

Background Guide



CAMBRIDGE INTERNATIONAL SCHOOL
AMRITSAR-MODEL UNITED NATIONS

WORLD HEALTH
ORGANIZATION

ABOUT CISAMUN

We, at CISA, proudly present the launch of the CISAMUN, a venture into the world of Model United Nation. We are just eight years old but we have the precision of winning awards at every MUN we have participated in. And we thought that if we have it then we ought to share it. The sprawling seven acres and the state of the art infrastructure in the charmed city of the Golden Temple, provides us the perfect backdrop to host some of the best schools for an interactive session on global issues.

In these last years, we have we have moved on from infancy to maturity. Our main achievements being a 1700 strong student brigade and their guardians as our shareholders, a committed team of teaching and non teaching staff and a management with a vision.

Young minds have the freshest ideas. Keeping this in mind, CISAMUN wishes to tap this pool of ideas and contribute to issues that matter, in whatever little way possible. United Nations: as the name suggests, thinks globally and that is exactly what we strive for too. Issues ranging from environment concerns and religious intolerance to terrorism and trade have an impact on all, hence the urgency to start young.

We proudly launch the CISAMUN scheduled for the 3rd, 4th and 5th of August 2017.

A LETTER FROM THE SECRETARY GENERAL

Dear Delegates,

Welcome to the first session of the Cambridge International School Amritsar Model United Nations Conference. I am Vansh Aggarwal and I am thrilled to be your Secretary General at CISAMUN '17. Before I go on to the specifics about the conference, I'll start by introducing myself. I am a pass-out from The Doon School, Dehradun. I have been an avid MUNer and have attended and chaired conferences both nationally and internationally. As such, my interests lie mainly in the field of Economics and Politics. I am going to pursue a degree in economics and psychology from the University of Chicago this fall.

As far as the conference goes, I hope you are all as excited as I am to take part in these incredibly unique simulations this year. Each committee will have the opportunity to explore a new dimension of its topics, ranging from the ongoing Syrian civil war to the militarization of the Arctic. Simultaneously, the International Press Core will help make sure that delegates are questioned and made accountable for their actions and decisions. I encourage you to embrace the important role you each will play, as your country's voice is crucial.

I hope these realistic yet challenging simulation will test the intellectual and diplomatic capability of every delegate. I expect all delegates to be 'aware' of the developments in current affairs and be familiar with their foreign policy. Further, I expect everyone to maintain a high level of debate and the committee to adopt a holistic approach towards the agendas. Also, ones ability to lobby and lead blocs will be highly judged upon, as diplomacy forms the core of any Model United Nations Conference. So be prepared for three days of intense debate, heated arguments, lobbying and above all, meeting new people and making friends.

I look forward to seeing all of you here at the holy city this fall.

Vansh Aggarwal
Secretary General

Vanshika Arora
Chairperson

A LETTER FROM THE CHAIRPERSON

Dear Delegates,

On behalf of the Executive Board, I extend a warm welcome to all of you, and congratulate you on being part of CISA Model United Nation, 2017.

\ As Chairperson, I feel privileged to be part of the World Health Organization. I've been part of several Model UN conferences across India. Apart from debating and MUNing, I am interested in English Literature and love to write. I am also interested in history and international affairs and aspire to pursue law.

Here at CISA Model UN, the World Health Organization aims to build a better and healthier future. The committee will focus on resolving a prevailing issue: "The illicit drug abuse in the developing world". As chairperson, I expect you to come up with thorough research and substantive solutions and not a mere understanding of what already has been proposed. Also, I urge you to understand the urgency and scale of the issue: its causes, consequences and several problems that arise due to the drug abuse.

I expect all delegates to be 'aware' of the developments in current affairs and be familiar with their foreign policy. Further, I expect everyone to maintain a high level of debate and the committee to adopt a holistic approach towards the agendas.

This background guide only provides a basic overview on the agendas. The delegates are requested to not limit their research to the areas highlighted in the background guide, but ensure that the issue is researched in depth. Also, as part of the conference policy, delegates are required to submit their position papers to be considered for awards.

I look forward to a very constructive debate, with new ideas and a wider approach.

Regards,
Vanshika Arora
Chairperson WHO

BACKGROUND GUIDE

WORLD HEALTH ORGANIZATION (WHO)

COMMITTEE

The World Health Organization (WHO), founded on 7 April, 1948 (A day now widely celebrated as the World Health Day, symbolic of the constitution of the WHO becoming official.) is the successor of Health Organization, which was part of the League of Nation (A similar body like that of the United Nations, which was in force from 1920 to 1945.)

The WHO is an agency of the United Nations which aims at resolving all health related issues on the global scale and advocates the right to health.

STRUCTURE

The World Health Organization, a part of United Nations Development group counts 194 members in total, categorized on a regional basis. The WHO is widely structured around three bodies,

- ★ The World Health Assembly: The supreme legislative body of WHO
- ★ The Executive Board: Works as an advisory board to the assembly, counts 34 members in all
- ★ The Secretariat: Responsible for making sure that member states fulfill their obligations under the convention.

FINANCING

The World Health Organization largely depends on the financing through its member states, particularly the United States of America, which serves as the largest contributor. WHO's program budget is financed through both assessed and voluntary contributions. Voluntary contributions can from other partners or member states, in addition to their assessed contributions.

MISSION

The constitution of the World Health Organization states that the main objective of the organization is, “The attainment by all people of the highest possible level of health.” (Organization) The World health Organization,

- ★ Advocates the right to health
- ★ Monitors and assess health trends
- ★ Monitors health-related trade
- ★ Enables equal access to medical and health care
- ★ Promotes medical research
- ★ Promotes cooperation on health related issues among member states
- ★ Takes leadership over global health issues
- ★ Coordinates norms, legal codification, and restriction
- ★ Sets health standards and deals with health crisis
- ★ Provides health and support to countries to promote adequate health norms.

ROLE TO COUNTER THE WORLD DRUG PROBLEM

As a part of the United Nations, the role of WHO under the conventions is to:

- ★ To protect societies and individuals from drug harms because of its use
- ★ Promote public health interventions to reduce harm
- ★ Prevention of drug use
- ★ Treatment of drug use disorders
- ★ Prevention and management of associated health and social conditions
- ★ Reduction of drug supply and demand
- ★ Review and assessment of substances (WHO is the only treaty body with the mandate to carry out scientific assessment on substances)

The WHO supports member states by:

- ★ Collecting and analyzing evidence-based policy in primary intervention
- ★ Early intervention, social reintegration, rehabilitation
- ★ Efforts in monitoring and evaluating drug abuse

ABOUT THE AGENDA

WHAT ARE DRUGS?

Medically, drugs are described as substances whose intake leads to mental, physical and emotional relief, or a substance, whether synthetic or natural which helps in curing or the treatment of several diseases. Or at a wider scale, drugs can be referred to substances whose consumption leads to several changes in the body.

LICIT AND ILLICIT USE OF DRUGS

Primarily, the United Nations drug control conventions do not differentiate between licit and illicit drugs, but they only describe the use of licit and illicit drugs. Moreover, there is no particular definition of “medicinal drugs” also, under the UN conventions. No specific licit and illicit quantities of various drugs based on usage and consumption has been described. But on a wider scale, the term illicit is used for drugs which are under control of the international community (and which may or may not have licit or medicinal purposes) but are produced, trafficked and/or consumed illicitly.

- ★ Licit means “within the law”. In other words, anything that is licit is allowed, or it is legal. Licit drugs include caffeine, nicotine, and alcohol. Prescription or medicinal drugs are also referred to as licit drugs for their consumption in guaranteed by medical practitioners.
- ★ Illicit drugs are those that have been classified as illegal, for their use may pose a threat to the health of the person, or in some cases even their lives. Some of the illicit drugs include:
 - Ø Cocaine
 - Ø Methamphetamine
 - Ø Cannabis
 - Ø Heroin
 - Ø Opiates

★ Some drugs have been withdrawn by the international community, these include:

- Ø Alclofenac (1979)
- Ø Aprotinin (Trasylol) (2008)
- Ø Bezitramide (2004)
- Ø Drotrecogin alfa (Xigris) (2011)
- Ø Mylotarg (2010)
- Ø Lumiracoxib (Prexige) (2007-08)
- Ø Rimonabant (Acomplia) (2008)
- Ø Rofecoxib (Vioxx) (2004)

DRUG ABUSE

Drug abuse is the consumption, production or trafficking of drugs which are under control of the international community. The increased drug abuse has resulted in several problems and tensions. The origin of some of these problems at hand is obvious: increased underemployment and unemployment, reduced family cohesiveness, raping transition in a political alliance, social and economic marginalization and increased crime.

PRODUCTION OF DRUGS

The production of drugs can widely be categorized in the following manner:

- ★ Those process which requires only plant products, example: growing and collecting opium in fields for home use,
- ★ Those involving semi-synthetic process, wherein natural materials are partly changed by synthetic substances to produce the final product, example: coca bush leaves processed to make cocaine,
- ★ Process which encompass only manmade home use, example: narcotic or psychotropic drugs made entirely in the laboratories, or factories.

Before the world economy felt the impact of globalization, drugs followed a particular route internationally from producer mainly from underdeveloped or the developing world to a consumer in the highly developed world.

Primarily the first stage that is wherein drugs are grown in fields or made in laboratories is the most vulnerable stage for the illicit production, distribution, and consumption. Though the second and the last stage is also considered as an equally vulnerable time of intervention especially, the time when drugs reach the consumers through, the dealers. This stage is often a target of law enforcement, especially if the rule of “buy and bust” or entrapment (catching unsuspected drug dealers) is followed.

DISTRIBUTION AND ILLICIT TRAFFICKING

Today, illicit distribution and drug trafficking is a story of every country. The involvement of foreign entities makes this drug problem less of a home issue. Few countries, however, are immune to drug problems, but places which were formerly thought as safe- educational, religious or penal institutions, today have some kind of drug problem. For example, illicit drug abuse is now common in prisons because a significant number of inmates, themselves are drug abusers. (Approximately 1 in every 3 prisoners take drugs. And the common drug consumed is Cannabis) Traffic patterns tend to follow country origin and drug types. Cocaine trafficking, as an example, begins in the Andean region making its way Northward towards the Caribbean, Central America, and Mexico to its endpoints in Europe, North America and elsewhere. Heroin, for the sake of another example, originates in South West and South East Asia, with consumer points close to the origin. A few countries, in this route, involve Thailand, Malaysia, and China.

The main problem arises when the dealers convert opium into morphine or heroin or coca leaf into cocaine hence making the detection difficult. This conversion process results in the reduction of sheer bulk and weight of the drugs hence making detection an even difficult process.

Border controls, therefore, are a major focus of the interception efforts. Although the free movement of goods regional trade blocs and commercial traffic between the countries makes the distribution of illicit drugs an easier process for the dealers.

CONSUMPTION OF DRUGS

It is estimated that over a quarter of billion people aged between 15 to 64 have taken illicit drugs in 2013. The major problem here lies that of recreational, prescription and designer drugs. Wherein normally the overdose, of these recreational and prescription drugs leads to worsened health conditions. And the unknowing consumption of designer drugs also poses a huge problem of poor health conditions or even death in some cases. Also, there is a greater risk of drug users becoming patients of HIV and Hepatitis C and D. According to estimates, a handsome amount of women consume drugs but a very low percentage of them reach rehabilitation centers or even have access to basic treatment. These gender disparities are at a greater scale around the world.

CASE STUDIES:

AFGHANISTAN

The use of Opium in Afghanistan has been since centuries; Afghans used opium as a medication in the early times but is not the case today. Afghanistan is struggling from its problem of recreational opium. According to statistics, there are at least 6,026 heroin users, 10,257 opium users, 26,415 hashish users, 15,526 pharmaceutical drugs addicts and 8,128 alcohol addicts within Kabul, the capital of Afghanistan. Afghanistan is the leading global producer of opium and the leading consumers of their own drugs. Drugs in Afghanistan are very cheap and easily available. Drugs are sold at pharmacies because the Ministry of Public Health (MOPH) in Afghanistan is unable to keep a check on the pharmacies. The spread of drugs in Afghanistan increases due to the lack of healthcare facilities and limited rehabs.

Since the past few years, Afghanistan has increased strictness. The United Nations Security Council (UNSC) and the Bonn Agreement of 2001 stated that Afghanistan should co-operate with the international community to fight drug abuse. In 2002, Afghan President Hamid Karzai passed a law that banned the cultivation, production, and trafficking of opium.

Conclusion:

Afghanistan is a Low Economically Developed Country (LEDC), with limited medical facilities and rehabs, drugs have increased. Afghanistan's best way to fight the drug abuse is by introducing more rehabs and medical facilities.

SYRIA

It is important to note that drugs are not grown in Syrian territory but are traded overseas. Though, Captagon, a type of drug is used a lot in use in Syria and is made inland. The following table shows Syria's exports to other countries:

Country of Origin	Transit country	Country of destination	Route type
Syria	Turkey	Saudi Arabia, Kuwait, UAE	By land, By sea
Syrian Post	Jordan, Libya	Jordan, Saudi Arabia	By sea
Syria	Lebanon	Jordan, Saudi Arabia, UAE	By air, By sea
Syria	Jordan	Saudi Arabia, Kuwait, UAE	By land

Under ISIS's rule, punishment for consumption of drugs is a straight death penalty, and consumption of alcohol or smoking is being beaten in front of the public.

CZECH REPUBLIC

Drugs used in the Czech Republic is mainly cannabis, which is consumed by citizens of ages 15-34. The country has been strict on drugs, making drug use stable in the Czech Republic. According to reports, fewer than 5 in 100 adults have ever tried new psychoactive substances (NPS). High-risk drugs are not purchased locally but Czech citizens prefer making these types of drugs at home. As stated earlier, drug laws in the Czech Republic have been extremely strict and effective, keeping the citizens in a limit. Drug use is not an offense in the Czech Republic, possession of small quantities of drugs is not a criminal offense but can fine up to CZK 15,000. People who commit crimes under the influence of drugs have different laws and punishments for them. In 2013, Czech Republic legalized the use of cannabis for therapeutic purposes.

ARGENTINA

Argentinean population primarily consumes cocaine and marijuana. Not only these, pasta base *or* cocaine paste is also in high demand. Argentina is a processing point for the export of cocaine paste. More than 35% of the population is addicted to more than one drug, addiction to more than one drug is called 'polydrug use'. The drug of choice is marijuana; more than 80% of past year illicit drug users consume marijuana alone or in combination with at least one other drug. Laws in Argentina have been developing from the last 35 years, for example the range of the prison sentence is increased to between 4 and 15 years, and punished citizens for possession of personal use with a prison sentence of between one month and two years, which can be replaced by treatment or drug use prevention courses.

SOUTH AFRICA

After the Apartheid era, drug users and drugs have increased a lot in South Africa. South Africa is the largest illicit drug market in the Sub-Saharan Africa. Political and Economic isolation during the Apartheid era accompanied by a population burst increased drugs in S. Africa. South Africa is one of the main cocaine trafficking routes in Africa; smugglers go through this way thus spreading drugs in South Africa. Not only this, incapability of South African government to keep a proper check on borders and low participation in the economic world is also responsible for increasing drugs and users in the South African area. According to national surveys, the current use of cannabis in adolescence is from 2% to 9% and among adults 2%, cocaine (0.3%), mandrax (0.3%), amphetamine-type stimulants (0.2%), opium (0.1%) and hallucinogens (0.1%). In the last 2 decades, medical facilities and rehabs have increased in South Africa. As per rehabs in South Africa, people seeking treatment are addicted the most to cannabis. South Africa's way of preventing drugs has not been much effective, the country is not able to prevent drug trafficking through its permeable borders. This is where the problem stands; drug abuse in South Africa can only be stopped by more effective border security as well as in cities such as Cape Town and Gauteng with major demand for drugs.

Debate on decriminalization of cannabis:

There have been raising campaigns on the decriminalization of cannabis, this is due to the increased users of cannabis that will be difficult to prevent. Until recently, the South African court allowed its citizens to grow and smoke cannabis at home.

Bloc Positions:

Being the Deputy-Chair of WHO committee, I would like the delegates to know their country's stance properly and what other countries they could make a bloc with. To make it clear, a bloc is an alliance which is created to gain support from countries with similar laws. For example, USA and France share similar views on the Syrian crisis, so they are capable of making a bloc with each other (**Note: A bloc can contain numerous countries**). On the other hand, countries like India and Pakistan can make a bloc as they share similar views on LGBT (**Note: countries with resentments in real can make blocs in MUNs only if they share similar views and stance**)

The agenda for the WHO committee is illicit drug abuse in the developing world; the main concentration of the committee should be the developing world.

What could be the possible bloc positions in WHO committee?

Out of the committee, 3 blocs can be made (though, all of the delegates are free to make choice whether they want to join a bloc or not)

- i. Countries which have decriminalized drugs and citizens are allowed to take drugs in small quantities
- ii. Countries which have criminalized drugs and citizens can be punished if they take drugs
- iii. Countries with extreme laws, i.e. death penalties to citizens taking drugs

Delegates, some of you might be attending an MUN for the first time. You do not need to worry, prepare on your topic well, know your country's stance on current affairs related to the agenda, and crucially know your foreign policy (countries your country has good relations with and similar laws on a particular agenda).

PATTERN OF RESEARCH (IF REQUIRED)

There are several research patterns that can be followed by the delegates if required:

- ★ A thorough reading of the background guide
- ★ Begin with a thorough research of your country, it's geographical position, culture, society and foreign policy,
- ★ Move on with a detailed research on the agenda, at a wider scale, understand its whereabouts and the main countries involved
- ★ Stance of your country on the agenda (read statements by country officials, if possible)

- ★ Make subtopics on the agenda and give a detailed reading about each one of them
- ★ Prepare a list of solutions and actions that can further be adopted for the agenda at hand
- ★ Assemble proofs or evidence for any important piece of information or allegation that you'd be using in the committee.

Several delegates have doubts on how to structure their speeches, this is totally on the individual wish of the delegate, however, some patterns have been suggested below:

- ★ Premise-Analysis-Example
- ★ Problem-Solution-Benefits
- ★ Past-Present-Future Scenario
- ★ What-So What-Now what

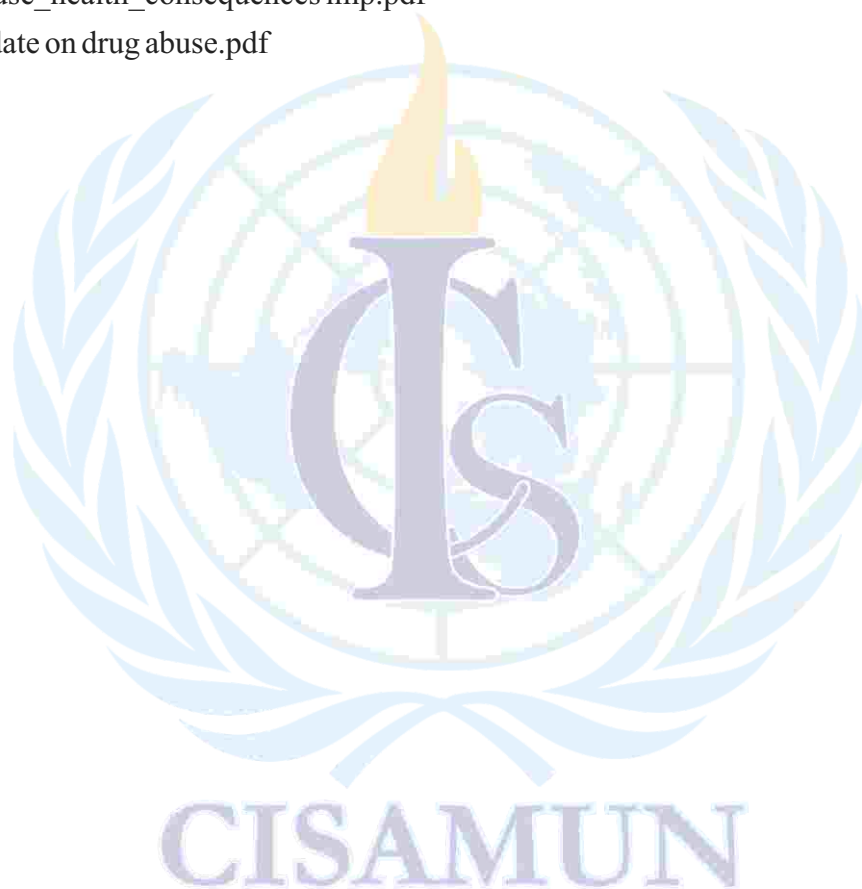
EVIDENCES OR PROOFS IN THE COMMITTEE

- ★ UN reports
- ★ Official government reports
- ★ Reuters
- ★ Under no circumstance will evidences from Wikipedia, amnesty international, regional organizations or newspapers like the New York Times, Times of India etc. be accepted. Though they can be used for better understanding of the agenda.



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POSITION PAPER GUIDELINES

Position papers are usually one to one-and-a-half pages in length. Your position paper should include a brief introduction followed by a comprehensive breakdown of your country's position on the topics that are being discussed by the committee. A good position paper will not only provide facts but also make proposals for resolutions.

A good position paper will include:

- A brief introduction to your country and its history concerning the topic and committee;
- How the issue affects your country;
- Your country's policies with respect to the issue and your country's justification for these policies;
- Quotes from your country's leaders about the

issue;

- Statistics to back up your country's position on the issue;

- Actions taken by your government with regard to the issue;

- Conventions and resolutions that your country has signed or ratified;

- UN actions that your country supported or opposed;

- What your country believes should be done to address the issue;

- What your country would like to accomplish in the committee's resolution; and

- How the positions of other countries affect your country's position.

SAMPLE DRAFT RESOLUTION

General Assembly Third Committee

Authors: United States, Austria and Italy

Signatories: Greece, Tajikistan, Japan, Canada, Mali, the Netherlands and Gabon

Topic: "Strengthening UN coordination of humanitarian assistance in complex emergencies"

The General Assembly,

Reminding all nations of the celebration of the 50th anniversary of the Universal Declaration of Human

Rights, which recognizes the inherent dignity, equality and inalienable rights of all global citizens, **[use**

commas to separate perambulatory clauses]

Reaffirming its Resolution 33/1996 of 25 July 1996, which encourages Governments to work with UN bodies

aimed at improving the coordination and effectiveness of humanitarian assistance,

Noting with satisfaction the past efforts of various relevant UN bodies and nongovernmental organizations,

Stressing the fact that the United Nations faces significant financial obstacles and is in need of reform,

particularly in the humanitarian realm,

1. Encourages all relevant agencies of the United Nations to collaborate more closely with countries at the

grassroots level to enhance the carrying out of relief efforts; **[use semicolons to separate operative clauses]**

2. Urges member states to comply with the goals of the UN Department of Humanitarian Affairs to streamline

efforts of humanitarian aid;

3. Requests that all nations develop rapid deployment forces to better enhance the coordination of relief

efforts of humanitarian assistance in complex emergencies;

4. Calls for the development of a United Nations Trust Fund that encourages voluntary donations from the

private transnational sector to aid in funding the implementation of rapid deployment forces;

5. Stresses the continuing need for impartial and objective information on the political, economic and social situations and events of all countries;
6. Calls upon states to respond quickly and generously to consolidated appeals for humanitarian assistance;
7. Requests the expansion of preventive actions and assurance of post-conflict assistance through reconstruction and development;
8. Decides to remain actively seized on the matter. **[end resolutions with a period]**

PREAMBULATORY AND OPERATIVE CLAUSES

PREAMBULATORY CLAUSES

The preamble of a draft resolution states the reasons for which the committee is addressing the topic and highlights past international action on the issue. Each clause begins with a present participle (called a perambulatory phrase) and ends with a comma. Preambulatory clauses can include:

- References to the UN Charter;
- Citations of past UN resolutions or

treaties on the topic under discussion;

- Mentions of statements made by the Secretary-General or a relevant UN body or agency;
- Recognition of the efforts of regional or nongovernmental organizations in dealing with the issue; and
- General statements on the topic, its significance and its impact.

SAMPLE PREAMBULATORY PHRASES

Affirming
 Alarmed by
 Approving
 Bearing in mind
 Believing
 Confident
 Contemplating
 Convinced
 Declaring
 Deeply concerned
 Deeply conscious
 Deeply convinced
 Deeply Disturbed
 Deeply Regretting
 Desiring
 Emphasizing
 Expecting
 Emphasizing
 Expecting
 Expressing it's appreciation
 Fulfilling
 Fully aware
 Emphasizing
 Expecting
 Expressing its appreciation

Fulfilling
 Fully aware
 Further deploring
 Further recalling
 Guided by
 Having adopted
 Having considered
 Having examined
 Having received
 Keeping in mind
 Noting with deep concern
 Nothing with satisfaction
 Noting further
 Observing
 Reaffirming
 Realizing
 Recalling
 Recognizing
 Referring
 Seeking
 Taking into consideration
 Taking note
 Viewing with appreciation
 Welcoming

OPERATIVE CLAUSES

Operative clauses offer solutions to issues addressed earlier in a resolution through the perambulatory section. These clauses are action oriented and should include both an underlined verb at the beginning of your sentence followed by the proposed solution. Each clause should follow the following principles:

- Clause should be numbered;
- Each clause should support one another and continue to build your solution;
- Add details to your clauses in order to have a complete solution;
- Operative clauses are punctuated by a semicolon, with the exception of your last operative clause which should end with a period.

SAMPLE OPERATIVE PHRASES



Accepts	Encourages
Affirms	Endorses
Approves	Expresses its appreciation
Authorizes	Expresses its hope
Calls	Further invites
Calls upon	Further proclaims
Condemns	Further reminds
Confirms	Further recommends
Congratulates	Further requests
Considers	Further resolves
Declares accordingly	Has resolved
Deplores	Notes
Designates	Proclaims
Draws the attention	Reaffirms
Emphasizes	Recommends
Encourages	Regrets
Endorses	Reminds
Expresses its appreciation	Requests
Expresses its hope	Solemnly affirms
Further invites	Strongly condemns
Deplores	Supports
Designates	Takes note of
Draws the attention	Transmits
Emphasizes	Trusts