

# UN WOMEN

PRESIDENT SARAH NASSER

FEBRUARY 29TH - MARCH 3RD  
AISMUN XX





# UN WOMEN

AISMUN TWENTIETH EDITION

ALTAMIRA  
INTERNATIONAL SCHOOL



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## **I. Welcoming Letter**

Dear Delegates,

It is a pleasure to welcome you to AISMUN and to the UN Women committee. I am glad for the opportunity to be your president in this conference, and hope that all of you have wonderful experiences where you enjoy yourselves and develop the critical skills that these models encourage.

The United Nations is an organization that exemplifies problem-solving structures, identifying, addressing, and attempting to solve issues worldwide through the use of innovation, collaboration, and critical thinking. Likewise, we hope that you are able to use these traits as well as others to discuss and find solutions for the matters this committee will be presenting.



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UN Women places a focus on addressing issues in regards to gender equality and women empowerment. In this assembly, we seek to reach an understanding of current issues regarding this area, as well as encourage the development of interpersonal skills amongst all those present. You will be able to showcase your skills through debates, teamwork, problem solving, and much more. This is an opportunity for you to advance your pre-existing abilities, as well as gain new ones.

We hope that in this conference, you will find yourselves appropriately challenged, rising to the task of going even beyond expectations. In this guide, you will find the information you need to understand the topic and begin your personal research. It is encouraged that you read the guide with care, for the information will provide great aid to your understanding, and help you with your preparation.

We hope you dedicate yourself fully to this experience, showing diligence, dedication, and striving for excellence. I look forward to seeing all of your performances, and know that you will make this committee a great success. If you have any questions or doubts, do not hesitate to contact me.

Sincerely,

President Sarah Nasser

SARAH MOHAMMAD NASSER EL DINE MENDIENTA

## II. Introduction to the Committee

### *2.1 History*





The United Nations Entity for Gender Equality and the Empowerment of Women<sup>1</sup> (UN Women) is an entity that was formed by the United Nations General Assembly on July 2, 2010, to fight the systematic gender inequality that women face worldwide. Many previous organizations had contributed to addressing these issues, but their efforts were to spread out with other problems, leading to the creation of this specific division. UN Women was the result of not only the decision made by the General Assembly but also the merger of four previous parts of the UN system. These were:

- Division for the Advancement of Women (DAW)
- International Research and Training Institute for the Advancement of Women (INSTRAW)
- Office of the Special Adviser on Gender Issues and Advancement of Women (OSAGI)
- United Nations Development Fund for Women (UNIFEM)

These four organizations were making great contributions, but to truly make a powerful impact, there was a need for a unified agency that could recognize the problems of women worldwide. UN Women became an establishment that sought to address the complex and varied issues presented and fulfill the needs of these people.

## ***2.2 Organization and Functions***

Un Women operates its main office out of New York and has others worldwide. These include Africa, Asia, the Americas, and the Caribbean, the Pacific, and Arab States<sup>2</sup>. Its main function is to protect women's well-being, and also encompasses many other missions. UN Women sets and promotes standards regarding gender equality, advocating and creating awareness on the global stage. This organization provides support to

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<sup>1</sup> UN Women. (n.d). *About UN Women*.

<https://www.unwomen.org/en/about-us/about-un-women#:~:text=UN%20Women%20is%20the%20United%20the%20empowerment%20of%20women>.

<sup>2</sup> UN Women. (n.d). *Where we are*.

<https://www.unwomen.org/en/where-we-are#:~:text=Headquartered%20at%20the%20United%20Nations,regional%2C%20country%20and%20liaison%20offices>.





governments and nations to develop policies and programs that ensure women are protected. It also collaborates with other civil organizations, UN agencies, and more, in order to expand its reach and promote its ideologies.

### ***2.3 Main Goals of the Committee***

Essentially, the main goal of UN Women is to promote gender equality and protect women's rights across the world. Still, it also has many other missions that fall under the purview of this objective. These include:

- Increasing access to education.
- Providing access to economic opportunities.
- Eliminating gender-based discrimination.
- Ending gender-based violence.
- Giving women a voice.

### **2.4 References**

1. United Nations. (n.d) *UN women: The United Nations Entity for Gender Equality and the empowerment of women - office of the secretary-general's envoy on youth.* United Nations. <https://www.un.org/youthenvoy/2013/07/un-women-the-united-nations-entity-for-gender-equality-and-the-empowerment-of-women/#:~:text=In%20July%202010%2C%20the%20United,and%20the%20empowerment%20of%20women>
2. UN Women. (n.d). *About UN Women.* <https://www.unwomen.org/en/about-us/about-un-women/#:~:text=UN%20Women%20is%20the%20United,and%20the%20empowerment%20of%20women>.



3. UN Women. (n.d). *Where we are.*  
<https://www.unwomen.org/en/where-we-are#:~:text=Headquartered%20at%20the%20United%20Nations,regional%2C%20country%20and%20liaison%20offices>.

### III. Topic A: Child Marriage

#### 3.1 Introduction

The term child marriage refers to the formal or informal union between a minor, meaning a child under 18 years of age, and an adult or another child. This is a practice that decreases with the passing of time, yet still remains as a widespread custom that affects children worldwide. The OHCHR<sup>3</sup> has established that “Every year, at least 12 million girls are married before they reach the age of 18. This is 28 girls every minute.”

This is a practice that, aside from being immoral on grounds of age, also brings immense damage to the girls involved. Child marriage impacts girls’ education, mental and physical well-being, as well as the well-being of any children they have. There are many illnesses that gain increased chances through this phenomenon, though the greatest would be maternal mortality. Often these marriages are accompanied by the expectation of child bearing, a process which a child’s body is not built to endure, leading to increased mortality of both the mother and the child. In fact, Save the Children<sup>4</sup> reports that “More than an estimated 22,000 girls a year are dying from pregnancy and childbirth resulting from child marriage”.

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<sup>3</sup> United Nations. (n.d). *Child and forced marriage, including in humanitarian settings.*

<https://www.ohchr.org/en/women/child-and-forced-marriage-including-humanitarian-settings#:~:text=One%20in%20every%20for%20girls,union%2C%20before%20reaching%20age%2018>

<sup>4</sup> Save the Children. (2021). *Child marriage kills more than 60 girls A day.*

International. <https://www.savethechildren.net/news/child-marriage-kills-more-60-girls-day#:~:text=More%20than%20an%20estimated%2022%2C000,Day%20of%20the%20Girl%20reveals>



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There are many reasons as to why this situation presents itself. The most common include poverty, cultural traditions, lack of education, and gender inequality. Poverty leads to vast economic pressures, with families not being able to meet the basic needs of food, water, clothing, shelter, and healthcare. Marrying a child can be a monetary relief for many since it is one less person for the parents to care for. In regard to culture, child marriage can be a deeply ingrained tradition, sometimes being a symbol of honor to families. Regardless of this, the negative effects of the practice can not be ignored in favor of tradition. Lack of education can be considered more complex since it branches off into other causes. This situation can lead to child marriages simply because of the lack of information leading to uninformed decisions, with those involved not being aware of everything they should know. On the other hand, this also leaves girls with fewer opportunities to be independent, and sometimes unable to reject these circumstances due to not having any other option. Nevertheless, all of this can tie back to gender inequality. Most communities where this is more prevalent hold more patriarchal norms, and women have little to no power in comparison to men. This means girls often lack a voice or opinion in matters regarding themselves, with the men being able to make decisions for them without their input.

Gender inequality is a driving factor in this problem because of its immense prevalence allowing it to perpetuate this dangerous cycle, something that is evident in the way this issue affects girls and boys in a disproportionate manner. Girls being married to men much older is much more common than any marriage involving young boys. In fact, UNICEF<sup>5</sup> has documented that “Globally, the prevalence of child marriage among boys is just one-sixth that among girls.” Also, various regions have economic disparities based on gender, giving men almost complete power over women by making them dependent on them. There are also different education opportunities, which favor the men by a wide margin. These communities also tend to hold societal norms that push these girls into the roles of marriage and parenthood, whether they wish for it or not. Child brides are also much more vulnerable to violence.

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<sup>5</sup>UNICEF. *Child Marriage*.

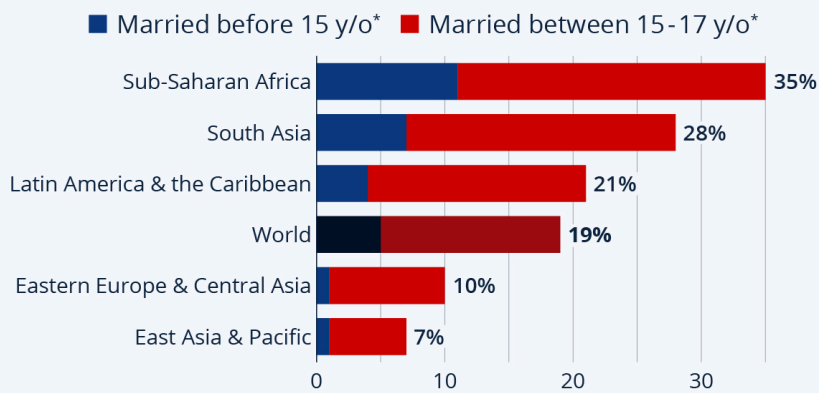
<https://www.unicef.org/protection/child-marriage#:~:text=Child%20marriage%20refers%20to%20any,in%20childhood%20across%20the%20globe>



This phenomenon is seen more frequently in developing countries since these are places where these issues are the most prevalent. The European Parliament (2017)<sup>6</sup> has shared that “the highest rates are found in South Asia and Sub-Saharan Africa. The three countries with the highest rates of child marriage are Niger (77% of women are married before the age of 18), Bangladesh (74%) and Chad (69%). The alarming statistics for regions like South Asia and Sub-Saharan Africa highlight the urgent need for international efforts to address and fix this issue.

## Where Child Marriage Is Still Common

Share of 20 to 24-year-old women who married before the age of 15 or when they were 15-17 years old\*



\* or entered into a cohabiting relationship

No data: Western Europe, North America, Middle East & North Africa

As of latest dates available (2015-2021)

Source: UNICEF



statista

<sup>6</sup>European Parliament. (2017). *Child Marriages: MEPs discuss how to put an end to this scourge*. [https://www.europarl.europa.eu/news/en/headlines/world/20170407STO70797/child-marriages-meps-discuss-how-to-put-an-end-to-this-scourge#:~:text=Child%20marriages%20occur%20on%20all,%25\)%20and%20cha%20\(69%25\)](https://www.europarl.europa.eu/news/en/headlines/world/20170407STO70797/child-marriages-meps-discuss-how-to-put-an-end-to-this-scourge#:~:text=Child%20marriages%20occur%20on%20all,%25)%20and%20cha%20(69%25).).





Buchholz, K. (2022, November 2). *Chart: Where Child Marriage Is Still Common*. Statista. <https://www.statista.com/chart/28646/child-marriage-by-continent/>

### 3.2 Historical Background

Throughout history, child marriage has been a common norm. Both young girls and boys have been forced, coerced, and tricked into these practices since ancient times. This is a phenomenon that has always affected girls more heavily than boys, something that remains true to this day. There were the cases of two minors being married, as well as a girl having to marry a man much older. Many reasons can be attributed to this, though these can vary depending on the time. There is the case of dowry systems which some cultures employ, armed conflicts, low life expectancy, and more.

In the times of the medieval ages, early modern Europe, and pre-industrial societies, amongst others, life expectancy was much lower than it is nowadays. One of the ways society dealt with this was through child marriages since this worked as a way to secure alliances, provide safety, and increase the population. The mortality rate was high for everyone, and these were times when children often died before reaching adulthood, making families much more willing to marry them young. Children could also be pushed into marriage alliances to form bonds between families, whether as a way to secure lands, titles, or simple relations.

During ancient, medieval, and colonial times, as well as conflict zones in general, a much more sinister branch of child marriage presented itself. Girls and women would be abducted by opposing forces for various purposes, including marriage. It was not uncommon for victorious warriors to take girls and women as “spoils of war”<sup>7</sup>, meaning captured property taken from enemies. This was seen as a way to assert dominance and humiliate the losing side. Average girls were often forced into servitude, while those of higher status were used to form unwilling marriage alliances.

Another common reason for child marriage in history is dowries. The use of dowries can be traced back to ancient civilizations. During its very start, this served as a payment from the

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<sup>7</sup>The term “spoils of war” means enemy movable property lawfully captured, seized, confiscated, or found which has become United States property in accordance with the laws of war. (Legal Information Institute)



groom's family to the bride's, as a way to compensate them for the loss. This changed shortly before the start of the Ancient Roman period when the practice turned into the bride's family providing the dowry. To many, this made marriage into an economic transaction, giving men a reason to want these marriages with young girls due to the monetary incentive. This custom changed and evolved with time, but still remains in modern society.

During the Renaissance period, European societies saw significant changes. This practice remained in use, often as a way of families seeking power, with young girls facing harsh conditions at the hands of their husbands, who were usually much older. From this period stemmed enlightened thinkers and social reformers, who questioned the then current circumstances, later on being part of the initiatives to protect young girls. The beginning of the concrete ideals that aim for safeguarding the rights of girls can be seen during these times, where they finally gained strength and popularity. Naturally, child marriage remained, but as time went on, greater numbers of people began to care for the wellbeing of girls.

With the advancement of time, child marriage became an evolving practice, one that never disappeared but changed to fit the necessities of certain societies. Access to healthcare, as well as access to basic necessities, were both factors that began to increase. Following this progression, the necessity for child marriage in particular areas turned into a commodity. This became a practice with, in most cases, viable alternatives, yet one that remains mostly under the basis of culture and tradition.

### **3.3 Current Situation**

Nowadays, child marriage has been and continues to be an issue that plagues the current world. While it may vary significantly by region, Sub-Saharan Africa, South Asia, and certain parts of the Middle East remain the places most affected<sup>8</sup>. Many countries have begun implementing laws, programs, and reforms to combat this, but they can be inefficient. These methods serve no purpose if they are not enforced, which is the case in

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<sup>8</sup> UNICEF. (n.d). *Towards Ending Child Marriage*.

<https://data.unicef.org/wp-content/uploads/2022/08/Towards-Ending-Child-Marriage-2021.pdf>



many of these places. Essentially, protections may exist on paper, but certainly not in practice, undermining the efforts of all the anti-child marriage initiatives.



8 child marriage myths that need to go. (2017, December 18). Girls Not Brides. <https://www.girlsnotbrides.org/articles/8-child-marriage-myths-bust-international-womens-day-2017/>

To properly combat child marriage, it is crucial to both establish legal frameworks and provide rigorous enforcement of this. This is not a problem that can be handled single-mindedly, it needs a multi-faceted approach that encompasses all the factors that contribute to its continued existence. Laws need to be strengthened, support needs to be provided to girls in need, and the root causes need to be addressed as well. Poverty, gender inequality, culture, and traditions are all factors that need to be considered in order to make progress.



With the persistence of these issues, as well as current happenings, child marriage is a circumstance that keeps persisting. Present-day issues also play a role in this development. Each humanitarian crisis leads to violence, instability, and displacement, pushing families to marry their daughters out of fear or necessity. The COVID pandemic has also contributed to this, causing disruption to girls' education and limiting their access to resources, putting them in more vulnerable situations. Sustained efforts are a necessity in order to respond to this issue as well as its causes, and find ways to bring a perpetual end to child marriage.

### **3.4 Focus 1: Child Brides in Niger**

This problem remains an urgent issue in Niger, with this country holding the highest rate of child marriage worldwide. In this country, more than three-fourths of girls are married while being under 18, with nearly 30% being under 15 years old (Statista 2023).<sup>9</sup> Also, Girls, not Brides<sup>10</sup> has reported that “76% of girls in Niger are married before their 18th birthday and 28% are married before the age of 15.” It may mostly affect teenagers, but girls as young as ten are involved in these practices. These are alarming statistics, which emphasize the importance of addressing this issue and finding solutions.

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<sup>9</sup>Statista Research Department and 16, J. (2023). *Highest child marriage prevalence worldwide by country*. Statista.

<https://www.statista.com/statistics/1226532/countries-with-the-highest-child-marriage-rate/#:~:text=Niger%20has%20the%20highest%20child,younger%20than%2015%20years%20old>

<sup>10</sup> Girls Not Brides. (n.d). *Niger*.

<https://www.girlsnotbrides.org/learning-resources/child-marriage-atlas/regions-and-countries/niger/>





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Ojekunle, A. (2020, October 12). *44.1% of Nigerian female adolescents married before 18*. Dataphyte.

<https://www.dataphyte.com/latest-reports/gender/44-1-of-nigerian-female-adolescents-married-before-18/>

The causes for child marriage in Niger are many, with poverty being one of the main reasons. Due to economic uncertainty, marrying young girls can be both a monetary relief for the family and a source of protection for the girls. Their relatives see this as an opportunity to marry them into more influential families, which can provide the resources they need, without prioritizing the personal well-being of the girls themselves. After all, becoming a child bride results in numerous physical and mental hardships. The girls are left in vulnerable positions, with a greater chance of experiencing domestic violence with no way of escaping, as well as being subjected to the will of their partner and his family. Child marriage is also often accompanied by childbirth, which can cause many complications for the young mothers. These early births increase the health risks and mortality rate for both the girls and the infants.

Additionally, Niger is a country in which arranged marriages and dowries are still widespread. Through these practices, the families of the girls often prioritize their own interests over those of the child, whether it be for monetary or societal reasons. Dowries are



an economic transaction that can incentivize these practices, and even without the lucrative benefits, the fear of ostracization will be a higher worry about them over the choices of young girls. Regardless, all the reasons can also be attributed to gender inequality. Niger is a country that still perpetuates the ideals of men having power over women. These kids are often seen as the property of their families, with their wishes, thoughts, and goals being pushed under the will of their relatives, removing their autonomy.

Laws have been created and implemented to attempt and reduce this issue, but the results have not been absolute. The number of child marriages has decreased, but these solutions have not been enough. Particularly in rural areas, these methods' effectiveness is much lower, since there is no proper enforcement of said laws in these areas. Girls in rural areas face higher rates of poverty and have more limited access to education. These areas also tend to conform more heavily to traditional norms and the societal pressures that come along with them. The presence of governmental enforcers and other institutions is lower as well, hindering the fulfillment of these laws and reducing the possible support girls could seek.

### **3.5 Focus 2: Empowerment Through Education**

The lack of access to education has clearly contributed heavily to the pervasiveness of this concern. This can be attributed to a variety of reasons, such as harmful stereotypes, gender norms, and poverty, amongst others. For example, families without sufficient resources to pay for all of their children's schooling will often prioritize the education of a son over the education of a daughter. This perpetuates a seemingly endless cycle, where poverty limits the girls' access to education, and their lack of education limits their chances to escape poverty. As long as these kids lack access to education, they lack resources that allow them to escape these circumstances that can lead to child marriage.

Additionally, many schools also employ disproportionate teachings to girls. UNICEF<sup>11</sup> shares that "teaching practices are not gender-responsive and result in gender gaps in learning and skill development." These disparities not only affect their learning but also enforce the ideals that promote gender inequality, putting girls in a hierarchically lower

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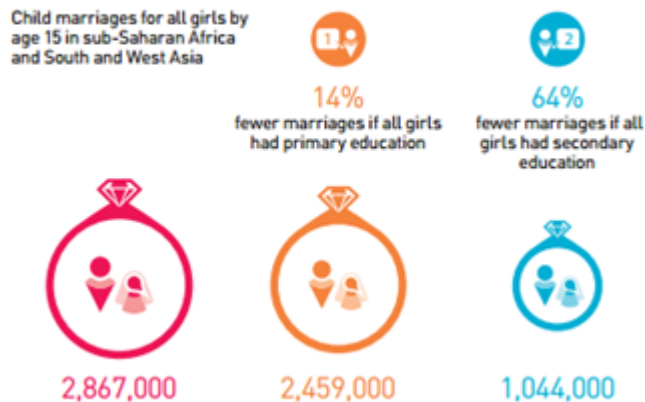
<sup>11</sup>UNICEF. (n.d). *Gender Equality*. <https://www.unicef.org/gender-equality>



position than boys. Moreover, these teachings devalue their achievements, making them seem inconsequential. These are things that may not seem excessive from an initial viewpoint, but all contribute to girls not being able to escape from the situations forced upon them.

A proper education and even just access to a proper school can bring a great number of benefits to these young children. Mainly, girls will gain the necessary information regarding this issue, leading them to understand the consequences of this practice. They will also learn that they have a voice and that their thoughts and opinions matter too. Education can provide a safe space for girls, a space where they can further their independence and establish autonomy, without having to cater to the desires of their relatives. Schools become places where the children can seek out help, reporting situations that they see happen to others and ones that happen to themselves.

## LEARNING LESSENS EARLY MARRIAGES



Delprato, M. (2015, November 18). *Education can break the bonds of child marriage.* World Education Blog. <https://world-education-blog.org/2015/11/18/education-can-break-the-bonds-of-child-marriage/>



### **3.6 Focus 3: International Aid and Relief Efforts**

It is abundantly clear that child marriage is an issue that affects the global community of girls. Not only are the children of each country affected, but the broader goal of promoting gender equality is also hindered. This is why many international initiatives have been implemented to provide aid and relief to the countries where this issue is rampant. These incentives are important because they bestow support, resources, and advocacy to help girls across the world.

Organizations like Girls Not Brides<sup>12</sup> and Human Rights Watch<sup>13</sup> conduct research and studies in regard to child marriage worldwide, sharing their findings to raise awareness and seek global support against child marriage. These operations work alongside others to collect data too, which contributes to the analysis that can reveal more in-depth perceptions of this issue. Many of these international organizations partner with local initiatives to provide direct support to these girls. This can happen in various ways, like increasing access to education and contributing economically. By tackling these underlying issues, they can lower the rate of child marriage by giving girls more opportunities to form a future of their own.

Furthermore, several countries and organizations offer training opportunities, that educate teachers, healthcare providers, service workers, and more, on how to recognize signs of child marriage and how to act in this scenario. By engaging the communities, change can be applied from the start. Everyone can be educated on the dangers and consequences of this practice, incentivizing people to change. With these implementations, even if communities in general are not willing to adapt, there will be people that these girls can rely on for help. This training not only helps recognize child marriage, but is often accompanied by the knowledge of which resources they can access, and the different paths the girls may take from this point.

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<sup>12</sup> Girls Not Brides is a global partnership that aims to end child marriage, enhancing girls' opportunities and potential. (<https://www.girlsnotbrides.org/>)

<sup>13</sup> Human Rights Watch is an organization that works towards the promotion and protection of human rights worldwide. (<https://www.hrw.org/>)





By providing the necessary support, it is possible to both recognize the current situations and work towards reaching brighter futures for girls across the world. As international organizations contribute to data collection, raising awareness, providing resources, and advocating for the rights of girls, communities become spaces where they can truly be safe. Due to the intervention of these entities, these girls are allowed opportunities that used to be out of their reach, gaining the freedom to choose their own future. Through complex and sustained global efforts, it is possible to change the current happenings of communities globally, creating a better world for girls of all places.

### **3.7 Guiding Questions**

- What is the minimum age for marriage in your country?
  - Is this age limit enforced?
  
- What organizations or initiatives has your country joined that fight against child marriage?
  
- What practices has your country implemented in the fight against child marriage?
  
- What are the rates and conditions of access to education in your country?
  - What percentage of girls have access to education?
  
- What percentage of girls are part of child marriages in your country?
  
- What circumstances in your country may be contributing to the continued existence of this problem?

### **3.8 Recommendations**

The chair strongly recommends that delegates investigate thoroughly enough to gain a clear understanding of child marriage in their country. This includes the possibility of it happening, the percentages, the practices put in place to control and eradicate it, and more, as well as information regarding the circumstances that can lead to this phenomenon. Moreover, it is crucial that delegates begin to think of solutions regarding this problem,



regardless of whether this is for their own countries or directed towards international implementations. Delegates should look at the focuses that were developed since these can provide ideas that should be discussed in the debate because of their relevance.

### 3.9 Useful links

1. UN WOMEN. (n.d). *About UN Women.*  
<https://www.unwomen.org/en/about-us/about-un-women>
2. Girls Not Brides. (n.d). *Girls Not Brides.*  
<https://www.girlsnotbrides.org/>
3. UNICEF. (2023). *Child marriage.*  
<https://www.unicef.org/protection/child-marriage#:~:text=Child%20marriage%20refers%20to%20any,in%20childhood%20across%20the%20globe.>
4. UN WOMEN. (n.d). *Women and the Sustainable Development Goals (SDGs).*  
<https://www.unwomen.org/en/news/in-focus/women-and-the-sdgs>

### 3.10 Glossary

- Child marriage: The formal or informal union involving a child under the age of 18 and another person, whether it be a child or adult.
- Gender inequality: The discrimination and equal or biased treatment on the basis of sex and gender, with one being prioritized and valued more than the other.
- Developing countries: Countries that are less developed than others, with low levels of industrialization and low standards of living. These have lower per capita incomes, as well as higher poverty rates, more healthcare challenges, and overall less access to certain resources and services.
- Maternal mortality: The death of a girl or woman caused by pregnancy, childbirth, or the direct period after, from reasons related to the pregnancy or birth.



- Dowry/Dowries: A payment, usually of monetary value, given from the family of the bride to the groom. In ancient times the practice was the opposite way, with the groom's family providing the dowry, though this is much less prevalent nowadays.

### 3. 11 References

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#### IV. **Topic B:** Rising Rates of Maternal Mortality

##### *4.1 Introduction*

Maternal mortality is defined as the death of a woman from obstetric reasons, meaning during pregnancy, childbirth, or within a short period after childbirth. This has offered a critical incentive to advance the medical field of obstetrics over time. While this is an international issue that affects nations worldwide, there are clear differences when industrialized and developing countries are compared. According to the World Health Organization<sup>14</sup>, “A maternal death occurred almost every two minutes in 2020. . . Almost 95% of all maternal deaths occurred in low and lower-middle-income countries in 2020.” Modern healthcare practices may be reducing maternal death rates, but many nations aren't privy to this resource, and other external factors also pose difficulties in further reducing this occurrence. For instance, a lack of access to contraception and healthcare, an absence of sexual education, and the inability to acquire abortions in the case of unsafe pregnancies are only some examples of these occurrences. Essentially, the results of modern medical advancements are undeniable, but it is also crucial to address all aspects of this issue, both the causes and the consequences.

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<sup>14</sup>World Health Organization. Maternal deaths.

<https://www.who.int/data/gho/indicator-metadata-registry/imr-details/4622#:~:text=Definition%3A.and%20site%20of%20the%20pregnancy.>



Obstetrics refers to the branch of medicine that studies the area of pregnancy, deliveries, and the postpartum period. This area of medicine is the most pivotal in the progression of maternal care. The evolution of discoveries in this field is what allows the creation of processes to further this area, and it involves procedures that all women should have access to, ensuring the safest pregnancies and births. Proper prenatal care, pregnancy supervision, assistance in childbirth, and postpartum recovery. Good medical care can be the difference between life and death for both the mother and the child.

Maternal mortality can happen for a variety of reasons, and although not all of them are due to lack of access to adequate medical care, a notable majority of them are. It is necessary to note that several factors, such as socioeconomic circumstances, as well as genetics can also play a part in this development. Genetics, mainly underlying health conditions, usually result in more high-risk pregnancies and deliveries, making the need for access to healthcare a much more pressing issue. Societal and cultural relations to the act of childbirth can also put expecting mothers at risk, when due to pressures and expectations they undergo unnecessary stress and practices that are not by the proper, safe alternatives that have been discovered. This is especially prevalent in highly religious communities, where excessive medical intervention is seen as unnecessary and excessive. Undoubtedly, economics also plays a monumental role in the prevention of maternal mortality. Many countries with proper healthcare still lack availability, with this costing extreme amounts of money that many are not able to procure. Under-developed countries also suffer because of this on a larger scale, lacking the money to even implement these methods.

#### ***4.2 Historical Background***

As time progresses, so do the tools to ensure quality living conditions, with maternal care being a prime example of this. In the past, pregnancy and childbirth were much more dangerous than they are today. Limited medical knowledge and inadequate care, alongside excessive use of unneeded surgical procedures, led to high-risk pregnancies and labor. Aside from this, the hygienic aspect was still thoroughly lacking, and the lack of antiseptic practices also contributed to the rates of mortality. Bacteria was rampant, and infections were extremely common. As time passed, this field continued to evolve. One notable discovery was the introduction of obstetric forceps, which eased deliveries. By the



mid-20th century, obstetrics had better foundations, and the use of antibiotics and higher hospital deliveries helped reduce the dangers.

The approach towards maternity and birth began to evolve not only with medical developments but social ones as well. In earlier times, the delivery of newborns was seen as a natural process, one that women underwent only with the aid of other women and later on midwives. Births occurred in homes, and the hygiene standards were just as dangerous as the lack of professionals. Eventually, obstetrics became a more advanced field of study, with more physicians taking part in this area of study, and births began happening in hospitals under the care of more thoroughly trained individuals. Naturally, with new processes, previously nonexistent issues presented themselves. Communities, particularly those with heavy religious and cultural connections to pregnancy and childbirth believed that the new reliance on medical technologies, a phenomenon that increases as time passes, has an adverse social effect on pregnancy, giving it a more scientific view and taking away from its natural aspect.

From a general point of view, maternal death rates would seem to have decreased with the surge of hospital births. These are misleading facts, since following this surge, the rates for this affliction increased, and were only lowered following the improvement of obstetric care. Rates were lowest with home births performed by midwives, and those handled by physicians were much higher. Joseph DeLee, who was a very prominent physician during the early twentieth century, is more modernly known as the father of obstetrics. Likewise, he is also credited with the unnecessary medicalization of childbirth. It was through his ideas and discoveries that hospital births decreased in mortality rates. Regardless, these same ideas also caused many other issues, such as increased iatrogenic mortality and unnecessary deaths due to unrequired procedures and interventions. His ideals that birth should be a process controlled by the physicians to ease complications is what paved the way for further medical advancements in this field.

Nevertheless, many general advancements have been achieved, but there are still discrepancies in healthcare in different areas of the world. As Our World in Data<sup>15</sup> states, “. . . the much higher maternal mortality rates found in lower-income countries. Per birth, a woman in Nigeria is more than 200 times more likely to die in pregnancy or childbirth than

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<sup>15</sup> Our World in Data. <https://ourworldindata.org/maternal-mortality>



a woman in Sweden.”. Wealthier nations unknowingly further the healthcare divide due to their advantages with the development of healthcare, while lower-income countries continue to face unequal access to this vital resource. The National Institute of Health<sup>16</sup> has mentioned how “high risk mothers do not have access to institutional delivery; even if they have access, quality of care is poor.”. Regardless of the evolution of the obstetric field and the advancements in medical developments, it is crucial to recognize the issues that remain in modern-day societies.

#### ***4.3 Current Situation***

Advancements in medical healthcare and the public health system have allowed for an increase in safety aspects regarding maternal mortality rates. The CDC<sup>17</sup> mentions how antibiotics, oxytocin, safe blood transfusions, and better management of hypertensive care are only some of the many ways that medicine has helped reduce the rates of maternal mortality. These discoveries, alongside increases in the developments of the obstetrics field, access to trained professionals, as well as improved prenatal and postpartum care, have contributed to decreasing rates of maternal mortality, and better approaches to maternal care.

However, this topic continues to arise in modern society. In places with lesser resources and schooling rates, many women are uninformed of the modern advances in prenatal and postpartum care. Usually, women from these communities turn to guidance from their elders or peers, yet these suggestions are often outdated and can be detrimental to those who adhere to them. According to the World Health Organization<sup>18</sup>, “severe bleeding (usually after childbirth), infections (usually after childbirth), and high blood pressure during pregnancy (pre-eclampsia and eclampsia) are the key problems that account for about 75% of all maternal deaths.” Not only is access to healthcare essential throughout pregnancy, but it is also essential for delivery and postpartum care. During and after pregnancy, women experience high levels of stress, and it is impossible to perfectly plan

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<sup>16</sup> National Institute of Health.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6308741/#:~:text=The%20main%20reason%20for%20this,quality%20of%20care%20is%20poor.>

<sup>17</sup> CDC. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm4838a2.htm>

<sup>18</sup> World Health Organization.

<https://www.who.int/news-room/fact-sheets/detail/maternal-mortality#:~:text=A%20woman's%20lifetime%20risk%20of,49%20in%20low%2Dincome%20countries.>



how this process will go, which is why medical professionals are trained to handle all situations, making them a valuable necessity.

Despite significant breakthroughs in maternal care, several difficulties persist. The goal of reducing maternal mortality is greatly hampered by the lower levels of education and financial status of people and nations alike. Many people are uninformed about more current care options that are accessible outside their territories, which facilitates the propagation of outdated practices due to a lack of sufficient knowledge. Even though some people are aware of this, they are unable to find access to these practices or use them in their areas due to a lack of resources. It is now essential to raise awareness of this issue on a global scale, to improve healthcare systems, and to advocate for measures that would allow people in every country to receive the necessary medical aid.

#### ***4.4 Focus 1: Access to Contraceptives***

##### ***4.4.1: Overview***

The act of contraception, otherwise known as birth control, is the prevention of pregnancy through particular devices, medications, procedures, or behaviors. These include sterilization, pills, male condoms, IUDs, LARC methods (long-acting reversible contraceptive), family planning, withdrawal, and many more. Access to these can be crucial for the safety of women, and for the optimization of their health. While pregnancy prevention is the main and most common use of contraceptives, it is not the sole function. Barrier contraceptives prevent the spread of STDs, and hormonal based contraceptives have been known to aid women with menstrual periods, such as imbalances and pain. These methods, by preventing pregnancy, also have indirect benefits for women. As the World Health Organization<sup>19</sup> states, “By reducing rates of unintended pregnancies, contraception also reduces the need for unsafe abortion and reduces HIV transmissions from mothers to newborns.”

Contraceptives have provided valuable assistance to countless women in need, but they carry risks as well. One such case is for individuals who smoke. Several birth control pill options carry the hormone estrogen, which, in combination with smoking, increases the risk

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<sup>19</sup> World Health Organization. <https://www.who.int/news-room/fact-sheets/detail/abortion>





of strokes and heart attacks. There are alternatives, like progestin-only pills, but those carry risks as well. Planned parenthood outlines these in the following way:

- Avoid the use of combination pills if you've had: blood clots, vein inflammation, or an inherited blood-clotting disorder; breast cancer; serious heart problems; migraine headaches with aura; severe diabetes or liver disease; uncontrolled high blood pressure.
- Avoid using progestin-only pills if you've had: breast cancer or certain forms of lupus
- Avoid using Slynd if you've had: kidney disease; adrenal insufficiency; liver disease; cervical, breast, ovarian, uterine, or endometrial cancer.

From a general viewpoint possible, it has been established that the safest and most adequate choice is to consult a medical professional before beginning to use most types of contraceptives, especially for women, since men are much more likely to use condoms, which require medical advice prior to use.

A lack of use of contraceptives is not always due to absent desires, but a lack of accessibility, which can happen due to a variety of reasons. The UNFPA<sup>20</sup> states, "Globally, an estimated 257 million women who want to avoid pregnancy are not using safe, modern methods of contraception, and of them, 172 million women are using no method at all (UN DESA, 2021)." Evidently, simply lacking the desire for a pregnancy does not mean a woman will use contraception. Some are not actively attempting to get pregnant, but are not trying to prevent it either. Several simply do not see any other alternatives, believing they have reached a point where motherhood is an obligation. Others suffer from a lack of access to contraceptives, whether it be due to these not being provided in their area, or due to societal pressures preventing them from obtaining these.

When addressing the dangers of contraceptives, it is crucial to observe the social aspect of these risks. As time progresses, the expectation of women to be the ones to ensure pregnancy prevention during intercourse becomes more common. Regardless of how accessible contraceptives are, pregnancies or the lack of them are always attributed to the

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<sup>20</sup> United Nations Population Fund.

[https://wcaro.unfpa.org/en/news/contraception-key-%E2%80%94-not-enough#:~:text=Globally%2C%20an%20estimated%20257%20million,\(UN%20DESA%2C%202021\).](https://wcaro.unfpa.org/en/news/contraception-key-%E2%80%94-not-enough#:~:text=Globally%2C%20an%20estimated%20257%20million,(UN%20DESA%2C%202021).)



woman in the relationship. Consequently, when a woman develops an unplanned pregnancy, she is blamed for not being careful enough, disregarding the fact that she was not solely responsible for conception. Likewise, when a woman fails to fall pregnant, the first assumption is that she has fertility issues, when men can be at fault as well. These ideals progress to family planning as well, where women are expected to be natural nurturers, and are judged more harshly than their male counterparts. In the eyes of society, women are obligated to care for their children in a disproportionate manner in comparison to fathers. A father abandoning his child is perceived as a much less significant action when compared to a mother abandoning her child.

#### ***4.4.2: Reproductive Health***

Contraceptives, aside from aiding in the prevention of pregnancy, also provide several benefits to reproductive health. There are numerous ways in which these health benefits relate to pregnancy, but there are others that differ as well. Diseases like cancer are one example of this. The NCBI<sup>21</sup>, in recognition of both the benefits and dangers of contraceptives, has explored this in depth. It concluded several facts. For instance, oral contraceptives also reduce the risk of ovarian cancer, and protect against acute pelvic inflammatory disease and ectopic pregnancies, but heighten the risk of cardiovascular disease. IUDs are exceedingly worthwhile choices in terms of efficiency, but have an increased possibility of infection in certain groups. Barrier methods, some of the most known, also prevent the spread of STDs. Overall, the ideal choice of contraceptive would depend on the individual, their lifestyle, and their personal needs.

Contraceptives, particularly oral contraceptives (birth control pills), can also help with pre-existing health issues. These pills contain hormones, primarily estrogens and progestins, explaining their efficiency in hormone-related problems. The National Coalition for Sexual Health<sup>22</sup> has clearly described five of these cases. Three of these that are directly connected to each other are the control of irregular periods, stopping a period, and reducing

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<sup>21</sup> NCBI.

<https://www.ncbi.nlm.nih.gov/books/NBK235069/#:~:text=Oral%20contraceptives%2C%20for%20example%2C%20not.inflammatory%20disease%20and%20ectopic%20pregnancies.>

<sup>22</sup> The National Coalition for Sexual Health.

<https://nationalcoalitionforsexualhealth.org/media-center/ncsh-in-the-news/5-reasons-why-you-might-want-to-use-birth-control-even-if-youve-never-had-sex>



period pains. One of the most common non-contraceptive reasons for using contraceptives is irregular periods. The manipulation of hormones can aid in the normalization of this process. Likewise, women can have a number of motives for wanting to prevent their period, thus using birth control. Additionally, it reports that over 50% of women suffer from Dysmenorrhea, or severely painful periods, which can be eased by the hormonal balances from the pills. For instance, migraines occur with a decrease in estrogen, which can be balanced with the introduction of these hormones. Naturally, it is advised to consult medical professionals prior to this. PCOS, PMD, and PMDD can also be treated with birth control pills. Not cured, but symptoms can be eased and women can achieve more regular periods.

Pregnancy itself is a process that carries numerous risks. Contraceptives are also used by women who are known carriers of certain diseases, or known to suffer from several risk factors that would render fetuses nonviable or put their lives at risk. MSD Manuals<sup>23</sup> mention how “Pregnancy may not be advisable for women with certain high-risk heart disease”, due to the increased risk of maternal and fetal complications that this brings. Cancer is also an illness that does not allow for ideal pregnancies, since chemotherapy treatments can have adverse effects on the fetus, causing defects or other types of harm. Following cancer treatments, patients are encouraged to wait up to two years before even attempting for pregnancies. Following traumatic birth experiences, women may also use these methods to prevent pregnancies for both their mental and physical health. Women are advised to wait a certain period of time after birth before attempting to conceive again, but many are still unwilling to have more children afterwards. Economic reasons are also at play, for many families would be unable to sustain more children, lacking the resources to do so.

#### ***4.4.3: Sociocultural & Religious Stigma***

When attempting to obtain contraceptives, women can face extreme amounts of stigma, having to confront disapproval for their actions and being labeled as “promiscuous”, “immodest”, amongst other unfavorable titles. This phenomenon affects women of all ages,

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<sup>23</sup> MSD Manuals.

<https://www.msdmanuals.com/professional/gynecology-and-obstetrics/pregnancy-complicated-by-disease/heart-disease-in-pregnancy#:~:text=Pregnancy%20may%20not%20be%20advisable.stenosis%2C%20bicuspid%20aortic%20valve%20with>



but is seen more heavily towards younger women, particularly unmarried young women. Reasons for this may vary, being attributed to the gender norms, the widespread views of premarital sex, and existing precedents. Additionally, while many religions do not outright prohibit the use of these methods, followers of various ones have been known to interpret them as such, believing contraception to be unnatural. In many cases, it is not religion, rather the will of the people leading to the denouncement of birth control. Differences in values and communication, in addition to the traditional roles women are expected to fulfill lead them to feel inadequate, or as though they are not doing their duty, if they use contraceptives. Even when these are intended for medical uses aside from pregnancy prevention, women can feel wary of using them, and many end up denying them because of the societal stigma that has been attached to these methods.

Society is structured around the traditional family unit, and these traditional values place women as caretakers who only participate in sexual encounters with their husbands, and do so to have families of their own. Some women experience continuous pregnancies without a particular desire to do so, all in the name of duty. Others would rather experience an unwanted pregnancy than face the stigma from contraception. While men are given greater liberties, women who are open about their desires while not adhering to these standards are heavily judged, and can face critiques towards their upbringing, their values, their morals, and more.

Young women, particularly teenagers, are much more prone to being shamed for their need of contraception, attitudes that are perpetuated by parents, teachers, and other figures of influence. The International Federation of Gynecology and Obstetrics<sup>24</sup> mentions how UNFPA states, “adolescents have higher rates of unintended pregnancies than any other age group, and 57% of them have an unmet need for contraception.” Individual family and community values play a relevant role, with many of these environments promoting the ideas that this is shameful. Every person is entitled to their own opinion, but it is crucial to acknowledge how these opinions have lasting impacts.

If a teenager develops an unexpected pregnancy, their relationship with their parents will determine if they will inform them, or keep it secret and try to find an alternative way to get rid of the baby. Because of this phenomenon, it is clear to see how and why many teenagers

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<sup>24</sup>International Federation of Gynecology and Obstetrics.



have resorted to hiding their pregnancies and disposing of the babies once they are born, or attempting unsafe abortions. Additionally, a fear of sharing these secrets with figures of authority is liable to contribute to the persistence of unwanted advances, with the fear of facing the blame and the shame being motivators for them to keep quiet, a strategy often used to manipulate them.

#### ***4.4.4: Media and Education***

A major factor in the lack of contraceptive use and access is the insufficient sexual education. Dr. Aparna Sridhar<sup>25</sup> says, “What perpetuates the stigma and bias is a web of inter-related factors from the individual to the global level. . . Poor access to comprehensive sexual education and lack of respectful provisions of modern contraception are usually the main factors.” In current times, most areas of the world remain with inadequate levels of sexual education, with the one provided usually being marred by different circumstances. For instance, gender norms, personal bias, confirmation bias, amongst others. Meanwhile, education about contraception is a crucial tool for nations aiming to control population growth. Family planning programs and education initiatives promote the knowledge of modern contraception and how sufficient quality of life correlates with the quantity of children, taking into account the parents’ resources. These aim to ease the burden of both nations and individuals due to the increased financial burden of higher population rates.

Countless women are unaware of contraceptives, or misinformed about their uses and dangers as well, perpetuating a fear towards them, increasing the rates of unintended pregnancies. The use of birth control is a process that is highly influenced by personal experiences and external views, especially those shared in social media. Currently, the public views social media influencers as more relatable celebrities, and can often follow their advice in areas where they lack expertise, with contraceptives being one example of this. After thorough analysis, EurekAlert<sup>26</sup> reported how “viewers would be more likely to

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<sup>25</sup>International Federation of Gynecology and Obstetrics.

<https://www.figo.org/news/breakthebias-fulfilling-adolescents-right-access-abortion-and-contraception>

<sup>26</sup>EurekAlert. <https://www.eurekalert.org/news-releases/976282>





receive information about stopping hormonal contraception, rather as how to use contraception or have safe sex.” With regard to the use of birth control, it is crucial to recognize how the effects and success of these can vary, and the ideal process would be to consult a medical professional instead of interpreting an influencer’s experience as a definitive truth.

The portrayal of contraceptives is also largely dependent on the individual sharing the information. Medical professionals are more likely to expose scientifically verified data, but this knowledge can be misinterpreted. One such case is the excessive use of negative facts while limiting the exposure of benefits to describe them in a more negative light. Individuals may also choose to spread misinformation in order to present their bias as more accurate, regardless of the validity of their statements. A very common myth used to scare women is the idea that contraception will cause infertility, something that has been proven false. The only contraceptive methods that are known to be related to infertility are the contraceptive injections, which delay fertility, and permanent methods like sterilization.

## **4.5 Focus 2: Abortion**

### **4.5.1: Overview**

An abortion refers to a medical procedure with the purpose of terminating a pregnancy. There are numerous reasons that lead people to resort to abortions, with several of these being more acceptable than others in the eyes of the public. The date of termination also influences this opinion, since the gestational age is an important aspect to consider. Gestational age refers to how far along a pregnancy is, usually measured in weeks. Areas where abortions are legal follow parameters like fetal heartbeat and gestational age. Due to these limitations, it has become crucial to be able to determine the progression of a pregnancy. Regardless, many places have complete or near-complete abortion bans, making circumstances meaningless, since exceptions are extremely uncommon. Even under the established exceptions, the court of law may determine that an abortion is still nonviable, often forcing expecting mothers to suffer extreme physical and emotional trauma.

Aside from unexpected pregnancies, there are countless reasons why women may want or need abortions. Many experience non-viable pregnancies, where the life of either the baby,



the mother, or both, is put at risk. In other cases, it is a result of unwanted sexual encounters, leaving the expecting mother incapable of having and caring for the child. Children are complex responsibilities, and require constant attention and resources to ensure their care. It is important to recognize the contribution of external factors to this issue. The prevention of these procedures puts children in households where their parents are unable to provide for them, whether it be through resources or through emotional necessities. Women may seek out abortions out of a genuine lack of desire for children, while others are not unwilling but unable. Economic circumstances, complicated family dynamics, no adequate of support systems, and lack of access to necessary healthcare are only some examples of why women may want children but be unwilling to have them.

Limiting access to abortions does not eliminate their existence or their necessity. Women who can not access this service resort to unsafe abortions, which have high danger and mortality rates. The causes for women to resort to these methods are without end. Fear of people knowing, lack of support from the government, insufficient medical care, and many more. It is crucial to acknowledge both the problems and possible solutions when addressing this problem. Unsafe abortions are one of the leading causes of maternal mortality, and one of the easiest to provide aid for. The fostering of positive support networks, increased access to healthcare facilities and medical services, the establishment of satisfactory sexual education levels, and attempts to counter the stigmas surrounding this topic are only some ways to confront this issue.

#### **4.5.2: Dangerous Alternatives**

Desperation makes people resort to alternatives that can have irreversible impacts on their health. Economic situations can vary, and many people lack the stability required to provide for a child. The shame and fear of how a pregnancy will be perceived are powerful motivators for women seeking abortions. According to Doctors Without Borders, “unsafe abortion is one of the five leading causes of maternal mortality, and the only one that is preventable”. These can be alternatives found online, or archaic practices from past times. Regardless of their source, they are extremely unsafe. Suspicious pills from unknown sources, inserting objects in the uterus, physical trauma to induce miscarriages, unsafe medical procedures, and more.



Preventing women’s access to abortion does not eradicate their need for this procedure. Due to this circumstance, the legal measures taken to outlaw abortion do not reduce their numbers, simply increase their danger and mortality. The World Health Organization states, “Estimates from 2012 indicate that in developing countries alone, 7 million women per year were treated in hospital facilities for complications of unsafe abortions. Physical health risks associated with unsafe abortions include:

- Incomplete abortion (failure to remove or expel all pregnancy tissue from the uterus);
- Hemorrhage (heavy bleeding);
- Infection;
- Uterine perforation (caused when the uterus is pierced by a sharp object); and
- Damage to the genital tract and internal organs as a consequence of inserting dangerous objects into the vagina or anus.”

A crucial case of study is the one presented in the United States. Following the abortion ban in several states, social media users rushed to their platforms to share alternatives. These substitutes include herbal remedies, essential oils, pills and other medicines, amongst others. While the surge of these ideals is gaining traction in recent times, these are practices that many other nations have employed for years. Gynecologists, toxicologists, obstetricians, and other professionals have expressed the risk of these remedies. While some of these may simply prove to be inefficient, many pose deadly dangers to the pregnant person, being more likely to end in their death than in an abortion. In an article for AP News, toxicologist Dr. Ryan Marino talks about how there are no herbal remedies that are safe and effective at inducing abortions. He mentions how pennyroyal, a recommended herb, contains pulegone, a toxin that is dangerous to the liver and can be deadly. Others like mugwort and wormwood contain thujone, which can cause difficult to treat refractory seizures. He talks of how even common herbs like parsley can be toxic if ingested in certain ways, like some of the ones mentioned in abortion alternatives.

#### **4.5.3: Lack of Government Support**

Access to safe and legal abortions is a necessity for the reduction of maternal mortality. Dr Teresa Bombas,<sup>27</sup>Chair of the FIGO Committee on Safe Abortion states, “in countries where abortion is illegal or inaccessible, the rates of unsafe abortions and resulting maternal mortality and morbidity are high. This is particularly relevant to vulnerable groups, including adolescents.” Certain countries have permitted abortion, but only under strict circumstances. Even when women work within the confines of the law, they face countless challenges. Inaccessible costs, societal stigma, and legal constraints are only some examples of this.

There have been numerous cases of women facing grave dangers in pregnancy, or carrying stillborn fetuses, yet abortions are still not permitted to them. Kate Cox, a Texan citizen, is an example of this. She was denied the right to an abortion by the law after the fetus proved to have a fatal heart condition, followed by having multiple visits to the emergency room which showed risks of a uterine rupture and posed danger to her ability to have more children. The law has been modified to be able to decide which is more valuable between the life of a mother and the child she carries, regardless of the individual’s will, showcasing an astonishing lack of support for expecting mothers from the government.

Aside from the established legal frameworks that have proved to be detrimental on occasion, the lack of government support to expecting mothers is also evident in the blatant displays of discrimination, unstable balance between personal and work life, and the lack of access to healthcare. Certain medical necessities are simply inaccessible to many pregnant women, whether this be due to cost or location. Several companies have faced reproach for their dislike of hiring women to preemptively evade having to provide maternity leave, and oftentimes this allotted period of time is insufficient. Different people may also be subjected to additional difficulties on the basis of race, religion, skin color, etc. An example of this is the misconception that women of color are less susceptible to pain during childbirth, leading to their pain being overlooked to a higher degree than others.

#### **4.6 Focus 3: Maternal Care in Conflict Zones**

##### ***4.6.1: Overview***

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<sup>27</sup>International Federation of Gynecology and Obstetrics.

<https://www.figo.org/news/breakthebias-fulfilling-adolescents-right-access-abortion-and-contraception>



All women have the right to have their health needs attended to, especially in the midst of conflict zones. Pregnancy and childbirth are extremely delicate and taxing processes, which require intricate care from professionals to ensure the health of both the mother and baby. Even with this assistance, numerous risks remain, which are exacerbated in areas of conflict. Limited access to healthcare, lack of medications, unhygienic conditions, and the absence of ideal support systems are some of the reasons why the danger of this process is heightened. Generally, this care is obtained through the aid of various organizations, or through the extensive process of international cooperation. A notable case that showcases this is the transportation of aerial deliveries, which can carry necessary supplies to areas in need.

Mental health can be just as important to ensure the wellbeing of a pregnant woman. High-stress environments are a constant risk for the wellbeing of children. Frontiers in Psychology references how “There is growing evidence that even milder forms of maternal stress or anxiety during pregnancy affect the fetus causing possible long-term consequences for infant and child development.” It is evident that mental unwellness poses risks to both a fetus and a living child, creating threats to their health in the womb and affecting their upbringing. Babies and infants are entirely dependent on their parents for care and survival, and the quality of these is severely hampered when the caretaker faces mental difficulties. Conflict zones are areas where acquiring even the bare necessities is a hardship, and the stress of a baby under these circumstances can be extremely taxing. This makes it imperative to consider the mental hardships as well as the physical difficulties these women may encounter.

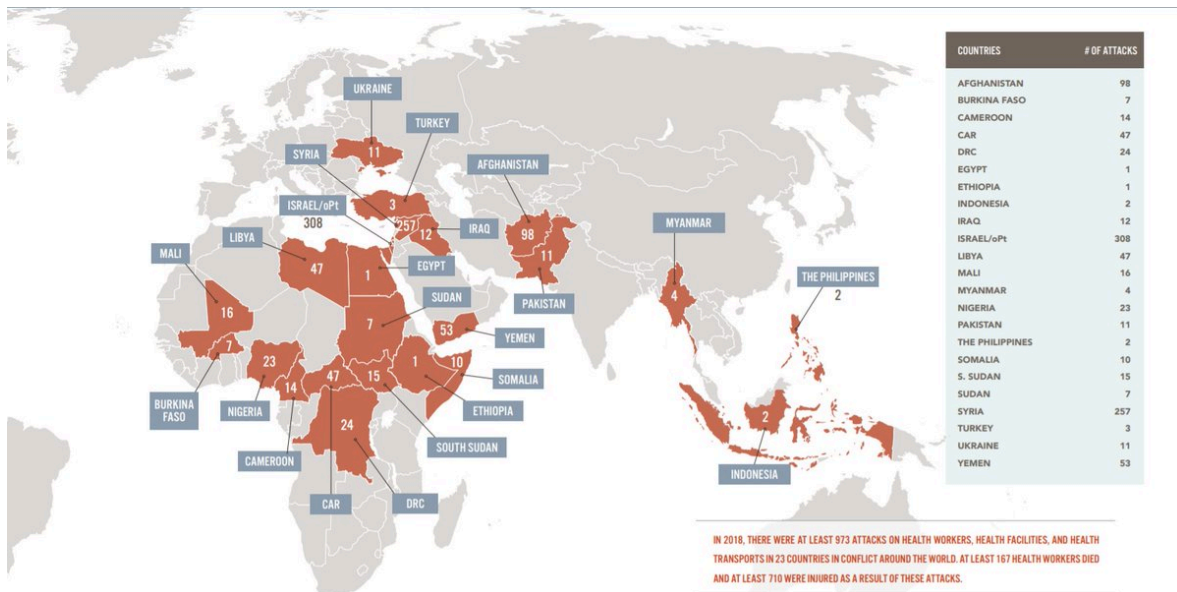
A crucial aspect to take into consideration is international cooperation. In active conflict zones, survivors may come to rely solely on the aid of others for survival, making the intervention of other parties essential. Humanitarian organizations, international agencies, countries wanting to provide aid, and other cases are those allowing for these people to gain the help they need. This can happen through the transmission of necessary assets, providing medical personnel, aiding in evacuation, etc. The lack of proper living conditions in these zones means that these interventions often mark the difference between life and death for many individuals. This is much more applicable for pregnant women, who require additional care aside from the standard one, which is already precarious under these circumstances.





#### 4.6.2: Access to HealthCare

International Humanitarian Law, in conjunction with the Geneva Convention, establishes that medical personnel must be respected and protected, and an act against them is considered a war crime. Regardless of these claims, healthcare workers usually face violence in conflict zones, being specifically targeted because of their duty, while also lacking appropriate security protocols. It is incredibly hard to gain access to the most basic medical needs in their places, highlighting the harm that people face, since this is usually due to a lack of medical personnel. Pregnant women face even more difficulties in obtaining aid from trained professionals, which results in higher mortality rates for both the mother and child.



Schlesinger, D. (2019). Deadly Attacks on Healthcare Zone Workers and Patients Rising in Conflict Zones.

<https://healthpolicy-watch.news/deadly-attacks-on-health-care-workers-and-patients-rising-in-conflict-zones/>

Evidently, the protections for healthcare workers are often disregarded. The use of air strikes, bombings, even premeditated killing. This can be seen by attacks towards hospitals, other medical facilities, emergency personnel, and also pre-existing medical teams like



immunization specialists. The international community has attempted to provide solutions to combat this issue, but progress is slow-going. For instance, the United Nations adopted Resolution 2286, condemning the attacks on medical personnel working on conflict zones, demanding armed groups to comply with international humanitarian laws (Schlesinger, D.).

An important reason detailing why these acts continue to occur is how often they go unpunished. The complexity of situations regarding conflict zones often allow for legal oversights, with inadequate frameworks in place to ensure consequences are bestowed. Furthermore, international interventions are oftentimes extremely minimal, with many countries simply condemning these actions instead of attempting to provide strategies or seeking opportunities to aid against this problematic. When countries do provide genuine aid, these ventures are also targeted, making the act of providing necessary assistance and resources a remarkably perilous endeavor. This phenomenon decreases the value of the established laws to protect healthcare workers, giving perpetrators a sense of security in their actions, increasing their sense of justification.

#### **4.7 Guiding Questions**

- What is the rate of maternal mortality in your country?
- Does your country suffer from a lack of access to healthcare?
- What initiatives are in place to lower the rates of maternal mortality and increase access to healthcare?
- Are contraceptives easily accessible to your citizens?
- What legal constraints does your country present against abortions?
  - How prevalent are unsafe abortions?
- Does your country provide adequate levels of sexual education to its citizens?
- What forms of support does your government offer to expecting mothers?



- What forms of support are provided for women experiencing non-viable pregnancies?

#### 4.8 Recommendations

The dais recommends that all delegates read the guide with care and perform a thorough search of the topic and its relation to their given country. Everyone should understand the guiding questions, and the connection between the focuses and their countries. The information given in the guide should help you gain an initial understanding, but deepening your knowledge will help you be more prepared for what you may encounter, and will enable you to create solutions with more ease. Make sure to investigate your current political links with other countries to properly portray their relationships, and avoid diplomatic errors. By doing so, you will have an initial guide on who your allies may be, and who hold views that clash with your own.

Take into account your motives and your actions. Be aware of all ideals that your country holds that perhaps have not been implemented yet. Many countries wish to implement certain practices but are unable to do so for multiple reasons. You must think outside the box and consider all the different factors that can impact your position and arguments. If at any moment you have doubts during the committee, feel free to approach the dais and ask your questions.

#### 4.9 Useful links

1. World Health Organization. (n.d). *Maternal death*.  
<https://www.who.int/data/gho/indicator-metadata-registry/imr-details/4622#:~:text=Definition%3A,and%20site%20of%20the%20pregnancy>
2. Unicef. (2023). *Maternal mortality*.  
<https://data.unicef.org/topic/maternal-health/maternal-mortality/>
3. CDC. (2023). *Contraception*.  
<https://www.cdc.gov/reproductivehealth/contraception/index.htm>
4. NHS. (2020). *Abortion*.



<https://www.nhs.uk/conditions/abortion/>

5. NIH. (2015). *Ensuring the security of health care in conflict settings: an urgent global health concern.*

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4527929/>

#### 4.10 Glossary

- Maternal mortality: The death of a woman from obstetric reasons, meaning during pregnancy, childbirth, or within a short period after childbirth.
- Obstetrics: The branch of medicine that studies the area of pregnancy, deliveries, and the postpartum period.
- Contraception: The prevention of pregnancy through particular devices, medications, procedures, or behaviors.
- Stigma: A set of negative beliefs associated with a person, quality, or circumstance.
- Abortion: A medical procedure with the purpose of terminating a pregnancy.
- Gestational Age: The term used to describe how far along a pregnancy is, usually measured in weeks.
- Non-viable pregnancy: Pregnancies in which the fetus has no chance of being born alive, meaning the pregnancy can't produce a live born baby.
- Unsafe abortion: An abortion performed by someone without the adequate medical capabilities, or in an environment lacking the proper standards, subjecting women to great dangers.

#### 4. 11 References



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2. Friel, L. (2023). *Heart Disease in Pregnancy.* MSD Manuals. <https://www.msmanuals.com/professional/gynecology-and-obstetrics/pregnancy-complicated-by-disease/heart-disease-in-pregnancy#:~:text=Pregnancy%20may%20not%20be%20advisable,stenosis%2C%20bicuspid%20aortic%20valve%20with>
3. Langlois, A. (2022). *#BreakTheBias: Fulfilling adolescent's rights to access abortion and contraception.* International Federation of Gynecology and Obstetrics. <https://www.figo.org/news/breakthebias-fulfilling-adolescents-right-access-abortion-and-contraception>
4. Planned Parenthood. (n.d). *How safe is the birth control pill?* <https://www.plannedparenthood.org/learn/birth-control/birth-control-pill/how-safe-is-the-birth-control-pill>
5. National Coalition for Sexual Health. (2017). *5 Reasons Why You Might Want To Use Birth Control Even If You've Never Had Sex.* <https://nationalcoalitionforsexualhealth.org/media-center/ncsh-in-the-news/5-reasons-why-you-might-want-to-use-birth-control-even-if-youve-never-had-sex>
6. NCBI. (n.d.). *Contraceptive Benefits and Risks - Contraception and Reproduction.* <https://www.ncbi.nlm.nih.gov/books/NBK235069/#:~:text=Oral%20contraceptives%2C%20for%20example%2C%20not,inflammatory%20disease%20and%20ectopic%20pregnancies>.
7. Schlesinger, D. (2019). *Deadly Attacks on Healthcare Zone Workers and Patients Rising in Conflict Zones.* Health Policy Watch.





<https://healthpolicy-watch.news/deadly-attacks-on-health-care-workers-and-patients-rising-in-conflict-zones/>

8. Swenson, A. (2022). *Experts warn against using herbs as abortion alternatives.* AP News.  
<https://apnews.com/article/fact-check-abortion-herbal-remedies-safety-970581983231>
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10. World Health Organization. (2021.) *Abortion.*  
<https://www.who.int/news-room/fact-sheets/detail/abortion>

## V. Expectations

The dais expects all delegates to be well-informed about the topic in general, not simply the specifics about their given countries. Delegates should be able to discuss all the reasons that perpetuate the existence of child marriage and maternal mortality respectfully, showing a clear understanding of the problem and presenting appropriate solutions. The dais expects everyone to be capable of connecting different situations to these topics, and recognizing how these issues are perpetuated in endless cycles. It is crucial to understand this issue from the roots, not simply the consequence. All the information should come from valid sources, and it is encouraged to use evidenced facts to support your arguments. Delegates are free to use web sources, articles, videos, news, and more to support their ideas during the debate.

## VI. Annexes and Guidelines

### 6.1 Opening Speech

#### 6.1.1 Clarifications



In the opening speeches, the goal is for each delegate to convey their country's position in regard to the topic. These will have a duration of 1 minute and 30 seconds. Should a delegate have leftover time, they will have the choice to either pass it to the next delegate or to the chair. During the speeches, delegates should use formal language, and avoid talking in the first person. Instead of using phrases such as "my delegation" or "my country", use the words "the country" or "the delegation". If a delegate wishes to use a quote, they must first ask the chair for permission to quote, and must only proceed after obtaining approval.

Delegates should be mindful of what others say during their speeches since at this time they can understand some other delegations' positions, and see who they may work with in committee time. Keep in mind that this will essentially be your introduction to the committee, so try to express yourself as efficiently as possible. Take this into account when compiling your information.

### **6.1.2 Opening Speech Model**

*"With the passage of the law against child marriage, children, particularly young girls, now have hope for a future of their one choosing"- Leila de Lima*

Good morning, honorable members of the dais, fellow delegates, and others present in this committee. The delegation of Colombia is honored to be present on this committee to discuss such a relevant topic as child marriage.

In 2022, the delegation ranked number twenty in the world in the number of child brides under the age of 15. This information is concerning taking into consideration that 340.083 young girls and teenagers are married. Other delegations also raise concerns in this ambit, such as Niger, since 76% of girls are married before the age of eighteen and 28% before they are 15.

This problem mixes with others, taking into account its presence in places with fragile economies affecting more of the population. The concerns aggravate when child brides also relate to the low rates of education in young girls and domestic violence, which are issues that affect gender inequality.



However, it is not all dark. Several initiatives are being implemented to educate and help girls. Also, laws have started to rise in favor of prohibiting underage marriage completely. The delegation of Colombia hopes that this committee can find practical and effective solutions to help women have brighter futures showing that humanity can always thrive in the end.

Thanks for listening.

## 6.2 Position Paper

### 6.2.1 Clarifications

Your position paper should have enough information to showcase an understanding of your country and position on the topic. Your position should be explicitly stated and with the use of valid sources to support your statements. The document must have a minimum of 500 words, and you must always write in the third person. Keep in mind the general aspects of your country (economic, social, political, cultural) and its relations with other countries, to facilitate your development inside the committee. Be sure to include your citations at the end.

### 6.2.2 Position Paper Model

<p style="text-align: center;"><b>POSITION PAPER</b></p> <p>Objective: <b>Plan the course of action of a delegation before the meeting</b> by taking into consideration each country's position on the topics to be discussed at the conference.</p>
<p style="text-align: center;"><b>Topic: Child marriage</b></p>
<p><b>General Sentence:</b> After struggling with high rates of child marriage, especially child brides, in their own country, the delegation of Colombia wants to find assertive solutions because child marriage takes away the future of young women around the globe.</p>



<p><b>Complete name: The Republic of Colombia</b></p> <p><b>Current President: Gustavo Petro</b></p> <p><b>Type of government: Unitary Republic</b></p> <p><b>Capital: Bogota</b></p> <p><b>Language: Spanish</b></p> <p><b>Population: 51.5 Million</b></p> <p><b>Religion: Catholic</b></p>	<p>Child marriage is a global issue that is present in most of the world, especially in developing countries. This issue impacts especially our younger portion of women, considering that one-sixth of the number of child marriages in girls transfer to the boy section. Around 12 million girls a year get married before eighteen in the world.</p> <p>Other delegations, such as Niger and other developing countries in Africa, have significant struggles, showing rates as high as 76% of girls before being 18. However, this is not an isolated issue since, in Colombia, 304.083 teens do the same thing, showing the diversity of this issue. Although these shocking statistics are prevalent, most countries still lack effective or efficient solutions to the concern.</p>
<p><b>Introduction</b> A brief and concise description of a State's International organization's or NGO's position and priorities for a given committee.</p> <p><b>ANSWER:</b> What is the problem? Who does it affect? How does it affect them?</p>	<p>Poverty is a common cause for child brides since the economic burden on the family will be reduced, and, in some countries, men are willing to make a considerable financial commitment to marry young, beautiful women. Other causes include the persistent gender inequality present in our modern society, the honor of having a marriage in cultural settings, and lack of education, especially among young women.</p>
<p>A sentence stating the country's</p>	<p>Colombia considers that child marriage,</p>



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<p>position. <b>(Thesis)</b></p>	<p>especially child brides, is an extremely concerning issue that needs to be addressed.</p>
<p>Elaboration of the position <b>(3 arguments in favor of the position)</b> Options: quotes from the UN charter, agreements/ resolutions your member state has ratified; quotes from statements made by your head of state, head of government, ministers, delegates to the UN, and any other relevant international documents</p>	<p>Child marriage often leads to teen pregnancies, which are terrible for young girls. According to the World Health Organization, teen moms have “higher risks of eclampsia, puerperal endometritis, and systemic infections” and babies “face higher risks of low birth weight, preterm birth, and severe neonatal conditions”. This shows that teen pregnancies are not only a danger to the mother, who can have severe conditions that put at risk her life, but also for the baby, having higher chances of complications. Also, countries with elevated percentages of child brides have higher mortality rates among moms, and those countries also have high rates.</p> <p>Having girls married at such a young age, their education is also compromised. According to UNICEF, “In the top three countries, no more than 5 percent of girls finish secondary school”, showing that these two situations do have a correlation. This source also shows that 87% percent of child brides do not finish secondary education. These statistics are alarming because young girls all around deserve to have a chance to have a bright future, and by being in such an unfortunate situation, those dreams can't be reached.</p>



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	<p>Child brides are more exposed to violence and other forms of mistreatment. In the Journal of Healthcare Promotion, it states that “Studies conducted in India, Bangladesh, and Pakistan showed that child marriage and early marriage are known risk factors for intimate partner violence”. In Nepal, according to the same source, 55% of Women involved in domestic violence were child brides. This only proves the alarming rate of young girls who are suffering because of defenders of child marriage.</p>
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<p>including but not limited to reports from the UN Secretary-General on the topic.</p>	
<p>Defense of the position (<b>3 counterarguments</b> of the position)</p>	<p>Countries might argue that child marriage is a tradition. This practice is mostly to keep girls pure and obedient, having many children and being submissive, bringing honor and social validation to the family and the girl who is married. As CMI explains, “For the communities, child marriage is a magic bullet that helps families avoid social stigma”, because, for parents, it helps prevent a girl from having premarital sex and not being submissive in their marriage. “The complications of child marriage are easier for me to tolerate than</p>





having my daughter stigmatized as bayra. I married my first daughter at 14 years of age and will not hesitate to do the same for her sisters.” These words of the director of a primary school for girls in Red Sea, show us that the communities are well aware of the risk but decide to do it because it is more beneficial for their daughters.

The economic benefits of child marriage can justify it, which is also a common argument in this topic. Families can be paid a lot of money for their beautiful young girls to marry older men in good economic positions. This not only benefits the girl by having more status but also the family receiving the money. In addition, when child marriage is arranged, families have fewer people to feed, providing a better lifestyle for other members.

In addition, child marriage, in some cases, can be consensual between teens who want to spend the rest of their lives together. Banning their legal union would be unfair, considering that in most cases it is a consensual decision that has been given a lot of thought. Making this union a crime, would not only take away the right to choose with whom they want to be but also would punish them for their love, being harmful to our young populations.



<p><b>Recommendations for actions</b> to be taken by the committee</p>	<p>The delegation of Colombia, recognizing its high rates of child brides, invites other delegations to turn their concerns into actual solutions. Having access to education, tackling economic inequalities, engaging boys in prevention campaigns, and making strict laws that severely punish perpetrators of these actions. These transformations will benefit girls all around the world whose dreams are about to be robbed by child marriage and provide some comfort to victims of this horrid crime.</p>
<p>Conclusion <b>(Restatement of the country's position)</b></p>	<p>The Republic of Colombia is open to dialogue and negotiation because that's what UN Women is about, solving women's issues most effectively. The delegation also invited other countries present to speak up against this violation because young girls deserve to have their dreams come true.</p>

### 6.3 Working Paper

#### 6.3.1 Clarifications

When writing the working papers, keep in mind your country's position, both in regards to the topic itself and in international relations as a whole, so that you know who to work with. You must include the name of the document, the name of the committee, the heads of block, the sponsoring countries, and the signing countries, followed by the preambulatory phrases and then the operative ones. The heads of block are the ones who will present the paper, and are major contributors to its creation and development.



Working papers must have a minimum of 9 preambulatory and 9 operative phrases. Preambulatory phrases often work as an introduction, providing context on what has been discussed in the committee, showcasing the reasons as to why it is being written. They begin with words like “Expecting”, “Declaring”, “Acknowledging”, among others. Operative phrases are the ones in which solutions are provided, and usually start with words like “Encourages”, “Authorizes”, “Considers”, and more. While 9 is the minimum number, it is recommended that delegates write more, in case of unfriendly amendments.

After a working paper is presented, other delegates are able to make amendments, which can be either friendly or unfriendly. Friendly amendments can suggest small changes like a spelling error, or a redaction adjustment, while unfriendly amendments usually seek to eliminate one of the phrases. If an unfriendly amendment is passed and the working paper only has the mandatory 9 phrases, then the elimination of one of these will mean the working paper does not pass.

After the amendment process, there is the voting. At the beginning of the committee, during roll call, delegates have the option to say either present or present and voting. All delegates that said present and voting are unable to abstain from voting at this time. If a majority of the committee is in favor of the working paper, then it passes. If the majority is against, then it does not pass.

### **6.3.2 Working Paper Model**

#### **UN Women Working Paper 1.1**

**Topic:** Child Marriage

**Heads of Block:** The United Kingdom of Great Britain and Northern Ireland.

, United States of America

**Sponsoring Countries:** French Republic, The United States of America, Switzerland, Dominion of Canada, Federal Republic of Germany.



**Signatory Countries:** Republic of Niger, The United States of America, French Republic, Republic of India, People's Republic of Bangladesh, Arab Syrian Republic, Canada, Niger, The United Kingdom of Great Britain, Northern Ireland.

## INTRODUCTION

1. *Fulfilling* the main objective of any United Nations committee, which is discussing the current topic and developing effective solutions,
2. *Fully aware* of the whole context of the situation of child marriage, the positions exposed and different approaches to the issue,
3. *Targeting* the root causes of child marriage and helping resolve them,
4. *With the previous knowledge* of testimonies of girls who have been exposed to the dangers of child marriage,
5. *Concerned* about the human right violence and gender inequality victims receive,
6. *Having adopted* a strong alliance with the countries mentioned, for improving the whole situation regardless of economic and moral support,
7. *Seeking* for the continuity of the measurements already applied in Niger and other countries and the new ones,
8. *Emphasizing* the balance between child marriage cases and religion aspects in different countries worldwide,
9. *Alarmed* by the rising cases of child marriage worldwide,
10. *Desiring to* raise awareness worldwide of the dangers of child marriage,

## Resolves:



1. *Filling*, the objective the United Nations have made of this topic
  - 1.1 Enforcing laws that establish 18 as the minimum age of marriage
  - 1.2 Implement and enforce laws against child marriage in developed and undeveloped countries the same.
  - 1.3 United Kingdom will invest in raising awareness of child marriage and the harmful effects of this practice
  - 1.4 United Kingdom will work with civil society organizations and faith groups to address child marriage, and change the law to a more flexible politic.
  - 1.5 Monitor implementation of the resolution and hold countries accountable for their programs;
  
2. *Fully*, aware of child marriage and its effects.
  - 2.1 Canada and the United Kingdom will help promote girls in empowerment.
  - 2.2 Canada will help promoting campaigns that express the effects of child marriage
  - 2.3 Support education and empower emend programs for girls
  - 2.4 Encourage business to adopt policies and practices that discourage child marriage;
  
3. *Targetting*, the root causes of child marriage to decrease it.
  - 3.1 Canada will help with the education of girls around the world creating schools, Starting with 33 in countries such as Niger due to all his experience regarding educational systems.
  - 3.2 The United States and the United Kingdom will help with the economic resources for creating new schools.
  - 3.3 Canada and the United Kingdom will help, promote and spread the empowerment of young girls.
  - 3.3 Countries such as France will help with a land line reporting child marriage and/or abuse



3.4 France will help with monetary shelters for girls in Niger who suffered from child marriage and refuge shelters for families who are refugees

3.5 Germany will help with development cooperation that promotes employment opportunities for women.

Germany works to enhance the position of low-income families and single parents by putting in place properly functioning social welfare systems and expanding existing health services.

Invest in research to better understand child marriage;

4. *Declares*, to settle a unitary law for all countries of a minimum age of 18 years old to get legally married with exceptions previously signed due to the request of other countries in terms of religion and culture;
5. *Emphasizes*, the importance of the creation of programs and campaigns along with The Association for Women's Rights in Development (AWID) to create and invest in physical and virtual campaigns around the world for teaching both parents and victims about this issue;
6. *Calls*, upon girls who already suffered from this, to create shelters offering second opportunities to young mothers and their children in terms of job opportunities, education, and health;
7. *Recommends*, the use of the telephone line (006) so that girls report any violation of their rights;
8. *Endorses*, the protection of babies that girls have at an early age, so that they grow up aside from this problem, healthy, and have access to education, with UNICEF help in charge of identifying and helping those kids at a global scale;
9. *Encourages*, countries to collect data from incidences related to child marriage in its own territory, provide training to judges, and the policies to guarantee perpetrator of child marriage are effectively punished.





## 6.4 Press Release

### 6.4.1 Clarifications

A press release includes the date in which it was written, the time, and the addressee. It should include an explanation of the subjects that have been discussed, the position of the ones presenting, as well as their possible solutions. Also, delegates must explain why they have chosen to do a press release instead of joining another bloc. These will be read before the working papers, and they are not voted on. There will be a minimum of 800 words per press release, where delegates should sufficiently express their views and their solutions in regards to the topic, while keeping in mind all the information that has been developed in the committee.

### 6.4.2 Press Release Model

#### *Press Release*

December 1st, 2023

10:47 a.m

**Committee:** UN WOMEN

New York, New York, United States of America

Since the beginning of time, there has been a controversial practice that has taken control all over the world because of its risks and unsafeness. The Islamic Republic of Pakistan, the Islamic Emirate of Afghanistan, and The Republic of Lebanon have experienced and made part of these practices since a while ago and have made it a crucial part of their beliefs and ideology because others believe it is against their morals and of what they believe is right, that is not a reason for them to eradicate this practice in those countries. Due to the lack of transparency in this committee and the high amount of double morale in the committee, the delegations realized that there was no nation they could trust, and that is why the three delegations supported each other in their solutions to be elaborated and reinforced.

After the crisis presented yesterday, it has been mentioned that delegations such as Pakistan and Afghanistan have sabotaged the solutions proposed by delegations such as the United States, The United Kingdom, Niger, and Nepal to eradicate child marriage and implement



education in the country of Niger. That is completely true and the delegation is not afraid to accept it. This decision was taken into consideration because the delegations mentioned before were intervening with their solutions proposed in the committee. That's why they came up with *C.M.S.H.R* (Child Marriage Security and Health Regulations). This plan promotes and includes the following:

1. **Continue the legalization of Child marriage in these territories.** This will not be argued with other countries who are against it, and the delegations are not willing to either discuss this topic or change any aspect of it. (Legal age of marriage is 15-16)
2. **Implementing laws against Domestic Violence** to decrease the rates of violence against brides in the country.
3. **Implementing laws against sexual violence in the country.** This will not only decrease the aggression towards children brides but to women in general.
4. It is a must for it to be **parental consent** and forced marriage is not accepted in this plan. Forced marriage is illegal and is not accepted in this press release.
5. **Expand the accessibility to health** in the country as it is a vital right that every child must have access to. Countries in the committee addressed the mental health of brides as one of the aspects that must be addressed, so the delegations have decided to take action and provide them with psychological and physical treatment.
6. **Making delegations such as Afghanistan and Lebanon part of the UN organizations.** The country of Pakistan is already a part of them and wishes the opportunity for the delegations previously mentioned to be a part of it. The Organizations they are willing to join are the following:
  - the National Gender Policy Framework (2022)
  - Anti-Rape (Investigation and Trial)
  - Ordinance (2020)
  - The Domestic Violence against Women (Prevention and Protection)

In a land where tradition intertwines with modernity, there exists a pervasive belief that has shaped the lives of countless young women. It is a belief that asserts their worth and their value, which lies in the bloom of youth. As delegations such as Pakistan, Lebanon, and Afghanistan delve into the depths of this enigmatic cultural phenomenon, we are confronted with a stark reality. Violence against these girls has been increasing in the country of Pakistan and that is something we are willing to discuss. According to UNFPA Pakistan, %32 of women in Pakistan have experienced violence, and that's a topic the



delegation will take into account.

These members of the international community want girls to feel good about their decision to marry and to follow their role as a wife properly. This is the problem that we are facing, and the solution to it is not making this practice illegal, it is to adapt it in a way that women can feel safe. The country of Pakistan has already been working on this and results have been seen in the past years. According to “UN Women”, Despite these challenges, Pakistan has taken progressive steps towards the protection of human rights by ratifying most international human rights conventions and introducing pro-women legislation, including the National Gender Policy Framework (2022), Anti-Rape (Investigation and Trial) Ordinance (2020) and the Domestic Violence against Women (Prevention and Protection) Act in all four provinces of Pakistan. Pakistan is not gatekeeping this information and that is why it influenced Lebanon and Afghanistan to become part of these organizations.

To conclude, the delegations are standing proudly, representing what their country agrees with, and are not seeking the support or approval of other delegations in the room. These nations are looking forward to decreasing the rate of violence against women in every country as it has been working in Pakistan. Delegates, countries collaborating in this Press Release want to make it clear that they are not asking for other countries' collaboration or approval. This is up to each country's criteria, and if the committee is willing to intervene they will suffer consequences.

Sincerely,

The Islamic Republic of Pakistan, The Islamic Emirate of Afghanistan, and The Republic of Lebanon.

## VII. Country List

- Afghanistan
- Australia
- Bangladesh
- Brazil
- Canada



# ALTAMIRA INTERNATIONAL SCHOOL

## *Breaking Borders*

TWENTIETH EDITION AISMUN

February 29th - March 3rd

- Chad
- China
- DPRK
- Egypt
- France
- Germany
- India
- Iran
- Israel
- Lebanon
- Mexico
- Nepal
- Niger
- Norway
- Pakistan
- Palestine
- Peru
- Russia
- South Africa
- South Sudan
- Switzerland
- Syria
- United Kingdom
- United States



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