

CERRITOS CONFERENCE 2021

---



# UNWomen

**TOPIC A:**  
FEMALE INFANTICIDE IN ASIA

**TOPIC B:**  
WOMEN'S REPRODUCTIVE  
RIGHTS

---

**DIRECTOR: KEYA GUPTA**

October 9-10, 2021

To Delegates of CHSMUN Advanced 2021

Dear Delegates,  
Welcome to CHSMUN Advanced 2021!

It is our highest honor and pleasure to welcome you all to our 2021 advanced conference here at Cerritos High School. On behalf of the Cerritos High School Model United Nations program, we are proud to host our second advanced conference, where you will become more knowledgeable on international issues, participate in intellectually stimulating discussions, and create new and everlasting friendships.

The CHSMUN program continues to compete around the world as a nationally ranked MUN program. Our delegates utilize diplomacy in order to create complex solutions towards multilateral issues in the global community. Our head chairs are selected from only the best seniors of our program, undergoing a rigorous training process to ensure the highest quality of moderating and grading of debate. Furthermore, all the topic synopses have been reviewed and edited numerous times. We strongly believe that by providing each and every delegate with the necessary tools and understanding, he or she will have everything they need to thrive in all aspects of the committee. We thoroughly encourage each delegate to engage in all of the facets of their topic, in order to grow in their skills as a delegate and develop a greater knowledge of the world around them.

Although there will be a few changes to our conference due to Covid-19, our advisors and staff have put in countless hours to ensure delegates have an amazing experience. Our greatest hope is that from attending CHSMUN 2021, students are encouraged to continue on in Model United Nations and nevertheless, inspired to spark change in their surrounding communities. With this strong circuit consisting of over 500 delegates, CHSMUN Advanced 2021 will provide a quality experience for intermediate delegates to enhance their speaking and delegating skills.

If you have any questions, comments, or concerns, please contact us! We look forward to seeing you at CHSMUN Advanced 2021!

Sincerely,

Anushka Panjwani & Naima Dellawar

[sg.cerritosmun@gmail.com](mailto:sg.cerritosmun@gmail.com)

Secretary-Generals

**Position Papers are due on October 1st by 11:59pm to the committee email.**

**A Note From The Director:**

Dear Delegates,

Hello! My name is Keya Gupta and I am your director for UN women! For the last four years of my life, I have been a part of this amazing program that has helped me to gain a great understanding of current events, politics and topics. Therefore, I am thrilled to chair this topic for you all. Through these years, I have learned very valuable skills such as the importance of utilizing valid solutions, researching specifics and being confident with your speaking abilities. These skills are helpful for the rest of your life and the more you practice them, the better they stick in your brain, no matter what your external experiences may be. Not every country will agree with your policy and there may even be conflicts, however, it is crucial to stay confident with yourself! Personally, I have always found writing an entire resolution paper tiresome and a bit difficult, but the best advice I have for this is to not fear depending on your group members. Many delegates believe that if they do everything it will make them the best, however, this is false. Instead, it is essential to be helpful and connected to all delegates, in order to achieve a better resolution paper.

As a person who is extremely detail oriented and hyper-competitive by nature, I know the craving and drive of winning a MUN award or gavel at these conferences. However, I am here to tell you that all your motivation and hard work shouldn't be aimed towards a certification. The lessons and research you do for this committee will be extremely appreciated, no matter what your rank is. The best feeling comes from doing your best in committee and working step by step to become a really good delegate!

Overall, just remember that every single one of you is in charge of your destiny and the more you work the better you will do in committee! I am so excited to meet you all and I hope to have some great discussion about these topics!

Sincerely,

Keya Gupta

Director, UN Women

Committee Email: [unwomen.CHSMUN@gmail.com](mailto:unwomen.CHSMUN@gmail.com)

**Committee Introduction:**

Created in 2010, UN Women is a fairly new branch of the United Nations General Assembly, which is also called the United Nations Entity for Gender Equality and the Empowerment of Women. With this help, United Nation members have taken a massive step in accelerating the Organization's goals of complete gender equality and female empowerment. UN Women supports UN Member States as they set global standards for achieving gender equality, and works with governments and civil society to design laws, policies, programmes and services

needed to ensure that the standards are effectively implemented and truly benefit women and girls worldwide. Furthermore, they implement their actions according to the Sustainable Development Goals for females in the UN. UNW has been dedicated to help females feel more confident and empowered through various programs such as the Flagship programme initiatives, innovation in technology for further female education, training for gender equality in forums and research/data about females position in our society. The UN Security Council subsequently adopted seven additional resolutions on women, peace and security: 1820 (2008), 1888 (2009), 1889 (2009), 1960 (2010), 2106 (2013), 2122 (2013), 2242 (2015), 2467 (2019), and 2493 (2019). These resolutions all revolve around the necessity of female empowerment and equality. Some examples of topics discussed by UN women have been Leadership/political participation of female, Economic empowerment of females, females with disabilities, youth empowerment, ending violence against women and female infanticide.

## Topic A : Female Infanticide in Asia

### Background:

Female infanticide is the act of killing female newborns, with closely relates to sex-selective abortion. According to the global study on Female infanticide published in 2018 by the Asian Centre for human rights, 117 million girls demographically disappear because of gender-selective abortions and infanticide. Although this practice may be perceived as outdated, female infanticide continues to be a massive issue in both Asia and Europe and is currently one of the most underreported causes of infant mortality. Female infanticide can also be established as “gendercide” or gender-selective killing. This terrorizing act has become very common over the last decade and has caused a sex-ratio imbalance in many nations worldwide such as India, Pakistan, China, Central Asia, East Asia, South Asia. The act of infanticide can be committed directly, through physical abuse such as drowning, suffocation, or harsh force trauma as well as indirectly, through neglect or starvation. This issue has not only affected millions of female lives, it has also significantly impacted the population in regards to the female-male ratio. The country of Liechtenstein has shown to have the largest gender gap of 126 males for every 100 females and following closely, China has a very large gap with 115 males for every 100 females. These widening of gender gaps not only affect each country, but also affect our international ratio as well. In 2010, women made up 50.8% of the population, but by 2017 they only made up 49.6% of the population which is roughly a difference of 93,600,000 people worldwide.

This problem of female infanticide originates from jaded cultural beliefs that males are more valuable and necessary for our society. In many countries, specifically Asian countries, women have been labeled as a liability instead of an asset to society, which has deteriorated the desire for a daughter. For instance, China’s one child policy was intended for population control, but the normalcy of sexism in Chinese culture drove parents to try for male children and kill the females born in the process. Despite this regulation being terminated in January of 2016, the repercussions of the policy have left the country in an age, gender and economic imbalance.

Furthermore, female infanticide is a direct result of the societal persistence of practicing systematic gender discrimination. The institutional and cultural sexism behaviors such as the dowry wedding system and female domesticity, has led infanticide to be 41% of newborn female deaths in India. Overall causing extremely dangerous consequences such as demographic shift and a rapid decrease in the female population.

This illogical assumption of having a daughter is drastically increase and effect the sex ratio at birth. When the one-child policy was instituted the country's gender ratio at birth was 106:100, and when this law was repealed the numbers had already leaped to 115:100. The growth of uneven sex ratios indicates the toxic masculinization occurring within the population in response to culturally endorsed gender inequity. Therefore, the United Nations has been trying to encourage nations to become more accepting and progress to create a better foundation for humankind as well as to protect human rights.

Another very common reason for female infanticide is extremely poverty and overpopulations. Many asian countries suffer from poverty led by overpopulation as well as cultural sexism, greatly found in India and Pakistan. For example, the one-child policy created by China in 1979, was created to control the population as they made up 22% of the entire world's population. At this time everyone was desperate for a son so that he could carry on the family name, which put many parents in a compromising position. This led to China having 30 million men who were not able to find brides because of the extreme imbalance in their male-female ratio. Despite the concern for the overgrowing population, the one-child policy was abolished in 2016 because of the gender imbalance it caused. Similarly, in India infanticide is committed because of the economic system of dowry and the image it creates for females. The dowry system requires a payment in the form of money, property, or other valuable goods from the bride's family to the groom's. This is a very common practice that has been happening since the British Colonial rule and was a crucial step for marriage. This system has caused several families to be in poverty as well as feel a huge burden to have daughters, leading males to outnumber females by 35 million.

Overall, female infanticide has not only caused a huge imbalance in the world's percentage of females versus males but it has also caused thousands of families lose innocent female infants worldwide.

## United Nations Involvement:

The United Nations have taken many actions towards females rights such as the stop of female infanticide. Since 2010, UN women has been advocating for female rights on an international platform. They aim to create a safe environment for females to open up about their problems and experiences based on gender discrimination and bias behaviors. UN women speak out about the necessity for equal access when it come to healthcare, abortion, contraceptives and more. Furthermore, in a 2011 article called "Son Preference", they aim to warn "renewed and concerted efforts are needed by governments and civil society to address the deeply rooted gender discrimination which lies at the heart of sex selection".

Other than fighting for women's rights, UN women also combat The issue of gender discrimination through the judicial / legislative system. One of the most effective ways they have done this is through the Convention on the Elimination of All Forms of discrimination against

Women. For instance, in El Salvador and Mexico, UN Women successfully enacted the regulation needed to prevent, criminalize, and punish the act of female infanticide and were also able to train over 500 Guatemalan prosecutors on how to handle femicide cases. The CEDAW was created to help females to receive the rights they deserve and it is often called the bill of rights to females. Specifically, they have helped females gain international rights while also focusing on the gender imbalance issue in nations such as India and China. This organization has over 186 states members that have ratified this convention and 23 international experts on women's rights while also helping to come up with better and stronger legislation to reduce the number of female infant murders.

Other than this, another very important NGO created to help empower young girls who are in the danger of discrimination, is Humanium. This organization helps with the creation and donation of welfare programs for children in poverty while completely modeling after the Convention on the Rights of the Child or the CRC. This makes sure that the child's rights are accountable during any judicial case and has helped protect millions of children globally. For example they have begun work in China to improve the quality of life for the 9 million disadvantaged youth. They hope to do so by following Beijing's example in prohibiting sex selective abortion, and mending the concerning gender imbalance.

Furthermore, UNICEF has been deeply working with nations such as India where female infanticide is a massive problem. UNICEF had partnered with the Indian government to create stricter laws about abuse and infant discrimination, mainly to ensure doctors cannot reveal the sex of the baby before birth to decrease sex-selective abortion.

## Case Study: India

In the year 2019, shocking information is found from the North Indian state about whether sex-selective abortions have been conducted after the government discovered not a single female infant being born for three months in 132 villages.

During this time, officials determined that 947 children were born across 500 villages in the Uttarakhan state, however, none of these children were females. This caused a lot of confusion and suspicion among administration, causing them to announce this area as a "red zone" and ready to investigate.

The main investigation occurring during this time, was the use of technology, corrupt doctors and systems to perform female infanticide on the unwanted infants. During this time, India had created a nationwide legislation that prohibited parents from knowing the sex of their baby before it was born and outlawing selective abortions of females in 1994, however, this caused many smaller villages to disobey these laws and illegal practice these actions.

Girl babies are typically seen as a huge economic burden, while male children were crucial for families as they were continuing the family name while advancing legacy through future generations. In these states and overall villages there has always been a drastically imbalanced gender ratio. Therefore, the issue at hand needs to be properly investigated.

Overall, with extensive research, the administration of these states found out that although these area have constant patterns of infanticide or foeticide, this situation was "not alarming at all" and completely under control.

## Bloc Positions:

**Western Bloc:** The issue of female infanticide is now very rare in the Western and more developed countries because of the decrease in poverty and overpopulation as well as the increase of strong female influences. These countries are currently helping other Blocs to comprehend the issue at hand through funding, speeches and the creation of programs to alleviate poverty. Most of these countries have their own legislations about female reproductive rights and abortion because of their progressive mindsets and a large scale decrease of poverty. Currently, nations such as the United States, United Kingdom and Germany are some of the countries that have created donation programs with underdeveloped nations in regards to female education, healthcare benefits and advocacy for female rights.

**Latin America and the Caribbean Bloc:** Although this region is notorious for poverty and corruption, the region shows no evidence of missing women or fertility preferences for sons. Sex ratios at birth between girls and boys follow what would normally occur, suggesting that, unlike other developing regions, discrimination against the girl child in the form of sex-selective abortion or female infanticide is not a concern. With this being said, there is still large amounts of female discrimination among these countries such as Argentina, Chile, Ecuador, El Salvador and Dominican Republic. There have been various legislative measures that has been trying to eliminate this discrimination, however, it hasn't been entirely successful.

**Africa Bloc:** One of the main factors of female infanticide in the Africa Bloc is poverty with about 41% of the world's poverty. This has caused many families in this region to make tough decisions about having more females in their lives. Furthermore, in this region there are many cultural behaviors towards females such as isolation and killing of females because of their sins. For instance, in 2015, 283 females prisoners were in prison because of female infanticide and according to UNOHR in West Africa, "this practice is very common, it's terrible, there are an enormous number of cases. There is a lot of infanticide in Senegal."

**Asian-Pacific Bloc:** The issue of female infanticide is highest in the Asian Countries because of the countless amount of poverty and cultural discrimination of females. Most of these countries are underdeveloped or developing because of the economic conditions of the nations. Consequently, poverty rates in this Bloc are extremely high causing many people to take desperate measures to fix their economic status. Specifically, China one of the largest amounts of sex-selection abortion and female infanticide cases because of the limited child policies. This caused many families to purposely abort females because of the burden they cause. Similarly, in India and Pakistan, poverty and cultural beliefs cause many people to resort to female infanticide. Many governments in the bloc have created legislation prohibiting these abortions and infanticide cases, however, it is still extremely prominent.

## Basic Solutions:

The issue of female infanticide occurs mainly because of the economic status, cultural beliefs, female discrimination and poverty found in countries, therefore all solutions should be regrading these subtopics.

These solutions can be international or national tackling this issue through legislation and humanitarian assistance. The implementation of stricter legislation regrading female discrimination and infanticide must be revised and accounted for, based on each country's policies and governmental responsibility. These legislation must focus on protecting females at any age as well as must ensure proper repercussions for people who disobey the law.

Additionally, each nations should integrate female infanticide programs that would help to modify and liberalize the strict/traditional cultured communities. These programs would help these communities to become more open minded and understanding toward mothers who want to keep their child, no matter what the gender is. It will also create an acceptance and positive attitude in regards to the relationship between girls and others in different communities. Some of these programs/NGOS include Pixie Project, WILPF, the pushpa project, gender justice league, such programs can be implemented and successful in many nations.

It is also important to have specific solution regrading the banned of utilizing amniocentesis for determining the sex should be. If unable to meet these regulations, then there should be a severe punishment. This would really help reduce the number of forceful abortions done by familes and not the mothers choice. It will help people to understand the importance of eliminating sex determination murder or abortions while also providing these people with a positive messages on the values of having a daughter.

Finally, it is necessary to think of some more long-term solutions such as extensive female education and empowerment through NGOs, projects, training and cultural acceptance.

## Questions to Consider:

1. How common is this issue in your country? Has lack of action enabled it?
2. What is your country's position on the international scale of female infanticide? Where does it rank and how is it affecting other countries?
3. Does your country have laws prohibiting gender selective abortion? Have they been enforced/effective throughout?
4. Are women and men considered equal in your country? Are they treated equally?
5. How does poverty contribute to the prevalence of female infanticide?
6. Would religion/religious devotees in your country sustain changes the society needs to overcome effects of overpopulation or, on the contrary, will they resist them?
7. Does your government offer comprehensive reproductive and neonatal healthcare?
8. Do families in your country often use a dowry system, and how does this affect your economy?
9. Does the country's culture affect the role of female in society? If so, how does it relate and justify female infanticide?
10. How has your country worked to eliminate female infanticide and was it succesful? If not, why?

# Sources:

1. “Preventing Gender-biased Sex Selection: An Interagency Statement”, OHCHR, UNFPA, UNICEF, UN Women, and WHO
2. ” ‘Son Preference’ perpetuates Discrimination and Violation of Women’s Rights – It Can and Must Go”, OHCHR, UNFPA, UNICEF, UN Women, and WHO
3. “Abnormal Sex Ratios in Human Populations: Causes and Consequences”, Therese Hesketh and Zhu Wei Xing.
4. “Convention on the Elimination of All Forms of Discrimination against Women.” United Nations, United Nations, [www.un.org/womenwatch/daw/cedaw/](http://www.un.org/womenwatch/daw/cedaw/).
5. “About Us.” UN Women, [www.unwomen.org/en/about-us](http://www.unwomen.org/en/about-us) Billet, Bret L. “The Case of Female Infanticide.” SpringerLink, Palgrave Macmillan, New York, 1
6. “The CEDAW Effect: International Law's Impact on Women's Rights.” Taylor & Francis, [www.tandfonline.com/doi/abs/10.1080/14754835.2013.824274?scroll=top&needAccess=true&journalCode=cjhr20](http://www.tandfonline.com/doi/abs/10.1080/14754835.2013.824274?scroll=top&needAccess=true&journalCode=cjhr20).
7. “UNICEF.” UNICEF, [www.unicef.org/](http://www.unicef.org/)
8. “Figure 1.9 Sex Ratio at Birth, 1982–2017.” UNICEF China, [www.unicef.cn/en/figure-19-sex-ratio-birth-19822017](http://www.unicef.cn/en/figure-19-sex-ratio-birth-19822017).
9. NPR, NPR, 3 Oct. 2018, [www.npr.org/sections/goatsandsoda/2018/10/03/631892291/why-infanticide-is-a-problem-in-senegal](http://www.npr.org/sections/goatsandsoda/2018/10/03/631892291/why-infanticide-is-a-problem-in-senegal)
10. “How China's One-Child Policy Led To Forced Abortions, 30 Million Bachelors.” NPR, NPR, 1
11. Feb. 2016, [www.npr.org/2016/02/01/465124337/how-chinas-one-child-policy-led-to-forced-abortions-30-million-bachelors](http://www.npr.org/2016/02/01/465124337/how-chinas-one-child-policy-led-to-forced-abortions-30-million-bachelors).
12. “India Witnesses One of the Highest Female Infanticide Incidents in the World: Study.” Down To Earth, [www.downtoearth.org.in/news/health/india-witnesses-one-of-the-highest-female-infanticide-incidents-in-the-world-54803](http://www.downtoearth.org.in/news/health/india-witnesses-one-of-the-highest-female-infanticide-incidents-in-the-world-54803)
13. “Infanticide.” Humanium, 1 Nov. 2017, [www.humanium.org/en/infanticide/](http://www.humanium.org/en/infanticide/).
14. Orgi. “Gender Composition.” Census of India: Gender Composition, [censusindia.gov.in/Census\\_And\\_You/gender\\_composition.aspx](http://censusindia.gov.in/Census_And_You/gender_composition.aspx)
15. “Poverty in India: Facts and Figures on the Daily Struggle for Survival.” SOS Children's Villages Canada, [www.soschildrensvillages.ca/news/poverty-in-india-602](http://www.soschildrensvillages.ca/news/poverty-in-india-602)
16. Pulitzercenter. “The Dowry System in India: Is the Trend Changing?” Pulitzer Center, 19 June 2019, <https://pulitzercenter.org/projects/dowry-system-india-trend-changing>.
17. Save the Children India. “Female Infanticide in India.” Save the Children India, Save the Children
18. India, 13 May 2019 [/www.savethechildren.in/resource-centre/articles/female-infanticide-in-india](http://www.savethechildren.in/resource-centre/articles/female-infanticide-in-india).
19. What We Do.” What We Do – Invisible Girl Project, [invisiblegirlproject.org/what-we-do/](http://invisiblegirlproject.org/what-we-do/).

20. Cecil, Madison. "No Girls Born in 132 Villages in India in Three Months." Vanguard, 2 Aug. 2019, [psuvanguard.com/no-girls-born-in-132-villages-in-india-in-three-months/](http://psuvanguard.com/no-girls-born-in-132-villages-in-india-in-three-months/).
21. [https://www.oecd.org/dev/development-gender/Brochure\\_SIGI\\_LAC\\_web.pdf](https://www.oecd.org/dev/development-gender/Brochure_SIGI_LAC_web.pdf)

# Topic B: Women's Reproductive Rights

## Background:

The international implementation of female reproductive rights provides women with the capability to choose whether and when to have children, along with the rights to a secure and legal abortion, coerced sterilization, birth control, and the overall access to quality reproductive healthcare and education. Additionally, female reproductive rights also enables women freedom from discrimination, HIV/AIDS, and safe pregnancy leading to childbirth.

In the last few decades, women's reproductive rights have been given more attention and more people are now trying to spread more awareness about women's reproductive rights. The most controversial reason for not giving females the reproductive rights they deserve is because of specific religious or cultural norms. According to OHCHR, there are many human rights ti relate to women's sexual and reproductive health, which include the right to education, the right to privacy, right to proper health, right to life, the right to be free from torture, right to privacy and being able to do things without discrimination. The Committee on the Elimination of Discrimination against Women and the Committee on Economic, Social and Cultural rights have worked very closely with women across the globe to further prove the importance of women sexual health and reproductive rights.

In general, good reproductive and sexual health is very important for women to live a long life. Reproductive rights include women being part of healthy relationships, physical well-being, having health services that are protected, inclusive and informative to the women in its community and being able to have effective and affordable methods of contraception (shown in A/61/338). Additionally, there are many different stages in women's lives that are associated with specific sexual health and reproductive rights such as fertility, cervical screening, contraception, pregnancy, sexually transmittable diseases, chronic health problems, menstruation and menopause.

Despite all of these established regulations, there are many violations to women's reproductive rights every single day. These violations include denial for proper treatment because of discrimination (being a women or colored), reproductive rights given to the women's family/husband instead of the women herself, falsified or forced abortions (because of shame/regret), performng women's health and sexual health procedures without consent and forced virginity tests or sterilization. This may also include female genital mutilation without consent, forced early marriages and rapes or other sexual assutls. According to Amnesty International, in many developing countries, various pregnancy and contraceptives related complications continue to be one of the leading causes of death in adolescent girls from ages of 15 to 19.

On the other hand, Contraceptive use is relatively low among married young women aged 15-24 in Asia and Africa, for example, less than 25% of the married girls have used or known

contraception. Between 100 and 140 million women and girls in Africa and Egypt have been subjected to female genital mutilation (FGM) without their consent or approval.

Overall, the issue of the violations of women's reproductive rights have affected millions of women in developed, developing and underdeveloped nations such as America, Africa, India, Egypt, Latin American and many more.

## United Nations Involvement:

In 2008, the World Health Organization estimated 358,000 maternal deaths, accumulating to 800 per day, occurred internationally as an effect of maternal complications. Since then, the United Nations has been heavily involved in protecting and spreading awareness about female reproductive rights. In 2018, the United Nations Human Rights Committee's Comment on the Right to Life was re-enstated, as they asserted that access to abortion and the overall prevention of maternal mortality are considered to be human rights. The president/CEO of the Center for Reproductive Rights, contributed to the creation of an international framework to uphold nations accountability for any death or injury that occurs when women are forced to seek unsafe abortions. This three year process initiated by the UN Human Rights Committee also requires states to remove existing policies and structural barriers that prevent a women's access to abortion, along with establish violations towards any implemented criminalizations of not only abortions, but also the pregnancy of unmarried women and girls.

Furthermore, in the last year, the United Nations has started to address reproductive rights in undeveloped countries such as Africa. During the turn of the century, reproductive rights in Africa were included in the Millenium goal. Specifically, these goals focused on on fighting the criminalization of HIV transmission, which does little to reduce HIV transmission, anti-abortion laws, high levels of violence towards women, especially when it limits women's ability to make decisions and particularly in conflict zones, limited rights to sexual education and knowledge, and the failure to realize reproductive rights of those with HIV.

Moreover, the UN has worked with the African Union to utilize the Africa Women's Protocol to bring attention to women's reproductive rights as well as to start resolving the problem. Additionally, The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) has been the most successful and well-known initiative taken by the United Nations that addresses to issue pertaining to women's reproductive rights, sexual violence and discrimination. This is an international treaty that has over 99 signatories that states various women's rights in the workplace, healthcare benefits, clinic appointments and much more.

Overall, the United Nations have been working extremely hard to help eradicate the problems relating to women's reproductive rights by giving them a voice and educating them.

## Case Study: Female Genital Mutilation in Africa

In Africa, there are many dangerous tribal traditions that occur during pregnancy and before a child's birth, this includes female genital mutilation (FGM). This practice involves female circumcision without anesthetic, and the wound is stitched together, leaving only a small hole in place, ultimately causing lifelong pain.

A report done by UNICEF in 2013 based on surveys, proved FGM is known to be prevalent in 27 African countries, Yemen and Iraqi Kurdistan, where 125 million women and girls have undergone FGM. This process not only causes pain, but it also negatively affects pregnancy and birth. FGM can also cause urinary tract infections, which may lead to premature labour.

In addition, delivery often needs special treatment, which often can't be administered safely in a common health clinic and would be very expensive. Ultimately, FGM puts the patient's life at risk because of the complications that can occur with sexual intercourse and birth. Specifically, women can potentially suffer from increased bleeding or tissue cracks, cesarean section, hemorrhage, and prolonged hospitalization during birth.

FGM overall violates reproductive rights of women because it causes major health concerns and takes away a woman's control of her sexual/reproductive system. The process of FGM usually occurs between the ages of birth to 15 years old, which means that most victims are not able to defend themselves from this process.

Furthermore, even fewer participants have the knowledge of both the procedure itself and the detrimental effect it can have on their health. However, beyond this, there are extreme social pressures in Africa that urge participation in FGM, continuing the harmful tradition, as it is seen as the "correct" way to raise a girl and preserve her femininity.

Overall, the practice of female genital mutilation is very prevalent and continues to affect millions of females worldwide.

## Bloc Positions:

**Western Bloc:** The lack of awareness and education about women's reproductive rights is the least in this Bloc because of the progression of the people. The vast majority (93%) of countries with such highly restrictive laws are in developing regions. In contrast, broadly liberal laws are found in nearly all countries in Europe and Northern America. However, there are still problems with this topic in rural areas in this Bloc in which women are still treated inferior to men because of cultural and economic beliefs.

**Latin American and the Caribbean Bloc:** Currently, in the Latin American and the Caribbean Bloc there is a great lack of awareness on women's reproductive rights. Consequently, there are 9,200 maternal deaths in the region each year and 110,000 newborn deaths. <sup>3,4</sup> Unmet need for family planning is high and over 10 million unwanted pregnancies occur each year.<sup>5,6</sup> Twenty-two per cent of pregnancies end in abortion, with the vast majority of these being unsafe, due to their illegality. Furthermore, Abortion is legal on broad grounds and safe services accessible only in Mexico City, Puerto Rico and Cuba.

**Africa Bloc:** Sub-Saharan Africa has the highest maternal mortality rate in the world, as well as high rates of unintended pregnancies, early marriage, and unsafe abortions—which result in

thousands of preventable deaths. Many countries in this region have incrementally broadened the legal grounds for abortion, improved the safety of abortions, and increased the quality and reach of postabortion care. There is still much progress to be made, however, including enabling the region's women to avoid unintended pregnancies and unsafe abortions. The report concludes with recommendations for a broad range of actors to improve the sexual and reproductive health and autonomy of the region's 255 million women of reproductive age. This overall, proves that the issue is extremely prevalent in the Bloc and needs to be addressed.

**Asian-Pacific Bloc:** The use of modern contraception among Asian women is less than the global average. In Asia a majority of unintended pregnancies are due to using traditional contraceptive or no methods which lead to induced unsafe abortion. Cultural attitudes, lack of knowledge of methods and reproduction, socio demographic factors, and health service barriers are the main obstacles to modern contraceptive practice among Asian women. Culturally sensitive family planning programs, reforming the health system, and reproductive health education through mass media to create awareness of the benefits of planned parenthood are effective strategies to improve modern contraceptive practice among Asian women.

## Basic Solutions:

The lack of protection and education about women's reproductive rights mainly occurs because of economic status, cultural beliefs, female discrimination and poverty found in countries, therefore all solutions should be regarding these subtopics. These solutions can be international or national tackling this issue through legislation and humanitarian assistance.

Therefore, one very necessary solution would be to implement stricter laws which encourage women's freedom to make their own sexual and reproductive choices. These laws would also concern and prevent major issues such as child marriage, lack of education, the lack of the protection of pre-established women rights, illegal abortions and the right to have modern contraceptives.

Another solution could be having higher availability of free clinics and appointments for pregnant women who cannot afford regular checkups from doctors, live farther from the main city or have a limited number of hospitals. These free clinics and hospitals for checkups and birth should be built evenly throughout the continents so that every woman, rich or poor could have checkups on their baby.

Furthermore, it is crucial to find specific solutions that would allow women to actively participate in the mainstream political arena such as throughout governments in Africa and other national speaking platforms (UN). With women becoming decision makers, it will allow more women's rights to be more focused on or be taken more seriously and it strengthens their resolve to reach out from women to women and create a better realization of all women rights. To help with this approach, various NGOs could help educate women to become more confident and willing to take major risks for their own freedom.

Ultimately, put emphasis on the importance of strengthening comprehensive sexual education integrated in schools for students and in underdeveloped nations for all females to learn. Currently, there is no sex education standard which is followed across the United States or any other country. Therefore, it is crucial to create a standard sexual education and rights

curriculum which would include the social, mental, physical and emotional aspects of human sexuality, reproducing the overall rights of females relating to their reproductive systems.

Hence, there need to be an international and detailed sex ed plan to reduce the chances of unplanned pregnancy, abusive relationships and an increase of sexually transmitted diseases internationally.

## Questions to Consider:

1. Does your country have cultural barriers placed upon women? What are the social restraints women encounter in your country? Is it male dominance, cultural influences, economical, etc?
2. Do women in your country have access to modern contraceptives? Does their legislation allow these methods to be in use?
3. How can women in undeveloped countries receive proper access to healthcare when they do not have the money to afford it and commonly live in distant regions? Are these methods safe?
4. Culturally, are women viewed as below men in social status in your country? Are there ways to work around the cultural obstacles in order to gain adequate health coverage and legislative rights for women?
5. Are abortions acceptable in your country? If so, what are the requirements to attain an abortion? If not, how many women have lost their lives or have been harmed by an unsafe, illegal abortion?
6. How can female domestic workers be supported financially for maternity leave without legal restrictions?
7. After legislation, how can the United Nations and the international community be sure that legislation is enforced, especially within tribal and rural communities?
8. How can the traditional mindset of social pressures, including child marriage, be changed?
9. What can be done to empower women in undeveloped nations and encourage their participation in this debate?

# Sources:

1. “Reproductive Rights.” Women in the States, [statusofwomendata.org/explore-the-data/reproductive-rights/](http://statusofwomendata.org/explore-the-data/reproductive-rights/).
2. “Sexual and Reproductive Health and Rights.” OHCHR, [www.ohchr.org/EN/Issues/Women/WRGS/Pages/HealthRights.aspx](http://www.ohchr.org/EN/Issues/Women/WRGS/Pages/HealthRights.aspx).
3. Hess, Cynthia, et al. “Reproductive Health & Rights.” Institute for Women's Policy Research, 7 May 2015, [iwpr.org/issue/health-safety/reproductive-health-rights/](http://iwpr.org/issue/health-safety/reproductive-health-rights/).
4. “Reproductive Freedom.” American Civil Liberties Union, [www.aclu.org/issues/reproductive-freedom](http://www.aclu.org/issues/reproductive-freedom).
5. Ahmed, Osub. “13 Ways States Can Protect and Advance Women's Health and Rights.” Center for American Progress, [www.americanprogress.org/issues/women/reports/2018/11/30/461639/13-ways-states-can-protect-advance-womens-health-rights/](http://www.americanprogress.org/issues/women/reports/2018/11/30/461639/13-ways-states-can-protect-advance-womens-health-rights/).
6. Odhiambo, Agnes, and Gauri van Gulik. “Put a Spotlight on African Women's Reproductive Rights.” Human Rights Watch, Inter Press Service, 30 May 2013, [www.hrw.org/news/2013/05/20/put-spotlight-african-womens-reproductive-rights](http://www.hrw.org/news/2013/05/20/put-spotlight-african-womens-reproductive-rights).
7. “OHCHR | Women's Rights in Africa – UN and African Union Launch Report Ahead of International Women's Day.” OHCHR | Convention on the Rights of the Child, [www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=21312&LangID=E](http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=21312&LangID=E).
8. Spooner, Samantha. “6.4m Abortions Every Year: How Conservative Africa Is Killing Its Women.” MG Africa, 29 Aug. 2014, [mgafrica.com/article/2014-08-28-abortion-how-conservative-africa-is-killing-its-women](http://mgafrica.com/article/2014-08-28-abortion-how-conservative-africa-is-killing-its-women).
9. “What Is FGM?” Save a Little Desert Flower, [www.desertflowerfoundation.org/en/what-is-fgm.html](http://www.desertflowerfoundation.org/en/what-is-fgm.html).
10. “Convention on the Elimination of All Forms of Discrimination against Women.” United Nations, United Nations, [www.un.org/womenwatch/daw/cedaw/](http://www.un.org/womenwatch/daw/cedaw/).
11. Crichton, Joanna, et al. “Sexual and Reproductive Health Rights in Africa.” *Lancet*, vol. 367, no. 9528, 24 June 2006, pp. 2043–2045. Academic Search Premier, EBSCOhost, doi:10.1016/S0140-6736(06)68903-4. Accessed 26 May 2018.
12. “Effect of FGM on Childbirth Africa.” Reproductive Health and Research.
13. Elbagir, Nima. “Trump's Ban on Global Abortion Funding Has Led to More Abortions.” CNN, Cable News Network, 24 May 2018, [www.cnn.com/2018/05/24/health/trump-mexico-city-policy-abortion-ban-kenya-asequals-intl/index.html](http://www.cnn.com/2018/05/24/health/trump-mexico-city-policy-abortion-ban-kenya-asequals-intl/index.html).
14. “ENSURING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF WOMEN AND GIRLS AFFECTED BY CONFLICT.” Center for Reproductive Rights.
15. “Female Genital Mutilation.” World Health Organization, World Health Organization, 31 Jan. 2018, [www.who.int/news-room/fact-sheets/detail/female-genital-mutilation](http://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation)
16. “Violence against Women and Reproductive Rights in the Americas.” Center for Reproductive Rights, 1 Jan. 1970, [www.reproductiverights.org/document/violence-against-women-and-reproductive-rights-in-the-americas](http://www.reproductiverights.org/document/violence-against-women-and-reproductive-rights-in-the-americas).
17. “What We Do: Ending Violence against Women.” UN Women, [www.unwomen.org/en/what-we-do/ending-violence-against-women](http://www.unwomen.org/en/what-we-do/ending-violence-against-women).

18. "Rights to Sexual and Reproductive Health." United Nations, United Nations, [www.un.org/womenwatch/daw/csw/shalev.htm](http://www.un.org/womenwatch/daw/csw/shalev.htm).
19. "Sexual and Reproductive Health and Rights." OHCHR, [www.ohchr.org/en/issues/women/wrgs/pages/healthrights.aspx](http://www.ohchr.org/en/issues/women/wrgs/pages/healthrights.aspx).
20. "Sexual and Reproductive Rights: Facts and Figures." Amnesty International, [www.amnesty.org/en/latest/news/2013/02/sexual-and-reproductive-rights-facts-and-figures/](http://www.amnesty.org/en/latest/news/2013/02/sexual-and-reproductive-rights-facts-and-figures/).
21. <https://www.tandfonline.com/doi/pdf/10.1016/S0968-8080%2811%2938597-7>
22. Najafi-Sharjabad, Fatemeh, et al. "Barriers of Modern Contraceptive Practices among Asian Women: a Mini Literature Review." *Global Journal of Health Science*, Canadian Center of Science and Education, 22 July 2013, [www.ncbi.nlm.nih.gov/pmc/articles/PMC4776867/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4776867/).
23. Bankole, Akinrinola, et al. "From Unsafe to Safe Abortion in Sub-Saharan Africa: Slow but Steady Progress." *Guttmacher Institute*, 7 Apr. 2021, [www.guttmacher.org/report/from-unsafe-to-safe-abortion-in-subsaharan-africa](http://www.guttmacher.org/report/from-unsafe-to-safe-abortion-in-subsaharan-africa).