

Committee: World Health Organization

Topic: Non-Communicable Diseases

Country: Senegal

Combatting Worldwide Non-Communicable Diseases

A non-communicable disease is a chronic disease that usually cannot be cured by medication or vaccines and typically has a long process or progression.¹ The four main non-communicable diseases are cancer, cardiovascular diseases, diabetes, and respiratory diseases. The three most common cancers within women are breast, lung and colorectal. For men, lung, colorectal, and prostate cancer are most common for this gender.

²Cardiovascular diseases include strokes and heart attacks. Respiratory diseases include asthma and other pulmonary diseases. Additionally, kidney, lung, and liver disease, arthritis, central nervous system diseases, autism, and a variety of mental illnesses and genetic disorders are fall into the category of NCDs. ³As of 2013, non-communicable diseases was the leading cause of death throughout the whole globe by serving as 63% of all the yearly deaths throughout the world. Each year approximately 38 million people die from these diseases with most of the prevalence in low-middle income countries (NCDs). It is estimated that every three of five deaths around the world are due to NCDs ultimately leading to the global cost roughly thirty trillion dollars over the course of the next thirty years or so. ⁴ Being one of the leading contributors to these diseases, tobacco has become one of the largest killers throughout the world. Following tobacco, the abuse of alcohol and drugs, the intake of salt and sugar, sleep apnea, obesity, and malnutrition are all causes of worldwide deaths every year. Many of the causes of these diseases are a variety of genetic abnormalities, the type of lifestyle and environment around the person, and heredity.⁵

The United Nations Non- Communicable Diseases Alliance was created to make a variety of resolutions and awareness programs through education and campaign set ups through governments in order to take action of stopping the intake of unhealthy food content like sugar and salt. Also, it strives to block the use of tobacco, alcohol, and drug abuse in order to spread healthier life-styles and alternative medication for these addictions.⁶ Due to 66th World Health Assembly, The World Health Organization Global Action Plan for the Prevention and Control of NCDs 2013-2020 was established. This plan gives the Member States, other non-governmental organizations through the UN, intergovernmental organizations, and private sectors steps to policy options between the years of 2013-2020, which will have nine main targets. One of which will focus on the reduction of 25% of premature deaths from these NCDs by the year of 2025.⁷ The NCD Alliance focused on all actions towards prevention for the control of NCDs post the 2015 framework and the development of the Millennial Development Goals. ⁸

The country of Senegal faces the problem of the many of the citizens dying for these non-communicable diseases. Roughly every year 587 people die within these borders due to the variety of diseases.⁹ Out of these deaths the top diseases includes strokes, which kills 9% of the population and with cancer and heart diseases at the fifth and sixth leading causes of these deaths at 5% of this country. ¹⁰ Although resources are

lacking, Senegal continues to try to combat this issue by joining and creating a variety of prevention programs. In 2009, Senegal established The National Health Development Plan of Senegal 2009-2018 giving citizens the opportunity to have universal access to all health services such as curative and adaptive in order to prevent and give successful health productivity throughout all aspects.¹¹ Senegal has a very high risk of receiving these non-communicable diseases due to the lack of water sources, health-care system developments, and unawareness within the country. As tobacco is a leading cause of deaths within countries worldwide, Senegal is apart of the Tobacco Control in Africa Project that strengthens the control of this product in all regions by creating other resources for these people.¹² All efforts are to be put towards this problem, since Senegal is drastically effected by this therefore causing them to focus on the prevention of these NCDs.

We the country of Senegal being a major victim of these diseases, would like to take all precautions and steps towards decreasing these NCDs on a global scale. Therefore we propose the implementation of Medic Wheels and have the global utilization of the program Be Healthy Be Mobile. First, Medic Wheels will be created as a worldwide healthcare system that will be able to travel to a variety of countries across the globe. It will be based around all countries as many of citizens around the world face all the same and similar issues. This program will be stationed within the United States and be intertwined with all insurance companies within this country in order to ensure the accessibility to every country including both developed and underdeveloped. This will take all countries on board by providing a percentage of their yearly GDP in order to keep this international system running. Also, these mobile clinics will provide the development of further research of potential roads and tactics to be used in order to be used to decrease the diseases worldwide. There will be specialized cars that will go out to these countries by providing a variety of specialized treatments and check-ups for these people living with diseases and viruses. On top of this, all citizens will be expected to abide by a list of standards that will reduce the cause of these diseases through all aspects that lead to the cause of the NCDs. The focus of different medication will be shifted to the choice of a healthier lifestyle through management courses by proving more workout and better food intake options by reducing the intake of salt and sugar. Lastly, the implementation on a global scale of Be Healthy Be Mobile will better all countries. This program will have the power to reach out to all countries and their citizens through mobile phones by addressing the problem of these NCDs. This will establish the education of these people by helping them make healthier life choices to prevent these diseases via their mobile devices. The utilization of this technology helps create the prevention and management of this data through these phones by increases the benefits of these health systems by training these workers to set up these choices. By using these phones more people will access information and knowledge of possible precautions. All in all, Senegal would like to implement this solutions to help establish a better way of ending the spread of these non-communicable diseases worldwide.

Committee: World Health Organization

Topic: Global Pharmaceutical Development and Universal Access to Medication

Country: Senegal

Creating Universal Access to Medication and Pharmaceutical Companies

Both Africa and India have very little access to medications within their country. According to a World's Medicine Survey less than half of the world's population counted as having accessibility to medication causing the lack of proper care and treatment for these citizens. Low-middle income countries have less of a list of medicines that are more likely to decrease the amount of premature deaths than high-income countries due to the problems that arise because of affordability.¹³ Target 8e of the Millennium Development Goals states that pharmaceutical companies need to provide access to affordable medication throughout countries. Therefore making these medications affordable for all citizens within all nations.¹⁴ In August of 2008, a report was conducted by the Secretary General of the United Nations that said over two billion people didn't have access to medication around the globe.¹⁵ Regarding this problem, the TRIPS agreement in 1994 contributed to this as it was a forced World Trade Organization in order to protect the property rights and it sold and produced. This had to be done under the permission of the owner which included all the medicine eventually causing there to be no low price of a variety of generic drugs so citizens had to pay out of their own pockets or through their insurances.¹⁶ Throughout the world over sixty billion dollars goes into research while three-hundred billion dollars of revenue comes out of it for these pharmaceutical companies.¹⁷ Two types of standards of health and access to medication include Top-Down and Bottom-Up. Top-Down is ran through the government of each country while Bottom-Up is the actions taken by the society to control the pharmaceutical companies by using the people or other NGOs.¹⁸ The 2016 Access to Medicine Foundation was established with the goal of setting the standards of how all pharmaceutical companies should perform and improve of spreading medicine worldwide so there is more accessibility.¹⁹ The 2016 Index has a total of twenty companies as it is the top pharmaceutical companies throughout the world with more than 50% of these reaching the global pharmaceutical market.²⁰

The country of Senegal has a majority of the population impoverished. 54% of this population is below the poverty line.²¹ Senegal needs to improve their infrastructure due to the lack of resources within the country to provide stable health-care facilities and clinics. Currently within the country, there are around twenty main hospitals that have been set up.²² They have their healthcare system to be privatized. Pharmaceutical companies profit and sales all play a major role in the health sector of the country. Because of this system many citizens are unable to afford or receive help in time, resulting in more preventable deaths all because of the use of privatization within the country.²³ Partnering with the NGO UNAIDS, Senegal has created the Senegalese Antiretroviral Drug Access Initiative is used to combat HIV/AIDS within the country by producing prevention reports and other medical necessities.²⁴ Due to the lack of funding, the main focus of providing cost-effective treatments worldwide has become a major

issue in developing this system within the country.²⁵ Therefore, Senegal wants to establish cheaper medications around the world to allow for more access in both developed and underdeveloped countries.

We the country of Senegal are aware of the issues of the lack of universal access to medication and the development of pharmaceutical development worldwide. Due to this, we would like to implement the CHAIN solution in order to help the spread of these medication and pharmaceutical companies. CHAIN is a five-step plan that will ensure all countries gain access to these mobile health care systems worldwide. This will be a chain reaction of transportation systems all across the globe. It will include cars, helicopters, airplanes, international ships, and have national health facilities. These facilities that will serve as the headquarters of this program will be located within countries like the United States as it has one of the most stable and developed health care systems throughout the world. Also, other headquarters will be stationed within Canada, Central Africa, European Nations, and certain parts of Asia and the Middle East. We will try to provide each continent with at least one headquarter within a country that is stable and secured to make sure this is the most effective place to be. All these headquarters will receive supplies from other pharmaceutical companies that sponsor this, as it is a way to get their products out by not having to ship them themselves and serve as a beneficial factor for all countries. As the United States has twenty main pharmaceutical companies within their country, we would like to utilize these as an example since they have benefitted the US in becoming a major contributor to global health success. All these headquarters will provide health care professionals from their countries and other stable and developed areas with a increased supply of medication and health care systems. These health care professionals will include doctors and nurses who will serve as volunteers or trainers for these transportation systems. Having these different transportation systems these mobile clinics will be able to reach both developed and underdeveloped countries the accessibility of roads, canals, seas, other bodies of water, and by air. These sponsors will provide proper vaccines, medications, and treatments for all diseases containing both over the counter and prescription drugs. This will allow for a distribution of treatments, checkups, and other helpful tools and necessities for these citizens. These mobile clinics through CHAIN will be partnered with a variety of NGOs through the United Nations as they will team up to help one another within all aspects of expanding these medications and pharmaceutical companies. By doing so, all countries will receive more benefits and support from surrounding nations, as they will have more access to these treatments as the NGOs will provide more sponsors and resources to maintain their success. Overall, by implementing CHAIN Senegal strongly believe the expansion of medication and pharmaceutical companies globally will dramatically increase to all countries.

Committee: World Health Organization

Topic: Gender Based Inequities in Global Health

Country: Senegal

Stopping Gender Based Inequities in Global Health

Gender based inequities in global health is between both males and females regarding their overall behaviors and actions towards their health problems and the difference amongst these genders. Inequities is defined as the “lack of fairness” or not having justice about a particular subject.²⁶ Due to many countries lacking certain access to health care, both genders are effected in a negative way, which ultimately plays a major role in the development of their health. Social norms and cultural practices in a variety of places play a major roles in influencing how men react with their partners on a intimate level through reproduction and other behavioral actions resulting in a variety of attitudes and how they go about these different issues that can arise from their sexual intercourse.²⁷ Recent studies show, including the Global Burden of Disease study, which was ran by the Institute for Health Metrics and Evaluation in 2010 presented the data that constructed the conclusion that women all across the globe had a longer life expectancy than men. This was conducted during the years of 1970-2010 and during that time the female life expectancy was raised to 73.3 years from 61.2 and males went from 56.4 to 67.5 years resulting in women to still have a longer predicted life. With women outliving men roughly around 6 years more, central sub-Saharan Africa was leading the world with the gap between the genders with men living 5.3 years less than females within the country.²⁸ Regarding women, many females across the globe lack the equal conditions of rights between their health in order to benefit them as a whole compared to men. Because of this all countries should utilize gender analysis that acts as a study by using other partners or organizations, which puts the needs of these women above anything else by proving a variety of projects and activities to help serve this issue.²⁹

All the factors of ethnicity, ageing, social determination, and migration status effects both males and females as their face socially based oppressions that include work conditions, climate change, accessibility to proper healthcare systems, social capital, and all other certain aspects.³⁰ A problem that arises for these inequities is gender based-violence, which plays a role in developing more risks for women through their sexual behavior and identity leading too more vulnerability.³¹ Men have more of chance of developing chronic illnesses than women such as HIV/AIDS, liver diseases, and other major diseases. Males tend to commit suicide at a higher percentage than females due to the lack precautions of receiving psychiatric help to prevent death.³² The Women and Gender Equity Knowledge Network focuses on the reduction of these inequities between genders by defining unequal and unfair treatment between both males and females keeping women at a top priority as they struggle with having basic human rights.³³

The country of Senegal utilizes more of their citizens’ physical needs with not a tremendous concern on the mental health of each individual. They tend to spend less than 9% on their mental healthcare by having no national mental health

program within the country.³⁴ Senegal supports the Global Alliance for Africa, which helps different orphans and children within sub-Saharan Africa to get the access to certain medication and treatments that can deal with diseases like HIV/AIDS to help them become self-sufficient to decrease the gender gap between both males and females.³⁵ Senegal ratified the Protocol to the African Charter on Human and People's Rights of Women in Africa in order to support these females in all aspects of both mental and physical health.³⁶ In Article 7, of Senegal's Constitution it states the importance of equality for both men and women.³⁷ Senegal utilizes many education and community programs within the country to help the practice of good health within the country and have equal rights for both genders.

We the country of Senegal would like to combat the issue of gender based inequities among the global health. Therefore we propose implementing Wheel to and the program Genders Unite Not Fight. First, Wheel to will be a worldwide healthcare facility that will travel to both underdeveloped and developed countries across the world. Every citizen within these countries will gain access to these clinics to help them with all their health-related problems. This Wheel to system will capture the "Where to?" aspect by going and expanding to all continents and every nation. All nations will need to provide a percentage of their yearly GDP to help fund this system to make sure it is properly being ran and taken care of. All continents will have headquarters of these facilities. It will be a 2- sided healthcare system with the main focus on psychiatric and the proper wellness based off of the different conditions between both genders. This will help benefit the well being of both males and females. On top of this, a hotline center will be established in each of these systems in multiple different ways depending on a country's location to that citizens can reach out to address their problem and get the advice and help they need. Trained health care professionals and other volunteers from developed countries like the United States will be stationed to help these citizens in all of the headquarters. They will work to provide medical supplies and treatments with further research in order to save both male and female lives. Lastly, Genders Unite Not Fight will be implemented with the main goal of reaching out to surrounding countries about this major issue. This will be an app that will be created by the United Nations making it available to all countries throughout the globe. More developed countries will have a greater impact of this program as they have 90% more access to these phones and mobile devices. This will establish a system where all people can contact help in emergency situations and advice for the current issues. This will be used as a source of information by having these safe communities by providing a live chat room on each screen with proper help without the exploitation of these identities. Overall, Senegal would like to utilize all possible ways in helping these gender based inequities within global health.

¹ http://www.who.int/features/factfiles/noncommunicable_diseases/en/

² <https://www.unitypoint.org/homecare/article.aspx?id=c9f17977-9947-4b66-9c0f-15076e987a5d>

³ <http://www.livestrong.com/article/88312-list-noncommunicable-diseases/>

⁴ <http://www.veterinarypracticenews.com/June-2012/The-Facts-About-Non-Communicable-Diseases-And-One-Health/>

⁵ <http://www.livestrong.com/article/88312-list-noncommunicable-diseases/>

⁶ <http://www.veterinarypracticenews.com/June-2012/The-Facts-About-Non-Communicable-Diseases-And-One-Health/>

⁷ http://www.who.int/nmh/events/ncd_action_plan/en/

⁸ <https://ncdalliance.org/post-2015-development-framework-and-ncds>

⁹ http://www.who.int/nmh/countries/sen_en.pdf

¹⁰ <http://www.cdc.gov/globalhealth/countries/senegal/>

¹¹ <https://www.mindbank.info/item/2386>

¹² <http://ctc-africa.org>

¹³ <http://apps.who.int/medicinedocs/en/d/Js6160e/9.html#Js6160e.9>

¹⁴ <http://www.who.int/medicines/mdg/MDG08ChapterEMedsEn.pdf>

¹⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4855755/>

¹⁶ <http://www.who.int/intellectualproperty/topics/ip/tHoen.pdf>

¹⁷ <https://consumerist.com/2008/01/05/drug-companies-spend-almost-60-billion-on-marketing-30-billion-on-research-what/>

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http://www.uc.pt/en/fmuc/phdhs/Courses/healthhumandevlopment/analisar2-texto_1_.pdf

¹⁹ <http://www.accesstomedicineindex.org/2016-access-medicine-index-place-high-emphasis-how-pharmaceutical-companies-perform>

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- ²⁰ <https://understandingcentricity.wordpress.com/2016/05/11/top-12-pharmaceutical-biotechnology-in-2016-ranking/>
- ²¹ <https://www.cia.gov/library/publications/the-world-factbook/geos/sg.html>
- ²² https://en.wikipedia.org/wiki/Healthcare_in_Senegal
- ²³ <https://www.imf.org/external/np/pfp/1999/senegal/>
- ²⁴ http://data.unaids.org/publications/external-documents/isaarv-analysis2004_en.pdf
- ²⁵ <https://www.ncbi.nlm.nih.gov/pubmed/14565615>
- ²⁶ <http://www.dictionary.com/browse/inequity>
- ²⁷ http://www.who.int/gender/documents/Engaging_men_boys.pdf
- ²⁸ <http://www.who.int/bulletin/volumes/92/8/13-132795/en/>
- ²⁹ https://www.ghi.gov/principles/docs/wgge_principle_paper.pdf
- ³⁰ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4666892/>
- ³¹ <https://www.usaid.gov/what-we-do/global-health/cross-cutting-areas/gender-equality>
- ³² http://www.health.harvard.edu/newsletter_article/mars-vs-venus-the-gender-gap-in-health
- ³³ http://www.who.int/social_determinants/publications/womenandgender/en/
- ³⁴ <http://psychologyinafrica.com/profiles/2013/8/8/senegal-mental-health-profile>
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