



VIEWPOINT

Renewing our commitment to protect children experiencing armed conflict

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Civilian casualties from armed conflicts have increased, such that 90% of deaths from armed conflicts in the first decade of the 21st century have been civilians, a significant number of whom are children. The acute and chronic effects of armed conflict on child health and well-being are among the most significant children's rights violations of the 21st century. Children are increasingly exposed to armed conflict and targeted by governmental and non-governmental combatants. Despite International Human Rights and Humanitarian laws and multiple international declarations, conventions, treaties and courts, injury and death of children due to armed conflicts have worsened over the decades. It is critically important that a concerted effort be undertaken to address and rectify this issue. Toward this end, the Internal Society of Social Pediatrics and Child Health (ISSOP) and others have called for a renewed commitment to children experiencing armed conflict with an immediate call to implement a new *UN Humanitarian Response on Child Casualties in Armed Conflict*.

Impact of Armed Conflict on Children

Armed conflict is defined as 'any organised dispute that involves the use of weapons, violence, or force – whether within national borders or beyond – and whether involving state actors or nongovernmental entities'.¹ Civilian casualties from armed conflicts have increased, such that 90% of deaths from armed conflicts in the first decade of the 21st century have been civilians,² a significant number of whom are children.³ Children are increasingly exposed to conflict and targeted by both governmental and nongovernmental combatants. In 2020, the United Nations (UN) released its annual Report on Children and Armed Conflict identifying over 6000 child casualties and 4019 children killed the preceding year.⁴ Five conflicts have involved the USA including Afghanistan, Syria, Yemen, Somalia and Mali. These conflicts account for 69% of total reported child injuries and 64% of children killed.⁵ However, these are most certainly underestimates of the trauma and death experienced by children due to the lack of systematic documentation on the magnitude of childhood injury and death.⁶ The world is now witnessing Russia's invasion of Ukraine, including the indiscriminate destruction of cities and towns with the targeting of civilians, including children. The bombing of the Maternity and Children's Hospital in Mariupol is a singular example of Russia's systematic targeting of vulnerable adults and children. Hundreds of children have been injured and died as a result of this indiscriminate and targeted bombing.⁷

Children are more vulnerable than adults to severe and fatal injuries. Injuries from arms, fire, toxins and explosive devices are the most common causes of paediatric casualties in recent wars. Children are disproportionately injured and killed by unexploded bombs, often during routine childhood activities of play, exploration or chores.⁸ In addition, many youths cease to be treated as children during armed conflicts, with hundreds of thousands world-wide occupying combat roles as soldiers, exploited for sex trafficking or being used as human shields.⁹ Child injuries are often the result of 'collateral damage' as a consequence of intentionally targeted military objectives. Beyond physical injuries, the direct effects on the mental, developmental and behavioural health of children are profound. These include posttraumatic stress disorder, depression, anxiety and behavioural and psychosomatic conditions that persist long after cessation of hostilities.¹⁰

Many children affected by armed conflict are displaced from their homes and communities.¹¹ In 2021, there were close to 37 million children world-wide displaced including 13.7 million refugees and 22.8 million internally displaced.¹² In Ukraine, almost a quarter of the population (10 million people) have been forced from their homes. This includes 3.7 million people who have migrated into neighbouring countries as refugees, over half of whom are children.¹³ Unaccompanied children are at high risk for exploitation, trafficking and long-term psychological distress.¹⁴

Modern famine is increasingly associated with political conflicts and the weaponisation of food production.¹⁵ Though often thought of as primarily the result from environmental catastrophe, they increasingly result from geopolitical crisis posing a significant risk to children. It is important to appreciate how extensively food availability relies on the stability of intact social systems that may be disrupted by war. Children depend on the

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adults in their lives to maintain food security, while those adults in turn depend on adequate wages which depend on functioning economies, reliable energy sources, clean water supplies, and supply chain infrastructure for transportation and distribution. Combatants may burn or occupy farms, block supply lines, and divert food meant for humanitarian purposes. Most recently, the 2022 Russian embargo of Odesa prevented the export of 25 million tons of grain amid an ongoing global hunger crisis, with 345 million people world-wide currently facing acute food insecurity and imminent danger of famine.¹⁶ In Somalia alone, 7.1 million persons face daily hunger and 250 million the prospect of famine.¹⁷

Failure of International Law

It is critically important for child health professionals to have a general appreciation for the framework of international norms that guide global interactions within and between states. Article 1 of the Charter of the United Nations defines the role of the UN, ‘*To maintain the international peace and security, and to that end: ... bring about by peaceful means, and in conformity with the principles of justice and international law, adjustment, or settlement of international disputes...*’. In this capacity, the UN serves as the foundation for efforts to protect the rights of children for survival and optimal development during times of conflict.¹⁸

The establishment of a codex of human rights in general, and of children’s rights in particular, has evolved over the past 70 years. These consist of declarations, treaties, covenants and conventions that articulate the inalienable rights of the child.¹⁹ The newly formed United Nations in 1948 established the Universal Declaration of Human Rights (UDHR) that provided a broad framework for the assurance of basic human rights. The preamble states that, ‘*...recognition of the inherent dignity and of the equal and inalienable rights of the human family is the foundation of freedom, justice, and peace in the world...*’ The Declaration articulates 30 articles that delineate what those rights entail. There are two that are of particular relevance to this discussion of children’s rights. Article 3 proclaims, ‘Everyone has the right to life, liberty and security of person’. Article 5 states that, ‘No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment’.²⁰ These two statements provide the foundation for the importance of ‘to provide’ and ‘to protect’ and are clarified in subsequent documents, including the UN Convention on the Rights of the Child.

International Child Rights Law

The UDHR established the universally accepted framework for human rights but left significant gaps regarding the specific rights of children. A focus on children’s rights began with adoption of the Declaration on the Rights of the Child by the League of Nations following World War I. The United Nations in 1959 reaffirmed the Declaration of the Rights of the Child and directed its members to follow its principles of protection for all children. The Declaration espoused the basic principle of civil and political as well as economic, societal, and cultural rights for all children. Then on 20 November 1989, the UN General Assembly passed the UN Convention on the Rights of the Child (CRC). On 1 September 1990, the CRC was put into force making it the

fastest international treaty to move from passage to ratification and implementation by member nations.²¹ The CRC establishes the responsibility of governments, institutions, citizens and families to ensure that the rights of the child are respected, and all actions are directed toward achieving the best interest of the child. The CRC was the first comprehensive international treaty to recognise the rights of the child. The right to optimal growth and development and the right to safety and protection are among the essential themes of the CRC. Safety and protection involve freedom from all forms of violence, including forced labor, unsafe work conditions, maltreatment, sexual exploitation and death – including that which occurs during times of war and conflict.²² The CRC, through its principles, standards and provides the benchmark to protect the child in both peacetime and war.²³ The CRC and its related Optional Protocols are particularly relevant concerning children during times of war and armed conflict. Specifically,

- Article 6 – articulates the child’s Right to Life, Survival, and Development, with the implicit application of this right during times of conflict.
- Article 22 – stipulates that refugee children receive protection and humanitarian assistance.
- Article 38 – children living in armed conflict areas are covered by International Humanitarian Law (IHL).
- The Optional Protocol on the Involvement of Children in Armed Conflict speaks specifically to the rights of children conscripted as child soldiers.²⁴

However, the most significant limitation of the CRC is that there are few enforcement mechanisms and is dependent on the ratifying states to uphold the articles of the CRC and its principles, standards and norms of child rights.

International Humanitarian Law

IHL is the field of international law that attempts to regulate the actions of those parties engaged in war and to protect individuals, both military and civilian. The four Geneva Conventions were codified in 1949 following WWII to delineate the protection of certain individuals during times of armed conflict. It is Geneva Convention IV and the two additional Protocols adopted in 1977 that relate directly to the treatment of civilians, including children.²⁵ They state that if civilian populations are lacking basic needs, that actions must be undertaken to provide food, clothing, and medical supplies.²⁶ In addition, in occupied territories, if the occupying power cannot guarantee such relief that it must accept the assistance of other entities to assure its availability.

Children must be accorded special respect and must be protected against any form of assault. The reunification of dispersed families and the exchange of family news between separated relatives must be facilitated. Above all, engulfed by armed conflict is entitled to their fundamental rights without discrimination and their honour, beliefs, convictions, and religious practices respected.²⁷

However, IHL itself does not regulate how criminal prosecution and sanctions are carried out when these principles are violated. This is generally the task of International Criminal Law and the International Criminal Court (ICC) established in 2002 by the

UN Security Council. The purpose of the ICC is to prosecute war crimes, crimes against humanity and to end the impunity of those who commit such crimes.²⁸ The International Criminal Court has jurisdiction over the commitment of Genocide, Crimes Against Humanity, War Crimes, and Crimes of Aggression. Prior to its creation, there were five Security Council international war crimes tribunals for the former Yugoslavia, Rwanda, Sierra Leone, Cambodia, and Lebanon. There are limits to International Criminal law. First, the Court can only investigate crimes committed after 1 July 2002, when the ICC came into force.²⁹ Second, the threshold necessary to launch an investigation needs to be re-examined to address the specific needs of the *innocents* of children. Finally, IHL is vague when dealing with the ever-increasing incidence of intra-state conflicts, such as insurrections and civil war, even when outside states provide both direct and indirect support.³⁰

A Renewed Commitment to Children Experiencing Armed Conflict

Despite International Child Rights, Humanitarian, and Criminal laws and multiple international declarations, conventions, treaties, and courts – injury and death of children due to armed conflicts have worsened over the decades.³¹ It is critically important that a concerted effort be undertaken to address and rectify this issue. The following is a proposed framework for a *UN Humanitarian Response on Child Casualties in Armed Conflicts*, to renew our commitment to improve the lives of children experiencing armed conflict. This framework is based on the the Beirut Convention adopted in 2020 by the International Society of Social Paediatrics and Child Health (ISSOP).³² Should include the following principles.

The best interests of the child

Disputes should be resolved diplomatically with the “best interests of children” paramount to all negotiations and specified in all agreements.

- Policies must emphasise protection of areas where children live and frequent. This includes promotion of ‘child-friendly spaces’ and protection at homes, schools, buses, marketplaces, hospitals and clinics, water wells and places of worship.
- Military operations should follow robust, thorough, and transparent civilian harm mitigation practices including assistance and training of allied militaries and non-state armed groups to ensure the protection of children.
- Military conflict resolution strategies between adversarial parties should prioritise the protection and best interests of children and young people. This includes voluntary evacuation and safe access to paediatric health-care facilities.

Acute and chronic health care for children injured in combat zones

The specialised care of children injured in armed conflicts is the responsibility of the UN and all states engaged directly or indirectly in the conflicts.

- Military combat hospitals should include appropriate provisions of care for children, such as proper personnel training and equipment.
- Children should have access to effective rescue, triage, emergency transportation, and competent and properly equipped medical services – in partnership with existing local and regional health-care systems. These systems must be protected from the impact of conflicts.
- Strategies for long-term rehabilitation, reintegration and mental and behavioural health care must also be addressed.
- An independent and transparent international health research body should fund peer-reviewed research on care of children injured in austere environments. These studies should include epidemiological research to examine immediate and long-term effects of armed conflicts on children, in collaboration with local and regional academic institutions.

Data collection and reporting

Accurate and systematic reporting on child casualties and deaths due to war or armed conflicts must be created and maintained over time.

- Reliable data reports should be an integral part of the UN interagency emergency response system.
- At national levels, all countries with deployed armies or otherwise involved in armed conflicts, including the sale of arms, should provide annual civilian casualty reports that include numbers of children injured or killed by their actions and/or manufactured armament.

Governance

Governments should enforce and enhance laws that ensure civilian harm prevention and mitigation provisions in armed conflicts.

- All member states and those that purchase arms from them should be required to comply with such laws.
- Policymakers should be accountable to ensure their policies follow such laws.
- Institutional, national and global financial interests invested in arms industries should be held accountable to global standards and norms related to the protection and mitigation of harm to children.
- The protection of children against harm in armed conflicts should be a priority of corporations that build and sell arms.

New international agreement

The ultimate objective is to pursue an Optional Protocol to the CRC, and/or a new convention or agreement with legal force to protect children from the impact of war and armed conflict.

Summary

As a society, we have failed to protect children during periods of war and armed conflict. Paediatricians and other child health advocates are dedicated to the optimal health and well-being of all children. We are committed to improving the lives of children

experiencing armed conflict. The acute and chronic effects of armed conflict on child health and well-being are among the most significant violations of children's rights in the 21st century that must be addressed. The United Nations has recently verified more than 260 000 cases of grave violations against children in more than 30 conflict situations across the globe over the past 16 years.³³ A sense of futility can arise as a reaction to the present reality we face with the global increase in injury and death to the world's children during times of conflict. However, as child advocates, we must bring focus to these atrocities and dedicate our efforts to alleviate the suffering faced by children and youth who find themselves invisible during times of war and conflict.

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