

Convention on the rights of the child: Academic exercise or prescription for a better world?

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Abstract

The provisions of the United Nations' Convention on the Rights of the Child (CRC) provide direction for the improved health and welfare of children worldwide. Unfortunately, progress on the agreed upon requirements for promotion of the optimal physical and psychosocial development of children has not been apparent in many countries. There is no time like the present for professionals, supported by their governments, to work closely with the CRC oversight committee to achieve the goals of the CRC.

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Editorial

The United Nations Convention on the Rights of the Child (CRC) was adopted by the General Assembly of the U.N. in 1989 [1]. The CRC has been ratified by every U.N. member state except the United States of America. Included in the tenets of the CRC are the rights for children to be nurtured without physical harm or mental maltreatment, to receive a good education, to have freedom of religion and to be exempt from military service until 15 years of age. An oversight committee was established to document progress in the signatory countries to achieve adherence to the tenets of the CRC.

What has occurred since the adoption of the CRC? A number of episodes of genocide have taken place where children have become victims [2,3]. Children have been coerced to hate particular out groups in preparation for their participation in future violent attacks [4]. False narratives are repeatedly presented to reinforce support for aggressive behaviors against certain defined human targets [5]. Disease that can be countered by simple means is neither prevented nor adequately treated when it occurs [6]. In short, the ability of children in many countries to achieve their optimal potential is severely compromised.

It is not too difficult to define a milieu that could be created by any society to optimize the cognitive and emotional development of children, while at the same time facilitating the pursuit of non-violent methods for conflict resolution. To begin with, parenting should be carried out in an authoritative manner where reasoning and non-violent methods of discipline are pursued. Unfortunately, in many societies, authoritarian parenting is still quite common [7]. With authoritarian parenting, physical assault (i.e. spanking) and mental maltreatment (i.e. shaming) are utilized to satisfy the wishes of one or both parents. The result is often children who experience fear and anger. Rather than expressing that fear and anger, it is repressed. This is due to the certain knowledge that expression would result in immediate severe retaliation by the parent. However, the repressed anger sits dormant to later serve as an energy source for future aggression [8]. This process is further facilitated by an authoritarian state and educational system that demands adherence to certain policies and provides potential targets for future aggressive behaviors [5]. Clearly, authoritarian parenting is counterproductive in an attempt to create a peaceful world [9]. In addition to authoritative parenting, modeling of caring behavior inside and outside the family needs to be promoted [10]. Such modeling

should effectively counter efforts to demonize various out groups.

False narratives that prepare members of various states for participation in aggression need to be identified and debunked. Such narratives often involve characterizing certain religions as heretical, targeting certain groups as responsible for one's own oppression or undermining the humanity of certain people [11]. These types of narratives are often used by regimes to justify violence against or subjugation of various out groups. They must be exposed before serving as an outlet for the repressed fear and anger that authoritarian child rearing has created.

An educational system where men and women can achieve success, economic independence and personal satisfaction is vital to developing a peaceful society. Certain medical problems such as viral gastroenteritis should not be a common source of mortality, since simple management approaches are available (i.e. oral rehydration). Lastly, countries should not be allowed to use child soldiers [1]. Intervention by U.N. forces or advisers may be necessary to counter this latter reprehensible practice.

In summary, pursuit of the behaviors and actions required by the CRC to optimize the growth and development of children should be a prime goal of the U.N. oversight committee. Clearly, the catastrophes that have and continue to befall children around the world establish the fact that

there is much work to do. Pediatricians, mental health experts and other professionals are in a position to advocate for the proper implementation of the tenets of the CRC. The time is now for governments to listen to the advice of these professionals and chart a course to make the CRC a prescription for a better world and not just words on an official document that are largely ignored by many member states.

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