

Committee: United Nations International Children's Emergency Fund
Topic: Child Marriage in South Asia

Resolution A/1

ADDRESSING CHILD MARRIAGE IN SOUTH ASIA

Recognizing that child marriage is an outrageous and extreme human rights violations that poses a threat to young women's lives, health, and well-being,

Noting with deep concern the extreme rate of about 1 in 2 young women under the age of eighteen that are married in South Asia, and the 130 million young women will be married from 2010 to 2030,

Aware of the many factors that play a role in child marriage in South Asia, which include gender inequality, poverty, and traditions of cultures,

Expressing its appreciation to the many organizations such as Girls Not Brides, SCF and Care that are making a significant effort to better the situation,

Further recalling the recent resolution, called UN Resolution on Child, Early, and Forced Labor, passed that was the first to acknowledge child marriage as a violation of the child's moral and civil rights and called upon nations to prevent this,

Deeply concerned that the issue is persisting and the actions taken have not resulted in significant change,

1. Encourages the increase of the foreign exchange program between students in South Asia countries and students in more modernized countries considering:
 - a. That this could help students in South Asian countries see and better understand the idea of gender equality, hoping that these students will take these ideas back to their countries and change the country's culture,
 - b. That this will be done by increasing already existing organizations, funding more students in the South Asian nation, encouraging students with potential for a bright political future,
 - c. Focusing these new efforts between South Asian countries where child marriages are prevalent, including Bangladesh, India, Nepal, and Afghanistan and countries with a very gender-equality way of thinking including but not limited to the United States, France, Japan, and Iceland,

- d. That this can be implemented in the upcoming years, but there will not be a notable change in the situation for many years;
2. Calls upon South Asian governments to employ a program that will ensure both parties of a child marriage are consenting individuals and that neither are being abused through:
 - a. Governments requiring marriages be registered, which will divulge the age of the individuals, and any marriage between (an) underage individual(s) will be evaluated and confirmed to be consented by a government social worker,
 - b. Increasing the monitoring of child marriages in countries where registration already exists;
3. Emphasizing the need to improve country's economy to battle poverty by:
 - a. Improving the infrastructure of the countries for more jobs, a cleaner society, and economic growth, through:
 - i. civil engineers, who can help design the most effective and cost-efficient ways to develop cities, and will be volunteers from developed countries,
 - ii. offering loans from UN programs, such as the World Bank, which will be easy for the developing countries to pay back,
 - iii. help developing countries to discover and develop their natural resources, through exploration,
 - iv. encouraging the countries to make their cities safer and more tourist-friendly, to promote tourism in these areas;
4. Supports the spread of education and vocational training for young women and men in these areas:
 - a. Believing that by doing this, victims who would once be sold into a child marriage will be better able to support themselves and therefore families will not be reliant on child marriages for money hoping to:
 - i. Increase the self-esteem of young women and men placed in such a vile environment,
 - ii. Increase the amount of smart, intelligent workers, which could assist in boosting the economy,
 - iii. Including in this education for gender equality, hoping that this will encourage a change in mentalities about child marriages,
 - iv. Supporting already existing programs to carry this out such as the Women for Women organization, and the Persona Advancement and Career Enhancement Program;
5. Approves implementing more rehabilitation facilities to help victims of abusive child marriages escape their predicament and integrate back into societies keeping in mind:

- a. That this will be a short-term solution to the situation, hoping that the issue will soon minimize, and these efforts can also decrease as needed,
 - b. Use these rehabilitation programs to provide education and financial aid to these victims:
 - i. To help boost self-esteem, as most victims entered a marriage before finishing their education,
 - ii. Using programs such as Child Advocacy and Rehabilitation Programs and the Vital Voices initiative to carry this out,
 - c. That counseling, support, and other physical care will be included in these to help these victims better integrate back into society:
 - i. using organizations such as Salus World, which helps victims of traumatic life events, like child marriages, return to a healthy emotional state,
 - ii. offer medical services to victims in these facilities from willing doctors already present in the areas,
 - d. That these facilities will be placed in cities and countries where child marriage is extremely common, including, but not limited to Bangladesh, India, and Afghanistan;
6. Authorizes creating sheltering facilities for victims of abusive child marriages offering a safe place to go, considering that:
 - a. This will help victims of the situation as of now, but hoping that as the situation shrinks, the need for this will as well,
 - b. This will be implemented in areas such as Bangladesh and India, where child marriages are extremely common,
 - c. These will be connected to rehabilitation centers for these victims to go to once their situation has been deemed safe,
 - d. Included in these facilities will be daily meals, medical professionals, and therapy,
 - e. These will be implemented as soon as possible, finishing in two to three years,
 - f. Using NGOs such as Womankind, which works to provide better shelters, and other services, to women around the world;
7. Draws the attention to spread awareness of the extreme issue of child marriages by:
 - a. Using electronic sources such as social media, the internet, and news in developed countries,
 - b. Using pamphlets, newspapers, and more to achieve this in developing countries,
 - c. Educating women, to help them know how to combat this issue if this were to happen to them through:
 - i. Spreading awareness, through the ways listed in sub-clauses a. and b.,

- ii. The program, Partners for Prevention, which works with women to prevent violence against them.

Committee: United Nations International Children's Emergency Fund
Topic: Child Marriage in South Asia

Resolution A/2

ADDRESSING CHILD MARRIAGE IN SOUTH ASIA

Recognizing that the issue of child marriages in South Asia and other parts of the world cannot be condoned,

Alarmed by the statistic that almost half of underage girls are married to older men under the promise of familial financial aid and education,

Deeply concerned that most countries where the number of child brides is highest has made little to no effort to put an end to this practice,

Noting with satisfaction that the United Nations has taken previous steps to advocate for the eradication of child marriages and continues to do so,

Recalling that poverty, tradition, gender inequality, and insufficient education are what primarily contributes to child marriages,

1. Suggests that representatives from more developed and educated countries come and speak to South Asian families considering selling their daughters off by:
 - a. Warning them of the repercussions and consequences of doing such which include:
 - i. Sexual, physical, and emotional abuse,
 - ii. Lifelong mental instability and emotional trauma,
 - iii. Permanent damage to the reproduction system,
 - iv. Death from complications in pregnancy and childbirth for both the mother and child;
2. Asks for financial aid to go towards South Asian families, taking into account that poverty is a driving factor that pushes families into selling their daughters by:
 - a. Asking Non-Governmental Organizations working towards the elimination of child marriages such as:
 - i. Girls Not Brides, CARE, Saarthi Trust, Vasavya Mahila Mandali to provide funds, aid, and resources to combat child marriage;

3. Calls upon allied nations to come together and ensure that young girls and the community know their worth by:
 - a. Creating workshops, presentations, and seminars where representatives and elected officials will educate young girls and their families on:
 - i. The importance of gender equality,
 - ii. Breaking the tradition of marrying girls off as soon as they are of age to reproduce,
 - iii. Eradicating the idea that a girl's worth and her family's honor is based on the purity of virginity,
 - iv. Opening the eyes of the community to realize girls are not a burden to the family, but rather to be cherished, nurtured, and loved just as boys;
4. Urges allied nations to provide aid and resources to educate young girls and provide clean sanitation for their community using methods such as:
 - a. Improving school curriculum to include social development and women's rights;
 - b. Gathering volunteers from organizations working to fight against poor sanitation, which can lead to girls sold off due to family members being concerned for the girl's health and safety, to build:
 - i. Bio-latrines or traditional latrines, working sewage systems, and implementing water filters.

Committee: United Nations International Children's Emergency Fund
Topic: Child Marriage in South Asia

Resolution A/3

ADDRESSING CHILD MARRIAGE IN SOUTH ASIA

Reaffirming the importance of Human Rights Council resolutions 24/23 and 29/L.15 and General Assembly resolution 69/156 which strengthened efforts to prevent early and forced marriages,

Keeping in mind that early and forced marriages are potentially violating to the basic human rights and fundamental freedoms of young women because health, education, and safety rights are made vulnerable and loss of education prevents future opportunities for career freedoms,

Noting other regional efforts to address child marriages such as the Campaign to End Child Marriage in Africa of the African Union and the Kathmandu Call for Action to End Child Marriage in South Asia,

Emphasizing that women's rights, poverty and patriarchal values are having a lasting affect on the continuation of child marriage practices and need to be addressed to prevent this issue,

Recognizing that child marriages may also lead to physical and psychological issues in women, as there is a higher risk to sexually transmitted diseases such as HIV/AIDS as well as increased vulnerability to multiple violences,

Considering that child marriages in South Asia are hindering to sustainable development goals as girls married at such a young age lose access to continued education and therefore are not given as many job opportunities,

Being convinced that many laws already in place regarding the legal age and protections of having children being married are not being well emphasized or punished,

Appreciating the South Asia Initiative to End Violence Against Children and its Regional Action Plan to End Child Marriage in South Asia, and urging that governments and civil organizations in South Asia will take this to action and implement it,

1. Urges that laws and policies preventing child marriage are more harshly enforced with violators of the law more harshly punished and that there be stricter oversight of the ages of those to be married;
2. Expresses that the cultural acceptance of child marriages needs to be combated with social campaigns through media, billboards and which highlight the dangers of early marriage and its effects on girls lives so that those continuing the practice will further understand the extent and impact of their actions on:
 - a. The education, mental and physical health of young women,
 - b. The continuation of poverty because generations are not allowed to develop financially before being married,
 - c. The higher risk of pregnancy complication and infant death because of young parents;
3. Stresses that methods of teaching youth to have a voice and speak up against child marriage should be implemented:
 - a. Through organizations working in countries where child marriage is present to show young people that this is a large issue and that they can have power and speak up,
 - b. Through educating young women about hotlines and emergency numbers they may call for aid when forced into marriage as a child,
 - c. Through publicly accessible youth groups and programs to both empower youth as well as teaching how futures are affected with those affected by child marriage speaking to them;
4. Suggests that creating systems which provide more health and financial support for those families likely to contribute to early marriages would prevent the continuation of marrying off children with the reasoning of less financial burden;
5. Notes that through exposing the dangers and negative effects of child marriage to not only countries affected by it, but also those areas which are not affected by it and wealthier would create a humanitarian appeal to outsiders and help social movement to empower and end child marriage.

Committee: United Nations International Children's Emergency Fund
Topic: Child Marriage in South Asia

Resolution A/4

ADDRESSING CHILD MARRIAGE IN SOUTH ASIA

Acknowledging that 50% of girls, before the age of eighteen, are being victimized to child marriage in South Asia,

Recognizing the limitations laid upon the children such as receiving an insufficient education, creating a poor outlook of job prospects,

Urging countries with a high rate of child marriage to partner with an organization, such as the Girls Not Brides Foundation, in order to spread awareness,

Emphasizing the physical and emotional stress, including the high risk for contracting sexually transmitted diseases and domestic abuse, the children are faced with when married of to early,

Recalling that the United Nation Resolution on Child, Early and Forced Marriage was supported by 116 Member States,

1. Authorizes a law, that specifies the legal age of marriage is 18, working to lower the rate of child marriage in South Asia, that will:
 - a. Be rewarded with a yearly incentive of \$5,000 USD,
 - b. State all citizens in violation of the law will be penalized with a fine of \$10,000 USD,
 - c. Be overseen by the United Nations, in order to confirm the participating countries are following set law,
 - d. Be founded by the World Bank;

2. Endorses a hotline made reachable to all those with access to phone lines that will:
 - a. Act as a counselling to those unable to come across such help:
 - a. Be staffed by not only volunteers but qualified therapist,
 - b. Contact authorities based on the brutal extent of the call,
 - c. Be funded by the World Bank;

3. Encourages countries to partner with the Girls Not Brides foundation where they strive to end child marriage all together;
4. Instructs the creation of a national database in which countries that do not have a law or policies regarding child marriage will be documented that will:
 - a. Set up a semiannual investigation regarding all marriage,
 - b. Assure that in the countries that do not disapprove of child marriage, children are not being abused or sexually harassed,
 - c. Be founded by the World Bank;
5. Encourages the spread of awareness of child marriage in not only South Asia but worldwide in which:
 - a. Speakers, supplied by the Girls Not Brides Foundation will travel countries, and explain the risks that come with the child marriage including domestic violence and the higher risk of obtaining a sexually transmitted disease,
 - b. Pamphlets and brochures will be given out by volunteers, supplied by the Girls Not Bride Foundation.

Committee: United Nations International Children's Emergency Fund
Topic: Child Marriage in South Asia

Resolution A/5

ADDRESSING CHILD MARRIAGE IN SOUTH ASIA

Reaffirming resolution 69/XX as it urges the need for acting, upholding, and enforcing laws and policies that work to end child marriage,

Recognizing resolution A/HRC/24/L.34/Rev.1 as it realizes that child marriage continues to obstruct economic growth, along with health, legal, and social status of women,

Disturbed that according to the NGO Girls Not Brides, 15 million girls get married under the age of 18 every year,

Keeping in mind those religions that consider child marriage a tradition,

Alarmed that according to NGO CARE, 39,000 girls wed everyday with little or no choice of who they marry,

Expressing the need of child marriage awareness, as many are not aware of this issue and its prevalence,

1. Endorses worldwide awareness of child marriage through:
 - a. Posters that will read the warnings and side effects of childbirth under the age of 18,
 - b. Campaigns against marriage to minors on commercials and billboards in community centers, and large and rural areas,
 - c. Commonly known spokespeople, such as celebrities, as they shall be the faces of major campaigns against child marriage,
 - d. Will be run by organizations like Girls Not Brides, UNICEF, CARE, UN Women, and World Vision Australia;
2. Demands that anti-child marriage laws be enforced with severe punishments, like jail, for the families and the groom, while the young girl is protected by the government, or there will be an injunction to that country;

3. Enforces a law that makes it mandatory for both the children and their families to agree to the marriage, with the country's government dealing with the punishments;
4. Emphasizes the need to persuade religious leaders and figures, through meetings, that child marriage is hurting their religion and its people, as it:
 - a. Causes many stillbirths, deformities, and neonatal deaths,
 - b. Is deadly for the young girl to be pregnant at a very young age, c. Is more likely for the mother to contract HIV/AIDS;
5. Recognizes the need of support for these young girls in this challenging part of their lives through:
 - a. Implementing support groups in community centers where they can tell their stories,
 - b. Making new friends with other victims of the same or similar situation,
 - c. Giving them a little bit of money and helping them find a job, so they can go buy something for themselves to feel independence;
6. Authorizes hotlines, run by Girls Not Brides, where anyone can report an upcoming child marriage or an abusive husband, so it can be stopped;
7. Adopts free schooling to everyone, as many young girls are uneducated in impoverished areas due to lack of money:
 - a. That will give everyone that chance to have an education,
 - b. That will be a regular Monday through Friday school,
 - c. These schools will be located in designated learning building or community centers.

Committee: United Nations International Children's Emergency Fund
Topic: Preventing Neonatal Deaths

Resolution B/1

ADDRESSING PREVENTING NEONATAL DEATHS

Stressing that a child's risk of death within their first four weeks of life is nearly 15 times greater than those over a year in age,

Emphasizing that 99% of newborns deaths take place in developing and low income countries,

Acknowledging that in 2015, 45% of deaths among newborns were neonatal deaths,

Recalling the United Nations Levels and Trends in Child Mortality Report 2015 showed that with over 16,000 children dying each day, neonatal deaths are responsible for a large majority of the fatalities,

Recognizing that foundations, such as the BORNproject and the A Little Life Foundation, work in order to educate the public and also support families who have become victims of neonatal deaths,

1. Suggests at home checkups for newborns for the first two months of their life, seeing as in developing countries the majority of newborns die at home that will:
 - a. Confirm health of the child,
 - b. Provide any medical attention needed:
 - i. Vaccines
 - ii. Medication
 - c. Be staffed by the BORNproject,
 - d. Encourage vaccinations,
 - e. Urge documentation of the newborn,
 - f. Be funded by the World Bank;

2. Authorizes the creation of intensive research centers, placed in countries based on the
 - a. population affected by neonatal deaths, that will:
 - b. Be overseen by the Center for Disease Control and Prevention,
 - c. Focus mainly on effective cures for the three main causes of neonatal deaths:
 - i. pneumonia,

- ii. preterm birth,
 - iii. asphyxia,
 - d. Have a staff provided by A Little Lifetime Foundation,
 - e. Be funded by the World Bank;
- 3. Requests the creation of a support group, led by those who have been affected by neonatal deaths, in which:
 - a. The group will visit developing countries in order to emphasize the importance of at home health care,
 - b. Education of neonatal deaths will be spread through:
 - i. Public events
 - ii. Written reports
 - iii. Media campaigns
 - c. Support to those in need will be given,
 - d. The World Bank will fund;
- 4. Welcomes countries to begin a partnership with a neonatal death foundation, such as BORNproject and the A Little Life Foundation in order to:
 - a. Provide date, screening, and clinical education,
 - b. Educate and raise awareness of neonatal deaths using speakers, pamphlets, and the organization of public events,
 - c. Diminish neonatal deaths globally;
- 5. Requests the distribution of prenatal vitamins that will:
 - a. Be produced by Pfizer Pharmaceuticals and 3M Pharmaceuticals,
 - b. Be allocated by the Red Cross,
 - c. Become available to all countries willing to pay an annual fee based on the average monthly income of each individual country,
 - d. Have the transportation cost covered by the World Bank, via ground shipping or air transport.

Committee: United Nations International Children's Emergency Fund
Topic: Preventing Neonatal Deaths

Resolution B/2

ADDRESSING PREVENTING NEONATAL DEATHS

Recognizing that 45% of deaths of children under 5 years old happen during the neonatal period 28 days after birth, and that with proper care during and after birth nearly two thirds of these deaths could be prevented,

Bearing in mind that developed countries and areas of less access to immediate and proper care of newborns have lead to more neonatal deaths that can be prevented with this care,

Having considered that babies born to young mothers, light weight at birth, birth asphyxia, and birth trauma account for 80% of neonatal deaths and that these are all crucial factors to take into consideration for future research and death prevention purposes,

Acknowledging that Millennium Development Goal 4's call to reduce child mortality rates from 1990-2015 by two thirds reduced deaths of children under 5 by 6.7 million in twenty five years and that this should be taken into consideration and replicated to further reduce neonatal death in the future,

Endorsing actions such as "Every Newborn: An Action Plan to End Preventable Deaths" which highlights the prevention of neonatal deaths and finding ways to provide every method possible to prevent future neonatal deaths,

1. Encourages the modern registration of all births, stillbirths, and neonatal deaths to take place at hospitals and institutions where live births often take place, as well as country government's public endorsement of all births and infant deaths taking place outside of hospitals and institutions to be registered and recorded officially:
 - a. With all births, stillbirths, and neonatal deaths being logged into a database where names and identities will be kept private but genetic information is available for statistical and research purposes,
 - b. With the extended purpose of correctly recording the amount of neonatal deaths taking place in relation to the amount of births in a region,
 - c. With births which take place outside of the hospital to still be registered at the hospital by those who are involved in performing the birth;

2. Considers it desirable that women be encouraged by organizational campaigning to give birth in organized health facilities so that:
 - a. More births will be overseen by trained birth attendants,
 - b. Illnesses that the newborn possesses can be treated right away to avoid death from preventable disease,
 - c. The baby's breathing can be monitored and checked to avoid death from birth asphyxia,
 - d. The overall birth is as sanitary as possible and any methods of death or illness prevention can be used immediately;

3. Supports that girls at puberty age be taught antenatal and postnatal care in school so that they will be prepared to have children and aid if someone around is giving birth, and this way if postnatal care is inaccessible due to financial issues, the mother will know more about how to care for the child and prevent its early death, along with this prevention girls should also be taught the importance of:
 - a. Being immunized against tetanus and checked for HIV/AIDS prior to birth,
 - b. Avoiding smoking and alcohol during pregnancy,
 - c. Starting exclusive breastfeeding for the child as soon as possible;

4. Calls upon higher focus on eliminating poverty with actions such as the 2030 Agenda for Sustainable Development being adopted in more countries as infants born in developing or undeveloped countries have less chance of survival due to lack of proper resources to aid them in early development;

5. Urges that mothers be tested for HIV prior to giving birth and if tested positive given antiretroviral therapy to prevent infection for the child as well as counseling, instruction on proper breastfeeding methods, and designated oversight during birth to ensure it is sanitary.

Committee: United Nations International Children's Emergency Fund
Topic: Preventing Neonatal Deaths

Resolution B/3

ADDRESSING PREVENTING NEONATAL DEATHS

Conscious of the mortality rate of children in the first 28 days of life as 19 deaths in 1,000 live births as stated by the World Health Organization and UNICEF,

Bearing in mind that 3.3 million children die every year in the first 28 days of life,

Recognizing the 66% of neonatal deaths could be prevented with one visit from a skilled healthcare expert during the first 28 days of a child's life,

Concerned that 3 million out of the 3.2 million neonatal deaths could be prevented by low cost and low tech solutions as stated by the World Health Organization and reiterated by the UNICEF/WHO Joint Committee on Health Policy which met in Geneva on 27, January 1994,

1. Approves healthcare centers in developing countries:
 - a. Through mobile health centers,
 - b. Mobile training seminars by NGOs such as the International Rescue Committee and the Red Cross,
 - c. The regular supply of the low cost preventative measures to developing areas from the Global Health Investment Fund;

2. Designates mobile health centers placed strategically in central areas:
 - a. Placed in convenient areas for many villages or towns,
 - b. In case of emergency could act quickly in between villages,
 - c. Can reach out to more individuals in central locations rather than each separate community;

3. Considers the implementation of online data programmes in order to track the mortality rate in specific areas:
 - a. Such as the Korean Neonatal Network, a program put in place that already does this,
 - b. Expand to complete regions with subregions to exactly pinpoint the problem,
 - i. Such as a Southeast Asia map that can divide into sub regions with exact statistics,

- ii. To easily find the root of the problem,
 - iii. Tracks the main cause of the problem in specific locations so mobile health centers can be better equipped in the region where it will be located;
- 4. Instructs the training of community leaders in the fight against neonatal death:
 - a. Using business incentives,
 - i. Can jumpstart businesses in communities by training or loans,
 - ii. Trains people to work in industry or small businesses,
 - iii. Trains people to work in healthcare position in order for communities to fight back independently without relying on NGOs,
 - b. Mobile training units such as the Red Cross and the International Rescue Committee;
- 5. Urges the use of better birth techniques in order to maximize the baby's chance of survival:
 - a. By implementing sanitation services for birth centers and hospitals,
 - b. The sterilization of tools needed to give birth,
 - c. Antibiotics and Vaccines can be distributed by the Global Alliance for Vaccines and Immunization.

Committee: United Nations International Children's Emergency Fund
Topic: Preventing Neonatal Deaths

Resolution B/4

ADDRESSING PREVENTING NEONATAL DEATHS

Aware that most neonatal deaths are due to diseases and bad living conditions,

Endorsing resolution 2010/1 as it reaffirms the values and principles of health care, including equality, solidarity, social justice, and access to services,

Realizing that according to resolution A/HRC/27/31 the main causes of death between birth and five years include: low birth weight, lack of breastfeeding, undernutrition, overcrowded conditions, dirty water and food, and lack of sanitation,

Shocked that according to the Gates Foundation, in low-income communities, many newborns and mothers die during pregnancy and childbirth from conditions that can be easily prevented,

1. Encourages vaccinations to help prevent the spread of diseases to the baby by:
 - a. Having free it in community centers and clinics,
 - b. Highly promoting the positive effects for the adults and children,
 - c. Giving out shots like flu shots, measles vaccines and HIV prevention,
 - d. Handing off the responsibility of overseeing the vaccinations to organizations like the Red Cross and the Gates Foundation;
2. Expresses the need for free health clinics with the ability to deliver babies with:
 - a. Volunteer, medically trained midwives, like those from Work the World, there to walk the women through their pregnancies and deliver their babies,
 - b. The locations spread out across developing nations, especially rural areas where there is limited access to doctors,
 - c. The help of organizations like the National Association of Rural Health Clinics to open and run these clinics;
3. Stresses the need for antenatal care, or post birth care to help ensure healthy lives for the mother and child through:
 - a. A mandatory six checkups during the first three months of pregnancy,
 - b. Being handled in hygienic conditions,

- c. Being cared for by medically trained volunteers;
4. Authorizes research facilities pertaining to neonatal deaths and stillbirths that will:
 - a. Be located in large cities,
 - b. Be run like other facilities including the National Institute of Child Health and Human Department (NICHD),
 - c. These will have the goal of finding a permanent cure to neonatal deaths;
 5. Requests the assistance of volunteers for these medical centers which will:
 - a. Help deliver the babies and take care of them after birth,
 - b. Give out the vaccinations,
 - c. Go out to villages to analyze what is needed for the community to be safer for infants and inform parents on how to keep their children healthy;
 6. Endorses the usage of baby cribs, as it is safer than sleeping in the parents' bed because it can be dangerous when babies: sleep face-down, get stuck in the mattress, and babies getting their heads stuck in the head boards;
 7. Urges free education to parents about risks of childbirth and how to avoid them in:
 - a. Community centers, classes run by volunteers and organizations like Still-Life Canada,
 - b. Programs that will be once-a-week to anyone interested,
 - c. Pamphlets with all of the information covered in these classes.

Committee: United Nations International Children's Emergency Fund
Topic: Preventing Neonatal Deaths

Resolution B/5

ADDRESSING PREVENTING NEONATAL DEATHS

Understanding the lack of required treatments to prevent neonatal deaths that occur in developing and povish nations often due to, but not limited to, Prematurity (causing particularly respiratory and neurological conditions) Congenital abnormality, Obstetric complications, and infection,

Reaffirming the document of Committing to Child Survival: A Promise Renewed – Progress Report 2014 which focus' on the prevention of neonatal deaths, which account for 44% of all deaths under the age of 5, through key interventions for mothers and their children, and discusses levels and trends of neonatal deaths since 1990,

Reaffirming the UNICEF/WHO joint committee on health policy on its special session, document E/ICEF/1994/L.10 which pursues all fields relating to vaccines to further develop and test by joining the WHO/UNDP program for vaccine development and the joint Children's Vaccine Initiative,

Concerned regarding the neonatal deaths occurring worldwide and the slow decreasement of such deaths, In 2015 around 2.7 million babies were deceased while still in the neonatal age period, decreasing from only 5.1 million deaths in 1970;

1. Calls upon increased global immunization coverage on children within the neonatal age and increasing low cost yet highly effective vaccinations through the system created in the document E/ICEF/1994/L.10:
 - a. Resources would be obtained from donors such as World Bank, USAID, NGOs and the participation of the industry;
 - b. Consistent resources even in times of economic lows and recession would be acquired through organizations working in synergy and streamlining their vaccine policies and activities,
 - c. Absence of resources would also be prevented by holding nations accountable to their commitment of health, welfare and quality of life for all;
2. Encourages the use of and the testing of new, modern technology and medications to prevent neonatal deaths, such as applying topical chlorhexidine to the umbilical cord with

hopes of reducing omphalitis which often results in neonatal death in developing countries. Also using tetanus toxoid to prevent neonatal tetanus which can result in bone fractures and possibly even death:

- a. With ample testing thoroughly done by registered scientists to ensure safety,
 - b. Importance of new medications will be increased and made of higher value through media campaigns and billboards, funded through NGOs,
 - c. No unsafe and unsanitary medications will be used or distributed with monitoring done by the FDA;
3. Emphasizes the importance of an ample amount of care directed towards the infant through media campaigns and the distribution of statistics regarding the importance of care through all related public documents:
- a. Issue regarding the lack of funding will be dealt with through NGOs,
 - b. Enforcement of care will be done through punishments directed towards those who lack enough care for the individual such as, but not limited to, jail and fines,
 - c. NGOs will be set up and used to care for neonatal children without caring guardians;
4. Reaffirms that charges and accusations of manslaughter will be held upon those who are responsible for the infant that deceased due to inadequate and insufficient treatment and care:
- a. Will be held by legal judges as soon as possible and in any official court room available,
 - b. Each case will be treated separately and without prejudice, c. Investigations will be thoroughly conducted;
5. Designates specific events for awareness spreading and funding opportunities specific to the decreasing of preventable neonatal deaths to be held, as well as educating the general public, however specifically the younger population that will be responsible for future generations:
- a. Uses non governmental organizations such as teachers without borders and roomtoread,
 - b. Education will be provided for free through fundings,
 - c. importance of schooling will be increased and made of higher value through media campaigns and billboards, funded through NGOs;
6. Recognizing the importance of creating better and more improved schooling and training of professionals in the medical field to diminish the amount of innocent preventable neonatal deaths:

- a. All professionals shall be trained adequately to perform at an acceptable level and assist with the prevention of disease,
- b. More applicable curriculum shall be established to further improve fieldwork,
- c. supervision of those being trained shall be increased to ensure the advancement of only eligible individuals.