

Human Rights Committee

Combating malnutrition in children



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Forum:	The Human Rights Committee
Issue:	Combating malnutrition in children
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Introduction

Malnutrition in children is a grave ongoing global humanitarian crisis and has been escalating in recent years, stemming from the intensity of the climate crisis, ongoing conflicts, economic shocks and displacement, driving millions to the brink of starvation. It is caused by food insecurity and the inability to access nutritious food. Malnutrition violates the basic rights of children, disrupting development, weakening the immune system and even leading to death. However, efforts to combat malnutrition have been lessening globally, and in 2024, for the sixth consecutive year, acute food insecurity and child malnutrition rose, greatly endangering millions of people in the world's most vulnerable regions. At least 14 million children are estimated to face disruptions in nutrition support, greatly heightening the risk of severe malnutrition and death. Therefore, multilateral approaches are required to combat the growing crisis, as well as substantially increasing the funding towards nutrition and health services.

Definition of Key Terms

Malnutrition: deficiencies, excesses or imbalances in a person's intake of nutrients and energy, leading to conditions of undernutrition or overnutrition

Stunting: the impaired growth and development that children experience due to poor nutrition, repeated infections, and inadequate psychosocial stimulation

Wasting: the most immediate and life threatening form of malnutrition wherein a child is too thin, in relation to their height and their immune systems are weak

Famine: severe and prolonged hunger in a substantial proportion to the population of a region or country, resulting in widespread and acute malnutrition and death by starvation and disease

Food insecurity: the condition of not having access to sufficient food, or food of an adequate quality, to meet one's basic needs

Supplementation: the addition of concentrated nutrients, such as vitamins and protein, to fill nutritional gaps and correct deficiencies when regular food intake is insufficient – therefore supporting recovery from malnutrition



Obesity: the excessive accumulation of body fat, usually caused by consuming more calories than the body can use, leading to being very overweight

General Overview

In recent years, malnutrition, particularly regarding children, has reached extremely high levels. The populations of fragile regions are at even greater risk as the continuing humanitarian crises and forced displacement (including internally displaced persons - IDPs and refugees) make them far more vulnerable to food insecurity. In the Gaza Strip, Mali, Sudan and Yemen malnutrition in children greatly rose, with nearly 38 million children under the age of five being acutely malnourished across 26 nutrition crises.

Child malnutrition is combatted with the intervention of organisations such as UNICEF, who work to detect malnutrition early on and promote treatments such as supporting breastfeeding, supplying micronutrient supplements, which greatly concerns aiding proper nutrition in adolescent girls and women to protect both them and their future children, facilitating nutrition screenings and expanding social protection programs. However, despite one of the world's Sustainable Development Goals being to "end all forms of malnutrition by 2030", overall funding for aid has been greatly reduced in recent years. These cuts come at a distinctly precarious time with new global conflicts, disease outbreaks and the deadly consequences of climate change.

Conversely, overnutrition also plagues poor communities, as they predominantly consume processed, cheap food. This can lead to diseases such as diabetes and stroke and is caused by broader socio-economic factors. Therefore, poverty is a driving factor in both forms of malnutrition and requires specifically targeted solutions.

Major Parties Involved

UNICEF: It is a core agency of the United Nations, focused on saving children's lives and defending their rights – they view child malnutrition as a violation of rights and work to solve it and promote access to nutritious food.

World Food Programme (WFP): The WFP combats child malnutrition through a multitude of initiatives, with a strong understanding for how crucial such aid is and placing emphasis on the importance of prevention in malnutrition.

World Health Organisation (WHO): The WHO works to tackle acute malnutrition through a multitude of initiatives and also places emphasis on the importance of prevention and management.

Somalia: Somalia is currently experiencing the worst rate of malnutrition in the world, with over 51% of the population suffering from a certain level of malnutrition and 2 in 3 children living in severe food poverty. This stems from inequity, conflict and climate crises – making much of the population very vulnerable.

United States of America: As the largest aid donor in the world (followed by Germany and the European Union) and a major funder of UNICEF, the USA plays a highly relevant role in combatting malnutrition in children globally. However, since the ending of the USAID program and due to shifting political views which focus on domestic issues, such funding is being notably reduced.

Timeline of Events

Date	Description of Event
1914-1945:	World Wars I and II cause resounding disruptions in agriculture and famines leading to global food shortages.
1946:	UNICEF is founded, as the first global institution created to focus on the support of children's health and nutrition. Thus, worldwide efforts commence to combat malnutrition in children.
1961:	World Food Programme is established and becomes the largest humanitarian food provider in the world.
1974:	The first World Food Conference is held and hunger and malnutrition are officially declared a global crisis requiring multilateral coordinated action.
1990:	The Convention on the Rights of the Child, recognizes adequate nutrition as a fundamental human right for every child.
1990:	The Global Stunting Rate is measured to be 40% and this data becomes a baseline for future progress.
2015:	Sustainable Development goal 2 declares the target of ending all forms of malnutrition by 2030.
2020-2022:	The Covid-19 pandemic causes global disruptions to food systems, healthcare and supply chains – this results in millions more children becoming at risk of stunting and wasting.

Previous attempts to solve the issue

The establishment of global institutions

The creation organisations such as UNICEF and the WFP work consistently to deliver aid in the domains of food and healthcare work to give support in nutrition crises. Their work is integral to helping combat the beginnings and lingering impacts of child malnutrition. Yet, even though their goals and actions are universally recognized to be of high urgency, there are multiple barriers that impede them. These institutions aim to foster structured cooperation across nations and continents, but geopolitical tensions, conflicts and climate change hinder these attempts and result in growing rates of food insecurity, all of which makes it far more difficult to deliver aid. As these agencies require global support and commitments, the differing politics and objectives of nations create complex obstacles to overcome.

The creation of targeted programs

Since the inception of UNICEF and the WFP, these institutions have put a range of programs in place, with the aim of reducing child poverty and increasing food security,

throughout the world. They have worked to reduce the impacts of malnutrition through social and economic programs, such as the WFP's School Feeding Program, wherein children are given nutritious meals at school and root issues including poverty, food insecurity and lack of access to education are targeted and tackled. Another example of these initiatives are the UN-Supported Nutrition and Agriculture Programs in the Sahel, where malnutrition in children is reduced by improving agriculture (for instance with irrigation systems and farmer training) and community resilience.

At the start of the program, the impacts were largely positive, however it faced multiple difficulties, as climate change brought crop failures and droughts that increased malnutrition, undermining the long-term progress of the program. These issues were worsened by major funding cuts, as many donors began to give substantially less economic aid to malnutrition crises throughout the world. The impacts of climate change and funding cuts lead to a lack of support for many families and caused the weakening of a previously strong long-term solution. Overall, programs throughout the world can be vulnerable to collapse, without adequate support and economic aid in the face of growing pressures of conflicts and the climate crisis.

Possible Solutions

To effectively combat malnutrition crises throughout the world, it is imperative that **the root causes of food insecurity are addressed**. Climate change greatly impacts the nutritional health of communities, by affecting water resources, crop and animal species, and biodiversity loss. The impacts of droughts and heat waves endanger millions – therefore a greater focus on climate change is required. Another root cause of malnutrition is displacement and conflicts that greatly threaten food security. Consequently, to protect food security, the foremost issues that menace it must be addressed.

Improving healthcare systems would substantially help in preventing and treating malnutrition. These institutions should be installed and enhanced throughout the world, specifically in vulnerable regions; they would need to be equipped with necessary supplies, trained professionals and tools to detect early signs of malnutrition. Cross-border agreements may be needed to sustain these institutions, therefore cooperation between nations is important.

It is essential that long-term solutions are implemented to ultimately put an end to malnutrition in children and in vulnerable communities. This would require **empowering communities**, by providing initiatives that promote education, training and resources – to ensure that they can attain better nutritional standards. At first, emergencies must be treated with essential healthcare services and enhanced access to clean water and sanitation, to combat the poverty often blocking families from such necessities. Subsequently, the organisations aiding them must consult with the communities and work to equip them with the resources necessary to maintain this standard.

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