

# **Resolution World Health Organization/1.1**

## World Health Organization Committee

**Co-sponsors:** Bosnia & Herzegovina, Federative Republic of Brazil, Central AFrican Republic, People's Republic of China, Republic of Costa Rica, Republic of Cyprus, Republic of Ecuador, Arab Republic of Egypt, Republic of Finland, Republic of Indonesia, Republic of Latvia, United Mexican States, Republic of Mozambique, Federal Republic of Nigeria, Republic of the Philippines, Russian Federation, Kingdom of Saudi Arabia, Republic of South Africa, Republic of Kingdom of Great Britain and Northern Ireland, Oriental Republic of Uruguay, and Republic of Zimbabwe.

### Topic: Universal health coverage

Recognizing the healthcare needs and contexts of developing nations and vulnerable populations,

Considering the past allocation and funds for Universal Health Care,

Noting the need for healthcare in areas of conflict and lacking in resources,

Deeply concerned over the lack of financial protection and healthcare facilities in places of conflict,

Bearing in mind healthcare is a universal human right, regardless of one's social or economic status,

Aware of the insufficient transportation to medical facilities,

#### **Prioritizing Health Care and Emergency Healthcare**

- 1. Calls upon the countries of the world to take part in spreading information about healthcare services;
- 2. Encourages more advanced technological research for healthcare;
- 3. Encourages expansion of the healthcare system capacity;
- 4. Requests for the standardization of opportunities for chronic illness and cancer treatment;

#### Funding for the Availability of Resources and Workforce in Healthcare

- 5. Encourages member states to construct government hospitals, where medication would be accessible, reliable, and free in unprivileged areas, and subsidies/insurance that would support individuals in poverty or vulnerable situations;
- 6. Further requests the raising of awareness on the needs for the fundings of Universal Health Care;
- 7. Urges member states to share resources, decide where to place global funding, and support developing nations to achieve Universal Health Care;

#### **Dissemination and Access to Healthcare**

- 8. Further recommends member states to provide the opportunity for medical students to seek residency and medical training in areas of greater needs for medical professionals;
- 9. Strongly encourages the elimination of laws that creates structural violence which keep people from accessing healthcare;
- 10. Suggests the expansion of mobile and local clinics worldwide that focus on healthy living and self-care;
- II. Emphasizes that member states should utilize more traditional and locally-produced medicines to remove import/export expenses;

#### Healthcare Equality

- 12. Urges government to prioritize equality in healthcare;
- 13. Encourages the implementation of global funding to support developing health care systems and facilitate exchange of resources;
- 14. Condemn all forms of bias;
- 15. Suggests countries to identify areas of bias to lack of awareness and create awareness in order to address it;
- 16. Requests member states to emphasize health care equality and/or biases and unstable healthcare systems.