World Health Organization:
Mental Health in Lockdown
USG: Seren ANAÇOĞLU

VIZMUN'21

TABLE OF CONTENTS

LETTER FROM THE SECRETARY GENERAL

Welcome to Most Distinguished Attendances and Respectable Advisors,

My name is Ediz Can Kaya. I am a tenth-grade student at Vizyon College and I have the topmost honor of serving as the Secretary-General of the second annual session of Vizyon College Model United Nations which will be held between 11-13 June 2021. As a Secretariat and staff, we value diplomacy and do our best to create a productive and positive experience for all delegates and advisors. We are gathering in 6 different committees: Legal, Futuristic United Nations Security Council (Futuristic UNSC), World Health Organization (WHO), Turkish Joint Crisis Committee, Joint Crisis Committee,United Nations High Commissioner for Refugees.

As a young generation, today we have the chance to change the wraceful world bringing accomplishment and security to each individual. Every day, we get a chance to do something different, to change the world! For a few months, both academic and organization teams of VIZMUN 2021 have been working on this assembly by giving an effort to provide all attendants with an unforgettable and delighted experience of Model United Nations. According to our belief, we and delegates will be contributed to relations, World awareness, and policy along with the conference. Do not hesitate in contacting us should you encounter any doubts along the way at secretary-general@vizmun.com

Best of luck on the path ahead!

Warm Regards,

Ediz Can Kaya

Secretary-General of VIZMUN 2021

LETTER FROM UNDER-SECRETARY GENERAL

We would like to warmly welcome you to the World Health Organisation (WHO)in second VIZMUN conference. Being responsible for providing leadership on global health matters, shaping the health agenda, setting the norms of action and offering technical assistance to countries in need, WHO is the coordinator of health within the UN system. Being part of WHO is, therefore, a great opportunity to participate in a variety of discussions, and to be involved actively in the formation of a policy in global scale.

Greetings to everyone! Welcome to the World Health Organisation Committee !

My name is Seren ANAÇOĞLU and I am a high school student at the Kabatas High School. My involvement in programs simulating International and Local Organisations – from Delegate and Chairperson, to Secretariat member and Executive Organiser- began from high school and it continues till now, thus, I hope that I will share with you my experiences, and learn much more from you! Being the USG the WHO is a really demanding task, as we should tackle the challenges of global health pandemics, set the standards to monitor and assess health trends, and guarantee the right to health for all people through the establishment of an international public health system focusing on human rights respect and protection. This way we will move towards development, progress and prosperity.

In COVID-19 pandemic, I have been teaching MUN to everyone who need and want to learn. Also I am researching education and mental health during pandemic. I hope you will take this study paper as a guide for committee to prepare better. **Please send to your position papers to my email. Deadline: 9.06.2021 -21.00**

Feel free to contact with me and for further inquries send mail. Can't wait to meet with you.

Mail: serenanacoglu@hotmail.com

Instagram: @serenmomsonn

Best Regards

Seren ANAÇOĞLU

Under Secretary General and President of GA

STRUCTURE OF COMMITTEE AND MUN

An Overview

1. Position Paper (or Policy Statement)

The Position Paper is a one or two page document that is essentially a summary of your knowledge of the topic and the position your country plans to take when it enters committee. It typically contains four sections: Background of Topic, Past International Actions, Country Policy, and Possible Solutions. Position Papers are usually due before the conference.

The key starting points for researching each section are listed below. They will help you get started with participating in your first Model UN conference, but you will want to dig deeper as you develop more experience.

Background of topic: Background guide of the topic provided by the conference, Google, the news, Wikipedia (to frame the topic)

Past international actions: UN website, your committee's website, key treaties or resolutions mentioned in your background guide, UN or NGO reports

Country policy: CIA World Factbook, your country's foreign ministry website, domestic programs within your country, and your country's voting record on key treaties or resolutions

Possible Solutions: NGO or think tank policy recommendations, past UN resolutions that you'd like to change or expand on, and your own creativity!

2. Opening Speech The Opening Speech typically lasts about 1 minute or 1 minute and 30 seconds and is the first speech you give to the committee. It is the best opportunity for you to explain your country policy and the key sub-issues you would like the committee to focus on. Opening Speeches are the main way for countries to determine who they want to work with, so it's important to prepare a speech that conveys this. There are many tips and strategies on how to deliver an Opening Speech, but use your Position Paper as a guide when you are starting out. The most important action is to just be brave and make your first speech.

MUN Resolution Format

A resolution always contains:

1. A concise and evocative title (or number)

    2. A list of Signatories

    3. The name of the committee or the General Assembly

    4. A set of [PREAMBULATORY CLAUSES](#) punctuated by semicolons (;)

    5. An address to the Member states or voting parties

    6. A set of OPERATIVE CLAUSES punctuated by commas (,)

    7. A concluding clause punctuated by a period (.)

Conclusion

Writing a good MUN resolution paper is a critical part of guiding your idea from opening speech to a successfully voted on resolution. The clauses are the policies from your speeches written form. Resolution writing is a critical part of guiding your idea from opening speech to a successfully voted on resolution. The clauses are the policy you speak in written form. Remember:

 – Preambulatory clauses – Why we're doing it

 – Operative clauses – What we're going to do

Especially for MUN rooms with other advanced delegates, make sure your operative clauses are backed by preambs, the clauses are presented in order of importance and you have at least one clause which justifies why you are not merging with another block.

Hopefully, this guide shed some light on how to write a draft resolution. Now that you have a better understanding, the next step is to practice. After all, there is no teacher like experience. Good luck!

HISTORY OF THE COMMITTEE

The World Health Organization (WHO) was established on April 7th, 1948, as a member of the United Nations Development Group (UNDG) dedicated to the promotion of global health. WHO followed the Health Organization of the League of Nations, which was chartered in Article 23 of the Covenant of the League 2.[2] While the League of Nations failed with the onset of World War I, the horrific events of World War II demonstrated to the United Nations, successor to the League, that protection of fundamental health was an international priority critical to social, economic, and political recovery and progress. Thus, a new institution, the WHO, created in the spirit of the Health Organization, was tasked with the responsibility of not only assuming the earlier responsibilities of the Health Organization but also addressing the growing threats and potential benefits to health from developing science and technology. Since its founding, WHO has been regarded as the supreme directing authority in the sphere of public health. The World Health Organization is the first inter-governmental institution to include the term "world" in its title. This addition to the name of the predecessor agency, the League of Nations Health Organization, reflects how the new United Nations wished to stress the fact that international problems must not be solved merely by the actions of a nation or a single alliance, but by the actions of a global community. In particular, the protection of fundamental human health transcends all borders and treaties, and disease affecting a single member state has the potential to undermine the health in all other member states. Thus, the WHO possesses neutral status and nearlyuniversal membership, resulting in almost unparalleled convening power. The Constitution of the WHO is considered to be the fundamental health doctrine which defines health in the modern context of the post-World War II world. Previously, health was generally considered to be a physiological state. However, health for the WHO was defined in the Preamble to the Constitution as a multidimensional "state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."3

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[1] "WHO | History of WHO," *WHO*, accessed October 22, 2016, http://www.who.int/about/history/en/.

TOPIC: Mental Health in Lockdown

The Nature of Pandemic Disease

The current definition of an epidemic is the "occurrence in a community or region of cases of an illness, specific health-related behavior, or other health-related events" that occur in excess of what is normally expected.[5] While in an epidemic the location and time period in which the cases happen are specified, the number of cases depends on a variety of factors, including the size of the community, type of population exposed, and whether the region has been previously exposed to the disease. A pandemic, on the other hand, implies an epidemic that occurs "over a very wide area, crossing international boundaries and usually affecting a large number of people".[6] This term fails to include any specific definitions regarding population immunity, virology, or disease severity, aspects that are vital to addressing public health concerns.

History of Pandemic Diseases
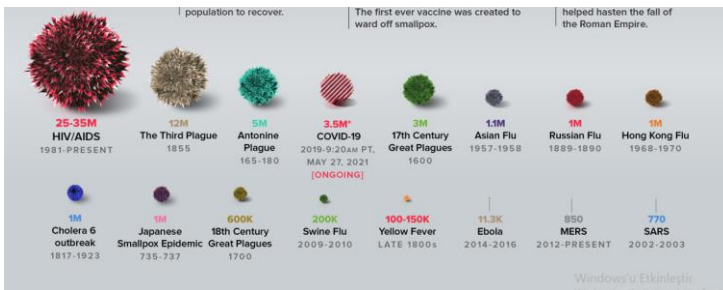
Disease and illnesses have plagued humanity since the earliest days, our mortal flaw. However, it was not until the marked shift to agrarian communities that the scale and spread of these diseases increased dramatically. Widespread trade created new opportunities for human and animal interactions that sped up such epidemics. Malaria, tuberculosis, leprosy, influenza, smallpox, and others first appeared during these early years. The more civilized humans became – with larger cities, more exotic trade routes, and increased contact with different populations of people, animals, and ecosystems – the more likely pandemics would occur.

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[2] "WHO | Definitions: Emergencies," WHO, accessed May 17, 2019, https://www.who.int/hac/about/definitions/en/.
[3] Last, Spasoff, and Harris, *A Dictionary of Epidemiology*.
[4] "WHO | The Classical Definition of a Pandemic Is Not Elusive," WHO, accessed May 17, 2019, https://www.who.int/bulletin/volumes/89/7/11-088815/en/.
[5] https://www.visualcapitalist.com/history-of-pandemics-deadliest/

Spread of Disease

When dealing with pandemics and health emergencies, it's critical to figure out how diseases spread. Airborne diseases are one of the most common types of illnesses. Small droplets or tiny aerosol particles can spread these diseases through the air. Germs in these droplets can live on surfaces and spread when individuals come into contact with them. 9 Another mode of transmission is by feces. When minute amounts of excrement from an infected individual are swallowed by another person, some illnesses can spread. 10 This can happen directly from filthy hands to the mouth, or it might happen indirectly through objects, surfaces, food, or water. Infections can be spread in a variety of ways. . Infections can be conveyed by blood or other bodily fluids in general. This happens when an infected individual comes into touch with an uninfected person's bloodstream or mucous membranes, such as through kissing or nursing. 11 Viruses and bacteria can also be conveyed through food, as food cleanliness, preparation, and safety methods vary among nations and cultures. 12 Sexual contact, contact between animals or insects and humans, and even touch between a mother and an unborn child are all ways that infectious diseases can spread. Although it may be simple to put constraints on interactions between individuals and between people and the environment, it is more difficult to place limitations on interactions between people and the environment. Although it may be simple to place restrictions on contacts between individuals and between people and their environment, it is crucial to remember that certain cultural behaviors may help illnesses spread. For example, various cultures have different ideas about what causes disease. Some patients are unaware of germ theory and fall back on fatalism, the belief that the ailment is caused by a djinn, the evil eye, or a demon.

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[6] World Health Organization, "Report of the Review Committee on the Functioning of the International HealthRegulations (2005) and on Pandemic Influenza A (H1N1) 2009," n.d.

[7] "Understand How Infectious Diseases Spread | Travelers' Health | CDC," accessed May 19, 2019,https://wwwnc.cdc.gov/travel/page/infectious-diseases.

[8]Lorna Fewtrell and Jamie Bartram, eds., *Water Quality: Guidelines, Standards, and Health: Assessment of Risk and Risk Management for Water-Related Infectious Disease*, World Health Organization Water Series (Geneva: World Health Organization, 2001).

[9]"Understand How Infectious Diseases Spread | Travelers' Health | CDC," accessed May 19, 2019, https://wwwnc.cdc.gov/travel/page/infectious-diseases.

[10] Ibid.

[11]World Health Organization Regional Office for Europe, "Culture Matters: Using a Cultural Contexts of Health Approachto Enhance Policy-Making," Cultural Contexts of Health and Well-being, n.d.

Lockdown

As a result of the COVID-19 pandemic, a variety of non-pharmaceutical interventions (including stay-at-home orders, curfews, quarantines, cordon sanitaires, and other societal restrictions) have been adopted in a number of nations and territories around the world. These limits were put in place to help stop the spread of the coronavirus that causes severe acute respiratory syndrome. These limits were put in place to stop the spread of COVID-19, which is caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). By April 2020, at over 3.9 billion individuals in more than 90 countries or territories had been urged or commanded to stay at home by their governments, putting nearly half of the world's population under some sort of lockdown. Despite the fact that similar disease management strategies have been utilized for hundreds of years, the scale witnessed in the 2020s is believed to be unparalleled.

Lockdowns have been found in research and case studies to be successful for minimizing COVID-19 spread and therefore flattening the curve. Curfews and lockdowns, according to the World Health Organization, should be used as temporary measures to reorganize, regroup, rebalance resources, and protect fatigued health professionals. The WHO proposes a pandemic response that includes strict personal hygiene, thorough contact tracing, and isolation while sick to strike a balance between limitations and regular life.

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[12] Terri Rebmann, "Infectious Disease Disasters: Bioterrorism, Emerging Infections, and Pandemics," *Emerging Infections*,n.d., 22.

[13] Rebmann T, Wilson R, LaPointe S, et al. Hospital infectious disease emergency preparedness: A 2007 survey ofinfection control professionals. Am J Infect Control 2009;37(1):1–8.

[14] K. Lee, *Globalization and Health: An Introduction*, Global Issues (Palgrave Macmillan UK, 2003),https://books.google.com/books?id=ogiMDAAAQBAJ.

[15] https://en.wikipedia.org/wiki/COVID-19_lockdowns

[16] https://www.gov.uk/guidance/covid-19-coronavirus-restrictions-what-you-can-and-cannot-do

[17] https://www.google.com/url?sa=i&url=https%3A%2F%2Finternetretailing.net%2Fcovid-19%2Fcovid-19%2Flockdown-20-what-will-its-impact-be-and-what-can-retailers-do-22248&psig=AOvVaw3LKVqt1DN23xXZeJ58gLQT&ust=1622584242402000&source=images&cd=vfe&ved=0CAIQjRxqFwoTCJDjxsLz9PACFQAAAAAdAAAAABAD

Mental Health Changes Overall Pandemics

 COVID-19's physical health impacts, as well as the many deaths caused by the pandemic, have been and continue to be disastrous on a global scale. People's mental health, on the other hand, has taken a knock all over the world. Hundreds of Medical News Today readers told us last year that the first rounds of lockdown caused them tension and anxiety. People were concerned about the emotional impact of losing loved ones on themselves, their friends, and their neighbors. Many people struggled with sadness and solitude, while others struggled with job loss and financial insecurity.

As the coronavirus pandemic spreads around the globe, it is causing widespread dread, worry, and anxiety among the general public, as well as specific groups such as older adults, nurses, and those with underlying health concerns. To date, the main psychological impact on public mental health has been increased rates of stress or worry. Loneliness, sadness, destructive alcohol and drug use, and self-harm or suicide behavior are all likely to escalate as additional measures and affects are implemented, particularly quarantine and its implications on many people's customary activities, routines, or livelihoods.

Issues of service access and maintenance for people with emerging or current mental health illnesses, as well as the mental health and well-being of frontline workers, are becoming a major concern in areas already significantly affected, such as Lombardy in Italy. WHO collaborated with partners to develop a series of new resources on the mental health and psychosocial support aspects of COVID-19 as part of its public health response.

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[18] https://www.helmholtz.de/en/health/how-does-the-lockdown-affect-mental-health/

[19] https://www.medicalnewstoday.com/articles/mental-health-during-the-pandemic-1-year-on

[20] https://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/publications-and-technical-guidance/noncommunicable-diseases/mental-health-and-covid-19

Mental Health of Children and Young People

Extended periods of 'lockdown,' in which civilian communities were urged to remain in their homes save to obtain necessary supplies, care for others, or exercise, were one of the most critical public health measures taken during the COVID-19 epidemic. During the COVID-19 epidemic, there are growing demand to learn more about the effects of the lockdown and following school closures on the mental health and wellbeing of children and young people[1-5].

As lockdown restrictions begin to decrease, we need to know what children and young people have gone through throughout the lockdown period[1], as well as how they might be best helped to return to normal life, or the "new normal," in the months and years ahead. This knowledge may be used to inform recovery strategies at the policy level as well as by those who engage directly with children and young people. Other countries are beginning to formalize similar reactions. The New Zealand government, for example, has released a national psychosocial and wellbeing recovery framework that emphasizes prevention and early intervention and is guided by the principles of collectivity, empowerment, community solutions, asset-based thinking, and community and specialist service support. In this evidence review, we look at empirical research of the effects of COVID-19 lockdown, as well as analogous historical health-related disasters, to identify crucial concerns concerning the good and negative mental health and wellbeing effects of lockdown on children and young people. We refer to earlier pandemics, epidemics, and other health disasters when we say similar health-related disasters in the past. Given that much of the literature in this field isn't focused exclusively on children and young people's mental health and wellbeing, we look at empirical evidence of affects in three areas:

1. **The individual:** Direct impacts on children and young people's mental health and wellbeing

2. **The interpersonal/family:** Impacts within the family context

3. **The school:** Impacts within the context of education

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[21] World Health Organization

Mental Health of Public and Older Adults/Workers

Psychosocial effects of pandemics are substantial. The most common side effects are health anxiety, panic attacks, adjustment difficulties, depression, chronic stress, and sleeplessness. Mass panic is caused by misinformation and uncertainty. 4 The elderly are particularly vulnerable among them. So yet, just one paper has looked at the mental health of the elderly throughout these times. 5 Because of their bio-psychosocial vulnerabilities, social isolation of the elderly is described as a "major public health concern." Though a primary method for combating COVID-19, social distancing is also a major cause of loneliness, especially in settings such as nursing homes or old-age homes, and is an independent risk factor for depression and anxiety disorders and suicides.

During a public health breakdown, social connectivity is especially important, especially when "ageism" becomes a factor for stigmatization in this disadvantaged community. Neglect and therapeutic nihilism result as a result of this. Because most elders are unfamiliar with mobile phones or media terminology, the measures for a pandemic must be conveyed to them in their own words. Cognitive impairment, as well as issues such as roaming, anger, and psychotic symptoms, can exacerbate the panic and make it harder for them to follow the distance and hand hygiene procedures. People with mental illnesses (particularly the elderly) are also more sensitive and prone to exacerbations. Other reasons contributing to their inadequate care during the COVID-19 outbreak include discrimination and a lack of health-care utilization. The significant stress caused by "knowledge overload" might lead to paranoia and mistrust of health-care providers, which could lead to them avoiding quarantine, posing a serious public health risk.

Mental health, especially in the elderly, is a cornerstone of public health. The global hysteria simply aids in the spread of the virus since the demand for a "viral cure" overshadows the need of mental health. Regular telephonic counseling sessions, healthy contact with family, relevant and updated information, caring for general medical and psychological needs, and respecting their personal space and dignity are all important components of mental health care for the elderly, according to lessons learned from previous pandemics like SARS. This requires increased awareness at all levels in order to detect mental health care requirements early and arrange appropriate interventions, particularly for the elder population.

1.Armitage R, Nellums LB. COVID-19 and the consequences of isolating the elderly. *Lancet Public Health*. 2020; **5**(5): 296.

Actions

Actions of the United Nations

United Nations Proves;
Before COVID-19 emerged, statistics on mental health conditions (including neurological and substance use disorders, suicide risk and associated psychosocial and intellectual disabilities) were
already stark:
• The global economy loses more than US$ 1 trillion per year due to depression and anxiety.
• Depression affects 264 million people in the world.
• Around half of all mental health conditions start by age 14, and suicide is the second leading cause of death in young people aged 15-29.
• More than 1 in 5 people living in settings affected by conflict have a mental health condition.
• People with severe mental conditions die 10-20 years earlier than the general population.
• Fewer than half of countries report having their mental health policies aligned with human rights conventions.2
• In low- and middle- income countries between 76% and 85% of people with mental health conditions receive no treatment for their condition, despite the evidence that effective interventions can be delivered in any resource context.3
• Globally there is less than 1 mental health professional for every 10,000 people.
• Human rights violations against people with severe mental health conditions are widespread in all countries of the world.

- In Lebanon, the Ministry of Public Health has launched an action plan comprehensively addressing mental health aspects of COVID-19.
- Teams from Egypt, Kenya, Nepal, Malaysia and New Zealand, among others, have reported creating increased capacity of emergency telephone lines for mental health to reach people in need. This includes reports of services that have helped usher in innovations that are designed to continue post-pandemic.
- In the Bahamas, recently devastated by Hurricane Dorian, the Government, UN agencies and non-governmental organizations are coming together to respond to the mental health and psychosocial consequences of the COVID-19 pandemic.
- A mental health non-governmental organization in Pakistan had to close vocational training centres for economic empowerment, but people with mental health conditions who had been attending the training centres started sewing cloth face-masks for health responders to support their communities.
- In Nigeria, the Nigerian Association of Psychiatrists, the Association of Psychiatric nurses, clinical health workers as well as major mental health NGO's came together to form the Covid19 Partners in Mental Health. They work with both government and civil society to offer training on mental health, teletherapy and research

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1. https://www.who.int/en/news-room/fact-sheets/detail/mental-health-strengthening-our-response

Possible Solutions

In addressing epidemics and pandemics, organizations throughout the world typically use a similar framework, in which solutions to the problem of pandemic disease should all fall under the categories of **mitigation, preparedness, response, and recovery.** Working in a cycle, emergency management plans function so that communities are always involved in at least one phase of emergency management at any time. Communities are actively engaged in the process of disease control in culturally appropriate manners through the use of Risk Communication and Community Engagement (RCCE) such that community members can understand and impact their own health outcomes.

1. APPLY A WHOLE-OF-SOCIETY APPROACH TO PROMOTE, PROTECT AND CARE FOR MENTAL HEALTH

2. ENSURE WIDESPREAD AVAILABILITY OF EMERGENCY MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

3. SUPPORT RECOVERY FROM COVID-19 BY BUILDING MENTAL HEALTH SERVICES FOR THE FUTURE

Foreign Aid

For nations with limited resources to deploy towards public health emergencies, nongovernmental aid organizations (NGOs) and UN deployed efforts can be important partners. Such organizations can bridge important gaps in the coverage government is able to provide. Yet, WHO member states have many priorities that may result in opposition to the presence of NGOs and international aid efforts. States may have national security concerns, possibly seeing foreign aid as a way for outside bodies to control their nation from afar depending on who is funding this foreign aid.[136] Foreign aid workers may be held less accountable to abide by domestic standards and regulations, as they will simply return to their home nation at the end of a crisis. Nations would find themselves divided in policy based on their existing trust of foreign aid bodies and tolerance for these organizations and workers. Nations will also be divided on policy related to foreign aid into nations who primarily **provide foreign aid**, and nations who primarily **receive foreign aid**. Nations that primarily provide foreign aid would emphasize autonomy for their aid efforts and protections for aid workers, while nations who primarily receive foreign aid would likely base policy around how to hold foreign aid.

PREPERATION FOR DELEGATES

Glossary

Epidemic: the "occurrence in a community or region of cases of an illness, specific health-related behavior, or other health-related events" that occur in excess of what is normally expected[138]

Epidemiology: The study of the factors relating to and causing states of health (diseased and otherwise) and the distribution of these states of health, as well as the application of this knowledge for the purposes of public health efforts.[139]

HIV/AIDS: Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome. HIV is the virus that can be shared, and AIDS is the disease presentation of this virus. HIV/AIDS is a disease that came to prominence in the 1980s, affecting intravenous drug users, the LGBT community, and Sub Saharan Africa at pandemic proportions.

International Health Regulations (IHR) (2005): The IHR are a set of international agreements to manage global health security and risks of pandemic.

Influenza: Influenza viruses (ie. the viruses that cause the "flu") are a set of highly infectious and rapidly evolving viruses with annual prevalence patterns. Influenza viruses exist for multiple animal species, and are often capable of passing between animal species. Examples of this include the 2009 H1N1 Swine Flu where a virus strain passed from pig to human, or the H5N1 avian flu where a virus strain passed from bird to human.

Depression: Depression is a common mental disorder, characterized by sadness, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, feelings of tiredness and poor concentration.

Generalized Anxiety disorder: Anxiety that is generalized and persistent but not restricted to, or even strongly redominating in, any particular environmental circumstances (i.e. it is "free- floating)

Mitigation, preparedness, response, and recovery: The four principles of disaster management focused on preventing disaster, preparing for the worst, responding to the direct aftermath of the disaster, and restoring a community in the long run following a disaster.

One Health Approach: The One Health Approach recognizes the connections between human health, animal health, and the environment, and therefore encourages human health solutions through interventions in animal populations

Pandemic: An epidemic that occurs "over a very wide area, crossing international boundaries and usually affecting a large number of people"

Purview: Limits for the scope and purpose of organizations or documents

Quarantine: An imposed state of isolation for animals, humans, and materials suspected of carrying infectious disease

Mental Health: Mental health is a state of well-being in which an individual can realize his or her own potential, cope with the normal stresses of life, work productively and make a contribution to the community.

Mental health promotion: "Aims to protect, support and sustain emotional and social well-being and create individual, social and environmental conditions that enable optimal psychological and psychophysiological development and improve the coping capacity of individuals.

PREPARATION BEFORE CONFERENCE

Please read through these paragraphs to find out how you can get prepared for the conference.
It'll be much more fun if you do some research prior to the actual start of IMUN2021.

Research

 Once you know which delegation you will be part of in which committee, you should start learning more about both of them. During committee sessions, it will be useful to have a working knowledge of the following areas:

 » Structure and history of the United Nations, with a special focus on your committee: What are its competences and in which areas is it active?

» The agenda items of your committee

» "Your" country/delegation: Important historic events, current government (that's what you'll be representing!), different ethnic groups within the population, etc. There will always be situations in which you have to improvise so it's important to know the key facts about your country's positions.

 Questions Here are a few questions that could guide you through this process:

 » What are the key aspects of the agenda items?

» What makes the issues relevant?

» Which solutions are conceivable? Which disadvantages do they have?

» What has already been tried by the UN or others? Did it work?

» What is your delegation's position towards the topics that will be debated in your committee?

 » What is most important to your delegation? Is there anything that you really need to see in the final output of the committee?

» What is your role in the committee, are there any possible allies?

Individual research

Turn over a few more pages and you'll find the Research Reports that should be an excellent starting point for this research. But in order to be able to actively partake in the committee proceedings, you need to do more than just read through the reports. It's important that you add individual research – for example, you could use the following sources to begin with:

» The official website of the United Nations

» Non-Governmental Organisations (particularly those accredited by the UN)

» Country reports and data published by international or regional organisations such as the World Bank, WHO, OECD, APEC, etc.

» The CIA World Factbook can give you a general overview of your country's socio-economic characteristics » The website of your country's government

» The website of your country's embassy to the United Nations

» Speeches made by embassy staff or government officials that are relevant to the agenda items

» Resolutions that affect your topics

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RESOLUTION FORMAT:

Preambulatory clauses

Acknowledging, Affirming, Alarmed by, Approving, Aware of, Bearing in mind, Believing, Confident, Congratulating, Contemplating, Convinced, Declaring, Deeply concerned, Deeply conscious, Deeply convinced, Deeply disturbed, Deeply regretting, Deploring, Desiring, Emphasising, Expecting, Expressing its appreciation, Expressing its satisfaction, Fulfilling, Fully alarmed, Fully aware, Fully believing, Further deploring, Further recalling, Guided by, Having adopted, Having considered, Having further considered , Having devoted attention, Having examined, Having heard, Having received, Having studied, Keeping in mind, Noting further, Noting with appreciation, Noting with approval, Noting with deep concern, Noting with regret, Noting with satisfaction, Observing, Pointing out, Reaffirming, Realising, Recalling, Recognising, Referring, Taking into account, Taking into consideration, Taking note, Viewing with appreciation,

Heading

» Code (e.g. Draft Resolution 1.1)

» Committee name spelled out correctly

» Agenda item (name spelled out as in the Study Guide)

» Sponsor, co-sponsors

Preambulatory clauses

» First word is a gerund (Recalling, Keeping in mind, etc.) and italicised

» Comma after each clause

Operative clauses

» First word is a verb in 3rd person and italicised

» Semi-colons (;) after each clause

» Each clause is numbered and indented

» Make sure there is a period at the end of the final operative clause.

Operative clauses

Accepts, Affirms, Approves, Asks, Authorises, Calls for, Calls upon, Condemns, Confirms, Congratulates, Considers, Declares accordingly, Deplores, Designates, Draws attention, Emphasises, Encourages, Endorses, Expresses its appreciation, Expresses its concern, Expresses its hope, Further invites, Further proclaims, Further recommends, Further reminds, Further requests, Further resolves, Hopes, Invites, Proclaims, Proposes, Recommends, Regrets, Requests, Resolves, Seeks, Strongly affirms, Strongly condemns, Strongly urges, Suggests, Supports, Transmits, Trusts, Urges

Sub-clauses

Sub-clauses should only be used on operative clauses and should only be used if they are legitimate. If there is no sub-clause b, there is no need for a sub-clause a and it should instead be folded up into the main clause. You can also use sub-sub-clauses. Following any "path" through, this structure must yield a full, sensible clause.

A properly formatted example of sub-clauses:

1. Reaffirms
   a) the general importance of chocolate,
   b) chocolate's distinct preferability over
      (i) gummy bears,
      (ii) fruits,
      (iii) toffees,
   c) the requirement for chocolate to be tasty;
2. (...)

Further Readings

Resolution: https://www.wisemee.com/how-to-write-a-resolution/
Restrictions UK: https://www.gov.uk/guidance/covid-19-coronavirus-restrictions-what-you-can-and-cannot-do
Surveys Young and Adults: https://carers.org/what-we-do/our-survey-on-the-impact-of-coronavirus-on-young-carers-and-young-adult-carers-
Solution Based Ideas: https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_10
Children Suggestions: https://www.who.int/docs/default-source/coronaviruse/helping-children-cope-with-stress-print.pdf?sfvrsn=f3a063ff_2
Solutions: https://interagencystandingcommittee.org/system/files/2021-03/IASC%20Interim%20Briefing%20Note%20on%20COVID-19%20Outbreak%20Readiness%20and%20Response%20Operations%20-%20MHPSS.pdf
Teens Health: https://www.healthline.com/health-news/impact-of-covid-19-lockdown-on-teens-mental-health#How-to-help-anxiety-and-depression-in-teens-during-the-pandemic
Mental Wellbeing: https://www.nhs.uk/every-mind-matters/coronavirus/mental-wellbeing-while-staying-at-home/
Elderly Mental Health: https://www.geriatri.dergisi.org/uploads/pdf/pdf_TJG_1194.pdf
Key terms: https://www.euro.who.int/en/health-topics/noncommunicable-diseases/mental-health/data-and-resources/key-terms-and-definitions-in-mental-health#depression
Countries Mental Health: https://www.who.int/news/item/05-10-2020-covid-19-disrupting-mental-health-services-in-most-countries-who-survey

QUESTIONS TO PONDER *(Answer in Resolution)*

1- What kind of work should be done to motivate teenagers during this difficult process?

2- How should they spend their time to feel more conscious and agile and to focus more on their subjects. How can governments can provide assistance to teenagers in this regard?

3-In this process, does the education system influence the deterioration of the mental health of young people, if it has affected in a negative way, how should the education systems be changed?

4-How strict should quarantine be for teenager's mental health?

5-What kind of precautions should be taken in advance for young people against the threat of a pandemic again?

6-What is the relationship between teenager's mental health and education?

7- How economy will effect the people mental health and how could countries investigate the problem of economic crisis?