your country do to help others end their use and recruitment of child soldiers?

Works Cited

Aftunion, "Child Soldiers." *American Federation of Teachers*, 8 August 2014,
<<https://www.aft.org/periodical/american-educator/winter-2005-2006/child-soldiers>>

The American Federation of Teachers is a labor union comprised of teachers. They strive to raise awareness for many different causes, child soldiers is one. This site tells where many children are most vulnerable (ex countries, schools) and how they are taken advantage of by members of armed conflicts. They fight for ending the use of child soldiers

Boothby, Neil, et al. "Child Soldiering: Impact on Childhood Development and Learning Capacity." *Scribd*, PEIC Data, <www.scribd.com/document/328940882/Child-Soldiering-Impact-on-Childhood-Development-and-Learning-Capacity>

This research by these doctors and research assistants is an update to the research done by Graça Machel. It reaffirmed her discoveries, however proved that the situations were more severe than previous findings. These direct humanitarian violations promoted the need for intervention by the United Nation peacekeepers and to help exploited children in the armed conflicts.

"Child Soldiers." *Human Rights Watch*, <<https://www.hrw.org/topic/childrens-rights/child-soldiers>>

The Human Rights Watch is a non-governmental organization that researches human rights violations across the world. They advocate for proper human rights for everyone. This site gives a brief description of what a child soldier is and roles that they play in armed conflicts.

"Child Soldier Prevention." *U.S. Department of State*, U.S. Department of State,
<<https://www.state.gov/documents/organization/135981.pdf>>

The Child Soldier Prevention Act was signed into legislation in 2008. This piece of legislation was a victory for those campaigning for America to take action against countries that

actively use children in armed conflicts. This is still active today, however does get amended from time to time depending on the nation's interest.

“Children, Not Soldiers .” *United Nations*, United Nations,

<childrenandarmedconflict.un.org/children-not-soldiers/>

The United Nations council for Children and Armed Conflicts spreads awareness and promotes prevention of violence against children and their use in armed conflicts. “Children, Not Soldiers” was a campaign initiated in 2014 to call attention to the human rights violation across the world in which children were being used in armed conflicts. This site also details the countries that signed action plans to fight to end the use of child soldiers.

“Children as Weapons of War.” *Human Rights Watch*, 9 Nov. 2009,

<www.hrw.org/news/2004/01/25/children-weapons-war>

The Human Rights Watch is a non-governmental organization that researches human rights violations across the world. They advocate for proper human rights for everyone. This site details the atrocities these exploited children endure in areas with armed conflicts. It also discusses campaigns by governmental and nongovernmental organizations that promote ending the use of child soldiers.

Childsoldiersin. “International Law and Child Right.” *Child Soldiers International*. 1 Nov. 2017

<<https://www.child-soldiers.org/international-laws-and-child-rights>>

The Child Soldiers International Organization work alongside other organizations to fight towards ending the use of child soldiers in the Middle East and North Africa region. They collect information and records of which countries and groups are abusing and exploiting children for their causes in armed conflicts.

Childsoldiersin. “International Standards.” *Child Soldiers International*, www.child-soldiers.org/international-standards.

The Child Soldiers International Organization work alongside other organizations to fight towards ending the use of child soldiers in the Middle East and North Africa region. They collect information and records of which countries and groups are abusing and exploiting children for their causes in armed conflicts. This site goes into detail about resolutions and laws outlawing and condemning the use of children in armed conflicts from past decades until recent years.

Childsoldiersin. "Middle East and North Africa Region." *Child Soldiers International*, www.child-soldiers.org/mena-region.

The Child Soldiers International Organization work alongside other organizations to fight towards ending the use of child soldiers in the Middle East and North Africa region. They collect information and records of which countries and groups are abusing and exploiting children for their causes in armed conflicts. This site lists the places in the MENA region in which children are involved in armed conflicts.

"Harnessing the Potential of Boys and Girls to Fulfil the Promise of the Sustainable Development Goals." *United Nations*, United Nations, childrenandarmedconflict.un.org/sdgs/.

The United Nations council for Children and Armed Conflicts spreads awareness and promotes prevention of violence against children and their use in armed conflicts. This site goes into depth about the Sustainable Development Goals and why they were implemented, as well as other campaigns that raised awareness for this situation.

Machel, Graça. "Impact of Armed Conflict on Children." *United Nations*, United Nations, <www.un.org/ga/search/view_doc.asp?symbol=A%2F51%2F306>

Graça Machel is a Mozambican humanitarian and politician (also widow of the late Nelson Mandela). She published a report, ordered by the United Nations Assembly, called *Impact of Armed Conflict on Children*. This report looked deeply into the grave abuse of the rights of children. It

showed the abuse that children were going through and the physical and psychological tolls being a part of armed conflicts took on the children.

“Meetings Coverage and Press Releases.” *United Nations*, United Nations,
<<http://www.un.org/press/en/1999/19990825.sc6716.html>>

The United Nations Security Council is a group in the United Nations that work toward creating and maintaining peace in the world through peacekeeping operations. This press release discusses a past resolution that was unanimously adopted in the favor of protecting children from the horrors of armed conflicts and stresses that it condemns any targeting or use of children in armed conflicts.

“Obama Waiver Allows U.S. Aid to 4 Countries Using Child Soldiers.” *The Washington Post*, WP Company, 27 Oct. 2010, <www.washingtonpost.com/wp-dyn/content/article/2010/10/27/AR2010102707157.html?noredirect=on>

The Washington Post published this article on the updates to the Child Soldier Prevention Act that Obama approved. These updates waived multiple countries from the list due to national interest, as well as added few countries back onto the list of withdrawing military aid.

“Optional Protocol to the Convention on the Rights of the Child.” OHCHR | *Convention on the Rights of the Child*, <www.ohchr.org/EN/ProfessionalInterest/Pages/OPACCRC.aspx>

The United Nations Human Rights Council is a part of the United Nations that focuses on human rights across the globe. They fight to protect human rights and call attention to violations. This is the publicized resolution from May 2000 reaffirming the commitment to the Convention on the Rights of the Child with additions. This is a condemnation of children being used in armed conflicts.

“Overview of Child Rights Situation in Arab Countries.” *Defense for Children International*, <https://defenceforchildren.org/wp-content/uploads/2015/09/ChildrightsinArbcountries_EN_Report.pdf>

The Defense for Children International is a human rights organization that fights for children’s rights. This organization has a branch in all Middle East and North Africa countries. It is difficult for some of the branches to speak on this topic due to restrictions on their ability to speak freely. This source provides evidence in the MENA region that in certain countries children are exploited due to armed conflicts.

“Presidential Determination With Respect to the Child Soldiers Prevention Act of 2008.” *Federal Register*, 23 Oct. 2017, <www.federalregister.gov/documents/2017/10/23/2017-23145/presidential-determination-with-respect-to-the-child-soldiers-prevention-act-of-2008>

The Federal Register keeps archives of the daily publicized actions taken by the president and other federal agencies. These actions consist of rules (proposed and official), executive orders, and notices. This document is President Trump’s decision to waive multiple countries from the CSPA list in the name of national interest. This is the most up to date document in regards to updating the CSPA list.

“Resolution 1612 (2005).” *S/RES/1888(2009) - E*, <[https://undocs.org/S/RES/1612\(2005\)](https://undocs.org/S/RES/1612(2005))>

This resolution was a measure ratified in 2005 in attempt to gather further information on child soldiers throughout the world by using more extensive measures than used prior. This shows that there were attempts to increase efforts for ending the use of children in armed conflicts.

Rosen, David M. *Armies of the Young: Child Soldiers in War and Terrorism*. Rutgers University Press, 2005.

David Rosen, a Juris Doctor and anthropologist, is a professor teaching anthropology at Fairleigh Dickinson University. This book takes a look at the children at war and that are affected by terrorism. Chapter two discusses World War II (specifically Jewish children). This shows that there is nothing new about the exploitation of children in armed conflicts.

“Shock at the Scale of Grave Violations Committed Against Children in 2015”*United Nations*, United Nations, <childrenandarmedconflict.un.org/shock-at-the-scale-of-grave-violations-committed-against-children-in-2015/>

The United Nations has a working group that focuses on children that have had their lives affected by armed conflicts. This report discusses the dire situations in the Middle East and North Africa region. It also contains information on past years, resolutions, and campaigns to battle the heinous acts committed against the children in the areas.

“Top Organizations Helping Child Soldiers.” The Borgen Project, 30 Jan. 2018, <borgenproject.org/organizations-helping-child-soldiers-recover/>

Poverty is the main focus for the Borgen Project. This campaign works politically to call attention to poverty around the world and has a drive to end it. This specific article lists a few organizations that actively fight toward ending poverty and assisting those that are affected by it.