More than one billion children are “denied the healthy and protected upbringing” guaranteed by the 1989 United Nations Convention on the Rights of the Child, according to UNICEF Executive Director Carol Bellamy (UNICEF release, 12/9). Eleven million children die from preventable causes every year before they reach the age of five; 400 million children do not have access to safe water; 500 million children lack sanitation; 270 million children do not have access to health care. These are staggering numbers, yet the plight of these children is more often than not surrounded by a wall of silence, indifference, and apathy.

Many promises, declarations and resolutions have been made to redress the situation, but these are only rarely followed by concrete actions and programs. There is an evident lack of political will and public indignation, which perpetuates and reinforces the widening gaps between developed and developing countries, between the rich and the poor, between the “haves” and “have-nots”. Even in periods of robust economic growth, social inequalities and disparities between and within countries continue to increase instead of decreasing as one would expect or hope. Why?

Nehal Patel, a grade 9 Canadian student who took part as a youth delegate in our 2004 International Summit, provides a straightforward if disheartening answer: “the idea of helping, sharing and caring no longer exists. If only love bought everything, the health of us children would not be in question today”. Nehal is certainly not the only youth to point the finger at the values (or lack thereof) that drive our society today for many of the problems besetting children and their families.

Indeed, our society ascribes the most value to money and material possessions, fuelled by the conviction – constantly hammered in by the mass media and entertainment industries in particular – that there is equal opportunity for all to achieve “the American dream” by virtue of one’s own will and efforts. A corollary belief is that individuals are responsible for their condition in life, which in turn makes it possible and justified to blame individual failings for what are in fact structural and systemic problems. As long as we continue to value, admire and emulate people for...
It is stated in the Charter of Human Rights of the United Nations that every human being has the right to live a healthy lifestyle and the right to receive medical attention when necessary. This would be the case had we lived in a perfect world, but the grim reality is that we don’t. Millions of children are suffering (and dying) from starvation and the lack of needed medical treatments.

In fact, approximately 10 million children die each year due to easily preventable diseases. These ailments include diarrhea, measles and pneumonia just to name a few, all of which can be treated and are seldom seen as causes of death in the western world.

A study carried out during the year 2002 stated that 91 in 1000 children die before ever seeing their 5th birthday. The countries with the highest child mortality rates tend to be those that are engaged in any form of internal conflict. One would find it exceedingly baffling that a country that is unable to provide its people with proper health care and food can afford to train and equip soldiers for combat. To further add to the problem, an estimated 174 million (or more) children suffer from malnutrition which results in stunted physical and cognitive development as well as a poor immune system. Half of the world’s child deaths are a result of malnourishment. Organizations from all around the world try to aid these countries by providing them with provisions and basic health care, although that still does not satisfy the minimum calorie intake of 2,350 calories per day. A total of fifty four countries fall under that standard, the majority of these third-world countries are located in the Sub-Saharan African area.

HIV and AIDS also prove to be a daunting issue within the continent of Africa. Seventy percent of people that have contracted the AIDS virus live in the Sub-Saharan region alone. Due to AIDS’ high mortality rate many children are orphaned or contract the life threatening illness of HIV and AIDS.

The health of children around the world is tremendously disappointing. Of the 6.4 billion people in the world, about 842 million children starve in one day. How can a child’s health be at risk? How can a child’s health threaten his or her existence?

The main factor that can harm a child physically would definitely be hunger. The consequences of hunger include starvation and malnutrition. Starvation is caused by famine. Starvation can still exist even if food is available, because in some areas around the world, it is hard to be able to afford food itself. Malnutrition, on the other hand, is a much larger problem. Children who lack proper nutrition are short on proteins and calorific energy, which affects the child’s growth, the capability for movements and increases their vulnerability to deadly illnesses such as diarrhea, pneumonia, malaria, measles, etc.

The psychological effects on a child can also be just as detrimental. Stress is an emotion that can occur in many children, even a child of 5 years of age. The everyday life problems a teenager or child would have with their social life would make him or her think that they might have a nervous breakdown, so imagine the life of the children who don’t have the fortune of even having a social life.

If I were in an unfortunate child’s place, spirit to me would be hope. Hope that someone would care for me, believe in me and encourage me to do everything I want to do. I did some research and I found one organization (UNICEF), which helps children who cannot afford certain things. I have also seen many people and schools raise money for this organization throughout the year. I think the current strategies are failing because people make false promises and people also act without thinking through their actions.

There are many people out there who are taking advantage of what they have and don’t realize how fortunate they really are. A large number of children in other countries are having only one meal a day, when down here, we are having 3-4 meals a day, not including snacking in between. The idea of helping, sharing, and caring no longer exists. If only love bought everything, the health of us children would not be in question today.
Health of the Urban Child in India

Dr. Indumati Gopinathan, M.D.
President, Indian Medical Association, Chembur Branch

One third of total deaths in India happen among children less than 2 years of age. Every year, 2 million children die due to lack of clean and healthy environment. This is indicated by the nearly 100% increase in Eosinophil count among children on an average over a period of 15 years.

The basic pollutants which pose a health risk to children as well as adults in an urban environment are: indoor and outdoor air pollution, water pollution, soil and noise pollution. In addition to this, one may include the intangible yet more harmful effects of mind pollution.

Children are susceptible:
Children are more susceptible to attack by harmful bacteria and noxious emissions. Their respiratory system is in a developing stage. Their immunity levels are low as compared to adults. They are more exposed to outdoors. They are prone to breathe through the mouth. Finally, children have a high respiratory and toxin absorption rate.

Types of sicknesses:
Some common ailments among urban children are cough, breathlessness due to hyperactive airways, hay fever, chronic bronchitis, trigerring of bronchial asthma and increased susceptibility to diseases like cancer.

Affluent pollution:
Some of the ailments have been noticed in upper class children. The culprit is the air conditioner. These are potentially dangerous because the filters are not cleaned regularly, the dust filter is overused and it is not regularly serviced.

Water Pollution:
The water pollution ingested by urban children is in the form of potable water contaminated from sewage lines. Other potential sources of infection are roadside food outlets which do not necessarily maintain portable water quality and hygiene. Contamination may also occur due to a mix up of industrial effluents with vegetables grown in urban areas prone to contamination.

Human Pollution:
Human pollution may occur due to sexual abuse, child labor and lack of proper health, education and care, particularly to street children.
In cities, parents tend to indulge in self medication for children catering to amoxycillin, cough syrups, etc. without diagnosis or doctor’s advice. The result: upper class children in Mumbai, for example, have been found to have multiple drug resistant diseases.

What this Means
The overall effect on children of these pollutants is decreased concentration span, lethargy, disinterest, irritability and hypoxia leading to slow learning ability.

The health of the urban child is far from ideal due to pollution. Higher incidence of breathing disorders, cardiac problems, behavioural disturbances, faster biological aging, hearing disabilities and far reaching effects like heart attacks and cancer.

What can we do?
- Educate teachers, children and parents about health and hygiene.
- Change of attitude: A healthy child, rather than a performing child
- Set good examples
- Practical measures like use of bicycles
- Avoiding drug abuse, self medication.

The Author is a consulting pathologist in Mumbai, India, and Head of Pathology Dept, Shushrut Hospital, Chembur, Mumbai.
If I said I was going to Central London, they’d stop me. I don’t think they’re over-reacting, because I agree with them.

Are we now living in a world where our parents are too afraid to let us do anything? A team of young journalists from Children’s Express investigate how the terrorist attacks are affecting young Londoners and how their parents have reacted to them.

Although no children were killed during the London bombings, we know thousands have been affected, including us. It was during class lessons that most of us found out about them. We didn’t know what would happen next but we knew we wanted to see if our parents and friends were okay. That night special arrangements were made for those who couldn’t get home and the next day hundreds of schools closed. For the first time in our lives we felt unsafe.

Seri Davies, 18, lives in North London and says she will probably never get on the tube again. “I still use the bus, but I’m a lot more wary. For short journeys I tend to walk now. After the bombing I was a bit wary especially as the first bus I got on was the number 30, but now I’m more at ease. I think it’s because the trains have got attacked more with the bombs. I definitely am more vigilant, I look around more when I’m alone, I don’t sit at the top of the bus and I don’t sit at the back. I know I will never get on the tube but I wasn’t a big fan of it anyway.”

Seri isn’t the only one who avoids the underground. Seventeen year old Roisin, who lives in Ealing, does too. “I feel less safe, especially in particular parts of London, so I try not to go to those places. I try to use buses instead of the tube, even if it takes longer. My friends are the same, so when we go out we tend to stay close to home, which is annoying because you get bored of going to the same places all the time.”

Saadia Akerbouse lives in London and has three children and even she feels scared about using public transport: “You don’t know what can happen. A bomb can just explode at any minute. I worry a lot about my children because they go out and use public transport and there could be someone there that can let a bomb off. But, I can’t stop them from using public transport because they have to go to school and go out. I keep on telling them they have to stay in safe places and stuff.”

But some parents have even stopped their children using public transport altogether. This includes Roisin’s mum and dad: “If I said I was going to central London, they’d stop me. I don’t think they’re over-reacting, because I agree with them. This will definitely change my summer though - it already has. I was looking forward to going to lots of places in central London and making the most of living in London, but it’s not worth risking it.”

The attacks on London have not just affected children and young people in Britain. Teenagers in America awoke to news of the bombs and Shauna, 17, who lives in New York says, “I was very worried and was thinking about how many people got hurt and whether I knew anybody who was in London. I also thought about if I knew anybody who would know anybody who could have been hurt. I felt lots of sympathy and empathy for those people.”

Shauna told us that it brought back lots of old memories for her. “It was very bad because it reminded us of when we were attacked ourselves. We were scared and we know you guys are scared and frightened, but then we also know what it’s like to overcome something like that. We have to be strong and show the terrorists that they don’t have power over you.”

Even though we have experienced something really bad it makes us feel that Britain has to stick together. We still have to use the public transport to go to school and we still have to get on with our everyday lives. We want things to go back to normal and show the terrorists that they will never win.

This story was produced by Georgia Edwards, 10, and Nazia Driver, 15. The interviews were done by Ghizlan, 12, Lathaniel, 15, Annabelle, 17, Danielle, 13, Kamal, 14, Ginisha, 15, and Sonti, 15. It was published by Reach For The Sky website August 3, 2005.
This special publication titled: “Violence, Dangerousness in the Day by Day Living” is the result of a team work of professionals from different disciplines who put their long term experience to demonstrate to people how it is possible to prevent violence in society.

The professionals are from legal, criminology, medical-forensic, educative and pedagogic, psycho-social and human rights fields. Each article deals with a specific aspect of violence prevention.

The book’s introduction is presented by the Former President of the Inter-American Institute of Human Rights, Prof. Dra. Jacinta Balbela, while the Prologue is written by the President of the Uruguayan Supreme Court of Justice, Dr. Milton Cairoli, who is also a Professor of Penal Justice. The Editor and Co-author is Dr. Daniel Maltzman, a member of the local United Nations Volunteers Committee. He has been working as a volunteer for different NGOs for the last 22 years, for the rights of people in need in his country (Uruguay) and in countries such as Germany, Spain, France, the U.S.A. and others.

Dr. Maltzman’s article in the book describes a recent 4-year Program for youth aged 14 to 29, to prevent depression and suicide. The Project, named “To bet on life,” is part of an effort to improve quality of life and mental health initiated by the National Youth Institute of the Ministry of Culture and Education. The project consisted of several workshops discussing violence prevention strategies with youth, their families, local community and the Mass Media throughout the country. The program gave Dr. Maltzman national recognition. This was followed by a scholarship from the Inter-American Development Bank (IADB-INDES), providing Dr. Maltzman with an opportunity to record his experience working with thousands of people in the prevention of suicide among youth in the Uruguayan population, and also to replicate his work at the national and international levels. Last year, Dr. Maltzman was invited by the CDC to participate in their World Conference in Vienna, Austria.


E-Mail: danielmaltz@hotmail.com

IFRANE, Morocco, 24 August 2005 – Some 200 youth delegates from over 50 countries came together for The Second Pan-African Youth Leadership Summit, to help find solutions to the problems and challenges facing young people around the world today.

Zerihun Mamo, a university student and founder of the Ethiopian Youth Forum, was one of the delegates, travelling far from home to take part in the week-long event. “I have come [to Ifrane] to talk to other young people,” said Zerihun. “Here I will be exposed to other ways of solving problems, other ways of communicating.”

The MDGs
Another issue that the Ethiopian Youth Forum works on is the role of youth in achieving the United Nations’ Millennium Development Goals. This issue was at the heart of the discussions at the Summit. The MDGs are about reducing poverty and mortality; promoting health, education and equality; the battle against HIV/AIDS; and creating partnerships for development.

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A Research project on working children in Mumbai was undertaken by the OPCR Mumbai in collaboration with the National Social Service Unit of Kirti College, Mumbai.

The project will study the background - age, occupation, whereabouts of parents, birth place, schooling and recreation - of children who work along the western railway corridor of the Mumbai suburban railway.

The Research will combine quantitative as well as qualitative data on the children through comprehensive survey questionnaires obtained from direct individual interview of the children. The objective of the research is to develop a broad understanding of the background, economic and social conditions of working children in Mumbai. The results of the research will be available by 30 August 2005.