The Hague International Model United Nations Qatar 2013 | 29th of January – 1st of February 2013

Forum: Human Rights Commission

Issue: Right to Universal Health Care

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Introduction

The Human Rights Commission has a strong interest in ensuring the right to universal health care. To ensure this right to everyone, effective health care systems must be established in every country. In the past, the UN has mandated the World Health Organization (WHO) to survey nations to collect statistics and write reports regarding the effectiveness of health care systems in each country. Statistics such as infant mortality rates and life expectancy reveal the extent to which universal health care is being provided. Reports show that while some nations have created the world's health systems, others have less extensive capabilities. In order to guarantee the right to universal health care in all nations, the UN has taken it upon itself to facilitate and advise nations on the optimal method to provide health care to their citizens. The UN recognizes that there are a variety of viable ways to attack this issue, and so it remains actively seized in the matter.

To solve this issue, the delegates of the Human Rights Commission must create and pass a resolution that outlines and facilitates the establishment of effective universal health care in each nation, providing for everyone. In order to do this, the delegates of this forum should study success stories and learn from the failures of the past. By evaluating the best solutions, this forum can construct a powerful resolution.

Definition of Key Terms

Health Care

'Health care' is a state-sponsored system that ensures the mental and physical well-being of all citizens of a nation through public or private medical care. These health care systems can be provided through a variety of methods, and is sometimes even provided for free to citizens.

Health Insurance

'Health insurance' is financial protection provided by a private company or a public fund that

The Hague International Model United Nations Qatar 2013 | 29th of January – 1st of February 2013 assists the benefactor by covering all or part of the cost associated with preventative medical care and/or costs to treat illnesses or injuries. Health insurance is paid for through regular payments in the form of premiums or taxes.

Universal

'Universal' is an adjective that is most commonly used to describe the degree to which health care is provided. True universal health care means that all citizens are accommodated for, regardless of age, gender, race, ethnicity, employment status, income level or any other discriminatory factor.

Private vs. Public

Companies that provide health insurance or other health care benefits in order to make a profit are known as private sector health insurance companies. These companies make a profit by billing monthly premiums to individuals. In order to receive financial protection and insurance for medical expenditure, these premiums must be paid. In contrast, public plans offered by the federal or state government do not make any profit. Instead, public plans are funded either through various taxes paid directly to the government.

Background Information

A common theme among health care systems is the concept of health insurance in some form. The idea behind health insurance is that the costs of life-saving medical treatments are very large and often unpredictable. Health insurance takes the burden of this immense one-time sum of money and converts it into smaller, regular payments. Health insurance funds then take these small payments and use it to pay medical bills as needed for all its subscribers. Since insurers collect money from everyone, there is always a significant quantity of money that can be used to pay for medical treatment for the few that need it. These insurers can be private companies paid by premiums or government organizations funded by taxes. In this way, health insurance is an integral part of universal health care systems. Such systems have been set up in many diverse countries through a variety of methods and with varying degrees of success.

The diversity world's health care systems are of substantial importance. For example, Canada and the United Kingdom are two More Economically Developed Nations (MEDCs) where necessary medical care is provided for free to citizens, and is funded through direct taxation to residents. Furthermore, Costa Rica is an example of a developing nation with a highly successful health care system. At the same time, Cuba is among the most successful communist countries in terms of providing universal health care. Additionally, Germany has enforced a law that creates compulsory private health insurance for all residents. Finally, the United States is in the middle of

implementing its own health insurance legislation, which will revolutionize its health care landscape.

Below is a table that compares these six nations in terms of their expenditure on health care. It is important to note that the United States is the only country listed that doesn't provide full universal health care. Presently, only approximately 88% of Americans are insured. The remaining 12% represent a shocking 44 million people.

Comparison of health care expenditure by nation

Country	Total Expenditure on Health	Total Expenditure on Health
	Care per capita (USD)	Care as % of GDP
Canada	\$4,445	11.4%
Costa Rica	\$1,165	10.5%
Cuba	\$503	11.8%
Germany	\$4,338	11.6%
United Kingdom	\$3,433	9.6%
United States	\$8,233	17.6%

The figures in the first column are calculated by dividing the total expenditure on health care by the population of the nation, whereas the figures in the second column are calculated by expressing the same total expenditure on health care as a percentage of the nation's Gross Domestic Product (GDP). Total expenditure on health care refers to the sum of money spent by all sources, such as public funds, private insurers, and the patients themselves. All figures are valid as of 2009/2010 and are published either by the Organization for Economic Co-operation and Development (OECD) or by the World Health Organization (WHO).

Major Countries and Organizations Involved

Canada

Canada has been a model of successful universal health care coverage since the Canada Health Act of 1984. The system, commonly called 'Medicare' aims to provide "universal coverage for medically necessary health care services provided on the basis of need, rather than the ability to pay." In real terms, this means that all medical expenses, excluding dental care, are covered by a public fund. This public fund is financed by the government through various taxes, duties and

excises. In general, Canadians strongly approve of their health care system. In fact, according to one Canadian labor union, 86% of residents are in favor of public health care solutions.

Costa Rica

Costa Rica is perhaps the prime example of universal health care coverage in a developing country. The main method of providing health insurance in the nation is through the Instituto Nacional de Seguros (INS), a state-owned insurance company. Although insurance rates depend upon age, gender and other factors, once an individual has obtained an insurance policy, the expenses for dental and vision care as well annual check-ups are fully covered. Costa Rica is also a popular regional destination for medical tourism. Patients from other countries visit Costa Rica due to cost-savings and overall better provisions for medical care.

Cuba

The Cuban health care system is arguably the foremost model amongst communist countries. The example proves that successful health care systems are sustainable in non-democratic nations. Cuba is among the only nations where all hospitals and clinics are state-owned and state-run, following communist ideals. The success behind the Cuban health system comes from several trade and economic embargoes being placed on the country. Due to these heavy restrictions, Cuba was forced to develop a controversial indigenous medical industry. In addition, Cuba's constitution states, "Everyone has the right to health protection and care. The state guarantees this right." In the 1960s, this right was realized through the creation of the Ministry of Public Health, which has been responsible for overseeing extremely effective programs such as the National Immunization Program, the Rural Social Medical Service and the governing of a nation that boasts one of the highest rates of physicians per 1000 people in the world. In particular, the Rural Social Medical Service has been lauded for facilitating the availability of professional doctors and nurses to the most remote parts of the island nation.

Germany

Germany has one of the world's oldest and arguably most successful health care systems. Currently, health care in Germany is privately funded rather than by a government or public fund. However, the law states that it is mandatory for Germans to pay 8% of their gross income to a non-profit 'sickness fund'. Despite the steep price, German health insurance has several benefits over those of other nations. For example, Germans never pay any sort of deductible fee per hospital visit, or any other surcharges in order to obtain health care. Furthermore, health insurance is provided without discrimination towards those with pre-existing medical conditions that would otherwise disgualify them from general insurance policies.

United Kingdom

The United Kingdom is strongly "devoted" and fiercely proud of its health care system, which is known as the National Health Service (NHS). The NHS was created over 60 years ago, with the ideals that public medical care will "meet the needs of everyone, be free at the point of delivery, and be based on clinical need, not ability to pay". In its long and storied history, the NHS has earned its reputation through various medical advances and discoveries, such as the discovery of the structure of DNA in 1954, the development of the contraceptive pill for women in 1961, and the implementation of MRI scans in the 1980s. These accomplishments are even more impressive considering the fact that the NHS is funded by general taxation of citizens. The majority of funds are then used to provide free health care to residents, while a small portion is used for medical research. Furthermore, this is all achieved without government spending surpassing 10% of the nation's Gross Domestic Product (GDP).

United States

In recent years, the United States has been heavily embroiled in the universal health care debate. Its two-party political system was at a deadlock over the issue for a number of years, until President Barack Obama of the Democratic Party was elected in 2008. In the months after being elected, Obama fought to enact the Patient Protection and Affordable Care Act (PPACA), also informally referred to as 'Obamacare', which aims to revamp the American health care system. The bill was finally signed and ratified in March, 2010, after much controversy. The PPACA will realize its goals by creating incentives for all citizens to be covered by private health insurance without discrimination. This means that when the law is put in effect in 2014, all private insurance companies must charge the same rate to everyone, regardless of race, gender and pre-existing medical conditions. This also means that the 44 million Americans that are currently uninsured will be covered by a mandatory private health insurance plan.

World Health Organization

This first international health organization called the Office International d'Hygiène Publique (OIHP), which was deeply integrated in the 'League of Nations' and was created to foster cooperation and mutual benefit among participating nations. The fall of the League of Nations after World War II meant that there was a need for a new global medical organization, and thus the World Health Organization (WHO) was founded on April 7, 1948. The original charter stated that the organization's goals were to create a sense of solidarity and medical cooperation amongst member nations of the UN. As WHO has evolved, it has become the world's database for medical illnesses and the main agency in charge of surveying international public health. WHO remains a reputable source of health statistics, the most important worldwide organization for disease outbreak reporting and also the UN's central organization in charge for Millennium Development

Goals pertaining to public health and medicine.

Relevant UN Treaties and Events

The right to health in general has been a prioritized topic of discussion in the UN since its inception in the 1940s, however the dialogue evolved since then to include the right to universal health care. Some of the organizations and treaties created by the UN include:

- Universal Declaration of Human Rights (Article 25), 10 December 1948 [A/RES/217A(III)]
- The Right to the Highest Attainable Standard of Health, 11 August 2000 [E/C.12/2000/4]
- Constitution of the World Health Organization, 22 July 1946

Possible Solutions

To ensure the goals of this forum, delegates of this conference must propose solutions that will enable all nations to provide universal health care. While delegates are encouraged to be creative and put forward original solutions in their resolutions, there are several existing ideas that delegates can adapt.

State-Owned or State-Run Hospitals

State-owned hospitals are an example of the purest form public health care. Delegates can look to the Cuban example for its commendable resourcefulness and successfulness. This system of health care is advantageous due to the government's ability to actively integrate health care directly into society through laws and other legislation. For example, drawing from Cuba once again, the Cuban Ministry of Public Health created the National Immunization Program, which was administered through state-run hospitals and was extremely effective in eradicating several infectious diseases that threatened approximately half a million children. Today, Cuba boasts zero cases of almost all vaccine-preventable diseases. This highlights how an active government can play an essential role in providing public health care by administrating and running state hospitals directly.

According to experts, state-run health care systems are most effective when medical care is focused on community health care and well-being, such as the National Health Services in the United Kingdom. It is effective in achieving its goals largely due to extensive publicity and good public perception of the program. In contrast, many federal systems around the world unfortunately

The Hague International Model United Nations Qatar 2013 | 29th of January – 1st of February 2013 fall prey to the inefficiency of large bureaucracies. When writing a resolution based on this type of health care system, delegates should remember to include clauses that build a procedure of checks and balances with the purpose of monitoring government agencies for inefficiency. Delegates that support this type of health care system should also be aware that a major criticism to this idea is that such systems are easily corruptible and can be very inefficient when they are not monitored closely.

Mandatory Private Insurance

A popular option for several developed nations, mandatory private insurance is a suitable method to provide universal health care. As mentioned earlier, nations such as Germany and the United States have successfully implemented or are in the process of implementing this system. Mandatory private insurance is characterized by the availability of a variety of insurance companies providing a larger variety of medical insurance plans, and as such it is preferred by capitalist nations where competition in every industry is encouraged. While governments must enforce regulations on this industry to ensure that citizens are universally insured, the freedom provided to private companies is the defining trait of this system.

The benefits of this approach include greater efficiency and better cost-effectiveness. Private companies are considered to be the most efficient means of providing health insurance because it is in their interest of profit to keep spending as low as possible. In comparison to public or state-run systems, this profit incentive is the main reason for little spending outside of the core health care system and thus higher efficiency. In theory, these companies can also provide the best cost-effectiveness for treatments. By letting companies dictate the price of insurance, the competition between companies will keep costs to the 'consumer' or citizen at a minimum, once again highlighting the effectiveness of the incentive of profit.

The brutal reality of mandatory private insurance can sometimes be seen, despite the theoretical benefits of the system. While it is not the case for all health care systems that follow this practice, previously in the United States it has been reported that prices were artificially increased by the health insurance industry. It was found that companies and hospitals allied together to bill higher prices and this illegal exploitation of consumers was against the competitive values of

The Hague International Model United Nations Qatar 2013 | 29th of January – 1st of February 2013 capitalist societies. In other words, the lack of competition between companies forced the general public to pay higher prices as they were left with no other option of availing health care.

Additionally, due to insufficient regulations, health care was not provided universally. In fact, prior to the new health care reform law (PPACA), insurance firms regularly discriminated between who was given health insurance, based on income and 'pre-existing medical conditions'. The good news is that such practices will be outlawed in the United States once the 'Obamacare' or PPACA bill is enacted in 2014.

Delegates who sponsor this style of health care should keep in mind that the goal of mandatory private insurance to is to provide health care to all citizens, therefore fulfilling the requirement of 'universal' health care. Furthermore, delegates should be aware of the potential pitfalls of this system and ensure through written clauses that proposed universal health care systems will be protected from such disastrous outcomes.

Public Health Care Solutions

Public health care solutions are essentially public funds that pay for medical care at private facilities. Examples of this system primarily include Canada and several western European countries.

Private-Public Partnerships

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