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# The United Nations Convention on the Rights of the Child: Its Relevance for Adolescents

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The United Nations Convention on the Rights of the Child (CRC, United Nations General Assembly, 1989) is a transformative document which has already improved the lives of millions of young people worldwide. Ratified into law by the majority of the countries of the world, it is the first human rights treaty focusing specifically on the rights of individuals under 18 years of age. The rights described in the treaty, however, are often seen as more important for younger children than for adolescents. This policy statement reviews the germane research on the period of adolescence and affirms that the protections and entitlements in the CRC are as important for adolescents as for younger children. Recommendations for policy and research are included.

The United Nations Convention on the Rights of the Child (CRC, United Nations General Assembly, 1989) was adopted by the United Nations General Assembly in November 1989, and it entered into force less than a year later in September 1990. Within a decade, the majority of countries of the world had ratified the CRC into law; the only exception still being the United States. [Corrections added on 3/ 18/2015 after first online publication 9/26/2014: In the preceding sentence, "the only exceptions were Somalia and the United States" was changed to "the only exception still being the United States." Ratification of the CRC legally binds countries to meet the obligations and responsibilities contained in the treaty. Viewed historically, the CRC may be the closest instance to date of a universally ratified treaty. This Convention is based on "recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family," thus recognizing children and adolescents as individuals worthy of citizenship and serving to increase the commitment of all nations to young people's political, civil, social, economic, and cultural rights. In so doing, young people are regarded as active agents and holders of rights. The CRC's overarching theme of respect for the dignity of the child is seen in the

comprehensive nature of the articles and provisions pertaining to children's and adolescents' well-being and development.

The rights and obligations articulated in the CRC find their roots in the Geneva Declaration of the Rights of the Child adopted by the Assembly of the League of Nations in 1924, and the Declaration of the Rights of the Child unanimously endorsed by the UN General Assembly in 1959. Two decades later, the UN General Assembly proclaimed 1979 as the International Year of the Child and set into motion the working group charged to draft a legally binding document, the CRC.

The CRC is the first international human rights treaty that focuses specifically on children's and adolescents' rights. It consists of a preamble and 41 substantive articles stating the rights of "the child," along with 13 procedural and implementation articles indicating the responsibilities of "States Parties" to ensure that children are able to benefit from those rights articulated in the document. In 2000, the United Nations General Assembly adopted two "optional protocols" to the CRC: (1) on the involvement of children in armed conflict and (2) on the sale of children, child prostitution, and child pornography. In 2011, the General Assembly adopted a Third Optional Protocol: (3) on the introduction of a

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communications procedure that allows children or their representatives to submit complaints about States' violations of their rights directly to the United Nations Committee on the Rights of the Child.

The optional protocols to the CRC serve as additional legal mechanisms that promote and protect children's and adolescents' well-being and also allow non–States Parties that have not ratified the full treaty to ratify or accede to them. For example, the United States, which has not ratified the CRC, has ratified the optional protocols concerning the involvement of children in armed conflict and the sale of children, child prostitution, and child pornography.

Four core principles provide the foundation for the CRC and reflect fundamental values and assumptions about the treatment of children and adolescents, their protection, and their participation in society. These core principles include *freedom from* discrimination (Article 2), which prohibits "discrimination of any kind, irrespective of the child or his parent's or legal guardian's race, color, sex, language, religion, political or other opinion, national, ethnic, social origin, property, disability, birth or other status." The principle of freedom from discrimination echoes the philosophy of the 1965 Convention on the Elimination of Racial Discrimination and the more recent 1979 Convention on the Elimination of All Forms of Discrimination Against Women (UNICEF, 2009). The principle of the best interests of the child (Article 3) states that "in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration." The right to life, survival and development (Article 6) acknowledges that "every child has the inherent right to life" and that "States Parties shall ensure to the maximum extent possible the survival and development of the child." Finally, the right to participate and respect for the views of the child (Article 12) indicates that "States Parties shall assure to the child who is capable of forming his or her own views the right to express those views in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child." These four core principles represent the underlying requirements for any and all other human rights to be realized (Diers, 2013; UNICEF, 2009, 2011).

The various articles making up the CRC can be grouped into three broad categories of rights (Diers, 2013; UNICEF, 2009):

1 Survival and development rights: These include rights to basic health and health services (Article

- 24), formal education (Article 28), leisure and cultural activities (Article 31), parental guidance (Article 5), and information and knowledge about rights (Article 42). This also includes the rights and well-being of specific groups of children, such as refugee children (Article 22), disabled children (Article 23), and children of minority and indigenous groups (Article 30).
- 2 *Protection rights*: These include rights protecting children and adolescents from all forms of violence (Article 19) and sexual exploitation and abuse (Article 34). This also includes the right to special protection in times of war and armed conflict (Article 38) and protection from abuse in the criminal justice system (Article 40).
- 3 Participation rights: These include rights entitling children and adolescents to have a say in matters and decisions affecting them (Article 12). This also includes freedom of expression (Article 13), freedom of thought, conscience and religion (Article 14), and freedom of association and assembly (Article 15). Engaging participation rights helps young people, as they mature, to the realization of all their rights, and empowers them for an active role in civil society.

Finally, as neither protection nor participation is preeminent, the CRC attempts to achieve a workable integration (Melton, 2008) or balance between these two broad categories of rights (Ruck & Horn, 2008). In addition, it has been suggested that States Parties approach this balance developmentally (Daiute, 2008; Limber & Flekkoy, 1995), as reflected in a formulation that appears a number of times in the CRC, "the evolving capacities of the child."

The CRC defines children as "every human being under 18 years of age" (unless the national age of majority is lower). Too often, however, attention is paid only to improving the life circumstances of younger children (Ruck & Horn, 2008; UNICEF, 2011). While great strides have been made, for example, in reducing infant and child mortality around the world (Diers, 2013), adolescents are often overlooked when implementing the CRC (UNICEF, 2011). As Diers (2013) recently pointed out, however, greater attention needs to be paid to protecting and upholding the rights of adolescents. Currently, the world is home to roughly 1.2 billion adolescents aged 10-19 years, making up nearly 18% of the population of the world (Diers, 2013; UNICEF, 2011).

The aim of this policy statement is to affirm that the protections and entitlements outlined in the CRC are equally as important for adolescents as they are for children. For the purposes of this policy statement, we define adolescents according to the CRC, as those young people from 10 to under 18 years of age. We begin by providing an empirical rationale for our focus on why adolescents merit recognition as equal holders of rights under the CRC. This is followed by specific examples intended to be illustrative rather than exhaustive of adolescent rights under the CRC, identifying key issues with respect to each of the three categories of rights (survival and development, protection, and participation) that are especially germane to the well-being and development of adolescents. Given the comprehensive nature of the CRC, it is of course not possible to address every right or provision in detail, although all of them should be seen as relevant to full implementation. Finally, recommendations for policy and research are included.

# SCIENTIFIC RATIONALE FOR THE FOCUS ON **ADOLESCENTS**

During the period when the CRC was being formulated, our scientific understanding of adolescent development was much less extensive and established than it is at present. The burgeoning knowledge of the field is reflected, for example, in recent handbooks (Lerner & Steinberg, 2009) and encyclopedias (Brown & Prinstein, 2011), in which the aggregation of empirical evidence in many subfields of adolescent development is striking. This rapidly evolving understanding has direct bearing on how the implementation of the CRC should be interpreted with respect to the survival and development rights, protection rights, and participation rights of adolescents.

One striking area of growth in research on and knowledge about adolescence arises from developmental neuroscience, including work from neuroimaging (Casey & Jones, 2010). Although this portrait continues to grow and become more refined, some broad conclusions are applicable, particularly those that are convergent with longstanding and recent evidence from research on cognitive, social cognitive, and risk decision making (Keating, 2012; Konrad, Firk, & Uhlhaas, 2013; Smith, Chein, & Steinberg, 2013). The first observation is that brain growth is not symmetrical, with much of the limbic (arousal, reward) system maturing faster and earlier in adolescence, with prefrontal cortex development (analysis, judgment) proceeding more slowly and extending into the

mid-20s (Konrad et al., 2013). This developmental maturity mismatch, seen in neuroimaging, cognitive, and behavioral research, underlies a number of significant CRC concerns. Although the neuroscience evidence remains to be validated with population-level samples (Falk et al., 2013; Pfeifer & Allen, 2012), the observed population health patterns arising from behavioral misadventure, a major contributor to mortality and morbidity in this age range, are consistent with extant evidence of an earlier-developing "accelerating" system for arousal and reward and a later "braking" system that relies on reasoned judgment and the capacity for self-regulation of behavior, which are central to the "evolving capacities of the child" during adolescent development.

The establishment of regulatory social policies and culturally normative practices to mitigate this population health risk is a significant priority (as in, e.g., regimes to encourage safe-sex practices, barriers to substance use in early adolescence when addiction risks are highest, or promotion of graduated steps to safe driving). A related finding from neuroscience is the now-recognized synaptic overproduction of early adolescence, followed by a period of synaptic pruning that fine-tunes the individual to the environment actually experienced (Petanjek et al., 2011). This implies the need for careful societal scaffolding to promote health and development, and attention to aspects of the social environment that can have lasting negative effects (such as exposure to violence and/or sexual abuse, unequally distributed access to stimulating learning environments, limited access to social participation in both institutional and informal settings, or availability of potentially addictive substances at a vulnerable developmental period).

A key challenge raised by the current findings, as noted above, is establishing a workable balance between protection and participation rights. Recognizing the important ways in which adolescents are not fully mature is important to maintaining or establishing a number of legal protections, as in recent U.S. Supreme Court rulings, which invoked evolving international norms, prohibiting capital punishment for offenses committed before 16 years of age (Roper vs. Simmons, 2005) and similarly restricting mandatory life-withoutparole (LWOP) sentences (Graham vs. Florida, 2010; Miller vs. Alabama, 2012). These and similar protections, along with restrictive social policies in the service of optimizing population health as noted above, acknowledge that adolescents are on the

path to full maturity, but are not yet fully mature.

This recognition, however, needs to be carefully weighed against the empirically well-established need for and capability to exercise greater autonomy, choice, and self-determination. These are similarly central to healthy development, are equal to nurturance rights under the CRC (especially in Articles 12 through 15), and are understood by adolescents to coexist and develop in parallel (Ruck, Keating, Abramovitch, & Koegl, 1998). Extensive and long-standing research on psychosocial (Steinberg, Elmen, & Mounts, 1989; Zimmer-Gembeck, Ducat, & Collins, 2011) and cognitive (Keating, 1980, 2011, 2012) maturity support both the growing capabilities of adolescents to engage in more autonomous thought and behavior, along with the developmental benefits of doing so. Social participation and engagement, including elements of self-expression, assembly, and free association, are essential for the development of autonomy and for full participation in civil society (Torney-Purta & Amadeo, 2011).

In addition, a now-established body of empirical research indicates that children and adolescents in both the majority and minority world and across a range of settings and contexts recognize and acknowledge the importance of survival and development rights, protection rights, and participation rights in their own lives (Ben-Arieh & Attar-Schwartz, 2013; Cherney & Shing, 2008; Gwirayi & Shumba, 2011; Hart, 1997; Helwig, Ruck, & Peterson-Badali, 2014; Hoppe-Graff & Kim, 2005; Melton & Limber, 1992; Ruck, Tenenbaum, & Willenberg, 2011; Taylor, Smith, & Nairn, 2001; Veiga, 2001). In addition to basic knowledge of rights, a more complete understanding of the full range of CRC rights is important to the ability to exercise them (Peterson-Badali & Ruck, 2008), and the Convention stipulates that it is a responsibility of governments to promote such knowledge (Article 42).

### SURVIVAL AND DEVELOPMENT RIGHTS

These are the rights to the resources, skills, and contributions required for the survival and full development of the child. Increased awareness of adolescent survival and development rights is in part due to the many challenges faced by adolescents globally including immigration and migration, climate change, economic upheaval, social and economic inequality, and health issues such as HIV and AIDS.

### Rights to Development and Health

Several articles in the CRC make specific reference to rights to health beyond mere survival and focus not only on access to health care (especially Articles 6, 23, and 24). Given our current scientific understanding of the substantial impact of many societal policies and practices, along with the broader social environment, on numerous aspects of adolescent population health (Keating, Siddiqi, & Nguyen, 2013) and our recognition of adolescent health as foundational for later adult health (Sawyer et al., 2012), it is clear that many additional CRC articles have relevance for health and development outcomes. Government policies that provide inadequate protection from harm (including sexual exploitation, abduction and trafficking, and the optional protocols; see sections below under the category of protection rights) or inadequate support for participation in activities that promote healthy development (such as social security, standard of living, education, and self-expression) constitute lost opportunities to promote population developmental health, which are recognized as rights under the CRC.

### Right of Access to Health and Health Services

While Article 24 on the right to health and access to health services has broad importance for children of all ages, it is particularly salient for adolescents. During these years, physical growth and pubertal development are linked with increased risk for health problems that tend to have adolescent onset, including type 1 diabetes, certain cancers, and certain mental health problems, such as schizophrenia, depression, and substance misuse and dependence disorders (Patton & Viner, 2007). Adolescence is also the time when most adolescents begin sexual activity, and access to sexual and reproductive health care can have a profound effect on morbidity and even mortality; maternal mortality and death from complications of illegal abortions are two of the top 10 causes of death among adolescent girls worldwide, as is HIV/AIDS for both girls and boys (Patton et al., 2009).

Given these changing needs in health services during adolescence, the right to such health care intersects with the right to privacy also enshrined in the CRC. Their growing autonomy and cognitive development give them greater capability to make their own healthcare decisions. At the same time, many prefer increased privacy around their health care, even from their parents. In the United States,

for example, research has documented that adolescents are less likely to engage parents in their confidential health care as they grow older (Reddy, Fleming, & Swain, 2002) and will even avoid health services if parental notification or parental permission is required (Colman, Joyce, & Kaestner, 2008; Ford, Millstein, Halpern-Felsher, & Irwin, 1997; Jones, Purcell, Singh, & Finer, 2005; Reddy et al., 2002). Notwithstanding the consequences of this avoidance for adolescents' health, the impact on society is even more significant, for example, in unintended pregnancies and untreated sexually transmitted infections (Franzini et al., 2004), and in excess deaths from suicide and alcohol-related traffic accidents involving adolescents (Patton et al., 2009).

# Rights of Adolescents From Immigrant, Minority, Indigenous, and Stigmatized Groups

Given nondiscrimination is a core principle undergirding all the rights articulated within the CRC, the treaty holds an important role in ensuring equal access to these rights for adolescents from marginalized or stigmatized groups. Indigenous adolescents around the world face health inequities (Clark et al., 2011; Gracey & King, 2009), as well as higher rates of school dropout, increased rates of poverty, earlier mortality, and disproportionate involvement in the child welfare and juvenile justice systems (West & Newman, 2011). Immigrant, refugee, and ethnic minority adolescents face differential access to health and social services in many communities (Flores & Tomany-Korman, 2008), often due to racial and ethnic discrimination. Sexual orientation identity develops primarily during adolescence, yet lesbian, gay, and bisexual (LGB) identities, attractions, and behaviors are stigmatized throughout most of the world and remain illegal in several countries; this stigma contributes to higher rates of discrimination, violence, homelessness, and health problems compared to heterosexual peers (Saewyc, 2011). Homeless and streetinvolved youth also face stigma, discrimination, and inequities in their access to basic necessities, protection from harm, and developmental supports such as education and health care (Kulik, Gaetz, Crowe, & Ford-Jones, 2011). An important consideration is the issue of *intersectionality*: Youth may belong to more than one of these marginalized or stigmatized groups, for example, ethnic minority adolescents who are also lesbian, gay, or bisexual (Poon, Saewyc, & Chen, 2011), or the disproportionate rate of indigenous youth who are homeless

or street involved (Smith, Saewyc, Albert, MacKay, & Northcott, 2007). Such youth may face added health and social inequities.

#### **PROTECTION RIGHTS**

These include the rights to protection from violence, exploitation, and all forms of abuse and to which adolescents should be just as entitled as their younger counterparts. Research has documented that certain marginalized groups of adolescents are particularly vulnerable to violence, abuse, exploitation, neglect, and other forms of discriminatory treatment, and the rights of these adolescents should be recognized as equally deserving of attention under the CRC. In addition, recognition of the status of adolescents as not yet fully mature requires special attention in the operation of justice systems, and the need for identified approaches to juvenile justice (Article 40).

# Right to Protection From All Forms of Sexual Exploitation and Abuse

Article 34 of the CRC, which focuses on prevention of all forms of sexual exploitation and abuse, including specific reference to prostitution and pornography, has greater relevance for the rights of adolescents than for younger children. Sexual abuse and sexual exploitation have been known to occur among all ages of children and youth and have been documented throughout the world. While the limited population surveillance and research in many countries has made it difficult to document ages or groups who are most vulnerable, the peak incidence for sexual abuse in the United States has been found to be just at or after puberty, in early adolescence, for both boys and girls (Finkelhor, Ormrod, Turner, & Hamby, 2005). Similarly, research about sexual exploitation in Canada, Europe, and the United States has found that most victims were first exploited around age 13 or 14 (Edinburgh, Saewyc, Thao, & Levitt, 2006; Edward, Iritani, & Hallfors, 2006; Pedersen & Hegna, 2003; Saewyc, MacKay, Anderson, & Drozda, 2008), although this may differ slightly in other areas of the world (Frederick, 2010).

One of the greatest challenges to addressing children's and adolescents' right to be free of sexual abuse and sexual exploitation is the lack of systematic, repeated, population-based monitoring of sexual abuse and sexual exploitation among children and youth (Frederick, 2010). In some countries, this may be due to lack of clearly

defined laws or government infrastructure to support monitoring (Frederick, 2010), but it remains a challenge even in high- and middle-income countries, due in part to stigma associated with sexual victimization and social taboos around discussing sexual abuse, and due to the challenge in ensuring consistent, effective methods of population-level surveillance of criminal behavior (Stoltenborgh, van Ijzendoorn, Euser, & Bakermans-Kranenburg, 2011). Such tracking is necessary to determine the scope and severity of the issue, and to document the effectiveness of laws, policies, and interventions to prevent sexual abuse and address the health issues of victims. The level of research on sexual exploitation of children and adolescents is even more limited than for sexual abuse generally.

Another challenge to researching and addressing sexual exploitation among adolescents, however, is the conflicting societal attitudes about commercial sexual exploitation of youth. Although most countries have ratified the CRC, and even the United States has signed and ratified the Optional Protocol on the Sale of Children, Child Prostitution, and Child Pornography, many communities still consider adolescents who are sexually exploited to be delinquents engaged in a criminal "trade," as opposed to victims of sexual violence (Mitchell, Finkelhor, & Wolak, 2010; Saewyc et al., 2013). This is demonstrated not just among law enforcement and news media, but in a variety of local and national juvenile justice laws, many of which still consider adolescents who are involved in prostitution to be engaging in an arrestable offense, rather than being exploited by those who are purchasing the sexual acts (Mitchell et al., 2010). In some jurisdictions, these laws are being changed, in part because research evidence has created a clearer picture of the experiences of exploited youth, and due to growing recognition of responsibility under the CRC (Minnesota Legislature, 2011).

Unfortunately, research evidence has still had limited effect on societal misconceptions about sexual exploitation of adolescents, even in societies where it is acceptable to discuss sexual abuse and exploitation in public forums (Saewyc et al., 2013). One of the pervasive misconceptions about sexual exploitation is that the overwhelming majority of victims are girls; although research drawing samples from services for exploited youth have recruited almost exclusively female participants, population-based studies from Canada, Europe, and the United States show equal or greater proportions of boys as girls reporting sexual exploitation (Edward et al., 2006; Homma, Nicholson, &

Saewyc, 2012; Pedersen & Hegna, 2003; Saewyc et al., 2008); this is also noted in research from some parts of South Asia (Frederick, 2010). This widespread misconception of whose rights are not being protected can affect the availability of services as well as the enactment or enforcement of laws

Further, although the research is limited, what evidence exists has clearly documented disproportionate risk of sexual abuse and sexual exploitation among marginalized adolescents in many countries. For example, population-based research has regularly identified higher prevalence of sexual abuse and assault experienced by sexual minority adolescents (Saewyc, 2011), and among indigenous youth in several countries (Brzozowski, Taylor-Butts, & Johnson, 2006; Gracey & King, 2009). Evidence of higher risk for sexual violence exposure among immigrant youth is limited and mixed, but several studies document high rates of sexual violence exposure among children and youth in refugee settings (Reed, Fazel, Jones, Panter-Brick, & Stein, 2012). Given the evidence, the protection rights of marginalized adolescents are one area where added efforts and focus may be needed throughout the world, to reduce inequities in supporting adolescents' right to protection.

The next article in the CRC, Article 35, focuses on abduction, sale of children, and trafficking. The issues for adolescents related to this article are similar to those related to sexual exploitation. There is almost no rigorous research to estimate the prevalence and scope of these actions globally, due to their criminal nature, but that limited research suggests, with the exception of abduction of children in custody battles between parents, adolescents are more often victims of these crimes than younger children (Finkelhor, 2011; Frederick, 2010). Adolescents may be abducted, sold, or trafficked for sexual purposes, for labor, for ransom, or other financial gain. The health and psychosocial consequences of abduction, sale, or trafficking are better documented than their prevalence or incidence, and there is even less research on the effectiveness of different strategies, laws, or interventions that are effective in preventing these crimes, or helping young people after they have been abducted, sold, or trafficked.

The Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography provides an expanded version of the actions that States should take in addressing these issues, actions that were only briefly outlined in articles in the CRC. The Optional Protocol includes detailed discussion ness and prevention, including an emphasis on

child and youth participation in developing pro-

grams, policies, and public awareness campaigns.

# **Protection of Adolescents From Involvement in Armed Conflicts**

Among the protection rights outlined in the CRC, Article 38 is one that deals with the protection of children and adolescents during armed conflicts, especially to the recruitment of children into armed forces, and the direct participation of children in hostilities. Unlike most of the other CRC rights, however, Article 38 does not set the age at 18, but instead focuses on "persons who have not attained the age of fifteen years." Although commonly referred to as "child soldiers," the wording of the article focuses on those affected by conflicts and includes children and youth who may be abducted, drafted, or recruited to serve armed combatants in roles as cooks, porters, medical assistants, lookouts, and other unarmed roles, as well as those who are taken for sexual exploitation or abuse (Betancourt, Borisova, de la Soudiere, & Williamson, 2011). This includes both boys and girls and, in most recent armed conflicts around the world, has disproportionately involved older adolescents rather than children younger than 10 years of age.

The Optional Protocol on the Involvement of Children in Armed Conflict incorporates the recognition that the CRC defines children as those under the age of 18, and extends the ages of Article 38, specifically to ensure that adolescents under age 18 who are members of their armed forces do not take direct part in armed combat and that youth under age 18 are not drafted or coerced into the armed forces for service. The Optional Protocol was adopted by the UN in 2000, and more than 75% of countries have signed on, although actual adherence to the protocol has been slower in many countries. Of greater concern is the evidence that

several countries which have signed the protocol, when they have become involved in new armed conflicts, have reverted to the involvement of adolescents in their military or allied forces; according to Child Soldiers International (2012), 20 countries engaged in conflicts during 2010 and 2012 had documented involvement of child soldiers against the protocol. The long-term health, educational, and employment outcomes of former child soldiers have been the focus of a growing number of studies, as well as the evaluation of reintegration programs and interventions. There is some evidence that girls who were child soldiers in several recent conflicts have had less access to reintegration and education services after demobilization (Betancourt et al., 2011; Jordans et al., 2012).

## Right to Fair Treatment in the Justice System

Every day, young people around the world find themselves in conflict with the law and caught up in either the juvenile or adult justice systems. In fact, a recent UNICEF (2011) report estimated that at any given time, over 1 million children are detained by law enforcement officials. It is believed that the majority of these young people are accused of nonviolent or status offenses (acts considered criminal only when committed by minors). In addition, adolescents from disadvantaged, marginalized, or vulnerable groups such as racial/ethnic minorities, street children, documented and undocumented immigrants, refugees, indigenous, poor, disabled, those suffering from mental health disorders, and sexual minority youth are all more likely to be over-represented in juvenile justice systems (Defence for Children International, 2007; National Council on Crime and Delinquency, 2007; Ravnbøl, 2009; UNICEF, 2011). The following example is illustrative: In the United States, youth of color make up 33% of the adolescent population but represent approximately 67% of the youth in local detention and state correctional facilities (National Council on Crime and Delinquency, 2007). In addition, these youth receive harsher sentences when charged with the same offenses and when having the same prior criminal record as their majority counterparts (Mitchell, 2005; National Council on Crime and Delinquency, 2007). The unequal treatment of particular groups of adolescents in the criminal justice system violates the principles articulated in Article 2 of the CRC (nondiscrimination) such treatment is unfortunately across countries worldwide (Defence for Children International, 2007). This type of discriminatory or

disproportionate treatment leads to major disparities both in terms of the types of offenses for which youth are detained and also in the course of judicial proceedings (Children's Rights International Network, 2014). This inequity also leads to compromised outcomes for youth even after release (Mendel, 2011; National Council on Crime and Delinquency, 2007).

Two articles of the CRC (along with a number of international rules and guidelines, such as the Beijing Rules and the Riyadh Guidelines, which are recommendatory and nonbinding) deal specifically with protecting the human rights of young people in the administration of juvenile justice. Article 37 of the CRC protects children from cruel or degrading treatment, unlawful deprivation of liberty, capital punishment or life imprisonment, and from being incarcerated with adults. Article 40 of the CRC notes explicitly the requirement that children accused of breaking the law have the right to "fair treatment in a justice system that respects their rights." What constitutes fair treatment has been an evolving construct across many decades in many different jurisdictions (Scott & Steinberg, 2008). In many jurisdictions, this has entailed the establishment of an identified institutional regime for juvenile justice, and in this respect as well as in the evolving understanding of criminal responsibility and mitigation of culpability, there has been an increasing international convergence of norms (as reflected, e.g., in the Supreme Court of the United States decisions of Roper, Graham, and Miller, noted earlier).

The thrust of Articles 37 and 40 specifically acknowledges a necessary balance of protection and participation rights, in requiring appropriate legal help and a formal recognition of developmental immaturity as a legal principle, and at the same time ensuring assistance in the execution of their legal rights under any prevailing system. This balance is entirely consistent with our current understanding of adolescence as a transitional period in many respects, including brain, psychosocial, and cognitive development.

#### PARTICIPATION RIGHTS

The articles defining the participatory rights place the adolescent on the path toward the full expression of citizenship. These rights reflect a turn in our notion of children's interests and capacities and their status in society (Carlson & Earls, 2011a; Earls, 2011). They represent the boldest and most conspicuous component of the CRC. Article 12 has

special importance, as it recognizes the right of the adolescent to express his or her views freely in matters affecting him or her and ensures that those views are afforded due weight in accordance with the child's maturity. This article also has the status of a "principle" as it pertains to all other CRC articles. Five other articles considered "participation rights" give substance to the agency and capacities, not simply the vulnerability and dependency, of the child. These five articles include Article 13, which acknowledges the adolescents' right to freedom of expression, to seek, receive, and impart information, including digital technologies; Article 14, which specifies the right of the adolescent to freedom of thought, conscience, and religion; Article 15, which recognizes the rights of the adolescent to freedom of association and to freedom of peaceful assembly; Article 16, which recognizes the right to and protection of privacy which is an essential component of personal decision making; and Article 17, which guarantees the adolescent's access to information and material, especially those aimed at the promotion of his or her social, spiritual, and moral well-being and physical and mental health. These rights carry the promise of legitimately engaging children in the civic and political functions of their communities and governments. In addition, the Third Optional Protocol, adopted in 2011 and relating to communication of complaints by individual young people concerning violations of their rights, acknowledges children's participation by recognizing that young people have a right to express their views freely in matters affecting them. The Third Optional Protocol reaffirms that young people are rights holders and provides them with means to participate and protect their rights at the international level.

Expressing participatory rights requires an environment in which they are recognized, respected, and guided (Carlson, Brennan, & Earls, 2012; Carlson & Earls, 2011b). By exercising these rights, the societal tendency to segregate and effectively marginalize adolescents is challenged. It is assumed that the expression and exercise of these rights take place in contexts where democratic attitudes and structures are either already present (e.g., the United States and Costa Rica) or represent a collective aspiration (e.g., Tunisia and Egypt). A far-reaching goal is to explicitly create settings and programs that provide secure space and opportunities in which the skills and confidence to freely express informed opinions and reach mutual understanding are developed (Kamo, Carlson, Brennan, & Earls, 2008). There is evidence that early adolescence is an ideal period to focus efforts to acquire such competences (Torney-Purta & Amadeo, 2011) and that by middle adolescence children are sufficiently mature to vote (Hart & Atkins, 2011). It is conceivable that, through the exercise of these rights, adolescents are better positioned to promote their survival, development, and protection rights, a direct application of the CRC's core principles.

The CRC has been critiqued as a Western construction more relevant to democratic societies or political systems than non-Western cultural traditions or settings (Helwig & Turiel, 2001; Kaime, 2011; Murphy-Berman, Levesque, & Berman, 1996). This cultural tension is especially salient with respect to participation rights (or what have been termed self-determination rights or freedoms), which are thought to be less compatible with nondemocratic countries and non-Western cultural traditions and peoples. However, there is a growing body of empirical research that has shown that across a variety of non-Western cultural contexts, young people have been found to endorse or support a number of participation or self-determination rights (including privacy, right to pursue career choices, freedom of religion, freedom of speech, and freedom of association) and view them as universal human rights. As Helwig et al. (2014) recently noted, these findings have been documented in Chinese adolescents living in Malaysia (Cherney & Shing, 2008), rural and urban youth in Mainland China (Helwig, Arnold, Tan, & Boyd, 2007; Lahat, Helwig, Yang, Tan, & Liu, 2009), mixed-race adolescents in South Africa (Ruck et al., 2011), and traditional Arab-Muslim adolescents in both Israel (Khoury-Kassabri & Ben-Arieh, 2008; Turiel & Wainryb, 1998) and the Netherlands (Verkuyten & Slooter, 2008). In addition, this line of research suggests that rather than working from broad ideological templates, young people across diverse cultural contexts take into consideration the various features of the rights situation under consideration when making decisions about their own and others' rights and personal autonomy (Ruck & Horn, 2008). Adolescents across diverse cultural contexts and settings appear to value opportunities for participation even in those societies that do not emphasize children's rights in practice. In some cases, adolescents may endorse rights that run counter to existing cultural practices or religious belief systems that deny individual rights and personal autonomy to young people in general or specifically to girls and women (Helwig et al., 2014; Neff & Helwig, 2002). In addition, the undue restriction of participation rights and

freedoms for adolescents in settings such as home and school has been found to be negatively associated with psychological health and adjustment in both Western and non-Western contexts (Jia et al., 2009; Way, Reddy, & Rhodes, 2007). Current evidence suggests the need to reconsider that participation or self-determination rights are less salient in non-Western or nondemocratic societies.

In addition, an emerging body of knowledge has made a clear argument for the importance of children's participation in decisions about their own life and well-being, especially their quality of life and subjective well-being (Lundy, 2013). This is so for a number of reasons:

First, the notion of well-being and quality of life is rooted in the personal experience of human beings; children experience life and define their quality of life in a unique way (Ben-Arieh, Casas, Frones, & Krobin, 2013; Ruck, Peterson-Badali, & Helwig, 2013). Ignoring them or even just partially consulting with them does not adhere with the basic concept of well-being and creates a reality that does not necessarily reflect the status of children (Casas, 1997; Cummins, 2013).

Second, the status of an active and involved citizen is considered by many as a prerequisite for well-being (Melton, 2005). Thus, enabling children to be active citizens during their adolescence is both related to their current well-being and prepares them for a better future (Bogard & Sherrod, 2008). Recent literature on youth and civic participation has stressed the importance of considering young people as political agents in their own right, rather than citizens-in-the-making who develop into actual political actors and engaged citizens only when they reach adulthood ("human becoming" rather than full-fledged human beings; Gordon, 2008). Opportunities for civic, political, and economic participation are especially important with respect to the human rights of undocumented, asylum-seeking, and refugee youth around the world (Global Migration Group, 2013; Seif, 2011). In response to restrictive laws, policies, and practices which negatively impact their well-being and development, these youth are often on the leading edge of community organizing and political activism advocating for social change (Seif, 2010). Through such forms of participation and civic engagement, these youth play a primary role in protecting their legal and human rights and safeguarding their well-being, while at the same time challenging traditional notions of citizenship.

Finally, abundant research has shown that young people are the best, and many times the

only accurate source about their life and status (Fattore, Mason, & Watson, 2007). Any decisions made about children's lives without their direct involvement have a high likelihood of being poor in retrospect, like any decisions based on missing data or inaccurate information (Ben-Arieh, 2005; Lundy & McEvoy, 2012).

#### RECOMMENDATIONS

Based on the analyses above with respect to the scientific support for full applicability to adolescents of the Convention of the Rights of the Child, the Society for Research in Adolescence (SRA):

- Endorses the applicability of CRC to adolescents. The formal status of the CRC is that it applies equally to all children up to the age of 18 years, but in practice, much of the attention generated by the CRC has been focused on infants and younger children. This endorsement does not in any way imply a reduction in those efforts, but focuses only on establishing and supporting their equal applicability for adolescents.
- Encourages universal ratification of the CRC by all States Parties. It especially encourages the United States, as the only remaining wealthy democratic government not to have done so, to complete this ratification process.
- Encourages members to promote the realization of CRC rights for adolescents as well as for younger children in their own countries, recognizing that the specifics of such promotion will vary according to specific national circumstances.
- Supports further research on basic developmental processes in adolescence, in connection with research on how best to implement developmentally appropriate policies made explicit in the CRC.
- Encourages a greater emphasis on both qualitative and quantitative research as well as integrated mixed-methods studies (Bryman, 2007) examining how adolescents around the world make the transition between childhood and adulthood with respect to how they experience and exercise their rights.
- Recommends culturally relevant and culturally sensitive research, practices, and policies that serve to strengthen protections for the most vulnerable and disenfranchised adolescents.
- Recommends research evaluating the effectiveness of different strategies, laws, and programs enacted to prevent sexual exploitation and abuse

- of adolescents, including trafficking, abduction, involvement in armed conflicts, and related violations of their right to protection and safety.
- Encourages the further development of monitoring systems on adolescent health and development that highlight the progress (or lack thereof) in ensuring the attainment of rights guaranteed in the CRC. Such monitoring systems exist for some domains but not others and are well established in some jurisdictions but not in others. The development of empirically sound methods of measuring progress toward the attainment of CRC rights by adolescents on a global basis would provide substantial impetus for their eventual realization.

### **SRA NOTE**

Consensus reports reflect evidence-based contributions of social science for social policy concerning adolescents and young adults by the world's leading experts of the Society for Research on Adolescence (SRA). The statements summarize the best social science evidence and illuminate the implications of this evidence for practice and policy. The authors and topic of each report are selected and approved by the Consensus Committee and Executive Council of SRA.

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Corrections added on 3/18/15 after first online publication 9/26/2014: The following references, which were cited in the article text but were missing from the reference list, have been added to the reference list: Graham v. Florida. 130 S. Ct. 2011 (2010); Miller v. Alabama, 132 S. Ct. 2455, 567 U.S., 183 L. Ed. 2d 407 (2012); Roper v. Simmons, 541 U.S. 551 (2005).