

TQO Conflict Related Sexual Violence

Conflict Related Sexual Violence (CRSV) is the "rape, sexual slavery, forced prostitution, forced pregnancy, forced abortion, enforced sterilization, forced marriage, and any other form of sexual violence of comparable gravity perpetrated against women, men, girls or boys that is directly or indirectly linked to a conflict", according to the report on CRSV by the United Nations Secretary General, António Guterres.

Unfortunately, CRSV is a frequent war tactic, targeting civilians. Often, survivors of CRSV are victims of long term trauma and humiliation. Many are also harmed physically, sexually and reproductively. While this matter affects everyone, women and girls experience 95% of Conflict Related Sexual Violence.

In the past 10 years, the UN have recorded over 51,000 victims and survivors. Often, CRSV is left unreported, with thousand of victims suffering alone every year, due to stigmatisation, and humiliation associated with CRSV. There can be long lasting mental health effects for victims who do not have any support from family, friends or community. Many victims never know the identity of their offenders, and are unable to take legal action or see their perpetrators be held accountable.

In recent history, CRSV has been a tool of war to terrorise, displace and traumatise civilians. Conflicts such as the Rawandan Genocide and the Bosnian War have documented cases of CRSV, while recent conflicts, notably Ukraine, the Democratic Republic of the Congo and the Israel-Hamas Conflict have seen cases of CRSV inflicted on men and women alike as methods of torture or pure humiliation.

When writing a resolution on this topic, it is important to address all aspects of the issue. Delegates should not only consider the eradication of CRSV, but should also address the short term and long term challenges for the survivors and communities affected, and the strive for accountability for CRSV perpetrators.

https://peacekeeping.un.org/en/conflict-related-sexual-violence

https://ukraine.ohchr.org/en/In-Ukraine-survivors-speak-out-about-conflict-related-sexual-violence

TQO Period Poverty and Access to Sanitary Products in Conflict Zones:

Period poverty refers to the "inability to afford and access menstrual products, sanitation and hygiene facilities and education and awareness to manage menstrual health." According to UNWOMEN. Every month, two billion people menstruate, and yet, every month, 500 million of those people dread menstruation due to either expense of sanitary products, or lack of access to the basic adequate facilities. Unfortunately, the most vulnerable people in society are impacted by period poverty, often due to the expense of sanitary products and the "pink tax". In the USA, Sanitary Products (Pads, tampons etc.) are classed as "Luxury Products" and taxed at the highest rate – meaning they are more expensive for consumers. Menstruation is a natural and inevitable process for women and girls, and access to sanitary products should be a basic right.

In time of war and conflict, society and norm are put on hold, and often, menstrual health is not prioritised. The UN reported that more that 700,000 women and girls in Gaza experienced menstrual cycles and didn't have adequate access to basic sanitary products. As a result many were forced to use improvised methods such as using torn pieces of clothing, dirty rags, rugs or sitting on old tin cans. These methods leave menstruating women without dignity, and are ineffective, uncomfortable and unhygienic. The lack of access to sanitary products has a devastating effect in times of conflict. As well as this, displaced people living in transit camps often do not have adequate access to hygiene facilities, sanitary products or privacy. The UNHCR states that at least 122.6 million people have been forcibly displaced since June 2024, with the number currently increasing. 50% of refugees are women and girls, and their basic right to menstruate while being able to maintain hygiene and dignity should be upheld.

The United Nations Population Fund (UNFPA, the Sexual and Reproductive Healthcare Agency of the UN) and UNICEF are distributing "dignity kits", which comprise of basic items that women and girls need to maintain basic hygiene during menstruation. Although the UN has made an effort to reduce the issue of the lack of access to sanitary products, the problem is remains vast and still affects people globally.

https://www.unwomen.org/sites/default/files/2024-04/gender-alert-gender-analysis-of-the-impact-of-the-war-in-gaza-on-vital-services-essential-to-womens-and-girls-health-safety-en.pdf

https://www.unwomen.org/en/news-stories/explainer/2024/05/period-poverty-why-millions-of-girls-and-women-cannot-afford-their-periods

https://news.un.org/en/story/2024/06/1150541

TQO Reducing the Breast Cancer Mortality Rate

Hard work and advancements in medical science have successfully led to the reduction of the breast cancer mortality rates in many countries. Despite this, over 670,000 deaths in 2022 globally were due to breast cancer alone.

In many low and middle income countries/LEDCs (Less Economically Developed Countries), the breast cancer survival rate is still 50 per cent or less. Nearly 80% of deaths from breast and cervical cancer occur in low and middle-income countries. The fight against breast cancer is often damaged by delayed diagnoses, gaps in public awareness about early detection, and uneven access to innovative treatments and comprehensive care. Many communities lack regular screenings, which allows the disease to progress undetected.

As well as this, treatment for breast cancer is long, and can be a lonely and isolating process. People undergoing treatment in LEDCs may not always have access to mental health services, and this is vital for a full recovery.

Another factor that should be addressed is the promotion of lifestyles that may reduce the risk of breast cancer in the future. Many people are not fully informed on the topic of breast cancer, regarding both its diagnosis or self diagnosis and prevention.

Increasing awarness, improving early detection, and expanding access to advanced treatments are vital steps in reducing the breast cancer mortality rate, especially in LEDCs, and a resolution on this topic must consider all aspects of the problem.

https://www.who.int/news-room/fact-sheets/detail/breast-cancer

https://unric.org/en/invisible-scars-how-breast-cancer-impacts-mental-health/

https://unric.org/en/too-few-women-are-aware-of-the-links-between-alcohol-and-breast-cancer/

https://www.cancerresearchuk.org/about-cancer/breast-cancer/risks-causes/reducing-breast-cancer-risk