

**Cleveland Council on
WORLD AFFAIRS**



Cleveland-Autumn Conference 2020

Position Papers for:

United Nations International Children's Fund



*Delegation from: Islamic Republic of Afghanistan
Represented by: Beaumont School*

Position Paper for The World Health Organization

The issues before the World Health Organization are: combating malnutrition in middle and low income nations and mental health awareness and improving international responses to mental health crises. The Islamic Republic of Afghanistan is aware of these certain issues and would like to collaborate with other nations to find a solution.

I. Combating Malnutrition in the middle- and low-income nations

Malnutrition refers to deficiencies, excesses or imbalances in a person's intake of energy and or nutrients. The term malnutrition covers two broad groups of conditions. The one Afghanistan faces is undernutrition which includes stunting or low height for age, wasting including low weight for height and underweight consisting of low weight for age. Malnutrition affects people in every country. Around 462 million adults are underweight while some 159 million children are stunted and 50 million are wasted. Adding to this burden are the 528 million or 29% of women of reproductive age around the world affected by anemia.

The Islamic Republic of Afghanistan recognizes the pernicious effects of malnutrition and the cruciality of this issue. The UN in Afghanistan focuses on strengthening understanding and support internally and externally for why nutrition is a critical investment during the crucial first days of a child's life. Their intention is to implement the National Nutrition Strategy which provides the roadmap for partnership, investments and action so Afghanistan can secure the opportunity for children to be well nourished in life to protect and secure their future.

The contributing factors to malnutrition in Afghanistan is a direct result of the perpetual seemingly endless wars and conflict for 40 years. Families are exasperated and It is difficult for them to feel secure, receive the care and aid needed and for other countries to supply the resources required to combat the ongoing battle of hunger. Although malnutrition can be the result of an immense of other causes, the continuation of violent conflict is the leading factor of hunger in Afghanistan. The citizens have no sense of safety and security because of the wars and often do not stay long enough to receive the resources provided to them. Afghans still make up the world's second - largest refugee population as they are invariably on the run. Civilians are constantly at risk of losing their lives and find it difficult to obtain the goods being distributed. Traveling to the hospital is risky due to the inability to escape their environment. Inevitably, war always results in casualty and women and children usually pay the highest price.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises.

Mental health is just as important as physical health and is defined as a state of wellbeing in which every individual realizes his or her own potential, can cope with the normal stresses of life, and can work productively. Mental health is a continuum which changes with the stresses faced in everyday life. Females account for 47% of the population in all mental health facilities in

Afghanistan. This results in major implications on the growth and development of children and their wellbeing. Of all users treated in mental health outpatient facilities 25% are children or adolescents. The users treated in outpatient facilities are primarily diagnosed with mood disorders, and neurotic stress related and disorders.

Afghanistan has had a national mental health plan policy which addresses the issues surrounding improving mental health. The World Health Organization collected data on Afghanistan's mental system. The goal was to develop information-based health plans with clear targets. The initial steps for improving mental health services in Afghanistan are to develop services in rural areas and to increase the human resources and training abroad. The latest revision of the mental health plan was in 1987 and contained components such as developing community mental health services; downsizing large mental hospitals; reforming hospitals to provide more comprehensive care and equity of access to mental health services across different groups.

The contributing factor to mental health in Afghanistan is the lack of training that they provide to their doctors and nurses in the subject. A staggering less than 1 percent of training for medical doctors is devoted to mental health and only two percent to nurses. They also do not have psychiatric protocols for their primary care staff and there is no financial support for people with psychiatric problems. Sadly, there is no one to oversee mental health so the information given to them is miniscule.

For long term improvement, Afghanistan should create enhanced training and increase the budget for mental health by establishing a mental health awareness coordination body of education materials for public awareness. Developing guidelines and treatment protocols for different categories of health staff is an important issue to address. There is only one day treatment facility available in the country which is probably hard to access due to the dangers of society and the violence outside their homes. Overall organization is important and coordinated and sustained efforts are needed to strengthen the mental health system in Afghanistan.

Delegate from: Australia

Represented by: Archbishop Hoban High School

Position Paper for the World Health Organization (WHO)

The issues before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations; and Mental Health Awareness and Improving International Responses to Mental Health Crises. Australia is committed to the health and well-being of all people, especially Australian's themselves. Australia is interested in solving these issues alongside the United Nations.

I. Combating Malnutrition in Middle and Low Income Nations

Malnutrition is the cause of both poor food choices and overeating. The world has fought with malnutrition for centuries, but did not know much about it until the 1950s. With new reports of the short and long-term effects of dietary needs coming to the surface everyday, it has been a struggle to fully understand the importance of combating this issue now versus waiting for the future. A lack of nutrients in the body is the gateway to increasing the likelihood of many noncommunicable diseases. Without this problem solved, those under the age of 5 will suffer the consequences caused by their lack of focus on education as they yearn for food above all else. The Food and Agriculture Organization of the United Nations (FAO) and the WHO are working to end these problems.

Australia has gone to great lengths to help their community have access to better food. Community kitchen pilot project is one of Australia's programs dedicated to the education of healthful eating. Having a strong background in knowing what foods are better for people leads to better decision making during meal preparation. This program also teaches about financial choices that can lead to finding access to quality, fresh produce at an affordable cost. Australia is supportive of other countries efforts in combating malnutrition and hopes for the global goals to be achieved. These goals include: 40% reduction of children stunted; 50% reduction of anemia in the female population; 30% reduction of low birth weight; no increase in childhood obesity; 50% boost in exclusive breastfeeding during the first 6 months of life; reduce wasting to 5%. Though the world is not on track to meet these goals, Australia supports all efforts being made to change that.

Great advances have been made by Australia to eradicate malnutrition. Australia is on track to meet targets for noncommunicable diseases related to malnutrition, but is off for meeting them when it comes to anaemia, birth weight, and obesity. With this in mind, the country needs to focus on women and children under the age of 5. In improving the nutrition of the next generation, the world is left setup for success instead of failure. The country of Australia needs more programs like community kitchen pilot to be accessible to those in need. Educating children in school about

nutrition facts is also a key in ending this global battle. Australia needs to spend more money on healthy crop growing. Internationally, the world needs to condemn malnutrition and lead people to safer options that will prolong life of the current generation and all those to come.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The world's population is suffering from the effects of mental illness. This has been a problem for centuries, but has only been discussed as one since 1991. Now, during the COVID-19 pandemic, more and more are battling with their mental health. People are surrounded by death and disease which has forced many into isolation until the unforeseeable future. As countries try to combat the pandemic, they are facing an extreme rise in deaths related to drug and alcohol misuse and suicide. Mental health services in Australia (MHSA) is dedicated to the needs of those seeking medical care for mental illness. Australia spends billions of dollars each year for the benefits of these individuals.

Australia has lists of all the ways they are facing this issue. Programs, services, and research that focus on mental wellbeing are in place for the Australian people. There are a total of 5 plans in Australia that are building on the progress of improving the mental states of the population. The Australian government has put out many articles telling people of ways to help themselves. Due to COVID-19, the government has made 10 additional Medicare psychological therapy sessions for any one experiencing mental health impacts caused specifically by the isolation of the pandemic. There is a 24x7 phone counseling service dedicated to the questions related to the Coronavirus. Poor mental health causes poverty, mediocre education, gender inequality, and violence, the goal is to give people the resources they need to confront mental distress and save people from these challenges.

In conjunction with other countries worldwide, Australia is looking into more effective ways to attack the problems of mental illness. Australia has many plans in place to help those in need, but needs to get the message to everyone that "it is okay to not always be okay." If more people were aware of the threat to their mental health they might be willing to take advantage of these programs. In the hopes of aiding those struggling, Australia is open to more research being done on the topic and how to combat this in a different manner.

Delegation from: Bangladesh

Represented by Beaumont School

Position Paper for the World Health Organization

The issues being taken up by the World Health Organization are combating malnutrition in middle- and low-income nations and mental health awareness and improving international responses to mental health crises. Bangladesh is devoted and determined to solve the issue of malnutrition and increase alertness regarding the mental health crisis.

I. Combating Malnutrition in Middle- and Low-Income Nations

Malnutrition is the lack of proper nutrition, caused by not having enough to eat, not eating enough of the right things, or being unable to use the food that one does eat. Bangladesh has had a long and tedious past with malnutrition; in 2011 it was reported that 30 to 40 percent of children under 5 years of age were underweight or stunted. Stunting is the result of long-term nutritional deprivation and often results in delayed mental development, poor school performance and reduced intellectual capacity. While malnutrition has taken a toll on Bangladesh, in the years following 2011, there have been considerable improvements. Bangladesh took steps in preventing the stunting and wasting forms of undernutrition from 41 to 36 percent, from 2011 to 2014.

According to the World Health Organization nearly 20 million children are suffering from acute malnutrition and more than 70% of the world's children with wasting live in Asia, most in south-central Asia. Levels of malnutrition are also of concern in Bangladesh as 16% of children aged under five from rural areas suffer from wasting, which is defined by WHZ < - 2SD. Wasting in children is a symptom of acute undernutrition, usually because of insufficient food intake or a high incidence of infectious diseases, especially diarrhea. Wasting in turn impairs the functioning of the immune system and can lead to increased severity and duration of and susceptibility to infectious diseases and an increased risk for death. The prevalence of wasting varies between different regions of Bangladesh, and riverine islands account for the greatest number of cases.

To improve the lack of nutrition amongst its population, Bangladesh initiated, in 2015, the Feed the Future Livestock Production for Improved Nutrition (LPIN). It is a US\$6 million, 5-year project to impact rural household nutrition in Bangladesh. The project aims to increase livestock productivity through increased access to better livestock management techniques; animal health care services; and hygienic, diverse, and high-quality food to enhance the nutrition and health status of rural households, especially among women and children. This project is set to run till the end of 2020.

Another project was formed in 2017 called, Strengthening Multisectoral Nutrition Programming through Implementation Science Activity. It is a 5-year US\$20 million project, and it is focused on implementation science research to test different sets of multisectoral interventions and approaches that are essential, feasible, replicable, and cost effective to address undernutrition in Bangladesh. In addition to direct implementation and research, the project will strengthen organizational systems to support evidence use in policy, and work with policy makers to improve their ability to assess, appraise, synthesize, and use data. This project is predicted to run through the year or 2022.

Bangladesh has been in support of improving not only their health, but also that of the world's health. On December 13, 2018, in the 73rd session of the General Assembly, the 52nd plenary meeting, was held regarding global health and foreign policy: a healthier world through better nutrition and it was resolved. Bangladesh voted for agriculture development, food security and nutrition in the 73rd session, the 62nd plenary meeting, of the General Assembly on December 20, 2018. Bangladesh is also committed to minimizing the impact of the main risk factors for non-communicable diseases and to addressing malnutrition in all its forms by intensifying its efforts and scaling up

its activities under the work programme of the United Nations Decade of Action on Nutrition (2016-2025), which was also stated in the 73rd session, the 62nd plenary meeting, of the General Assembly on December 20, 2018. Bangladesh is in support and is determined to work towards providing better and proper nutrition to its own country and other low-income nations with high rates of malnutrition.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health has been an issue during current times more than ever. Mental health as defined by the United Nations is something that directly influences how we think, feel and act: it also affects our physical health. Work, in fact, is actually one of the best things for protecting mental health, but it can also adversely affect it. Persons with mental and psychosocial disabilities represent a considerable proportion of the world's population. Millions of people worldwide have mental health conditions and an estimated one in four people globally will experience a mental health condition in their lifetime. Almost one million people die due to suicide every year, and it is the third leading cause of death among young people. Depression is the leading cause of years lost due to disability worldwide. Mental health problems, including alcohol abuse, are among the ten leading causes of disability in both developed and developing countries. Depression is ranked third in the global burden of disease and is projected to rank first in 2030. Due to the emergence of Covid-19, countless people all over the world were forced to isolate themselves in their homes in order to prevent contracting the disease from others, which lead to many mental health issues for people all over the world, more specifically in Bangladesh.

During quarantine, Bangladesh adopted a lockdown strategy with potential consequences on day to day life, mental and physical health and this study aimed to explore the impact of COVID-19 on mental health and wellbeing among Bangladeshi students. To discover these impacts, a private study was conducted; a cross-sectional study that was organized between the 9th and 23rd April 2020 among 505 college and university students. Data was collected by using online questionnaires and referencing Depression and Anxiety Stress Scale (DASS-21) and Indian Engineering Services (IES). Descriptive analysis and bivariate linear regression were performed to examine the association of variables. The results of this study exhibited that 28.5% of students who responded had stress, 33.3% had anxiety, 46.92% had depression ranging from mild to extremely severe, and as reported by DASS-21 and IES, 69.31% had event-specific distress from mild to severe in terms of severity. Additionally, to staying indoors, people also were afraid of infection, financial uncertainty, inadequate food supply, absence of physical exercise and limited or no recreational activity, which had a significant association with stress, anxiety, depression, and post-traumatic symptoms. This data was updated October 3, 2020. Due to this study it is displayed that COVID-19 outbreak imposes psychological consequences on people to a great extent which requires attention from the concerned authorities to cope with this situation mentally.

Due to this research and data, Bangladesh is working even more diligently to enhance community based mental health facilities and strengthen the existing training of primary health care physicians and primary health workers and encourages other countries to do the same. Enhancing and improving existing outpatient and inpatient psychiatric facilities in the general hospitals and creation of such facilities in private medical college hospitals and big general hospitals existing at the divisional and greater district level is one of the major steps for development of community mental health services. Bangladesh believes that better healthcare systems will entice and encourage people to seek out help through these different facilities, rather than neglecting, brushing aside, and overlooking their mental health.

On October 10, 2020, World Mental Health Day, President Abdul Hamid stated that it was particularly important to provide family and social support to the mentally ill person. He called for creating awareness among the people to avoid unscientific medical procedures while treating the patients in this regard. Bangladesh wishes and strives to ensure the mental well-being of the people, public and private hospitals, health centers as well as educational institutions need to take awareness programmes on mental health issues and hopes that the joint efforts of all will continue to build a healthy nation in future.

*Delegation From: The Republic of Belarus
Represented By: Beaumont High School*

Position Paper for the World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in Middle-and Low-Income Nations and Mental Health Awareness and Improving Responses to Mental Health Crises. The Republic of Belarus is aware of the burden of malnutrition and mental health and believes, it must be a global effort to handle these critical issues.

I. Combating Malnutrition in Middle- and Low-Income Nations

Malnutrition is the deficiency, excess, or imbalance in a person's intake of nutrients that affect their overall health. Effects in nutrition are impacted by restricted access to food, which is salient in the middle- and low-income countries causing more than one in three middle- and low-income countries to suffer from malnutrition. However, unsubstantial food intake is not the only cause of malnutrition. Food quality also has an effect on malnutrition, because middle- and low-income countries do not have the resources to buy high-quality food. They turn to cheaper food that lacks nutrients, leading to obesity. Malnutrition is a double burden because its effects lead to struggles with undernutrition and obesity, leading to diet-based diseases like diabetes.

After Belarus's transition period in 1991, our country's health deteriorated and has just recently started to improve. While executing the Millennium Development Goals, our country has achieved the elimination of hunger and poverty. Belarus still struggles with some aspects of malnutrition, such as obesity and diabetes. The government has acknowledged that this problem is due to poor diets and low physical activity. Since 2010, our government has implemented the promotion of healthy lifestyles and gives easy access to fitness facilities throughout Belarus. In addition to promoting healthy lifestyles, Belarus has also worked with the Food and Agriculture Organization of the United Nations (FAO). The FAO works to eliminate hunger, make agriculture more productive and sustainable, and reduce rural poverty. The FAO worked with Belarus in 2018 and signed a four-year cooperation agreement with Belarus to improve food safety. Our government wanted to upgrade their methods to assess the safety of their food. By working with FAO, Belarus ensures safe food for people in our country. Access to healthy food is essential because Belarus is a developing country, and to combat our own country's issue with obesity and diabetes, our government must provide nutritional food for its people. Getting sufficient food is a critical issue for The Republic of Belarus, and it is one of the many ways Belarus plans on combating malnutrition in our country.

The world has enough resources and information to combat malnutrition. The work now needs to come from governments. The blame for lack of government cooperation is on the states that make up the United Nations. All of the nations that make up the United Nations have merely acknowledged issues by voting on resolutions. Voting on resolutions is not an effective way to deal with global threats and challenges. Voting creates separation and weariness between the states. To combat the doubt of power, the United Nations has to become an environment for collaboration between nations to build peace and security globally.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental Health is a disease that has infiltrated society, especially in the middle- and lower- income countries. The leading mental health disorders are depression and anxiety. These disorders often lead to suicide. Mental health has had a drastic effect on middle and low-income countries, resulting in 79% of suicides in these countries. To improve mental health responses, there needs to be a global effort to improve insufficient education and treatment for mental health.

Mental health has been a significant issue in the society of Belarus. Our country suffers from a remarkably high suicide rate. Belarus believes that the high rate of suicide is a result from alcohol abuse in our country and the lasting effects of Chernobyl. Belarus began to strategize ways to deal with alcoholism, and in result the Ministry of Health of the Republic of Belarus was able to implement new national policies. The policies included raising taxes on alcohol, banning advertisements for alcohol and changing the availability of alcohol. The effects of the policies changed the amount of alcohol consumption from 2010 to 2016, and the rates dropped from 17.5 liters to 11.2 liters per capita. Belarus was able to do this by strengthening our outreach and institutions, which confronts the issues with alcohol-induced deaths and alcohol psychosis. The Chernobyl incident also had a drastic effect on mental health in Belarus, forcing many citizens to learn how to cope with the lasting and unknowing effects of the radiation from Chernobyl. Chernobyl caused many health conditions among citizens and deflation in the economy, creating stress in society. In the last 30 years, Belarus continues to treat those affected by the Chernobyl incident because the disaster has a lasting effect on our society causing physical and mental illnesses. Belarus continues to research and develop adequate treatment for people exposed to radiation as well as strengthening the outreach to help those who have suffered from depression or PTSD because of the incident. Belarus continues to advocate for people to get help for mental health and debunk stigmas against asking for help. The institution of the Republican Scientific and Practical Center for Mental Health, which is part of the Ministry of Health, works to treat mental disorders, including; addiction, eating disorder, depression, and anxiety. Belarus has taken the initiative to address and deal with mental health in our country by implanting treatment facilities. However, this cannot solve the shame about mental health that is imposed on society.

The United Nations has to work together to bring awareness to prevent mental health issues through the Mental Health Action Plan. Currently, globally, many countries have had to adapt to the Coronavirus pandemic changes, causing a rise in mental health issues. In Belarus, mental health is a severe issue and our government prioritizes treating mental health over the pandemic. The pandemic consequently has consumed the world with fear when it should not drastically change lifestyles. Mental Health has only worsened from the global changes from the pandemic, and as countries continue to use their resources and institutions for the pandemic, no improvements will be made. The United Nations need to refocus their ministry towards achieving the Mental Health Action Plan, instead of nations weakening efforts on unnecessary issues.

Delegation: Bosnia and Herzegovina

Represented by: Saint Edward High School

Committee: World Health Organization

The issues before the World Health Organization are - ***A : Combating Malnutrition in Middle and Low Income Nations*** and ***B - Mental Health Awareness and Improving International Responses to Mental Health Crises***. The Delegation of Bosnia and Herzegovina seeks collaborative efforts to create sound solutions to the issues before the World Health Organization.

Topic A - Combating Malnutrition in Middle and Low Income Nations

Malnutrition is defined by the WHO as a person suffering from deficiencies, excess, and/or imbalance of nutrients and energy they take in. This means that a person suffering from malnutrition suffers from having too much or too little of certain nutrients. When a person is not receiving the proper proportion of certain nutrients, they will become obsessed or underweight. According to the World Health Organization as of April of 2020, 1.9 billion adults worldwide are overweight and 462 million are underweight. There are 47 million children under the age of 5 who are “wasted”, while another 14.3 million are “severely wasted”, meaning they are suffering from severe loss of weight and aren’t taking in enough nutrients to maintain a healthy life. Malnutrition is particularly an issue among younger children due to the fact that their early development requires proper nutrition for them to develop properly.

As of 2012, the percentage of overweight children in Bosnia and Herzegovina has dropped significantly from 25.6 in 2006 to 17.4. Since the Bosnia conflict back in the late 1900s, the issue of widespread malnutrition was common amongst all factions of Bosnia and Herzegovina. For the past 20 years since the conflict, the number of civilians suffering malnutrition has been on the decline. In the year 2014 the Government of Bosnia and Herzegovina put into place the *Eat Well, Grow Well* program which is coordinated by the Federal Ministry of Education and Science. The program promotes and educates young children and parents in the education system on healthy eating habits and healthy lifestyle choices. The national government has also created national protocols for Bosnian hospitals to ensure new mothers are provided with all the resources and information required to ensure healthy growth for their infants.

The Delegation of Bosnia and Herzegovina seeks to collaborate with other countries in the international community to create an effective solution to the issue of malnutrition in middle and low income nations. The nation of Bosnia and Herzegovina seeks to create an action plan rooted in the three categories of education, funding, and international collaboration. Firstly, the education of the population at large is of top priority in solving this issue. Combating malnutrition starts with informing the public about making the right lifestyle choices in order to live a healthy life. Additionally, national governments must allocate funding for programs to educate the public and provide services or programs to combat malnutrition. Lastly, international cooperation and dialog is a must for creating any form of solution to this issue. Bosnia and Herzegovina acknowledges the fact that any sound and durable solution to this issue requires international cooperation amongst all nations.

Topic B - Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental Health Refers to a person's physiological and emotional condition. Mental Health conditions can be present in a person at birth or developed during a person's lifetime. Most mental disorders develop as a result of being exposed to a traumatic event such as personal conflict, a war or natural disaster. Post Traumatic Stress Disorder (PTSD) is one mental disorder that is common among soldiers returning from combat. According to data from the United States, approximately 30% of soldiers deployed in combat will return with PTSD after exposure to conflict. Due to the wide range of mental illnesses and the different classes of them, diagnosing and treating these ailments is difficult. This becomes even more difficult in developing countries who don't have all the resources and specialists required to deal with the many issues associated with mental health.

Mental Health is an issue of concern to the national government of Bosnia and Herzegovina. In the aftermath of the Bosnian conflict at the end of the 20th century, mental health disorders and illness became very prevalent among the population of Bosnia and Herzegovina. According to the World Health Organization in a study conducted 11 years after the end of the conflict, 22% of the population was suffering from some form of mood disorder and over 35% of people in the country were diagnosed with Post Traumatic Stress Disorder. Since the year 1995 when the conflict in Bosnia and Herzegovina ended, the national government has taken actions in order to address the issue associated with mental health. The nation of Bosnia and Herzegovina has in the past decade established 72 mental health centres. These centres provide services and support for those suffering with mental health problems.

Mental health is still a relatively new issue facing the international community. Many nations and factions around the world are still wary of tackling mental health and deny the existence of many mental disorders. Any solution to this issue must be rooted in the gathering of information on mental health and providing national governments with any and all necessary information needed to make appropriate policies as they pertain to mental health. Additionally, the duty of educating the population on mental health falls to individual national governments. Lastly, for any solution created to have success, international dialog and cooperation is needed amongst the international community to ensure any solution is sound and long lasting.

Delegation from: Brazil

Represented by: North Olmsted High School

Position Paper for the World Health Organization

The issue placed before the World Health Organization includes: Combating Malnutrition in Middle and Low Income Nation, as well as Raising Mental Health Awareness and Improving International Responses to Mental Health Crises. Brazil advocates for prevention against malnutrition and mental health crises while continuing to combat malnutrition and mental health in and of themselves to achieve global wellness and prosperity of its people.

I. Combating Malnutrition in Middle and Low Income Nations.

Malnutrition does not only refer to those who are not consuming enough calories, there are various types of malnutrition. It includes obesity, being underweight, or growth stunting. High rates of malnutrition indicates high levels of poverty that can be sourced from a deteriorating economy. Malnutrition can decrease quality of life and the longevity of life. An unhealthy population can lead to less people participating in jobs because of illness or lack of strength. Malnutrition is especially widespread in the world among children which is critical because malnutrition in children can impact them for the rest of their lives. Brazil was once in a similar situation during the 1970s, malnutrition and poverty ran rampant. Understanding the urgency of combating malnutrition, Brazil is eager to lend a hand through aid or citing previous legislation that allowed for malnutrition rates to shrink enormously.

Cited earlier, 55% of the population's children in Brazil had stunted growth. In 2006, Brazil was able to reduce that percentage to only 6. Still to this day Brazil's malnutrition rate continues to decrease. Brazilian government first looked at the main factors that affected stunted growth. Poor access to food, care for women and children, health services, and a healthy environment were the major factors Brazil focused on repairing. Anti-poverty policies were introduced, promoting income distribution through the Income Transfer Programme that allows for those below the poverty line to receive monthly stipends that allow for households to provide more food for their families. Brazil focused on income distribution rather than business investing or direct economic growth because income distribution would inadvertently help businesses and the economy better than directly investing. Education was crucially involved to prevent stunting by allowing for mothers to complete their education along with their children to ensure good jobs. Anti-poverty policies in addition fixated their attention to create more access to essential public services, such as the family health programme. The programme made it possible for people to access a doctor and have a checkup, many of which had never. In 1996, 37% of the poorest quintile of mothers had access to antenatal care. With the programme, this was increased to 80%, dramatically lowering the socioeconomic disparities in antenatal care. By concentrating on investments in primary health clinics and family health teams, these results were achievable.

Brazil firmly believes identifying factors that cause malnutrition is critical to developing a plan to combat it. However, with a widespread pandemic surrounding the globe, monetary values are tight and hospitals are flooded. Despite this, Brazil proposes a plan that can aid managing the pandemic while combating malnutrition. Providing a similar programme to the ITP, will allow for the distribution of relief for food and for unemployment as a result of the pandemic.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises.

Mental health is real, mental health is important, and mental health is a tremendous pinnacle of wellness in a country. Mental health encompasses all parts of our being - our physical, emotional, and mental state of being are all altered and controlled by our mental health first and foremost. Over the years, mental health has seen a rise in ridicule and doubt from the media and the general public. In past years, mental health has been treated through psychiatric institutions that often worsened an individual's well-being by keeping them in a controlled environment where they were treated as mentally-unstable subjects seen as a threat to society. Unfortunately, this was also the case throughout Brazil until 1990, when the country took initiative to completely reform their mental health care system from one that only approached mental health from a psychiatric perspective, to one that institutionalized it as part of primary and community-based care. Brazil is adamant in reaffirming the importance of not only a fair and honest system to treat mental health, but also one that works to prevent crises related to mental health at the source and the unfortunate rampage it may cause on both the individual and a nation.

The 1990 mental health reform in Brazil led to numerous reforms, including changing the federal funding patterns, increasing access to and developing community based care for service users through the existing psychosocial services network, and promoting recognition of people with mental disorders as citizens with full rights. The reforms became, and still are, highly effective today in preventing and approaching mental health crises. Following the implementation of the reform, Brazil has noticed more than tripled the Psychosocial Healthcare Centres coverage between 2002 and 2015 (from 0.21 to 0.90 per 100,000). Moreover, 4,349 people benefited from the "Going Back Home" Programme from 2003 to 2015; this was followed by a 58% reduction in psychiatric hospital beds between 2002 and 2014. Furthermore, the year 2002 saw the doubling of federal funding for mental health dedicated to community-based care until 2014. Despite the positive reinforcements that the healthcare system in Brazil has reinstated over the past 30 years, the turn of a new decade has reaped tragedy and an unfortunate rise in mental health crises throughout the nation. Disastrously, since COVID-19 was first reported in Brazil in February 2020, the country has quickly become one of the worst affected globally. The Coronavirus has compromised roughly 14.8% of the senior population, as well as put millions at risk as a result of extreme inequality and poverty, which has increased vulnerability to the disease. With an estimated population of 210 million as of 2018, Brazil's health system is now on the brink of collapse; over 1,500,000 cases of COVID-19 and more than 60,000 deaths have been reported; this is particularly detrimental to mental health, as those who may be seeking help will not receive the care they need, as the healthcare system has narrowed its vision onto COVID-19 patients. Not only has COVID-19 tore through Brazil's population and economy, but has caused displacement, confusion, and a rise in mental health deterioration for many. According to research conducted during the spread of a respiratory virus in Korea in 2003, a combination of anxiety, uncertainty, social isolation and economic problems may significantly increase suicides. A recent research done in Brazil has stated that younger age, female gender, low income, lower level of education, longer period of social distancing, and self-reported history of previous psychiatric illness were strongly associated with higher severity of symptoms. The rise in mental health crises during COVID-19 pandemic should be considered a public health problem in Brazil. It is the responsibility of the healthcare systems and individual clinicians to be prepared to offer and implement specific options in order to identify and treat mental health issues before they worsen.

Brazil is imploring its health care system, as well as other nations, to acknowledge and treat mental health just as much as they are treating other health ailments. Brazil believes that through adequate funding and reallocation of resources during the pandemic, there is a positive chance in relieving the stress of everyday life from many of Brazil's citizens. Mental health is not a personal fight and when one country hurts, it is the duty of all of them to find a solution.

Country: Kingdom of Cambodia

School: St. Edward High School

Committee: World Health Organization

Topic A -Combating Malnutrition in Middle and Low Income Nations

Malnutrition is unfortunately a very common issue in impoverished regions across the world. Undernourishment is not selective and affects every nation. In 2016, over 800 million people were suffering from severe undernourishment with the areas where the problem is particularly prevalent being in Asia and Africa, which alone account for 87% of the total cases of malnutrition. However, the problem has been improving in recent years, and western countries have been more willing to deliver aid to the nations where poverty and lack of access to resources is common. Still, the lack of sufficient attention and funding has had a devastating impact on the well-being of the populace of nations subject to such distressing amounts of malnutrition which further fuels their instabilities.

Cambodia has had a troubling history with nutrition and poverty. According to USAID, 42% of Cambodia's population under five years of age suffer from malnutrition, but Cambodia has been improving dramatically in recent decades. The rate of poverty in Cambodia has dramatically fallen from 48 percent in 2007 to only 14 percent in 2014. The Cambodian government is currently creating a prosperous environment for its citizens to thrive in, by creating new work opportunities and infrastructure to completely eliminate all malnutrition and poverty in the country. The foreign aid distributed to them from faithful allies has greatly supported Cambodia's own internal efforts to combat malnourishment.

The agrarian economy that dominates Cambodia's economy will hopefully be able to propel them forward in being able to ensure that the people, under the wise guidance of the government, will be fed sufficiently and in sufficient quantities. Full nutrition can only be achieved when effective distribution is possible and whenever a cost effective supplement can be feasibly delivered to the people in all parts of the country. Fortunately, Cambodia has remained in relative peace for the past twenty years, thanks to the government of Prime Minister Hun Sen who has been making tremendous contributions to Cambodian society since 1985 and is the longest serving Prime Minister in the entire world. In the past, insurrectionist groups have intercepted food aid meant for ordinary people, but the Cambodian Government is confident it now has this situation under control.

Cambodia gives and receives aid from multiple UN agencies and is also the recipient of many NGOs that raise millions of dollars to help the people of Cambodia. In order to fight malnutrition the UN should increase funding aid to these nations so that ample amounts of appropriate resources available to distribute aid as needed.

Topic B - Mental Health Awareness and Improving International Responses to Mental Health Crisis

Mental health is a serious issue that affects countless millions of people worldwide. Unfortunately, nearly 2/3rds of the mentally sick never seek any form of treatment, and the availability and access to such treatment in many countries are severely lacking in depth. A large portion of nations do not even acknowledge mental health crisis as a policy prerogative and this has detrimental effects on the efficiency of mental health treatments accordingly. According to the WHO, low-income nations have 0.1 psychiatrists per 100,000 people, while in the USA the figure is 16 per 100 000. The problem seems clear - there are too few mental health professionals available, and too little recognition and funding, so that far too many patients are unable to deal with the situation that afflicts them accordingly.

Cambodia's healthcare system and infrastructure were ravaged during the nation's conflicts in the 1970's, but since the 1990's the medical infrastructure in the country has started to recover and develop rapidly. However, Western techniques of treating mental health are not very popular in Cambodia. Many Cambodians refuse Western medicine because it was ingrained in them as a cultural form of colonial imperialism, even though many suffer from traumatic experiences from the suppression and persecution of former Cambodian Governments, such as the regime of Pol Pot and the genocide committed by his forces in the past. The current Cambodian administration is expeditiously moving toward modernization in the country's healthcare system and the resources it can offer its citizens.

However, it is estimated that 40% of the population suffers from mental health issues and this still presents a challenge for the future. As the country's medical practices improve, the problem still remains for the 80% of the population that does not live in urban areas and who reside in situations almost completely isolated from the rest of the country in villages, with very limited access to resources and proper medical facilities.

Cambodia's main obstacle to spreading mental healthcare and addressing these issues rest in the lack of consistent and workable infrastructure across the country. It is very difficult to persuade medical professionals to live in these isolated areas, and it is also very difficult to travel to these isolated areas. The need for more psychiatrists thus remains an ongoing problem in Cambodia. Many medical professionals that do qualify in Cambodia are also lured away by other nations, delaying progress still further. The Delegation of Cambodia would support international means to curtail such practices in order to ensure better accessibility for the Cambodian people.

Delegation from: Dominion of Canada

Represented by: Archbishop Hoban

Position Paper for the World Health Organization

The issues presented before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The delegation of Canada firmly believes these issues presented are extremely important in the modern world.

I. Combating Malnutrition in Middle and Low Income Nations

Approximately 16.5% of persons under the age of 18 living in Canada live in food insecure households. However, under 2.5% of children living in Canada are malnourished. Food insecurity refers to the lack of available financial resources for food whereas malnutrition is the actual result of not eating foods with nutrients or not eating enough. Despite the mere nonexistence of malnutrition in Canada, the nation recognizes the increasing number of malnourished children and families in middle and low income nations and its urgency. The effects on a malnourished child can last a lifetime and, in severe cases, lead to death. These side effects include heightened vulnerability to diseases, developmental delays, and stunted growth.

The World Health Organization classifies malnutrition as evident across many situations, as it carries the double burden of both under nutrition, manifested in wasting, stunting, underweight, and micronutrient deficiency, and obesity, which often increases an individual's risk for numerous other health concerns. The causes of malnutrition extend past food insecurity, oftentimes combined with the effects of poverty, politics, climate change, feeding practices, disease, contaminated water, and poor sanitation. It is necessary that nations who have abundant access to the positives of these factors band together and combat malnutrition at its core.

The Dominion of Canada firmly believes that the international crisis of malnutrition must be addressed immediately in order to save the lives of hundreds of millions of people and children. Canada intends to combat malnutrition in middle and low income nations in collaboration with other United Nations contributors whose malnutrition rates are also extremely low. This way, the positive outcomes and effects will be maximized by the contribution of numerous nations. In recent years, Canada has pledged to fund three Public Policy and Child Nutrition Collaborative Grants to assess food environments in low and middle income countries. Additionally, Canada strives to continue research on malnutrition and the beneficial ways of combating it. Canada is passionately against malnutrition and is dedicated to creating a global plan that would eliminate this epidemic.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Throughout any given year, 1 in 5 people living in Canada personally experience a mental health problem or illness, affecting people of all ages, education, income levels, and cultures. Even more shocking, 20% of Canadian youth suffer from a mental illness or disorder. It is evident this

issue is not simply national, but rather a worldwide crisis. Although genetics, biological, and personality factors play a role in the development of a mental illness, the leading cause is environmental factors, such as community and political climate. As seen within the country, Canada is dedicated to raising mental health awareness and improving international responses to mental health crises.

In 2001, the World Health Organization declared stigma as the single most important barrier to overcome in mental illness awareness. Since then, Canada has been committed to conquering the stigma around mental illness. Although many nations have attempted to tackle stigma through social marketing campaigns, these advertisements have proven themselves ineffective in the long run. This is why, when negotiating and creating plans to combat mental health stigmas, the World Health Organization must consider short and long-term effects.

As part of a 10-year mandate, the Mental Health Commission of Canada has instituted an anti-stigma initiative called Opening Minds (OM). This program intends to change the attitudes and behaviors towards people with a mental illness in Canada and encourage the elimination of discrimination within the workplace. Since its launch in 2009, OM has become Canada's largest systematic effort undertaken in its history to decrease the stigma around mental illness. Originally, OM targeted advanced approaches by reaching out to healthcare providers, youth, the workforce, and news media, in an attempt to build on the current mental health programs in Canada. Now, OM is partnered with more than 100 organizations dedicated to replicate successful international programs and provide additional, effective assistance. Many of the developed programs include educational sessions where mental health advocates present personal stories of mental illness and recovery to those in similar suffering situations. OM's strategy has extremely high success rates and displays long-term effectiveness. The Dominion of Canada is committed to sharing the strong and effective strategies of the OM initiative to promote mental health awareness worldwide and improve international approaches to mental health crises.

Delegation from: The People's Republic of China

Represented by: Lake Ridge Academy

Position Paper for World Health Organization

The issues presented before the World Health Organization are the following: Combating Malnutrition in Middle, and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The People's Republic of China recognizes the significance of these issues, and seeks to reach a consensus with the best interests of our collective citizens in mind.

I. Combating Malnutrition in Middle and Low Income Nations

Malnutrition, or an imbalance in nutrition, is experienced at a disproportionate rate in nations with a high population of lower to middle income citizens. It is directly related to poverty and is more prevalent in rural areas, such as remote mountainous areas. Malnutrition causes stunted growth, heart disease, eye problems, and diabetes. It has been stated by experts that the main cause of death and disease in the world is nutrition or a lack thereof. It has additionally been noted that the effects of malnutrition aren't by any means short term, but rather serious and long lasting with impacts on developmental, economic, social and medical condition. Working to eliminate these illnesses directly tied to malnutrition should be the primary goal of this committee.

In the interest of eliminating preventable deaths, this problem must be solved in order to preserve the lives of citizens. The solution is complicated and multifaceted and will only be effective so long as all citizens' fundamentally value food and take into account the logistics of food distribution to malnourished populations. An importance must be conveyed through education that a comprehensive diet of fruits and vegetables is important alongside carbohydrate rich foods. Many diets worldwide consist of protein and a rice/cereal as a base, and this simply isn't sustainable for nourishment. Malnutrition isn't simply a lack of food, and can emerge due to various factors and in various forms. According to the WHO, 1.9 billion adults are overweight and 462 million are underweight, and both instances are directly tied to malnutrition. 52 million children under the age of five suffer from wasting, which is a low weight in connection to height. A tenth of children are born with a low birth weight, and this increases to one in four in South Asia.

The People's Republic of China recognizes the domestic and international elements of malnutrition and has worked alongside the WFP to reduce poverty to strengthen and improve the lives of smallholder farmers. These initiatives are directly in support of the 13th Five Year Plan, and the People's Republic of China intends to serve as a donor for development on an international scale. It is through this international collaboration that we seek to bolster nearby nations in South Asia leading to successful implementation of the Zero Hunger plan. The basis of these efforts lies in ensuring access to sustainable avenues of protein, carbohydrate, and vitamins and minerals. This must be achieved through the elimination of waste and distribution of excess food material. Ensuring that when food is provided that this food is healthy leading to healthy lifestyles rather than obesity, which is also prevalent in malnourished communities. Lastly,

sustainable development of society with regard to food-aid is achieved through comprehensive health measures like the PROC has taken. These measures include health examinations and insurance for nearly all citizens, to ensure that they are treated by a medical professional. The PROC encourages other nations to evaluate their own nations, and if capable assist other nations in their efforts to eliminate this international ailment. This assistance should come in the form of increased food distribution pathways to rural environments, and an emphasis placed on farmers and retail distributors to allocate “imperfect” produce for such rural pathways.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health is as important as physical health and researching and understanding the root cause of mental illness is essential for treatment and for societal betterment. Many factors such as physical, psychological, social, cultural, spiritual and other interrelated factors play a role with regard to mental health. There are many disorders such as bipolar affective disorder, schizophrenia and other psychoses, dementia, intellectual disabilities and developmental disorders including autism. Two additional mental health disorders more prevalent in China are depression and anxiety.

The problem the world faces is imminent and warrants an urgent solution to combat these mental health issues. In order to correctly do this, education about mental illness is important but takes time. Rather an prompt emphasis should be placed on inclusion of mental health as a health issue, allowing it to be promptly treated by trained medical professionals. This treatment must be financially billed in a similar fashion to physical health related illness. The People’s Republic of China has begun to implement such a universal insurance system with the intent of distributing mental health and healthcare.

The People’s Republic of China urges other delegations to work as the PROC has in helping to lessen barriers to mental health care that may exist allowing for effective diagnosis and care. The People’s Republic has also introduced a law that ensures an increase in mental health facilities, with an increase in mental health professionals. However, The People’s Republic of China’s additional form of support has come in the form of community engagement. Many societal stigmas exist and working to end these stigmas by uniting the community and allowing them to serve as listeners is essential to reducing mental health illness and suicide. The PROC urges all delegations to lessen these barriers to healthcare and work jointly to destigmatize mental health illness.

Delegation from the Republic of Columbia

Represented by Saint Joseph Academy

Position Paper for the World Health Organization

The issues presented to the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The Republic of Columbia is aware of the importance of the issues presented and is committed to working to find effective solutions.

I. Combating Malnutrition in Middle and Low Income Nations

Malnutrition is defined by the World Health Association as referring to deficiencies, excesses or imbalances in a person's intake of energy and/or nutrients. Malnutrition is experienced globally especially in Middle or Low income nations. The World Health Association states that around 1.9 billion adults worldwide are overweight, while 462 million are underweight. An estimated 41 million children under the age of 5 years are overweight or obese, while some 159 million are stunted. Malnutrition is caused by lack of food as well as lack of healthy food. The rise of availability of processed foods high in fat and sodium has led to the rise in obesity especially in children. Also, the impact of climate change, natural disasters, and rise in poverty levels especially in low income nations has led to a lack of access to food leading to malnutrition. Finally, the prevalence of food deserts globally leads to both the issues of being overweight and underweight. Overall, the impact of malnutrition is widespread and deeply felt and the World Health Organization must address the root causes in order to decrease the impact of the issue.

The Republic of Columbia understands the immense impact of malnutrition as citizens of the Republic of Columbia experience this issue. The World Health Organization estimates that 19% of the Columbian people are either wasted, overweight, or stunted. Also, nearly 10% of newborns report low birth weight in Columbia. As a developing country the Republic of Columbia understands the challenge posed to low income nations in combating this crisis. The Republic of Columbia is deeply concerned about this issue because it is widespread and has a lasting impact. Malnutrition leads to developmental issues, growth stunting, and long-term health issues. The Republic of Columbia is committed to working to address this issue quickly and effectively for the benefit of people in Columbia as well as around the world.

The Republic of Colombia acknowledges the severity and importance of addressing this issue and wants to work towards a resolution that addresses the root causes and creates solutions to the problem. The Republic of Colombia wants to continue initiatives started by the World Health Organization such as the UN Decade of Action on Nutrition from 2016 to 2025. The Republic of Colombia also proposes that the committee research alternative methods of agriculture that can be adapted to regions most affected by malnutrition, and produce larger yields for consumption.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health has become a more prevalent issue in recent years, due to the rise in suicide attempts as well as diagnosis of mental illness. Nearly 800,000 people die yearly from suicide and this number has dramatically risen in recent years. It is also estimated that globally 1 in 5 adolescents will experience a mental disorder each year. Finally, an estimated 264 million people globally experience depression, and 45 million people worldwide experience Bipolar disorder. These illnesses when left untreated can lead people to hurt themselves and others and cause lasting issues for patients. These issues can be treated through various forms of intervention and therapy, but issues with accessibility to doctors to provide diagnosis as well as the negative stigma surrounding mental health prevents people from seeking help. This stigma and lack of access is especially felt in developing nations. The mental health crisis is widespread and impacts a large and diverse group of people and must be addressed.

The Republic of Colombia believes that we must address the growing issue surrounding mental health. The World Health Organization estimates that the burden of mental illness in relation to disability-adjusted life years is over 3,000 and the suicide mortality rate is 7.2% in the Republic of Colombia. The Republic of Colombia does have policy in place to combat the mental health crisis such as policy and infrastructure, but the Republic of Colombia recognizes the need for more mental health professionals as well as resources for these professionals in order to best combat the issue. The Republic of Colombia encourages the committee to work together to solve this crisis

The Republic of Colombia is committed to completely and comprehensively addressing the mental health crisis and creating solutions. The Republic of Colombia stresses that the committee must work together to create an effective resolution to aid this crisis. The Republic of Colombia asserts we must uphold and bolster current World Health Organization policy. The Republic of Colombia also believes we must reduce the stigma surrounding mental health and create more access to professionals and treatments. The Republic of Colombia believes lack of access is one of the root causes of the mental illness crisis and if we address this issue at the root we can greatly decrease the issue.

Represented by: Avon Lake High School

Delegate: Cuba

Committee: World Health Organization

The topics of combating malnutrition in low income nations and improving mental health responses and resources are of great importance to the delegation of Cuba. The delegation looks forward to debate and hopes to create positive solutions to these issues.

I. Topic A: Combating Malnutrition in Middle and Low Income Nations

Over 820 million people globally are undernourished. This number is simply unacceptable. Lead causes of malnutrition include conflict, poverty, and natural disasters. Climate change also has a looming threat on food production around the world. In 2016, the UN General Assembly deemed the years 2016-2025 the “Decade of Action on Nutrition” and called on the World Health Organization to lead the charge to combat malnutrition. The WHO along with the Food and Agriculture Organization of the UN has outlined six important areas that countries must address to solve world hunger. These include, creating sustainable food systems, providing nutrition education and ensuring trade policies benefit nutrition.

The delegation of Cuba is dedicated to solving the issue of malnutrition in the world. In 2019, the Cuban Government outlined a plan for food security in its National Plan for Economic and Social Development. The people’s right to food, and food security, is also outlined in the new constitution approved last year. The issue of malnutrition is seen as a national security matter as well as a humanitarian one. The strategy presented in the National Plan for Economic and Social Development aims to boost supplies in the domestic market and increase tourism. It also aims to reduce imports and increase Cuba’s overall exports. The positive impact of these goals would benefit the economy and therefore increase food production. The delegation does however acknowledge that this cannot be achieved on its own and recognizes the need for outside assistance in Cuba and other food insecure countries. This is why Cuba is currently working in collaboration with the UN World Food Programme to help solve this issue.

An important factor to consider when addressing the issue of malnutrition in Cuba is the prevalence of natural disasters, specifically, the increasing intensity of hurricanes due to the threat of climate change. Natural disasters are responsible for the shortage in food production in Cuba and many other nations. The delegation also believes it is important to consider that each country has its own needs when it comes to food security as many countries' food production is affected by war or economic issues. A current economic issue is the impact of the COVID-19 pandemic on food security globally as many countries have suffered economically, greatly impacting their nutrition.

The delegation of Cuba hopes to create a comprehensive plan for combating malnutrition in Cuba and around the world. Cuba looks forward to debate and further discussion of this issue as it is crucial to the prosperity of the world.

II. Topic B: Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health awareness and improving international responses to mental health crises is crucial to the well being of the world. This issue is extremely important to the delegation of Cuba as our country is greatly affected by this issue. According to the World Health Organization, on average, less than 2% of the global health budget is used for mental healthcare and resources yet globally, 800,000 people die by suicide each year. The global response to this issue needs to be reevaluated.

In Cuba our mental health care emphasizes prevention and community. There are three levels to mental health care in Cuba, the Committee for the Defense of the Revolution promotes social welfare in the country, policlinics provide health care services to thousands of Cubans, and psychiatric hospitals. In addition to these three programs, every citizen has an annual health screening that includes a mental health screening. Nurses even do home visits if patients do not attend their appointment. This is implemented at a neighborhood basis and allows for easy access to mental health care.

Internationally, mental health crises are on the rise. One current crisis is the Covid-19 pandemic. The pandemic has led to an increase in mental health issues around the globe. In Cuba, the mental health of the elderly is of great concern. This is due to the impact of isolation and pandemic related anxiety in the elderly population. Cuba also has a large elderly population so this issue is especially important. In addition to the impact of Covid-19, natural disasters are major causes of mental health issues and resources for those affected must be more accessible.

The delegation of Cuba aims to create a resolution that will benefit every country and support the mental health of people around the globe.

Country: *Czech Republic*

School: *St Edward High School*

Committee: **World Health Organization**

Topic A - Combating Malnutrition in Middle and Low income Nations

Throughout the world today malnutrition is a pressing issue in middle and low income nations. Nearly 1/3 of these nations are affected by malnutrition causing both stunted growth and obesity. The estimate globally is 2.3 billion adults and children are obese, and 150 million children have stunted growth. The lower income nations have seen a shift in the way their citizens are eating; citizens have turned to cheaper, fattier meals because of the easier and cheaper availability of it. This problem mainly affects Sub-Saharan Africa, South and East Asia, and the Pacific, where the majority of malnourished children reside. There are approximately 3.1 million children deaths of children due to malnutrition annually across the globe. Malnutrition doesn't just affect the growth and dietary needs of children, but makes them more vulnerable to diseases.

The Czech Republic has taken a strong stance on fighting malnutrition in its own country. Their malnutrition rates are one of the lowest in the world affecting 48 out of every 100,000 people, so roughly 0.048%. In the early 2010s the Czech government set up the Czech Association for Clinical Nourishment and Intensive Metabolic Care. This government organized care program has over 400 members of doctors, nutritionists, physicians, pharmacists, nurses, dietitians, researchers, students and company representatives. The center of their work is in Prague, and they focus their efforts on halting diseases, and giving proper nourishment to those in need. The Czech Republic's malnutrition rate is now very low due to this operation in addition to the stabilization of the country's economy. The only problem that they face is from low birth weight prevalence, it has increased from 5.8% in 2000 to 7.8% in 2015, according to the global nutrition report. Czech Republic and the Global Nutrition Report believes that this is caused by anemia, diabetes and obesity in parents. This is yet another reason they created the Clinical Nourishment and Intensive Metabolic Care Association; their job is to study and discover ways to help lower the rate of malnutrition in newborn children.

The Czech Republic has taken a strong stance on fighting malnutrition not only in its own country but around the world. Czech Republic has supported many United Nations' Proposals including the Zero Hunger proposal. The Zero Hunger Program was launched in 2012 and its goal was to bring healthy food to all countries around the world by 2030. The goal, signed by Czech Republic, is to make all food systems sustainable, production equal to consumption and bring an end to rural poverty which allows farms to prosper. Their end goal is to eliminate malnutrition by eliminating food loss in packaging, and supplying healthy food and diets for impoverished people year round. Not Only is the zero hunger a challenge to bring food to all these people, but it also has the longer-term aim of teaching sustainable farming methods.

Topic B - Mental Health Awareness and Improving International Responses to Mental Health Crisis

Mental Illnesses have been a plague across the Globe for years. Studies show that in 2017 roughly 710 million people across the globe suffered from mental illnesses including, depression anxiety, bipolar disorder, eating disorders, and schizophrenia. This doesn't even include substance use disorders, which along with mental illnesses, affects 15% of people in the world. Globally 1 in 5 children and adolescents suffer from a mental disorder. According to the World Health Organization, the second leading cause of death is suicide taking about 800,000 lives a year. Almost all of these deaths are a result of mental illness, and 75% of them are recorded in low and middle income nations. Mental Illnesses are almost doubled during war and internal social unrest and times of crisis, and it leads to being susceptible to other diseases too.

Czech Republic, throughout their history, has used asylums and mental hospitals as a means of dealing with the issue. Its mental health infrastructure isn't nearly as well funded as are those in Western European countries. In 2015 they had 21 mental hospitals, 3 for children, and 18 for adults. The problem with this care is the small number of available suitably trained professionals in these mental institutions. This causes them to only be able to give proper care to 1-5 patients, and a large refusal of new patients wanting to come into the hospital. In 2013, Czech Republic started reforms in the Ministry of Health using European Union funds. The goal of these reforms are to improve the quality of life of people with mental illness by reducing stigmatisation, increasing the satisfaction of patients and the efficacy of psychiatric care, increasing inclusion of patients into the community, improving the linkage between health and social services, and humanising psychiatric care. They want to be able to host and help almost 100,000 people at a time and find an easier way to analyze problems with patients. In the past Czech Republic has been lacking in mental aid to its citizens, but, realizing their problem, in the past ten years they have made many reforms to their Ministry of Health to help those in need, and plan to continue to find better ways to help them.

The European Union started a movement in 2013 to help support and raise awareness for mental illnesses. The European Health Action Plan ran from 2013-2020, and it was similar to Czech Republic's plan. The European Union wanted to improve the mental well-being of the population, reduce the burden of mental disorders, respect the rights of people with mental health problems and offer equitable opportunities to attain the highest quality of life, and establish accessible help for citizens. Czech Republic has supported this proposal and have started to implement it into their government with the Ministry of Health.

Delegation: Democratic Republic of the Congo

Represented by: St Edward High School

Committee: World Health Organization

Topic A: Combating Malnutrition in Middle and Low Income Nations

It is no secret that the DRC is facing a malnutrition crisis. The majority of the population is under the poverty line. The inflation rate, while lower than previous years, is still difficult and burdensome. Without ways to make much money (in the local currency of the Congolese Franc) the majority of our people are often starving. We need a solution and fast. We need foreign aid just to keep our people from dying. The effects of Climate change appear to be making farming harder every day. The scourge of internal conflict between competing regional warlords is tearing the DRC apart. However, there are ideas available that could set the DRC back on course. One such is a program to promote regular universal access to food and water. By improving access to food and water, this will help to alleviate malnutrition in our country. If such universal access to food and water could be implemented, the DRC could become a shining example for other nations such as Uganda, India, Sierra Leone, and many more.

To further support access to food, universal and protected access to farmland would be helpful. In addition to access to the land, we need to give the people the things they need to be able to actually farm the land. They need food, fertilizer, and water. If the international community could work more closely with the Government of the DRC to find ways to allow farmers access to arable farming land, the ability to produce their own food to support their families and their villages would be greatly enhanced.

Topic B: Mental Health Awareness and Improving International Responses to Mental Health Crises

The DRC is facing a mental health crisis of its own in recent years, especially amongst soldiers, mothers of younger teens, and younger teens themselves. With the country plunged into regular civil war, many people have anxiety, soldiers are coming home with Post Traumatic Stress Disorder (PTSD), and mothers of kidnapped children are forced to live with depression. On top of that our population has to deal with mental health crises that are a result of coronavirus lockdowns and restrictions. The DRC needs action now, from both the Government and the international community. As it stands right now the DRC is facing multiple problems in this area - which compounds the issues of poverty and lack of access to regular food supplies and clean water.

The Government of the DRC calls upon the wider international community to assist its efforts to combat the prevalence of regional warlords who dominate areas by force and severely hamper the ability of the local population to farm and provide themselves with adequate food and water. These practical barriers compound the mental instability of a large proportion of the population who see no hope for the future.

Delegation from: the Democratic People's Republic of Korea

Represented by: Western Reserve Academy

Position Paper for the World Health Organization (WHO)

The issues before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations; and Mental Health Awareness and Improving International Responses to Mental Health Crises. The Democratic People's Republic of Korea (DPRK) is committed to ensuring all citizens have nutritional diets and satisfactory mental health resources and thus believes the nations of the world would benefit by adopting the excellent programs employed by the DPRK.

I. Combating Malnutrition in Middle and Low Income Nations.

The DPRK values the individual self-sufficiency of every nation and is skeptical of intervention into those nations by international organizations dominated by Western capitalist influence. In keeping with the official state policy of *Juche* (“self-reliance”) implemented by the DPRK’s founder Kim Il-sung, in the 1950s the DPRK implemented the Public Distribution System (PDS) to fairly allocate quality food to all North Korean citizens. The PDS has operated at superb efficiency to feed the North Korean population, and the DPRK believes that other nations, by adopting centralized nutrition distribution systems, would be able to provide much more healthy food to their people to help increase life expectancy and labor productivity.

The Western imperialist powers have falsely claimed that famines plague the DPRK. The DPRK understands the utility that foreign aid can play in aiding the food distribution of growing nations. The DPRK is a member of the International Fund for Agricultural Development and the Food and Agriculture Organization. The DPRK is committed to seeing that every nation can properly feed its people in the same way that the DPRK historically has been able to with great success. Foreign aid can be of great utility if given to state-run organizations whose role it is to distribute food as long as that foreign aid does not violate the national sovereignty of the state it is supposed to help.

The DPRK understands the importance of proper nutrition to assist the growing population of poorer nations, especially those who have been in conflict with the imperialist Western powers. The DPRK would like to see national sovereignty encouraged and not transgressed against. The establishment of nationalized food distribution organizations with the food grown by collective agriculture is the best policy for combating malnutrition.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises.

The DPRK believes that access to effective mental health resources is essential for the wellbeing of its citizenry. This is why the DPRK operates remote institutions known as “Number 49 hospitals” for the benefit of individual Korean citizens who need access to psychiatry, counselling, or other forms of mental care. The benefit of these hospitals is greatly improved by their remote location: the individuals in need of care are exempt from the mental health stigmas of society and the individuals in need of care can be alone to focus on their treatment. The success rate of the Number 49 hospitals is very high, and the DPRK believes that countries can improve the mental

health of their citizens (and subsequently their satisfaction and productivity) by providing good nutrition and high quality mental health institutions in remote locations for people in need.

Though not a single person has contracted COVID-19 in the DPRK, our supreme leadership understands the significance of the mental health crisis that other nations (who have mismanaged their COVID-19 response) face because of lockdowns. Those nations will have to spend more time and resources to improve their mental health resources as their lockdowns will exacerbate the existing mental health crisis. The DPRK has not become involved in international mental health initiatives because the DPRK believes these efforts should be pursued on a national basis.

The importance of proper mental health resources for the wellbeing of a population cannot be overstated. Therefore the DPRK encourages nations to promote good mental health by establishing remote hospitals for those afflicted with mental problems. The DPRK hopes to see a resolution passed emphasizing the importance of good mental health and encouraging more state intervention and investment in mental health resources.

Country: Ecuador

School: St. Edward High School

Committee: World Health Organization

Topic A - Combating Malnutrition in Middle and Low Income Nations

Malnutrition is an issue of immense importance all across the world, even more so in those nations with limited or low incomes. Malnutrition can have a number of disastrous effects on a person, including reduced muscle and tissue mass, a weakened immune system, breathing problems, and in some patients - physical developmental delays. As a result of both the severity and scope of the issue, malnutrition has been a core issue of the United Nations since its inception. Through groups such as the Food and Agriculture Organization (FAO), the United Nations has consistently worked to reduce the effects of malnutrition. The FAO works to provide high quality food in order to attempt to reduce malnutrition and food insecurity. In the 21st century, the UN has further established a variety of new programs to tackle the issue too. The first major movement towards greater reduction of food scarcity came in the form of the UN Millennium Declaration, which among other topics aimed to reduce the number of people who suffer food insecurity by half. Most recently, the United Nations' World Food Programme won the Nobel Peace Prize for its contributions to ending hunger around the world. As with all resource-based issues, food insecurity disproportionately affects the lower income nations of the world, and so much of the efforts are focused on them.

In Ecuador, food insecurity and malnutrition are rampant, and so form a large part of the government's plans for the future. Notably in 2008, the new Constitution outlined the necessity of the nation to achieve "food sovereignty". The Constitution describes food sovereignty as "a strategic objective and an obligation of the state that persons, communities, peoples and nations achieve self-sufficiency with respect to healthy and culturally appropriate food on a permanent basis". In regards to the nation of Ecuador's food insecurity, roughly 40% of the population lives below the poverty line. In addition, Ecuador exists in a region prone to frequent natural disasters, crippling the already weak infrastructure of the nation. Through collaborative efforts with the World Food Programme (WFP), the Ecuadorian government has worked to establish a number of safety nets in the nation, most notably with the integration of the WFP's cash assistance program with the Ecuadorian government's own established programs.

With regard to resolution of the issues, the delegation of Ecuador is hoping to implement measures similar to its own in more nations worldwide. While it understands the innate difficulties of this process, Ecuador hopes that the development of more mutually beneficial partnerships of large and small income nations will create a long-term goal to ensure stronger safeguards against the threat of food insecurity. In addition, the delegation hopes to increase global funding of the WFP, in order to provide effective aid to all nations that require support. Food insecurity is an issue highly relevant to Ecuador, and through this committee Ecuador hopes to establish the steps necessary to eliminate it once and for all.

Topic B - Mental Health Awareness and Improving International Responses to Mental Health Crises

In the context of the current global Coronavirus Pandemic and the inherent isolation that it brings, mental health has recently received high awareness among the general population as well as in countless administrations worldwide, including the United Nations (UN). The UN has helped to advocate for mental health awareness since its inception through partnerships with groups such as World Federation for Mental Health. This NGO focuses on preventing and caring for mental disorders around the world in order to reduce the impact that mental illnesses have on people everywhere. The UN itself has also further worked hard to raise awareness of mental health, with the establishment of World Mental Health Day in 1992. Originally a focus on a general awareness on mental health in a wider sense, the day has evolved to cover specific topics such as funding global mental health programs (the focus for 2020). In 2015, the World Health Organization (WHO) added mental health to the U.N. Sustainable Development Programme. This inclusion aimed to reduce the deaths of mental illness by one third by 2030, as well as reduce the frequency of substance abuse through prevention and treatment.

Ecuador's response to mental health is limited due to the limited size and strength of its economy. While there is no specific policy for mental health, it is covered under general policy and is mainly focused on psychiatric care, which is limited in many parts of the country. Ecuador still suffers from the social stigma of mental illnesses, and so it is difficult to properly deal with the scope of the illness in the country. Culturally, receiving treatment for mental illnesses is seen as a form of weakness of character, which has led to large quantities of unreported illnesses. Some studies have shown that somewhere between 5.3% and 17.3% of the population suffers from depression with 9.5% having suicidal thoughts. This has led to greater concern for mental health in Ecuador, although practical steps to tackle the issues have been difficult to implement and this would be greatly benefitted by the assistance of international policy to direct efforts more efficiently.

The Delegation of Ecuador is hoping to establish policy during this coming conference that will allow Ecuador and others in a similar situation to better handle the need for focusing on mental health. One element that will be crucial to the improvement of the situation at hand is the implementation of education courses covering mental health issues. These courses would aim to reduce the stigma of mental health and increase the availability and accessibility of treatment options. In addition, the delegation is looking to find more methods of accessing to funds and programs in order to accommodate the increased need for clinical services following an expected success of the education programs. The delegation of Ecuador understands that the need for mental health care is a global one, and so hopes to come to an understanding that is mutually beneficial to all nations involved.

Delegation from: Arab Republic of Egypt

Represented by: Lake Ridge Academy

Committee: World Health Organization

The issues presented to the World Health Organization are: Combating malnutrition in middle and low income nations, and raising mental health awareness and improving international responses to mental health crises. The Arab Republic of Egypt would like to continue collaborations with WHO and UNICEF in terms of tackling undernutrition and requests that the UN assists in the initiation of obesity prevention programs as well as legislative mental health reforms for the Mental Health Act.

I. Combating Malnutrition in Middle and Low Income Nations

According to the WHO, malnutrition refers to deficiencies, excesses, or imbalances in a person's intake of energy and/or nutrients. Malnutrition is a global problem, in both underdeveloped and developed nations. The composition of malnutrition has been changed in the past 2 decades. In 2014, approximately 462 million adults worldwide were underweight, while 1.9 billion were either overweight or obese. More than one-third of the middle and low income countries are facing extreme malnutrition problems. The Arab Republic of Egypt is no exception. According to UNICEF, Egypt is one of the 36 countries where 90 percent of the global burden of malnutrition falls. The Arab Republic of Egypt aims to tackle both obesity and undernutrition within its population.

The profile of nutrition of Arab Republic of Egypt reported in the global nutrition profile showed a higher undernutrition with a wasting rate in children under 5 compared to other developing countries. 28.5% of women of reproductive age have anemia, and 19.8% of adult women have diabetes, compared to 16% of men. Meanwhile, 41.1% of women and 22.7% of men have obesity. A study showing differences in diet consumption between 1950' and 2000' have revealed that the food consumption is increasing. As a result of the rise of nutrient deficient food, the obesity and diabetic rate has increased in the past 2 decades. Egypt is evidently facing a double burden of malnutrition.

When it comes to undernutrition, the group in Egypt that is impacted the most is children. According to the WHO, malnutrition causes around 45 percent of child mortality. On top of this, the surviving children suffer from physical, and cognitive developmental impairments as a result of undernutrition. Micronutrients deficiencies also have a large impact on the Egyptian population, mainly the iron deficiency anemia that affects large numbers of children, adolescent girls, and women within reproductive age. It is not a surprise that undernutrition mainly occurs within the 30 percent of Egyptians who are in poverty. These people lack access to a balanced diet and have poor living conditions. Another major reason for undernutrition are poor dietary habits, lifestyle and lack of nutritional awareness across the population. This can be reflected by the fact that only 36 percent of households have appropriate child stool disposal practices. As well as the fact that breastfeeding rates for 4 to 5 month old children have decreased from 34 percent in 2005 to 13 percent in 2014. Currently UNICEF is working with the Ministry of Health and Population in Egypt along with the WHO on multiple programs to address the issue of undernutrition. Their main focus is on raising public awareness of proper childcare practices, such as encouragement of breastfeeding, as well as nutrition actions that focus on combating and preventing undernutrition in women and children. The Arab Republic of Egypt would like to continue and strengthen collaborations with WHO and UNICEF such as these with the goal of eliminating undernutrition in Egypt.

Policy makers in Arab Republic of Egypt have started programs to increase public awareness on obesity and diet-related chronic disease. However, little attention has been addressed on the underlying cause. According to Majalla, the economic crisis in Egypt is causing 30 percent of Egyptians to deviate from their regular mediterranean style diets. Instead of purchasing the vegetables and fruits, which are more nutritious, they are purchasing caloric and low nutrition foods, which are actually subsidized by the government. In conjunction with diet, the shift in working schedules have also caused Egyptians to exercise less. Currently there are 19 million obese adults out of Egypt's 98 million population. Egypt also has one of the world's highest rates of diabetes, with nearly 16 percent of working-age adults diagnosed with the disease and 86,500 dying from it every year, according to a 2014 study. Obesity can increase the prevalence of diabetes, hypertension and other chronic diseases. The healthcare cost will increase because of the consequences of obesity.

Other than the policy implementation on public awareness, the Arab Republic of Egypt would like the United Nation to assist in initiating an obesity prevention program. The UN has been helping countries with strengthening and promoting nutrition governance and accountability. We hope the awareness of obesity can be promoted in the multi-directional efforts including education, health care, and administration. Food labeling and a comprehensive intervention on diet adjustment may be a way to decrease the calorie intake. A physical activity and exercise program should also be promoted.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

One in four people in the world will be affected by mental or neurological disorders at some point in their lives. Around 450 million people currently suffer from such conditions, placing mental disorders among the leading causes of ill-health and disability worldwide. Even though treatments are available in most developing and developed countries, nearly two-third of patients with mental disorders never seek medical assistance. The poor often bear the greater burden of mental disorders, both in terms of the risk in having a mental disorder and the lack of access to treatment. Constant exposure to severely stressful events, dangerous living conditions, exploitation, and poor health in general all contribute to the greater vulnerability of the poor. Mental illness and disorders have been proved to be linked to substance use and suicide. The issues may cause many social-economic burdens for a country. In Arab Republic of Egypt, mental health has several challenging areas that require improvement.

The last estimated national prevalence rate of psychiatric disorders in Egypt in 2009 (18–64 years) was 17.0%. The lifetime prevalence of any substance use varies between 7.3% and 14.5%. The true prevalence of substance abuse is probably higher due to underreporting. In 2009, the legislative passed the Mental Health Act to enhance public awareness of mental health and strengthen the health care for mental health. However, the program weighs heavily to the government affiliated organization. In the WHO report for Egypt's management of mental health, they stated that most resources are allocated to a few large centralized psychiatric hospitals. However, the number of beds available for psychiatric patients is still inadequate for provision of acute inpatient care, particularly as 60% of the beds are occupied by long stay patients.

Other than that, the personnel for mental health care including psychiatrists are insufficient. The number of hours given for training in mental health in medical schools and other health training institutions is limited and does not reflect the importance of this field as a contributor to morbidity. Multiple systems are currently operating the mental health care for patients. There is a serious problem with the long stay for certain service users, which may extend to several years. Psychiatric hospitals have sometimes been exploited, causing patients to become victims of violence, neglect, and other human rights violations.

The Arab Republic of Egypt would like to cooperate with the United Nations on the legislative level to initiate comprehensive reform for the Mental Health Act. WHO is currently working with the Ministry of Health and Population in integrating mental health services into primary health care and raising awareness in schools and universities to reduce the stigma of mental health illness. We would like to work with the UN to develop a long-term project in improving mental health care quality and resources. We also aim to increase the number of mental health care specialists and provide affordable care across the urban and rural area with the. Hopefully, we could decrease the socioeconomic impacts mental health has on our country with implantation of the reformed mental health policy.

Delegation from: France

Represented by: Lake Ridge Academy

Position Paper for the World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations; and Mental Health Awareness and Improving International Response to Mental Health Crises. France is committed to ensuring the access to food and mental health care to those in need, and hopes to work efficiently with the rest of the committee to create a final resolution for these issues.

I. Combating Malnutrition in Middle and Low Income Nations

Every year the World Health Organization gathers information from countless countries in order to put together a Global Nutrition Report. According to the report published in 2020, it was found that poor diet is the main cause of death and disease in the world. One in nine people, which works out to 820 million individuals in total, are malnourished. These numbers have been rising for years now, and are only predicted to keep rising. The report also shows that there is little to virtually no progress in any country across the world when it comes to reversing the trend of obesity. The 2020 Global Nutrition Report establishes the inequality among worldwide malnutrition, that being the fact that there are issues both with obesity and hunger. In 2016 world leaders in the United Nations agreed to the Sustainable Development Goals, a list of goals set to be achieved by 2025 in order to eliminate malnutrition in all its different forms and ensure that no country gets left behind.

France is fully committed to fighting malnutrition throughout other areas of the world, as well as in Europe. In 2016, the same year as the Sustainable Development Goals, France created a plan that targets those suffering from malnutrition in any form. The plan consists of five different angles that can be taken when combating malnutrition. The first part of the plan is to integrate nutrition into established programs, and this is carried out by France's International Development and Ministry of Foreign Affairs, as well as the respective agencies working together in the target countries. Secondly, France is also working to help countries suffering from malnutrition to address these issues in government policy as well. The next part of the plan is to increase European and International response to malnutrition. The rest of the plan consists of two parts: helping and sharing research with the rest of the world in order to learn more about malnutrition and its importance; and to help raise awareness and educate the world on the significance of malnutrition and its prevalence in the world.

France is committed to fighting malnutrition in all its forms, and has consistently supported any action towards this cause in the past. In order to reach sustainability, human malnutrition must be addressed. Specifically, France wishes to bring countries to the attention of the committee that have suffered from malnutrition. These countries that have suffered so severely and need help include Mali, Central African Republic, Cameroon, Chad, Madagascar, Niger, Burkina Faso, Laos and Mali. France believes that malnutrition in any form must be eliminated in order to achieve a certain degree of sustainability among human life.

II. Mental Health Awareness and Improving International Response to Mental Health Crises

Throughout 2020, COVID-19 has reigned over the world. From shutting down businesses and entire countries, to killing countless people. While COVID-19 is not a mental health disease, the effects from the pandemic are seen throughout the world. The pandemic has caused feelings of fear and isolation, which will only hurt the mental health of people in the long-run. Earlier this year, the United Nations declared an investment must be made into mental health worldwide, as the pandemic reveals its side-effects on the world population. Social isolation, fear of losing a friend or family member, and unemployment are all three very common denominators among almost any country's population this year. The pandemic has seen unemployment rise, which does not help with the mental health of those who have already had to be isolated from everyone or who may have lost a friend or family member to COVID-19. Even in countries like China and Canada, the mental health professionals are reporting increases in depression and anxiety in each respective country throughout the pandemic. Many of these professionals are suffering from insomnia or depression, as the need for these professionals is rising everyday.

France is fully committed to respond to mental health crises seen on either an international or national level. In 2008, it was found that those with neuropsychiatric disorders in France amounted to about thirty percent of the world's burden of disease. Additionally, data was taken to find the suicide rate among males and females in France. For males, twentyfive commit suicide per every 100,000 in the population. For females, every nine commit suicide per 100,000 in population. In 2005, France created a plan to combat the growing challenges that come with mental health. The plan consists of a few main components, such as the funding allocation for mental health services, the shifting from mental hospitals to community-based mental health facilities, and integrating mental health into the primary care of citizens. One of the main points of emphasis is the workforce and other personnel relevant to mental health care. For every 100,000 people, there are about twenty-two psychiatrists. Part of the issue is the lack of training regarding mental health. For every 100,000 people, about none are given proper training while in school for a health profession. These statistics show that one of the underlying problems with mental health care in France is the lack of training, and this can also be seen throughout the rest of the world. In order to fully address mental health crises, professionals must receive proper training. Another underlying issue being that there are not enough health professionals in the field throughout the world, however one does not need to specialize in health in order to receive proper training on dealing with mental health crises. Proper training and instruction to professionals across all professions is something that should be readily available in order to be fully prepared for mental health crises.

France is devoted to raising awareness worldwide for mental health, as well as preparing the rest of the world for responding to mental health crises. In the past, France has worked both on a national and international level to increase awareness and preparedness for mental health crises. Going forward, France is prepared to continue with this course of action and will continue pushing forward legislation and other programs to help raise awareness and address mental health issues. Specifically, France believes that educating about mental health and giving proper training to professionals across all fields will help to improve the world's preparedness, and it would also increase the awareness of the topic around the globe.

Delegation from: Germany

Represented by: Gilmour Academy

Position Paper for World Health Organization

Topics:

Topic A: Combating Malnutrition in Middle and Low Income Nations

Topic B: Mental Health Awareness and Improving International Responses to Mental Health Crises

Federal Republic of Germany

Third Committee

Combating Malnutrition in Middle and Low Income Nations

The United Nations (UN) has long been fighting against international malnutrition. In 2000, a combination of global spikes in grain and oil prices led to a new threat for food security in low and middle income nations. This prompted the United Nations to set eight Millennium Development Goals (MDGs) to be achieved by the 2015 deadline; these goals were surpassed in 2010. In 2012 at the Rio+20 World Conference on Sustainable Development, the Zero Hunger Challenge was set as an attempt to reach a 100% decrease in world hunger by 2030. As of 2015, however, global hunger is on the rise threatening the achievability of the 2015 goals.

The Federal Republic of Germany has continually aided various countries regarding food security. In 2013, Germany pledged to contribute 33.77 million U.S dollars to the World Food Program (WFP) to combat hunger in Yemen. As a result, around 5 million Yemeni citizens were provided assistance by the WFP. In 2016, Germany promised another 16.9 million to the WFP again to give assistance to Yemen's malnourished. This contribution enabled the WFP to grant nutritional aid to over 290 thousand more Yemenis. Germany has not shied away from assisting the UN, more specifically the WFP, in combating malnourishment and is still continuing to support these two international bodies.

Germany is a loving country, ready to provide aid in starving nations as needed. A proposition the German government sees attainable is for able countries to support the WFP, the World Bank Group, and the Food and Agriculture Organization (FAO). These organizations have the specialization to assist malnourished countries the most. If largescale donations of money can be sent to these organizations to be specifically used as aid for the hungry, then Germany believes that the rising number of malnourished can be curbed in the near future.

Federal Republic of Germany

Third Committee

Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health has been a long standing problem for the international community. Mental health issues affect millions of people across the globe. A result of this that at least a million die of suicide each year. A main contributor to the large number of mental health victims is due to the large costs required to treat patients. In 2008, the UN Convention on the Rights of Persons with Disabilities (CRPD) laid out the rights a mental health victim should be granted nationally and internationally.

It encourages that quality healthcare should be provided as close as possible to affected communities, provided by Article XIX. It also promotes to allow mental health victims to retain core rights such as to own property and enter into contracts, as catered to by Article XII. The final point laid out aims to end the possible international stigma of mental health by advocating for the participation of public and political life and educating the general public about mental health.

The Federal Republic Germany is no stranger to population wide issues in mental health. With around 31% of the population affected by mental health issues and only 40% of those receiving actual treatment, Germany is suffering problems regarding its citizens' mental health. Germany also ranks among the top 10 countries suffering from generalized anxiety disorder. A large portion of mental health stems from issues of work. Worker burnout, poor work conditions, and poor work atmosphere largely contribute to mental health issues. With only, on average, 250 psychiatrists per 1 million german citizens, the lack of treatment for more than a third of mental patients is no shock.

Germany, facing issues itself, believes that mental health victims deserve the same human respect. The CRPD laid out the core human rights that should be granted to mental health and Germany believes that they are a great framework to base solutions. To expand upon a solution, subsidization towards the WHO to specialize in increasing the availability of care in areas lacking in the proper facilities to deal with mental health patients should be a top priority in dealing with this issue. Public awareness and education of mental health problems should also be a part of this plan with the WHO. It is far too common for patients to go undiagnosed due to the stigma sometimes seen with mental health or just a complete lack of awareness that a person may have a mental disease.

Country: Republic of Ghana

School: St Edward High School

Committee: United Nations Development Program

Topic A - Combating Malnutrition in Middle and Low Income Nations

In many low and middle-income countries throughout the world, malnutrition has become a crisis affecting people of every class. Currently, about 822 million people suffer from malnutrition around the world, and each year an estimated 9 million of those people die due to undernourishment-related issues, including the deaths of 3.1 million minors. The nutritional insecurity of these countries have cut them off from any progress towards developing themselves. Ghana, although it's become noticeably more developed in its recent history, is still one of the many places to fall victim to undernutrition.

The people of Ghana saw what it's like for a people to suffer from malnutrition, including the many native Ghanaians that have experienced it first-hand. According to 2014 data from UNICEF, the number of children under five in Ghana who suffer from malnutrition-related issues adds up to 18.8% of the under-five population being stunted in growth because of malnutrition, and 4.7% of the under-five population suffers from acute malnutrition, or having a drastically low weight for height, because of this. These statistics worsen as you go towards the northerly end of Ghana, where arid savannas and lack of water lead to a shortfall of the agricultural resources required to feed the local population. So far, the government has issued special intervention plans to focus spending on the poor and vulnerable; this counteracts malnutrition by supporting the Ghanaians below the poverty line, the part of the population that's the most malnourished. Meanwhile, organisations such as The Bill & Melinda Gates Foundation and the US Centers for Disease Control (CDC) have been quick to support Ghana with nutritious meals that fit the World Health Organisation's standards, as well as providing education on malnutrition and anemia to Ghanaian communities. Despite this, progress is still slow and numbers are still high.

Superficially, the answer seems straightforward: the middle and lower classes of Ghana need food. However, the problem doesn't lie in the inability to make food as Ghana has enough resources to make food and an economy built well enough to import food to urban areas. Rather, it's the distribution of food that's the problem. One of the biggest problems, but one with a straightforward yet simple solution, is a lack of working infrastructure, particularly safe and easily accessible roads. The scarcity of a road infrastructure makes the transportation of food from the agriculture-friendly south to the arid north especially laborious. If the UNDP could support funding for such roads, it would immediately lead to better nutrition in the rural areas of Northern Ghana. The delegation of WHO in Ghana further requests a policy from the UN promoting food stability in both agrarian and non-agrarian communities. One of our goals is to be able to provide for Ghanaians in need. Ghana is committed to working with the UN every step of the way to help the nation overcome its challenges in malnutrition.

Topic B - Mental Health Awareness and Improving International Responses to Mental Health

In today's world, mental health is of utmost importance. Mental fitness should be cared about just as much as physical fitness, as it's necessary to have a healthy and balanced life. However, mental health is a growing issue in all countries. According to recent studies, it's estimated that one in four people will end up being affected by poor mental health at some time in their lives. Meanwhile, an estimated 4.4% of the world's population suffers from depression, adding up to 300 million people worldwide. By calculating the number of people born with mental disorders with the number those who developed one in their lifetime, the number adds up to a staggering 450 million people living with a mental illness. Mental illness is a global problem, thus necessitating a global response. However, not enough countries have the resources or policies required to treat mental health. According to the World Health Organization's Project Atlas, throughout the world, only 59% of countries have policies regarding mental health; only 69% of countries have a program created to raise awareness on the topic of mental health; and only three fourths of all the countries in the world have laws regarding mental health.

The people of Ghana aren't immune to mental disorders. According to a situational analysis by the World Health Organization, it's estimated that 2.16 million native Ghanaians have to live with a mild to moderate mental illness, and a further 650,000 are suffering from a severe mental illness. Despite the disconcerting statistics, 98% percent of those people are left untreated. The problem lies with the distribution of mental health services. While Ghana has the economy and resources to build mental health services, these services are often presented in specialized psychiatric hospitals located in the coastal capital of Accra. The location of such hospitals restricts access to mental health services for the majority of rural Ghana. As Ghana's economy keeps growing, more efforts are being made to place focus on community, and by extension mental health. However, the most prevalent response to mental health is placing those with mental illnesses in institutionalized care, where many of the patients are mistreated and locked away for decades.

To combat the problems mental illness brings, Ghana requested the help of the World Health Organization in creating new mental health policies. The solution to Ghana's mental health issues would not just be treatment, but greater awareness on the topic of mental health. The lackluster services and large treatment gap are due to ignorance on the importance of mental health and the implications of mental disorders. The UN should authorize the creation of a policy requiring international education on mental health to both a nation's people and its government. In the long run, this policy would not just be a Ghanaian solution, but an international solution.

Country: Republic of Haiti

School: St. Edward High School

Committee: World Health Organization

Topic A - Combating Malnutrition in Middle and Low Income Nations

Malnutrition is a very serious adversity in the world, and has been as long as humans have been on this planet. Unfortunately, The Republic of Haiti suffers greatly from this issue. Haiti is ranked 169th out of 189 countries on the 2019 human development index. According to the World Food Programme, 49% of Haiti's population, which is almost 5 million people, are undernourished, and Haiti ranks 4th among the countries most affected by extreme weather events. Despite Haiti having immense improvements of living quality in the past 20 years, such as a total increase in life expectancy of 9 years, poverty still plagues the country. Many people don't have access to electricity, sanitation, or even healthcare. 20% of children don't attend primary school, and the literacy rate of people above age 10 is very low, at 61%. In 2018, half of the population suffered from malnutrition, and Haiti's score in the Global Hunger Index rose to 35.7 more than it was just 9 years prior in 2009. A total of 22% of the youth in the country are affected by malnourishment, 10% are underweight, and 66% of children under 5 also have anaemia.

One of the front runners in factors for Haiti's malnutrition is poor agricultural performance and the high dependence on food importation. Imports account for more than half of the food and 83% of the rice eaten in Haiti. This makes Haiti extremely susceptible to inflation and price volatility in the world market. Food prices in Haiti for consumers are also anywhere between 30% and 77% higher than in most of South America and the rest of the Caribbean, making them almost unaffordable for many of the population. These problems have been made worse by a chronology of natural disasters over the past 20 years, consisting of severe weather storms, floods, landslides, drought, the earthquake that hit Haiti in 2010, and Hurricane Matthew, which put over 800,000 people in the country in urgent need of food in 2016.

To fix this issue, it is imperative that healthy foods are more accessible in lower income countries like Haiti and more affordable so that consumers can access what they desperately need. Also, more global awareness would help a great deal to aid the issue. One thing that has been attempted thus far is called "Ready to Use Therapeutic Foods", also called RUTFs, which are created in the form of biscuits and pastes based on peanut butter so that they are rich with nutrients, protein, and energy. They also reduce exposure to water-transmitted bacteria due to the fact that they have no water in them. They don't require refrigeration and are ready to serve. They have resulted in a massive upscale of malnourishment treatment programs, increased coverage with a broader access to treatment, and reduction in social costs to solve malnutrition. There are also many other ways to solve malnutrition that the WHO is working on.

Topic B - Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health issues are something that has been plaguing mankind just as long as poverty and malnutrition. People with mental health disorders should indeed have assistance (if needed) and the awareness for the issue must go up if we want to help this issue get better. The main mental health problems currently are pre-existing disorders, such as depression, schizophrenia, and harmful use of alcohol or drugs, emergency-induced disorders such as grief, stress, harmful use of alcohol or drugs, depression, anxiety, and Post Traumatic Stress Disorder (PTSD).

On January 12, 2010, a massive earthquake hit Haiti, decimating everything it touched, destroying thousands of homes, schools, hospitals, and government buildings. This event rendered millions of people homeless overnight. The population of Haiti has suffered through many crises in the past that may affect their mental health, and to The Republic of Haiti personally, mental health awareness and improving international responses to mental health crises is extremely important.

According to the WHO, the main causes of infant death in Haiti are acute diarrheal disease, intestinal infection diseases, infections of the perinatal period, malnutrition, and acute respiratory infections. For adolescents, the main causes of death are HIV/AIDS, assault, homicide, tuberculosis, typhoid, and maternal death. Female adolescents also have higher rates of violence and sexual abuse. For adults, common causes of death consist of AIDS, intestinal infections, and maternal causes. For seniors, the most common causes of death are non-communicable disease, diseases of the circulatory system, malignant neoplasms of digestive organs, tuberculosis, and HIV/AIDS. Because the people suffering from these diseases expect to be helped by medical professionals, making hospitals and medical professionals more available and affordable would greatly aid these people, possibly saving their lives, and improving the overall mental health of the population exponentially.

Things that have been done to help aid this issue are donating money to organizations that deal with these issues solely, donating money to mental health hospitals around the world, and raising awareness globally in small communities or cities.

Delegation from: Republic of India

Represented by: Western Reserve Academy

Committee: World Health Organization

Position Paper for World Health Organization

The issue presented before the World Health Organization include; Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The delegation of India is committed to improving the health status of the world's population and is looking forward to working with other delegations to discuss, evaluate, and make further advancements regarding the issues presented.

I. Combating Malnutrition in Middle and Low Income Nations

The delegation of India strongly supports an international effort in combating the issue of malnutrition in Middle and Low income nations. As the delegation of India is a middle-income country that has over half of its population of children malnourished, the delegation has taken serious steps to combat this issue in India. Such steps include the Integrated Child Development Services, the National Health Mission, and many more.

Through many efforts to fight malnutrition, the delegation of India has repeatedly shown that malnutrition is a serious issue and an issue that the delegation is willing to work on. The Integrated Child Development Services, launched in 1975, with the object of improving health, nutrition, and education for mothers and children shows the Indian delegation's commitment to the issue of malnutrition. The Mid-Day Meal Scheme was also a program put into place by the government to give children and education while feeding them nutritious food that many of the children do not otherwise have access to. The National Food Security Mission is also a great example of the Indian delegation attempting to reduce this issue of malnutrition. The delegation of India has also signed the declaration on the 2030 Agenda for Sustainable Development and put into place the National Food Security Act of 2013 and POSHAN. The United Nations World Food Program also endorsed the policy measure taken by the delegation of India.

The delegation of India would like the World Health Organization to work on coming up with a viable solution to the issue of malnutrition. Despite the delegation of India's continued effort to combat and eradicate this issue for the most part, there is only so much the delegation can do by itself. India is attempting and has attempted numerous times through numerous ways to help solve this issue but the delegation of India, being a middle-income nation with the issue of malnutrition widely present in the delegation's own country, is desperately asking for the help of other nations in combating this issue. India would greatly appreciate funding from other delegations and developed plans sponsored by other delegations that will provide a viable solution to this issue of malnutrition that affects the vast majority of the delegation's population.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The delegation of India acknowledges that there is a mental health crisis in the world and in India and strives to combat this issue. In 2017, 7.5 percent of the Indian population, or 90 million Indians, were said to suffer from a mental disorder, as per the WHO. Due to this, India is aware of the mental health crisis and has made steps to combat this issue. Such steps taken include,

accounting \$5.7 million out of the \$7 million healthcare budget towards mental health, being a signatory of the Convention on Rights of Persons with Disability (2007), enacting the National Mental Healthcare Act, and many more. However, India acknowledges that there is much more that the delegation can do to combat this issue.

India, in addition to acknowledging that there is a mental health crisis, has taken numerous steps to combat this issue and show that they are willing to work on it further. The delegation of India has set aside \$5.7 million for mental health out of their \$7 million healthcare budget. Despite the delegation having numerous issues needing to be addressed in India, it has set aside money and time to combat the issue of mental health, showing the importance of this issue to the delegation of India. The delegation, also being a signatory to the Convention on Rights of Persons with Disability (2007), is obligated to look after the mental health of the population of India. The enactment of the 2017 National Mental Healthcare Act, put in place “to provide for mental healthcare and services for persons with mental illness and to protect, promote and fulfill the rights of such persons during delivery of mental healthcare and services,” also shows the delegation of India’s commitment to tackling the mental health crisis. These acts put in place by the delegation of India, repeatedly show that the delegation acknowledges and is seeking ways to combat this issue in the country.

The delegation of India would like the World Health Organization to discuss this issue and strive to come up with solutions to combat the stigma around mental health. The delegation of India believes that the reason the country is unable to make advances on this issue is due to a lack of psychologists and psychiatrists. This lack of such doctors is due to the stigma associated with mental health, which in turn does not interest people in taking up the career of a psychiatrist or psychologist. The delegation of India also believes that the country is at the moment combating many other prominent issues such as poverty, malnutrition, access to education, and healthcare, causing it to not have enough funding to dedicate to the issue of mental health. Due to this, the delegation of India would like to call upon other delegations to offer funding to India, in an effort to combat the issue of the mental health crisis in India. The delegation is open and would like to make an effort to work with other delegations to come up with solutions to combating this issue.

Delegation from: Indonesia

Represented by: Lake Ridge Academy

Position Paper for the World Health Organization

The issues presented by the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. Indonesia is devoted to improving nutrition in pregnant mothers and young malnourished children and expresses their determination to combat with and spread awareness for the global mental health crisis.

I. Combating Malnutrition in Middle and Low Income Nations

Although Indonesia is classified as a developed country, the country has consistently had a malnutrition problem. They believe that malnutrition is a significant problem, with 37.2% of their children being even stunted or malnourished. They recognize the double burden of malnutrition which consists of malnourishment in children starting from in the womb to early development, resulting in an individual's productivity being reduced and an increased risk of future development of noncommunicable diseases. These disturbances then lead to a suffering in the economy due to underdeveloped brains resulting in an increased unemployment rate. Ultimately, malnutrition in Indonesia causes lifelong damage to their future generation.

The country of Indonesia fully supports advancement in decreasing malnutrition in middle and low income countries. Nationally, their malnutrition is a result of multiple causes. These consist of not having access to clean water, sanitation, early childhood education, healthcare, nutritious meals, and social insurance. In 2017, Indonesia's vice president, Jusuf Kalla, called for a national strategy to accelerate stunting prevention, which was supported by the World Bank. Likewise, Sri Mulyani Indrawati, Minister of Finance, stated that, "Stunting among children under the age of 5 is a reflection of Indonesia's future," and "The issue is now a government priority." Similarly, Nila Moloeck, Minister of Health, claimed that "Stunting must be tackled together. There should be better collaboration between government agencies at the national and regional level. Further resolving the problem, Indonesia is investing in the Nutrition and Early Year Program. This transaction is planned to by 2021, have caused 75,000 villages to converge healthcare, nutrition, water, and sanitation, as well as early education services for mothers and children. Additionally, Indonesia has been working with Human Development Workers and UNICEF to improve malnutrition within their communities. There will be an estimated 3,000 workers who will be connecting priority benefits with key services that can help reduce stunting by helping educate communities on their health and nutrition, and weighing babies. UNICEF is supporting the Government of Indonesia to improve the delivery of nutrition services and accessibility by educating in proper nutrition and providing assistance in nutritional services. With the inclusion of these internal and external forces, Indonesia will continue to fight against malnutrition within their country.

Indonesia strongly believes that internationally, they must continue to fight against malnutrition. To overcome this, Indonesia supports educating pregnant women and children about proper nutrition by holding national, regional, and communal interventions. This strategy will target communities that are malnourished. Providing pregnant mothers and children with the key services such as immunization, proper diets, breastfeeding, food security, proper drinking water and sanitation, Indonesia will control and slow down the global and national problem of malnutrition.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Indonesia currently is in a mental health crisis, with 9 million people suffering from mental illnesses. However, within the country there is an increasing awareness, including public awareness campaigns, developments in society, and unfortunate yet awakening incidents. Throughout the country's history, pasung, or, shackling up people with mental health disorders, has been a consistent form of restraint and solution.

Although this practice was banned, more than 50,000 people in the country still undergo this every day. Indonesia's two main causes for the lack of mental health awareness and help are due to the extreme stigma around it and lack of psychiatric professionals. Aside from this, the country is determined to put forth their best efforts to spread mental health awareness and fight the world-wide crisis.

The country of Indonesia has a long, callous history concerning mental health. In 2018, an Indonesian Psychiatric Association (PDSKJI), held a survey and found that the country has a shortage of licensed psychiatrists, an average of only one for every 300,000 to 400,000 people, with 70-80% of them being in big cities. The country recently gave national agencies the ability to monitor and close down institutions that were found to be abusive to patients. These agencies include the country's human rights commission and its witness and victim protection. Following that, the government launched a program to spread awareness and help to train healthcare professionals. This program went to people's homes to ask them questions concerning their mental health and then checked to make sure they were receiving proper services. Human Rights worker, Krita Sharma, after finding 18,000 people living in shackles, who was involved with the program stated, "Shackling people with mental health conditions is illegal in Indonesia and yet it remains a widespread and brutal practice," and "People spend years locked up in chains, wooden stocks or goat sheds because families don't know what else to do." The program continues to check in on communities in Indonesia, already covering 25% of the country, by sending health workers directly into communities where they gather data in addition to raising awareness about health issues and providing available services. Likewise, The World Health Organization reported in 2015 the number of suicides in Indonesia as 2.9 cases per 100,000 population. However, many cases go unreported due to the immense social stigma around mental health, then creating a further problem by people not reaching out for help. Dr. Irmansyah, who was recently appointed Indonesia's director of mental health, said that "as in many developing countries - psychiatry is a neglected branch of medicine in Indonesia." The health ministry plans to create a new department, the Center for Mental Health. This office will have increased authority, elevating the status of mental health in Indonesia, as well as Irmansyah's position and ability to affect policy. Indonesian Minister of Health, Terawan Agus Putranto, states that "Besides, I urge regional leaders to set focus on mental health programs and services in order to develop human resources with certain qualities by providing sufficient resources to mental health,". Through their best efforts, Indonesia is continuing to spread mental health awareness in an attempt to lower the stigma that plagues societal advancement.

Indonesia firmly regards mental health a recurring problem. To combat the mental health crisis and spread awareness, it can be said that by taking certain measures, the country is addressing the problem head-on. These measures consist of regularly checking in on people throughout the country to determine whether their mental health is being treated humanely and effectively. Similarly, not only increasing but spreading out to everywhere all over the country psychiatric and mental health professionals is imperative to ending the crises. Lastly, spreading awareness through acceptance, media, trusted officials, doctors, and mutually respected people, is necessary for lowering the stigma surrounding mental health, so that more people feel comfortable recognizing the problem and seeking help.

Committee: World Health Organization (WHO)

Represented By: Western Reserve Academy

Delegation From: Iraq

1. Combating Malnutrition in Middle and Low income nations

Malnutrition is a type of condition where the human body does not receive enough nutrients in order to have the right diet to grow naturally. Having this type of condition can mean that the child is undernourished and does not receive enough nutrients or the child is overnourished as they receive an exceeded amount of nutrients. Malnutrition is a global problem for the world and is one the main causes of death, but this disorder is mostly common in poorer regions where people receive low-middle incomes as Africa is the most prevalent of malnutrition. The (FAO) estimated that out of the 7.6 billion people who live in the world about 815 million of them or 10.17% suffer from malnutrition. Ending malnutrition will take time but most countries in Southeast Asia and Africa, which suffer the most are willing to work with the World Health organization in order to come up with any technique to reduce the im[act of malnutrition.

The delegation of Iraq has been devastated by malnutrition over the past few years, and are willing to work with the WHO in trying to end this disorder. It has been estimated that out of every five Iraqi children one of them has stunted growth. Researchers have also found that 60% of children under five die because of malnutrition, which shows the significant impact it has on Iraq. Even though most people do not care about getting the right number of nutrients there are also around 3 million people who barely get anything to eat. The Iraqi government has noticed this problem has grown over the years since the gulf war and have come up with strategies in reducing the number of people who suffer malnutrition. The Iraqi government has come with different ways of increasing awareness on the impact of malnutrition as a whole. They have come up with nutrition strategies families can use to go against malnutrition. Iraqi government has also thought of ways to advocate for women to increase breastfeeding children for at least 2-3 years. We would like to address the World Health Organization to help the Iraqi government spread awareness about malnutrition using any techniques possible. Since we are in a modern world we can use radio as a source of information to allow people to learn about malnutrition and how to avoid it. In general the media is a good source of information to help spread awareness and as a country we believe that if people are educated about malnutrition then they will try to avoid it under any circumstances.

2. Mental Health Awareness and Improving International Responses to Mental Health Crises

A person with a mental health issue often has trouble trying to think, behave appropriately and is forced to not be able to withhold the expectations of what society sees in a normal person. Being mentally ill can be caused by many things such as a fatal accident, through genetics or even the natural structure of the brain. A person does not decide to be mentally ill, which as a society we need to work with these types of people and be able to understand what they are going

through. In order for people to understand what mental illness is and how to cope with people who suffer from it, we must spread awareness. Anxiety disorder and mood disorder are the two most common types of mental illnesses in the world. It is estimated that 18% of adults suffer from anxiety disorder each year, which includes panic attacks or shock. Researchers have estimated that 10% of adults suffer from mood disorder or in other words depression of the mind. It does not seem possible to end mental illness, but if we are able to spread awareness and educate the suffering these people go through, then everyone can help them in any way possible.

In Iraq mental illness is a big issue as 20% of the total population have been impacted. These people suffer a lot because of low awareness where the government has not tried as hard to spread information based on mental illness. If people are able to get a better understanding of mental illness, then the stigma of seeing mentally ill people as outcasts might disappear. The Iraqi government has tried different techniques of spreading awareness, which is one of the most important things to do because it allows people to understand that mental illness is natural and not something a person chooses. People will be able to understand what mental illness is and how to help those who suffer from it once it is reiterated in the media such as radio's or newspapers. Once the Iraqi government provides such awarenesses the social stigmas of discriminating people with mental illness will begin to reduce gradually. The Iraqi government is ready to work with the World Health organization and come up with new ways to spread awareness on mental health. We would like to address the World Health Organization to come up with different strategies of spreading awareness and ways to improve international responses to mental problems.

Delegation From: Republic of Japan

Represented By: Fuchs Mizrachi School

Position Paper for the World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crisis. Japan is devoted to the challenges of worldwide malnutrition and mental health crisis, and expresses its hope for further advancement in cooperation between state and non-state actors in the improvement of international solutions.

I. Combating Malnutrition in Middle and Low Income Nations

According to 2017 World Health Organization statistics, there are 151 million children under age 5 whose development has been stunted by malnutrition. The Republic of Japan believes that it is the fundamental responsibility for governments to work together to combat malnutrition. The solution to aid middle and low income countries is to invest in food and nutrition security. Referencing Article 25 of the Universal Declaration of Human Rights, The Republic of Japan maintains that all people have a right to a standard of living adequate for the health and well-being of themselves and their families, including adequate food. Recognizing the importance of nutrition, the Japanese government has long believed in advocacy for middle and low income countries struggling with malnutrition. In fact, Japan offered the highest level of support for the recognition of nutrition security as a human right, and has donated thousands to UN's WFP and FAO. Japan also supports UN resolution A/72/829 and Sustainable Development Goals' Zero Hunger Challenge among other efforts.

The Republic of Japan has consistently supported international organizations and their efforts to eliminate malnutrition across the globe. While it is clear that food and nutrition security are necessary staples for living an adequate life, it is important to acknowledge the economic challenges of providing universal access to nutritious food. Because middle and low income countries lack the financial capacity to provide all of the nutrients needed to combat malnutrition, the responsibility for global implementation of nutrients falls upon the collaboration of numerous international organizations. Additionally, the World Health Organization must contain recognition that it is the right of independent countries to decide the means and methods of providing nutrition for their own citizens. The delegation of Japan calls attention to the United Nations' World Food Programme and the Food and Agriculture Organization. These institutions have been vital in the battle and recognition of the deleterious effects of malnutrition in middle and low income countries. The Republic of Japan has worked side by side with these organizations to combat malnutrition in many countries such as Uganda, South Sudan and Chad.

The Republic of Japan calls upon the international community to consider further investing in these organizations. In so doing, the United Nations will be able to effectively contribute to the advancement of life and support Sustainable Development Goals.

II. Mental Health Awareness and Improving International Responses to Mental Health Crisis

The Republic of Japan believes that good mental and good physical health are essential for sustainable development. Though discussions about mental health have sometimes been frowned upon, the Republic of Japan believes that mental health awareness is extremely important. Countries should be working together to improve responses to the mental health crisis – particularly reducing suicide rates, which the World Health Organization has reported as the cause of death for 800,000 people annually.

The Republic of Japan references Article 25 of the Universal Declaration of Human Rights and the right to a standard of living adequate for health and well-being, including medical care and necessary social services. We further recognize the importance of mental health awareness. In 1997, the Japanese government founded International Mental Health Professionals in Japan (IMHPJ). This organization has a goal of improving the quality, quantity and accessibility of mental health services. Specific efforts target suicide prevention and making mental health service more accessible for all people.

The Republic of Japan urges United Nations member countries to find a more effective way to respond to mental health crises such as the current state of affairs caused by Covid - 19. The Republic of Japan calls upon the international community to collaborate and help create a mentally healthier world. Together we in the the United Nations will be able to support the advancement of the Sustainable Development Goals by ensuring healthy lives and promoting the well-being of all people.

Delegation from: Kazakhstan

Represented by: Avon High School

Position Paper for United Nations World Health Organization

The issues presented before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations, as well as Mental Health Awareness and Improving Responses to Mental Health Crises. The Delegation of Kazakhstan is willing to cooperate with all other nations to provide and create long-lasting solutions to the issues presented before the World Health Organization.

1. Combating Malnutrition in Middle and Low Income Nations

The Government of Kazakhstan has been working closely with the World Health Organization (WHO) in order to combat the effect of Malnutrition in the country. The Kazakh Government has been looking to abide by the nutritional goals set by the World Health Organization in order to create safe and stable environments for nutritional growth. These goals, set by Assembly Resolution 65.6 set nutritional marks for nations to achieve to combat malnutrition. Kazakhstan will be supportive of most decisions of combating malnutrition as long as the ideas do not hurt the economy.

Kazakhstan is one of the world's leaders in wheat production. Over one-third of the population is heavily dependent on the wheat production in the country. Kazakhstan is in an active recovery process of the mismanagement of agricultural lands from the Soviet Union, and since 1994, wheat production in Kazakhstan has started to increase again at a steady rate. The increasing production of wheat in Kazakhstan has allowed for the rate of underweight children to decrease from 5% (1994) to almost 2% (2015). The growth-stunting rate in Kazakhstan has fallen dramatically from nearly 25% (1994) to under 10% (2015). Government programs like KazAID work around the country to ensure food security for all citizens.

Kazakhstan, although faring better than other developing nations, still does not meet goals for adult nutrition. Kazakhstan shows no progress in bettering adult obesity or diabetes. Kazakhstan also faces issues with increasing obesity in the nation. The obesity rate for both children and adults has increased dramatically since 2000, and rates of anemia in women have worsened since 2010. Kazakh people also report the highest salt intake of any nation. Nearly 100% of the population consumes more than the target salt intake goal set by the WHO.

Kazakhstan believes that the WHO needs to take further action in reducing malnutrition in middle and low income nations. Kazakhstan also worries that the current goals set by the WHO don't include pivotal health concerns including child obesity rates. All governments in the WHO have seen and felt the socioeconomic effects of malnutrition, and Kazakhstan is fully in support for implementing new changes when possible.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The Kazakh Government is working with the World Health Organization (WHO) in order to raise mental health awareness in the country, as well as working with other nations to combat mental health crises prevalent across the world. Kazakhstan is currently facing a mental health crisis, and is lacking governmental approved plans to treat and combat mental health problems. Kazakhstan is willing to cooperate in order to develop and implement a plan to spread mental health awareness, and to handle the mental health crises crippling the nation.

The Kazakh government lacks an official mental health policy, and most mental health problems in the country are treated within a general health policy. Mental Health is an increasing problem in Kazakhstan as the government does not have a plan to handle this crisis. The suicide rate in Kazakhstan is the seventh highest in the world, and according to WHO, over 12% of diseases are either caused, or worsened by mental health conditions.

Kazakh regulations do not allow for primary doctors to prescribe medication to treat mental health disorders. Only certified doctors that work in government-funded mental health clinics can prescribe medication to treat mental health disorders. These government-funded clinics are rare in the nation. There are 30 mental hospitals in Kazakhstan, and less than 10,000 beds for patients needing treatment in mental hospitals. Treatment is even rarer for patients not needing full care. There are 32 outpatient clinics for patients in the country and 274 beds for patients needing mental health treatment in general hospitals. There is also a lack of psychiatrists and psychologists in the nation. Kazakhstan has yet to release information on long-term care for mental health treatment. Kazakhstan has also not released information regarding the usage of medicine to treat mental health, as there is no official plan or organization to treat mental health issues.

The mental health crisis has not avoided youth in Kazakhstan. One-fifth of the patients treated in mental health facilities are under the age of 18 years. A disproportionate amount of suicides are also committed by Kazakh youth. Common stressors for mental health problems in Kazakhstan include a lack of mental health treatment and awareness, and anxiety from school and family issues.

Kazakhstan, like other nations, is dealing with a mental health crisis. Kazakhstan is willing to cooperate with other nations to find a suitable plan to spread awareness, and to stop the mental health crisis affecting other countries.

Delegation from: the Republic of Kenya

Represented by: Avon Lake High School

Position Paper for the World Health Organization

The issues brought to the World Health Organization include combating malnutrition and raising mental health awareness. Both of these issues are seen as incredibly important to the Republic of Kenya. In Kenya there are currently over 70,000 children whose lives are at risk due to rising malnutrition rates; Additionally, there are over 11 million citizens of Kenya in need of mental health services, though only 500 qualified professionals. The Republic of Kenya is hopeful that a solution will be reached and is looking forward to other nations' input.

I. Combating Malnutrition in Middle and Low Income Nations

Despite the many resolutions that have been passed, the issue of malnutrition remains. Nearly every resolution passed relies on NGOs to solve this issue. Maybe the UN should reconsider their involvement, if they were effective wouldn't this issue be solved by now? According to the WHO website, 45% of children's deaths under five are a result of malnourishment. The term "malnutrition" is broken into three groups: undernutrition, nutrient deficiencies, and being overweight. Undernutrition refers to being under-weight, either stunting (low height for weight) or wasting (low weight for height). Then nutrient deficiencies is when one lacks or has an excess of minerals and vitamins. Lastly being overweight, this can result in obesity and can cause heart disease, strokes, diabetes, and some cancers. All three of these types of malnourishment are found around the world, including Kenya. All three of these types of malnutrition can be deadly if not treated properly, the Republic of Kenya hopes a solution will come about this meeting.

In hope of solving this problem, many NGOs have taken a special interest in Kenya and other African nations. Many have saved thousands of lives, though there are still 73,000 people in Kenya whose lives are still at risk. In the grand scheme of things, organizations such as Action Against Hunger are proven ineffective. "Investing in nutrition improvement is a driver for successful economic and social development of any nation" says Dr. Mercy Mwangangi, Chief Administrative Secretary (CAS) Ministry of Health. It is within every nation's best interest to solve the issue of malnutrition. The delegation of Kenya proposes to let each nation individually solve this issue. This way we can avoid "meddling foreigners", says Kenyan President Uhuru Kenyatta, and solve this issue once and for all.

In order to limit involvement of NGOs, Kenya hopes to increase accessibility of vitamins and supplements. Malnutrition often begins before a child is even born, when a mother is deficient in vital nutrients, her child is as well. This can be detrimental to their well-being later in life. Making vitamins such as Iron Folic Acid and B-12 more accessible to the public would hopefully help this problem significantly. Another way malnutrition occurs is lack of a healthy diet. Typically unhealthy food is cheaper, while fresh fruits and vegetables are a luxury. Kenya proposes the creation of educational classes to teach families about maintaining a healthy diet. Additionally, communities could create initiatives to have a garden to grow fresh fruits and

vegetables. The Republic of Kenya is very excited to meet with the rest of the committee to find a solution to malnutrition.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

In the last decade in some parts of the world, mental health awareness has increased significantly. Though in some nations nothing has changed. According to the Kenyan government, 1 in 4 citizens has suffered from mental illness in their lives. There are only “88 psychiatrists, 427 psychiatrist nurses who are trained to handle mental illness, about 10 medical social workers and a few mental psychologists and counselors who are competent to handle mental issues” says Dr. Kamau Kanyoro of the University of Nairobi. It’s obvious that more medical professionals are needed in Kenya. Especially because of the violence and harassment women endure, in addition to the high percentages of depression, epilepsy, and alcohol abuse.

Mental health awareness is minimal to none in Kenya, with the help of this body that will change. Kenya is dedicated to increasing awareness for mental health and improving international responses to this crisis. All that we ask is if NGOs could not be involved. NGOs have a history of corruption. Yes, many of them provide critical aid and do good work, we just feel like it is not worth the stress corruption causes. Especially considering the issue we're solving is mental health.

Instead of relying on NGOs, the Republic of Kenya believes it would be more effective to let each nation create their own solution based on their unique situation. For example, in Kenya the most common mental health disorders are substance abuse and depression, so we could focus on those conditions rather than ones that are not common within that demographic. Countries could also incentivize mental health professionals to come to their country, to make mental health services more accessible. If counseling services were more available, more people would be taking advantage of them, the more people who use these services the better people will understand the importance of getting help to treat mental disorders. The Republic of Kenya strongly believes this is the best way to increase awareness within a nation. But in a larger sense: to improve international response to mental health we need to continue dialogues like these. Open conversations with representatives from other nations is what we need, Kenya proposes that we create regular forums to discuss mental health in our countries. Kenya is looking forward to meeting with the other nations in WHO to increase awareness of mental health and improving international responses to this crisis.

Delegation from: The Kingdom of Thailand

Represented by: Saint Joseph Academy

Position Paper For the World Health Organization

The issues before the World Health Organization: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The Kingdom of Thailand is committed to addressing these issues and creating solutions to lower malnutrition rates in middle and low income nations and to establish broader access to mental health resources internationally.

I. Combating Malnutrition in Middle and Low Income Nations

After successfully addressing malnutrition that plagued the Kingdom of Thailand for many years, the Kingdom of Thailand has devoted its attention to helping other countries do the same. Within the Kingdom of Thailand, malnutrition was addressed through investments in human capital development and health care initiatives. Some of these include the Life Cycle Development strategy and Universal Health Coverage. The Universal Health Coverage was especially successful, ensuring equal rights to health care starting in 2002. This achievement gave the Kingdom of Thailand the ability to pursue Millennium Development Goals Plus. Since then, it has been an active participant in helping neighboring nations in attaining Millennium Development Goals Pluses.

The Kingdom of Thailand takes great concern in the effort to combat malnutrition in middle and low income nations. We have implemented poverty-reduction programs within the Kingdom of Thailand to ensure our citizens have the tools and resources to overcome poverty. Thailand supports the 1989 Convention on the Rights of the Child which outlines the civil, political, economic, social, and health and cultural rights of children throughout the world. Malnutrition is specifically mentioned in Article 24 (1c) of the Convention. Through our involvement in the Association of Southeast Asian Nations, Thailand directly collaborated with neighboring nations on how to thoroughly address malnutrition. Causes and solutions to malnutrition have been discussed at these workshops and meetings attended by Thailand.

The Kingdom of Thailand acknowledges the importance of existing plans and conventions to expand access and supports their further development. Through established systems, the Kingdom of Thailand seeks to bolster efforts to allocate aid to middle and low income nations struggling with malnutrition through monetary assistance, aiding in human capital development and health care initiatives, and research into the structural issues that contribute to malnutrition. The Kingdom of Thailand firmly believes in this three pronged approach to strengthen provisions put in place by the Universal Declaration on the Eradication of Hunger and Malnutrition of 1974, in conjunction with adequate funds, and is determined to eliminate malnutrition worldwide.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The Kingdom of Thailand has dedicated itself towards expanding access to mental health resources in Thailand. The creation of the Mental Health Department, the national mental health authority, had led to the development of many outpatient facilities throughout the nation. Residential facilities are available for those with mental disabilities and substance abuse issues. Mental health plans were last revised in 2005, which involved components relating to human resources, involvement of users and families, advocacy and promotion, equity of access to mental health services across different groups, financing and monitoring system.

The Kingdom of Thailand takes improving mental health awareness and responses to mental health crises incredibly seriously. However, a stigma surrounding mental health is prevalent throughout Thailand and We ask for resources from other nations who have dealt with similar issues. The Kingdom of Thailand supports the 2006 Convention on Rights of Persons with Disabilities, which include those with mental disabilities.

The Kingdom of Thailand acknowledges the importance of existing plans and conventions to expand access and supports their further development. The Kingdom of Thailand supports monetary aid and resources to address structural causes of mental health issues, such as poverty. The Kingdom of Thailand supports a multi-pronged approach to create a universal plan for mental health crises.

Delegation from: Libya

Represented by: Beaumont School

Position Paper for the World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in Middle- and Low-Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crisis. The delegation of Libya is committed to solving the issues causing malnutrition and improving the awareness and response to mental health crises.

I. Combating Malnutrition in Middle- and Low-Income Nations

Malnutrition is the deficiency or imbalance one takes in of energy/nutrition. The term malnutrition addresses 3 groups: those who are undernutrition, micronutrient-related, and overweight. According to the World Health Organization, approximately 462 million adults worldwide were underweight, while 1.9 billion were either overweight or obese. In 2016 an estimated 155 million children under 5 years of age were suffering from stunting, which is the impaired growth and development from poor nutrition. Around 45% of deaths among children under 5 years of age are linked to undernutrition, this is mostly seen in low and middle-income countries. The delegation of Libya is aware that they have a triple burden, which means they have at least two or three forms of malnutrition. As a country, Libya wants to try and combat the challenge of malnutrition, to bring the numbers down.

Every country in the world is affected by one or more forms of malnutrition. Libya itself is suffering from alarming rates of malnutrition among many detained migrants and refugees. As of March 2019, a quarter of the more than 300 migrants and refugees held at Sabaa Detention Center in Tripoli, Libya, are either malnourished or underweight. More than 100 of the migrants/refugees are under the age of 18 and are more likely to suffer moderate or severe malnutrition. MSF (Medecins Sans Frontieres), which is an international independent, medical humanitarian organization, found that many individuals in the Libya detention centers are only receiving one meal every two to three days. As an organization, they have been trying to give enough food for the migrants and refugees and are also trying to create an end to the detention of children. For more than two years, MSF has provided medical care to the refugees, migrants, and asylum seekers in detention centers in areas such as: Tripoli, Khoms, Zliten, and Misrata. In November of 2018, MSF had to step in and provide a two-week supply of food to those in Sabaa. On February 21, MSF again supplied an emergency food ration in Sabaa to improve the health of the ir population. As a delegation, Libya's authorities and international community must respond to this situation by ensuring that the health and needs of these children and adults in Libya are met.

Despite all the excessive evidence of human rights being violated in Libya, Libyan authorities have not been able to put an end to these violations and abuse. As a delegation, Libya must create a plan that ensures that all people, even those not in detention centers are constantly given enough food, enough that meets their dietary requirements. They must also ensure that any child under the age of 18 is released from any detention center and are provided with any form of support needed for them, along with that any detention center in this country must meet the conditions upheld by the national, regional, and internationally agreed standards. The World Health Organization, as of 2011 are recommending new actions and revising global guidance on undernutrition, obesity, and overweight. WHO is aiming for a world free of all forms of malnutrition, where all people are achieving health and well-being. They are working with Member States and partners towards universal access to effective nutrition interventions and to healthy diets from sustainable and resilient food systems.

II. Mental Health Awareness and Improving International Responses to Mental Health Crisis

According to the World Health Organization "mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community" (Defining Mental Health in Rural Areas – RHHub Toolkit). As of 2001, twenty five percent of people in the world will be affected by mental disorders at some point in their lives, and around 450 million people currently suffer from such conditions. This places mental disorders as a leading cause of ill-health and disability worldwide. With an ongoing evolution of mental health, countries like

Libya need to bring awareness to mental health and improve their international response to mental health crises. Despite many internal and external judgements of the mental health services in Libya, they as a country continue to stay underdeveloped. The World Health Organization has made countless efforts to improve the country's mental health services, but until Libya forms a stable government, patients with mental health illnesses will continue to be at a disadvantage. As a country, Libya needs to do a better job of showing awareness and having an improved response team to mental health crises.

Decades of neglect have left Libya's mental health system in shreds. As of 2013 Libya has only 12 psychiatrists, and services highly centralized at the two hospitals in the country's two largest cities; Tripoli and Benghazi. In Libya, there is no clear support for medical or mental health care, which makes this country a great fit for improving the medical and mental health services. In 2011, about a hundred Libyans with either war-related symptoms, or pre-existing mental disorders, found themselves traveling to the few existing mental health facilities, trying to seek treatment. Even then, the system was unable to handle their urgent needs. (Add more info on the lack of mental health awareness/responses). The delegation of Libya formed a mental health act in 1975, but never got it reviewed. In 1988, a national mental health program was set up and according to the World Health Organization, Libya's National Centre for Disease Control, with the Ministry of Health, with aims to launch a 4-year mental health strategy (2015-2019). There was also an idea of creating a Mental Health Commission (MHC) that would prepare a strategic plan for the mental health system in consultation with providers of mental health. The committee would give awareness by reviewing the different perspectives of service delivery and resources including inpatient and community care, they would review models of the best practices in the current environment, they would consider how mental health services specifically in Libya could include the recovery model, and finally they would consult with and seek input from those with mental illness as well as their families and those skilled in the mental health services in Libya but also worldwide. The country of Libya can bring awareness to this topic and improve their response to mental health crises, but by doing this those in Libya must gain a better understanding on what mental health is, and the effect it has on one's self and their community.

As a country, Libya has taken many positive steps with a 4-year mental health strategy for the 2015-2019 years. The strategy is set to transform Libya's institution-based approach to a community-based approach, which will then make mental health services available to the most remote and underserved areas of the country. The Ministry of Health must form services to evaluation groups, in dialogue with mental health providers. This group should then try and evaluate the quality of the care provided and implement the changes that are necessary. The services created should be patient-centered and the staff should be qualified as health professionals. In conclusion, the people of Libya need a great amount of research on the mental health system. By doing this they will develop awareness on this important topic, and there will be a major improvement on the response to mental health crises.

Delegation from: The Kingdom of the Netherlands

Represented by: Archbishop Hoban High School

Position Paper for the United Nations World Health Organization

The issues presented to the World Health Organization include Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The Netherlands is readily prepared to address these fundamental issues that currently plague society and develop comprehensive working papers with fellow United Nations member states.

I. Combating Malnutrition in Middle and Low Income Nations

Over the last century, the global health community has grown increasingly aware of the effects of malnutrition. While prevalent mainly in underdeveloped regions, developed nations have seen an increase in the rates of malnutrition and resulting immunal deficiencies recently, especially considering that both undernourishment and obesity are categorized under the term malnutrition. The Netherlands has noted eliminating malnutrition as one of the nation's goals in holistically fighting food security, pledging hundreds of million dollars to create the most resilient food industry possible. In fact, the Netherlands is accredited with not only the most sustainable food systems globally, but the healthiest and cheapest as well, according to a recent study by OXFAM.

The Dutch have implemented a plan within the Netherlands to combat malnutrition before it exacerbates into a larger problem, most particularly focusing on screening techniques, which can only be provided with an already well-established, ubiquitous health care system, such as the universal health care system that the Netherlands employs. Currently, the Dutch Malnutrition Steering Group (DMSG) focuses on regional level health care awareness, as well as nationwide screening techniques to collect data on malnutrition. Internationally, the Netherlands has adopted the Universal Declaration on the Eradication of Hunger and Malnutrition, as well as working with the United Nations Children's Fund, contributing 56 million dollars to meet the Sustainable Development Goals through 2021 which will invest in over 250 million vulnerable children.

As malnutrition manifests itself in multiple ways, the United Nations should consider a global action plan that takes into account the differences in wealth, health infrastructure, rates of malnutrition, population density, etc. of each sovereign country. The Netherlands has received international acclaim for its regional and global contributions, which can certainly be extended into a plan that each country can adopt at its own will. The Netherlands wishes to address issues of current malnutrition, preventing future malnutrition rates, and creating a comprehensive, worldwide action plan with other member states during debate.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

As a relatively new issue in the scope of the World Health Organization, mental health has been indicated as one of the most important public health issues of the decade. The World Health Organization even indicated in 2008 that problems relating to mental health make up 30.8 percent of the world's global disease prevalence. This crisis has been exacerbated in part due to the COVID-19 pandemic, where social distancing and loneliness has shaped mental health significantly. In fact, in a study of Dutch citizens during the COVID-19 pandemic, the authors indicated that mental health should be stringently monitored as a

result of long-term social isolation. Further, 14.9 percent of the Dutch population struggle with mental health issues, which happens to be a relatively stable number in the rest of the world.

The Netherlands has developed a mental health policy throughout the years, focusing on community health care systems, as well as in intertwining mental health services with the already existing primary health system. The Dutch are currently focused on researching the effects mental health creates, especially in the realm of social media and the COVID-19 pandemic. At large, the Netherlands has worked with the World Health Organization and many other countries to collect international data relating to mental health, as well as on a regional level. A large collection of data and research will provide the United Nations with the right tools to address this problem head on, and unique situations that mental health can manifest itself in.

During debate, the Netherlands wishes to foster an environment where each country can contribute to a comprehensive working paper that addresses the ubiquitous problem that mental health issues provide. The Netherlands supports screening methods primarily to collect more data and study the fundamentals of mental health, which then can lead to worldwide actions and research leading to a better understanding of mental health as a whole. In the Netherlands' view, educational opportunities and research should be the top priority of this committee to address this issue, as combating the stigma of mental health plays a key role in ultimately defeating the problems associated with it. Overall, the Netherlands wishes to work with other United Nations member states to create a global action plan to sufficiently address the indiscriminate issue mental health problems create.

New Zealand

Position Paper for World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in the Middle and Low Income Nations; and Mental Health Awareness and Improving International Responses to Mental Health Crises. While not necessarily impacting the daily lives of those living in the represented nation of New Zealand, the delegation is both conscious of and eager to solve the issues at hand, willing to do so at any and all costs.

I. Combating Malnutrition in Middle and Low Income Nations

New Zealand has a very focused stance on the issue at hand. Our delegation sees this issue as one that is both ravaging and dangerous, as malnutrition is one of the most prevalent issues in the world today. New Zealand sees this as an important topic, for the solution of such a topic would go a long way in strengthening the region with which our nation associates. The complications brought about by the general definition of malnutrition include undernutrition, the lack of sufficient vitamins or minerals, issues dealing with being overweight, and potential diseases being afflicted upon the malnourished. This is no small issue, as the aforementioned issues that can be brought about by this dangerous condition have, according to the World Health Organization, affected more than 2.3 billion people across the world. These numbers are not just for middle and low income nations, but the delegation of New Zealand sees this all-encompassing number as even more dangerous to these nations. Poor conditions and poverty, in most cases, harbor an increased risk of developing or taking on forms of malnutrition. This means that those who are in middle and low income nations likely have higher chances of enduring the effects brought about by this condition. This can hurt the growth of these countries, so it is with this that New Zealand is firmly aligned with the goal to combat malnutrition in middle and low income nations.

New Zealand is strongly connected to the topic at hand, experiencing in one way or another many of the effects of malnutrition. New Zealand is fortunate to have little domestic exposure to such an issue, but is alarmed at the status of the rest of the region in which the nation is located. In the region of Oceania, there are some tragic numbers and details pertaining to malnutrition, with the region seeing many of such numbers be much higher than the global average. On top of this, New Zealand does experience its fair share of malnutrition issues as well, possessing one of the largest rates of obesity in the entire world. While being 22nd in this statistic as of 2016 does not put our nation in immediate and dire need of help, our nation has first hand experience with the issues of malnutrition. Apart from our nation's high rates of obesity, all of our residents have access to clean, drinkable water, showing that New Zealand knows about what it takes to provide nutrition to its people, and is therefore willing to share this experience with any other nations that need such help. Again, New Zealand is immersed in a region that does not have the best statistics in terms of malnutrition, so with our experience with such a topic, we are fully aware of the challenges that it can impose upon both a nation and its people. The country of New Zealand is not only aware of the challenges brought upon a nation by this issue, but is again ready to and experienced with the fight to combat it. The nation has a program whose main goal is to provide aid to developing countries, with the program being called the New Zealand Aid Programme. This program focuses around 60% of its aid towards the development of Pacific nations, nations which often struggle with malnutrition. New Zealand knows not only who to help, but also how, why, and where they should help, and this program exemplifies this knowledge. The nation of New Zealand is open-minded on the issue of combating malnutrition, and has a wealth of care for and knowledge on the issue, putting the nation in a prime position to help find solutions to malnutrition issues in middle and low income nations.

While New Zealand does not consider itself as either a middle or low income nation, the country has faced issues with malnutrition. Therefore, New Zealand wants to take action on combating the malnutrition that nations in this echelon face. New Zealand already takes measures of supporting nations in the Pacific West, a region that sees many issues relating to malnutrition. It is because of this that the experienced nation of New Zealand would like to call upon other well off nations to pitch in on the effort as well. Being closely linked to poverty, malnutrition can be aided through not only action, but also awareness. First world nations need to be willing to provide regions such as the continent of Africa and the Pacific West with the action of providing aid and resources, namely clean water and food, but also with the provision of awareness, so that residents of the problemed countries can know what measures to take in themselves preventing the spread of such an issue. It is urgent for New Zealand, as members of the Pacific West and being present among developing nations that the problems relating to malnutrition are solved. It is paramount for this to happen swiftly and effectively, for much of the world's population suffers through this issue. Middle and low income nations do not have the same chance as the rest of the world in eradicating and preventing this issue, so the delegation of New Zealand both calls upon and urges first world countries to donate their time, resources, and knowledge to developing countries in an effort to fight back and combat malnutrition.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The delegation of New Zealand would like to point out that there is a very large global problem that pertains to the issue of mental health. There are many people worldwide who have been diagnosed with mental illnesses, and with this number being estimated as being around 10% of the global population, this topic raises plenty of concern. Likely connected with the rise in technological advancements, this number has increased by a large percentage over the last 20 years. Since 2001, this number has risen from nearly 450 million people to about 10% of the population, or 780 million people, seeing this number increase by

nearly 75% over less than two decades. Finding ways to better this global situation means a lot to New Zealand, and this country is willing to do whatever it can to help with this specific issue.

New Zealand's delegation believes that the country does have a knowledgeable stance on this issue. However, it should be noted that this nation is listed as one of the happiest countries in the world, a feat that suggests little presence of mental illness in society. However, while there is not much of a societal impact made by mental health illnesses, it is still a present and ever-looming issue. New Zealand has a pretty large number of suicides per 100,000 citizens, with a number that lies between 10-15 suicides for the aforementioned quantity. This issue might not be directly due to the issues of mental health, but it is still an issue that is often caused by it and that is closely linked to it. On top of this, in the mind of the New Zealand delegation, one death from mental illness is too much, so the nation will do anything that they can to make sure that this issue can be reduced to as little of an issue as possible. On top of the issues that New Zealand has with suicide, having numbers that put them as one of the more affected countries in the world, there are other issues that the country has had to deal with in terms of mental health. It is believed that of the nearly 5 million residents of New Zealand, almost one third of the population has endured some sort of problem relating to mental health issues. Whether this information infers that this percentage of the population has lasting effects from or lasting battles with their mental health does not matter much, for nobody should have to suffer with any sort of mental health illnesses. New Zealanders should not have to deal with these issues at all, whether it be a one-off event or a lasting battle with the illnesses, and the nation of New Zealand will consequently do whatever it takes to find an end to and raise awareness for the topic at hand. In addition to all of the problems that the country of New Zealand faces itself, the nation fears for all of its fellow nations that have even larger issues with the battle against mental health. Whether it is due to the lack awareness for or the lackluster response towards mental health issues, the nation fears for and is willing to help out any nation that suffers with these issues. New Zealand finds it troubling that there is still such a prevalent issue with mental health in the world, and finds it even more troubling that there is a lack of awareness for mental health. Therefore, in knowing the aforementioned issues brought about by mental health, New Zealand is committed to increasing and raising awareness for mental health, as well as being steadfast in finding ways to improve the international response to mental health crises.

With the experiences harbored by the nation of New Zealand, the delegation of this country would like to make known the fact that they would be willing to go to any extent possible to help find solutions to and raise awareness for the mental health issues of the world. Knowing that this will not be an easy task, they would like to call attention to the fact that any resolutions or bills would require multiple countries to make any headway on the issue. New Zealand does not have an extensive history in supporting, drafting, or ratifying resolutions or other conventions that deal with the issue, but due to global situations such as the Covid 19 pandemic, the country knows the risks that a lack of awareness for mental health can bring upon a nation and its people. New Zealand has a strong alliance with many of the nations in the Pacific West, and would like to reach out to these nations for help in battling this issue. The country knows that a strong connection is important to having meaningful results, so it is important that New Zealand reaches out first to those that they know can be counted upon. However, in the realization that such an urge is neither practical nor powerful enough to gain any global recognition or change, and seeing that New Zealand desperately needs to see a raise in awareness for this issue, something more needs to be done. In addition to reaching out to all of those who are close to the country, New Zealand and its people know that it is important to reach out to other countries and communities alike to get the best results. Despite this, New Zealand is not and does not want to be reliant on the successes of other countries for change to come about, so there are many ways in which they will go about improving the international situation on mental health awareness. New Zealand will invest heavily in public advertisements that raise awareness to mental health, using this method in an effort to help and protect the people of the nation. Not only will they do this, but they will create new programs and administrations dedicated solely to the task of helping out people that deal with and have dealt with mental illnesses and raising awareness for mental illnesses. As New Zealand does not want to rely on others to get this done, they would like to call upon others to take similar action, for no one country can make a global impact by themselves. However, New Zealand believes that this action will benefit their people by combating the issues that directly affect them. New Zealand would like to serve as a mentor in this process, and will be willing to provide aid to those that need help through this process, but would like to again mention that they do not need any foreign help with this issue.

Delegation from: The Republic of Peru

Represented by: Beaumont School

Position Paper for World Health Organization

The issues being addressed by the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations, and Mental Health Awareness and Improving International Response to Mental Health Crises. These topics represent very pressing issues in the world today, and the Republic of Peru recognizes the need to find viable solutions both internally and as a global community.

I. Combating Malnutrition in Middle and Low Income Nations

Malnutrition is one of the gravest issues that this organization must deal with. Over 7.6 million deaths annually are attributed to hunger-related causes, 3.1 million of those deaths being children under 5. Malnutrition is a complex issue relating to aspects of food insecurity, poverty, inequality, and lack of education. In an effort to combat this, the UN has declared 2016-2025 the Decade of Action on Nutrition. The Republic of Peru believes that with concrete action, this issue will eventually be eradicated.

As a middle-income nation Peru has struggled to decrease high malnutrition rates, especially within rural and indigenous communities that are often isolated and undeveloped. In 2005, Peru had one of the highest rates of childhood malnutrition and stunting in Latin America. However, through the implementation of new programs the rate of childhood stunting had dropped from 28% to 13% in just 8 years. The Peruvian government recognized that poverty was one of the main factors contributing to this issue, so they worked with the World Bank to create the Juntos cash transfer program. This program gave mothers of young children living in poverty \$30 a month to buy groceries for their families. To qualify for this program, the mothers were required to have their children be fully vaccinated, attend regular doctor appointments, and attend school. These measures attempted to aid children in poverty, and give them tools that will help keep them from falling behind. In regions targeted by the Juntos program, rates of chronic childhood malnutrition fell from 47.9% in 2009 to 25.2% in 2015. Similar conditional cash-transfer programs have been implemented in many nations such as Yemen, Mexico, Haiti, and the United States of America, with promising results in helping combat malnutrition.

Another important topic to address when talking about malnutrition is nutrition education. Many people who lack this education may consume more cheap, nutritionally deficient foods, which can lead to higher rates of both malnutrition and obesity. It can also lead to parents being unable to recognize the signs of growth stunting, instead perceiving it as normal and not seeking help. To address this issue, there was a collaborative effort between Peru and the World Food Program to create *Cocina con Causa*, a reality show that set out to spread nutrition education to hard to reach communities. The show recruited young celebrity chefs who, aided by nutrition experts and pediatricians, traveled to different communities in Peru to promote healthy eating practices and share nutritious recipes made with local ingredients. This creative solution set out to bridge the education gap and encourage healthier eating choices.

The Republic of Peru has been successful thus far in decreasing rates of childhood malnutrition but recognizes that there is still a lot of work to be done. It is essential that the representatives of this committee collaborate to create a plan that addresses the many facets of this issue. Peru would like to suggest the

increased use of conditional cash transfer programs, which have shown success in decreasing childhood malnutrition rates and ending cycles of poverty. Education should also be considered an essential part of this plan, as it will allow people to make informed decisions for themselves. Through public health measures such as volunteer educators, increased access to healthcare such as nutrition and dietary counseling, and creative uses of media to disseminate information, a more informed global public that makes smarter eating choices will be created. By being proactive and using a diverse variety of solutions, these issues will be addressed and malnutrition can be eradicated.

II. Mental Health Awareness and Improving International Response to Mental Health Crises

Mental health is an area that is too often ignored by governments, and the issue is only becoming more pressing. Globally, there has been a 13% increase in substance abuse and mental health disorders. Suicide has become the second leading cause of death in people aged 15-29, with mental health issues being more prevalent in adolescents. Despite this, governments still do not prioritize mental health, with the median government health expenditure remaining less than 2%. The World Health Organization launched a special initiative for mental health in 2019, that will set out to ensure access to affordable mental health resources in 12 priority nations. The Republic of Peru wants to join this effort to increase recognition and care for the people suffering from these issues.

The Republic of Peru has struggled in responding to mental health crises, with an estimated 30% of Peruvians with mental health issues lacking access to adequate services and support. To address this, the Peruvian government passed mental health reform legislation in 2012. This involved mandating the regular inspection of existing mental hospitals in the country, which were often operating under poor conditions. By creating annual reports of the operations, these facilities have been held accountable and improved conditions for patients. Peru has also set out to create a more community-based approach to mental health care. There have been 23 community mental health outpatient centers created, and an additional 29 outpatient facilities for the treatment of children and adolescents. The Ministry of Economy and Finance created a budget reallocation exclusively to support these community health centers, to be reassessed in 10 years based on their impact. This legislation also increased mental health coverage under the public Integrated Health Insurance scheme, meaning that a majority of those with major mental disorders will have no out-of-pocket costs for their care.

When discussing how to respond to the mental health crisis, it is important to address it from a socio-economic standpoint. Those living in poverty suffer from mental health disorders at rates 2 to 3 times higher than those of a higher economic status. To combat the rates of mental health disorders there needs to be ways to decrease out-of-pocket costs for care, making it more easily accessible and affordable for those who need it. Another issue to address is the facilities being used. Although there is a place for in-patient mental hospitals, a community-based approach to this issue may make care more accessible and reduce the stigma associated with mental health disorders. Furthermore, the creation of a standardized suicide prevention strategy that can be integrated into governments globally can help address the suicide epidemic occurring in all nations. Through public health measures to increase awareness and strategies to increase access, the Republic of Peru believes that this crisis can be addressed and eventually solved.

Delegation from: The Republic of Chile

Represented by: Beachwood High School

Position Paper for the World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The delegation from the Republic of Chile is not only committed to cooperating with its fellow delegations in committee, but also in developing logical solutions to treat these long-lasting issues.

I. Combating Malnutrition in Middle and Low Income Nations

Currently, the World Health Organization defines the issue of malnutrition as an individual's deficiencies or excesses in nutrient intakes, and the subsequent misutilization of essential nutrients. As of December 2019, more than one in three low-income and middle-income countries are confronting both extremes of malnutrition: undernutrition caused by a lack of resources available to families, or obesity caused by low-quality resources that families are forced to consume due to the cheap price of pursuing such resources. In either case, the cycle of poverty and malnutrition maintains the poor health which is prevalent amongst lower income families, and worsens existing social, economic, and political conditions in these affected nations. If the wellness of these poverty-stricken nations is to be preserved, the World Health Organization must cooperate in finding sustainable solutions to the issue of malnutrition.

The Republic of Chile has primarily experienced issues of malnutrition amongst its younger population, typically the burden of malnutrition is placed on Chile's population of children under the age of five. Chile, like many other nations that share a similar region, has experienced malnutrition in almost all of its age groups, although many political and economic changes in the late 20th century proved useful in combating the issue of malnutrition. As of 2014, the prevalence of obesity of children under the age of five years old in the nation has dropped to 9.3%, and trends indicate that this number will continue to decrease as time progresses. The general nutrition status of Chile, though, indicates a higher consumption of meats and dairy products, while there has been a simultaneous decrease in the consumption of fruits and vegetables. The improvement of lifestyle standards has increased the prevalence of a sedentary population, which has led to an increase in overweight and obesity. The Republic of Chile's experiences with malnutrition has opened the nation up to pursuing solutions which will solve this global crisis.

The basic premise of the issue of malnutrition lies in the persistence of poverty in developing nations. The key in eradicating malnutrition is in eradicating poverty, and fortunately, the key to economic improvement lies in general improvement of nourishment in a country's population. This indicates that aiming prevention in one problem set will begin a positive feedback loop that simultaneously improves living standards and economic development. Possible courses of action include the establishment of government programs that address malnutrition in all its forms. The Republic of Chile has implemented such programs in its community, and experts have confirmed that such programs have been effective. The emphasis of governments on the political ramifications of malnutrition is necessary. It is also necessary to ensure the necessary nourishment of mothers, as children of mothers who are malnourished are more likely to be

malnourished themselves. It is necessary to foster healthy habits for children in the first 1000 days of life, as those habits are likely to continue into adulthood.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

According to the United Nations, about one in four individuals globally will experience some sort of mental health condition in their lifetime. This implies that a large majority of the global population is represented by people with mental health conditions, and this means that improving living conditions for those with negative mental issues is critical to developing a more healthy and accepting society. The most notable of mental health illnesses include anxiety. Consequences of poor mental health also include poverty, inequality, and violence, as those with mental conditions tend to be the victims of harsh treatment and discrimination. Fortunately, it seems as if the global awareness of improvement of mental health is increasing, and means that the World Health Organization must be committed to developing long-lasting resolutions to spreading awareness of mental health and solving the issue of globally increasing mental health conditions.

The Republic of Chile recognizes that many individuals in its nation are afflicted by many mental illnesses and disorders. Reports indicate that about 19.7% of the general Chilean population experience common mental health disorders, and an astounding 22.5% of individuals aged between 4 and 18 years old experience mental disorders. In a report from 2004 by Ministerio de Salud (the Chilean Ministry of Health), depression was cited as the second most prevalent disease in the nation. The nation of Chile has thus been very proactive in its treatment of its population with existing mental conditions. For example, the government has issued numerous decrees in an attempt to raise public awareness of the issues of poor mental health, and has implemented many programs in an attempt to offer support to those who might need aid in combating their mental conditions. Many of these decrees and programs have been successful, yet none have been flawless, as mental conditions continue to be a prevalent issue in Chilean society. Solutions with the objective to solve the issue of mental health in Chile and nations around the globe must ensure the promotion and protection of individuals with mental illnesses and disorders.

In 2001, the government of Chile passed the Presidential Decree for Psychiatric Hospitalization. This decree was successful in bringing about numerous positive outcomes for individuals diagnosed with mental disorders, however, as with almost all other programs addressing the issue of mental health, the decree was flawed. For example, the decree failed to protect the judicial rights of individuals who are involuntarily admitted to psychiatric treatment in psychiatric facilities, so future solutions must ensure consensual treatment in cases in which the individual is capable of making the decision as to whether or not to enter more intensive care. Future laws from nations that aim to solve this global crisis must also increase the development of facilities that are aimed at improving the mental health of victims of mental health disorders. Access to subsidized housing and education must also be increased, so investing in public education and improving housing standards must be ensured. The World Health Organization can also follow the precedent that it set in 2002, when the Chilean government was aided by the United Nations improving Chilean legislation to protect those with mental conditions. National workshops were organized, aimed to lobby for mental health rights and protections. These solutions are necessary to strengthen the provisions for individuals affected by mental health conditions.

Delegation from: South Africa

Represented by: Beachwood High School

Committee: World Health Organization

The issues before the World Health Organization are: Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Responses to Mental Health Crises. South Africa hopes to work with other nations to find an efficient and effective solution within the committee.

I. Combating Malnutrition in Middle and Low Income Nations

South Africa believes that malnutrition should be a problem of the past in middle and low-income nations. In fact, in 2016, over 155 million children under the age of 5 were suffering from malnutrition. Although low-income individuals in relatively wealthier countries still exhibit malnutrition, the problem still strikes the mid-low income nations harder. Furthermore, the UN had created a plan in 2012 that had 6 core objectives to try and reach by 2025. Unfortunately, in 2018, experts predicted that the world was off track to meet these goals by 2025, although they also discovered that there had been a dramatic decrease in the number of children battling stunting since 2000.

South Africa's history has been scarred with astronomically low numbers of malnourished individuals, specifically young children. According to a data report for stunting children under the age of 5, South Africa ranks 51st out of 146 nations worldwide with a prevalence of 27.4% of stunting kids under 5, higher than the average developing country score of 25%. Additionally, 14.2% of infants are born underweight and experts predict that both of these numbers will continue to rise unless drastic action is taken. Switching gears to the adult population, 39.6% of women and 15.4% of men suffer from obesity. Many of the poorer families in South Africa have to resort to unhealthy food that isn't packed with nutrients because it's all they can afford. South Africa's Department of Health established special programs and interventions across the country like the Integrated Nutrition Program to combat the detrimental effects of malnutrition. Despite these programs facing many challenges and barriers, they reported strong numbers and varying rates of individual success. The government has also made another plan that runs from 2017-2022 that address malnutrition and create school nutrition initiatives to educate kids about the devastating effects of malnutrition. The program has reported positive results so far. They're now working on a new program called that's an all-inclusive National plan for food nutrition and security.

Over 50% of child deaths in South Africa are directly caused by malnutrition. Experts have estimated that South Africa is losing about 1.1 billion dollars every year due to vitamin and mineral deficiencies, although they also believe that it would only cost about 55 million dollars to alleviate this issue through nutrition interventions. We want to face malnutrition once and for all and make sure everyone around the world receives the help they need to get the proper nutrients and vitamins in their systems. South Africa believes that this issue can be addressed if we work together to help combat malnutrition in the middle and low-income nations.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

South Africa believes that mental health awareness is a very important issue facing the WHO. Approximately ¼ of the world's population has experienced some form of mental health crises including depression, anxiety, bipolar disorder, and countless others. Suicide is the third most common death in terms of young people, while depression is the number one way that people continue to lose years of their lives. On the positive side of things, researchers have reported that there is a growing recognition in the UN for mental health disorders. For example, in 2015, the General Assembly included mental health and substance abuse in the Sustainable Development Agenda for the first time. As a result, it had a positive impact on communities where people desperately need help.

In South Africa, less than 1 out of 10 people with a mental health crisis are receiving the proper care that they need. In 2017, South Africa spent 5% of their annual budget on mental health, which was about 615.3 million dollars. Additionally, factors such as violence, disease, and urbanization have proved to contribute to raising mental health disorder rates. After the 1997 White Paper Act and the National Health Act 61 of 2003, the South African government tried to deinstitutionalize mental health care facilities and move them into “essential health care” facilities. But, despite that attempt, recent studies have shown that 56% of mental health care treatments still take place in institutionalized health care settings. Currently, South Africa houses 3,460 mental health facilities, 80 different day-care treatment facilities, 41 psychiatric units in general hospitals with a total of 2.8 beds for every 100,000 people. There are also 63 community residential facilities with 3.6 beds for every 100,000 people and 23 mental hospitals with 18 beds for 100,000 people. According to this information, it is obvious that South Africa needs more funding to get more beds and facilities if 1 out of every 4 people suffers from a mental health illness.

South Africa recognizes that hundreds of millions of people around the world suffer from mental health illnesses and many of them aren't able to receive the help they need to get better. We believe that the WHO has made a virtuous approach and has come up with many amazing plans, but we want to take this to the next level. South Africa wants everyone suffering from mental health disorders to be able to obtain the help they need in an approachable manner and get better as efficiently and effectively as possible. In conclusion, South Africa is excited to come forward, collaborate with other countries, and find a viable solution to improving mental health crises responses once and for all.

Delegation from: the Republic of Korea

Represented by: Mayfield High School

Position Paper for the World Health Organization

The issues before the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The Republic of Korea is dedicated to addressing these issues and is willing to collaborate with other nations to create a

I. Combating Malnutrition in Middle and Low Income Nations

Much of the issue of malnutrition rises from the fact that many families in middle and low income nations are unable to purchase sufficient amounts of food to sustain themselves. The delegation of Korea acknowledges that this is a very serious matter as all individuals should have food on their plates and be able to feed their families, and is willing to cooperate with the international community to develop a cohesive resolution that can properly combat the malnutrition that is affecting so many nations.

The Republic of South Korea would be able to provide funds for creating agricultural fields that the nation would be able to mass produce which would in turn help create a surplus in case of a possible drought. South Korea would also be able to provide food supplies for a certain time period which would help slow down the effects of malnutrition. The delegation would also like to emphasize the importance of providing education on how to conserve meals to help to combat the malnutrition crisis. Furthermore, more effort must be made into helping with the economy by providing loans to those who are trying to start up businesses which would help the e-commerce industry, which in turn are able to get goods and resources from them and them as well.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The Republic of Korea recognizes that mental health is a largely ignored issue that many nations choose not to bring awareness too, which is detrimental to those who are affected by mental disorders. However, the delegation of North Korea strives to increase the awareness of mental health and highly hopes to cooperate with other nations in reaching a resolution with member states to address this issue.

Delegation from: The Republic of Spain

Represented by: Mayfield High School

Position Paper for the World Health Organization

Issues related to the World Health Organization are: Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. Spain is adherent to ending the war on malnutrition and raising awareness and international responses to mental health and intends to work towards further advancements in these issues.

I. Combating Malnutrition in Middle and Low Income Nations

The Republic of Spain is determined to make great strides in combating the malnutrition epidemic threatening low income and poor communities. Spain fully intends to work with WHO to further devise more solutions with which to tackle this epidemic, as this Republic has done in the past. This is an ongoing problem throughout Spain, as well as many other nations worldwide, that is being better monitored through the Republic of Spain via new studies and programs such as the PREDyCES (Prevalence of hospital malnutrition and associated costs in Spain), a study designed to “assess the prevalence of hospital malnutrition in Spain and to estimate related costs”. The study data gathered was utilized by the Spanish National Health System in order to estimate that at least €1.143 billion per year had the potential to be spent on cases of hospitalized malnutrition alone. From this, Spain is now working to adopt new strategies to combat malnutrition involving additional screening, diagnostic, and treatment.

The Republic of Spain has supported resolutions in the past promoting the health of individuals suffering from malnutrition related-issues and devoted extensive funds to reducing poverty in low income nations. Spain has contributed upwards of €25 billion on global development, with approximately €850 million earmarked for “attainment of the Millennium Development Goals” via a fund which was created by Spain and co-led by the UNDP (United Nations Development Programme). The Millennium Development Goals aim to meet the needs of the poorest groups and nations, and with poverty being one of the primary causes of malnutrition, the Republic of Spain hopes to reduce and alleviate poverty and malnutrition with the allocated funds. Reducing poverty is a major goal of the Republic of Spain amongst all nations.

Spain has demonstrated support of resolutions such as the “Implementation of the United Nations Decade of Action on Nutrition (2016-2025),” and document A/72/L.63, which was created under the projected outcome in which the world does not reach the goal to eradicate hunger and malnutrition by 2030. It was intended to encourage governments, the private sector, organizations, etc. to help advance the implementation of a work plan devised by the UN Decade of Action to build and connect initiatives to eliminate poverty, malnutrition, and hunger. It was mandated that FAO (Food and Agriculture Organization of the United Nations) and WHO (World Health Organization) lead the implementation of the Decade of Action. The Republic of Spain would like to see even more resolutions addressing the issue and concerns of poverty in outside nations, as the delegation of the Republic of Spain believes that peace in regions such as the Middle East and the Arab world are essential to achieving peace in the world - and due to the fighting and war occurring, many are left impoverished. Spain has supported resolutions in favour of aiding and bridging gaps in the Middle East in the terms of poverty and health, in addition to implementing programmes focused inwards on improving nutritional health, such as NAOS (Nutrition, Physical Activity and prevention of Obesity). As such, the Republic of Spain calls for improved rates of

impoverishment, especially in impoverished areas in order to prevent and remove malnutrition, and will continue to support resolutions doing such in addition to working to develop new programs and funding to eliminate poverty and combat malnutrition within middle and low income nations.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

The Republic of Spain has previously dealt with citizens' healthcare with the utmost pride and has been focused on improving the overall health of citizens. Hospitals open to the public provide free healthcare and as such only those with full medical qualifications can practice. Pharmacy prescriptions are paid for based on the specific situations of Spanish residents, and pharmacists can also provide consultations and health guidance. Spain's historical approach towards mental health awareness is improving with each passing day, having resolved to a Mental Health Strategy. The Confederation of Mental Health in Spain has been working with the Ministry of health to implement improved service quality, Autonomous Communities, as well as service delivery and coordination. These Autonomous communities are the primary administrative and political group to guarantee limited autonomy to the regions in Spain to provide more tight-knit and reliable access to healthcare facilities.

Mental health has been a growing problem in recent years and the Spanish Republic is no exclusion. Identifying the stages of mental health where citizens receive immediate care at a health institution or private access to psychotherapy and other treatments impacts many lives. The Republic of Spain has noticed significantly higher levels of stress and depression in DASS-21 subscale scores of 14.22 and 8.65 from surveying citizens as per their response to the pandemic. The awareness of these stressful factors could reduce the initial numbers as well as improving primary actions.

For the future of raising mental health awareness and improving international responses to mental health crises, The Spanish Republic supports the collective strategic action of advancing mental health policies, advocacy, and human rights. The healthcare system should provide a common structure for developmental services through highlighting and monitoring care maps for improved management of public facilities. Providing affordable universal health coverage under tax-based financial systems would make pharmacy prescriptions (if needed for a mental illness) affordable to those that wouldn't be able to buy it otherwise, with the variables of these being: the weighted population in seven age groups, proportion to the number of municipalities, the number of villages and islands, etc. By modifying the costs of specific services, and by extension the level of how the mental disability affects day-to-day life, there can then be benefits created internationally for years to come. Lowering mental health costs would show an overall improvement with the availability of treatments since more citizens will have access to care or have the opportunity to discuss these topics with licensed practitioners. The Spanish Republic stands with social cohesion, transferring the responsibility of mental healthcare and healthcare in general to central and municipal governments. Furthermore, The Spanish Republic projects that the implementation of health technology tools will aid in further research and a greater 'balance of care'. Spain firmly believes that healthcare should be public and provided for all, including immigrants, and the Republic is opening facilities such as these in large regions to promote accessibility.

Sweden

Position Paper for the World Health Organization

The issues before the World Health Organization are Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises.

I. Combating Malnutrition in Middle and Low Income Nations

Malnutrition has been an issue that has plagued the nations of the world for ages. As defined by the WHO, malnutrition is deficiencies or excesses in nutrient intake, imbalance of essential nutrients or impaired nutrient utilization. Malnutrition is still a scourge on our world affairs, whether they be economic matters, humanitarian needs, or other world issues. According to a WHO study, around 45% of deaths among children under the age of 5 are linked to malnutrition. The delegation of Sweden wishes to work with the other nations of the UN to remedy this issue through fundamental change and policy.

Sweden is a country that is still combating malnutrition, even if it is a higher income country. In Sweden, 23.1% of men and 18.1% of women have obesity. 5.8% of adult men have diabetes, compared to 4% of women. However, Sweden has been trying to combat malnutrition in a variety of ways. Sweden has committed a record \$370 million to the World Food Programme Strategic Partnership Agreement in accordance with the UN and its wishes. Sweden is trying to remedy the world food crisis by committing funds to this cause for the purpose of helping those worldwide to obtain the nutritional resources they need.

In the course of this conference, Sweden would like to see guided resolutions that outline specific plans for countries worldwide to combat the public health crisis that is malnutrition. Sweden recommends a global system of healthier food options. Sweden would recommend a system of community gardens, so that vegetables, fruits, and other healthy foods may be grown and sustained by community members. This ensures sustainability, and growing healthy foods promises easy access to food for undernourished communities and healthy alternatives for those in overweight communities. Sweden looks forward to working with other nations to remedy this public health issue.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health is a worldwide, multi-faceted issue that affects many areas of public life, from its effects on physical health, workplace performance, and other effects it has on human existence. Suicide, as reported by WHO resources, is the second leading cause of death in 15-29 year olds worldwide. Mental health coverage, just like regular health service, is a fundamental human right, and

should be framed as both a human rights issue and a public health crisis. Sweden looks forward to remedying the outstanding lack of coverage for mental health issues with other WHO delegations.

In 2019, the WHO launched a program to target this issue. Named The WHO special initiative for mental health (2019-2023): universal health coverage for mental health, it focused on 12 separate countries and provided mental health services to 100 million people. However the limited scope of this plan, with its focus on only 12 countries worldwide, is only the beginning of work that needs to be done. Sweden on its own has had a rather lackluster record. Its public health system is quite comprehensive when it comes to covering physical medical issues, but when mental health is concerned, public health care often doesn't cover the costs of the services. The delegation of Sweden wishes to take this matter seriously, but also respect its current laws and coverage according to its healthcare system.

Sweden wishes to push the WHO conference to include resolutions on education about the root causes of mental health issues and what can be done to remedy them. These educational services, both in the form of local centers for education and online resources, would help to reach both high income countries with a large online presence and communities that lack access to such online resources. Large social media Public Service Announcements (PSAs) could be taken out in efforts to educate the public on matters of mental health and to reduce the stigma about receiving mental health aid. An organization could be founded out of a WHO subsection to study mental health and produce resources for the education of people worldwide. Sweden believes education to be fundamental to aiding countries in reducing the stigma around mental health care and the meanings of certain conditions, not just what the internet uses as slang.

In the wake of COVID-19, Sweden believes that mental health care is more essential than ever. Isolation has often had adverse effects on mental health, and quarantine procedures have heightened feelings of loneliness among world citizens especially those on the front lines like health care workers. Since stay-at-home orders have meant the transition of many programs to an online capacity, the PSAs, as aforementioned in the last paragraph, will potentially reach more.

*Delegation From: The Republic of Uganda
Represented by: Western Reserve Academy*

Position Paper for the World Health Organization

The issues set before the World Health Organization are: Combating malnutrition in lower-income nations and spreading awareness and responses to mental health crises. The Republic of Uganda believes fighting against physical health such as malnutrition, as well as mental health, is paramount for the future of nations globally.

I. Combating Malnutrition in lower-income nations

Malnutrition has been a pervasive issue affecting Nations around the Globe. Often it is accompanied by poverty causing families to not be able to pay for food, this then causes farmers to not have enough funds to produce this food, creating an endless cycle that is difficult to escape. This shows a direct correlation between poverty and malnutrition. Because of this, lower-income countries are more prone to struggling with hunger. This is a severe issue as 45% of child deaths are linked to malnutrition and can also stunt their growth¹. Poverty is becoming even more severe today. Pandemics like COVID-19, not only destroy human life but also economies which in turn increase cases of extreme poverty which can lead to more malnutrition-related deaths. This is especially so in poorer nations. For the sake of the future, Uganda will work to fight malnutrition. This means attacking its source

The Republic of Uganda understands the necessity of finding solutions to malnutrition by working to fight poverty. To combat this, the Nation Planning Authority of Uganda strives to make Uganda a middle-income country in the next five years by improving infrastructure, production, tourism, and more. By combatting poverty, malnutrition can become less pervasive as it is in lower income nations such as Uganda.

Uganda believes that to end malnutrition, nations worldwide must work together to fight it sustainably. While some may try to combat hunger with food banks, this solution is not sustainable. It is necessary to fight hunger at its source, poverty. This means supporting middle- and lower-income nations to improve their economies and taking a nuanced approach for individual nations. Different countries have may have different causes for their lower-income status and require different solutions to effectively improve their situation.

II. Mental Health Awareness and Improving Responses to Mental Health Crises.

Mental Health awareness has become more and more prevalent in recent years and it is important for nations to appropriately address these issues to take care of their citizens. In the past, mental illness has been subject to stigmatization which affects whether laws are put in place to help those who experience it². On top of that, services for the mentally ill such as asylums or mental hospitals have in many cases been found to put patients in unfavorable or even cruel conditions. Because of this, many do not pursue help for mental illness and may feel ashamed because of the stigma around it. Recently, there have been improvements in this field, however, they are still working that can be done.

Uganda has worked to help the mentally ill in the past through mental hospitals. We have realized, however, that there is much room to improve. Patients in mental hospitals haven't been treated as well as they could be, nor received the treatment they deserve.

Uganda believes that it is necessary to support the mentally ill through mental hospitals, mental health services. Within these hospitals, laws, and policies that protect patients must be put in place to protect patients from mistreatment. Destigmatizing mental health over time through public education, as well as campaigns, is necessary for people who need help to be able to seek it without

the fear of shame. Of course, this is easier said than done and it would take years to change public opinion. Nevertheless, for the health and safety of millions, we must work to normalize their difficulties and support them.

*Delegation From: The Republic of Uganda
Represented by: Western Reserve Academy*

Position Paper for the World Health Organization

The issues set before the World Health Organization are: Combating malnutrition in lower-income nations and spreading awareness and responses to mental health crises. The Republic of Uganda believes fighting against physical health such as malnutrition, as well as mental health, is paramount for the future of nations globally.

III. Combating Malnutrition in lower-income nations

Malnutrition has been a pervasive issue affecting Nations around the Globe. Often it is accompanied by poverty causing families to not be able to pay for food, this then causes farmers to not have enough funds to produce this food, creating an endless cycle that is difficult to escape. This shows a direct correlation between poverty and malnutrition. Because of this, lower-income countries are more prone to struggling with hunger. This is a severe issue as 45% of child deaths are linked to malnutrition and can also stunt their growth¹. Poverty is becoming even more severe today. Pandemics like COVID-19, not only destroy human life but also economies which in turn increase cases of extreme poverty which can lead to more malnutrition-related deaths. This is especially so in poorer nations. For the sake of the future, Uganda will work to fight malnutrition. This means attacking its source

The Republic of Uganda understands the necessity of finding solutions to malnutrition by working to fight poverty. To combat this, the Nation Planning Authority of Uganda strives to make Uganda a middle-income country in the next five years by improving infrastructure, production, tourism, and more. By combatting poverty, malnutrition can become less pervasive as it is in lower income nations such as Uganda.

Uganda believes that to end malnutrition, nations worldwide must work together to fight it sustainably. While some may try to combat hunger with food banks, this solution is not sustainable. It is necessary to fight hunger at its source, poverty. This means supporting middle- and lower-income nations to improve their economies and taking a nuanced approach for individual nations. Different countries have may have different causes for their lower-income status and require different solutions to effectively improve their situation.

IV. Mental Health Awareness and Improving Responses to Mental Health Crises.

Mental Health awareness has become more and more prevalent in recent years and it is important for nations to appropriately address these issues to take care of their citizens. In the past, mental illness has been subject to stigmatization which affects whether laws are put in place to help those who experience it². On top of that, services for the mentally ill such as asylums or mental hospitals have in many cases been found to put patients in unfavorable or even cruel conditions. Because of this, many do not pursue help for mental illness and may feel ashamed because of the stigma around it. Recently, there have been improvements in this field, however, they are still working that can be done.

Uganda has worked to help the mentally ill in the past through mental hospitals. We have realized, however, that there is much room to improve. Patients in mental hospitals haven't been treated as well as they could be, nor received the treatment they deserve.

Uganda believes that it is necessary to support the mentally ill through mental hospitals, mental health services. Within these hospitals, laws, and policies that protect patients must be put in place to protect patients from mistreatment. Destigmatizing mental health over time through public education, as well as campaigns, is necessary for people who need help to be able to seek it without

the fear of shame. Of course, this is easier said than done and it would take years to change public opinion. Nevertheless, for the health and safety of millions, we must work to normalize their difficulties and support them.

Delegation from: Ukraine

Represented by: Western Reserve Academy

Position Paper for the World Health Organization

The topics to be discussed in the forthcoming conference are: Combating Malnutrition in Middle-and Low-Income Nations; and Mental Health Awareness and Improving International Responses to Mental Health Crises. Ukraine is aware and devoted to collaborate with all nations to combat these ongoing issues.

I. Combating Malnutrition in Middle- and Low-Income Nations

There are many sectors in malnutrition that can be umbrellaed into two categories: Obesity and undernourishment. Recently fourteen of the lowest-income countries developed a double burden compared to the data in the 1990s. Researchers estimated about 2.3 billion children and adults are overweight, and 150 million children stunted. With the rapid change in the food system, many low- and middle-income nations, including locations such as sub-Saharan Africa, South Asia, Southeast Asia, and the Pacific are rapidly changing from consuming fresh to processed food.

Currently, 26.5% of children under the age of five are overweight, 22.9% stunting, and 8.2% considered wasting. Children ages five to nineteen have a population of 29.7% underweight, 42.3% overweight, and 13.6% are obese. Adding on, 25.7% of women and 22% of men have obesity. That makes up 47.7% of the adult population. Obesity and malnutrition are deep-rooted in modern Ukrainian history and culture. Less than a century ago, the country faced two severe famines in a span of a decade. The ongoing Russo-Ukrainian war, which began in February of 2014, has taken up much of the government's attention. Numerous families close to war areas are affected. Adding on, the lack of vaccines available to these families has also come to attention of the federal government. But regarding the increasing obesity, Ukraine has joined the Commission on Ending Childhood Obesity (ECHO) to improve the health of the nation. Moreover, Ukraine admittedly has not been successful regarding this situation and hopes to collaborate with all other delegates in the upcoming conference for a more permanent solution.

Ukraine asks to tackle obesity by the following: promote healthier food systems and physical activity. With fast-food industries spreading processed food, the citizens of low-and-middle-income nations become targeted customers who, then, get exploited. Requiring a ban on installing fast-food restaurants will decrease the chances of malnutrition. Ukraine would also like to address the increasing rate of obesity by adding a tax on imported processed food and emplace healthier food options in school cafeterias. Another point Ukraine is eager to bring to the committee is physical activity. As mentioned above, Ukraine has joined an organization called ECHO that will provide temporary and complementary instructors and will require all citizens at least twenty minutes of their day dedicated to physical activity. These are only two out of numerous other ways we can overcome obesity. By 2030, we hope to see our world prosper into a better future.

Malnutrition, on the other hand, also has its own set of recommendations desired to be in action. Programs in low-middle-income nations must be available for pregnant and new mothers, costumers must be provided with food that have a ladled list of ingredients, and ban all inappropriate marketing

industries spreading unhealthy eating habits. Overall, maintaining healthy eating habits is the priority. With altruistic delegates to craft compromised resolution, we will see a better future.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health awareness has recently come to the world's attention. The first formal action taken by world leaders was at a General Assembly conference in 2015. The committee emphasized the importance of mental health and the positive impacts needed to take place around the globe. Researchers have proven that depression is one of the leading causes of disabilities. It also takes part in enhancing suicide, which is the second leading cause of death amount 15-29-year-olds. What makes matters worse is people with mental health conditions are discriminated against and treated poorly. Hence, in 2019, to access mental health care by millions throughout all twelve priority countries, WHO has initiated a plan till 2023. Though many precautions have been attended to, with Covid-19, it can be inferred that depression and anxiety rates have increased. In the upcoming conference, all delegations must have their undivided attention to help alleviate the mental health crises.

The nation of Ukraine has experienced struggles and hardships throughout its history. Events such as World War II, two severe famines, Stalinist repressions, the nuclear accident in Chernobyl of 1986, and the annexation of Crimea, all within the last century have brought chaos and trauma to the latest generations. Currently, substances commonly used among men and young people are alcohol, opiates and opiate derivatives, and marijuana. As can be expected, more than 33% of women in Ukraine have reported being victims of intimate partner violence (IPV). Researchers have estimated that Ukraine is a significant victim of depression, but one challenge Ukraine will have to overcome is the lack of awareness of mental health. Over five million people in eastern Ukraine have been affected by the limited and absent community. Ukraine's population may be decreasing due to this issue. In response to the unawareness, a law on psychiatric care in 2000 had passed. Seventeen years later, Ukraine passed the Concept of Mental Health Development to go into action from 2018 to 2030. In this development, it hopes for improving the healthcare system, adhering to international standards and guidelines of protection, such as the Convention for the Protection of Human Rights and Fundamental Freedoms of 1950, the Convention on the Rights of the Child of 1991, and the Integrated Mental Health Action Plan for the 2013-2020 World Health Assembly. Ukraine has emplaced numerous organizations and programs but, out of the \$4.02 billion for healthcare as of 2020, only 2.5% of it goes to mental healthcare. As can be noted, mental health awareness and improving responses are vital in Ukraine. In this upcoming conference, all delegations must work together for an aware and healthier world.

To successfully alleviate every countries agony is by including everyone to be a part of this change. Citizens of all nations should be brought to the awareness of mental health through scientific facts, excluding religion and prejudice, for everyone to have a full understanding. The delegate of Ukraine also understands that every nation will approach this differently due to the global pandemic, rising racial tension, increasing unemployment rates, etc. But to confirm that no independent state misusing mental health awareness, the delegate of Ukraine proposes that WHO must work with all federal governments to evenly spread awareness; and all nations should respectively understand that each nation will work at its own pace. With WHO working alongside federal governments, all hospitals should require mental health awareness pamphlets, entertainment discriminating mental health issues must be banned and tested by selected groups, and community-based services must be easily accessible throughout all nations. If each delegate is willing to collaborate, our world will become better.

Delegation from: the United States of America

Represented by: Mentor High School

Position Paper for the United Nations Educational, Scientific, and Cultural Organization

The issues before the United Nations Educational, Scientific, and Cultural Organization are: Education Responses to COVID-19 and Restitution of Cultural Property to Countries of Origin. The United States is devoted to the protection of educational institutions and cultural property while expressing hope for member nations to create resolutions that are able to effectively advance address topics.

I. Education Responses to COVID-19

The United States of America acknowledges the damage COVID-19 has caused not only a devastating impact upon the global economy, but also the damage this has caused towards education throughout the world. Due to social distancing laws put in place to prevent the spread of COVID-19, educational institutions have been struggling to find an engaging and effective way of teaching students during this pandemic. Many institutions have turned to virtual programs that allow their students to call into classrooms from the safety of their own home, however, this plan has proven ineffective for some students as studies claim students need more engagement than they can ever get on a computer screen. This controversy has led nations, including the United States of America, to search for more reliable and effective ways to teach students during this pandemic while still attempting to stop the spread of COVID-19.

In the United States of America, the shut down in early March led to devastating effects relating to the passing rate of students. While an official analysis of the scores has yet to be published, high schools have been reporting that AP scores were at an all time low due to the unrest created by the pandemic. These scores do not provide a full picture of the issue, but they do shine insight on the notion that online learning is not necessarily effective or beneficial for the students' learning. In order to address this issue in the fall, several American schools began to come back in a more hybrid model. This model allows for a more interactive approach where parents were given the discretion and given more control over their child's education during this time. This style of education, while in no way as effective as traditional, all in school classes, have proven in initial studies to be more effective as students who are in school are surrounded by an atmosphere of learning rather than leisure. Furthermore, the atmosphere that students are surrounded by while learning in their homes are not always positive due to family issues or availability of the internet. Students from poverty or lower income families have no way to connect with their teachers as they may not have access to the internet, which completely limits their ability to learn in this atmosphere.

The United States of America's desired policy outcome would be maximizing the efficiency of teaching students in order to ensure life can go on throughout the midst of the pandemic while also respecting the rights given to American citizens and not overstepping boundaries. The United States would look favorably upon passing a resolution that would focus on a more customizable hybrid setting, with optional full in school for students belonging to lower income families, optional full online school for students worried about their health or their family's health during the pandemic, and a functional setting where students are able to both call into their classrooms

and collaborate with not only the teacher but also the other students in order to create an effective learning environment.

II. Restitution of Cultural Property to Countries of Origin

The United States of America acknowledges that cultural property, due to factors such as colonization and colonialism, are often placed within a country that the artifacts do not belong to. Several member nations have already attempted to create laws that protect cultural property and prevent cultural property from leaving their home country. However, member nations argue that countries that request that their cultural artifacts to be returned do not have the proper infrastructure or protection in order to prevent theft or looting of these extremely delicate cultural properties. This allows them to make the case that their country holding onto the artifacts helps ensure that the artifacts stay safe. Furthermore, they argue that being able to hold onto these objects allow their citizens to become more culturally aware and further develop a culture of understanding in an increasingly globalized world.

In the United States of America, several countries and organizations have attempted to claim artifacts as cultural property that belongs to them. The United States has insisted that the cultural property belongs to the land that it was created in, rather than the ethnicity that has laid claims to it. Additionally, the cultural significance of these artifacts help not only teach American citizens about the various cultures that have lived throughout the American continent, but also allows for them to learn how to live alongside these cultures as they have a better understanding. Previously, member nations such as Malaysia have expressed their criticism of the United States' policy on this matter; however, the United States has chosen to keep these artifacts in order to educate their people on Malaysian culture. Furthermore, Native American tribes have expressed frustration with the United States' policy on keeping several of their artifacts as well. As several of these artifacts have been created on or by land owned by the United States, the historical significance to the building of the nation is also extremely evident. In the case of the Native American organizations, several museums like to emphasize the historical and cultural significance of natives and how that impacted the development of the United States. To be clear, artifacts should not all need to stay in the land where it was created, it does provide insight to the history of the area as well. Furthermore, the United States, being one of the more developed nations in the United Nations, has the infrastructure and resources needed in order to ensure the preservation and protection of these artifacts, which allows for the remembrance of these cultures to live on.

The United States of America's desired policy outcome would be an outcome that both respects an individual country's cultural heritage while still ensuring that cultures from around the world are able to learn from each other. The United States would look favorably upon passing a resolution that acknowledges the need for people's understanding of a diverse world. Allowing for countries to keep artifacts they have already acquired but encouraging those countries to return the cultural artifacts to their countries or origin.

Delegation from: Bolivarian Republic of Venezuela

Represented by: Lake Ridge Academy

Position Paper for the World Health Organization

The issues presented to the World Health Organization are: Combating malnutrition in Middle and Low income nations; and Mental Health awareness and improving international responses to mental health crises. The Bolivarian Republic of Venezuela is determined to preventing malnutrition

I. Combating malnutrition in Middle and Low income nations

Malnutrition can possibly lead to generational effects such as unhealthy offspring that can cause harmful health effects. There are two forms of malnutrition; the first being obesity which can produce long lasting problems such as diabetes and other disorders, the second being undernutrition which can lead to an array of eating disorders and poor health. Estimates reveal that almost 2.3 Billion adults and children are overweight or obese. This number could be due to societal eating habits or the speed in the change of the food structure in their respective countries. The key factor in maintaining a high quality diet that prevents malnutrition in every form is maintaining a diet that involves a variety of vegetables, a variety of fruits, and whole grains. Foods that should be avoided are processed meats, and beverages that contain a high amount of trans fat and sugar. These diets are crucial in the process of avoiding emerging global epidemics such as, type 2 diabetes, high blood pressure, cardiovascular disease, and stroke. Due to the lack of essentials in Venezuela, it is especially important to prevent malnutrition to prevent these epidemics.

The Bolivarian Republic of Venezuela reported more than 3.5 million cases of malnourishment in 2018 alone. Malnourishment is quite common in the Bolivarian Republic of Venezuela due to mass food shortages in 2017. The United Nations reported that 63% of the population faced mass weight loss due to these shortages of food in the entire country. The citizens of the Bolivarian Republic of Venezuela wait in lines of 5-6 hours in order to purchase food for merely one week. The Venezuelan government has taken measures to provide these citizens with boxes of food sent biweekly regimented by the Venezuela government.

To prevent Malnutrition in Middle and low income nations the Venezuelan delegation believes the most effective way to end malnutrition in the Bolivarian Republic of Venezuela is to provide affordable food packages to vulnerable populations, and strengthening the recuperation services of Venezuela. The Bolivarian Republic of Venezuela urges their fellow delegations to establish a system that provides these services.

II. Mental Health awareness and improving international responses to mental health crises

In the Bolivarian Republic of Venezuela, there is a mental health crisis that doctors are struggling to contain. This Mental Health crisis has been caused by several key factors, some of which are poverty, malnutrition, widespread violence, and hyperinflation. These factors have led

to mental health problems because people cannot provide for their families and this produces huge amounts of anxiety.

Meanwhile the crisis escalates, the public sector in the Bolivarian Republic of Venezuela cannot handle the situation and the ability to meet the needs of the citizens of the Bolivarian Republic of Venezuela is diminishing rapidly. The organization, Federación de Psicólogos de Venezuela, has produced a hotline which can be called and also has provided no cost services to improve the mental health situation in the Bolivarian Republic of Venezuela. This organization has also gained a social media reputation in which they speak about mental health awareness and discuss important topics such as widespread violence, poverty, and hyperinflation. Anxiety and depression is common among the children in Venezuela due to the complex crisis that Venezuela faces. Parents often emigrate to new countries which leaves their children with insecurities, along with a sense of abandonment.

The Bolivarian Republic of Venezuela believes that mental health is important and therefore we propose an immediate analysis of the public sector and encourage the idea of hotlines and low cost services that could benefit the mental health of families that cannot afford these services.

Delegation from: the Socialist Republic of Vietnam

Represented by: Beachwood High School

Position Paper for the World Health Organization

The issues standing before the World Health Organization include Combating Malnutrition in Middle and Low Income Nations and Mental Health Awareness and Improving International Responses to Mental Health Crises. The Socialist Republic of Vietnam is fully supportive of a high degree of international cooperation to succeed in these regards where the international community has failed in the past.

I. Combating Malnutrition in Middle and Low Income Nations

Far too many people in low and middle income countries (LMICs) suffer from malnutrition. It happens at a much higher and more dangerous rate than in high-income countries, and it is comparatively far easier for these rich nations to provide care for those who are malnourished. In nations with fewer resources, it is more difficult to treat this condition, which can take the form of eating far too little or not enough of a specific nutrient. Both of these hit LMICs harder than richer nations.

The right to sustenance is listed in the Universal Declaration of Human Rights (UDHR); indeed, in Article 25 clause 1, it is written: “Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of [...] lack of livelihood in circumstances beyond his control.” Therefore, it is necessary to provide the hungry with food and to ensure that food is healthy, for Article 3 guarantees “the right to life, liberty and security of person.” In Article 16, clause 2 of the Vietnamese constitution, citizens are guaranteed protection against discrimination “based on his or her political, civic, economic, cultural or social life.” The Socialist Republic recognizes the right of every person to feed themselves because that is essential to life and the government honors its promise to protect those less fortunate. As an ASEAN Post article shows, The double burden is also extraordinarily pronounced, with a Stanford study revealing in 2017 that “Vietnam is among the least physically active countries in the world,” where “an average person [...] walks only 3,600 steps a day.” The survey also shows that “about 46 percent of students in secondary school and 39 percent in primary schools in Hanoi and Ho Chi Minh City [do not do] enough physical activity,” with a startling 41% of primary school students in urban areas overweight, and the study also explains that there is a higher intake of sugar and salt and a lower consumption of vegetables. The same article reveals that 13% of college students are undernourished, as are 12% of high school students and 7.5% of primary school students. Therefore, it can be inferred that there are many young people who do not get enough food and many young people who are overweight, creating a double burden. The divide is largely urban/rural, with those in urban areas more likely to be overweight and those in rural areas more likely to be underweight. The difficulty in addressing this issue is not the efficiency of the government, which is not in question; rather, it is the resources available. The government already commits to bringing the rates down drastically. The pressing pandemic makes it even harder for those suffering from malnutrition to get their food for a myriad of reasons, including unemployment and necessary closure of facilities to prevent the spread of the disease. The Socialist Republic has dealt with the virus remarkably well, but the issues associated with malnutrition still plague its citizens. Therefore, the government must do even more to protect its inhabitants, but without greater resources this will be a difficult task to undertake.

In the past, there has not been a successful effort by the international community to reduce the cost of healthy food to a price people can afford, but Vietnam is confident in the World Health Organization. Because nearly 40% of people globally are unable to afford healthy diets, many starve or eat unhealthily; these effects hurt every nation because there is some degree of a double burden everywhere. The international community has tried to fix the problem, but it has not done so yet. Few effective binding treaties regarding food security have come into force, and those which have are deeply but not irreparably flawed. The Food Aid Convention, part of the International Grains Agreement, only provides for aid in the form of grain. This does not allow for a healthy, nutritious diet; rather, it only accounts for calories. The Common Fund for Commodities is a start, but it seems to focus on industrialization and use of resources rather than on food. Further, the imbalance of world politics, combined with the USA’s absence, severely weakens the CFC even though the European Union, China, and Russia have joined. Vietnam’s policy is to remain neutral, so it is imperative that the United States accede to the Fund so the Socialist Republic can enter as well. A third treaty is the Food Assistance Treaty, which consists only of the nations providing aid. This makes it difficult for LMICs to receive

the aid they require, because they are at the whim of these high-income countries. Since poorer nations are excluded from the body organizing the food aid they are to receive, it is difficult for the aid, and thus the body, to be effective. Expanding any of these agreements would be a good start. Also, lowering the price of healthy food combined with educating the public about proper nutrition would help reduce malnutrition and would alleviate the double burden. With the goal of ending world hunger by 2030 in jeopardy, the World Health Organization must act now.

II. Mental Health Awareness and Improving International Responses to Mental Health Crises

Mental health is very important, but it has been neglected by individuals, by doctors, by governments, and even by the UN. That has recently begun to change. With the stigma of mental illness fading into history, the international community is ready for a reckoning on how to improve mental health responses. This is to the advantage of every nation, because mental illness negatively affects the economy, takes a toll on other public health functions, hurts national security, and makes it more difficult for governments to act effectively.

Vietnam faces many of the mental health issues other nations face. Mental illness is extremely stigmatized, and there has yet to be an end to this. But while this is a difficult concern to address, Vietnam has seen some limited success in raising awareness of mental health and helping those who suffer from mental illness to be willing to reach out. There has also been a significantly higher degree of success in helping patients receive care. In 2006, the World Health Organization - Assessment Instrument for Mental Health Systems (WHO-AIMS) reported that approximately one-half of the population has free access to the necessary medication. This is an objectively phenomenal accomplishment for a middle-income nation with the world's 15th largest population. The Socialist Republic empathizes with mental health patients, which is why it continues to help them in the journey to a perfect system. All hospitals have medicine for mental illness as well, so the mental health network is improving. Further, Vietnam's public health officials have had incredible success dealing with the SARS-CoV-2 pandemic, so it has not seen the same spike in mental health issues that other countries know all too well. For example, the government had a song made to convince people to stay vigilant and to wash their hands. While it wound up being used in TikTok videos, it helped people domestically and abroad to avoid infection with the virus that causes COVID-19. However, not everything is going well. From the same WHO-AIMS report, it can be understood that for those not covered, the cost of medication is unfortunately one-third of the minimum wage. This data is from 15 years ago with the report submitted slightly more recently, so the numbers have improved because the government has been working toward expansion of social programs to cover these people so that they do not have to spend so much money on essential care. Also, few if any in legal professions have any up-to-date training in mental health and mental illness, with the report explaining that "no police officers, judges, or lawyers have participated in educational activities on mental health in the last five years." There is also a relatively small but significant use — around 20% of the population — of alternative medicine, which is culturally historic but is ineffective according to scientific consensus. Thus, it is necessary to find solutions to this crisis.

The delegation of the Socialist Republic of Vietnam, along with a hopeful group of states, wants to develop realistic, lasting solutions. Conditions such as schizophrenia and depression can be treated, and so they must be. While there are international standards for treatment, there is not any international success in reaching those in remote areas or helping those in developing countries. These smaller nations encounter more difficulty in treating mental health, which is why it is important for the WHO to step in to provide aid. Systems would finally be established and stabilized, and it would take the burden off of legal systems that may be corrupt or may not properly understand mental health issues. This would finally allow those suffering from mental illnesses to seek and get help and be accepted by society. By helping those with mental health issues, everyone can benefit. The common good can finally be common.