

SSUNS
World Health Organization General Assembly
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Non-Communicable diseases (NCDs) are commonly known as chronic diseases, which are not passed from person to person. They are a disease that take a long time to develop and in a generally slow progression. The four main types of non-communicable diseases are cardiovascular diseases (like heart attacks and stroke), cancers, chronic respiratory diseases (such as asthma) and all types of diabetes. The delegation of Finland understands the major death toll NCDs wage on the global population. NCDs kill 38 million people each year, cardiovascular diseases account for 17.5 million deaths annually, followed by cancers (8.2 million), respiratory diseases (4 million), and diabetes (1.5 million). Finland realizes that these statistics are truly horrifying and the fact that it happens in high-income and low/middle-income countries alike does not make the matter better¹. Finland recognizes NCDs as a global problem and is already in agreement with the WHO's response.

What this delegation refers to is the 2011 Global Action Plan that 190 countries already agreed upon. The plan details that under the leadership of WHO, the use of global mechanisms to reduce the avoidable NCD burden including a Global action plan for the prevention and control of NCDs 2013-2020. The plan aims to reduce the number of premature deaths from NCDs by 25% by 2025 through nine global targets. The nine targets are focusing in part by recognizing factors such as harmful use of tobacco; negative uses of alcohol, unhealthy diet and no physical activity that increase the chances that people develop these diseases². The Republic of Finland was one of the

nations who agreed with this plan of action because it offers a menu of affordable, positive interventions for meeting the nine global targets such as banning hazardous forms of tobacco and alcohol advertising, changing trans fats with polyunsaturated fats, protecting and encouraging breastfeeding, and preventing certain types of cancer through regular, covered, and required screening³.

Finland, would in fact, like to make an addition to this plan by adding a program that gets the community of the global target involved by creating activities that increase awareness of NCDs, what they are and how to prevent them, but also bring fun to the table with school programs to get the kids interested and TV advertising for families to really get the people involved. Finland is committed to these kinds of measures as well as continuing the plan the World Health Organization has already set in place.

In conclusion, The Delegation of Finland would like to state that the UN should continue the global plan of action that was already set in place back in 2011 and agreed upon by 190 countries. Finland believes that the death toll waged by NCDs has been slowly increasing since 2008 and that with the program we propose will only increase the progress that this plan is making on finally making NCDs a thing of the past. So the delegation of Finland would encourage all UN countries to agree and put more resources in the global action plan we already have and to propose anything that can prove useful to this plan so we can make the world a better place together as one.

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3. http://www.who.int/nmh/countries/fin_en.pdf

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In Article 25.1 of the Universal Declaration of Human Rights (1948) states:

“Everyone has the right to a standard of living adequate for the health of himself and of his or her family, including food, clothing, housing and medical care and necessary social services”¹. That means that every single person in the world regardless who they are deserves all the necessities required to live. Global pharmaceutical development is imperative to curing unsolved diseases and saving lives on a global scale, while universal access to medication is important to the distribution of medicines and medical supplies to every single person in the world. The problem that the World Health Organization faces is that they haven’t been able to find a permanent solution to give all of the world access to medication nor to stimulate pharmaceutical development in every high-income nation or low-income nation.

The delegation of Finland is opened to and suggests that all fellow UN Nations should come together, put all of our available resources on the table, and find a permanent solution so every nation has advanced access to medication and that every part of the world is receiving and contributing to pharmaceutical development on a grand scale. This delegation understands that it will be no simple task but is eager to help unite the UN for a final solution.

Finland has many ideas and some policies that they already have in place in their own country. For example, Finland already offers its citizens universal healthcare. Health promotion, including disease prevention has been the main focus of Finnish

healthcare policies for years. This has resulted in the complete demise of certain communicable diseases and improvement in the health of population. The quality of service in Finnish healthcare is considered to be good; according to a survey published by the European Commission in 2007, Finland belongs to the top 5 of countries who are most satisfied with their healthcare. In average 88% of Finnish respondents were satisfied compared with the EU average of 41.3%². The delegation of Finland also recognizes the possibility of free healthcare, as it does work positively for the nation of Canada.

The delegation of Finland considers Universal Access to Medication and distribution as their highest priority. For without the general distribution of medicines worldwide there will be no opportunity to achieve global pharmaceutical development. Finland is aware of the current situation some countries have with pricing policies. The fact is that pharmaceuticals have different traits from other consumer products and this causes the exchange between consumers and producers in pharmaceutical markets to differ from the regular responses seen in the demand and supply of a market. Originally the World Health Assembly formed a resolution for an international pricing policy claiming to be a solution, but recent surveys conducted in a variety of states by WHO share similar conclusions. In summary, the surveys showed that

1. In low and middle-income countries, medication prices are high, especially in the private sector, reaching in some cases 80 times the international reference price.
2. Availability in low-and middle-income countries can be low, particularly in the public sector. WHO also found the average availability of essential medications was 35% and with low availability in the public sector many have to turn to the private sector, where prices are high.

The Republic of Finland believes that the WHO General Assembly should focus on finding a solution so that the low-income/middle-income countries should have the great access to medicine that high-income countries have³. The delegation of Finland offers both a long-term and short-term solution to this topic. This delegation recognizes a NGO initiated by WHO back in 2001 to regulate pharmaceutical prices but would like to propose a new NGO as an immediate and short-term solution⁴. This NGO would be given the right to intervene and enforce the strict pricing policies casted by the United Nations, and would perform yearly inspections on the Pharmaceutical markets that are giving residents in need of their prescribed drugs their medicine. If a country was found guilty of breaking the policies set they would be penalized and have to compensate every resident that couldn't buy their PRESCRIBED drugs due to the governments unlawful pricing. Universal Healthcare, that we and other countries like Canada already use in our acclaimed health plan, would be the proposed long-term goal because if all taxpayers of a nation are paying then people can get their prescribed drugs free through their healthcare.

The delegation of Finland considers the involvement of private pharmaceutical as its most controversial point, as we need these private companies to create the medicines and research they are always at risk for corruption. We believe that pharmaceutical companies should compromise with the government of the country in which they are selling their product so there is control. We also invite any other suggestions to keep the private companies in check.

In conclusion, the delegation of Finland says that Universal Access to Medication should be the main topic in the WHO General Assembly and that every nation attending should provide their resources to any plan of action that we vote on.

Returning to the topic of Global Pharmaceutical Development, Finland believes that the world is already on a good standing in research and with increased global access to medicine it can only get better. The delegation of Finland would like to really lead by example in this topic and share with the committee our policies and ideas.

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One of the most major yet un-talked topics in the World Health Organization is the topic of gender-based inequities in global health. The UN and WHO both believe that every person despite sex, race, and other should have basic human rights especially in terms of overall health. Gender inequality ruins the physical and mental health of millions of girls and women across the world, and also of boys and men despite the many benefits gender inequality gives men through resources, power, and authority¹.

The delegation of Finland honestly believes that there should be true and permanent equality between men and women. In the world we live today there is gender inequality everywhere: jobs, schools, law, and especially in health. The delegation of Finland is discussing this topic thoroughly right now and is in the process of creating reform in both male and female problems. In Finland the differences in wellbeing and health, social rejection as well as sufficient and fair social welfare and health care services have become important themes in the discussion concerning men's and women's equality problems². Finland wants to cooperate with the committee in order to share and acquire possible solutions to solving gender inequities in wellbeing and health.

The delegation of Finland considers human rights and reform as their most controversial point and highest point of this topic. The UN interprets basic human rights and promotes it, which means that every pregnant woman deserves the right to look at all their options when pregnant and that all men should seek psychiatric care when and

if needed. In Mexico, an amendment was passed in 2015 to expand the cases in which abortion is not considered a criminal action³. Women can now end pregnancies in the cases of sexual assault, incest, or if her life or health is at risk. Mexico City also allows abortion in any case as long as the pregnancy is terminated in the few months. Since this law was passed in 2007, more than 138,000 safe and legal abortions have been performed⁴. Finland believes that a framework, besides Planned Parenthood, should be made so that women are required to see and analyze all options in pregnancy so a woman does not feel trap and have all the tools to make the right decision in their case.

For men suicide rates have gone up (more than woman) and life expectancy has gone up (not as much as women) in the last 95 years⁵. Many men all around the world deny psychiatric help because they believe that it is an insult to their muscularity, we should invent a program or NGO that advertises/informs young boys (and girls) across the globe that it is healthy to express your feelings, problem, and concerns with someone as a long-term solution.

In conclusion, the delegation of Finland wants to create new frameworks and programs as solutions to this topic. Women should be able to have all options when pregnant and all men should feel comfortable to express their feelings just as much as women. That is what this delegation plans to point out.

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