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on the Question of a Convention on

the Rights of the Child

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QUESTION OF A CONVENTION ON THE RIGHTS OF THE CHILD

Proposals by the International Federation of Women in
Legal Careers (category II)Article 13 (Child health)

1. In keeping with the opinion it expressed as one of a group of non-governmental organizations in document E/CN.4/1983/NGO/33 (p. 4), the International Federation of Women in Legal Careers reiterates its support for the amendments to article 13 proposed by the delegations of Canada (E/CN.4/1983/WG.1/WP.26) and Algeria (E/CN.4/1983/WG.1/WP.27).

It believes, however, that:

1. Paragraph 2 (c) of the present draft article 13 should be supplemented to read: "...to all children without any form of discrimination, particularly discrimination based on sex".

Justification: Many reports by the United Nations and its specialized agencies, including WHO, indicate that cultural standards and attitudes in numerous societies favour boys over girls as regards nutrition and health. Such behaviour is particularly common in the event of food shortages and gross inadequacy of the sanitary infrastructure;

2. The list of measures to protect the health of young children in general and of young children in developing countries in particular should include the four measures recently recommended by UNICEF:

The dissemination of the scientific knowledge now available concerning the advantages of breast feeding;

Oral rehydration therapy (ORT);

Monitoring of growth by means of regular weighing;

Extension of vaccination.

3. The future convention should recommend the institution of health monitoring at school with the participation of children, their parents and school staff.

New article 13 bis

The Federation proposes a new article concerning sources of serious damage to children's health other than disease and malnutrition, namely:

Domestic violence;

Use of drugs of whatever kind;

Harmful labour;

Traditional practices affecting health;

and reading:

"The States Parties to the present Convention undertake:

1. To take legislative and other measures to prevent domestic violence against children and to ensure that children who are victims of such violence receive all the necessary care;

2. To take all necessary scientific, technical, educational and remedial measures for the national and international combating of drug abuse and, in particular, the use by children of drugs of whatever kind;

3. To prohibit, under penalty of punishment, all forms of employment and all occupations that are detrimental to children's health or hinder their physical or mental development and to adopt social, administrative and judicial measures for their detection;

4. To adopt clearly-defined national policies for the abolition of the sexual mutilation of female babies and children, basing such policies on the intensification of health education programmes for all levels of the population and for practitioners of traditional medicine so as to inform public and practitioners alike of the multiple dangers of such practices for the children's physical and mental health".

The reasons for the above proposal are as follows:

Paragraph 1 (Violence against children)

As indicated in the report on health prepared by the secretariat of the 1980 World Conference on the United Nations Decade for Women, domestic violence towards children has in recent years been a subject of growing concern both in developed countries and in developing countries (A/CONF.94/9, para. 53).

The Programme of Action for the second half of the Decade adopted at Copenhagen includes among its priority objectives research into the causes of domestic violence with a view to eliminating it (A/CONF.94/35, para. 163). Furthermore, in paragraph 4 of its resolution 5, the Copenhagen Conference appeals to member States to adopt measures to protect the victims of family violence (A/CONF.94/35, p. 68).

It would therefore seem appropriate for the convention on the rights of the child to contain provisions of the kind in question. The Federation also wishes to draw attention to the good results from the institution of the "medical confidant" now functioning in a number of countries.

Paragraph 2 (Use of drugs of whatever kind)

In its resolution 36/168 on the International Drug Abuse Control Strategy, the United Nations General Assembly observed that drug abuse continued to spread and had reached epidemic proportions in many parts of the world.

The use of drugs of all kinds has spread at a vertiginous speed among children in most countries, causing substantial damage to the health of millions of young people and often inducing death.

The causes of this scourge are manifold. They undoubtedly include unemployment among young people, a problem which every effort must be made to solve. We must not, however, overlook the stimulus provided by drug pedlars at all levels whose favourite targets are school children and unemployed youth.

There is therefore a need for concerted national and international action. The application by all States of the United Nations Drug Abuse Control Strategy is a must.

The States parties to the future convention should include in their educational curricula measures to inform children as widely as possible of the serious dangers of using drugs of whatever kind and should create sufficient numbers of specialized treatment centres for the treatment of drug addicts.

Paragraph 3 (Harmful labour)

Millions of children are used by their parents or third persons for work that exceeds their strength, deprives them of the sleep they need at their age, and is often unhealthy and sometimes immoral.

Such work is not always performed within the framework of a contract of employment or a legally-structured employment relationship. As such, it escapes control by the law, making its detection difficult, but all the more essential. Legislation instituting social and judicial protection must be adopted to remedy the situation.

Paragraph 4 (Traditional practices affecting health)

After some hesitation, WHO decided to study traditional practices affecting the health of women and children and organized a seminar on this topic at Khartoum in 1979. The participants, all of whom were gynaecologists, paediatricians, nutrition specialists, psychologists or nurses, came from nine African countries. ^{1/} They adopted several recommendations, including recommendation D on female circumcision, which recommends, inter alia: the adoption of clear policies for the abolition of such circumcision; the intensification of general education of the public, including health education at all levels, with special emphasis on the dangers of such circumcision; and the intensification of education programmes for practitioners of traditional medicine, to demonstrate the harmful effects of female circumcision, with a view to enlisting their support for the general efforts to abolish the practice (report reproduced as a document of the World Conference of the United Nations Decade for Women, under the symbol A/CONF.94/BP/9, p.24).

^{1/} Yemen, Djibouti, Egypt, Oman, Somalia, Sudan, Ethiopia, Kenya, Nigeria.

Furthermore, in its resolution 6, the Second Regional Conference for the Integration of Women and Development, held at Lusaka in December 1979, condemns infibulation and other female sexual mutilations and emphasizes the need for information and health education campaigns on the harmful medical and social consequences of such practices (A/CONF.94/17, p.44).

Finally, the Programme of Action for the second half of the United Nations Decade for Women similarly emphasizes the need to promote extensive health education programmes to encourage positive traditional practices and combat negative practices detrimental to women's health (A/CONF.94/35, para.157) and to prevent mutilation practices which damage women's bodies and health (ibid, para.162).

During its congress at Dakar in July 1978, the International Federation of Women in Legal Careers itself adopted a recommendation to the same effect (see annex).

AnnexCONGRESS OF THE INTERNATIONAL FEDERATION OF WOMEN IN
LEGAL CAREERS - DAKAR, JULY 1978Unanimously adopted recommendation

THE NEEDS AND PROTECTION OF THE CHILD IN AFRICAN RURAL AREAS

1. Traditional practices

In the light of the information presented by its members, and in particular the important doctoral thesis presented by Dr. Mirghani-el Sayed, Sudan, and the reports presented by Mrs. Bridel, Switzerland, and Mr. Kaiser, President of Terres des Hommes, it became evident to the Commission that young girls in many regions of the world are still subject to sexual mutilations, primarily infibulation and excision, which can be carried out in a number of ways.

The reasons given for these ancient customs, as observed by communities which sometimes no longer know the customs' origins, are as follows:

1. To preserve girls' virginity and sexual morality;
2. To improve female fecundity;
3. To ensure increased sexual pleasure for the husband;
4. To initiate the young girl into womanhood;
5. These mutilations are also carried out for purposes of hygiene.

Investigations carried out on the basis of cases dealt with in health units subsequent to the development of complications have revealed that these mutilations often have extremely serious consequences for women's health. The mutilations are generally carried out by unqualified persons who are totally ignorant of female anatomy. These practices also have a definite negative psychological effect on the patient.

It is therefore quite evident that these mutilations, which often result in illness, sterility, disability and sometimes even death, run counter to the goals originally sought.

Contrary to what is popularly believed, some of these practices, and in particular excision, are condemned by Islam.

Many African women have drawn the attention of humanitarian non-governmental organizations to this serious problem.

Considering, therefore, that the sexual mutilations to which girls are subject constitute a real danger to health, and even to life,

Considering that these practices violate fundamental human rights, and in particular the fundamental rights of the child and the freedom of women,

Considering that, carried out without any medical need, these practices impose unnecessary suffering on children and women,

But considering that these practices, intimately linked with sometimes ancient family customs and traditions and religious beliefs, form part of the traditional African educational system, since they represent one of the ways in which the child is integrated into society.

The International Federation of Women in Legal Careers, wishing to contribute to the development of African women by enabling them to enjoy their fundamental rights,

RECOMMENDS

1. That an informational and educational campaign be carried out within the communities concerned so that the dangers of sexual mutilations are clearly explained;

2. That this action should be an integral part of the health education programmes prepared for the communities concerned and that it should be carried out by qualified persons with an in-depth knowledge of the customs and health needs of these communities;

3. That legislative measures should be adopted making information and education in these areas obligatory, in particular in schools and in education, health education and health programmes.