The Ageing of the UN Convention on the Rights of the Child

Philip E. Veerman
Psychologist with Bouman Mental Health Services (in Rotterdam) and independent expert of the juvenile courts, Den Bosch, the Netherlands

Introduction

With the celebrations of the 20th anniversary of the adoption of the U.N. Convention on the Rights of the Child in Geneva and other places in the world behind us (which mostly focused on achievements), it is important to point out that the first signs of ageing of this Convention can be noticed. This is not surprising because the modern world is changing fast and the U.N. Convention on the Rights of the Child reflects the image of childhood and world views of the drafting period (between January 1978 and November 1989). On January 18 1978 the Ambassador of Poland (then still the People's Republic of Poland) presented for the first time (at the U.N. Commission of Human Rights in Geneva) “the question of the Convention on the Rights of the Child” (Ek, 2007) and on November 20 1979 the U.N. General Assembly adopted the text of the Convention. Between these two dates the Convention was shaped. Much of how we looked at children in this drafting period still stands. However, in the light of developments in modern science and society (and consequently how our children and adolescents are behaving) we cannot afford to treat the text of the U.N. Convention on the Rights of the Child as ‘holy’ any longer. To illustrate how the Convention is no longer ‘up to date’ I look especially at the articles 17 (access to appropriate information), 24 (the right to the enjoyment of the highest standard of health and health services) and 33 (protection from illicit narcotic drugs).

Paradoxically, young people are behaving as adults (by twittering, sending SMS-messages, being active on the internet with on-line-gambling and gaming, drinking alcoholic beverages, smoking nicotine and using drugs). The problem does not seem that there is no information available to children, but for them to know how to make the right choice. Some educators even now plead passionately for media education as a special subject in schools. Many cable radio or TV...
stations cater especially to children or adolescents. A lot of children spend many hours a day in front of the TV screen, the computer screen or playing video games, and they have a cell phone with access to the internet. Where the drafters of the Convention had only just stopped working on their typewriter and had started to use a computer, had to pay for buying records, the new generation (the “dot com” generation) have already had computers available at kindergarten. Now many children play videogames, have a cell phone in the schoolbag and download free music from the internet. This is a total new reality where children are sometimes more up to data than their parents. At the time of the drafting of the Convention drinking among adolescents was probably less ‘normal’ then it is now and marketing (special) alcoholic beverages for adolescents was not as extensive as it is now. But also then adolescents were already drinking alcohol. The drafters of the Convention did not take sufficiently into account the fact that adolescents can already become addicted to alcohol. Article 24 – the child’s rights to health and health services – does not sufficiently address alcohol consumption or the misuse and addiction of youth to alcohol. Further, article 33 does not sufficiently address that children and adolescents themselves can become addicted to drugs. The focus of the drafters was on prevention (children were seen as one of the “vulnerable groups” on which prevention efforts should be focused). It was maybe hard for the drafters to imagine that children (like adults) could be addicted to alcohol or drugs.

Times are changing and even an uncontroversial article as article 1 (definition of the child) needs in my opinion to be reviewed in the light of new findings from modern neurobiological science and neuro-imaging (for instance MRI-scans). Thus, neuroscientists argue the case for expanding the period of special protection of childhood until 24 years of age (because the brain is growing until that age).

Adapting the Definition of the Child?

The U.N. Convention on the Rights of the Child considers “every human being below the age of 18 years” to be a child “unless, under the law applicable to the child, majority is attained earlier”. On both sides of the continuum (on the side of the minus nine months before birth and on the other side 18 years of age and above) biological and medical science forces us to take a fresh look at article 1 (the definition of the child). With new technologies (neuro-imaging, for instance the CT-scan) came new insights from medical science. We now know much more about the influence of stress in pregnancy, drinking, smoking nicotine and drug use (Nulman, 2001)\(^2\) during pregnancy and how this may have an influence on