



## Position Paper for Topic 1: NCD

Non-communicable diseases (NCDs) are becoming a very big problem in low and middle income countries (LMICs). In fact they will probably become the leading cause of death in LMICs by 2030. NCDs are diseases that cannot be passed from person to person (like cancer, diabetes, etc). LMICs generally have lower quality healthcare systems than higher income countries due to lack of sufficient resources, and their healthcare systems have traditionally been geared towards treating communicable diseases which, until now, were the leading cause of death. Now that these diseases are posing less of a threat, people are more likely to develop NCDs. This is because people are now living longer and more likely to develop an NCD. NCDs not only are deadly, but have been shown to have poor effects on the economy because they prevent people from being able to have jobs. Treatment for NCDs is very different than for communicable diseases, as unlike communicable diseases they often require long-term care, which healthcare systems traditionally geared toward communicable diseases cannot handle very well. Another factor is that NCD treatment is severely underfunded relative to other health areas, as historically, not many donors were willing to fund treatment for it. Solving the NCD problem would require work on preventing NCDs (most cost-effective), as well as treating people once they get them.

Canada is not an LMIC, in fact it is a very developed, high-income nation. Canada has a high quality public healthcare system that is well-equipped to deal with NCDs, so NCDs are not much of a problem in Canada.<sup>1</sup> In the past, Canada has opposed setting UN targets aimed at helping to deal with the NCD problem. One major concern for Canada about supporting these targets is money, as Canada does not wish to make the large donations that would be required to help solve the NCD crisis.<sup>2</sup> Additionally, Canada has often helped to remove certain aspects of global plans to help deal with NCDs, including removing passages that would have reduced the say of food and alcohol companies on health policy and removing a passage that would have acknowledged the importance of universal health care access.<sup>3</sup>

In committee, Canada will oppose any resolution regarding NCD prevention that would require Canada to provide funding to solve the NCD problem. Canada will also make sure that food and alcohol companies will not have a reduced say in public health policy, and will oppose any push for universal health access. Canada will overall take a passive stance towards NCD related problems, and convince other nations to do the same.

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1 [https://en.wikipedia.org/wiki/Health\\_care\\_in\\_Canada](https://en.wikipedia.org/wiki/Health_care_in_Canada)

2 <http://af.reuters.com/article/commoditiesNews/idAFLDE77G0K820110817?sp=true>

3 <http://www.cmaj.ca/content/183/15/E1099>



## Position Paper for Topic 2: Pharmaceutical Development and Access to Medication

Limited access to pharmaceuticals is a huge global problem. Pharmaceuticals are very different from other consumer products. When someone buys medications, they do not, in most cases, gain an economic asset, as it is illegal to resell medications in most countries; additionally, because doctors need to prescribe medication in order for a patient to purchase it, and the doctors also often do not know the price of what they are prescribing, it is very difficult for consumers to make informed decisions on which drug to purchase. Often consumers end up purchasing expensive patented medications, as they are unaware of alternative low-cost generic medications that have a similar effect. Introducing generic drugs to the market has been shown to reduce prices significantly. Additionally, in low and middle income countries, drug availability is limited, and is often too expensive for most to afford. The big issues with solving this problem at the international level is that it is extremely difficult to find a pricing strategy that will work worldwide. Many countries believe that market controls be a domestic issue and that the market should not be highly regulated. Also, globalization has often kept patented drug prices high in the name of intellectual property protection.

Even though Canada has a universal healthcare system, this does not cover prescription medications. In Canada, patented prescription drug prices are regulated by the Patented Medicine Prices Review Board (PMPRB). The PMPRB ensures that patented drugs are affordable and accessible to all Canadians.<sup>1</sup> At the international level, Canada has worked to supply 93 countries with low-cost, high-quality tuberculosis drugs.<sup>2</sup> Canada believes all people have the right to be able to access health services.<sup>3</sup>

In committee, Canada will plan on working with other countries to pass a resolution that would encourage countries to implement their own price controls, by providing incentives for countries to implement them. This program could receive funding from NGOs and/or the World Bank. Also, Canada would support launching an awareness campaign to educate patients and doctors on the availability of alternative low cost generic medications, so that they can make more informed decisions on which drugs to purchase and prescribe. Additionally, Canada will work to increase availability of prescription drugs in LMICs.

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1 <http://www.pmprb-cepmb.gc.ca/about-us/mission-and-values>

2 [http://www.international.gc.ca/development-developpement/partners-partenaires/key\\_partners-partenaires\\_cles/who-oms.aspx](http://www.international.gc.ca/development-developpement/partners-partenaires/key_partners-partenaires_cles/who-oms.aspx)

3 [http://www.phac-aspc.gc.ca/about\\_apropos/whocc-ccoms/index-eng.php](http://www.phac-aspc.gc.ca/about_apropos/whocc-ccoms/index-eng.php)



### Position Paper for Topic 3: Gender Inequities in Global Health

There are many gender based inequities in global health that are very detrimental. Some of them are caused by unavoidable biological differences, and these are not the inequities that we should be worried about, but others arise from our culture and social expectations, but many are unnecessary and avoidable. Males experience many disadvantages due to this. For example, males generally have shorter lives than females partially because of social expectations that encourage risk-taking. Also, males have much higher suicide rates and are less likely to seek help with mental health issues. Men often see illnesses as challenging to masculinity. Unfortunately, there is a lack of international cooperation in many male health inequities. Females also face many inequities. Many women do not have access to abortion, which can terminate unwanted pregnancies and often be important for maternal health. Additionally, about 358 thousand women die every year during childbirth due to preventable causes. This is often caused by inaccessibility of healthcare for women in low to middle income countries.

Some of these problems also exist in Canada. For example, the suicide rate in Canada is 17.04 per 100,000 for males and only 4.96 per 100,000 for females.<sup>1</sup> However, some other problems have been solved in Canada. For example, because of the public health system, high quality care during childbirth is very accessible for women. Also, Canada is one of the few countries in the world where there are no legal restrictions on abortion and women can always choose that option, which can give women bodily autonomy and be important to maternal health.<sup>2</sup> One of Canada's major goals as a WHO member is to help improve maternal health worldwide, and bring these benefits to people in other countries.<sup>3</sup>

In committee, Canada will work to further reduce health inequities towards women, by creating programs to be funded by NGOs that will help provide healthcare to women, especially during childbirth. Also, Canada will work to pass a resolution that would encourage all nations to legalize abortion when the mother's life is at risk. Additionally, Canada will work to start an awareness campaign about male suicide and other male health inequities, so that more people will work to solve these problems that have not been well-addressed in the past.

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1 [https://en.wikipedia.org/wiki/Suicide\\_in\\_Canada](https://en.wikipedia.org/wiki/Suicide_in_Canada)

2 [https://en.wikipedia.org/wiki/Abortion\\_in\\_Canada](https://en.wikipedia.org/wiki/Abortion_in_Canada)

3 [http://www.international.gc.ca/development-developpement/partners-partenaires/key\\_partners-partenaires\\_cles/who-oms.aspx](http://www.international.gc.ca/development-developpement/partners-partenaires/key_partners-partenaires_cles/who-oms.aspx)