



DAYMUNC XXIV

UNITED NATIONS CHILDREN'S FUND

ANGIE LOYD
COMMITTEE DIRECTOR

Dear Delegates,

Welcome to Dayton Model United Nations Conference (DAYMUNC) XXVI. My name is Angie Loyd and I will be serving as the Director for the United Nations Children's Fund (UNICEF). The staff of UNICEF and I are excited to see the research, public speaking, and diplomacy skills of all delegates. One of the greatest advantages of Model United Nations is that no committee is ever the same. Even if a delegate has been to DAYMUNC before, each time is a different experience due to the new faces, new topics, and staff that work to make this conference happen.

The two topics before the 2019 UNICEF committee are:

- Combating Child Marriage
- Abandonment of Female Genital Mutilation/Cutting

Originally established in 1946 by the United Nations (UN) General Assembly (GA), UNICEF was known as the UN International Children's Emergency Fund. Their objective was to assist children in need after World War II.¹ In 1953 the organization removed 'International' and 'Emergency' from its name as it became a permanent UN body while still maintaining the acronym UNICEF.² UNICEF advocates for the protection of children's rights, to help meet their basic needs and to expand their opportunities to reach their full potential.³ The Convention on the Rights of the Child (CRC), adopted in 1959, is the guiding framework for the organization.

The committee comprises of 190 countries that strive to provide child protection, social inclusion, child survival, education, emergencies, and humanitarian aid.⁴ UNICEF is governed by an Executive Board that provides policy decisions, support, and oversight to the organization.⁵ The funding for UNICEF is through voluntary contributions from governments, donations from private sectors, and fundraising activities.⁶ At DAYMUNC delegates will have the opportunity to develop programmatic and policy decisions on issues before the committee to fulfill the mission and mandate of the organization.

The purpose of this background guide is to provide some foundational knowledge and key points of the topics before the committee, but delegates must still research and identify policy stances, objectives, and priorities of the Member State being represented. Delegates are not boxed in just to the case studies identified within this document.

In preparation for this committee delegates are advised to be familiar with the mandate of UNICEF and its function with the UN. Moreover, delegates need to understand their Member States' policies and issues related to the topics before the committee. The task of research can be daunting; however, I strongly recommend starting with UNICEF's website as a great starting point.

¹ UNICEF, *Milestones: 1946-1955*, 2010.

² UNICEF, *Learning from experience: 1946 – 1979*, 2010.

³ UNICEF, *UNICEF's Mission Statement*, 2003.

⁴ Ibid.

⁵ UNICEF, *The UNICEF Executive Board*, 2018.

⁶ UNICEF, *The Executive Board: An Informal Guide 2018*, 2018.

For any additional committee or delegate preparation material, please consult the DAYMUNC website: <https://daymunc.org/>. I am looking forward to meeting all delegates!

Sincerely,

Angie Loyd

I. Combating Child Marriage

Introduction

In accordance with the principals of the CRC, a child is any human being under the age of eighteen years old. It states that children have the right to health, education, protection from violence, and protection from sexual exploitation and abuse, which is violated by child marriage.⁷ Child marriage violates the rights of a child by denying them the ability to exercise their own choice to marry and when.⁸ Child marriage takes place all over the world and is an issue experienced by the international community. Building upon the definition of a child, UNICEF defines child marriage as a formal marriage or informal union before the age of eighteen in which children under that age live with a partner as if married.⁹ A similar term used to describe child marriage is early marriage.

Article 16 of the Universal Declaration of Human Rights (UDHR) grants men and women, without limitation to race, nationality or religion, the right to marry with equal rights. It requires the free and full consent of the intending spouses.¹⁰ Moreover, it notes family as the fundamental group of society and that is entitled to protection by society and the State.¹¹

Article 19 of the CRC requires “States Parties shall take all appropriate legislative, administrative, social and educational measure to protect the child from any form of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.”¹²

Child marriage impacts both boys and girls; however, it disproportionately affects girl children due to economic factors (e.g. lower dowry), structural factors (e.g. lack of educational opportunities), social factors (e.g. sense of tradition, social obligations, pregnancy out of wedlock, or avoiding criticism, whereas older unmarried girls may be considered impure).¹³

The focus on child marriage, specifically for girl children, is also highlighted within the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), article 16, sub-paragraph 2, stating that, “The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specific a minimum age for marriage and to make the registration of marriages in an official registry compulsory.”

⁷ UNFPA, *Child Marriage – Frequently Asked Questions*, 2018.

⁸ Ibid.

⁹ UNICEF South Asia, *Child Marriage*, 2017.

¹⁰ United Nations, *Universal Declaration of Human Rights*, 2018.

¹¹ Ibid.

¹² UNICEF, *Convention on the Rights of a Child*, 2018.

¹³ UNICEF South Asia, *Child Marriage*, 2017.

Even with the international frameworks in place, child marriage continues.¹⁴ Child marriage leaves children vulnerable to physical, social, mental, and emotional abuse. When girls marry young, they are denied their childhood and are socially isolated from their families and/or friends as well as constrained for the future as they often lack education and future employment prospects.¹⁵ Many organizations within the international community advocate for access to education, which is a key tool in combating child marriage as it provides an avenue for girls to empower themselves and provide advancements for economic opportunities.. Child marriage can serve as a barrier, keeping girls from entering school and continuing with school due to social pressures, stigmas associated with pregnancy, and returning to school afterwards, causing them to often forgo formal education.¹⁶ In addition to a lack of access to education, child brides have a higher rate of experiencing health risk related which increases the risk of maternal and newborn death and morbidity.¹⁷ UNICEF has taken the approach of data collection to recognize the issue, identify the factors that contribute to it, and provide funding and programming to abolish the practice.

UNFPA-UNICEF: Global Programme to Accelerate Action to End Child Marriage

The UN Population Fund (UNFPA)-UNICEF Global Programme to Accelerate Action to End Child Marriage is a program launched in 12 countries: Bangladesh, Burkina Faso, Ethiopia, Ghana, India, Mozambique, Nepal, Niger, Sierra Leone, Uganda, Yemen, and Zambia.¹⁸ The focus of the program is to ensure that all girls are free from child marriage and have the ability to live happy and full lives. It takes a gender-based approach; by utilizing already existing infrastructure, it renovates and expands capacity-building to ultimately be girl-focused and sustainable.¹⁹ The program was created in support of UN GA Resolution 71/175 to achieve the 2030 agenda set forth by the UN.²⁰

The program focuses on five areas: building the skills and knowledge of girls at risk of child marriage; supporting households in demonstrating positive attitudes towards adolescent girls; strengthening the systems that deliver services to adolescent girls; ensuring that laws and policies protect and promote adolescent girls' rights; and generating and using robust data to inform programs and policies relating to adolescent girls.²¹ The approach in how to achieve these targets varies depending on the State.

In Nepal, the joint approach has allowed for the development of programs such as the Rupantaran program, which provides social and financial skill training for jobs for girls, policy research, and advocacy with the government. Over 7,500 girls have participated in this

¹⁴ UNICEF, *Child Marriage*, 2018.

¹⁵ UNICEF, *Ending Child Marriage: Progress and Prospects*, 2014.

¹⁶ Girls Not Brides, *What is the Impact of Child Marriage*, 2018.

¹⁷ UNFPA, *Child Marriage – Frequently Asked Questions*, 2018.

¹⁸ UNFPA-UNICEF, *UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage PROGRESS REPORT 2016*, 2018.

¹⁹ Ibid.

²⁰ Ibid.

²¹ Ibid.

program.²² Ethiopia utilized a multipronged approach to increase retention and enhance performance. The programming concentrated on building environments through extracurricular programming, enhancing school guidance, counseling, providing training for educators on sexual and reproductive health and gender-based violence.²³ The program also provided school supplies and menstrual hygiene support.²⁴ Through this multipronged approach, Ethiopia was able to reach 51,239 girls.²⁵

The UNFPA-UNICEF joint program is just one example of the variety of efforts that has been launched by UNICEF. Another area in which UNICEF strives to make efforts is through partnerships with grassroot organizations to promote legal approaches to eradicating child marriage.

United States

UNICEF has been working with the United States (US) to address child marriage. From 2000-2015, over 200,000 children under the age of 18 were married in the United States (US). There is no federal law that regulates a minimum age for marriage. Each state sets the legal age for marriage. Many states' laws set the minimum age for marriage at 18 but allow for exceptions to that rule, such as parental consent and in many cases it is girl children that are impacted the most.²⁶ Statistics show that girls between the age of 15 to 19 have a higher risk of dying during childbirth than women in their 20s.²⁷ These threats to the lives and well-being of girls and women results in UNICEF advocating for no marriage under any circumstances under the age of 18.²⁸

UNICEF has created relationships with organizations akin to Tahirih Justice Center, Girls Not Brides USA, and Unchained at Last in its efforts for combating child marriage in the US. Identifying that legislation is key to preventing child marriage, there also needs to be an approach to addressing societal norms that allow for its existence.

Conclusion

Globally, there has been a decrease in child marriage by approximately 15% in the last decade, but there are still advancements that need to happen to achieve the end of the practice by 2030 as targeted in Sustainable Development Goal 5, Achieve Gender Equality and Empower all Women and Girls, target 5.3. The decrease of child marriage serves a multitude of benefits for the international community. Delegates should consider understanding their state's approach to child marriage. Is there legislation in place? Is legislation that is emplaced about child marriage enforced? What are other ways to advocate for the end of child marriage?

²² Ibid.

²³ Ibid.

²⁴ Ibid.

²⁵ Ibid.

²⁶ Tahirih Justice Center, *Falling through the Cracks*, 2017.

²⁷ Ferguson, Sarah, *What You Need to Know About Child Marriage in the U.S.*, 2018.

²⁸ Ibid.

What does your state believe are the causes of child marriage and the associated remedies to it?

II. Abandonment of Female Genital Mutilation/Cutting

Introduction

It is estimated that more than 200 million girls and women have undergone Female Genital Mutilation/Cutting (FGM/C).²⁹ FGM/C refers to a procedure that involves partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.³⁰ UNICEF and UNFPA utilize a hybrid term of FGM/C to draw attention to the violation of rights with the practice, while also maintaining culturally sensitive terminology when working with practicing communities.³¹ There are four types: Clitoridectomy, Excision, Infibulation, and other harmful practices.

- Clitoridectomy is the partial or total removal of the clitoris and in very rare cases, only the prepuce.
- Excision is the partial or total removal of the clitoris and the labia minora with or without excision of the labia majora.
- Infibulation is the narrowing of the vaginal opening through the creation of a covering seal. The seal is created by cutting and repositioning the labia minora or the labia majora occasionally through stitching with or without removal of the clitoris.
- The final type encompasses all other harmful practices to the female genitalia for non-medical purposes.

FGM/C is condemned by numerous international treaties, conventions, and Member State legislation. Within the international community, it has been characterized as a violation to the standard of living outlined in Article 25 of the UDHR, as a form of violence against girls and women as denounced in the CEDAW, and described as torture, leaving it to fall under the auspices of the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment of Punishment.³²

FGM/C harms girls and women both in the short-term and long-term manner. The short-term effects include, but are not limited to severe pain, excision bleeding and/or hemorrhage, genital tissue swelling, fever, infections, urinary tract infections, healing complications, injury of the surrounding bodily areas, shock, and death.³³ Whereas, long-term effects include menstrual difficulties, need for later surgeries, psychological problems, and health complications of FGM/C.³⁴ It is performed for a multitude of reasons and sustained by social, cultural, and economic factors within families and communities. These social, cultural, and economic factors present themselves as social pressure to conform and not be rejected by society. It is considered necessary for raising a girl child to increase the prospects of marriageability, conform with the community

²⁹ World Health Organization, *Female Genital Mutilation*, 2018.

³⁰ Ibid.

³¹ UNICEF, *Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change*, 2018.

³² UNICEF, *Female Genital Mutilation*, 2018.

³³ World Health Organization, *Female Genital Mutilation Fact Sheet*, 2018.

³⁴ Ibid.

standards of beauty and femininity, and an aim to prevent premarital virginity and marital fidelity.³⁵

To combat FGM/C, UNICEF has partnered with other organizations such as the World Health Organization (WHO) and the UNFPA to bring international attention and involvement to stop the practice and assist in revising legal frameworks.³⁶ FGM/C has no health benefits. In fact, it is a threat to the health and well-being of girls and women. In conjunction with being a health risk for persons undergoing the procedure, it is also a violation of the rights as outlined in CRC and CEDAW. UNICEF's work on the issue had been developed largely through partnerships between itself and other inter-agencies, non-governmental agencies, and communities.

UNICEF/UNFPA Joint Programme on Female Genital Mutilation/Cutting

The UNICEF/UNFPA Joint Programme was established in 2008 and is still ongoing with the goal to develop and pass legislation banning FGM/C as well as provide access to prevention mechanisms, protection, and treatment services to girls and women. It brings together global experts, practitioners, non-governmental organizations, UN and international development agencies, academia and government representatives to provide the groundwork for strategies, capacity-building, and consensus on how to accelerate the abandonment of FGM/C.³⁷ The joint programme led to an increased awareness of the issues associated with FGM/C and worked to strengthen the legal and policy framework within areas to see its abandonment in practice. For example, in Burkina Faso, fines can be given to those that perform FGM/C.³⁸ Legal approaches are not the only approach taken by the program. Addressing the social norms of the practice was at the core of its goals as well.

Being based around a culturally sensitive and human rights focused approach, the focus is to have national and community-level change in social norms towards the elimination of FGM/C. The social norms utilized case study research to examine the issue at hand and develop a comprehensive strategy and approach which consisted of a mixture targeted approach. This included the use of the media, through newspaper articles, television, and radio programs to develop public discourse about the topic. The use of local language in multiple media types assisted in spreading information and reaching even rural communities.³⁹ Education and community awareness have been pivotal cornerstones in the advancements of combating FGM/C.

Health workers were provided training to understand the consequences of FGM/C and how to treat some medical complications that occur from it. In Guinea-Bissau, The Gambia, Senegal, and Sudan, as part of the program, helped promote midwifery training that encompassed FGM/C

³⁵ Ibid.

³⁶ Ibid.

³⁷ UNFPA-UNICEF, *UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change*, 2014.

³⁸ UNICEF, *Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change*, 2013.

³⁹ UNFPA-UNICEF, *UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change*, 2014.

preventing and support for those that have already been cut to give birth as well as during the postnatal stage.⁴⁰ It is critical to engage the medical field due to their role within the practice.

Medicalization is when FGM/C is performed by medical providers. Regardless of where, FGM/C is a violation of human rights as outlined in the 2008 Interagency Statement and reaffirmed by the 2012 General Assembly Resolution 67/146.⁴¹ In a partnership with the WHO, several strategies were utilized in 15 countries to prevent medicalization, such as producing training manuals and offering training, conducting studies and generating data on the practice, and prohibiting medicalization through decree within professional associations of physicians, nurses and midwives to develop policies that ban medicalization.⁴²

Sudan

In the Republic of Sudan, 86.6% of women and girls aged 15-49 years were impacted by FGM/C.⁴³ Even without any national legal provision criminalizing FGM/C, there has been a decrease in the use of FGM/C among adolescent girls.⁴⁴ In Sudan the practice of FGM/C is mainly performed by trained midwives and traditional circumcisers, which vary depending on urban and rural areas.⁴⁵ Sudan took an approach to address the medicalization by developing partnerships and focusing on education.

In partnership with WHO and UNFPA, UNICEF supported the government of Sudan's program Sudan Free From Female Genital Cutting. This program focused on tackling medicalization. As part of the pre-license training, all paramedical and midwives in the country receive information about the harm of FGM/C and the importance of rejecting the practice.⁴⁶ In a similar initiative with healthcare providers the Sudan Midwifery Association collected signatures to enforce a law against FGM/C and to end it from the medical practice.⁴⁷

In addition to connecting with personnel within the healthcare field, Sudan included a community-based approach education the public on the health and social impacts of the practice. The *Saleema* Initiative engaged in community-based approach with focus on terminology to describe bodies and social status of girls and women. It reached over 100,000 parents in hospitals and health centers in multiple states to educate mothers on not cutting.

⁴⁰ Ibid.

⁴¹ Ibid.

⁴² Ibid.

⁴³ UNICEF, *Female Genital Mutilation/Cutting (FGM/C) and Child Marriage in Sudan – Are There Any Changes Talking Place? And In-depth Analysis Using Multiple Indicators Cluster Surveys (MICS) Sudan Household Health Surveys (SHHS)*, 2016.

⁴⁴ UNICEF-UNFPA, *Performance Analysis for Phase II*, 2018.

⁴⁵ UNICEF, *Female Genital Mutilation/Cutting (FGM/C) and Child Marriage in Sudan – Are There Any Changes Talking Place? And In-depth Analysis Using Multiple Indicators Cluster Surveys (MICS) Sudan Household Health Surveys (SHHS)*, 2016.

⁴⁶ World Health Organization, *Working Towards Zero Tolerance for Female Genital Mutilation in Sudan*, 2018.

⁴⁷ UNFPA, *Performance Analysis for Phase II*, 2018.

Conclusion

The practice of FGM/C is declining in the numbers, but not all countries have made progress and the pace of decline is uneven. There is still work to be done if the international community is to achieve Goal 5, Target 5.3 of the Sustainable Development Goals. FGM/C has no health benefits and is rooted within social, cultural, and economic factors. Through partnerships, UNICEF strives to provide support for research that understands the issue of FGM/C and to assist in policy discussions and capacity-building to share information and providing training.⁴⁸ Delegates should fully understand the policy and perspective of the Member State being represented in respects to FGM/C. Additional questions to consider: Does your Member State have legislation against FGM/C? What is the prevalence of FGM/C within your Member State? Does your Member State have any partnerships to combat this?

⁴⁸ Ibid.

Bibliography

Ferguson, Sarah. (2018). *What You Need to Know About Child Marriage in the U.S.* [Website]. Retrieved 20 November 2018 from <https://www.unicefusa.org/stories/what-you-need-know-about-child-marriage-us/35059>.

Girls Not Brides. (2018). *What is the impact of Child Marriage.* [Website]. Retrieved 20 November 2018 from <https://www.girlsnotbrides.org/themes/education/>.

Tahirih Justice Center. (2017). *Falling through the Cracks.* [Website]. Retrieved 20 November 2018 from <https://www.girlsnotbrides.org/wpcontent/uploads/2017/12/TahirihChildMarriageReport-1.compressed-min.pdf>.

United Nations Children's Fund. (2018). *UNICEF Executive Board.* [Website]. Retrieved 20 November 2018 from <https://www.unicef.org/about/execboard/>.

United Nations Children's Fund. (2018). *The UNICEF Executive Board: An Informal Guide 2018.* [Website]. Retrieved 20 November 2018 from https://www.unicef.org/about/execboard/files/Executive_Board-Informal_Guide-2018-EN-2017.11.06.pdf.

United Nations Population Fund. (2018). *Child Marriage – Frequently Asked Questions.* [Website]. Retrieved 20 November 2018 from <https://www.unfpa.org/child-marriage-frequently-asked-questions#what%20are%20the%20consequences>.

United Nations. (2018). *The Universal Declaration of Human Rights.* [Website]. Retrieved 20 November 2018 from <http://www.un.org/en/universal-declaration-human-rights/>

United Nations Children's Fund. (2018). *Convention on the Right of a Child.* [Website]. Retrieved 20 November 2018 from <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>.

United Nations Children's Fund. (2018). *Child Marriage.* [Website]. Retrieved 20 November 2018 from <https://data.unicef.org/topic/child-protection/child-marriage/>.

United Nations Children's Fund. (2018) *Female Genital Mutilation.* [Website]. Retrieved 20 November 2018 from <https://data.unicef.org/topic/child-protection/female-genital-mutilation/>.

World Health Organization. (2018). *Female Genital Mutilation Fact Sheet.* [Website]. Retrieved 20 November 2018 from <http://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>.

United Nations Population Fund-United Nations Children's Fund. (2018). *Performance Analysis for Phase II.* [Website]. Retrieved 20 November 2018 from https://www.unfpa.org/sites/default/files/pub-pdf/UNFPA-UNICEF-Phase2Performance_2018_web_0.pdf.

United Nations Population Fund-United Nations Children Fund. (2017). *UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage PROGRESS REPORT 2016*. [Website]. Retrieved 20 November 2018 from

<https://www.unicef.org/protection/files/ChildMarriage-Global-DonorReport-v7.pdf>.

United Nations Children's Fund South Asia. (2017). *Child Marriage*. [Website]. Retrieved 20 November 2018 from <https://www.unicef.org/rosa/what-we-do/child-protection/child-marriage>.

United Nations Children's Fund. (2016). *Female Genital Mutilation/Cutting (FGM/C) and Child Marriage in Sudan – Are There Any Changes Taking Place? And In-depth Analysis Using Multiple Indicators Cluster Surveys (MICS) Sudan Household Health Surveys (SHHS)*. [Website]. Retrieved 20 November 2018 from

https://www.unicef.org/sudan/MICS_Secondary_Analysis_FGMC_CM_English_Version_FINAL_FINAL.pdf.

United Nations Population Fund-United Nations Children's Fund. (2014). *UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change*. [Website].

Retrieved 20 November 2018 from <https://www.unfpa.org/sites/default/files/pub-pdf/Joint%20Programme%20on%20FGMC%20Summary%20Report.pdf>.

United Nations Children's Fund. (2014). *Ending Child Marriage: Progress and Prospects*. [Website]. Retrieved 20 November 2018 from

https://www.unicef.org/media/files/Child_Marriage_Report_7_17_LR..pdf.

United Nations Children's Fund. (2013). *Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change*. [Website]. Retrieved 20 November 2018 from https://data.unicef.org/wp-content/uploads/2015/12/FGMC_Lo_res_Final_26.pdf.

United Nations Children's Fund. (2010). *Milestones: 1946-1955, 2010*. [Website]. Retrieved 20 November 2018 from https://www.unicef.org/about/history/index_milestones_46_55.html.

United Nations Children's Fund. (2010). *Learning from experience: 1946 – 1979*. [Website]. Retrieved 20 November 2018 from <https://wcmprod.unicef.org/stories/learning-experience-1946-1979>.

United Nations Children's Fund. (2003). *UNICEF's Mission Statement*. [Website]. Retrieved 20 November 2018 from https://www.unicef.org/about/who/index_mission.html.

World Health Organization. (2018). *Female Genital Mutilation*. [Website]. Retrieved 20 November 2018 from <http://www.who.int/reproductivehealth/topics/fgm/prevalence/en/>.

World Health Organization. (2018). *Working Towards Zero Tolerance for Female Genital Mutilation in Sudan*. [Website]. Retrieved 20 November 2018 from <http://www.who.int/features/2018/female-genital-mutilation-sudan/en/>.