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Presentation by Mr. James P. Grant
Executive Director of the United Nations Children's Fund (UNICEF)
to the
American Academy of Pediatrics
Symposium on Children and Human Rights

New York
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I am pleased to open this discussion on what pediatricians can do in the realm of children and human rights. The immediate answer, of course, is "very much!" By virtue of your profession you are already involved in this issue; you and your colleagues worldwide have a greater impact than perhaps any other professional group on how a society provides for the health, development and protection of its children.

You are situated very powerfully in relation to children's rights, and a distinct responsibility comes with the territory. Today that responsibility is shaped by mutually opposing forces: on one hand are grim conditions - from unnecessary mass child death, to a sad litany of abuses and injustices toward children; on the other are new and heightened opportunities to alleviate these conditions. This afternoon I will focus on two areas of historically unprecedented opportunity - opportunities which imply tremendous challenge. In each case, the key element is leadership action by pediatricians.

The first arena involves the biggest abuse of children in our times - the tragic reality that still today 38,000 young children die each day, and a comparable number are disabled for life, largely from the economic and social violence of benign neglect.

The lives of the great majority of these children who die will be lost to diseases which they would easily survive if they were in your care. Tens of thousands of child lives will be lost unnecessarily this week, for example, to the dehydration associated with diarrhoea.

We know that the scientific and technical knowledge already exists in your hands, as pediatricians, to prevent and to cure the major killers of children everywhere on our planet. You have this knowledge and these skills, and have employed them daily.

The greater question before us, and the greater challenge to you as physicians to children, is how to ensure that this knowledge is effective in reaching the millions upon millions of children - in fact, the majority of the world's children - who you - and your several hundred thousand colleagues around the world - will never see in your offices or in your hospital wards.

The International Pediatrics Association (IPA), at its World Congress in Manila in 1983, passed a resolution acknowledging that:

"There exist low-cost, highly effective health technologies for the prevention and treatment of (the major causes) of death and disability, in particular by the use of growth charts, of immunization, of oral therapy for diarrhoea, and by the promotion of breast-feeding and safe weaning."

The resolution goes on to explain that:

"These effective health technologies can be applied on a wide scale, in the context of primary health care, employing, in particular, methods of mass communications and social organization, and ... the combination of technology, communication and social organization make possible a virtual Child Survival Revolution..."

Indeed, there is a miracle in the making, and we are participating in it together. As a dramatic demonstration of this new potential, the lives of millions of children - reaching 2 million in 1987 alone - have been saved, and thecriplings of millions more prevented, by nations which have mobilized to put today's low-cost solutions at the disposal of the majority of families.

The IPA resolved in Manila to commit itself to partnership in this effort, and to work at all levels with UNICEF, WHO and other allies. It called upon all regional, national and local pediatric societies and upon all individual pediatricians, to join in this effort. The IPA's commitment to child survival and development activities was reaffirmed and expanded at its next triennial congress in Honolulu in 1986.

While the means are now proven, hundreds of millions of families remain unreached by this potential for virtual revolution in child survival and development - a breakthrough which, by the year 2000, could reduce 1980's child death rates by half, save more than 100 million children from death and disablement, improve the health and nutrition of many hundreds of millions more, and slow population growth as well.

What can pediatricians do to close the vital gap between readily available health knowledge and technology and its use by those for whom it could make the life or death difference? Yours is a leadership role. You can:

-- Act, in your practices, your teaching, your writings, and your research to strengthen our knowledge and experience of how appropriate medical technology, through supportive social structures, can transform the death and disease patterns posed by the majorcriplers and killers of children. And ensure that the new views figure prominently in textbooks and curricula;

- Who else but you can advocate as credibly to political leaders and to national and local institutions? Given the influence that you wield, it is you who must take the lead among other professions and sectors who look rightfully to you as leaders. Are you willing to use your position to further the goals of the child survival and development revolution?
- It is you who can set standards within the health profession. When alternative treatments exist, choose the more widely applicable low-cost practice. Promote breastfeeding, the use of oral rehydration and growth monitoring in your own practice, and press the hospitals and medical schools with which you are affiliated to do likewise. The example set in the United States has tremendous influence on practices worldwide;
- Bring others into the growing Grand Alliances for Children. It is you who have by far the greatest ability to draw in and involve other doctors, nurses, and midwives. Vigourously spread the word and educate others on the situation and the historic opportunity for change on a vast scale;
- It is also you to whom the world must turn for ideas and for solutions to the difficult problems in extending other elements of basic health care to the previously unreachable poor of the world.

A second arena of unprecedented potential toward protecting children's rights exists in the new prospect for passage of an international Convention on the Rights of the Child. We have heard at this session of many abuses of child rights. The Convention, which is targeted for passage by the United Nations General Assembly during the fall of 1989, represents an opportunity to establish global norms not only to discern which rights children should be assured of, but in the responsibilities of governments to protect those rights. Passage of the Convention, in itself, will not mean that children's rights will be met nor that our responsibilities toward children will be fulfilled. Rather, it will mark a milestone in the journey toward these ends - a milestone that marks, not some singular path in an isolated corner of the world, but one that maps the path of honoring child rights for all peoples. It will establish a global standard.

Unfortunately, passage of the draft Convention on the Rights of the Child through the General Assembly in 1989 will not occur automatically. There are growing pains involved in advancing as a civilization - advancing to the point at which we acknowledge our responsibilities toward our ~~least~~ ^{most} vulnerable, and toward the future of our civilization. Adoption of the Convention will require an all-out effort by all people involved in issues having to do with the health and well-being of children.

In all communities, from village to national to international, people rightfully look to pediatricians for leadership and guidance in issues relating to children. Who else but pediatricians could so appropriately lead the effort for a timely adoption of the Convention?

In the United States, there is a need to gather political support to ensure that the government not only joins in a consensus vote for the adoption

of the Convention, but that it interacts positively and cooperatively in negotiations toward adoption of the Convention.

Pediatrics organizations and pediatricians are uniquely situated to impact this process.

As the Executive Director of the United Nations Children's Fund, I urge the American Academy of Pediatrics and I urge you as individual pediatricians:

- to form working groups to advise and mobilize the AAP to realize its capacity for influence and support;
- to ensure that your views are heard in Washington - by the State Department, by the President, and by your Representatives in Congress;
- to lobby locally throughout the nation for inclusion in both parties' platforms of a statement of intent regarding adoption of the Convention in 1989; and
- to raise awareness of child rights issues nationwide through dialogue in all appropriate fora.

In any civilization, morality must be brought into step with capacity. Today this means, at the least, that the mass deaths of children must be placed alongside slavery, racism and apartheid on the shelf reserved for those things which are simply no longer acceptable to humankind.

Each of us in our respective field has this responsibility - to see that morality does not lag far behind capacity. You pediatricians, thanks to the scientific and technological advances of recent years, have a whole new capacity - and a whole new credibility in advocacy because of your increased ability. Your challenge is how to ensure that this capacity is used; that people are empowered with self-health knowledge, and that governments and communities are under compulsion to facilitate fulfilling the human rights - including meeting basic human needs - of the world's children.