

FORUM: Economic and Social Council

QUESTION OF: Ensuring the proper provision of medical services to lower-income classes

MAIN SUBMITTER: DPRK

CO-SUBMITTER: Austria, Indonesia

The Economic and Social Council,

*Applauding* the efforts that before the National Health Service was created in 1948, patients were generally required to pay for their health care and free treatment was sometimes available from charitable voluntary hospitals and some local authorities operated hospitals for local ratepayers (under a system originating with the Poor Laws),

*Emphasizing* how the health inequity is a problem, half the world's population was not able to access essential healthcare in 2017, and the children from the poorest 20% of households are more likely to die before the age of five than the children in the richest 20% of households,

*Keeping in mind* that according to "Centers for Medicare and Medicaid Services, National Health Expenditure Data, March 2020", national health expenditure (% of GDP) increased about 10 percent in 54 years,

*Taking note* of the fact that the World Bank has started the emergency support operations for developing countries around the world, using a dedicated, fast-track facility for COVID-19 (coronavirus) response; the first group of projects, amounting to \$1.9 billion, will assist 25 countries, and new operations are moving forward in over 40 countries using the fast-track process,

*Further recalling* that this health inequity led to a 1.4% decrease in GDP in European Union nations,

1. Calls upon the house to act in raising awareness on the topic of lower-income classes' medical services in order to inform the problem of the issue and raise people's awareness of solving problems, through ways such as but not limited to:
  - a. informing the public on the topic at hand in an innovative and approachable manner through utilizing media with means such as but not limited to:
    - i. posters,
    - ii. radio,
    - iii. billboards,
    - iv. TV programs,
    - v. social media,

- b. analyzing the following topics so that the public knows exactly and deeply about medical-services for low-income classes including content such as:
          - i. importance of medical services for low-income classes,
          - ii. the current situation of medical services for low-income classes,
          - iii. actions of the past to solve the problem;
2. Encourages nations to eradicate, the huge income gap between people, which is the source of inequity leading to the formation of low-income classes, through ways such as but not limited to:
  - a. forming and extending social field and providing jobs for social minorities including:
    - i. women,
    - ii. disabled people,
    - iii. senior citizens,
  - b. providing more full-time work opportunities for people that have a lower level of education;
3. Further encourages institutions like the World Bank to promote the improvement of hygiene infrastructure in less privileged regions through ways such as but not limited to:
  - a. providing loans to developing countries that need financial support with the promise that they will use this money to improve hygiene infrastructure,
  - b. hosting a summit conference with the World Health Organization on this topic to discuss the distribution of the resources and reach a consensus between countries;
4. Recommends countries to work more closely with other countries and organizations to find ways to provide medical assistance to lower-income classes in ways such as but not limited to:
  - a. encouraging organizations like the WHO to provide humanitarian aid to lower-income classes,
  - b. establishing healthcare laboratories to ensure international cooperation to search for more efficient methods to provide medical care to the lower-income classes,
  - c. requesting cooperation and aid from non-governmental organizations to help in less-privileged regions in ways such as:
    - i. working with Doctors Without Borders to provide human resources for the less-privileged in nations,
    - ii. working with the International Committee of the Red Cross (ICRC) to provide medical aid to people of low-income especially due to war and violence;

5. Requests the establishment of regulations commissioned by the Ministry of Health by regulating in different main aspects to curb the increase in medical expenses, through ways such as but not limited to:
  - a. devising a taxation system of flat sum system for the poorest 20% of households and a fixed rate system for the richest 20% of households,
  - b. creating a system to have people pay different amounts of medical expenses depending on their economic status by including rules such as:
    - i. allowing low-income classes to pay lower medical expenses that do not feel burdensome for the low-income classes,
    - ii. encouraging high-income classes to pay 40% of medical expenses at national hospitals and 60% of medical expenses at private hospitals,
  - c. transitioning from a post-payment system to a pre-payment system,
  - d. enhancing state control methods through ways such as:
    - i. nationally recruiting more nurses,
    - ii. supervising and regulating clinics' behavior such as excessive medical treatment through institutions such as the Health Insurance Review and Assessment Service.
  
6. Ensure all member states to keep the international health regulation, which is a legally binding instrument of international law that has a goal of Issue preventing, protecting against, controlling, and providing a public health response to the international spread of disease, by such ways but not limited to:
  - a. building, strengthening and maintaining the capacity of facility necessary by the International Health Regulations, and to prepare the resources,
  - b. asking for the help by WHO with the relevant provisions of the International Health Regulations to ensure their effective implementation,
  - c. providing support to LEDCs the building, strengthening and maintenance of the public health facilities which is stated under the International Health Regulations,
  - d. taking all appropriate measures for keeping the purpose and effective implementation of the International Health Regulations by such ways but not limited to:
    - i. providing a financial support for the country which conforms the IHR well,
    - ii. legally punishing the countries who do not conform IHR by regulating the provision of medicine.