

Youth Declaration

The 27th International Youth Forum

PRE-AMBULATORY CLAUSES

Recognizing the gathering of 81 youths from over 29 countries in Seoul and Muju, Korea, to resolve various health issues,

Highlighting the importance of technology in everyday living was emphasized in the goal 9 of the sustainable development goals,

Noting that Global Health Technology Coalition was set up in the year 2009 to save and improve the lives by encouraging the research and development of essential health technologies,

Noting the extra support and education of the Russian government to help its indigenous group and providing of the mobile clinic boat for the people living in the rural areas by the Malaysian government,

Highlighting one of the main issues in environment and pollution is air pollution. In the ASEAN region, one of the main highlights is the ratification of the ASEAN Agreement on Transboundary Haze Pollution among ASEAN member states, which legally binds member countries to the requirement of acting on own or through collaborating with other member states to resolve the haze problem,

Noting the efforts of Germany in the use of solar power in the country to replace coal plants and to reduce carbon emissions,

Realizing that proper health care is more than just infrastructure, efficient services and safe environment play a vital role in delivering proper Healthcare,

Defining the role of education as deemed necessary in improving the health conditional in national and international level. The regional office of WHO for the Eastern Mediterranean has provided us many success story of the Implementation of health education in increasing the health of people. For example, worksite programs including Informational and educational strategies and also behavioral and social strategies have been proven to reduce weight, percentage body fat and body mass index to control overweight and obesity,

Noting that since the outbreak of SARS in 2003, a reported 8273 people died in a spar of 9 months. Due to successful measures conducted by WHO and several other organizations no causes of SARS have been documented,

Defining food is “Any beneficial substance that can be taken in by the body,” and drug is “A substance produced for the consumption and benefit of a specific group,” Inevitably, foods and drugs have many similarities. Food and drugs are, in essence for the people, by the people, of the people,

Recognizing that the health of international youth includes Mental Health, the definition of the respective terms encompassing more than 200 classified forms of mental illness including not limited to, depression, bipolar disorder, dementia, schizophrenia and anxiety disorders,

Recognizing that issues related to addiction are dealt with through tactics that are not conducive to the eradication of the addiction or mental illness they are intended to contain, this includes, but is not limited to, aggressive prosecution of abusive addicts and restriction of public information about treatment options,

Recognizing the efforts of the United Nations, International Organizations, and Non-Governmental Organizations, and the progress made by these respective organizations in improving the health and welfare of youth international in the field of Health,

OPERATIVE CLAUSES

COUNCIL: Education

Paragraph 1: As much as we can do, through our networks, we will build strong structures throughout the respective regions we belong to and dedicate ourselves to work with our national and local governments, including, but not limited to socio-civic groups and non-government organizations (NGOs). This is to basically have a strategic mechanism for disseminating information as to where and how youth can be a part of the processes which include healthcare service delivery, planning and implementation of health policies. Hence, making voices of young people heard in these processes. Despite having various policy frameworks put in place to improve global world health, it is evident that youth participation remains a concern. The potential of youth involvement has yet to be fully realized and requires further strengthening and to increase the participation and involvement of youth in the area of their own health issues, all programs (not only those pertaining to health) should be “youth-specific” and build upon youth channels of communication. Moreover, creating a healthy, safe and sustainable environment needs to be realized by including these concerns as point for discussion in the government, non-government and international organizations.

Paragraph 2: We would encourage youth to strengthen the spirit of volunteerism by joining institutions and organizations to educate people from the local communities (especially regions where access to programs is completely inadequate) regarding living a healthy lifestyle. We see volunteerism as one of the preventive measures that can be maximized to increase awareness toward various health concerns. Hence, we will promote participation of youth in educational and community-based programs together with NGOs and health practitioners. We affirm that through the short-term programs held by NGOs, youth can be trained to have deeper understanding about the health issues and subsequently gain the membership to be a part of a certain group so that they can continuously contribute to the community by resolving health issues.

COUNCIL: Environment and Pollution Declaration

Paragraph 1: Education: The youth will be instrumental in the combat against environmental pollution in the future. The youth will be the ones who staff governmental agencies and non-governmental organizations that are involved in addressing pollution issues. Thus, environmental issues should be incorporated into academic curricula to enhance awareness of environmental issues. Also, training and talent development programs can be introduced by governments across countries to build law enforcement capacities. This should also involve older citizens in organizations for the ease of implementation of the environmental policies.

Paragraph 2: Involvement in policy-making. Governments should conduct questionnaires and polls through social media and community outreach programs to hear about the opinions of the youth in environment and pollution, which will then be duly considered in policy-making. A quota of positions should be created among non-governmental organizations to ensure youth representation.

Paragraph 3: Youth's engagement in activism: Increasing awareness through social media and other relevant programs among the youth and other older community members on ways to address environmental issues, informing the youth on community clean-up projects targeting the environment and sustainable ways of living in terms of transportation, food and energy choices.

COUNCIL: Food and Drug

Paragraph 1: At the global level, governments should cooperate to fight drug addiction by setting international standards. At the national level, governments should also cooperate with private companies and organizations to refine and enforce these standards in their respective countries. Governments should report their progress to international organizations such as the United Nations so these international organizations can analyze the effectiveness of the drug legislations and suggest future actions for the nations.

Paragraph 2: Youths undergo a time of rapid physiological change, mental stress, conflicts and various other anomalies and have to solve a lot of internal problems. The reason why youths abuse drugs is because personal and social factors such as family, school and society pressure youths in various ways. In order to establish effective preventative measures, first it is necessary to investigate the exact reasons behind youth drug abuse and analyze those results, as well as working with the families, schools to provide appropriate rehabilitation policies. Therefore, because there are many youths who do not have the ability to decide what is right and wrong, appropriate education is necessary to set proper values to steer them away from drug abuse.

COUNCIL: Mental Health and Addiction

Paragraph 1: Encourages that member states de-stigmatize mental illness and addiction among youth by initiating public information campaigns and promoting awareness through public media in light of the fact that addiction and mental afflictions are often ignored; socially discriminated against, and stigmatized in many societies internationally; making their treatment difficult; and awareness about treatment and improvement non-existent; recognizing that that the health of international youth includes Mental Health, the definition of the

respective terms encompassing more than 200 classified forms of mental illnesses including but not limited to depression, bipolar disorder, dementia, schizophrenia and anxiety disorders.

Paragraph 2: Urges member states to pursue policies that do not involve the incarceration and punishment of individuals afflicted with mental health issues, but rather treat their conditions as a matter of public health that is dealt with remediation and therapy which allows a more successful re-integration of an individual into society as a functioning member in light of the fact that issues related to addiction are dealt with through tactics that are not conducive to the eradication of the addiction or mental illness they are intended to contain, this includes, but is not limited to, aggressive prosecution of abusive addicts and restriction of public information about treatment options.

Paragraph 3: Calls for member states to establish educational programs that incorporate information about mental health and addiction into the curricula of school classes to promote the understanding that the health of youth is an imperative that we must pursue to ensure the social and economic vitality and quality of life that is connected directly with the state of public health.

Paragraph 4: Encourages the cooperation of member states with non-governmental organizations, in order to provide facilities tailored to local communities and specific conditions to continue to support the efforts of the United Nations, international organizations, and non-governmental organizations, and the progress made by these respective organizations in improving the health and welfare of youth internationally in the field of mental health.

COUNCIL: Minorities

Paragraph 1: This objective has a myriad approach in improving access respective to the issue being addressed. For people who speak in a language that is not as prevalent, there is a higher rate of attrition in failed treatment purely due to not understanding information available in English or some other major language. The youth can provide some translation services who know both the major language of the sourced information and then assist communities who suffer from this issue by providing this much needed service. Related to the issue of the single mothers in Korea who are forced to give up their child due to these monetary and support constraints, we aim to alleviate this pressure by improving on the existing support systems such as the baby box and to introduce a more comprehensive program for family planning before a pregnancy or during one. The youth in this objective can offer their time to support these productive enterprises by direct assistive means. Youth can work in the baby box programs to assist in its effective procedure.

In many communities, it is believed that western medicine is not as effective as the treatment given by local traditional medicine. It is this line of reasoning that no matter how much effort is made into offering medical treatment, the appropriate response is not recorded. But programs in Russia have shown how it is possible to influence these communities. By targeting youth, they are able to expose them to the correct or favorable reactions to modern healthcare and once they are back in their communities, they are able to influence the elders. In Russia, this is achieved through providing the youth opportunities to come to more modern places to influence their opinion. Doing this globally and in these communities will greatly influence this perception.

Paragraph 2: A major issue in rural areas is the lack of medical professionals willing to work in these areas due to their being more lucrative positions elsewhere. These communities, as a result, suffer from lack of healthcare. Governments such as Malaysia provide a subsidy for medical professionals who choose to work in these areas by offering them an additional award for days worked.

Mobile clinics and these health professionals must be able to articulate the reasons for choosing to work in these areas. They can only logically work in these areas if the cost is at least reciprocated by the benefit that they will provide in economic sense. Youth, with their abundance of time, interest, and energy can choose to alleviate some of these costs by working the roles that are traditionally more labor intensive.

Paragraph 3: The influence that is held by governing bodies in both international and domestic can do much to help the minority groups. Lack of awareness for this small but severely marginalized group has devastating consequences. Bodies such as the UN and ministries of health in respective countries hold much political capital that can be expended to direct the efforts that we propose.

The youth in this situation hold a lot of influence in drafting this resolution. Advising boards of the UN hold youth ambassadorship positions that are created to specifically for this purpose: to bring referendums to the major ruling body in the UN.

Paragraph 4: Infrastructure is an extraordinary important aspect of healthcare. Both in terms of the structures built to service the populace and the transportation to reach this destination. Hospital structures and other dedicated health structures are very expensive and cost orienting parts of the healthcare industry. A dedicated structure won't be built unless there is ample proof that the cost of running and building the institution can be supported. In these cases, there are many examples of government subsidies for building projects. But in many cases this is still not enough.

To alleviate the remaining pressure of building, a Habitat for Humanity response for this seems to be very adept. By replacing costs with human capital we ask the youth to provide, this drives down costs enough to support these constructions.

COUNCIL: Regulations

Paragraph 1: Governments should ensure the right to healthcare of young people is upheld through the provision of a comprehensive package of sexual and reproductive health services that are affordable, safe, accessible, confidential, youth-friendly and of the highest quality. These services must be developed and monitored using a rights-based perspective and with the active involvement of young people. The central governments should increase efficiency of local governments on health care services since they are easily accessed by youth.

Paragraph 2: Governments should provide a legal environment that empowers young people to claim and exercise their rights while eliminating any chance of gender discrimination in relation to health care. This should be aimed at ensuring that existing legislations (such as those on testing HIV and AIDS) are liberalized to remove any parental or spousal consent, notification laws and age restrictions on seeking health services.

Paragraph 3: The governments should push for the incorporation of comprehensive sexuality education. Reference made to the U.N. Comprehensive Sexuality Education an age-appropriate, culturally relevant approach to teaching about sex and relationships by providing scientifically accurate, realistic, non-judgmental information, this type of education should be designed to provide opportunities for exploration of one's own values and attitudes and to build decision-making, communication and risk reduction skills about many aspects of sexuality. It should have a full range of information, skills and values to enable young people to exercise their sexual and reproductive rights and to make decisions about their health and sexuality.

COUNCIL: Technology and Economic Measures

Paragraph 1: The delegation acknowledges the inherent flaw in the accessibility of medical information, medical infrastructure and research facilities in developing countries. To address these intricate issues, there should be long term investment between the developing and developed world to promote technological advancement and exchange of research. WHO and global health technologies coalition should work with federal government along with youth innovators to assess individual nation needs and ultimately provide and promote partnerships including technological mentorship.

Paragraph 2: In addition to collaboration, nations should also consider adoptions of e-health programs improving accessibility of credible health information, services, medical care, and monitoring of patients in areas that need it most. These measures are economically advantageous due to their cost effective nature.

COUNCIL: Virus

Paragraph 1: Encourage their policy makers to give legal preparedness the relevance it deserves and to let partisan animosities not get in the way of passing the laws and regulations that their electorate so would desperately need in case of a viral outbreak. This includes Emergency Management Plans, Public Health Emergency Response Guides, Public Psychological First Aid Protocols, Public Hospital and Town Halls Emergency Response Protocols, and Public National Emergency Response Protocols among many others.

Paragraph 2: Raise awareness on newly discovered viruses. Notwithstanding the role of traditional media, our familiarity with social media certainly puts us in an advantageous position to leverage the power of social media amidst a viral epidemics and pandemic. Thus we encourage the global youth to organize informative media campaigns, preferably for high risk populations, using videos demonstrating safe practices. Also, blogs which could centralize useful information such as degree of viral spread, recommended safety precautions, and others. We ask for this information to be shared responsibly, being demonstrably accurate and verified, and thus positively helping to improve the general understanding of viruses and symptoms, dispelling myths and correcting misconceptions. We also advise on youth to not forget the important role community leaders around the world can play.

Paragraph 3: To consider the creation of virtual platforms, such as mobile apps and others, for emergency two-way communication allowing constant delivery of feedback in case of an outbreak, and also to bridge the gap between parties when the usual channels of communication are offline through youth reporters. We also advise for youth to take an active role when additional assistance is required by volunteering and sharing opportunities to do so, and to help publicize the need for material, medical and financial aid. We ask on youth to call on governments and legislators to improve healthcare capacity in terms of infrastructure, technology and labor force to better address viral epidemics and pandemics. We suggest making sure that the density of physicians and the availability of equipment and primary health care level satisfies minimum national standards, to strengthen the prevention system when needed, to encourage and financially support biomedical research on viruses as well as international cooperation on the matter, to regulate research adequately, to develop appropriate protocols in infection control and prevention, to strengthen the role of social workers, and to increase cooperation between medical and social welfare centers.

Paragraph 4: Spread awareness that viral expansion is associated with the concentration of big pockets of population, allowing for a very high infection risk and the quick expansion of the focus of infection. But also to keep in mind that the same scenario goes on in any gathering of people at smaller scales. Workers in certain industries are at an increased risk of infection and we would like for youth to put a spotlight on working conditions and workplace safety around the world. Immunization is one of the most important prophylactic measures that we suggest. Also, considering the high costs of an outbreak in a work center, which include direct expenses, those required for medical equipment; and indirect expenses, which appear as a result of incapacity for work or decrease of work productivity, we suggest that the employees be allowed to demand home conditions isolation, if they are already infected, instead of a sick-list days-off. We encourage taking action so private enterprises with large numbers of employees, surely interested on a constant and stable cash flow, are obliged to stock in antiviral and immunomodulating medicines as well as dressings and other basic medical equipment in order to lead to a reduction in the number of sick workers. Companies should also perform basic workplace sanitization through obligatory moist mopping using Chlorum several times a day and ultraviolet irradiation apparatus, both the open and closed types, and to ensure proper ventilation in the workplace.