



Topic: Protection of Disabled Children Around the World
Chairs: Jack Rowe and Kuwunda Shamambo

Introduction:

UNICEF's vision is to build a world where every child can grow up healthy, protected from harm, and educated so they can reach their full potential. Every day we're working to make this vision a reality. No matter who they are or where they are born, we reach out to the most vulnerable children wherever and whenever they need us. UNICEF's goal for disabled children is very important considering that 15% of the world's population is disabled and 1/6th of those are children who may not receive the necessary protection and rights they deserve to thrive as individuals. Not only do children in areas ridden with war, poverty, and other roadblocks struggle to exercise these rights, but many children all over the world as well, and it is our goal to ensure that they get the rights, protection, and justice they need.



Committee:

Delegates, your job will be to find a way to ensure the safety of all children with disabilities by granting them rights, protections, access to benefit programs, etc. based on your countries' ability, position on the issue, etc. Your solution will be presented at COPMUN and will be explained based on how to implement the solution, how the solution would work, and/or if a solution is feasible for your nation.

History of The Issue:

There is a long history of discrimination, exclusion, and dehumanization of the people who are a part of the deaf and disabled community. The community, particularly its children, has faced a multitude of obstacles and suffered as a result of misunderstanding between the disabled and non-disabled. Regardless of a country's human rights or economic situation, the disabled are generally the last in line to have their human rights respected. Disabled children have been subject to cruelties such as emotional, physical, and sexual abuse from those around them, ranging from strangers to their own parent/guardians and caretakers. In the 1800s and early 1900s, the disabled were looked at as tools or objects of charity to be used for the gratification of adults and were rarely given the treatment and respect they needed. One example of how this has changed is the increased lifespan of individuals with Down Syndrome since the 1970s, a time when many, if not most, were institutionalized or otherwise isolated and denied many basic



human rights and freedoms. Over the past four decades, the average lifespan has risen from 25 years to 60 years. However, not everyone partook in the behavior that overlooked the disabled, and those who cared for the deaf and disabled community most made changes to such stigmatizing views. With persistence and hard work, advocates for the rights of the disabled, such as Parrish Wright and Gerald Baptiste, brought the community's problems to the eyes of their governments and society to be recognized and rectified. Leaders and governments began to pay more attention to the disabled community; however, this attention, in some places, resulted in more harm than good. As of late, Iceland has come close to preventing 100% of all new Down syndrome patients. However, this was done by eliminating pregnancies that test positive for the genetic abnormality in prenatal screenings. Since the majority of women in Iceland opt for the screenings, most all Down Syndrome pregnancies have been and are aborted. This is what Iceland considers to be a solution to the "Down Syndrome problem." Disabled Rights activists did not intend to inspire such results, which undoubtedly opposed the goals of their campaign. Without clear consideration of and communication with those within the disabled community, governments took turns that were exceedingly detrimental to the developing view of the disabled, causing people to view them as "problems" that needed to be "solved" as opposed to humans who needed to be understood and protected. Iceland set an example for other countries and they began to follow suit; the purposeful detection and elimination of babies affected by Down Syndrome became common practice all over the world. For this reason, it became clear



that communication was vital to the recovery of this community, especially in the all-too-common cases of children seeking refuge and protection from abuse and conflict.

The 1981 Year of Disabled Persons, one of the few early international efforts to help liberate the disabled, greatly succeeded in bringing attention to the issues affecting disabled persons. The Convention on the Rights of Persons with Disabilities (CRPD), the fastest ever and first negotiated human rights treaty of the twenty-first century, has worked to ensure the world's largest minority freedom from discrimination and the myriad of obstacles that hinder its members. These were reinforced by the absence of action and education regarding their rights and the misrepresentation they've had. In all realms of life, including public, political, and educational, the CRPD sought to bring freedom and justice to the persons of this community. Disabled children face a combination of social, cultural, attitudinal, and physical barriers as well as discrimination in the form of cultural prejudices, inaccessible environments, and socio-economic disadvantages and injustices. One of the most detrimental forms of discrimination, however, is inadequate legislative and administrative procedures and actions by those meant to provide service(s). Most disabled children who suffer abuse don't get the protection they need or the justice they deserve, primarily as a consequence of system flaws that fail to recognize their needs and provide them with appropriate services. One particular study by NSPCC (National Society for the Prevention of Cruelty to Children) on the treatment of deaf and disabled adults who had been abused as children, among many others, found that disabled children are at increased risk of abuse, but often aren't seen as credible sources of information or



as children before anything else, namely, their disability. The discrimination that disabled children face can be put into two main categories: direct and indirect. Direct discrimination occurs when a disabled child is treated differently from a non-disabled child. Indirect discrimination, on the other hand, has a broader impact in that it occurs when practices or policies that don't appear to discriminate against children with disabilities actually have discriminatory impacts in practice and, as a result, deny certain human rights.

The Convention of the Rights of Persons with Disabilities was adopted by the UN General Assembly in 2006 and has since excelled in its performance by bringing together a number of countries and addressing a multitude of pressing issues concerning the disabled; it has changed the world's view on the disabled to one which enables them and makes them out as subjects, as opposed to objects. The Convention addresses them as people with rights and the ability to claim those rights, make informed decisions in their lives, and be active members of society. The UN Committee of the Rights of the Child also recognizes the need for improvement from governments and societies concerning the treatment of disabled children. It operates to confront discrimination against children with disabilities and ensure them access to health-oriented services, education, appropriate care, protection from all forms and levels of abuse, better care at home and within institutions, and access to opportunities. Due to the widespread fallacy that disabled children are not abused, the safeguarding of disabled children is undermined and their susceptibility to abuse continues to grow. In reality, the situation is quite



contrary to what is believed, as deaf and disabled children are significantly more likely to experience abuse and be denied proper treatment than their non-disabled peers.

Current Issue:

The term “person with disabilities” applies to all persons who have long-term physical, mental, intellectual, or sensory impairments that, in the face of various negative attitudes or physical obstacles, may prevent those persons from participating fully in society. Persons with disabilities remain amongst the most marginalized in every society. Ever since the human-rights approach towards disability was adopted, there has been a shift in focus from the limitations of disabled children to one which focuses on societal barriers. The goal of the Convention of the Rights of the Disabled recognizes that disability is an evolving concept and that legislation may be adapted to reflect positive changes within society. Despite previous developments in legislative views of disability, persons with disabilities are, to a large extent, still viewed as “objects” of welfare and medical treatment rather than humans deserving of equal opportunities and chances to exercise their rights. A few of the rights disabled children and persons are most commonly denied include receiving an education, moving around freely, obtaining proper healthcare, and making their own decisions. This is due, in part, to the many obstacles unique to developing countries such as Sudan and Afghanistan. War, civil strife, and poverty are major causes of impairment, which complicates efforts for prevention and response to disabled needs. Poverty, in particular, is a large cause and consequence of disability worldwide. Poverty may



increase the risk of disability through malnutrition, inadequate access to education and health care, unsafe working conditions, a polluted environment, and lack of access to safe water and sanitation. According to The World Bank, disabled persons account for up to 20% of the world's poorest people and tend to be regarded as disadvantaged within their own communities. 98% of children with disabilities in developing countries do not attend school, around a third of the world's street children live with disabilities, and the literacy rate for adults with disabilities is as low as 3%, and 1% for women with disabilities in some countries. So long as these statistics are true, international efforts to create change will be hindered. For example, efforts to make education more accessible to disabled children will have limited impact as long as 98% of children with disabilities in developing countries are actively prevented from attending school. In turn, disability may increase the risk of poverty, through the lack of employment and education opportunities at all levels, lower wages, and increased cost of living with a disabilities. Equally important, many of the factors contributing to high levels of impairment among children are potentially preventable, thus offering the opportunity to reduce the levels of disability as well as of poverty.

On the other hand, war and armed conflicts have a major impact the youth population, particularly in countries of the developing world. It has been estimated that between 1990 and 2001, 2 million children around the world were killed and as many as 6 million disabled by armed conflict. The prevention of disability caused by landmines and unexploded ordnance needs to be given higher priority in the regions most affected. The UN Security Council has



identified six grave violations affecting children in situations of armed conflict including (1) killing and maiming, (2) recruitment and use of children, (3) rape or other sexual violence, (4) abduction, (5) attacks on schools or hospitals, and (6) denial of humanitarian access. These violations may cause children to acquire disabilities for the first time, experience the exacerbation of existing disabilities, or developing secondary disabilities. This presents the fact that children in countries affected by armed conflicts, where these violations are most abundant, are particularly vulnerable to developing disabilities or being denied the care and aid they need for existing disabilities. In 2017 alone, Country Task Forces for Monitoring and Reporting (CTFMRs), active in 20 situations of armed conflict and tasked with documenting the effects of armed conflict on children, verified more than 21,000 violations against children. CTFMRs operate through the Monitoring and Reporting Mechanism, which does give better ideas of the number of injured children but does not record the actual number of children who acquire disabilities as a result of armed conflicts. This lack of specific information may result in ramifications to the establishment of new policies and resulting development in the various regions of the world. In many countries— such as Kenya and Vietnam— maiming* has been used in conflict, mainly to send messages and make displays of power. Twentieth-century colonial armies used forms of visible, symbolic injuries to spread terror among populations they sought to control. In post-colonial wars these tactics were reprised and armed position groups began to target children and used the deliberate, visible “disablement” of children and adults to demonstrate the powerlessness of government, polarize local societies, and to grab international



attention. While killing and maiming, along with the other five violations against children, are some of the most observable effects of armed conflicts, they are few of the many consequences of war that endanger and inhibit populations of youth, disabled or otherwise.

A much-needed human rights approach to disability has led to a shift in focus from a child's limitations arising from impairments, to the barriers within society that prevent the child from having access to basic social services, developing to the fullest potential and from enjoying her or his rights. This is known as the "social model" of disability, adopted not to replace, but to accompany the "medical model" of disability. Although the provision necessary medical and professional support is an important way of promoting empowerment and independence and is an integral part of the social model, the medical model still exerts a disproportionate influence at many levels.

Children with disabilities remain subject to discrimination, a number of social and economic barriers, and poor healthcare services. Although the societal view of disabled people is changing, many operations are still underway in attempts to address the many daily challenges disabled children and their families face. Several studies in both the US and UK have found that disabled children are up to 3.4 times more likely than non-disabled children to be neglected or abused. One particular American study reports that they are 3.8 times more likely to be neglected, 3.4 times more likely to be physically abused, 3.1 times more likely to be sexually abused, and 3.9 times more likely to be emotionally abused. The study concluded that, overall, 31% of disabled children had been abused compared to 9% of non-disabled children. There is a



widespread lack of local and national data on disabled children subject to safeguarding children procedures. In places where safeguarding for children is provided, the support and services are most often inadequate or insufficient. Lack of understanding and training concerning the safeguarding of disabled children can result in professionals not recognizing signs of abuse or neglect. Researchers have found that the coverage of safeguarding during the induction of staff at residential schools was poor or non-existent, and staff in residential special schools sometimes missed out opportunities to participate in multi-agency training. The Second Joint Chief Inspectors Report found that less than 50% of residential special schools met the National Minimum Standards for responding to complaints and just 40% of residential special schools did not meet or only partially met the National Minimum Standards for child protection systems and processes. As of late, new concerns have risen about whether or not disabled children have the necessary levels of understanding about the concept of abuse and the appropriate services and assistance needed to report abuse they have either endured or witnessed. The dependency of children with disabilities on a large number of adults for a range of personal care and/or communication assistance increases their risk of exposure to abusive behavior and makes it difficult to set and maintain physical boundaries as well as report personal accounts of abuse. Disabled children may learn from their care providers or wider experience to be compliant and not to complain. Such lack of participation and choice in decision-making can disempower disabled children thus making them more vulnerable to harm.



Negative assumptions and attitudes can lead to institutional discrimination and inaction when it comes to caring for and revising health services to disabled children. An investigation by the Disability Rights Commission found that children and young people in particular experienced “diagnostic overshadowing”— identified as when reports of physical health or ill health are viewed as part of the mental disability health problem or learning disability— and, as a result, are not investigated or treated. Children may also face double discrimination for their disability and ethnic or cultural background, facing additional difficulties and challenges in accessing and receiving appropriate services. Ultimately, attitudes and assumptions play a huge role in the rights, opportunities, and protections that are provided to disabled children. Among the most common and detrimental are the reluctance to believe that a disabled child is at risk of abuse; when abusive practices go unrecognized; the assumption that a disabled child could or can not be a credible witness; the assumptions that lead to a focus on needs relating to impairment as opposed to the general welfare of a child; lack of training and/or familiarity with impairment, particularly with social workers; a lack of understanding concerning the vulnerability of disabled children to bullying, abuse, and mistreatment; and the lack of prioritization of safeguarding disabled children and ensuring them equal rights and opportunity.

Guiding Questions:

1. What laws could improve the lifestyles of children with disabilities?



2. What could people do to accommodate disabled children who are not being accepted or welcomed by society (at home, school, places of recreation, etc.)?
3. How are you going to spread this message when other problems overshadow it?
4. What policies are currently in place to help disabled children? How could they be improved upon?
5. How do we encourage families to keep disabled children instead of aborting them or putting the child in foster care?
6. What facilities could benefit disabled children who have been abandoned? How would these facilities be improvements compared to existing facilities?
7. How would policies supporting disabled children be funded by your country?
8. How would your county's population react to policies supporting disabled children?
9. What socio-economic factors within your county limit the abilities of and opportunities for the disabled population?
10. What actions must be taken to prevent further miscommunication among and concerning societies, governments, and the people of the disabled community?
11. How will new policies recognize abuse and its impact on disabled children?
12. How can common negative attitudes and assumptions regarding disability be eliminated?
How can the formation of new negative attitudes and assumptions be prevented?



Bibliography (A.K.A. a TON of good, reliable reading sources):

https://www.un.org/esa/socdev/nyin/documents/children_disability_rights.pdf

https://www.unicef.org/disabilities/index_65309.html

<https://www.un.org/development/desa/disabilities/resources/factsheet-on-persons-with-disabilities.html>

<https://www.unicef.org/disabilities/>

https://www.washingtonpost.com/opinions/whats-the-real-down-syndrome-problem-the-genocide/2018/03/14/3c4f8ab8-26ee-11e8-b79d-f3d931db7f68_story.html?noredirect=on&utm_term=.2ed5de2c7bff

https://www.ohchr.org/EN/Issues/Discrimination/Pages/discrimination_disabilities.aspx

https://www.coventry.gov.uk/sc/f/download/downloads/id/745/it_doesnt_happen_to_disabled_children.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/190544/00374-2009DOM-EN.pdf

<https://www.un.org/disabilities/documents/toolaction/ipuhb.pdf>

https://www.un.org/esa/socdev/nyin/documents/children_disability_rights.pdf

<https://www.unicef.org/disabilities/files/>

https://www.unicef.org/disabilities/files/Children_with_Disabilities_in_Situations_of_Armed_Conflict-Discussion_Paper.pdf

https://www.ohchr.org/EN/Issues/Discrimination/Pages/discrimination_disabilities.aspx



https://www.unicef.org/disabilities/index_65309.html

<https://learning.nspcc.org.uk/research-resources/2015/deaf-and-disabled-children-talking-about-child-protection/>

https://www.washingtonpost.com/opinions/whats-the-real-down-syndrome-problem-the-genocide/2018/03/14/3c4f8ab8-26ee-11e8-b79d-f3d931db7f68_story.html?noredirect=on