



# NHSMUN

Background Guide | *CPD*

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**Analucia Tello**

**Executive Committee**

**Ana Margarita Gil**

**Ming-May Hu**

**Chris Talamo**

**Althea Turley**

Dear delegates,

I hope you are as excited as I am for NHSMUN 2026! I am looking forward to seeing both of these topics come to life through debate in March. My co-director Lauren and I have been working together to put together this BG for you in hopes of helping you get a first look into some of the many important issues that surround these topics.

I was born and raised in Mexico City. Something about me is that I love going to concerts and everything related to music. I also really enjoy reading, taking pictures, and spending time with my friends and family. I am currently pursuing a degree in law at Universidad Panamericana, as I am most interested in international law and human rights. I have always been passionate about identifying injustices and speaking up to fight them. I chose to study law because it allows me to help people fight their own battles, hearing their stories and backgrounds, acknowledging the reality that others live and the issues that currently invade our society, which is also why I became involved in MUN.

This is my fifth year participating in NHSMUN. I attended the conference as a delegate in my first and last years of high school. The first one was held online due to the pandemic. I was a Poland delegate in the World Health Assembly (WHA). Then as a senior, I was a Singapore delegate in the Legal Committee. After graduating from high school, I joined this conference now as part of the staff. In my first year on staff, I was an Administrative Assistant Director, and then I rejoined the next year as Director of Substantive Relations. This year I decided to take a leap into the substantive side of the conference since I was really looking forward to getting more involved in the diplomatic debate, as well as the study of issues that are currently taking place worldwide.

In this background guide you will be able to learn more about the diverse barriers that youth currently face when trying to access education in different countries around the world, as well as where they come from, alongside potential ways of addressing them through international collaboration and policymaking. You will also be able to identify the importance of addressing this issue and some of the international efforts that have been made so far to do so. This will allow you to get a glimpse of this committee's scope and hopefully serve as a guide for you in preparation for the debate up till March.

I cannot wait to hear all the amazing ideas and solutions that you will bring into the committee sessions. I know you will all thrive in debate; your hard work does not go unnoticed. Please feel free to reach out to me if you have any kind of questions or concerns, or even if you just want to chat about Harry Styles or the next Taylor Swift album. I am always happy to help!

Paloma Valencia  
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Dear delegates,

I am so happy to welcome you to the Commission on Population and Development! My name is Lauren Schwach, and I am excited to be your Director for Session 2. Paloma and I are so passionate about both of these topics, and hope that you all enjoy researching them as much as we did!

This will be my fifth NHSMUN conference! I joined my high school's MUN club as a freshman and later participated in three conferences as a delegate. I represented Guyana in ECLAC, then Nepal in UNHRC, then finally Guatemala in UNESCO. I remember coming home after my first conference and telling my family that it was the best experience I had ever had. While debating, writing, and researching these topics is both fun and important, my favorite part of NHSMUN was getting to talk to and learn from people my age who came from all around the world. Getting to make cross-continental best friends is a rare and beautiful opportunity. This is one of the many reasons why I joined staff as an Assistant Director for the Commission on the Status of Women last conference and am happily back to direct CPD this year!

I am a New Yorker through and through, having been born and raised in NYC. I also go to school at Stony Brook University in Long Island, NY! I am currently a sophomore majoring in psychology with a minor in theater arts. On campus, I am on the board of two student organizations, including one of my school's theater clubs and our American Sign Language club! I also volunteer for my honors program as a student mentor, assisting new students in their transition to college. I am extremely passionate about mental health and neuroscience. I hope to become a child psychologist one day! Outside of school and NHSMUN, I enjoy many hobbies relating to music and art. I have been doing theater since I was little, and love to sing and play the ukulele. I also enjoy anything crafty I can get my hands on, including crochet, painting, and bracelet making.

"Youth Access to a Comprehensive Education" and "Impact of Global Inequalities on Birthrates" are two important topics for human rights progress. I am so excited to see your research and ideas! Please feel free to contact Paloma or I at any time with any questions on these topics, we are an email away!

Best,

Lauren Schwach

CPD Director, SII

[nhsmun.cpd@imuna.org](mailto:nhsmun.cpd@imuna.org)



## A NOTE ON RESEARCH AND PREPARATION

Delegate research and preparation is a critical element of attending NHSMUN and enjoying the debate experience. We have provided this Background Guide to introduce the topics that will be discussed in your committee. We encourage and expect each of you to critically explore the selected topics and be able to identify and analyze their intricacies upon arrival to the conference.

The task of preparing for the conference can be challenging, but to assist delegates, we have updated our [Beginner Delegate Guide](#), [Advanced Delegate Guide](#), [Research Guide](#), and [Rules of Procedure Guide](#). In particular, these guides contain more detailed instructions on how to prepare a position paper and excellent sources that delegates can use for research. Use these resources to your advantage. They can help transform a sometimes overwhelming task into what it should be: an engaging, interesting, and rewarding experience.

To accurately represent a country, delegates must be able to articulate its policies. Accordingly, NHSMUN requires each delegation (the one or two delegates representing a country in a committee) to write a position paper for each topic on the committee's agenda. In delegations with two students, we strongly encourage each student to research each topic to ensure that they are both prepared to debate throughout the committee. More information about how to write and format position papers can be found in the Research Guide. To summarize, position papers should be structured into three sections.

**I: Topic Background** – This section should describe the history of the topic as it would be described by the delegate's country. Delegates do not need to give an exhaustive account of the topic. It is best to focus on the details that are most important to the delegation's policy and proposed solutions.

**II: Country Policy** – This section should discuss the delegation's policy regarding the topic. Each paper should state the policy in plain terms and include the relevant statements, statistics, and research that support the effectiveness of the policy. Comparisons with other global issues are also appropriate.

**III. Proposed Solutions** – This section should detail the delegation's proposed solutions to address the topic. Descriptions of each solution should be thorough. Each idea should clearly connect to the specific problem it aims to solve and identify potential obstacles to implementation and how they can be avoided. The solution should be a natural extension of the country's policy.

Each topic's position paper should be **no more than 10 pages** long double-spaced with standard margins and 12 point font size. This is a maximum; **3–5 pages per topic is often a suitable length**. The paper must be written from the perspective of your assigned country and should articulate the policies you will espouse at the conference.

Each delegation is responsible for submitting position papers on or before **February 20, 2026**. If a delegate wishes to receive detailed feedback from the committee's dais, a position must be submitted on or before **January 30, 2026**. The papers received by this earlier deadline will be reviewed by the dais of each committee and returned prior to your arrival at the conference. Instructions on how to submit position papers will be shared directly with faculty advisors.

Complete instructions for how to submit position papers will be sent to faculty advisers via email. If delegations are unable to submit their position papers on time, please contact us at [nhsmun@imuna.org](mailto:nhsmun@imuna.org).

**Delegations that do not submit position papers will be ineligible for awards.**

## COMMITTEE HISTORY

In 1994, the United Nations convened an International Conference on Population and Development (ICPD) to discuss pertinent universal demographic issues, such as immigration, infant mortality, birth control, family planning, women's education, and protecting women from unsafe abortion practices.<sup>1</sup> From this Conference, a resulting Programme of Action was born. This presents actionable items in broad categories such as sustainable development, gender equity, and urbanization. These action items, and the Programme as a whole, re-envisioned population development by emphasizing individual needs instead of broad demographic and developmental goals. It assessed the intersections of economic, social, and political progress while promoting sustainable developmental growth. The Programme also focused heavily on pervasive inequalities in income, gender, education, and health.<sup>2</sup>

The General Assembly of the United Nations designated the newly named Commission on Population and Development (CPD) to provide oversight on the implementation of the Programme of Action in General Assembly Resolution 49(XLIX) on 19 December 1994.<sup>3</sup> The Commission's responsibility is to monitor, review, and assess the implementation of the Programme of Action at national, regional, and international levels. The Commission submits non-binding recommendations to the Economic and Social Council (ECOSOC) on population trends, developmental strategies and policies on how to best follow the Programme of Action.<sup>4</sup>

The United Nations Population Fund (UNFPA) is a frequent CPD collaborator also tasked with monitoring and implementing the ICPD.<sup>5</sup> The UNFPA helps Member States carry out the Programme of Action with technical support and guidance, while CPD monitors and assesses from a policy perspective. CPD identifies which aspects of initiatives have been successful toward the goals of the Programme of Action and draws attention to areas that need improvement. Additionally, the Commission responds to specific research and advisory questions from any country or region upon request, further emphasizing the global scale of their work.

The Commission is composed of 47 member states. These member states are elected by the Economic and Social Council for four-year periods based on geographic distribution. Member states have staggered terms that expire in different years. The Commission convenes annually at the UN Headquarters in New York. It publishes annual reports that detail research initiatives, advice, and plans of action on select themes. Non-governmental organizations (NGOs) are also welcome to attend the annual sessions and provide input for these publications.<sup>6</sup>

CPD offers a forum for the international community to discuss population and demographic trends. The commission not only leads debates on these issues but also serves as an important source of research on topics discussed.<sup>7</sup> With the objective of sustainable population development, the Commission has made significant contributions toward combating various forms of inequality and improving individual quality of life. Since its inception, the Commission has advised policy and prepared research on reproductive rights, reproductive health, HIV/AIDS, poverty, the environment, changing age structures, urbanization, and migratory patterns internationally and internally.

1 "International Conference on Population and Development (ICPD)," United Nations Population Fund, accessed September 24, 2025, <https://www.unfpa.org/icpd>.

2 International Conference on Population and Development, *Programme of Action* (Cairo: September 1994), ST/ESA/SER.A/149, [https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un\\_1995\\_programme\\_of\\_action\\_adopted\\_at\\_the\\_international\\_conference\\_on\\_population\\_and\\_development\\_cairo\\_5-13\\_sept.\\_1994.pdf](https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un_1995_programme_of_action_adopted_at_the_international_conference_on_population_and_development_cairo_5-13_sept._1994.pdf).

3 International Conference on Population and Development, *Programme of Action*.

4 "Commission on Population and Development," United Nations Population Division, accessed September 24, 2025, <https://www.un.org/development/desa/pd/content/CPD>.

5 CHOICE for Youth and Sexuality, *Commission on Population and Development*, (Amsterdam), <https://www.choiceforyouth.org/assets/Toolkits/youth-led-advocacy/CPD/CHOICE-CPD-Factsheet-1.pdf>.

6 "Resolutions and Decisions of the Commission on Population and Development," United Nations Population Division, accessed September 24, 2025, <https://www.un.org/development/desa/pd/content/resolutions-and-decisions-commission-population-and-development>.

7 United Nations Population Fund, "International Conference on Population and Development (ICPD)."



# Youth Access to a Comprehensive Education

Photo Credit: Basile Morin

Childhood itself, as we understand it today, is a recent social invention. For many years, children were viewed simply as “smaller adults” who did not require much special treatment. Many still had to work and did not universally have nurturing or education. Now, education is universally recognized as a cornerstone of human development and a fundamental human right. Article 26 of the Universal Declaration of Human Rights (UDHR) declares that “everyone has the right to education,” which indicates learning should be accessible and encouraged.<sup>1</sup> Education encompasses much more than just sharing knowledge. Yet, seventy-five years after the UDHR was adopted, millions of people still lack an education.<sup>2</sup>

Today, approximately 251 million children and youth are out of school worldwide. More than half

live in Sub-Saharan Africa.<sup>3</sup> Even children who do attend school miss educational milestones. Many children in school still fail to achieve basic literacy and numeracy skills. This gap has been described by UNICEF as a global learning crisis and undermines one’s chances for a productive future.<sup>4</sup> The consequences of lacking comprehensive education are far-reaching. Children left without education are far more likely to face unemployment, chronic poverty, poor health, and exclusion from civic life.<sup>5</sup> In turn, societies lose the productivity, innovation, and stability which educated populations bring. Education is a powerful demographic driver, since it influences fertility rates, health outcomes, migration patterns, and workforce development.

International efforts to address this crisis span decades. The World Conference on Education for All

happened in Jomtien, Thailand, in 1990, the Dakar Framework came about in 2000, and UNICEF’s current Every Child Learns strategy started in 2019.<sup>6</sup> Through this and more, governments and institutions have repeatedly committed to providing inclusive, equitable, and quality education for all.

However, entrenched barriers against education remain in various sectors and for particular individuals, despite these declarations and meetings. Obstacles to equal educational outcomes include discrimination, conflict, weak governance, and economic inequality. Children will continue to be denied their right to learn until these factors are mitigated. Thus, in committee, delegates should strive to find sustainable solutions to meet the varied educational needs of all young people.

## TOPIC BACKGROUND

### Historical Background and Global Frameworks

The modern push for collaboration toward universal

education began in 1990. Delegates from 155 countries and more than 150 organizations gathered in Jomtien, Thailand, for the World Conference on Education for All.<sup>7</sup> Over a thousand

participants signed the World Declaration on Education for All and the Framework for Action to Meet Basic Learning Needs. These documents emphasized that education was not limited to

<sup>1</sup>United Nations General Assembly, Universal Declaration of Human Rights, Resolution 217A (III), A/RES/217(III)(December 10, 1948).

<sup>2</sup> “251M Children and Youth Still out of School, despite Decades of Progress (UNESCO Report),” UNESCO, 2024, [www.unesco.org/en/articles/251m-children-and-youth-still-out-school-despite-decades-progress-unesco-report](http://www.unesco.org/en/articles/251m-children-and-youth-still-out-school-despite-decades-progress-unesco-report)

<sup>3</sup> UNESCO, “251M Children and Youth Still Out of School.”

<sup>4</sup> UNICEF, “Nearly 240 Million Children with Disabilities around the World, UNICEF’s Most Comprehensive Statistical Analysis Finds,” *press release*, 2021, [www.unicef.org/press-releases/nearly-240-million-children-disabilities-around-world-unicefs-most-comprehensive](http://www.unicef.org/press-releases/nearly-240-million-children-disabilities-around-world-unicefs-most-comprehensive).

<sup>5</sup> “What Is the Connection between Education and Poverty?,” Sustainable Development Goals - Resource Centre, June 24, 2020, [sdgresources.relx.com/features/what-connection-between-education-and-poverty](https://sdgresources.relx.com/features/what-connection-between-education-and-poverty)

<sup>6</sup> “World Programme of Action for Youth,” *Economic & Social Affairs*, United Nations, 2010, [www.un.org/esa/socdev/unyin/documents/wpay2010.pdf](http://www.un.org/esa/socdev/unyin/documents/wpay2010.pdf).

<sup>7</sup> “World Declaration on Education for All and Framework for Action to Meet Basic Learning Needs,” UNESCO, March 1990, [unesdoc.unesco.org/ark:/48223/pf0000127583](http://unesdoc.unesco.org/ark:/48223/pf0000127583).

literacy and numeracy. Education also encompasses life skills and civic participation. Governments, families, and communities were urged to share responsibility for ensuring every child's right to learn. The conference also set an ambitious agenda for expanding educational access, improving learning quality, and reducing inequalities.

By 2000, it was clear that progress was mixed. UNESCO organized a summit, held in Dakar, Senegal, that brought together governments, NGOs, international organizations, and stakeholders to review the decade since Jomtien. The Dakar Framework for Action painted a sobering picture. At that time, over 113 million children were still out of school, 880 million adults remained illiterate, and gender discrimination continued to limit many opportunities for youth.<sup>8</sup> The Forum called for “a massive and detailed review of the state of basic education in the world” and committed to six Education for All goals to be achieved by 2015. The challenges identified were relevant to that time. They included the collapse of communism in Eastern Europe, which reshaped educational systems, and the devastating spread of HIV/AIDS, which disrupted schooling and placed new demands

on health education. This event also highlighted how Sub-Saharan Africa and South Asia continued to face major enrollment gaps, while conflict-affected regions carried a disproportionate share of out-of-school children.

The World Education Forum is currently the largest meeting on education worldwide.<sup>9</sup> It is held in London every year, with the latest one in May 2025. The Forum focused on topics surrounding inclusive, responsive, and comprehensive education. Achieving this would include sustainable socio-economic growth, as well as technology and international collaboration for solutions. Most importantly, leaders at the Forum proposed new strategies to effectively improve education as a whole.<sup>10</sup> However, financing challenges persist in many parts of the world. Economic downturns, such as the 2008 financial crisis, continually demonstrate how education budgets are vulnerable to global shocks.

This committee, the Commission on Population and Development (CPD), was created in 1946. It has integrated educational outcomes into its reviews of population and development for years. The 1994 International Conference on Population and Development

(ICPD), whose Program of Action the CPD monitors, emphasized that universal access to education is especially important for women and girls. It is key to lowering infant and maternal mortality, empowering women, and achieving sustainable development.<sup>11</sup> Evidence shows that each additional year of school for girls can reduce child mortality by up to 9 percent, while secondary education is associated with a significant reduction in fertility rates. These outcomes directly reflect how CPD's mandate links demographic change with social and economic progress.

Additional frameworks have since reinforced the global consensus. The World Programme of Action for Youth (WPAY), adopted by the UN General Assembly in 1995, remains a landmark. It identified education as one of 15 priority areas for youth policy.<sup>12</sup> WPAY stresses equal access, inclusive systems, and skills training. In 2019, UNICEF launched Every Child Learns, a 2019-2030 global strategy. It focuses on equitable access, improving learning outcomes, and safeguarding education in emergencies. This is particularly important for the most marginalized individuals. Both WPAY and Every Child Learns guide international cooperation in

8 United Nations, “WORLD EDUCATION FORUM IN DAKAR, SENEGAL, 26-28 APRIL TO BOOST DRIVE FOR EDUCATION FOR ALL,” *Meetings Coverage and Press Releases*, April 11, 2000, [press.un.org/en/2000/20000411.soc4543.doc.html](http://press.un.org/en/2000/20000411.soc4543.doc.html).

9 “British Council Education World Forum 2025,” British Council, June 16, 2025, [news.britishcouncil.org/en-gb/education-world-forum-2025](https://news.britishcouncil.org/en-gb/education-world-forum-2025).

10 British Council, “British Council Education World Forum 2025.”

11 United Nations, *Programme of Action of the International Conference on Population and Development* (Cairo, 5-13 September 1994), A/CONF.171/13/Rev.1, 1995, [www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un\\_1995\\_programme\\_of\\_action\\_adopted\\_at\\_the\\_international\\_conference\\_on\\_population\\_and\\_development\\_cairo\\_5-13\\_sept\\_1994.pdf](http://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un_1995_programme_of_action_adopted_at_the_international_conference_on_population_and_development_cairo_5-13_sept_1994.pdf).

12 “Every Child Learns,” *UNICEF Education Strategy 2019–2030*, United Nations, 2020, [www.unicef.org/media/59856/file/UNICEF-education-strategy-2019-2030.pdf](https://www.unicef.org/media/59856/file/UNICEF-education-strategy-2019-2030.pdf).

2025. Beyond UN frameworks, NGOs and non-state actors such as Save the Children have played important roles in delivering education services. Innovation in the private sector also reshapes how learning is delivered.

We currently have the largest youth generation in history, with about 1.8 billion people between ages 10 and 24.<sup>13</sup> Therefore, ensuring access to education is not only a human right but also a demographic necessity for so many young people. CPD reports note that when youth lack education, this heightens many personal risk factors. When educated, people are more likely to be productive, healthy, and drive sustainable development. Recently, COVID-19 created the largest disruption to education in history, affecting over 1.6 billion learners. Presently, climate change and displacement increasingly threaten educational access. In recent sessions, CPD has therefore urged states to integrate education into policies on migration, labor force development, and gender equality. It is essential that education remains at the heart of population and development strategies.



Child with visual impairment in school (Credit: Awachirac)

## Educational Inclusion

Quality education and reduced inequalities are two key Sustainable Development Goals within the United Nations 2030 Agenda.<sup>14</sup> However, specific obstacles prevent certain groups of people from receiving basic education. In some cases, it comes from the way education is protected or not within a country. Inclusive education is not simply about access to schools; it is about ensuring that all children, regardless of background or ability, can learn on equal terms.

Discrimination, whether based on poverty, gender, disability, ethnicity,

language, or sexuality, continues to deny millions an education. When young people are excluded from education, many end up without jobs or opportunities, which can create instability and prevent societies from benefiting from their potential. The ICPD Program of Action explicitly ties educational equity to gender equality and reproductive health outcomes.

Addressing these inequities requires structural reforms. Globally, around 16 percent of the population lives with some form of disability, including 240 million children.<sup>15</sup> These youth are among the most likely to be

<sup>13</sup> United Nations, *Youth*, United Nations Sustainable Development, accessed September 18, 2025, [www.un.org/sustainabledevelopment/youth](http://www.un.org/sustainabledevelopment/youth).

<sup>14</sup> “Transforming Our World: The 2030 Agenda for Sustainable Development,” United Nations Department of Economic and Social Affairs, 2015, [sdgs.un.org/2030agenda](http://sdgs.un.org/2030agenda).

<sup>15</sup> “Disability” *Health topics*, World Health Organization, June 16, [www.who.int/health-topics/disability](http://www.who.int/health-topics/disability); UNICEF, “Nearly 240 Million Children with Disabilities around the World, UNICEF’s Most Comprehensive Statistical Analysis Finds,” *press release*, 2021, [www.unicef.org/press-releases/nearly-240-million-children-disabilities-around-world-unicefs-most-comprehensive](http://www.unicef.org/press-releases/nearly-240-million-children-disabilities-around-world-unicefs-most-comprehensive).

excluded. In the United States, only 21 percent of adults with disabilities hold a bachelor's degree, compared to 39 percent overall.<sup>16</sup> Children with disabilities in low-income countries are 10 times less likely to attend school, compared to peers without disabilities. Additionally, during COVID-19, children with disabilities were 2–3 times less likely to access remote learning platforms due to lack of adapted technologies.<sup>17</sup> When women with disabilities complete higher education, their labor force participation rises by over 20 percentage points, which directly contributes to national development.

The Convention on the Rights of Persons with Disabilities (CPRD) reframed disability as a social rather than medical issue. It emphasized that barriers are created by environments and institutions rather than by impairments alone.<sup>18</sup> In Article 2, the CPRD's principle of “universal design” requires spaces and systems to be accessible from the outset.<sup>19</sup> Several countries have taken steps to apply these principles. The countries who invest

in inclusive education systems see measurable progress with both quality education and reduced inequalities targets.

Sweden, for example, ensures that public spaces are easy for everyone to use, including those with disabilities. The Swedish Planning and Building Act says that all buildings and construction plans must follow universal design, so schools and other public spaces are built as the CPRD calls for.<sup>20</sup> Other countries have also taken positive action. Mexico amended its civil

*Globally, around 16 percent of the population lives with some form of disability, including 240 million children.*

code to ensure that people with disabilities have equal legal rights.<sup>21</sup> Nepal's 2014 Consolidated Equity Strategy introduced an “Equity Index” to track marginalized groups

and direct resources accordingly. By 2019, Nepal integrated this system into national planning, and today 97 percent of its children are enrolled in primary school.<sup>22</sup> Nepal used this tool, with help from the Ministry of Education, UNICEF, the World Bank, and the Global Partnership for Education, to support students who were left behind.

Exclusion extends beyond disability. According to the OECD and the World Bank, there are four main target groups: individuals with low income, women, groups with a minority status related to ethnicity, linguistic, religion, culture, age, or residence, and people with disabilities.<sup>23</sup> LGBTQ+ youth remain vulnerable worldwide as a consequence of discrimination, on the basis of hate or intolerance against their community. Global surveys suggest that 45 percent of students experience bullying in schools, though this varies by region. About 44 percent of LGBTQ+ youth aged 15 to 17 in the European Union felt their rights were rarely or never supported at school, while in Sub-Saharan Africa,

16 “Ready, Willing, but Still Underemployed,” National Association of Colleges and Employers, 2021, [www.nacweb.org/diversity-equity-and-inclusion/individuals-with-disabilities/ready-willing-but-still-underemployed/](http://www.nacweb.org/diversity-equity-and-inclusion/individuals-with-disabilities/ready-willing-but-still-underemployed/).

17 United Nations Children's Fund (UNICEF), *Seen, Counted, Included: Using Data to Shed Light on the Well-Being of Children with Disabilities* (New York: UNICEF, November 2021), [data.unicef.org/wp-content/uploads/2022/12/Disabilities-Report\\_11\\_30.pdf](http://data.unicef.org/wp-content/uploads/2022/12/Disabilities-Report_11_30.pdf)

18 United Nations General Assembly, Convention on the Rights of Persons with Disabilities, A/RES/61/106 (December 12, 2006), [www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities](http://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities)

19 “Article 2 – Definitions,” United Nations Department of Economic and Social Affairs, 2022, [www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-2-definitions.html](http://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-2-definitions.html).

20 Sidse Grangaard, Per-Olof Hedvall, and Inger Marie Lid, “Universal Design and Accessibility as an Act or a State – a Comparison of Policies in Norway, Sweden, and Denmark,” *Studies in Health Technology and Informatics*, (November 18, 2024): [doi.org/10.3233/shiti240976](https://doi.org/10.3233/shiti240976).

21 “Mexico: National Code of Civil and Family Procedures Is Now in Effect,” DLA Piper, 2023, [www.dlapiper.com/en/insights/publications/2023/06/the-pacific-alliance-double-taxation-avoidance-convention-enters-into-force](http://www.dlapiper.com/en/insights/publications/2023/06/the-pacific-alliance-double-taxation-avoidance-convention-enters-into-force); Cámara de Diputados del H. Congreso de la Unión, “Código Nacional de Procedimientos Civiles y Familiares” June 7, 2023, [www.diputados.gob.mx/LeyesBiblio/pdf/CNPF.pdf](http://www.diputados.gob.mx/LeyesBiblio/pdf/CNPF.pdf).

22 “Disability-Inclusive Education Practices in Nepal,” *UNICEF Regional Office for South Asia*, August 2021; <http://202.45.146.126:8080/bitstream/123456789/191/1/DISABILITY%20-INCLUSIVE%20EDUCATION%20PRACTICES%20IN%20NEPAL.pdf>.

23 Salmi and D'Addio, “Policies for achieving inclusion in higher education.”

35 percent of LGBTIQ+ students report never feeling safe at school.<sup>24</sup> Canada's Safe and Inclusive Schools Program, launched as part of its 2SLGBTQI+ Action Plan, addresses bullying and discrimination while training teachers to create safe environments.<sup>25</sup> Canada also supports community efforts to stop discrimination and reduce stigma.

In multilingual countries, children who are taught in a non-native language often drop out of school earlier. UNESCO estimates 40 percent of children globally are taught in languages they do not fully understand.<sup>26</sup> According to UNHCR, only 68 percent of refugee children are enrolled in primary school, 37 percent in secondary, and just 6 percent in higher education.<sup>27</sup> This shows how crisis-affected populations are left out. UNESCO data also shows that 129 million girls worldwide are out of school, with poverty, early marriage, and conflict as major barriers. Girls denied secondary education are more than twice as likely to marry before 18.<sup>28</sup> This is notable for population demographics, since early

marriage is associated with higher fertility and maternal mortality. Additionally, impoverished people may not have enough funds to send their children to school, or students may be forced to work instead of learning.

Many more exclusions are silent, rooted in bias and expectations rather than explicitly engineered denials. Such exclusions are harder to identify because they come from social bias. Therefore, combating all exclusions from education requires governments to collect data, monitor disparities, and intervene early.

## Criminal Activity and Youth Corruption

Violence is another powerful barrier preventing education. In Latin America, organized crime drives high homicide rates and domestic violence. In the Middle East and Sub-Saharan Africa, terrorism frequently disrupts schooling. When violence becomes a daily reality, schools close, families keep children home, and some

youths are drawn into gangs or armed groups. In Sub-Saharan Africa, thousands of children have been recruited by armed groups in the last decade and were forced to give up their education. Boko Haram's insurgency has also destroyed many schools in the past few years, leaving millions of children without access to education.<sup>29</sup> UNICEF reports that 2022 had the highest-ever number of verified violations against children, including killings, abductions, and attacks on schools.<sup>30</sup>

Latin America faces high rates of violence caused by organized crime, with increasing levels of homicides and domestic violence. Countries with high youth unemployment, combined with low education, often host a large young population with few opportunities for advancement. A 2019 National Survey of School Health from Brazil found that 11.6 percent of students missed school because of safety concerns, with public school students more than twice as likely to report this compared to private school students.<sup>31</sup> In Rio de Janeiro,

24 Cris Mayo, *LGBTQ Youth and Education*, 2nd edition, (New York: Teachers College Press, 2024), [books.google.com.mx/books?hl=en&lr=&id=XpGWEAAQBAJ&oi=fnd&pg=PR5&cdq=legal+barriers+for+youth+to+access+basic+education&ots=V-M-DNa2Hf&sig=2y8JzlpAsV1zfnovuZ4wA42QthY&redir\\_esc=y](https://books.google.com.mx/books?hl=en&lr=&id=XpGWEAAQBAJ&oi=fnd&pg=PR5&cdq=legal+barriers+for+youth+to+access+basic+education&ots=V-M-DNa2Hf&sig=2y8JzlpAsV1zfnovuZ4wA42QthY&redir_esc=y).

25 Enoch Leung et al., "Social Support in Schools and Related Outcomes for LGBTQ Youth: A Scoping Review," *Discover Education* 1, no. 1 (November 14, 2022): [doi.org/10.1007/s44217-022-00016-9](https://doi.org/10.1007/s44217-022-00016-9).

26 United Nations Educational, Scientific and Cultural Organization (UNESCO), *If You Don't Understand, How Can You Learn?* (Policy Paper No. 24, Global Education Monitoring Report, February 2016), [unesdoc.unesco.org/ark:/48223/pf0000243713](https://unesdoc.unesco.org/ark:/48223/pf0000243713).

27 United Nations High Commissioner for Refugees (UNHCR), *Refugee Education: Five Years on from the Launch of the 2030 Refugee Education Strategy* (Geneva: UNHCR, September 2024), <https://www.unhcr.org/sites/default/files/2024-09/refugee-education-report-2024.pdf>.

28 United Nations Educational, Scientific and Cultural Organization (UNESCO), "Key Data on Girls and Women's Right to Education," UNESCO, published 13 January 2023; last updated 7 March 2025, <https://www.unesco.org/en/articles/key-data-girls-and-womens-right-education>.

29 "Access to Education at Risk for More than 17 Million Children Displaced by Conflict and Violence," Internal Displacement Monitoring Centre, 2019, [www.internal-displacement.org/news/access-to-education-at-risk-for-more-than-17-million-children-displaced-by-conflict-and/](https://www.internal-displacement.org/news/access-to-education-at-risk-for-more-than-17-million-children-displaced-by-conflict-and/).

30 United Nations Security Council, "Highest-Ever Number of Violations against Children Verified in 2022, Briefer Tells Security Council, as Speakers Champion Reintegration, Education," press release SC/15343, July 5, 2023, [press.un.org/en/2023/sc15343.doc.htm](https://press.un.org/en/2023/sc15343.doc.htm).

31 Steffen Knoblach et al., "Crime-Associated Inequality in Geographical Access to Education: Insights from the Municipality of Rio de Janeiro," *Cities* 160 (February 27, 2025): 105818, <https://doi.org/10.1016/j.cities.2025.105818>.

a 2024 study showed that students living near high-crime streets lengthened their commute to school by nearly 49 percent, on average, to avoid danger.<sup>32</sup> While this reduced their exposure to violence, it also raised absenteeism and reduced learning time. Overall, youth who are excluded from education due to crime are more likely to remain in poverty, join informal or criminal economies, and perpetuate cycles of violence. Investing in secondary education reduces youth participation in violent groups, so promoting education can be both a security and development strategy.

Countries with high levels of street violence also generally have citizens who are more likely to experience conflict in a social setting.<sup>33</sup> Local communities thus play a key role in preventing such scenarios. Collaborating with the local police when needed, or creating safe spaces for youth and promoting positive activities within communities can help. It is also important for families not to normalize violence at a domestic level. Parents should be encouraged to have a violence-free

household for the safe development of their children. Some children may perpetrate violence as a result of experiencing violence, which compromises their safety and future opportunities.<sup>34</sup>

Even when schools exist and are technically accessible, violence can make students feel unsafe. Safety is needed for learning. If students see school as a place of danger, then their attendance, concentration, and achievement all decline. Violence in schools is a particular concern. This includes gun violence.<sup>35</sup> In the United States alone, there were 288 school shootings in the first six months of 2025, while South Africa reported six, Mexico eight, and Pakistan four.<sup>36</sup> Access to firearms amplifies the danger of an incident. Roughly 33-40 percent of American households with children own guns, with rates exceeding 65 percent in some US states.<sup>37</sup> The result is a generation of students who often regard school not as a safe haven but as a place of risk.

Gun violence can be carried out by students themselves. This deprives other students of

exercising their right to education. Students might also take their own lives in the place where they are supposed to be receiving education.<sup>38</sup> Combatting this requires firearm restrictions, campaigns that promote awareness in schools, and improvements in security conditions. Implementing effective violence reduction practices increases access to education and can save lives of these young students or prevent them from suffering severe traumas.<sup>39</sup> Exposure to gun violence can lead to depression, PTSD, anxiety and other mental health issues. It also affects academic performance. In some cases, it has been reported that it even causes students to drop out of school.

Education itself can reduce crime. Sweden's Comprehensive School Reform (1945–1970) demonstrated that each additional year of schooling lowered the likelihood of criminal convictions.<sup>40</sup> Programs like Chicago's "Becoming a Man," which provides counseling to redirect aggression into non-violent outlets, have shown measurable reductions in violent crime.<sup>41</sup> These

32 José Alejandro Muñoz Galeano, "Effects of High-Crime Environments on Educational Efficiency, a Spacial Case," Pontificia Universidad Javeriana Cali, (2021): <https://vitela.javerianacali.edu.co/items/5a66cc81-4083-4e04-8aff6-c3c10fac58d8>.

33 "The links between violence, inequality and productivity," 2021, [www.undp.org/sites/g/files/zskgke326/files/migration/latinamerica/undp-rblac-RHDR-UNDP\\_C04-EN.pdf](http://www.undp.org/sites/g/files/zskgke326/files/migration/latinamerica/undp-rblac-RHDR-UNDP_C04-EN.pdf).

34 Steffen Knoblach et al., "Crime-Associated Inequality in Geographical Access to Education: Insights from the Municipality of Rio de Janeiro"; "What You Need to Know about Ending Violence in and through Education," UNESCO, 2024, [www.unesco.org/en/articles/what-you-need-know-about-ending-violence-and-through-education](http://www.unesco.org/en/articles/what-you-need-know-about-ending-violence-and-through-education).

35 Dru Stevenson, *Gun Violence as an Obstacle to Education Equality*, The University of Memphis Law Review, vol. 50, [www.memphis.edu/law/documents/dru-stevenson-volume50\\_book4.pdf](http://www.memphis.edu/law/documents/dru-stevenson-volume50_book4.pdf).

36 "School Shootings by Country 2025," World Population Review, 2025, [worldpopulationreview.com/country-rankings/school-shootings-by-country](http://worldpopulationreview.com/country-rankings/school-shootings-by-country).

37 "Policies to Prevent Gun Violence in Schools," Rice University's Baker Institute for Public Policy, March 25, 2025, [www.bakerinstitute.org/research/policies-prevent-gun-violence-schools](http://www.bakerinstitute.org/research/policies-prevent-gun-violence-schools).

38 Anne Nassauer, "The Only Friend I Had Was My Gun': A Mixed-Methods Study of Gun Culture in School Shootings," ed. James C. Wo, *PLOS ONE* 20, no. 4 (April 23, 2025): e0322195, [doi.org/10.1371/journal.pone.0322195](https://doi.org/10.1371/journal.pone.0322195).

39 Arielle Jackson et al., "Educational Costs of Gun Violence Implications for Washington, DC," 2022, [www.urban.org/sites/default/files/2022-07/Educational%20Costs%20of%20Gun%20Violence.pdf](http://www.urban.org/sites/default/files/2022-07/Educational%20Costs%20of%20Gun%20Violence.pdf).

40 Ulrika Ahlsjö et al., "THE EFFECT OF EDUCATION POLICY ON CRIME: AN INTERGENERATIONAL PERSPECTIVE," 2025, [cowles.yale.edu/sites/default/files/2025-02/d2356R1.pdf](http://cowles.yale.edu/sites/default/files/2025-02/d2356R1.pdf).

41 Stevenson, *Gun Violence as an Obstacle to Education Equality*.

examples show that when schools are safe, accessible, and supportive, they can break cycles of violence.

## Effects on Human Health and Development

Education is directly related to health in general. Youth cannot get fully involved in traditional education systems if they have health related issues, such as chronic diseases or physical impediments. At the same time, there would be fewer quality health professionals if people do not have access to a comprehensive medical education.<sup>42</sup> Thus, both education and health are fundamental to individual children and a society's overall development.

Studies show that those with fewer than nine years of schooling face far greater health risks than peers who have twelve or more years of education.<sup>43</sup> The COVID-19 pandemic provided a stark example. In Spain, youth physical activity fell by 85 percent during lockdowns when students were not participating in school, while screen time soared. Health-focused fitness programs boost young people's brain health but are often overlooked in educational



Education in Ghana (Credit: Amuzujoe)

planning.<sup>44</sup> Children being out of school led to emotional and behavioral problems. Many students lost access to school meals, health screenings, and counseling services.<sup>45</sup> Therefore, children's health suffered after losing the nutrition, medical check-ups, and emotional support they counted on.

Mental health awareness is also often a secondary educational concern. In 2020, only about 7.3 percent of youth with mental health needs accessed services through schools, revealing serious gaps in support.<sup>46</sup> Even those who most

could have benefitted from mental health services at school were not accessing that care. Currently, about 12–30 percent of children suffer from a mental illness that might affect their education.<sup>47</sup> These conditions may be mild short-term problems like anxiety or depressive symptoms, or some might be diagnosed with severe and long-term anxiety disorders or major depression.

Governments have tried to integrate health into education systems. Colombia's National School of Public Health, established

42 Robert A. Hahn and Benedict I. Truman, "Education Improves Public Health and Promotes Health Equity," *International Journal of Health Services* 45, no. 4 (May 19, 2015): 657–78, doi.org/10.1177/0020731415585986.

43 Robert A. Hahn and Benedict I. Truman, "Education Improves Public Health and Promotes Health Equity."

44 Harold W. Kohl et al., "Physical Activity, Fitness, and Physical Education: Effects on Academic Performance."

45 Heather A. Shepherd et al., "The Impact of COVID-19 on High School Student-Athlete Experiences with Physical Activity, Mental Health, and Social Connection," *International Journal of Environmental Research and Public Health* 18, no. 7 (March 29, 2021): 3515–15, doi.org/10.3390/ijerph18073515.

46 Mylien T. Duong et al., "Rates of Mental Health Service Utilization by Children and Adolescents in Schools and Other Common Service Settings: A Systematic Review and Meta-Analysis," *Administration and Policy in Mental Health and Mental Health Services Research* 48, no. 3 (September 17, 2020): 420–39, https://doi.org/10.1007/s10488-020-01080-9.

47 Anne Richter et al., "Implementing School-Based Mental Health Services: A Scoping Review of the Literature Summarizing the Factors That Affect Implementation," *International Journal of Environmental Research and Public Health* 19, no. 6 (March 15, 2022): 3489, https://doi.org/10.3390/ijerph19063489.



Children learning to read at an early age. (Credit: Rrinaldy)

in the 1950s, institutionalized public health education.<sup>48</sup> However, there are still major gaps in access to health systems. Rural communities have more public health needs, but they have fewer resources to fulfill them. Additionally, rural areas around Medellin, Colombia are particularly affected because the refugee influx exacerbates existing public health challenges.<sup>49</sup> The Colombian government strives to make health access more equitable. They recently proposed increasing public funding to cover more of their population's health needs, strengthening public health services, and targeting rural areas or others

that have not received these sorts of resources in the past.

UNESCO also promotes comprehensive school-based health services as essential for adolescent well-being. The UNESCO strategy was designed to improve school health systems and encourage schools to support the physical and mental health of students.<sup>50</sup> School-based health centers are key to fulfill this goal, since they integrate health services into a pre-existing system. Students would not need to seek out healthcare if they could access it within their educational environment. School-based health centers have proven to increase youth access to healthcare,

especially in low-income areas.<sup>51</sup> These programs help keep students and teachers healthy. They also make sure people can get medical help if they need it while they are at school. Schools also may act as an alert system for abuse and neglect in one's home situation. Teachers and staff may notice warning signs and are often mandated reporters who provide a child with necessary interventions. Therefore, strengthening school-based health and counseling services also provide critical protection for vulnerable children.

Adolescence is a period of rapid physical and emotional change. Without adequate health and nutrition, learning can suffer. Conversely, education strengthens health systems by training professionals and promoting knowledge around health and wellbeing. Education systems which embed health services (like nutrition programs, counseling, and mental health care) are more comprehensive and effective. These aspects should also be considered in homeschooling and other non-formal education systems. This would improve learning outcomes and also enhance broader human development.

For the Commission on Population and Development (CPD), these links between education and health are especially

48 Fernando De la Hoz-Restrepo, "Public Health Education in Colombia: Influence on Public Policies," *Salud Pública de México*, Universidad Nacional de Colombia, 64, no. 6, nov-dic (November 23, 2022): 587–92, doi.org/10.21149/13217.

49 "Colombian Government Proposes Health Reforms to Improve Access and Raise Wages," Justice for Colombia, February 15, 2023, justiceforcolombia.org/news/colombian-government-proposes-health-reforms-to-improve-access-and-raise-wages/.

50 United Nations Educational, Scientific and Cultural Organization, *UNESCO strategy on education for health and well-being*, ED/GEM/MRT/2020/PP/43 (2022), doi.org/10.54675/MSST2323.

51 Michel Boudreaux, Jun Chu, and Brandy J. Lipton, "School-Based Health Centers, Access to Care, and Income-Based Disparities," *JAMA Network Open* 6, no. 9 (September 18, 2023): e2334532, pmc.ncbi.nlm.nih.gov/articles/PMC10507491/.

relevant. CPD's mandate emphasizes integrating population factors into development policy. Education is very influential in societal progress. Educated populations tend to have lower fertility rates, improved maternal and child health, and greater health literacy. All these outcomes directly advance population and development goals. The CPD supports healthier demographic transitions, reduced inequalities, and sustainable growth by ensuring youth access to a comprehensive education.

## Non-Traditional Education Systems

Traditional school systems remain the backbone of education, but they are not accessible to everyone. Formal education, defined as structured learning in recognized schools, excludes millions due to distance, cost, or discrimination. According to UNESCO, 251 million children and youth remain out of school, despite decades of investment.<sup>52</sup> A pressing concern is the number of young people classified as "NEET" (not in education, employment, or training). Studies show that aspects like health, addiction, social life, family, and environment are the

main reasons why some young people become NEET.<sup>53</sup> Based on this measure, the UK currently has an estimated 923,000 young people aged 16 to 24 who fall into this category.<sup>54</sup> This represents a significant loss of human capital and underscores the need for flexible education and training systems.

Schools offer not only academics, but also social development. Social interaction is a basic human need. Communication has a direct impact on the skills one acquires and their emotional well-being. People ages 10–24 are going through growth changes which make them more sensitive to social stimuli in general.<sup>55</sup> Thus, being left out socially has a negative impact on a person's development. It also affects behavioral health, leading to academic difficulties and low self-esteem. Virtual video calls, voice messages, and collaborative platforms are one way to promote social inclusion, but face-to-face interaction remains more effective for youth development. The growth of technology and globalization have had a big impact on education. Teaching methods and learning tools have changed a lot, especially now that young people can access information instantly. Thus, schools and teachers around the world

should strive to stay current and meet students' needs. Additionally, virtual options should complement, not replace, in-person social experiences- whenever possible.

Some youth can only get an education from home or online. Technology provides various tools that allow active long-distance interactions. This is an alternate solution for those who are unable to attend school physically. The International Telecommunication Union reports that 67 percent of the world's population uses the internet, including 80 percent of youth ages 15–24.<sup>56</sup> Radio, television, and online platforms have allowed millions to continue learning during crises. However, the digital divide is stark. Nearly half of rural populations lack reliable access, deepening inequality. Bridging this gap requires investment in connectivity, devices, and teacher training. Even the best digital resources cannot replace human elements of education. Teachers and fellow students provide empathy, guidance, and encouragement that are hard to replicate virtually.

International programs like the World Programme of Action for Youth (WPAY) have helped improve education by supporting school reforms and teacher training.

<sup>52</sup> UNESCO, "251M Children and Youth Still Out of School."

<sup>53</sup> Hamed Rahmani and Wim Groot, "Risk Factors of Being a Youth Not in Education, Employment or Training (NEET): A Scoping Review," *International Journal of Educational Research* 120 (2023): 102198, doi.org/10.1016/j.ijer.2023.102198.

<sup>54</sup> "Young People Not in Education, Employment or Training (NEET)," UK Office for National Statistics, May 22, 2025, www.ons.gov.uk/employmentandlabourmarket/peopleinwork/unemployment/bulletins/youngpeoplenotineducationemploymentortrainingneet/may2025.

<sup>55</sup> Louise Savoie, "Social Interaction: How Does It Help Kids?," Montessori Learning Institute, February 8, 2024, www.montessorilearninginstitute.com/social-interaction-how-does-it-help-kids.

<sup>56</sup> Tuhinsubhra Giri, "Technology as a Catalyst Driving the Youth Engagement in Global Development - Boon or a Bane?," International Development Blog, November 12, 2024, blogs.idos-research.de/2024/11/12/technology-as-a-catalyst-driving-the-youth-engagement-in-global-development-boon-or-a-bane/.

Even with these efforts, many young people still struggle to access education, especially those living in rural areas. Schools may be far away, and transportation is often unavailable, too expensive, or it can take hour-long trips. Thus, community literacy programs, accelerated classes for out-of-school youth, and flexible schedules for working children ensure that education adapts to diverse lifestyles. Peru, for example, has experimented with hybrid schedules for rural students, allowing them to attend school for two weeks and return home for two weeks to support family work.<sup>57</sup>

A home is someone's first place of learning.<sup>58</sup> Children begin to develop language and social skills before even entering school, if school is available. Thus, families are the first educators who support youth needs, foster communication,

respect cultural diversity, and create learning opportunities. These settings for non-formal education provide pathways beyond formal schooling. Those who are excluded from traditional systems, such as refugees, marginalized youth, or those reintegrating after prison benefit from social learning spaces. It helps individuals reconnect with society, strengthens communities, and contributes to national development. Therefore, delegates can encourage governments to invest in parenting programs, early childhood development, and community-based support. These non-formal systems can integrate marginalized groups like refugees, girls excluded from schools, and NEET youth.<sup>59</sup>

Education systems are more than just national responsibilities for the CPD. They are population factors with global consequences.

Since its creation in 1946, CPD has monitored how education shapes demographic change, migration, fertility, and employment. The International Conference on Population and Development (ICPD) in 1994 specifically highlighted universal access to education, especially for girls, as a cornerstone for achieving sustainable development.

Each year, CPD reviews data provided by the UN Population Division and UNESCO, using it to assess whether states are making progress in reducing inequalities. In recent sessions, CPD has emphasized the importance of digital equity and non-formal education systems as tools to reach marginalized groups, including refugees, rural populations, and persons with disabilities.<sup>60</sup>

## CURRENT STATUS

### Education in Conflict

Conflict is one of the most devastating barriers to education. Globally, one in three children within conflict zones are out of

school.<sup>61</sup> This is over 103 million children. Schools can be bombed, teachers flee, and families may understandably prioritize survival over learning. It is difficult to resolve armed conflicts quickly, so delegates of CPD must focus on

how to address the immediate gaps in affected children's educational resources.

According to UNESCO, there were an average of eight attacks on school buildings per day,

57 Ana Löwenberg, "Alternate Education for Rural Development: A Practical, Successful Solution," George Lucas Educational Foundation, October 23, 2015, [www.edutopia.org/blog/alternate-education-for-rural-development-ana-lowenberg-garcia-lorenzana](http://www.edutopia.org/blog/alternate-education-for-rural-development-ana-lowenberg-garcia-lorenzana).

58 Fernando Almeida and José Morais, "Non-Formal Education as a Response to Social Problems in Developing Countries," *E-Learning and Digital Media*, February 5, 2024, [doi.org/10.1177/20427530241231843](https://doi.org/10.1177/20427530241231843).

59 "The Impact of Early Home Learning Environment and Preschool Quality on School-Relevant Language Proficiency in Primary School," *Journal of Research in Childhood Education*, (2024): [doi.org/10.1080/002568543.2023.2301102](https://doi.org/10.1080/002568543.2023.2301102).

60 "Commission on Population and Development, Fifty-Eighth Session," UN Population Division, 2025, <https://www.un.org/development/desa/pd/events/CPD58>.

61 "One in Three Children in Conflict and Fragile Countries out of School – New Analysis," Save the Children International, 2024, [www.savethechildren.net/news/2024-review-one-three-children-conflict-and-fragile-countries-out-school-new-analysis](http://www.savethechildren.net/news/2024-review-one-three-children-conflict-and-fragile-countries-out-school-new-analysis).

worldwide, from 2022–2023.<sup>62</sup> Today, an approximate 473 million children live in a state of danger due to armed conflicts.<sup>63</sup> As a result, they are actively deprived of their right to live and develop in a safe environment. In such environments, aid becomes the main focus. Providing the survival basics like nutrition and medical attention sometimes come at the exclusion of education. And even when in a safer spot, children may remain at risk because of mental trauma from what they experienced.

In Gaza, over 90 percent of schools and universities have been destroyed through airstrikes, shelling, burning, and demolitions. This has left 658,000 children without education for more than 20 months.<sup>64</sup> In Ukraine, 70 percent of children lack access to basic needs, and at least 115,000 are out of school.<sup>65</sup> While 420,000 students continue learning online or with hybrid models, rolling blackouts and shelling often make access impossible. In Sudan, 90 percent of children are out of school due to civil war. UNICEF reports that 15 million need humanitarian assistance. This country is facing what the UN has described as the



**Children walking to school after 2012 conflict between Israel and Gaza**  
(Credit: UNRWA)

world's largest humanitarian and child displacement crises.<sup>66</sup>

Globally, violations happen against children each day. This includes killings, abductions, and attacks on schools, according to the UN Secretary-General's Annual Report on Children and Armed Conflict. The UN estimates at least 120,000 children have been killed or maimed by global wars since 2005, which is an average of almost 20 a day.<sup>67</sup> Climate-related disasters

also compound geopolitical crises. Since 2020, 62 million children have had schooling disrupted by climate shocks. For example, a 7.7 magnitude earthquake in Myanmar in 2025 displaced 5 million children and damaged 2,600 schools.<sup>68</sup> This exacerbated an already fragile humanitarian situation.

Education in emergencies is more than a right, it can be lifesaving. Schools provide stability, protection

<sup>62</sup> "UNESCO Sounds the Alarm on Global Spike in Attacks on Education," UNESCO, 2024, [www.unesco.org/en/articles/unesco-sounds-alarm-global-spike-attacks-education](https://www.unesco.org/en/articles/unesco-sounds-alarm-global-spike-attacks-education).

<sup>63</sup> "Countries in Conflict: Worst Places to Be a Child," Save the Children, 2024, [www.savethechildren.org/us/charity-stories/worst-conflict-affected-countries-to-be-a-child](https://www.savethechildren.org/us/charity-stories/worst-conflict-affected-countries-to-be-a-child).

<sup>64</sup> OHCHR, "Israeli Attacks on Educational, Religious and Cultural Sites in the Occupied Palestinian Territory Amount to War Crimes and the Crime against Humanity of Extermination, UN Commission Says."

<sup>65</sup> "From Crisis to Classroom: How the UN Supports Education in Conflict Zones," UN News, July 17, 2025, [news.un.org/en/story/2025/07/1165417](https://news.un.org/en/story/2025/07/1165417).

<sup>66</sup> "Sudan, 'the Most Devastating Humanitarian and Displacement Crisis in the World,'" UN News, February 15, 2025, [news.un.org/en/story/2025/02/1160161](https://news.un.org/en/story/2025/02/1160161).

<sup>67</sup> United Nations Children's Fund (UNICEF), "More Than 300,000 Grave Violations Against Children in Conflict Verified Worldwide in Past 18 Years," press release, June 4, 2023, [www.unicef.org/press-releases/more-300000-grave-violations-against-children-conflict-verified-worldwide-past-18](https://www.unicef.org/press-releases/more-300000-grave-violations-against-children-conflict-verified-worldwide-past-18).

<sup>68</sup> "Six Things to Watch in Myanmar in 2025," UNICEF Myanmar, 2025, [www.unicef.org/myanmar/stories/six-things-watch-myanmar-2025](https://www.unicef.org/myanmar/stories/six-things-watch-myanmar-2025).

from military recruitment, and psychosocial support. International law protects education, but in practice these protections are unevenly enforced. The Safe Schools Declaration, endorsed by more than 110 states, commits governments to safeguard education during armed conflict, but implementation remains inconsistent.<sup>69</sup> Recent conflicts have shown that school buildings and children are not safe in areas of fighting.

For the Commission on Population and Development (CPD), education in conflict zones is critical to its mandate. Conflict and displacement reshape population dynamics through forced migration, loss of human capital, and demographic imbalances. With 43.3 million people displaced worldwide in 2022, the highest on record, CPD has stressed that denying education to displaced and conflict-affected youth not only violates rights but also undermines long-term development and stability.<sup>70</sup>

Ensuring access to education in emergencies helps preserve the future economic and social benefits from young people. It also reduces the risks of a child's recruitment into armed groups and supports societal recovery once peace is restored.

### Case Study: Afghanistan and the Taliban Ban on Women's Education

Afghanistan represents one of the most extreme cases of systemic educational exclusion. Afghan women are now deprived of their right to education, as girls in Afghanistan cannot attend school

*The "Taliban's interpretation of Sharia cannot excuse acts that amount to crimes against humanity." This marked the first time there was an international prosecution for education-related persecution.*

past sixth grade. The ban began with women only being allowed to attend lessons if classes were separated from men. They also had to be taught by female teachers. Many schools could not adapt to this rule because they lacked teachers and resources. As a result,

most schools closed in September 2022. Many reopened in March 2023, but only for male students. Female educators also lost their jobs during this period. The United Nations has condemned these events.<sup>71</sup> This case study demonstrates how a country's laws can directly affect youth access to learning, instead of ensuring the UN priority of access to education for all youth.

The 2024 UN Women Afghanistan Gender Index found that Afghan women reach only 17 percent of their potential in decision-making and opportunity, compared to a global average of 60 percent. The bans extend beyond education. Women of any age cannot travel without a male guardian, cannot work in most sectors, and face restricted healthcare access since female doctors are increasingly scarce. Women are even restricted from speaking or showing their faces outside their homes.

The Taliban also stops women from taking part in culture. Culture is important for a complete education and one's personal development. However, in 2022, computer workers were told not to put movies or music on women's phones or devices. This blocks women from accessing cultural learning resources.<sup>72</sup>

69 "Safe Schools Declaration," Protecting Education in Insecurity and Armed Conflict, accessed September 12, 2025, [protectingeducation.org/wp-content/uploads/documents/documents\\_safe\\_schools\\_declaration-final.pdf](https://protectingeducation.org/wp-content/uploads/documents/documents_safe_schools_declaration-final.pdf).

70 United Nations Children's Fund (UNICEF), "Number of displaced children reaches new high of 43.3 million," press release, June 13, 2023, [www.unicef.org/press-releases/number-displaced-children-reaches-new-high-433-million](https://www.unicef.org/press-releases/number-displaced-children-reaches-new-high-433-million)

71 "Afghanistan: UN Experts Condemn Taliban Decision to Deny Girls Secondary Education," OHCHR, 2022, [www.ohchr.org/en/press-releases/2022/03/afghanistan-un-experts-condemn-taliban-decision-deny-girls-secondary](https://www.ohchr.org/en/press-releases/2022/03/afghanistan-un-experts-condemn-taliban-decision-deny-girls-secondary).

72 UNESCO, "Banned from Education: A Review of the Right to Education in Afghanistan."

The impact is devastating. Afghanistan's economy has collapsed, with 96 percent of the population at risk of falling below the poverty line by late 2024.<sup>73</sup> By the end of 2024, 3.3 million Afghans were displaced and 6.1 million were refugees.<sup>74</sup> This mass displacement has reshaped regional demographics, increasing pressure on neighboring countries like Pakistan and Iran while straining humanitarian systems. For CPD, such displacement illustrates how denying education fuels migration crises and destabilizes broader population development trends.

Underground schools have emerged, but families risk detention or worse if discovered. Reports indicate that Taliban authorities have targeted teachers and families running secret classes, and that schools continue to face regular attacks.<sup>75</sup> In February 2024, local media were also banned from broadcasting school lessons and social programs. Thus, women cannot even learn at home. The Chief Justice of the Supreme Court said a woman's place is at home, raising children.<sup>76</sup> This shows the education policy was created on the basis of sex. However, males are impacted by this policy too. There are fewer teachers overall since women are banned from the role.



**Nobiru Elementary School after a tsunami (Credit: Save the Children Canada)**

Additionally, Human Rights Watch reports that there is an “increased use of corporal punishment, reduced attendance rates, the elimination of subjects like arts, sports, English language, and civic education, a decline in educational quality, increased anxiety about attending school, and a loss of hope for the future” in Afghan males.<sup>77</sup>

In Afghanistan, breaking the law has previously led to radical punishments, such as lashing and other kinds of torture, and even public executions. In the past, women have been sentenced to

cruel punishments like the death penalty by stoning. All these penalties have been labeled as severe human rights violations by the UN.<sup>78</sup> International justice mechanisms have begun to respond to the situation overall. In January 2025, the International Criminal Court issued arrest warrants for Taliban leaders, accusing them of crimes against humanity for gender-based persecution. As ICC prosecutor Karim Khan stated, the “Taliban’s interpretation of Sharia cannot excuse acts that amount to crimes against humanity.”<sup>79</sup> This marked the first time there was

73 Matiullah Qazizada, “Impacts of the Taliban’s Ban on Women’s Work and Education - Afghanistan,” Relief Web, February 9, 2024, [reliefweb.int/report/afghanistan/impacts-talibans-ban-womens-work-and-education](https://reliefweb.int/report/afghanistan/impacts-talibans-ban-womens-work-and-education).

74 “Afghanistan,” UNHCR, August 5, 2025, [www.unhcr.org/where-we-work/countries/afghanistan](https://www.unhcr.org/where-we-work/countries/afghanistan).

75 “World Report 2025: Rights Trends in Afghanistan,” Human Rights Watch, December 19, 2024, [www.hrw.org/world-report/2025/country-chapters/afghanistan](https://www.hrw.org/world-report/2025/country-chapters/afghanistan).

76 Belquis Ahmadi, “Erosion of Women’s Rights by the Taliban: Long-Term Consequences,” 2021, [press.sjms.nu/chapters/3/files/e612a02b-8030-4322-abf9-0b3a099ebe80.pdf](https://press.sjms.nu/chapters/3/files/e612a02b-8030-4322-abf9-0b3a099ebe80.pdf).

77 Human Rights Watch, “Schools Are Failing Boys Too: The Taliban’s Impact on Boys’ Education in Afghanistan,” December 6, 2023, [www.hrw.org/report/2023/12/06/schools-are-failing-boys-too/talibans-impact-boys-education-afghanistan](https://www.hrw.org/report/2023/12/06/schools-are-failing-boys-too/talibans-impact-boys-education-afghanistan).

78 UN News, “Afghanistan: Rights Experts Alarmed over Taliban Use of ‘Brutal’ Punishments.”

79 “Afghanistan: ICC Seeks Arrest Warrants for Taliban Leaders over Gender-Based Persecution,” UN News, January 23, 2025, [news.un.org/en/story/2025/01/1159366](https://news.un.org/en/story/2025/01/1159366).



US Army Staff Sgt. walks by two Afghan women while on patrol through Gardez, Paktia province in 2012 (Credit: Ken Scar)

an international prosecution for education-related persecution.

Afghanistan's case demonstrates how denial of education can lead to a collapse of every sector of society, from health to the labor force, to migration and governance. It highlights why CPD's mandate to integrate population factors into development policy requires urgent global action. Afghanistan undermines its demographic future, weakens economic productivity, and accelerates humanitarian crises by excluding half of its population from education. This case study shows why CPD and its partners must monitor, report, and

coordinate international responses when systemic exclusion threatens both human rights and sustainable development.

## Sustainable Development Goals

The Sustainable Development Goals (SDGs), adopted by the United Nations in 2015, represent a global call to action for peace, prosperity, and dignity.<sup>80</sup> The framework includes 17 goals that all member states are encouraged to achieve by 2030. They range from poverty reduction to education to climate action.

he goals reflect long-standing challenges, such as inequality, and newer threats, including climate change.<sup>81</sup> Implementation depends on specific targets and indicators, which allow countries to track progress, identify gaps, and design appropriate responses. Tools like the UN Goal Tracker help states prioritize based on their national contexts and most urgent needs.<sup>82</sup> But because many challenges are too large for individual countries to address alone, international collaboration remains essential.

Two goals are especially critical for youth access to comprehensive education: SDG 4 (quality education) and SDG 10 (reduced inequalities).<sup>83</sup> SDG 4 commits to inclusive and equitable learning opportunities at all stages of life, recognizing education as a basic human right affirmed in documents such as the Universal Declaration of Human Rights and the Convention against Discrimination in Education. Its targets emphasize not only access but also quality, urging states to design policies that foster creativity, teamwork, resilience, and respect.

At the same time, SDG 10 addresses the structural inequalities (social, economic, and political) that shape who can access education. It calls for eliminating discriminatory laws and practices while creating policies that promote

<sup>80</sup> "Sustainable Development Goals," UNDP, 2015, [www.undp.org/sustainable-development-goals](http://www.undp.org/sustainable-development-goals).

<sup>81</sup> "The Sustainable Development Agenda," United Nations Sustainable Development, July 14, 2015, [www.un.org/sustainabledevelopment/development-agenda/](http://www.un.org/sustainabledevelopment/development-agenda/).

<sup>82</sup> "Goal Tracker - a Visual Tool for the Global Goals," UN Department of Economic and Social Affairs, 2018, [sdgs.un.org/partnerships/goal-tracker-visual-tool-global-goals](http://sdgs.un.org/partnerships/goal-tracker-visual-tool-global-goals).

<sup>83</sup> "Inclusive Education for Sustainable Development," UN Department of Economic and Social Affairs, 2018, [sdgs.un.org/partnerships/inclusive-education-sustainable-development](http://sdgs.un.org/partnerships/inclusive-education-sustainable-development).

equal opportunities regardless of age, gender, race, disability, income, or geography. UNESCO's strategy for gender equality in education is one example of how both goals can be pursued together, reducing barriers while strengthening inclusive learning systems.<sup>84</sup>

States can make education universally accessible and equitable by aligning efforts on SDG 4 and SDG 10. This not only fulfills the right to learn but also strengthens global well-being and development. Addressing these goals in tandem directly removes obstacles that prevent youth from learning and equips the next generation with the skills to contribute meaningfully to society.



Rafir, a youth from Malawi, in the Youth for Change Panel (Credit: UK DFID)

## BLOC ANALYSIS

### Point of Division

These blocs take into consideration the amount of youth who are currently out-of-school in each country. This division is made based on the Global Education Index, which was created by Our World Data using the latest data collected by the UNESCO Institute for Statistics. This index considers the amount of youth currently enrolled in education, then subtracting that number from the total youth population. This shows how many young people are currently out of school

in each country or region. States will fall into high, medium or low percentages. Thus, they can acknowledge which countries it is more viable for them to work with through diplomacy and international collaboration to successfully reduce their percentages of out-of-school youth.

The Index consists of dividing the numbers of out of school children according to their ages and levels of education.<sup>85</sup> Children aged five to 10 years old are the ones considered to be at a primary school level, those ages 11–14 are at a lower-secondary level, and those ages 15–

18 are at an upper-secondary level. This is relevant because it allows states to also take into consideration what level of education is faced with more barriers to access it within their countries.

### Regions with High Percentages of out-of-school Youth

This bloc includes countries with the highest percentages of out-of-school youth, as measured by the Global Education Index from Our World in Data. Regions are considered high percentage

<sup>84</sup> "Goal 10," UN Department of Economic and Social Affairs, 2025, [sdgs.un.org/goals/goal10](https://sdgs.un.org/goals/goal10)

<sup>85</sup> "Out-of-School Children and Youth," UNESCO UIS, 2018, [uis.unesco.org/en/topic/out-school-children-and-youth](https://uis.unesco.org/en/topic/out-school-children-and-youth).

when more than 50 million young people are not attending school. Sub-Saharan Africa, with about 100 million out-of-school youth, and Central and Southern Asia, with about 90 million, are the most affected. Together, they account for a large share of the 251 million children and youth worldwide who remain out of school in 2025.<sup>86</sup> The Index draws on administrative school enrollment records and household surveys, comparing enrollment data with national population figures. By accounting for the number of children and youth enrolled at each age level, it generates the specific out-of-school estimates reflected in the Index.<sup>87</sup>

High out-of-school rates highlight how countries in this bloc have more barriers to accessing education, such as poverty, inequality, location or limited availability in schools. This index points out where more support and international cooperation is needed. For example, in Central and Southern Asia, there are currently 86.31 million out-of-school youth due to causes such as poverty, gender inequality, and inadequate school infrastructure. Countries of this bloc have made strides to address this issue. They

have implemented student-centered teaching and learning strategies like project-based learning, alongside collaboration and communication, as well as focusing on student autonomy.<sup>88</sup> In Sub-Saharan Africa, there are 99.51 million out-of-school youth due to social and political issues. This is specifically for reasons such as gender inequality, discrimination, and armed conflict.<sup>89</sup> Thus, these countries have attempted to solve this through the implementation of alternative education styles, using technology to improve their educational infrastructure.<sup>90</sup>

In this bloc, it is also important to consider how specific events may lead to high percentages of out-of-school youth in short periods of time, like wars or natural disasters. Youth involved in armed conflict and those affected by natural disasters are likely to increase rapidly in fragile states.<sup>91</sup> Some other countries have had high percentages for a long time. Thus, it is important to analyze each country's percentages throughout time and not just in the present.<sup>92</sup> Addressing these gaps is critical not just for advancing education but also for ensuring stability, equity,

and long-term development across these regions.

## Regions with Medium Percentages of out-of-school Youth

This bloc is for the countries who have medium percentages of out-of-school youth according to the Global Education Index. Therefore, they can be considered to have an average amount of out-of-school youth. They are regions where between more than 5 to 50 million of youth and children do not currently have an education.<sup>93</sup>

Various countries might make up this bloc, such as Bangladesh, with nearly seven million out of school youth, and The Democratic Republic of the Congo, with 6.2 million. Certain regions like Eastern and Southeastern Asia also belong in this bloc since they have a total of 31.47 million out-of-school youth.<sup>94</sup> International cooperation has helped these regions increase the number of youths who have access to education. For example, countries like China, Thailand, and the United States have worked together to implement strategies to achieve this in South-East Asia,

<sup>86</sup> Our World in Data, "Children and Adolescents out of School," UNESCO Institute for Statistics, 2025, [ourworldindata.org/grapher/children-and-youth-out-of-school](https://ourworldindata.org/grapher/children-and-youth-out-of-school).

<sup>87</sup> Our World in Data, "Children and Adolescents out of School."

<sup>88</sup> "Addressing the Learning Crisis in Central and Southern Asia: EAA's PBL Initiative through IFERB," Education Above All Foundation, November 27, 2023, [www.educationaboveall.org/blog/addressing-learning-crisis-central-and-southern-asia-eaas-pbl-initiative](https://www.educationaboveall.org/blog/addressing-learning-crisis-central-and-southern-asia-eaas-pbl-initiative).

<sup>89</sup> "Long Delayed: Education for Every Child in Africa," Education Cannot Wait, 2024, [www.educationcannotwait.org/news-stories/directors-corner/long-delayed-education-every-child-in-africa](https://www.educationcannotwait.org/news-stories/directors-corner/long-delayed-education-every-child-in-africa).

<sup>90</sup> "Empowering Education: The Transformative Role of Technology in Africa," UNESCO, 2025, [www.iicba.unesco.org/en/empowering-education-transformative-role-technology-africa](https://www.iicba.unesco.org/en/empowering-education-transformative-role-technology-africa).

<sup>91</sup> Education is a lifeline for children in crises, "Education in Emergencies."

<sup>92</sup> Terry Sicular, Xiuna Yang, and Björn Gustafsson, "The Rise of China's Global Middle Class in an International Context," *China & World Economy* 30, no. 1 (2024): 5–27, [ourworldindata.org/data-insights/the-global-number-of-children-not-attending-school-has-declined-by-nearly-40-since-2000](https://ourworldindata.org/data-insights/the-global-number-of-children-not-attending-school-has-declined-by-nearly-40-since-2000).

<sup>93</sup> Our World in Data, "Children and Adolescents out of School."

<sup>94</sup> Our World in Data, "Children and Adolescents out of School."

through digital literacy programs and scholarships for international students.<sup>95</sup>

These countries have a considerable amount of youth enrolled in schools. This means that they have some resources and successful strategies that allow for a certain amount of their population to have the possibility of accessing education. Therefore, they should analyze which aspects they can improve, to improve education progressively within their countries.<sup>96</sup> Also, they can look at strategies that have worked in other countries which are compatible with their national policy. As these countries can be quite varied and have specific barriers, states should adapt policies to their national context.

It is also important to consider that within this same bloc there can be countries that have widely different percentages of out of school youth. Some of them might be closer to being considered states with high percentages; while on the opposite side, there can be some that are considered to be closer to lower percentages. It is important to recognize this specific factor since the solutions that these states work on may be needed in different amounts in the diverse countries that form the bloc.



**Mother from the Jharkhand tribe in India with her baby (Credit: RN Mahto)**

### **Regions with Low Percentages of Out-of-School Youth**

This bloc is for states with the lowest percentages of out-of-school youth and children worldwide. It is composed of countries where there are less than 5 million not in school, according to the Global Education Index.<sup>97</sup> There are multiple examples of countries with low percentages of out-of-school youth. This includes the United Kingdom with a total of 175,297 youth who are not enrolled in school, Cambodia with a total of 803,236, and Argentina with a

total of 152,078. Much of Europe and North America also belongs to this bloc.<sup>98</sup> The policies in these countries and regions are effective because they take community engagement into consideration, as well as their historical, social and political context. They also invest in educational resources, which results in the effective improvement of their educational infrastructure.<sup>99</sup>

These countries generally have fewer systemic barriers to access education for most children. This indicates that a greater amount of their population is involved in learning, which also means that they provide more inclusive

<sup>95</sup> “UNESCO Report Shows 18 Million Children and Teenagers Are out of,” UNESCO, June 17, 2024, [www.unesco.org/en/articles/unesco-report-shows-18-million-children-and-teenagers-are-out-school-south-east-asia](http://www.unesco.org/en/articles/unesco-report-shows-18-million-children-and-teenagers-are-out-school-south-east-asia)

<sup>96</sup> UNESCO, “7 Ways Countries Are Transforming Education.”

<sup>97</sup> Our World in Data, “Children and Adolescents out of School.”

<sup>98</sup> Our World in Data, “Children and Adolescents out of School.”

<sup>99</sup> “Education in Developing Countries: Challenges, Innovations, and Pathways to Progress,” ACS, October 16, 2024, [www.acs-college.com/education-in-developing-countries](http://www.acs-college.com/education-in-developing-countries).

education.<sup>100</sup> The educational policies of these countries will have to identify the most urgent needs or barriers which currently prevent access to education among certain sectors in their countries. This bloc can collaborate with other states who have higher percentages of out-of-school youth. They should be encouraged to share successful strategies but note that what works in one social political context might not work for all places.<sup>101</sup> This way states can find what is actually

compatible with their national context. Otherwise, international cooperation becomes ineffective too.<sup>102</sup>

This index is based on the number of enrolled youths in each country, alongside the level of education they are currently in. However, it does not specifically point out the factors that represent barriers to education in each particular state. This means that certain youth within these percentages may have never entered

school, they may have dropped out, or they may be starting later than the expected age. Each country of this bloc should identify the main aspects which prevent youth in their regions from accessing school. Though there may be comparatively fewer students left behind overall, this bloc will have to address the unique and specific factors that prevent children from entering existing and available school systems.

## COMMITTEE MISSION

The Commission on Population and Development (CPD) has the purpose of ensuring healthy lives and promoting well-being for all people, at all ages.<sup>103</sup> It aims to target and address global issues that affect human development worldwide. It also has the purpose of enabling participating states to contribute to sustainable development by promoting the integration of different population factors into policies and strategies that are focused on development.

It is a formal organ of the Economic, and Social Council

(ECOSOC), created in 1946.<sup>104</sup> This council was created shortly after World War II, due to the devastating economic, political and social consequences. This showed the need for international bodies to intervene in the creation of policies to address such issues.<sup>105</sup> The main purpose of organs within ECOSOC is to address economic, social, environmental, and humanitarian issues worldwide. ECOSOC allows countries to access a big international network, facilitating global policy discussions and policymaking through diplomacy.<sup>106</sup> It aims to provide advice on issues

surrounding population and development and also serves as a forum.<sup>107</sup> It works alongside the United Nations Population Fund (UNFPA) to make sure that states fulfill their commitments toward guaranteeing equitable and inclusive development, both at a national and international level.<sup>108</sup>

CPD does not have the power to directly implement solutions. However, its role is fundamental in their creation because it gives a place to discuss population and development issues.<sup>109</sup> These discussions take place annually in

100 Adam McCann, "states with the Best & Worst School Systems in 2025," WalletHub, July 21, 2025, [wallethub.com/edu/e/states-with-the-best-schools/5335](https://wallethub.com/edu/e/states-with-the-best-schools/5335).

101 "Towards universal access to higher education: international trends," UNESCO International Institute for Higher Education in Latin America and the Caribbean, 2020, [unesdoc.unesco.org/ark:/48223/pf0000375686](https://unesdoc.unesco.org/ark:/48223/pf0000375686).

102 UNESCO, "Global Education Coalition."

103 "Commission on Population and Development, Fifty-Eighth Session," UN Population Division, 2025, [www.un.org/development/desa/pd/events/CPD58](https://www.un.org/development/desa/pd/events/CPD58).

104 "Commission on Population and Development," UN Population Division, 2025, [www.un.org/development/desa/pd/content/CPD](https://www.un.org/development/desa/pd/content/CPD).

105 "Commemoration of the 70th Anniversary of ECOSOC," Overview of ECOSOC Milestones, 2016, [www.un.org/en/ecosoc/commemoration70/pdf/background\\_note.pdf](https://www.un.org/en/ecosoc/commemoration70/pdf/background_note.pdf).

106 "ECOSOC at a Glance," United Nations Economic and Social Council, 2021, [ecosoc.un.org/en/about-us](https://ecosoc.un.org/en/about-us).

107 "What is the CPD?," CHOICE for Youth & Sexuality, 2014, [www.choiceforyouth.org/assets/Toolkits/youth-led-advocacy/CPD/CHOICE-CPD-Factsheet-1.pdf](https://www.choiceforyouth.org/assets/Toolkits/youth-led-advocacy/CPD/CHOICE-CPD-Factsheet-1.pdf).

108 UN Population Division, "Commission on Population and Development."

109 CHOICE for Youth & Sexuality, "What is the CPD?."

this commission around the month of April. All member states gather to discuss a specific urgent issue related to sustainable development. The ECOSOC is the organ which can implement strategies created and advised by the CPD.

The CPD is also in charge of making sure that the Program of Action, adopted by the International Conference on Population and Development (ICPD), is effective worldwide. This is why its primary task is to monitor, review and assess its implementation. It has the responsibility of supervising that all states are adopting the measures that their countries need in order to guarantee equitable sustainable development for their whole population, regardless of their age, gender, socio-economic status, disability or other personal characteristics they may have.<sup>110</sup>

Youth access to a comprehensive education is one of the main issues that need to be addressed by the CPD. It is a global issue that concerns all states, since lack of access to education affects the development of the global population.<sup>111</sup> Youth are excluded from a basic human right, one that is key for their development, both in the short and long term. Therefore, the CPD is responsible for addressing this particular issue by finding solutions that guarantee

access to education for all, at all ages.<sup>112</sup>

110 "Commission on Population and Development, Fifty-Eighth Session," UN Population Division, 2025, [www.un.org/development/desa/pd/events/CPD58](http://www.un.org/development/desa/pd/events/CPD58).

111 UNESCO, "251M Children and Youth Still Out of School."

112 "Resolution 2012/1 Adolescents and Youth," July 28, 2025, [www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/undesa\\_pd\\_2021\\_resolution\\_2012\\_1\\_adolescents\\_and\\_youth.pdf](http://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/undesa_pd_2021_resolution_2012_1_adolescents_and_youth.pdf).



# Impact of Global Inequalities on Birthrates

Photo Credit: Bonnie U. Gruenberg

Reproductive healthcare is tied to basic human rights. These include the right to health, privacy, and discrimination. The United Nations Population Fund (UNFPA) defines reproductive healthcare as “a state of complete physical, mental and social well-being in all matters relating to the reproductive system.”<sup>1</sup> Reproductive healthcare covers many aspects. The focus of this guide will be on fertility. Access to this care is essential for women and girls of reproductive age and pregnant mothers. One in six people around the world face infertility.<sup>2</sup> It affects both men and women. However, millions of people around the world lack access to these services. The delegates of the Commission on Population and Development (CPD) should note the link between the topic and population trends. Lack of access

to reproductive care can cause preventable deaths.<sup>3</sup> This can lead to changes in population growth, especially in countries with high fertility rates.

In many countries, reproductive rights are stalling because there are too many barriers to access. People face more than one barrier at once. One large problem is cost. The World Health Organization (WHO) calls this a “medical poverty trap.”<sup>4</sup> Many health plans and insurance do not cover fertility treatments or diagnosis. Reproductive healthcare access is an issue that disproportionately affects women. Thus, it is affected by gender bias and a lack of care for women’s issues worldwide. Infertility is linked to stigma around women’s health. As a woman’s primary role is to grow the family

in many cultures, the WHO has found that many infertile women experience psychological and physical violence.<sup>5</sup> Women are often blamed for their own health issues if they cannot have children. This response causes many infertile women to struggle with anxiety and depression.<sup>6</sup>

Delegates should understand what reproductive care includes and what kind of services it involves. Religion and culture shapes views on reproductive healthcare access. All religions and cultures suggest different rules for what is and is not acceptable.<sup>7</sup> Delegates must take societal norms into account. The impact of global inequalities on birthrates is a very important issue, and effective solutions must be created immediately to combat its harmful effects.

## TOPIC BACKGROUND

### Fertility-Focused Reproductive Health

Procedures such as in vitro fertilization, egg freezing, surrogacy,

and genetic testing, fall under reproductive healthcare. The global prevalence of female infertility was 110.1 million in 2021.<sup>8</sup> Many of these people would need assisted reproductive technology (ART).

There are a variety of options to choose from, depending on circumstances and socioeconomic status. Unfortunately, the cost of ART limits many who cannot afford these procedures.

1 “Sexual and reproductive health,” United Nations Population Fund, accessed August 6, 2025, [www.unfpa.org/sexual-reproductive-health](http://www.unfpa.org/sexual-reproductive-health).

2 World Health Organization, “1 in 6 people globally affected by infertility: WHO,” news release, April 4, 2023, [www.who.int/news/item/04-04-2023-1-in-6-people-globally-affected-by-infertility](http://www.who.int/news/item/04-04-2023-1-in-6-people-globally-affected-by-infertility).

3 UN News, “Violations of women’s reproductive health rights trigger rise in preventable deaths,” news release, April 17, 2024, [news.un.org/en/story/2024/04/1148621](http://news.un.org/en/story/2024/04/1148621).

4 “Better access to fertility care essential for global health: WHO,” UN News, April 3, 2023, [news.un.org/en/story/2023/04/1135312](http://news.un.org/en/story/2023/04/1135312).

5 Seyede Marziye Rahebi et al, “Relationship between domestic violence and infertility,” *Eastern Mediterranean Health Journal* 25, no. 8 (2019): 537–542, [doi.org/10.26719/emhj.19.001](https://doi.org/10.26719/emhj.19.001).

6 Jenny Lin and Leah C. Susser, “Recognizing the Psychological Toll of Infertility in Women,” *Anxiety and Depression Association of America*, July 27, 2022, [adaa.org/learn-from-us/from-the-experts/blog-posts/professional/recognizing-psychological-toll-infertility](https://adaa.org/learn-from-us/from-the-experts/blog-posts/professional/recognizing-psychological-toll-infertility).

7 Jonna Arousell and Aje Carlborn, “Culture and religious beliefs in relation to reproductive health,” *Best Practice & Research Clinical Obstetrics & Gynaecology*, no. 32 (April 2016): 77–87, [doi.org/10.1016/j.bpobgyn.2015.08.011](https://doi.org/10.1016/j.bpobgyn.2015.08.011).

8 Yi Wei et al, “Burden of female infertility in 204 countries and territories, 1990–2021: results from the Global Burden of Disease Study 2021,” *Journal of Psychosomatic Obstetrics and Gynecology* 46, no.1 (February 2021): [doi.org/10.1080/0167482X.2025.2459618](https://doi.org/10.1080/0167482X.2025.2459618).

In vitro fertilization (IVF) can assist pregnancy. The first healthy child born from IVF was born in 1978 in the United Kingdom.<sup>9</sup> Over eight million babies have been born from IVF since then.<sup>10</sup> IVF is a type of ART that fertilizes an egg with sperm outside of the body in a controlled setting such as a medical lab.<sup>11</sup> Fertilized eggs, called embryos, are then placed back into the uterus by a medical doctor to eventually develop. After this, the person physically carrying the developing embryo, is given medication to increase chances of pregnancy.<sup>12</sup> The chances of delivering a healthy baby as a result of IVF depend on a variety of factors, such as age and cause of infertility.<sup>13</sup> This egg could come from the gestational carrier or a donor. Donors may also be used for sperm. Sometimes, multiple embryos are placed in the uterus to increase chances of pregnancy. Only five percent of couples experiencing infertility will do IVF.<sup>14</sup> Medical personnel are likely to recommend more affordable and less complex treatments before turning to IVF. Couples could spend more than USD 30,000 on IVF without a

guarantee of success.<sup>15</sup> Only 70 percent of eggs will successfully fertilize, leaving 30 percent of people needing another round.<sup>16</sup> The cost of the procedure makes it highly inaccessible even in countries with a lot of fertility clinics.

Another aspect of ART is egg freezing, when eggs are extracted and stored to be implanted and fertilized at a later time.<sup>17</sup> Freezing reproductive cells was first introduced with male sperm cells in the 1970s. Freezing egg cells came shortly after in the 1980s and 90s. This process is medically referred to as oocyte cryopreservation. With egg freezing in particular, egg cells are frozen at as low as -320 degrees Fahrenheit.<sup>18</sup> Egg freezing is comparable to IVF. The main difference is how much time passes between egg extraction and fertilization. The main benefit to egg freezing is that healthy eggs can be stored for a time when the gestational carrier is either willing or able to carry out a pregnancy.<sup>19</sup> Some choose “social” egg freezing, when someone freezes their eggs for a non-medical related reason. This could be because someone is

not yet ready to have children at a younger age, when the eggs are healthiest and most viable. There are also medically necessary reasons to freeze eggs. Cancer treatment can cause egg cells to die, so some freeze eggs before this occurs. There is not a guarantee that implanting cryopreserved eggs, through IVF, will result in pregnancy. Egg extraction, tests, and freezing can cost between USD 6,000 to USD 10,000.<sup>20</sup> IVF has an additional cost on top of that. This procedure is not typically covered by insurance.

Surrogacy is another aspect of ART done in addition to IVF. Medical professionals do IVF using the egg and sperm cells of the intended parents.<sup>21</sup> A substitute gestational carrier will then have the embryo implanted into their uterus. The gestational carrier will have no genetic similarity to the child. Surrogacy has a long history. There are recorded instances of surrogacy as early as 2000 years before the common era in the Qur'an and the Bible, but with donor eggs as well.<sup>22</sup> An example is the story of Abraham and his wife Sarah. Today, it is more common

9 Anne-Kristin Kuhnt and Jasmine Passet-Wittig, “Families formed through assisted reproductive technology: Causes, experiences, and consequences in an international context,” *Reproductive Biomedicine and Society Online* 46, (January 2022): 289-297, doi: 10.1016/j.rbms.2022.01.001.

10 “IVF (In Vitro Fertilization),” Cleveland Clinic, accessed June 16, 2025, [my.clevelandclinic.org/health/treatments/22457-ivf](https://my.clevelandclinic.org/health/treatments/22457-ivf).

11 Cleveland Clinic, “IVF (In Vitro Fertilization).”

12 Cleveland Clinic, “IVF (In Vitro Fertilization).”

13 Sandhya Pruthi et al, “In Vitro Fertilization (IVF),” Mayo Clinic, last modified September 1, 2023, [www.mayoclinic.org/tests-procedures/in-vitro-fertilization/about/pac-20384716](https://www.mayoclinic.org/tests-procedures/in-vitro-fertilization/about/pac-20384716).

14 Cleveland Clinic, “IVF (In Vitro Fertilization).”

15 Chelsea Fertility, “Fertility Treatment Financial Information.”

16 Cleveland Clinic, “IVF (In Vitro Fertilization).”

17 Pardis Hosseinzadeh, “Freezing Eggs: Preserving Fertility for the Future,” John Hopkins Medicine, accessed June 18, 2025, [www.hopkinsmedicine.org/health/wellness-and-prevention/freezing-eggs-preserving-fertility-for-the-future](https://www.hopkinsmedicine.org/health/wellness-and-prevention/freezing-eggs-preserving-fertility-for-the-future).

18 “Egg Freezing,” Arizona Fertility, accessed June 18, 2025, [arizonafertility.com/fertility-preservation/egg-freezing/](https://arizonafertility.com/fertility-preservation/egg-freezing/).

19 Hosseinzadeh, “Freezing Eggs: Preserving Fertility for the Future.”

20 Macmillan, “Is Egg Freezing Right For You?”

21 Mohammad Reza Sadeghi, “Surrogacy, an Excellent Opportunity for Women with More Threats,” *Journal of Reproduction and Infertility* 20, no. 2 (2019): 63, [pmc.ncbi.nlm.nih.gov/articles/PMC6486566/](https://pubmed.ncbi.nlm.nih.gov/articles/PMC6486566/).

22 Sadeghi, “Surrogacy, an Excellent Opportunity for Women with More Threats,” 63.

that the surrogate has no genetic relation to the child. Surrogacy can be a great option in addition to IVF for many reasons. Primarily, it is beneficial for those with health issues regarding the unsuitability of their uterus.<sup>23</sup> Additionally, it may be a good option for people who have had trouble getting pregnant themselves or have had miscarriages. Studies show that surrogacy results in pregnancy about 65 percent of the time.<sup>24</sup> Surrogacy does not affect the success rates if used in conjunction with IVF. Surrogacy is far more expensive than IVF or egg freezing alone, due to all of its steps. These fees come in addition to the base cost of IVF. There are also surrogate agency fees, surrogate compensation, and surrogate health insurance. The overall cost for the surrogacy process can be up to USD 100,000.<sup>25</sup>

Genetic screening is another type of reproductive care. It is very different from IVF, egg freezing, or surrogacy, due to the fact that it acts as a form of preventative medicine.<sup>26</sup> Genetic screening was first explored in the 1950s when scientists discovered an abnormal extra chromosome that led to Down syndrome.<sup>27</sup> This opened the study of karyotyping, the practice of counting and studying chromosomes to detect genetic



**HIV positive mother able to give birth to healthy baby through USAID program (Credit: USAID in Africa)**

abnormalities. Genetic screening as a whole has become much more technologically advanced, with many different kinds of cells being able to be tested for genetic abnormalities. There are a variety of different methods for genetic screening depending on what disease is being tested for. Mainly, genetic screening aims to give patients an insight into genetic risk factors. This also gives insight into the potential health risks of offspring. If parents are aware of their child's potential health risks early in pregnancy, they can

intervene earlier and also be more prepared in general. 15 million children and infants die annually from preventable diseases.<sup>28</sup> This is largely due to lack of access to reproductive healthcare. Changes in chromosomes, as well as additional or absent chromosomes, are markers for genetic disorders such as sickle cell disease or cystic fibrosis.<sup>29</sup>

Genetic screening can test for the presence of a single gene and therefore the marker for a single disorder. Larger scale genetic testing panels can test for multiple genes at once. This is used when a child

<sup>23</sup> Macmillan, "Is Egg Freezing Right For You?."

<sup>24</sup> Nastaran Aflatoonian, "Surrogacy as a good option for treatment of repeated implantation failure: a case series," *Iranian Journal of Reproductive Medicine* 11, no. 1 (January 2013): 77-80, [pmc.ncbi.nlm.nih.gov/articles/PMC3941386/](https://pubmed.ncbi.nlm.nih.gov/articles/PMC3941386/).

<sup>25</sup> Circle Surrogacy, "Surrogacy Cost: A Breakdown for Intended Parents (Infographic)."

<sup>26</sup> Chung-Lin Lee et al, "Understanding Genetic Screening: Harnessing Health Information to Prevent Disease Risks," *International Journal of Medical Sciences* 22, no. 4 (January 2025): 903-919, [pmc.ncbi.nlm.nih.gov/articles/PMC11843151/](https://pubmed.ncbi.nlm.nih.gov/articles/PMC11843151/).

<sup>27</sup> Teresa Fariss McClain, "The Evolution and Practical Application of Genetic Testing," The Robins Kaplan Justice Report, last modified December 2021, [www.robinskaplan.com/newsroom/insights/the-evolution-and-practical-application-of-genetic-testing](https://www.robinskaplan.com/newsroom/insights/the-evolution-and-practical-application-of-genetic-testing).

<sup>28</sup> M.F. Fathalla, "Reproductive Health: A Global Overview," *Early Human Development* 29, no. 1-3 (1992): 35-42, DOI: 10.1016/0378-3782(92)90055-1

<sup>29</sup> Lee, "Understanding Genetic Screening: Harnessing Health Information to Prevent Disease Risks," 903-919.

shows symptoms that could be due to a variety of different genetic abnormalities.<sup>30</sup> These kinds of testing are considered clinical genetic tests, as opposed to “direct-to consumer tests” such as ancestry testing. Depending on the kind of test, genetic testing costs around USD 100 to USD 2,000.<sup>31</sup>

Human genome editing means changing DNA to add, remove, or change genetic traits.<sup>32</sup> There has been a lot of controversy over the ethics of editing heritable traits. Experts worry it could reduce genetic diversity and informed consent. They also fear that genome editing may be done for non-therapeutic enhancement purposes that have no good medical reason. The United Nations Educational, Scientific, and Cultural Organization (UNESCO) adopted a declaration in 1997 to establish a framework for ethical genetic testing practices. This declaration was adopted based on a need for the consideration of human rights within the context of what is a largely scientific issue.<sup>33</sup> The document suggests exercising concern and consent for all parties involved. The World Health

Organization agrees that any non-somatic gene editing should be paused until all necessary clinical trials have been done in order to ensure the safety and ethicality of the practice.<sup>34</sup>

## Socioeconomic Inequality in Reproductive Healthcare

ART can be inaccessible on the basis of socioeconomic status. IVF comes in at USD 12,500 per round. Egg freezing costs at least USD 18,500 with an additional USD 600 per year of storage. The surrogacy process costs at least USD 100,000. Genetic testing costs anywhere from USD 100 to USD 2,000.<sup>35</sup> Average income statistics show that these procedures are highly unaffordable, given that the average income globally was USD 23,380 in 2021.<sup>36</sup> Infertility rates are greater in higher income countries, however the margin is small. Lifetime prevalence for infertility is 17.8 percent in high income countries and 16.5 percent in low- and middle-income countries.<sup>37</sup>

Delegates of CPD should make reproductive healthcare affordable for everyone, regardless of socioeconomic status. Even though ART is not a new concept, it remains largely inaccessible worldwide. In Sub-Saharan Africa, infertility is not seen as a large issue, due to many competing health needs of the region. This region generally reports high fertility rates and large family sizes, so there is a lack of fertility resources in the region. This forces infertile patients to suffer without care or pay high costs. As 35 percent of Sub-Saharan Africa was reportedly living in extreme poverty as of 2019, it is unlikely they would be able to afford care.<sup>38</sup>

Many UN and government projects focus on general healthcare access and tend to underemphasize reproductive care. The WHO describes a “silent population” of more than 180 million couples dealing with infertility every day.<sup>39</sup> This description proves the unfortunate lack of attention that this issue receives. As infertility substantially affects women, it is likely that this lack of attention comes from systemic gender

30 “Genetic Testing,” Center for Disease Control, last modified May 15, 2024, [www.cdc.gov/genomics-and-health/counseling-testing/genetic-testing.html](http://www.cdc.gov/genomics-and-health/counseling-testing/genetic-testing.html).

31 “What is the cost of genetic testing, and how long does it take to get the results?,” National Library of Medicine, last modified July 28, 2021, [medlineplus.gov/genetics/understanding/testing/costresults/](https://medlineplus.gov/genetics/understanding/testing/costresults/).

32 “Human Genome Editing,” World Health Organization, accessed June 19, 2025, [www.who.int/health-topics/human-genome-editing#tab=](http://www.who.int/health-topics/human-genome-editing#tab=).

33 “Universal Declaration on the Human Genome and Human Rights,” UNESCO, accessed June 25, 2025, [www.unesco.org/en/ethics-science-technology/human-genome-and-human-rights](http://www.unesco.org/en/ethics-science-technology/human-genome-and-human-rights).

34 “Human genome editing,” World Health Organization, accessed June 24, 2025, [www.who.int/health-topics/human-genome-editing#tab=tab\\_2](http://www.who.int/health-topics/human-genome-editing#tab=tab_2).

35 National Library of Medicine, “What is the cost of genetic testing, and how long does it take to get the results?.”

36 “Global economic inequality: insights,” World Inequality Report, last modified 2022, [wir2022.wid.world/chapter-1/](https://wir2022.wid.world/chapter-1/).

37 World Health Organization, “1 in 6 people globally affected by infertility: WHO,”

38 Samuel Kofi Tetteh Baah and Christoph Lakner, “Fragility and poverty in Sub-Saharan Africa: two sides of the same coin,” World Bank Blogs, last modified August 15, 2023, [blogs.worldbank.org/en/opendata/fragility-and-poverty-Sub-Saharan-africa-two-sides-same-coin](https://blogs.worldbank.org/en/opendata/fragility-and-poverty-Sub-Saharan-africa-two-sides-same-coin).

39 Ombelet, “Global access to infertility care in developing countries: a case of human rights, equity and social justice,” 257-266.

inequality across the globe.<sup>40</sup> Given that CPD cannot enforce policy, but instead make recommendations, governmental cooperation is extremely important.<sup>41</sup>

The WHO has released tools for how to effectively advance access to reproductive health, starting with access to primary health care. They point out that about 4.3 billion people will not have access to at least one essential reproductive care intervention during their life, showing that access to primary health care is not ensured. One tool they released is a handbook aimed at providing guidance on how to create inclusive reproductive care access, entitled “Critical considerations for achieving universal access to sexual and reproductive health in the context of universal health coverage through a primary health care approach.”<sup>42</sup> The main goal of the handbook is to achieve universal health care, in which everyone has equal access to healthcare services. Among many guidelines, the handbook advises monitoring the implementation of government action plans, informing and supporting health care providers, and making health systems more adaptive. With guidelines like these, CPD delegates can work towards solutions that will aim to provide universal healthcare despite socioeconomic status in a



**Woman training to become a mason, South Sudan (Credit: Oxfam East Africa)**

way that is efficient while still being culturally and financially sensitive.

Factors determining ART access include economic and political happenings of a country, the standard for education, and available medical equipment and facilities. The economics and politics of a country influence access to reproductive care due to the average income of its citizens and the government’s willingness to take the issue seriously. The standard for education impacts access because of how much citizens understand their rights and circumstances. Lack of access to medical equipment is a

practical reason why reproductive care cannot be performed in certain areas.<sup>43</sup>

Another important factor is differences in the societal obligation to have children. Being childless is generally socially accepted in Western culture. However, there are negative social consequences for childless women in developing countries, including isolation and neglect. There is a harsh stigma around having no children for some women.<sup>44</sup> In general, there are damaging psychological effects related to infertility or not wanting children. Women receive blame

<sup>40</sup> UN Women, “One in four countries report backlash on women’s rights in 2024,” press release, March 6, 2025, [www.unwomen.org/en/news-stories/press-release/2025/03/one-in-four-countries-report-backlash-on-womens-rights-in-2024](https://www.unwomen.org/en/news-stories/press-release/2025/03/one-in-four-countries-report-backlash-on-womens-rights-in-2024).

<sup>41</sup> *Commission on Population and Development*, (New York: Commission on Population and Development, 2020), 1.

<sup>42</sup> “Critical considerations and actions for achieving universal access to sexual and reproductive health in the context of universal health coverage through a primary health care approach,” World Health Organization, last modified July 12, 2022, [www.who.int/publications/item/9789240052659](https://www.who.int/publications/item/9789240052659).

<sup>43</sup> Ombelet, “Global access to infertility care in developing countries: a case of human rights, equity and social justice,” 257-266.

<sup>44</sup> Ombelet, “Global access to infertility care in developing countries: a case of human rights, equity and social justice,” 257-266.

from family and spouses.<sup>45</sup> They can experience marriage breakdown, violence from family members, and extreme societal judgment as a result of not being able to have a child. For example, women in Turkey who are unable to get pregnant are sometimes referred to as “trees of no fruit.”<sup>46</sup>

Lack of access to ART should not stand in the way of anyone who wants children. The Universal Declaration of Human Rights acts as a key framework for all UN bodies working towards universal human rights.<sup>47</sup> This declaration states that “Men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a family.”<sup>48</sup> This line of Article 16 implies that families worldwide have the right to have children, and that nationality, race, and religion should not stand in their way. Unfortunately, nationality, race, and religion are presently standing in the way. Delegates should work to provide people this right, to uphold the integrity of this essential declaration.

The root of the issue is a lack of access to healthcare as a whole. Many parts of the world have little to no access to healthcare, so reproductive care and women’s health may go completely uncared for. The World Bank and the WHO report that half the world experiences this. 100 million people are pushed into extreme poverty as a result of health expenses.<sup>49</sup> Extreme poverty, as described by the United Nations, is an income of USD 1.90 per day. This is nowhere close to the amount needed to lead a healthy and sustainable life.<sup>50</sup> This amount would also make the right to have children even less attainable.

Marginalized groups face a lack of access to reproductive health care as well due to prejudice, which is exacerbated for marginalized groups living in poverty. Violations of the right to reproductive healthcare have a much higher impact on minority groups, such as those with disabilities, as well as those in the LGBTIQ+ community.<sup>51</sup> In Turkmenistan, a woman was reported to be told that it would be “undesirable” for her to have a baby because she was blind.<sup>52</sup> UNFPA

says that “access to health and rights vary greatly from one region, country, and person to another.”<sup>53</sup> Violations of human rights within the health sector also apply to healthcare workers. They have been victims of harassment and threats, due to their focus on reproductive health. Facing these challenges is very emotionally damaging, leading to burn out and anxiety. Losing reproductive healthcare workers to these challenges will only make the issue larger than it already is. Violence against these workers is another challenge within this issue: the politicization of women’s health.<sup>54</sup> There has been a massive shift in activism for women’s healthcare rights in developed and developing countries in past decades, including reproductive autonomy, safety, and quality, affordable reproductive care.<sup>55</sup> Those with differing opinions may resort to violence.

At its 56th session, the CPD concluded that a lack of sexual and reproductive health education “results in harmful practices and impedes sustainable development.”<sup>56</sup> The lack of knowledge of one’s

45 Yue Xie et al, “The impact of stigma on mental health and quality of life of infertile women: A systematic review,” *Frontiers in Psychology* 13, (January 2023), doi: 10.3389/fpsyg.2022.1093459

46 Xie et al, “The impact of stigma on mental health and quality of life of infertile women: A systematic review.”

47 United Nations General Assembly, Resolution 217 A, The Universal Declaration of Human Rights, A/RES/217(III), Article 16, (Dec. 10, 1948), [www.un.org/sites/un2.un.org/files/2021/03/udhr.pdf](http://www.un.org/sites/un2.un.org/files/2021/03/udhr.pdf).

48 A/RES/217(III), Article 16,

49 World Health Organization, “World Bank and WHO: Half the world lacks access to essential health services, 100 million still pushed into extreme poverty because of health expenses,” news release, December 13, 2017, [www.who.int/news/item/13-12-2017-world-bank-and-who-half-the-world-lacks-access-to-essential-health-services-100-million-still-pushed-into-extreme-poverty-because-of-health-expenses](http://www.who.int/news/item/13-12-2017-world-bank-and-who-half-the-world-lacks-access-to-essential-health-services-100-million-still-pushed-into-extreme-poverty-because-of-health-expenses).

50 “World Bank and WHO: Half the world lacks access to essential health services, 100 million still pushed into extreme poverty because of health expenses,” World Health Organization.

51 Aparna Sridhar et al, “Beyond borders: The global impact of violating reproductive human rights,” *International Journal of Gynecology and Obstetrics* 167, no. 3 (October 2024): 877-882, doi.org/10.1002/ijgo.15945.

52 UN Women, “One in four countries report backlash on women’s rights in 2024.”

53 UN Women, “One in four countries report backlash on women’s rights in 2024.”

54 L Doyal, “The politics of women’s health: setting a global agenda,” *International Journal of Health Services: Planning, Administration, Evaluation* 26, no. 1 (1996): 47-65, doi:10.2190/U7PN-B17E-JQBL-MRG4.

55 Doyal, “The politics of women’s health: setting a global agenda,” 47-65.

56 Commission on Population and Development, “Lack of Access to Sexual, Reproductive Health Education and Rights Results in Harmful Practices, Impedes Sustainable Development, Speakers Tell Population Commission,” press release, April 11, 2023, [press.un.org/](http://press.un.org/)

rights and bodily autonomy leads to child marriages, unwanted pregnancies, and gender-based violence. Women need to learn how to care for their bodies and minds. They cannot do this without equal access to the proper education and resources. Women should be aware of possible health concerns that could arise as they grow older, such as infertility and other abnormalities within their reproductive and endocrine systems.

## Religious and Cultural Influences in Reproductive Healthcare

Studies hypothesize that cultural and religious beliefs often shape the outcome of who ultimately has access to reproductive healthcare. This is why cultural sensitivity is extremely important when drafting solutions. Religion has a large impact on policy, as it is a significant part of many people's everyday lives and views. In Islam, a few risk factors may increase the need for reproductive care. A study on Muslim women in the Netherlands showed that fasting for Ramadan during early stages of pregnancy could lead to lower birth rate in newborns.<sup>57</sup> Low birth weight leads to a long list of health risk factors, including difficulty eating and fighting infection due to low energy and strength. While



Baptism of a child in Finland by a Lutheran pastor (Credit: keskieve)

pregnant women can be exempt from fasting during Ramadan, many women choose to fast even if they are pregnant.<sup>58</sup>

IVF and surrogacy are an excellent case study for these matters. Within the Islamic faith, IVF is generally considered acceptable, but only if it is done the “traditional” way. The embryo must come from the intended mother and father, rather than a donor or surrogate. Similarly, surrogacy is strongly opposed by the Catholic Church.<sup>59</sup> Religious beliefs also affect when people decide to start families. Social pressure to have children from one's family in Islam may cause fear to seek out reproductive preventive care, such as cervical cancer screenings.

Additionally, many religions oppose having children outside of marriage, with some even going so far as to cast out those that do from the religious community. They fear the alienation that may come as a result of these actions, due to the strong cultural pressure to live their life a certain way.<sup>60</sup>

Religion has a big impact on opinions regarding reproductive healthcare. Advanced reproductive technology raises questions that religious texts do not have explicit answers to. This leads to controversy over how to interpret certain situations within fertility and pregnancy. CPD tries to take religious and cultural factors into account when drafting solutions.

en/2023/pop1106.doc.htm.

57 Arousell and Carlbon, “Culture and religious beliefs in relation to reproductive health,” 77-87.

58 Sarrah Shahawy and Leen Al Kassab and Abbas Rattani, “Ramadan fasting and pregnancy: an evidence-based guide for the obstetrician,” *American Journal of Obstetrics and Gynecology* 228, no. 6 (June 2023): 689-695, doi.org/10.1016/j.ajog.2023.03.023.

59 Schenker, “Women's reproductive health: monotheistic religious perspectives,” 77-86.

60 Arousell and Carlbon, “Culture and religious beliefs in relation to reproductive health,” 77-87.

Solutions should be adaptable and adjusted to fit a variety of cultural circumstances in different countries. Healthcare providers must also tailor care to a variety of different cultural needs.<sup>61</sup> Patient care must therefore be individualized. Even two people within the same faith may have different individual views. Religion can be a broad spectrum and the amount of faith that a person has can differ within the same religion.<sup>62</sup>

In 2014, a delegation of religious leaders met at the United Nations to discuss issues of religion that impact reproductive health. These leaders represented the Baha'i, Buddhist, Christian, Hindu, Jewish, and Muslim faiths.<sup>63</sup> The declaration drafted by these leaders outlined a few key principles that they believed should be upheld in the name of their faiths. Among these principles, they express that in their name, no woman or child will be abused, violated, killed, or will die during birth. They express that no girl will be deprived of education or be married. They express that no one will be denied basic healthcare and that no one should be denied knowledge of how to care for their bodies. Lastly, they summarize that no young person should be denied their full human

rights. These fundamental ideas and rights guide CPD's solutions. UNFPA General Executive Kate Gilmore emphasized the difficulty of reaching these agreements and standing up for human rights, even when the topics can be highly controversial, especially through the religious and cultural lens.<sup>64</sup> These religious leaders set an example for how to approach the complex and controversial applications of reproductive health.

*A Chinese hospital denied a woman access to egg freezing technology, after she stated that she was not married. Xu claimed that the hospital was going against her rights, but the legal battle ended out of her favor.*

Culture affects reproductive health in similar ways to religion. Cultural norms often shape the reproductive healthcare people seek, based on family and society's expectations. A study involving

migrants to Australia demonstrated this strong cultural impact.<sup>65</sup> Participants migrated as children, so they experienced two different cultures as they reached puberty and adolescence. This 2021 study had similar findings to religious impact studies. They found that children from minority migrant backgrounds have trouble communicating with their families about reproductive health concerns, due to cultural norms and protocols. Study participants who reported not having strong religious or cultural affiliations had an easier time communicating with their families about these same concerns.

Gender norms in many countries also have a large effect on how likely people are to seek out reproductive care. In some settings, women may face barriers like limited decision-making power over healthcare, stigma around infertility or contraception, and concerns about privacy.<sup>66</sup> Similarly, the impacts of do not have uniform effects. A partner can help with covering costs, attending visits, and sharing in decisions, but some partners may oppose certain clinical recommendations and limit a woman's access. Programs which encourage informed, voluntary

61 Amirtha Srikanthan and Robert L. Reid, "Religious and Cultural Influences on Contraception," *Journal of Obstetrics and Gynecology* 30, no. 2 (February 2008): 129-137, doi.org/10.1016/S1701-2163(16)32736-0.

62 "The Religious Typology," Pew Research Center, last modified August 29, 2018, www.pewresearch.org/religion/2018/08/29/the-religious-typology/.

63 UNFPA, "Religious leaders call for action on sexual and reproductive health and reproductive rights at UN," news release, September 19, 2014, www.unfpa.org/news/religious-leaders-call-action-sexual-and-reproductive-health-and-reproductive-rights-un.

64 UNFPA, "Religious leaders call for action on sexual and reproductive health and reproductive rights at UN."

65 Tinashe Dune et al, "The Role of Culture and Religion on Sexual and Reproductive Health Indicators and Help-Seeking Attitudes amongst 1.5 Generation Migrants in Australia: A Quantitative Pilot Study," *International Journal of Environmental Research and Public Health* 18, no. 3 (February 2021): 1341, doi: 10.3390/ijerph18031341.

66 Vernon Mochache et al, "Religious, socio-cultural norms and gender stereotypes influence uptake and utilization of maternal health services among the Digo community in Kwale, Kenya: a qualitative study," *Reproductive Health* 17, no. 71 (May 2020): doi.org/10.1186/s12978-020-00919-6.

joint decision-making show better outcomes.<sup>67</sup>

Advanced reproductive technology prompts questions. One example is from China. After a six year long legal battle, the courts certified a decision made by the Beijing Obstetrics and Gynecology Hospital in 2018.<sup>68</sup> The hospital had denied a woman named Teresa Xu access to egg freezing technology, after she stated that she was not married. Xu claimed that the hospital was going against her rights, but the legal battle ended out of her favor. The cultural context of this case played a large role in the outcome. As of 2023, China banned the use of all assisted reproductive technology for single women.<sup>69</sup> This ban leads to a difficult choice for women without access to preserving technologies, to either become pregnant before they are ready, or wait and risk less healthy eggs at an older age.

Another example is from Colombia. A baby was born through a transnational surrogacy agreement. The baby was born in Colombia, but her father was from

Ukraine and intended to raise her in Australia.<sup>70</sup> The child was denied Colombian nationality due to the surrogacy agreement, but then also denied nationality in Ukraine due to her lack of residency and the fact that she had not been born there. After moving to Australia, her father also applied for a visa and the corresponding papers, which were denied due to the girl's statelessness. Ukraine provides citizenship on account of lineage, but the child was still denied in this case because her visa was applied for by her father while he was fulfilling a job offer in Australia, where he did not hold citizenship.<sup>71</sup> Because of Colombia's lack of laws and regulation regarding surrogacy, the Constitutional Court in Colombia urged law-making bodies to change articles of their law to take into account situations such as this one.<sup>72</sup> This case also demonstrated how the lack of regulation puts babies and, in some cases, surrogate mothers at risk of violating their rights.

## Reproductive Health Care's Effect on Population Growth

The world's population is predicted to grow at a relatively slow pace, particularly after 2050.<sup>73</sup> This is largely due to infertility. Infertility has increased 84 percent globally since 1990.<sup>74</sup> However, Sub-Saharan African countries generally have high fertility rates and are predicted to have consistent population growth. The opposite is true for regions such as North American and Europe. In order to keep population growth steady, this high volume of pregnancies must be met with adequate healthcare to ensure healthy outcomes for both parents and children.<sup>75</sup> The health of the mother has a direct impact on the health of the baby, given the importance of post-natal care such as counselling and good nutrition. These resources can be the difference between life and death for a child, given that most infant deaths occur in the first six weeks after delivery.<sup>76</sup> Three in 10 women globally do not receive post-natal

67 Mochache et al, "Religious, socio-cultural norms and gender stereotypes influence uptake and utilization of maternal health services among the Digo community in Kwale, Kenya: a qualitative study."

68 Laura Riggall, "China continues to ban egg freezing for single women," The Progress Educational Trust, August 12, 2024, [www.progress.org.uk/china-continues-to-ban-egg-freezing-for-single-women/](http://www.progress.org.uk/china-continues-to-ban-egg-freezing-for-single-women/).

69 Yue Zhao and Huixian Fu, "Social Egg Freezing for Single Women in China: Legal and Ethical Controversies," *Risk Management and Healthcare Policy* 16, (November 2023): 2379-2389, doi: 10.2147/RMHP.S424361.

70 Ámbito Jurídico, "Protecting the rights of a minor born in Colombia through surrogacy and at risk of statelessness," July 11, 2024, [www.ambitojuridico.com/noticias/general/constitucional-y-derechos-humanos/protegen-derechos-de-menor-que-nacio-en-colombia](http://www.ambitojuridico.com/noticias/general/constitucional-y-derechos-humanos/protegen-derechos-de-menor-que-nacio-en-colombia).

71 "Acquisition of Ukrainian Citizenship," State Migration Service of Ukraine, accessed June 25, 2025, [dmsu.gov.ua/en-home/services/acquisition-of-ukrainian-citizenship.html](https://dmsu.gov.ua/en-home/services/acquisition-of-ukrainian-citizenship.html).

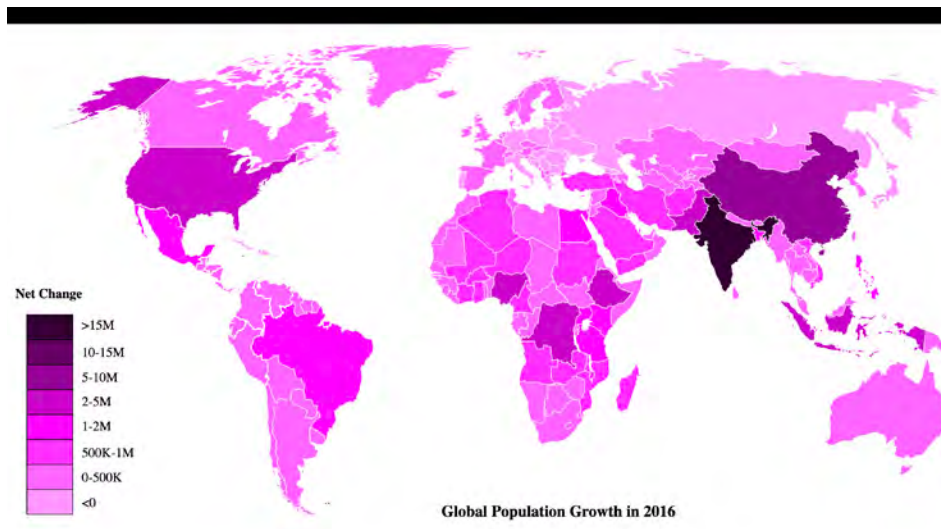
72 "Ministry of Justice urged to submit bill to regulate surrogacy," Ámbito Jurídico, May 9, 2024, [www.ambitojuridico.com/noticias/general/civil-y-familia/exhortan-minjusticia-presentar-proyecto-de-ley-que-regule-la](http://www.ambitojuridico.com/noticias/general/civil-y-familia/exhortan-minjusticia-presentar-proyecto-de-ley-que-regule-la).

73 Danan Gu, Kirill Andreev, and Matthew E Dupre, "Major Trends in Population Growth Around the World," *China CDC Weekly* 3, no. 28 (2021): 604-613, doi:10.46234/ccdcw2021.160.

74 Priyanjana Pramanik, "Global female infertility rates surge, hitting women in their late 30s hardest," News Medical, May 22, 2025, [www.news-medical.net/news/20250522/Global-female-infertility-rates-surge-hitting-women-in-their-late-30s-hardest.aspx](https://www.news-medical.net/news/20250522/Global-female-infertility-rates-surge-hitting-women-in-their-late-30s-hardest.aspx).

75 Gu, Andreev, and Dupre, "Major Trends in Population Growth Around the World," 604-613.

76 "WHO urges quality care for women and newborns in critical first weeks after childbirth," World Health Organization, departmental update, March 30, 2022, [www.who.int/news/item/30-03-2022-who-urges-quality-care-for-women-and-newborns-in-critical-first-weeks-after-childbirth](http://www.who.int/news/item/30-03-2022-who-urges-quality-care-for-women-and-newborns-in-critical-first-weeks-after-childbirth).



### Distribution of global population increase in 2016 (Credit: Diablote)

care, which is a huge threat to the lives of both the mother and child as well as population growth.

There are both negative and positive effects of population growth on sustainable development. Primarily, population growth leads to overcrowding, which leads to a lack of workers in essential industries. A rapidly growing population also leads to higher poverty rates, as it becomes difficult to find essential resources for larger numbers of people. This also means that health resources must be allocated equally to account for population growth in different areas. Another concern is the environmental impact on population growth. The UN even

describes how a smaller global population would help climate change threats, as there would be a slower consumption of natural resources.<sup>77</sup>

Population growth can create a demographic dividend, where a large youth population drives economic growth by expanding the labor force. Regions like Africa are becoming major global contributors. Access to reproductive healthcare further empowers women, enabling education and career opportunities that fuel sustainable development.<sup>78</sup> Every year in Sub-Saharan Africa, up to four million teenage girls drop out of school after becoming pregnant.<sup>79</sup> Four million girls will not be given

the education needed to succeed in the work force. There are already 119 million girls out of school due to poverty and gender disparity. Women need to be part of the growing economy, and they cannot do that unless they have access to the healthcare that will put them in a position to learn, grow, and succeed. Only 57 percent of women around the world are able to make informed decisions about their reproductive health.<sup>80</sup> The majority of women in this 57 percent come from Sub-Saharan Africa and Central and Southern Asia. These regions have high levels of poverty and other barriers to health.

As the Commission on Population and Development, it is important to consider how this topic affects global population growth. In places with high birth rates, reproductive healthcare can improve health for mothers and babies. In places with low birth rates and rising infertility, this care can help too. Assisted reproductive technology is meant for women in these areas. Procedures like IVF can help women start families who would never been able to do so otherwise, due to health factors out of their control. Additionally, the UN suggests that violations of rights to reproductive healthcare cause preventable deaths, both in potential newborns and pregnant people.<sup>81</sup> The UNFPA says that half of pregnancies are not planned.

<sup>77</sup> "Population growth, environmental degradation and climate change," United Nations Department of Economic and Social Affairs, [www.un.org/en/desa/population-growth-environmental-degradation-and-climate-change](http://www.un.org/en/desa/population-growth-environmental-degradation-and-climate-change)

<sup>78</sup> United Nations Department of Economic and Social Affairs, "Why population growth matters for sustainable development."

<sup>79</sup> MSI Reproductive Choices, "Advancing gender equality."

<sup>80</sup> "Achieve Gender Equality and Empower All Women and Girls," United Nations Statistics Division, accessed June 27, 2025, [unstats.un.org/sdgs/report/2022/goal-05/](http://unstats.un.org/sdgs/report/2022/goal-05/).

<sup>81</sup> UN News, "Violations of women's reproductive health rights trigger rise in preventable deaths."

Therefore, this makes it even more important to give women proper healthcare and information so that they can navigate what is often an extremely emotionally and physically difficult situation. These unintended pregnancies are a direct result of harmful stigma around women's health, poverty, lack of reproductive health education, or domestic violence. Early marriage and unintended pregnancies are higher in places where there is a lack of reproductive health education.

The UN reports that 800 women die every day giving birth, and that this figure has not changed since 2016. It is also important to note 500 of these deaths per day happen in countries with ongoing humanitarian crises.<sup>82</sup> Reproductive healthcare is very neglected in these parts of the world, according to the UNFPA. UNFPA specifically cites a study from 2015, which showed that 61 percent of maternal deaths were in these “fragile conditions.”<sup>83</sup>

These women need support the most, but they are not prioritized or given the resources they need. If more resources were made available and more money was invested, particularly in low- and middle-income countries who need it the most, the UN predicts that 400 million unintended pregnancies could be avoided by the year 2030.<sup>84</sup>

Family planning is a key part of reproductive healthcare. The UN describes family planning as the right for couples to “decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so.”<sup>85</sup> Family planning is giving people the opportunity to decide how and when to have children. Family planning can help with informed and successful pregnancies. It can also help women find safe and effective ways to avoid pregnancies if they wish to. In developing

regions, UNFPA estimates that 257 million women who want to avoid pregnancy are not using safe methods.<sup>86</sup> They predict that this is due to lack of information on safe methods as well as lack of support from loved ones and their community.

When accurate information is not available, there can be very dangerous outcomes. Family planning is supported by the 1994 Programme for Action, as adopted during the International Conference on Population and Development.<sup>87</sup> As the mandate of CPD relies on managing the development of this resolution, it is essential that delegates craft solutions with its policies in mind. “Making Family Planning Count” is one initiative that has been adopted by the Population Division.<sup>88</sup> The goal of the initiative is to have transparency in progress towards family planning goals and analyze demographic data.

## CURRENT STATUS

### Access to Reproductive Health in Conflict Zones

People living in conflict zones face serious inequalities in reproductive

healthcare. Teen girls and young women are at higher risk of health issues. They often cannot access services such as family planning, emergency reproductive services.

The main reasons for this lack of access are lack of staff and space. Children in conflict zones also face issues with malnutrition and delays in development. This could lead

<sup>82</sup> UN News, “Violations of women’s reproductive health rights trigger rise in preventable deaths.”

<sup>83</sup> “Maternal mortality in humanitarian crises and in fragile settings,” United Nations Population Fund, last modified November 2015, [www.unfpa.org/resources/maternal-mortality-humanitarian-crises-and-fragile-settings](http://www.unfpa.org/resources/maternal-mortality-humanitarian-crises-and-fragile-settings).

<sup>84</sup> UN News, “Violations of women’s reproductive health rights trigger rise in preventable deaths.”

<sup>85</sup> “Family Planning,” United Nations Population Division, accessed June 27, 2025, [www.un.org/development/desa/pd/content/family-planning-0](http://www.un.org/development/desa/pd/content/family-planning-0).

<sup>86</sup> United Nations Population Fund, “Family planning.”

<sup>87</sup> “Family Planning and the 2030 Agenda for Sustainable,” United Nations Department of Economic and Social Affairs, accessed June 27, 2025, [www.un.org/en/development/desa/population/publications/pdf/family/familyPlanning\\_DataBooklet\\_2019.pdf](http://www.un.org/en/development/desa/population/publications/pdf/family/familyPlanning_DataBooklet_2019.pdf).

<sup>88</sup> “Making Family Planning Count,” United Nations Population Division, accessed July 17, 2025, [www.un.org/development/desa/pd/content/making-family-planning-count](http://www.un.org/development/desa/pd/content/making-family-planning-count)

to higher risks during pregnancy later in life. In 2023, 612 women and girls were living within 50 kilometers of world conflicts.<sup>89</sup> Additionally, as of the end of 2024, the UN Refugee Agency (UNHCR) reports 123.2 million people have been forcibly displaced due to “persecution, conflict, violence, human rights violations or events seriously disturbing public order.”<sup>90</sup> Women also face declines in physical and mental health after arriving in a new country. This decline is worse if they flee to a high-income country. Here, they are more likely to face economic and social barriers to healthcare.

Women and girls in conflict zones face gender-based discrimination. Reproductive health is a large part of many sustainable development goals. Yet, it is not taken as seriously as several other health concerns. Crises only exacerbate this issue. The United Nations Human Rights Office of the High Commissioner highlights the importance of comprehensive sexuality education to combat disruptions during crises.<sup>91</sup> Pregnant people must be able to understand their individual health and risks. Reproductive rights can become politicized

during conflict.<sup>92</sup> One example is Myanmar. In 2021, the military took control of the government and jailed the previous leaders. Pro-democracy driven citizens began to resist, and 3.5 million people were displaced in Myanmar at the end of 2024.<sup>93</sup> This caused the collapse of health services. Myanmar’s military also influenced reproductive policies. Military occupation interrupts family planning and lessens safe measures. The military even encourages certain women to “reproduce the revolution” in an attempt to reduce the growth of ethnic minorities. Health funds have been redirected toward the military and away from women’s health. Thus, Myanmar has a high maternal mortality of 80 about 230 per 100,000, among the highest in the region. Conflict has created this inescapable situation for millions of displaced women in Myanmar.

Another recent conflict is between Israel and Palestine that has left millions of Palestinian refugees. An estimated one million are women and girls, with nearly 150,000 pregnant women and new mothers. As of February 2025, only half of Palestine’s hospitals are even partially functioning, and the

WHO has recorded about 670 attacks on patients, health care workers, and health care facilities in Palestine.<sup>94</sup> This is what limits access to healthcare in conflict zones. When there is no safe way to get healthcare, it becomes completely inaccessible. Limited access also causes competition for resources, with millions of people all needing humanitarian aid from organizations like the WHO. Menstrual health is also a specifically overlooked crisis. More than 10 million sanitary pads are needed per month in Gaza, and less than a quarter of that is available.<sup>95</sup> Women cope in uncomfortable ways that also may cause long term health risks. Women in Gaza have turned to unsanitary replacements for pads such as t-shirts, which can cause infection.<sup>96</sup> UNFPA is currently focused on bridging this gap in maternal healthcare. Following a ceasefire in early 2025, they supplied medicine for new mothers and newborns, as well as hygiene products. However, after the ceasefire broke down, aid was blocked from entering Gaza. This worsens the situation of malnutrition for new mothers.<sup>97</sup>

89 “Facts and figures: Women, peace, and security,” UN Women, October 18, 2024, [www.unwomen.org/en/articles/facts-and-figures/facts-and-figures-women-peace-and-security](http://www.unwomen.org/en/articles/facts-and-figures/facts-and-figures-women-peace-and-security).

90 “Figures at a Glance,” UN Refugee Agency, last modified June 12, 2025, [www.unhcr.org/us/about-unhcr/overview/figures-glance](http://www.unhcr.org/us/about-unhcr/overview/figures-glance).

91 United Nations Human Rights Office of the High Commissioner, “Sexual and reproductive rights should be respected, particularly in situations of crisis.”

92 Jenny Hedström and Tobias Herder. “Women’s sexual and reproductive health in war and conflict: are we seeing the full picture?,” *Global Health Action* 16, no. 1 (2023): doi.org/10.1080/16549716.2023.2188689.

93 “Myanmar emergency,” The UN Refugee Agency, accessed July 17, 2025, [www.unhcr.org/us/emergencies/myanmar-emergency](http://www.unhcr.org/us/emergencies/myanmar-emergency).

94 Hanan H Balkhy and Tedros Adhanom Ghebreyesus, “A roadmap for healing Gaza’s battered health system,” *Eastern Mediterranean Health Journal* 31, no. 2 (2024): 54-55, doi.org/10.26719/2025.31.2.54.

95 “From natural process to nightmare: How Gaza’s women and girls cope with their periods in a war zone,” United Nations Population Fund, June 2, 2025, [www.unfpa.org/news/natural-process-nightmare-how-gaza%E2%80%99s-women-and-girls-cope-their-periods-war-zone](http://www.unfpa.org/news/natural-process-nightmare-how-gaza%E2%80%99s-women-and-girls-cope-their-periods-war-zone).

96 “From natural process to nightmare: How Gaza’s women and girls cope with their periods in a war zone,” United Nations Population Fund.

97 Balkhy and Ghebreyesus, “A roadmap for healing Gaza’s battered health system,” 54-55.

In Africa, humanitarian crises are widespread. Sudan faces one of the most severe. Since 2023, conflict between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) has escalated into a civil war with the world's largest child displacement crisis of 4.6 million children uprooted.<sup>98</sup> Over 90 percent of Sudan's 19 million school-aged children are out of school, thus missing critical education on health and reproductive wellbeing.<sup>99</sup> The conflict has devastated healthcare infrastructure as three-quarters of facilities are out of service. Pregnant women often lack prenatal care, medication, or safe delivery spaces, with some forced to literally give birth on the roadside. Post-natal care and support systems are scarce, putting both mothers and infants at risk. Gender-based violence and discrimination, already widespread before the conflict, have worsened, leaving over three million women and girls vulnerable. The UN High Commissioner for Refugees has described the crisis as a "shocking display of human rights violations."<sup>100</sup>

Despite many humanitarian crises, the UN and NGOs actively work toward solutions for refugee reproductive healthcare. The UN Refugee Agency recognizes that sexual and reproductive health must



Young Zambian girls in the Adolescent Girls Empowerment Program (Credit: DFID UK)

be protected through all stages of life.<sup>101</sup> Programs should address people of all ages, especially teens. Community health workers are also vital. These workers live and give care to their own communities. They provide linguistically and culturally sensitive services. These workers are trained based on WHO guidelines to ensure effective care. Full guidelines for the implementation of community healthcare workers were released by the UN Refugee Agency in 2022.<sup>102</sup> Other guidance from the UN Refugee Agency includes other culturally and emotionally sensitive

approaches such as integrative support for survivors of gender-based violence. As gender-based violence has been observed in conflict zones, it is very important that measures such as these are taken.

### Case Study: Inequalities in Sexual and Reproductive Health Services in Zambia

On August 5, 2024, *Frontiers in Reproductive Health* published a study assessing the success of reproductive health access

98 "Sudan Humanitarian Needs and Response Plan 2024, UN Office for the Coordination of Humanitarian Affairs, last modified December 21, 2023, [reliefweb.int/report/sudan/sudan-humanitarian-needs-and-response-plan-2024-december-2023](https://reliefweb.int/report/sudan/sudan-humanitarian-needs-and-response-plan-2024-december-2023).

99 "Sudan Crisis Explained," UN Refugee Agency, last modified April 9, 2025, [www.unrefugees.org/news/sudan-crisis-explained/](https://www.unrefugees.org/news/sudan-crisis-explained/).

100 "Sudan Crisis Explained," UN Refugee Agency.

101 "Sexual and reproductive health," UN Refugee Agency, last accessed July 18, 2025, [www.unhcr.org/what-we-do/protect-human-rights/public-health/sexual-and-reproductive-health](https://www.unhcr.org/what-we-do/protect-human-rights/public-health/sexual-and-reproductive-health).

102 Stephanie Gee and Sandra Harlass, "Operational Guidance: Community Health in Refugee Settings," UN Refugee Agency, 2022, [www.unhcr.org/sites/default/files/legacy-pdf/63ef7c2f4.pdf](https://www.unhcr.org/sites/default/files/legacy-pdf/63ef7c2f4.pdf).



Selenat, pictured here, was married when she was 13 years old. (Credit: UK DFID)

interventions in Zambia.<sup>103</sup> Zambia is located in Southern Africa. It experienced a huge shift in demographics over recent years. It is one of the world's youngest countries by average age and has a high fertility rate.<sup>104</sup> As the youth population reaches reproductive age, there will be more need for reproductive services. Zambia is categorized by the UN as one of the forty-four least developed countries as of December 2024. Countries on this list are vulnerable to human rights violations due to their lack of progress towards sustainable development.<sup>105</sup> Zambia's economy

is very reliant on the mining and export of copper, and this market has changed a lot due to the recent COVID-19 pandemic.<sup>106</sup>

Frontiers in Reproductive Health focused on health services for young people. The Zambian government wants to give youth accurate health information and services both in and out of school. The practices they are taught formally in school should also be shown in the home, so that children can learn by example. They created the "Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition Communication and

Advocacy Strategy 2018–2021."<sup>107</sup> Zambia's Ministry of Health got support from the Swedish International Development Cooperation Agency (SIDA). SIDA evidence-based interventions focus on hiring and training health care workers, rebuilding essential facilities, purchasing healthcare materials, and actively monitoring progress. Many Zambian districts were studied to ensure diversity between rural and urban areas.

UNFPA has cited harmful social norms associated with reproduction in Zambia. As of 2021, there were 1.7 million child brides in Zambia, with 400,000 married before the age 15.<sup>108</sup> In December 2024, the Zambian government made it illegal for individuals under 18 to marry. Nevertheless, many girls still face child marriage. To keep reproductive health education available, child marriage must be addressed. Overall, Zambian adolescents described having access to some reproductive health services. Services offered include sexual health education, assisted reproductive care, and programs to help girls return to school after giving birth. However, access remains limited, due to shortages of healthcare professionals. One maternal and child health coordinator shared an example of a girl who refused family planning

103 Margarate Nzala Munakampe et al, "Understanding inequalities in the coverage of adolescent sexual and reproductive health services: a qualitative case study of selected regions of Zambia," *Frontiers in Reproductive Health* 6, (2024): doi.org/10.3389/frph.2024.1399289.

104 "The World Bank in Zambia," World Bank Group, last modified October 8, 2024, www.worldbank.org/en/country/zambia/overview.

105 "LDCs at a Glance," UN Department of Economic and Social Affairs, last modified December 2024, policy.desa.un.org/themes/least-developed-countries-category/lpcs-at-a-glance.

106 "National Productive Capacities Gap Assessment: Zambia," UNCTAD, accessed August 7, 2025, unctad.org/es/isar/publication/national-productive-capacities-gap-assessment-zambia.

107 Munakampe et al., "Understanding Inequalities in the Coverage of Adolescent Sexual and Reproductive Health Services."

108 "Global Programme to End Child Marriage," UNFPA-UNICEF, 2020, www.unicef.org/media/111416/file/Child-marriage-country-profile-Zambia-2021.pdf.

support because the provider was her mother's friend and the girl feared her mother would find out.<sup>109</sup> This highlights a drawback of community-based healthcare, as providers with close community ties may unintentionally create bias or barriers to judgment-free care.

Healthcare providers may also impact accessibility. For example, some reportedly discouraged youth from HIV counselling and testing. Participants claimed they targeted those who did not follow all guidelines for treatment. This is why training healthcare professionals is so important. Community healthcare workers can be very beneficial when trained correctly. In the absence of healthcare workers, some participants noted herbal medicine was contraception in their community.<sup>110</sup> Herbal methods could be alternative forms of safe contraception, if other methods are not available. However, more research needs to be done to validate the safety of this kind of medicine. This should be done using clinical trials to effectively test the herbs as a type of medicine.

In Zambia, there is healthcare discrimination on the basis of marital status. Adolescents and unmarried women were reportedly “shunned” from receiving family

planning services.<sup>111</sup> Pressure to marry is a big societal factor at play in Zambia. Culture and religion also play a part in low access to family planning services. One adolescent male shared that the traditional beliefs of elders emphasized population increase, so elder relatives discourage family planning. Another participant shared that family planning is not allowed at all within the Christian faith, unless having many children would cause serious health risk to the mother. As of 2023, 95.5 percent of Zambians identified as Christian.<sup>112</sup> Such religious norms are widespread and therefore cause a significant barrier to services. The study concludes by offering recommendations for how to increase access to reproductive health in the future. Among these are strengthening health systems, collaboration, funding, and outreach.<sup>113</sup>

The Zambian case illustrates both the progress and the persistent barriers in making reproductive health services equitable for young people. Legal reforms, government strategies, and international support have created a framework for improving access, but gaps remain in staffing, training, privacy, and cultural acceptance. Addressing child marriage, reducing stigma,

and strengthening health systems will be essential if Zambia is to meet the reproductive needs of its rapidly growing youth population. More broadly, Zambia highlights how social norms, resource constraints, and service quality intersect to shape reproductive health access in least developed countries—underscoring the need for tailored, community-sensitive solutions supported by sustained international cooperation.

## Sustainable Development Goals (SDGs)

The United Nations' 17 Sustainable Development Goals are how the UN marks progress in global challenges.<sup>114</sup> The goals were created in 2016 at the United Nations Conference on Sustainable Development. The goals were aimed to be achieved by 2030. The goals replaced Millenium Development goals, which were created in 2000 to address poverty mainly.<sup>115</sup>

The goals have specific targets with indicators to measure the success. The UN's 193 member states are tracked in their progress towards these goals.<sup>116</sup> The two SDGs most relevant to this topic are Goal 3: Good Health and

109 Munakampe et al., “Understanding Inequalities in the Coverage of Adolescent Sexual and Reproductive Health Services.”

110 Madina Mohamed Adia et al., “Medicinal plant species used for contraception and reproductive health care in rural Uganda,” *Helicon* 11, no. 1 (December 2024): doi: 10.1016/j.helicon.2024.e41518

111 Munakampe et al., “Understanding Inequalities in the Coverage of Adolescent Sexual and Reproductive Health Services.”

112 “2023 Report on International Religious Freedom,” US Department of State, 2023, [www.state.gov/wp-content/uploads/2024/05/547499-ZAMBIA-2023-INTERNATIONAL-RELIGIOUS-FREEDOM-REPORT.pdf](https://www.state.gov/wp-content/uploads/2024/05/547499-ZAMBIA-2023-INTERNATIONAL-RELIGIOUS-FREEDOM-REPORT.pdf).

113 Munakampe et al., “Understanding Inequalities in the Coverage of Adolescent Sexual and Reproductive Health Services.”

114 “Take Action for the Sustainable Development Goals,” United Nations, accessed July 26, 2025, [www.un.org/sustainabledevelopment/sustainable-development-goals/](https://www.un.org/sustainabledevelopment/sustainable-development-goals/).

115 “Background on the Goals,” United Nations Development Programme, accessed August 7, 2025, [www.undp.org/sdg-accelerator/background-goals](https://www.undp.org/sdg-accelerator/background-goals).

116 “Country Profiles,” Sustainable Development Report, accessed July 16, 2025, [dashboards.sdgindex.org/profiles](https://dashboards.sdgindex.org/profiles)

Well Being, and Goal 5: Gender Equality. These goals depend on each other to solve the issue. There must be gender equality in order to achieve good reproductive health and well-being for all.

Target 3.1 aims to “reduce the global maternal mortality ratio to less than 70 per 100,000 live births.”<sup>117</sup> This means that they aim to have no more than 0.07 percent of women worldwide die due to pregnancy or childbirth. In 2023, the global maternal mortality rate was 197 per 100,000 live births.<sup>118</sup> According to the WHO, achieving target 3.1 by 2030 will require a 15 percent decrease in maternal mortality. Target 3.2 is very dependent on 3.1, as it discusses neonatal and child mortality.<sup>119</sup> Neonatal mortality refers to death of an infant within their first 28 days of life.<sup>120</sup> Target 3.2 aims to limit neonatal mortality to 12 per 1,000 live births and mortality for children under five years of age to 25 per 1,000 live births.<sup>121</sup> Interestingly, approximately 47 percent of deaths for children under 5 occur in the neonatal period. Decreasing neonatal mortality should be a way to achieve this target. Target

3.7 summarizes reproductive health. It aims to “ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.”<sup>122</sup> One of these target’s indicators is the percentage of women aged 15-49 who have their need for family planning satisfied by modern methods.<sup>123</sup> It is important that this target is monitored in the context of this issue.

*The 17 goals have specific targets with indicators to measure the success. The UN’s 193 member states are tracked in their progress towards these goals.*

While almost all of the targets for Goal 5 are relevant to this topic, targets 5.3, and 5.6 are the most important to this topic. Target 5.3 aims to “eliminate all harmful practices, such as child, early and

forced marriage and female genital mutilation.”<sup>124</sup> Child marriage is a significant obstacle towards access to reproductive rights. This is because child marriage often reflects a broad range of human rights violations that allow it to occur. Women not being given choice in marriage indicates a future lack of choice and focus on their reproductive health. Target 5.6 is highly related to this topic, as well as to CPD. It aims to ensure universal access to sexual and reproductive health and reproductive rights.<sup>125</sup> CPD is tasked with monitoring this and therefore works closely in monitoring the success of this target. The Programme for Action lays out several important objectives involved in reproductive healthcare access, including ensuring factual information, supporting voluntary decision making, and meeting the changing needs throughout life cycles.<sup>126</sup> This document is the blueprint for how this topic should be addressed in CPD.

<sup>117</sup> A/RES/71/313.

<sup>118</sup> “Maternal mortality,” World Health Organization, last modified April 7, 2025, [www.who.int/news-room/fact-sheets/detail/maternal-mortality](http://www.who.int/news-room/fact-sheets/detail/maternal-mortality).

<sup>119</sup> “Targets of Sustainable Development Goal 3,” World Health Organization, accessed July 26, 2025, [www.who.int/europe/about-us/our-work/sustainable-development-goals/targets-of-sustainable-development-goal-3](http://www.who.int/europe/about-us/our-work/sustainable-development-goals/targets-of-sustainable-development-goal-3).

<sup>120</sup> “Neonatal mortality rate (0 to 27 days) per 1000 live births) (SDG 3.2.2),” World Health Organization, accessed July 26, 2025, [www.who.int/data/gho/indicator-metadata-registry/imr-details/67](http://www.who.int/data/gho/indicator-metadata-registry/imr-details/67).

<sup>121</sup> A/RES/71/313.

<sup>122</sup> A/RES/71/313.

<sup>123</sup> “Family planning, need for family planning satisfied with modern methods, women of reproductive age (aged 15-49 years), proportion (SDG 3.7.1)” World Health Organization, accessed July 16, 2025, [www.who.int/data/gho/data/indicators/indicator-details/GHO/proportion-of-women-of-reproductive-age-who-have-their-need-for-family-planning-satisfied-with-modern-methods](http://www.who.int/data/gho/data/indicators/indicator-details/GHO/proportion-of-women-of-reproductive-age-who-have-their-need-for-family-planning-satisfied-with-modern-methods).

<sup>124</sup> “Accountability for Child Marriage,” Center for Reproductive Rights, last modified 2013, [reproductiverights.org/sites/default/files/documents/ChildMarriage\\_FactSheet\\_Web.pdf](http://reproductiverights.org/sites/default/files/documents/ChildMarriage_FactSheet_Web.pdf).

<sup>125</sup> A/RES/71/313.

<sup>126</sup> T/ESA/SER.A/149.

## BLOC ANALYSIS

### Point of Division

The most effective way to categorize states' positions on this topic is by using the Hologic Global Women's Health Index.<sup>127</sup> Developed in collaboration with international health experts and the research team of the Gallup World Poll, the Index measures the knowledge and behavior of women and girls aged 15 and older across 142 countries. Its findings are based on qualitative research, conducted through healthcare-related questions asked to randomly selected populations of women. With four years of data, the most recent collected in 2023 and analyzed in 2024, the Index ranks women's health on a scale of 1–100 across six dimensions: preventive care, emotional health, opinions of health and safety, basic needs, individual health, and an overall ranking based on the first five. Each dimension examines a crucial aspect of women's well-being, but for this topic the "opinions of health and safety" category is especially relevant. This category includes the sub-dimension of pregnancy care, which is vital to the discussion. Delegates are encouraged to consult the Hologic Global Women's Health Index and its dimensions

as a tool to better understand global disparities and to inform the formation of blocs during committee.

### States with Consistent Access to Reproductive Care

States in this bloc generally score 80 or above in the opinions of the health and safety dimension of the Hologic Global Women's Health Index. These states maintain relatively fair and consistent healthcare systems, where women typically have access to care before, during, and after pregnancy. High-scoring examples on the index include Kuwait, Switzerland, Singapore, and the UAE.<sup>128</sup> These countries rank within the top 35 states worldwide in gross domestic product (GDP) according to World Population Review, with the exception of Kuwait, which ranks 59th. This correlation between Index scores and GDP highlights the role of wealth in ensuring access to reproductive care.

In addition to economic strength, states in this bloc demonstrate a willingness to expand reproductive rights and often benefit from supportive government policies.

Their resources position them to design solutions that could be adapted across all CPD member states. Switzerland exemplifies this bloc. Its healthcare system, considered among the world's best, has been based on universal, mandatory private health insurance since 1996.<sup>129</sup> The government ensures access by subsidizing low-income families and emphasizing preventive care. Expectant mothers, even under the most basic plans, are guaranteed affordable options for childbirth and postnatal services. Pregnancy-related costs are fully covered by insurance from the twelfth week of pregnancy until the postnatal check-up. This framework allows women in Switzerland to experience a safe and affordable pregnancy journey, which is an essential right for women globally.<sup>130</sup> Switzerland also performs strongly on Sustainable Development Goal (SDG) indicators relating to maternal health and gender equality, reflecting its long-term commitment to reproductive care.<sup>131</sup>

Singapore also demonstrates the characteristics of this bloc. With a high GDP per capita and one of the most efficient healthcare systems in Asia, Singapore combines universal healthcare subsidies with mandatory

<sup>127</sup> "Hologic Global Women's Health Index Rankings," Hologic, 2024, [hologic.womenshealthindex.com/index-rankings](https://hologic.womenshealthindex.com/index-rankings).

<sup>128</sup> "Hologic Global Women's Health Index Rankings," Hologic.

<sup>129</sup> Sara Kettler, "The Best Countries for Women's Healthcare," International Citizens Insurance, accessed July 20, 2025, [www.internationalinsurance.com/news/best-womens-healthcare/?srsltid=AfmBOoqL5GXtuduQAoOXraOPPzRfDvLMpfgFj8Q4M9cvdc10v8D31pXi](https://www.internationalinsurance.com/news/best-womens-healthcare/?srsltid=AfmBOoqL5GXtuduQAoOXraOPPzRfDvLMpfgFj8Q4M9cvdc10v8D31pXi).

<sup>130</sup> Roosa Tikkanen et al, "Switzerland," The Commonwealth Fund, June 5, 2020, [www.commonwealthfund.org/international-health-policy-center/countries/switzerland](https://www.commonwealthfund.org/international-health-policy-center/countries/switzerland).

<sup>131</sup> "Switzerland," UN Women, accessed July 20, 2025, [data.unwomen.org/country/switzerland](https://data.unwomen.org/country/switzerland).

savings through the Medisave program, ensuring affordability for families.<sup>132</sup> Maternal and infant mortality rates are among the lowest in the region, and comprehensive prenatal and postnatal care is widely accessible. The United Arab Emirates has significantly expanded maternal and reproductive health services in recent decades, supported by its high investment in healthcare infrastructure. The country provides broad access to prenatal and postnatal care and has actively promoted maternal health through national strategies.<sup>133</sup> Saudi Arabia has made notable improvements in women's access to healthcare, reflected in steadily declining maternal mortality rates.<sup>134</sup> Its Vision 2030 reform agenda emphasizes modernizing healthcare delivery, including maternal services. Kuwait, despite ranking lower in GDP compared to the others, maintains universal access to healthcare, including maternal and reproductive services, supported by a strong welfare system.<sup>135</sup> These Gulf states tend to approach women's healthcare through large state investments in infrastructure and national development strategies.

Other states with similar levels of access include Nordic countries such as Norway, Sweden, and Finland would also fall into this

bloc.<sup>136</sup> Although Nordic states and several Muslim-majority countries differ significantly in cultural and political approaches to women's rights, both have similarities with this bloc because they achieve consistent, high-level access to reproductive care. States may reach similar outcomes through very different policy pathways, or in committee they might not collaborate in practice. While underlying beliefs about gender roles diverge, shared interest in effective healthcare access allows for potential cooperation within this bloc. Together, these states highlight that consistent access to reproductive care is strongly associated with both wealth and deliberate government policy. States in this bloc should utilize their resources and best practices to develop solutions adaptable to the diverse needs of all CPD member states.

### **States with Regulated Access to Reproductive Care**

States in this bloc have a score of about 50-80 in the health and safety dimension of the index. This is a very wide range and encapsulates the nuanced inconsistencies of the issue. These are states with

moderately effective healthcare systems with several obstacles toward consistent care. States in this bloc have a less clear correlation between GDP and healthcare outcomes. Political polarization, unequal coverage, discrimination, and cultural attitudes toward women's health all impact health. States in this bloc should utilize the resources they do have to develop their healthcare systems while still collaborating with other states to assist where possible.

One example of a country with high GDP but a moderate index score is the United States. Despite having the world's highest GDP, it holds only a moderate Index score of 70, with only 69 percent of women satisfied with pregnancy care, compared to 94 percent in the United Arab Emirates.<sup>137</sup> While US healthcare is technologically advanced, it is fragmented. A mix of public and private medical coverage leaves gaps in access for many. In 2023, 25.3 million Americans lacked health insurance, and the country reported the highest maternal mortality rate among industrialized nations, with sharp racial and ethnic disparities.<sup>138</sup> These outcomes highlight how wealth does not guarantee equitable reproductive care.

<sup>132</sup> "Hologic Global Women's Health Index Rankings," Hologic.

<sup>133</sup> *Pinsent Masons*, "Rapid development of women's health in Middle East," Out-Law Analysis, January 21, 2025, [www.pinsentmasons.com/out-law/analysis/rapid-development-of-women-health-middle-east](http://www.pinsentmasons.com/out-law/analysis/rapid-development-of-women-health-middle-east).

<sup>134</sup> "Hologic Global Women's Health Index Rankings," Hologic.

<sup>135</sup> "Hologic Global Women's Health Index Rankings," Hologic.

<sup>136</sup> "Hologic Global Women's Health Index Rankings," Hologic.

<sup>137</sup> Emily Cotlier, "The U.S. Healthcare System," International Citizens Insurance, accessed July 20, 2025, [www.internationalinsurance.com/health/systems/us-healthcare.php](http://www.internationalinsurance.com/health/systems/us-healthcare.php).

<sup>138</sup> Brian Tsai, "U.S. Uninsured Rate Hits Record Low in First Quarter of 2023," Center for Disease Control, August 3, 2023, [blogs.cdc.gov/nchs/2023/08/03/7434/](https://blogs.cdc.gov/nchs/2023/08/03/7434/).

Other countries of this bloc share similar inconsistencies.<sup>139</sup> Brazil has made major strides in family planning but continues to face regional disparities in maternal care. South Africa guarantees reproductive rights constitutionally but struggles with inequitable service delivery between urban and rural areas. India, despite economic growth, still reports gaps in maternal health access tied to caste and geographic inequality. These countries often show mixed results on SDG 3 indicators.<sup>140</sup> For example, while maternal mortality rates remain a challenge, the proportion of women of reproductive age who have their need for family planning satisfied with modern methods is relatively high. At the same time, an SDG 5 indicator, “legal frameworks that promote, enforce and monitor gender equality,” tends to underperform in this bloc. These indicators highlight that reproductive healthcare in Bloc Two is partially accessible, with progress in some areas, but barriers in others.

These cases illustrate that Bloc Two has structural and systemic barriers that create uneven access to reproductive care. Delegates from such states should recognize both the strengths and weaknesses of their healthcare systems and work collaboratively to bridge gaps.

## States with Difficulty Accessing Reproductive Care

States in this bloc have a score below 50 in the health and safety dimension of the index. These are states often considered to be LDCs (Least Developed Countries) or conflict-affected states.<sup>141</sup> These states will usually have lower GDPs and healthcare systems that are ineffective, due to lack of funding, instability, and weak governance. Similar to the previous bloc, there are a variety of factors that give rise to a difficulty accessing pregnancy care. However, in this bloc, political, social, cultural, and economic disparities are much more severe.

Lebanon is one good example of what a state in this bloc looks like. Lebanon has the fifth lowest index rating of the countries surveyed, with a score of 37.<sup>142</sup> Only 31 percent of women reported satisfaction with pregnancy care, compared to 69 percent in the United States. Lebanon’s GDP ranked 201st in 2022, reflecting economic struggles. Ongoing conflict tied to regional instability has further eroded access: healthcare workers and facilities have been targeted, and the WHO reported that proportionally more health workers and patients have been

killed in Lebanon than in Ukraine or Gaza.<sup>143</sup> Conflict thus magnifies the barriers to reproductive health.

Other states in this bloc face similar challenges.<sup>144</sup> Afghanistan continues to record among the highest maternal mortality rates worldwide, with severe restrictions on women’s healthcare access. South Sudan struggles with fragile institutions, poor infrastructure, and displacement that prevents consistent care. Chad, one of the lowest scorers on the Index, faces chronic underfunding and persistent gender inequality that leaves reproductive services inaccessible to much of the population. SDG indicators reflect these realities. Under SDG 3 (Good Health and Well-Being), indicators such as maternal mortality remain extremely high, while under SDG 5 (Gender Equality), indicators such as “legal frameworks that promote, enforce and monitor gender equality” are consistently weak, particularly in areas of marriage, family, and sexual health rights.<sup>145</sup>

Delegates should recognize that states in this bloc face systemic barriers beyond their own capacity to resolve. Solutions will require international assistance, development cooperation, and a focus on ensuring that progress in global reproductive care does not leave these states behind.

<sup>139</sup> “Hologic Global Women’s Health Index Rankings,” Hologic.

<sup>140</sup> “United States of America,” UN Women, accessed July 20, 2025, [data.unwomen.org/country/united-states-of-america](https://data.unwomen.org/country/united-states-of-america).

<sup>141</sup> “UN list of least developed countries, UN Trade and Development, accessed July 20, 2025, [unctad.org/topic/least-developed-countries/list](https://unctad.org/topic/least-developed-countries/list).

<sup>142</sup> Hologic Global Women’s Health Index Rankings,” Hologic.

<sup>143</sup> “Lebanon,” Aljazeera, last modified July 18, 2025, [www.aljazeera.com/where/lebanon/](https://www.aljazeera.com/where/lebanon/).

<sup>144</sup> Hologic Global Women’s Health Index Rankings,” Hologic.

<sup>145</sup> “Lebanon,” UN Women, accessed August 7, 2025, [data.unwomen.org/country/lebanon](https://data.unwomen.org/country/lebanon).

## COMMITTEE MISSION

The Commission on Population and Development (CPD) is the UN body tasked with monitoring the implementation of the 1994 Programme of Action, which was adopted by 179 countries at the International Conference on Population and Development (ICPD) in Cairo.<sup>146</sup> The Programme of Action emphasizes human rights, reproductive health, and gender equality as central to achieving sustainable development.<sup>147</sup>

To fulfill its mandate, the CPD reviews countries' progress in implementing national programs aligned with these priorities. It does so in coordination with the 2030 Agenda for Sustainable Development, particularly the goals related to health, education, and gender equality. Beyond monitoring, the CPD also provides tools, facilitates dialogue, and organizes events to promote education, best practices, and international cooperation on these issues.<sup>148</sup>

CPD has three main goals that all work toward the core mandate of monitoring the Programme for Action.<sup>149</sup> The first is to arrange for the study of and advise on trends and issues regarding population. The second emphasizes the need to monitor both the successes

and failures of the Programme for Action on national, regional, and global levels. Finally, the third is to make recommendations to the Economic and Social Council on how to best move toward sustainable development based on the success of the Programme for Action.<sup>150</sup>

CPD itself cannot enforce recommendations on any people or states. Thus, it must focus on realistic solutions that all member states can implement effectively. Some examples of viable solutions include smaller scale human rights missions and education programs.

The Commission on Population and Development is responsible for monitoring how human rights and reproductive health advances worldwide. This mandate is especially critical for populations living in poverty, who often lack strong governmental representation or advocates to champion their needs.

Through its monitoring role, the CPD identifies gaps and inequalities in access to reproductive rights and highlights regions where progress is most urgently required. By supporting smaller-scale programs and missions, delegates have the opportunity to make tangible improvements on the ground.

Countless women and children continue to die each year from preventable causes linked to inadequate reproductive healthcare. To address this, the CPD must not only assess progress but also actively promote accountability and mobilize international cooperation, ensuring that every person has access to the rights and services they deserve.

<sup>146</sup> "Commission on Population and Development," International Planned Parenthood Federation, accessed July 26, 2025, [www.ippf.org/our-approach/advocacy/un/commission-population-and-development](http://www.ippf.org/our-approach/advocacy/un/commission-population-and-development).

<sup>147</sup> "International Conference on Population and Development," United Nations Population Fund, accessed July 26, 2025, [www.unfpa.org/icpd](http://www.unfpa.org/icpd).

<sup>148</sup> "Commission on Population and Development," International Planned Parenthood Federation.

<sup>149</sup> "Commission on Population and Development," United Nations Population Division, accessed July 26, 2025, [www.un.org/development/desa/pd/content/CPD](http://www.un.org/development/desa/pd/content/CPD)

<sup>150</sup> United Nations Population Division, "Commission on Population and Development."

## RESEARCH AND PREPARATION QUESTIONS

The following research and preparation questions are meant to help you begin your research on your country's policy. These questions should be carefully considered, as they embody some of the main critical thought and learning objectives surrounding your topic.

### Topic A

1. What is the role of international cooperation in managing the impacts of population growth?
2. How can countries engage in enhancing access to education and eliminating structural inequities that produce educational barriers?
3. What strategies can ensure universal access to youth education without limitations? What is your country doing to support youth education?
4. What steps should your country take for children's education in conflict zones?
5. In what ways did your country's government framework implement educational equity among marginalized communities?
6. How can modern technology play a role in building education through sustainable approaches?
7. Which measures should be considered to decrease the percentage of out-of-school youth globally?

### Topic B

1. What inequalities exist between developed and developing countries in access to reproductive technologies? How is your country affected or helping?
2. How does your country regulate or support access to fertility treatments, and what challenges remain for the population? And how are they spending their solutions to address these challenges?
3. What risk do women face becoming surrogates, and how effective is international law in protecting them?
4. How can we help make reproductive technologies safer and more affordable for people in low-income countries?
5. What role should governments play in preventing exploitation in the surrogacy industry?
6. How can countries with different cultural or religious views on reproduction find common ground on this issue?
7. What measures is your country taking to reduce global inequalities in birth rates?

## IMPORTANT DOCUMENTS

### Topic A

- “251M Children and Youth Still out of School,” UNESCO, 2024, [www.unesco.org/en/articles/251m-children-and-youth-still-out-school-despite-decades-progress-unesco-report](http://www.unesco.org/en/articles/251m-children-and-youth-still-out-school-despite-decades-progress-unesco-report).
- “Education,” Every child has the right to learn, UNICEF, 2024, [www.unicef.org/education](http://www.unicef.org/education).
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- Our World in Data, “Children and Adolescents out of School,” UNESCO Institute for Statistics, 2025, [ourworldindata.org/grapher/children-and-youth-out-of-school](http://ourworldindata.org/grapher/children-and-youth-out-of-school).
- Robert A. Hahn and Benedict I. Truman, “Education Improves Public Health and Promotes Health Equity,” *International Journal of Health Services* 45, no. 4 (May 19, 2015): 657–78, doi.org/10.1177/0020731415585986.

### Topic B

- “Critical considerations and actions for achieving universal access to sexual and reproductive health in the context of universal health coverage through a primary health care approach,” World Health Organization, last modified July 12, 2022, [www.who.int/publications/i/item/9789240052659](http://www.who.int/publications/i/item/9789240052659).
- Jonna Arousell and Aje Carlbom, “Culture and religious beliefs in relation to reproductive health,” *Best Practice & Research Clinical Obstetrics & Gynaecology*, no. 32 (April 2016): 77-87, doi.org/10.1016/j.bpobgyn.2015.08.011.
- United Nations General Assembly, Resolution 71/313, Global indicator framework for the Sustainable Development Goals and targets of the 2030 Agenda for Sustainable Development, A/RES/71/313, (July 6, 2017), [unstats.un.org/sdgs/indicators/Global-Indicator-Framework-after-2025-review-English.pdf](http://unstats.un.org/sdgs/indicators/Global-Indicator-Framework-after-2025-review-English.pdf). United Nations, Programme of Action of the International Conference on Population and Development, Cairo, 5-13 September 1994, adopted by 179 States, 1995, [www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un\\_1995\\_programme\\_of\\_action\\_adopted\\_at\\_the\\_international\\_conference\\_on\\_population\\_and\\_development\\_cairo\\_5-13\\_sept.\\_1994.pdf](http://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un_1995_programme_of_action_adopted_at_the_international_conference_on_population_and_development_cairo_5-13_sept._1994.pdf)
- W Ombelet, “Global access to infertility care in developing countries: a case of human rights, equity and social justice,” *Facts, Views, and Vision in ObGyn* 3, no. 4 (2011): 257-266, [pmc.ncbi.nlm.nih.gov/articles/PMC3987469/](http://pmc.ncbi.nlm.nih.gov/articles/PMC3987469/).

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