



G.D. GOENKA MODEL UNITED NATIONS'22

UNITED NATIONS HUMAN RIGHTS COUNCIL

BACKGROUND GUIDE



Letter from the Executive Board

I welcome you to GD'MUN Conference, 2022. This is not going to be a usual exhaustive guide but more of a capsule course, a stepping stone for more exhaustive research. This background guide in no way should be considered as a study guide. The links for further research and what the Executive Board expects from you to be discussed will be mentioned below. A study guide by the Executive Board wouldn't make much sense as it will be either inspired or taken from other reports mentioned in this document. Rather than reading things out of context we will provide all the links and sources required ensuring a well-structured discussion and debate from 14 to 16 October, 2022.

Please feel free to contact us via Instagram.

Good Luck!

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INTRODUCTION TO THE COMMITTEE

The United Nations Human Rights Council (UNHRC) represents and protects the Human Rights of all persons in the world. The Council was founded in 2006 and have 47 seats, where the members are elected every three years.

The Council is mandated to promote and protect the enjoyment and full realization, by all people, of all rights established in the Charter of the United Nations and in international laws and treaties.² UNHRC is guided in its work by the UN Resolutions, Declarations and Treaties. The mandate includes: preventing human rights violations, securing respect for all human rights, promoting international cooperation to protect human rights, coordinating related activities throughout the United Nations, and strengthening and streamlining the United Nations system in the field of human rights.³

UNHRC works closely with the Office of the High Commissioner for Human Rights and acts as the principal Human Rights Official in the United Nations.

The Council promotes the right to development, coordinate United Nations human rights education and public information activities.⁵ Its main priority is to strengthen Human Rights across the United Nations system and in the world. UNHRC works with determination to ensure the enforcement of universally recognized Human Rights norms, including through promoting both the universal ratification and implementation of the major human rights treaties and respect for the rule of law.

DEFINITION OF KEY TERMS

A. Reproductive rights: "Reproductive rights" are the rights of individuals to decide whether to reproduce and have reproductive health. This may include an individual's right to plan a family, terminate a pregnancy, use contraceptives, learn about sex education in public schools, and gain access to reproductive health services.

B. Unsafe abortion: A procedure for terminating an unwanted pregnancy either by persons lacking the necessary skills or in an environment lacking minimal medical standards or both.

C. Safe abortion: Abortions in countries where abortion law is not restrictive, and that meet legal requirements in countries where the law is restrictive.

D. Induced abortion: Abortion is the ending of pregnancy due to removing an embryo or fetus before it can survive outside the uterus. When deliberate steps are taken to end a pregnancy, it is called an induced abortion, an induced abortion may be classified as therapeutic (done in response to a health condition of the women or fetus) or elective (chosen for other reasons).

E. Forced sterilization: Government policies which force people to undergo surgical or other sterilization processes.

F. Genital mutilation: Any type of cutting or removal of all or some of the genital organs, especially excision of the clitoris.

H. Contraception: All means of birth control, such as condoms, which are used to prevent impregnation during sexual intercourse.

I. Equality Rights: These rights, also considered basic human rights, include the right to live free from violence and discrimination; to enjoy the highest attainable standard of physical and mental health; to be educated; to own property; to vote; and to earn an equal wage between sexes.

J. Feminism: Feminism consists of a range of social and political movements, as well as ideologies that aim to establish the political, economic, personal, and social equality of the sexes. Feminism is increasingly manifested globally and is represented by institutions committed to act and encourage change on the subject of women's rights.

K. Human Rights: Human rights are basic living rights that all human beings obtain regardless of sex, nationality, skin colour, religion, or language, as they are not granted by the government and are instead inherent to individuals

L. Healthcare: "Healthcare is the provision and maintenance of medical care such as but not limited to restoring physical, mental, or emotional wellbeing of an individual or a community, most commonly by trained specialists and licensed professionals.

M. Sexual Abuse: Sexual abuse is a sexual act forced upon an individual without their consent. It is considered an act

of violence which the attacker uses against an individual due to a certain motive which has been engendered. It is usually a deliberately committed crime.

BACKGROUND

While many people believe that it is a woman's right to choose whether or not she deems it necessary to have an abortion, other religious, political, and personal morals that some individuals possess may lead women to believe that having an abortion is wrong. It all comes down to upbringing, ethics, religious backgrounds, political alignments, and other attributes that play a large role in formulating opinions and hence influencing actions.

We will start this very important topic, one that is one of the World Health Organization (WHO), sexual and reproductive health five key components, with some data provided by UN 2017 Worldwide Abortion Report statistics

: As of 2010–2014, an estimated 36 abortions occur each year per 1,000 women aged 15–44 in developing regions, compared with 27 in developed regions. The abortion rate declined significantly in developed regions since 1990–1994; however, no significant change occurred in developing regions;

Abortions occur as frequently in the two most-restrictive categories of countries (banned outright or allowed only to

save the woman's life) as in the least-restrictive Association category (allowed without restriction as to reason)—37 and 34 per 1,000 women, respectively;

Laws fall along a continuum from outright prohibition to allowing abortion without restriction as to reason. As of 2017, 42% of women of reproductive age live in the 125 countries where abortion is highly restricted (prohibited altogether or allowed only to save a woman's life or protect her health);

The clear majority (93%) of countries with such highly restrictive laws are in developing regions. In contrast, broadly liberal laws are found in nearly all countries in Europe and Northern America, as well as in several countries in Asia;

Of all abortions, an estimated 55% are safe (i.e., done using a recommended method and by an appropriately trained provider); 31% are less safe (meet either method or provider criterion); and 14% are least safe (meet neither criterion). The more restrictive the legal setting, the higher the proportion of abortions that are least safe—ranging from less than 1% in the least-restrictive countries to 31% in the most restrictive countries;

Globally, 56% of unintended pregnancies end in induced abortion;

Around 25 million unsafe abortions were estimated to have taken place worldwide each year, almost all in developing countries;

Around 7 million women are admitted to hospitals every year in developing countries, because of unsafe abortion; The annual cost of treating major complications from unsafe abortion is estimated at US\$ 553 million; Another 2014 study funded by the Bill & Melinda Gates Foundation estimates that 14.9% of all 2013 maternal deaths were caused by abortion, totaling somewhere between 38,336-49,843 maternal deaths. More than half of these deaths are believed to have occurred in sub-Saharan Africa;

Having looked at those statistics it is easy to understand the UN's role into discussing a legal draft commentary on the conflicts between the right of life principle and the principle of self-determination, while also addressing the reality of safe and unsafe abortion under different legal systems. It is also important to remember that one of the most effective ways to prevent abortion, is by preventing unwanted pregnancies in the first place, therefore, it is also important to discuss here the need for a better sexual education and access to preservatives.

Currently used methods

Presently, the primary type of abortion used is the medical abortion, which is a nonsurgical method for women with pregnancies of less than 63 days' gestation- as determined by a combination of last menstrual period, bimanual exam, or ultrasound. Two medications are required for this abortion method: mifepristone, and misoprostol, which prevent further growth and development of the pregnancy,

and facilitate expulsion of the pregnancy. The medications are most commonly prescribed by a hospital and are usually taken 1-2 days apart. The lining of the womb then breaks down, causing bleeding and loss of the fetus a few hours after the woman takes the second medicine. However, other methods such as surgical abortions are also a commonly used method ever since the introduction of vacuum suction, as surgical abortion is now considered to be among the safest procedures in medicine. The procedure consists of dilating the opening of the cervix, and inserting a suction tube into the uterus, which completely removes the fetus from the woman's uterus.

Current status on the Right to Abortion

The Right to Abortion has been granted in 98% of countries if it means that the mother's life will be saved. However, 72% of countries allow abortions so as to preserve both physical and mental health, 69% of countries allow it in case of incest or rape, and 61% of countries in the case of fetal impairment. Moreover, 34% of countries including Canada, the United States, China, and other European Nations allow the performance of abortions following a woman's request.⁷ Nevertheless, there are six remaining nations that have not legalised abortions under any circumstance. These countries are Chile, the Dominican Republic, El Salvador, and Nicaragua as well as Vatican City (represented in the UN by the Holy See) and Malta.

Current Abortion Statistics according to the WHO

The number of abortions worldwide is declining due to increased access to contraception. Between 1990–94 and 2015–19, the global unintended pregnancy rate has declined, whereas the proportion of unintended pregnancies ending in abortion has increased.

Nevertheless, the WHO's findings also indicate that the legality of abortion across the world has little to no effect on how many abortions occur every year. Meaning, the number of abortions in countries that have legalised it compared to countries that have not legalised it is very similar. Between the years 2015 and 2019, 73.3 million (61% of unintended pregnancies) induced abortions occurred worldwide yearly,⁸ corresponding to a global abortion rate of 39 abortions per 1000 women aged 15–49 years.

Furthermore, estimates from 2010 to 2014 showed that around 45% of all abortions were unsafe,⁹ and almost all these unsafe abortions took place in LEDCs that had not and perhaps still have not legalised abortion, therefore encouraging women to perform illegal abortions, which are most commonly unsafe.

The division between individuals and nations regarding Abortion

Reasons why individuals/nations may be against abortion

Abortion is completely illegal in a number of nations, primarily LEDCs such as Honduras, El Salvador, Nicaragua,

and the Dominican Republic, in which access to safe and legal abortion services are close to impossible. This is due to a number of reasons such as the misinformation widely spread on the true consequences of abortion, its condemnation in the name of the embryo's right to life by movements such as pro-life movements worldwide, and the unequal gender relations in many countries that visualize women as mothers, leading to the practice of abortion being stigmatized

Reasons why individuals/nations may be in favor of abortion

On the other hand, it is also argued that the right to abortion should be defended as a woman's right and a health right. If the mother's life is in danger, it should be considered if there are serious fetal anomalies, if there are serious financial or social reasons which would not be beneficial to the child or the family, and if there are potential risks to physical or mental health for the child. Furthermore, there is the prominent argument of when a woman has been raped or sexually abused, as it is a procedure that has occurred with no consent. Therefore, the woman should have the ability to choose what to do with her body.

Different Existing Movements

Pro-Life Movements : Anti-abortion movements, also remarked as pro-life movements, are involved within the abortion debate advocating against the practice of abortion and its legality. Individuals which participate in

these protests are against abortion as they believe that the embryo incorporates a right to life, and abortions remove this basic right. Many anti-abortion movements began as counter movements in response to the legalization of abortions in most nations in the late 1900s, and in 2019, it had been discovered that 21% of US citizens believed that abortions should be legalized under no circumstances.¹⁰ Within the United Kingdom, the Society for the Protection of Unborn Children is the most prominent Pro-Life Organization, formed after the 1967 Abortion Act, when abortion was legalized. The group campaigns against abortion by supporting protests at pregnancy clinics and organizing regular protests to voice their disagreement regarding the Right to Abortion.

Pro-Choice Movements : Pro-Choice Movements globally are organizations and groups of individuals that are in favor of and support the legalization of abortion for all women, as they believe that it is a right for women to choose what will be done with their body, especially in the case of sexual abuse or any financial or social difficulty that the mother may have to overcome. An example of pro-choice movements is the United States abortion-rights movement, which is a sociopolitical movement supporting the view that a woman should have the legal right to an elective abortion.

Factors that may lead to abortion

Poverty

One of the most prominent issues that lead to the potential necessity for abortions, especially in LEDCs, is poverty and the fact that individuals are unable to have a child, as they do not have an adequate lifestyle, and are aware of the fact that they would be unable to provide for the child economically. As a result of this, prospective parents are reluctant to have a child as they know the financial consequences this would have. As a matter of fact, a study conducted by the WHO shows that the usage of contraception drops to 43% in countries that are blighted by issues like poverty, therefore resulting in increased abortion rates since there are more unintended pregnancies between young couples, as well as couples that are unable to provide for a child economically.

Poor education on contraception

Despite the fact that contraception is used to a larger extent nowadays and awareness has been spread on the importance of this matter, poor planning and lack of sex education may lead to unexpected pregnancies, especially for young adults. Thus, this leads to increased abortion rates as a couple may be unable to provide for a child. Furthermore, young women do not have the same opportunities as men primarily in terms of their education in LEDCs; more than 130 million girls are not given the opportunity to go to school in West and South Asia as well as sub-Saharan Africa. A female without proper

education is consequently more likely to have more children at a very young age, as they are forced to due to young marriages or are unaware of the consequences due to the fact that they have not been educated on this matter.

Consequences of unsafe abortions

An unsafe abortion, which usually take place in nations in which abortion is illegal or extremely difficult to obtain, may make the mother more prone to severe physical and mental consequences, as well as affect her wellbeing and social life.

Physical Consequences: The WHO has declared that such consequences may consist of incomplete abortions (which are the partial loss of the products of conception in the first 20 weeks), bleeding such as a hemorrhage, uterine perforation (when the uterus is pierced by a sharp object), and any other type of infection.

Social Consequences: Unsafe abortions may lead to social issues, mainly because there are contradictory ideas on the right to abortion. It is not uncommon for women to face disrespect from society and appear as weak when an abortion has been conducted, thus influencing a woman's thoughts, and damaging her mentality, and consequently delaying her recovery. Abortion is stigmatized because it violates the feminine ideals of the inevitability of motherhood. Moreover, hatred in regard to abortion still remains particularly strong when it comes to young unmarried women due to certain moral values or religious

beliefs, which may increase the risk of maternal mortality due to it provoking a delay in seeking treatment as a result of women questioning whether what they are doing is right. Furthermore, the negative attitude portrayed by health workers and medical specialists in some cases such as in LEDCs where abortions are frowned upon, leads to poor quality of care and thus further delays in postabortion care for women.

THE LEGAL PRINCIPLE OF THE RIGHT TO LIFE IN THE VIEW OF THE UN'S HUMAN RIGHTS COUNCIL

In July 2017 the Human Rights Committee published a draft commentary on Article 6 of the treaty on the right to life and invited comments on the draft from civil society and UN member states. In this comment, the committee excluded unborn children from the protection of Article 6 and proceeded with the following comment: “States parties must provide safe access to abortion to protect the life and health of pregnant women, and in situations when carrying a pregnancy to term would cause a woman substantial pain or suffering, most notably when the pregnancy is the result of rape or incest, or when the fetus suffers from fatal impairment.”

II) THE NEED FOR AN INTERNATIONAL CONVENTION ON ABORTION

Based on data from 2010–2014 there are approximately 25 million unsafe abortions annually. Of these one third or approximately 8 million were performed under the least

safe conditions by untrained persons using dangerous and invasive methods. Unsafe abortions lead to an estimated 7 million complications. In developed regions, it is estimated that 30 women die for every 100 000 unsafe abortions. That number rises to 220 deaths per 100 000 unsafe abortions in developing regions and 520 deaths per 100 000 unsafe abortions in sub-Saharan Africa. Mortality from unsafe abortion disproportionately affects women in Africa. While the continent accounts for 29% of all unsafe abortions, it sees 62% of unsafe abortion related deaths. Following unsafe abortion, women may experience a range of harms that affect their quality of life and well-being, with some women experiencing life-threatening complications. The major life-threatening complications resulting from the least safe abortions are hemorrhage, infection, and injury to the genital tract and internal organs. Health-care providers are obligated to provide life-saving medical care to any woman who suffers abortion-related complications, including treatment of complications from 11 Lisbon Association unsafe abortion, regardless of the legal grounds for abortion. However, in some cases, treatment of abortion complications is administered only on the condition that the woman provides information about the person(s) who performed the illegal abortion. The practice of extracting confessions from women seeking emergency medical care because of illegal abortion puts women's lives at risk. The legal requirement for doctors and other health-care personnel to report cases of women who have undergone abortion, delays care and increases the risks to women's

health and lives. UN human rights standards call on countries to provide immediate and unconditional treatment to anyone seeking emergency medical care. Nevertheless, all these problems that come from unsafe abortions can be prevented. Comprehensive sexual education, access to preservatives and safe abortion are just some of the methods pointed out by the World Health Organization (WHO) to prevent unsafe abortion and its consequences. Hence all this information, it is crucial that the United Nations take a stand on the topic of abortion, that takes into consideration not only the legal, cultural and religious differences in all Member States but also addresses the health issues and life-threatening situations that women face when practicing unsafe abortions. This stand should be a platform for countries to find common ground on this topic and set a clear stand of the Human Rights Council position in this matter.

CASE STUDY

Abortion Rights in The United States of America

Introduction

Abortion as an issue is tangled with other issues like morality, religion and the patriarchy. In the United States, the monumental judgement which holds the tenets of abortion rights is the case of Roe v. Wade (1973). Let us try to understand the issue by dividing the entire timeline into Pre-Roe v. Wade, during, and Post-Roe v. Wade. There were other judgements over its course which either narrowed or broadened the scope of Roe v. Wade, let's take a walk in the land of life, liberty and the pursuit of happiness.

Pre-Roe v. Wade

One major misconception about abortion legislations is that if you remove the safe legal channels and access to it, people will stop having abortions. But that isn't the case. What happens is a subsequent rise in illegal back-alley practitioners and self-administered abortions. It leads to an increase in the death toll, which is also skewed due to racial and economic differences. In the decades predating Roe, the number of illegal abortions conducted per year ranged upto 1.2 million. In 1930, abortion was listed as the cause of death for around 2700 women, which was approximately 18% of the total maternal deaths. These are just some of the statistics of the cases reported, the original number would be much higher.

Disproportionate Impact on the Masses

Studies of low-income groups show that most of them attempted self-induced abortion practices where a physician was rarely involved. These women often had to be admitted to hospitals or lost their lives due to incomplete abortions and infections.

A clear racial disparity can also be seen. Abortion was the cause of one in four childbirth-related deaths in white women; in contrast, abortion was the cause of one in two childbirth-related deaths in non-white and Puerto Rican women.

Legal Abortions Pre-Roe

Some women were always able to secure the required approval for an abortion in accordance with the standards of their state legislation, despite the fact that legal abortions were mostly inaccessible until the years just before Roe. This entailed proving that a woman's life would be in risk if she carried her pregnancy to term in the majority of states up until just before 1973. A woman could also be granted permission for an abortion in some states, particularly between 1967 and 1973, if it was deemed necessary to safeguard her bodily or mental health or if the pregnancy was the consequence of rape or incest.

The American Law Institute (ALI) issued one of the earliest national requests for a change in abortion law in 1962, calling for abortion to be permitted in cases when the pregnant woman's life or health would be in danger if the pregnancy went to term, where the pregnancy was the consequence of rape or incest, or when the foetus had a

serious abnormality. Colorado was the first state to reform its abortion laws based on these recommendations.

What was Roe v Wade

In the decision of Roe v. Wade, the U.S. Supreme Court ruled (7-2) on January 22, 1973, that overly strong state restrictions on abortion are unconstitutional.

The court upheld the right to privacy established in Griswold v. Connecticut (1965). The fundamental right of a woman to choose whether or not to end her pregnancy was in jeopardy in this case. The values that underpinned this right were physical consequences and decisional autonomy (i.e., the interest in bodily integrity).

Roe v. Wade had a significant impact on American women's health and wellbeing by making abortion legal on a national level. Abortion-related deaths have drastically decreased and are now uncommon. Additionally, women are now able to get abortions earlier in their pregnancies when it is most safe to do so: the percentage of early first trimester abortions has increased from 20% in 1970 to 56% in 1998.

Years following Roe v Wade

Roe v. Wade has faced numerous challenges since 1973.

The Supreme Court ruled in Planned Parenthood of Southeastern Pennsylvania v. Casey (1992) that limits on abortion are unlawful if they impose a "undue burden" on a woman who wants to abort her unborn child. The federal Partial-Birth Abortion Ban Act of 2003, which outlawed the infrequently performed abortion procedure known as intact dilation and evacuation, was upheld by the Supreme Court in Gonzales v. Carhart (2007). In Whole Woman's

Health v. Hellerstedt (2016), the Supreme Court cited its judgement in Casey to invalidate two provisions of a Texas law that demanded that abortion clinics adhere to the same standards as ambulatory surgical centres and that abortion doctors hold admitting privileges at a nearby hospital. In June Medical Services L.L.C. v. Russo (2020), which was decided four years after Whole Woman's Health, the Court used the case to invalidate a Louisiana statute that, as the majority noted, was almost comparable to Texas' admitting-privileges law.

Escalations in the situation now

A lower court's ruling to invalidate a Mississippi state statute that forbade the majority of abortions after the 15th week of pregnancy—well before the stage of foetal viability—was made public in May 2021. The Supreme Court agreed to hear the ruling in its October 2021 term. S.B. 8, a bill Texas adopted in May 2021, effectively outlawed practically all abortions after the sixth week of pregnancy, or when foetal cardiac activity (often known as a "foetal heartbeat") can be discovered. With the passage of S.B. 8, any citizen was given the legal right to sue anyone who aborts a foetus older than six weeks old or "aids or abets" their execution.

In a 6-3 decision, the Supreme Court's bench supported a Mississippi statute that effectively outlaws all abortions after 15 weeks. A further move was also taken by the conservative majority to overturn Roe v. Wade and Planned Parenthood v. Casey in a 5-4 vote.

26 states, including 13 states with "trigger" legislation that immediately implement restrictions, were expected to outlaw abortion to the fullest extent feasible at the time it was overturned.

- 13 States have made abortion access completely illegal with no exceptions.
- 14 have hostile laws in action
- 4 states have abortion access without legal protection
- 11 states have protected access
- 10 states have comprehensive abortion access with expanded protection

Why Oppose Legislations Providing Access to Abortion

Few Americans hold an absolute position on the legality of abortion, supporting or opposing it always, regardless of the situation. According to surveys, opinions on abortion support and opposition vary greatly based on factors including when an abortion occurs during a pregnancy, if the pregnancy is in danger of ending in miscarriage, and whether a baby will be born with serious health issues. The overall support for safe abortion, which is popularly known as being pro-choice, stems from the increasing support for democrats and more liberal ideologies. According to the same survey, Catholics' opinions on abortion vary greatly along theological and political lines. Regular Mass attendees are among the nation's staunchest opponents of legalised abortion, and they are also more likely than less frequent attendees to believe that a foetus has rights and that life begins at conception. Which leads to the popular term for them being Pro-Life. The issue has also taken a Republican vs. Democrat political connotations in addition to being connected to religion, morality and purity culture. The majority of Republicans believe that having an abortion is ethically wrong in either the majority of or all circumstances. Only roughly a third of Democrats share this opinion.

The aftermath of Roe being overturned has resulted in large scale public protests and condemnations, leading to discussions about bodily autonomy free will, while also making it an issue for marginalised communities like the LGBTQ+ community and people who are not white and/or rich, as abortion restrictions will make them more vulnerable, while rich, privileged people will always have the option of travel to access safe, legal abortions.

Notes for the delegates:

- Familiarise yourself with the terms: Pre-Roe bans, trigger bans, pre-viability gestational bans, method bans, reason bans, Self- managed abortions and their criminalisation, SB-8 copycats, Targeted regulation of abortion providers (TRAP), Parental Involvement, Consent laws and interstate shields.
- Read up on all the legislations and the similarities and differences in them.
- Make sure to do your independent research and try to rely on laws and legalities instead of popular conceptions, emotions and perspectives.

POINTS THE RESOLUTIONS SHOULD ADDRESS

There can be more than one resolution in the debate. Therefore, you can choose to have one resolution that addresses Reproductive Rights and Abortion or have a resolution for each individually. As long as it is cohesive and coherent with the topic, delegates are free to compose their resolution(s) as they see fit to what is relevant in the ongoing debate.

The first issue is how to guarantee and promote reproductive rights to girls and women across the globe, while also engaging men in the resolution of the matter, the solution to this problem can and should involve UN Organs and Offices, NGOs and States. The second issue to be addressed is the access to safe abortion, if and how the United Nations should determine an International Convention on it and steps that can be taken to improve the statistics on women's mortality as a result from unsafe abortion.

All delegates are also advised to think about the topic importance in the current worldwide scenario. Consider researching what are the many solutions and measures Nations across the globe have taken and how effective or not they were in dealing with those issues.

FURTHER USEFUL INFORMATION

The first step for making a good intervention during the debate is to research the topic itself, in a more general way. Make sure to not only attend to not only statistics, but also research information that identify the roots of the problems and effective policies that have been promoted both nationally and by the UN. After getting a general idea on the topic itself, you should research your state's policy about it. It is crucial to know what your country's aspirations are, and what kind of measures can be put into practice. Besides that, political alliances are one of the master keys to make sure that your state's goals will be successful. How is your state in terms of diplomacy? Is it

more bellicose, strategist and likes to be a leader? Or is it more peaceful and gentle, more like a follower, in an already formed block? These are some points that you should keep in mind to get information about the subject.

The Office of the United Nations High Commissioner for Human Rights (OHCHR) website can also be useful tools for your research since you can look for information on Draft Resolutions about this topic or related issues, and some official speeches from your state, explaining its position about this problem. Beyond that, and if you have curiosity, you can also see other state's speeches to have an idea of which are the ones that are on your side and the ones that you have to convince with your views.

You should also keep in mind that not all sources are reliable. NGO's websites are always good choices for a good investigation because they usually have interesting articles and correct statistics. Then again, you must keep in mind that regarding social and political affairs, and particularly, if you search for media coverage, being impartial is almost impossible so it is likely to find more obstinate convictions about this topic. However, media articles are always very useful for your researches and you shouldn't forget to take a look at them too.

You, as a Delegate, are an official representative of your State in the UN. Therefore, you must share its views as faithful as possible.

Unity makes strength so don't forget that consensus must be a goal, and this can only be achieved through dialogue

and tolerance. Finally, if every delegate is open to new suggestions, the Debate will be much more successful – and even if we don't find a solution to the problem, we are making efforts to accomplish one in the near future.

Directives for delegates

The information provided above is there to help you with your research and by no means the delegates should limit their research to the above mentioned issues, as earlier mentioned that the agenda covers a wide range of spectrum, some of which are not mentioned here but the delegates should research well so as to take the committee to all the areas which need our focus and need to be worked upon. During the flow of debate, if any motion is raised about any topic which is not covered here but the committee feels is a necessity in regard to the agenda of the conference, the executive board will gladly take it up as learning works both ways. All the delegates are advised to keep a check on the countries who are their allies as diplomatic skills play a very crucial role in the conference. Delegates should have ample research and facts to support their statements. Aspects such as lobbying and foreign policies shall be considered well. In case of any dispute or issue, the chairperson can take a decision at any point of time.

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