



# AMIMUN'22

AMITY INTERNATIONAL MODEL UNITED NATIONS



***PERSEVERANTIA OMNIA VINCIT***

# UNHRC

## BACKGROUND GUIDE

22<sup>ND</sup> - 23<sup>RD</sup> JANUARY 2022

**ENHANCING TECHNICAL COOPERATION  
FOR UNIVERSAL REALISATION OF  
HUMAN RIGHTS AND CAPACITY  
BUILDING IN CONTEXT OF COVID-19**

## **LETTER FROM THE SECRETARIAT**

Dear Delegates,

It gives us great pleasure to invite you all to the second e-Edition of the Amity International Model United Nations, a two-day conference scheduled for January 22nd and 23rd, 2022. AMIMUN has established a name for itself on the international stage, as indicated by its status as one of Asia's top MUNs. AMIMUN delegates obtain a better understanding of the UN's inner workings by engaging in diplomatic debates and broadening their awareness of global relations.

Model United Nations allows students to stand up for what they believe in and create a mark on the world. This platform assists delegates in developing into future pioneers who are certain, determined, and energetic. It is hardly an exaggeration to say that MUN has formed us into the people we are today. We are recognized by the United Nations as a conference, and our collaboration with various international and national bodies such as the United Nations Educational, Scientific, and Cultural Organization (UNESCO), the UN Global Compact Network India, Fridays for Future Delhi, Youth for Peace International, the United Nations Population Fund, and PETA India allows us to further enhance the learning experience of the individuals taking part in the Conference.

By adhering to the theme of AMIMUN'22, "***Perseverantia Omnia Vincit: Perseverance Conquers All***" the AMIMUN family hopes to inspire delegates from all over the world, to foster powerful discussions that result in solutions, solutions that are borne out of a steel-like determination and perseverance to lead each debate to its rightful conclusion, and to ensure that delegates can navigate the diplomatic complexities that come with representing the agendas and resolutions they have crafted. It is a platform for legislators to conceptualize their opinions in the midst of the COVID-19 pandemic. Whether you are new to Model United Nations or a seasoned veteran, we are confident that you will have a beneficial engagement in the environment of learning that permeates each part of AMIMUN'22.

Please do not hesitate to contact us if you have any inquiries.

Regards,

The Secretariat

AMIMUN 2022

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## **WELCOME ADDRESS**

Greetings Member State Representatives,

It is with great pleasure that we welcome you to the simulation of HUMAN RIGHTS COUNCIL at AMITY MODEL UNITED NATIONS 2022!

I am sure a lot of you must be anxious about how this thing works and what all is expected out of you, in the capacity of a delegate or even a member of the International Press. Let me begin by saying that it is just not as complex as it seems. This is going to be quite simple.

During the three days of the simulation, we will be taking on the role of your moderators and help you understand the simplest and perhaps even the most complex details about not just the United Nations, the UNHRC or the concepts of Human Rights in general vis-à-vis Technical Cooperation, but also about researching, public speaking, documentation and most importantly Diplomacy; something that will truly help you across all walks of life.

In the very first session of the conference, we will be explaining to you the Rules of Procedure, which shall help you understand the procedure through which we discuss or deliberate upon something in a MUN. We will be following UN4MUN Rules of Procedure. It will be an extremely educative and interesting simulation, both for beginners and experienced delegates. We suggest you to try read or preferably watch a few videos of this procedure before coming to the committee so that the understanding becomes much quicker and easier.

We are going to deliberate upon the aforementioned agenda item - “ENHANCEMENT OF TECHNICAL COOPERATION FOR THE UNIVERSAL REALISATION OF HUMAN RIGHTS AND CAPACITY BUILDING IN THE CONTEXT OF COVID-19”. To be able to become a party to the discussions and understand the basic concepts of Human Rights & how they are to be upheld and strengthened through international togetherness during this devastating Pandemic, all you need to do is to go through this guide. Here, you shall be getting a perfunctory understanding of the agenda through a small tour of the recent Human Rights history, major events timeline, the present scenario in terms of technical knowhow and the multilateral response to the pandemic, in addition to certain other details mandatory to know before you walk in.

Again, this is not a comprehensive paper and should not be relied on as the primary source of information for your preparation. Best wishes and happy research!

If you have any questions, please contact us via email.

**Narayan Sharma**

*President*

**Muhammad Mubarak Abdulkarim**

*Research Assistant & Vice President*

**Tanmay Arora**

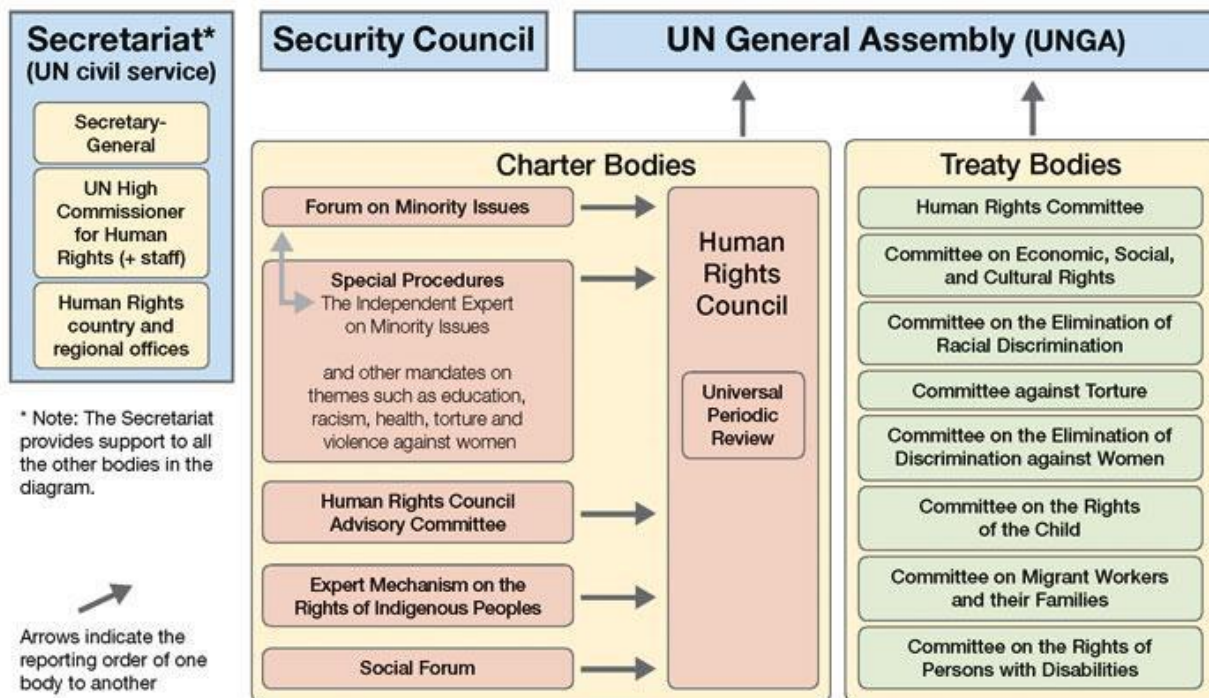
*Vice President*



## INTRODUCTION TO THE COUNCIL

### Structure of the UN Human Rights Bodies and Mechanisms

Note: This diagram is not exhaustive. It highlights the major human rights bodies and mechanisms which are covered in this training.



The United Nations Human Rights Commission was established 60 years ago to scrutinize, monitor and report on human rights violations in specific or defined territories (country mechanisms or mandates) and reports on major human rights violations across the globe (thematic mechanisms or mandates). The human rights council is an inter-governmental body within the structure of the UN system that has replaced its predecessor (Human Rights Commission). It is headquartered in Geneva and was established as the frontrunner in the fight against situations of human rights abuse. It is responsible for strengthening and promoting the protection of human rights around the globe, with the mandate to probe, investigate and publish reports on all thematic human rights issues.

The United Nations General Assembly elects the members which make up the 47 member state council. Created in 2006 by the resolution 60/251 of the General Assembly and in 2007 adopted its Institution-Building Package to ensure its functionality by setting up its mechanisms and procedures.

The council membership is equitably based on geographical distribution as follows:

- **African states:** 13 seats (Angola, Burkina Faso, Cameroon, Democratic Republic of the Congo, Egypt, Eritrea, Nigeria, Rwanda, Senegal, Somalia, South Africa, Togo, Tunisia)
- **Asia- Pacific States:** 13 seats (Afghanistan, Bahrain, Bangladesh, China, Fiji, India, Iraq, Japan, Nepal, Pakistan, Philippines, Qatar, Saudi Arabia)
- **Latin America and Caribbean States:** 8 seats (Argentina, Bahamas, Brazil, Chile, Cuba, Mexico, Peru, Uruguay)
- **Western European and other States:** 8 seats (Australia, Austria, Denmark, Iceland, Italy, Spain, United Kingdom of Great Britain and Northern Ireland)
- **Eastern European States:** 6 seats (Bulgaria, Croatia, Czechia, Hungary, Slovakia, Ukraine)

The United Nations Human Rights Council holds no fewer than three regular sessions a year, for a total of at least ten weeks. They take place in March (four weeks), June (three weeks) and September (three weeks). If one-third of the member states request so, the Human Rights Council can decide at any time to hold special sessions to address human rights violations and emergencies.

## INTRODUCTION TO THE HUMAN RIGHTS

According to the universal declaration of human rights, human rights are those economic, social, political, cultural and civic rights that guarantee any human's life free of fear and want. They are those rights that are always available to a human being irrespective of their ethnicity, race, colour, social group, era, country, sex, creed, age, gender, etc. Human rights have continued to be violated from the First World War till date, which is why it is of key importance that the United Nations with its powers try to curb this global issue that plagues the world.

The UN with its organs and instruments has continued to facilitate the advancement of human rights awareness and conservation through international corporations and partnerships between member states to identify, investigate and proffer sustainable solutions and frameworks to prevent human rights violations across the globe.

Universal human rights are often expressed and guaranteed by law, in the forms of treaties, customary international law, general principles and other sources of international law. International human rights law lays down obligations of Governments to act in certain ways or to refrain from certain acts, to promote and protect human rights and fundamental freedoms of individuals or groups.

In 1948, the United Nations General Assembly adopted The Universal Declaration of Human Rights, which was the first instrument formally recognizing human rights. In 1950, the Council of Europe adopted the European Convention on Human Rights. In 1966, the United Nations General Assembly adopted The International Covenant on Civil and Political Rights and The International Covenant on Economic and Social Rights. These two entered into force in 1976 and along with the UDHR constitute what is referred to as the International Bill of Human Rights.

In the UN Charter – the UN's founding document – the countries of the United Nations stated that they were determined:

'... to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small ... and to promote social progress and better standards of life in larger freedom ...'

Fundamentally, Human Rights are:

- **Universal** → they belong to all people equally regardless of status and they are the same for all human beings everywhere in the world
- **Inalienable** → they may not be taken away or transferred; people still have human rights even when their governments violate those rights
- **Interconnected/interdependent** → fulfilment or violation of one right affects the fulfilment of all other rights; together human rights form a complementary framework
- **Indivisible** → no right can be treated in isolation; no right is more important than another
- **Non-discriminatory** → human rights should be respected without distinction, exclusion, restriction or preference based on race, colour, age, sex, national or ethnic origin, language or any other status

## **WHY ARE HUMAN RIGHTS SO IMPORTANT?**

Values of tolerance, equality and respect can help reduce friction within society. Putting human rights ideals into practice can help us create the kind of society we want to live in.

In recent decades, there has been tremendous growth in how we think about and apply human rights ideas. This has had many positive results - knowledge about human rights can empower individuals and offer solutions for specific problems.

Human rights are an important part of how people interact with others at all levels in society - in the family, the community, schools, the workplace, politics and international relations. It is vital, therefore, that people everywhere should strive to understand what human rights are. When people better understand human rights, it is easier for them to promote justice and the well-being of society.





## **HUMAN RIGHTS AND COVID 19**

Human rights are key in shaping the pandemic response, both for the public health emergency and the broader impact on people's lives and livelihoods. Human rights put people centre-stage. Responses that are shaped by and respect human rights result in better outcomes in beating the pandemic, ensuring healthcare for everyone and preserving human dignity. But they also focus our attention on who is suffering most, why, and what can be done about it. They prepare the ground now for emerging from this crisis with more equitable and sustainable societies, development and peace.

### **WHY ARE HUMAN RIGHTS SO IMPORTANT TO THE COVID-19 RESPONSE?**

The world is facing an unprecedented crisis. At its core is a global public health emergency on a scale not seen for a century, requiring a global response with far-reaching consequences for our economic, social and political lives. The priority is to save lives.

Given the exceptional situation and to preserve life, countries have no choice but to adopt extraordinary measures. Extensive lockdowns adopted to slow transmission of the virus, restrict by necessity freedom of movement and, in the process, freedom to enjoy many other human rights. Such measures can inadvertently affect people's livelihoods and security, their access to health care (not only for COVID-19), food, water and sanitation, work, education – as well as leisure. Measures need to be taken to mitigate any such unintended consequences.

Guaranteeing human rights for everyone poses a challenge for every country around the world to a differing degree. The public health crisis is fast becoming an economic and social crisis and a protection and human rights crisis rolled into one. In some ongoing crises, especially armed conflict, human rights and other international legal protections are under extra pressure. The COVID-19 crisis has exacerbated the vulnerability of the least protected in society. It is highlighting deep economic and social inequalities and inadequate health and social protection systems that require urgent attention as part of the public health response. Women and men, children, youth and older persons, refugees and migrants, the poor, people with disabilities, persons in detention, minorities, LGBTQI+ individuals, among others, are all being affected differently. We must ensure everyone is protected and included in the response to this crisis.

The aim of this meeting is thus threefold:

1. to strengthen the effectiveness of the response to the immediate global health threat;
2. mitigate the broader impact of the crisis on people's lives;
3. and avoid creating new or exacerbating existing problems.

All three elements will position us to build back better for everyone.

## **SPOTLIGHT: HUMAN RIGHTS AT THE FRONTLINE IN THE FIGHT AGAINST COVID-19**

### **Right to life and duty to protect life**

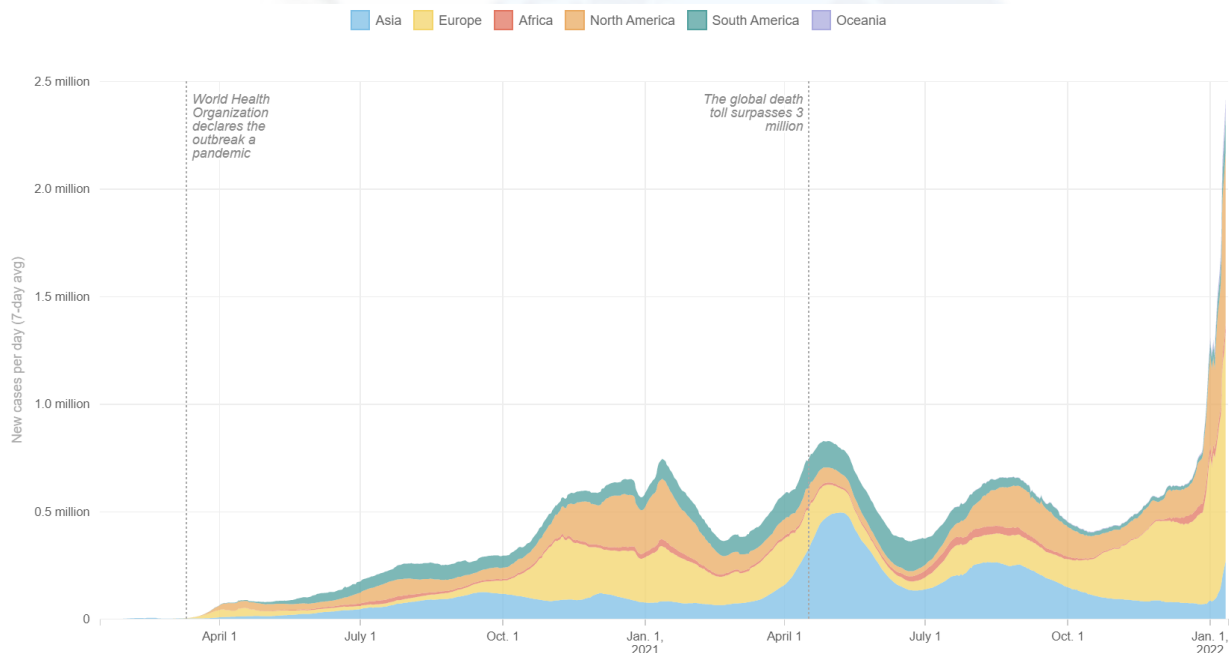
We are combating COVID-19 to protect the lives of all human beings. Invoking the right to life reminds us that all States have a duty to protect human life, including by addressing the general conditions in society that give rise to direct threats to life.

### **The right to health and access to health care**

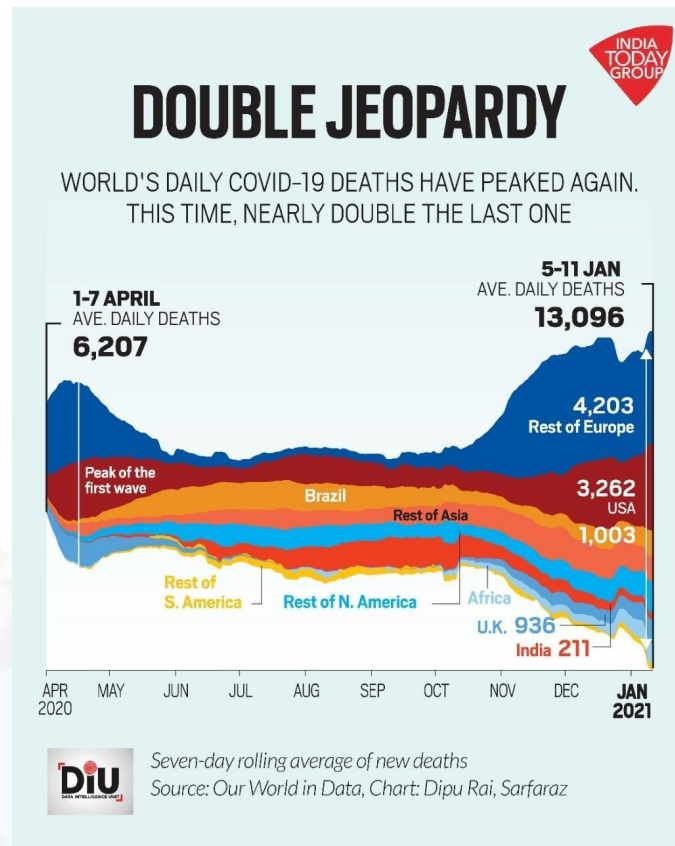
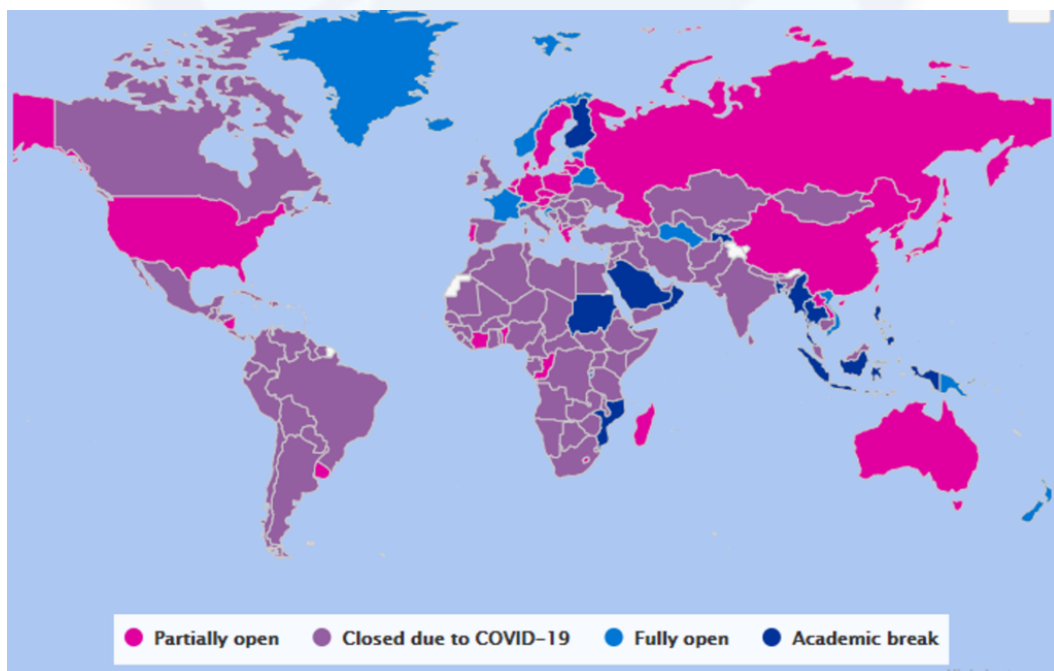
The right to health is inherent to the right to life. COVID-19 is testing to the limit States' ability to protect the right to health. COVID-19 is showing that universal health coverage (UHC) must become an imperative.

### **The central challenge to freedom of movement**

The most common public health measure taken by States against COVID-19 has been restricting freedom of movement: the lockdown or stay-at-home instruction. However, the impact of lockdowns on jobs, livelihoods, access to services, including health care, food, water, education and social services, safety at home, adequate standards of living and family life can be severe.



**How COVID-19 has shifted over time**  
New daily cases (7-day average) by continent. Data as of Jan. 9

**LIFE****EDUCATION**

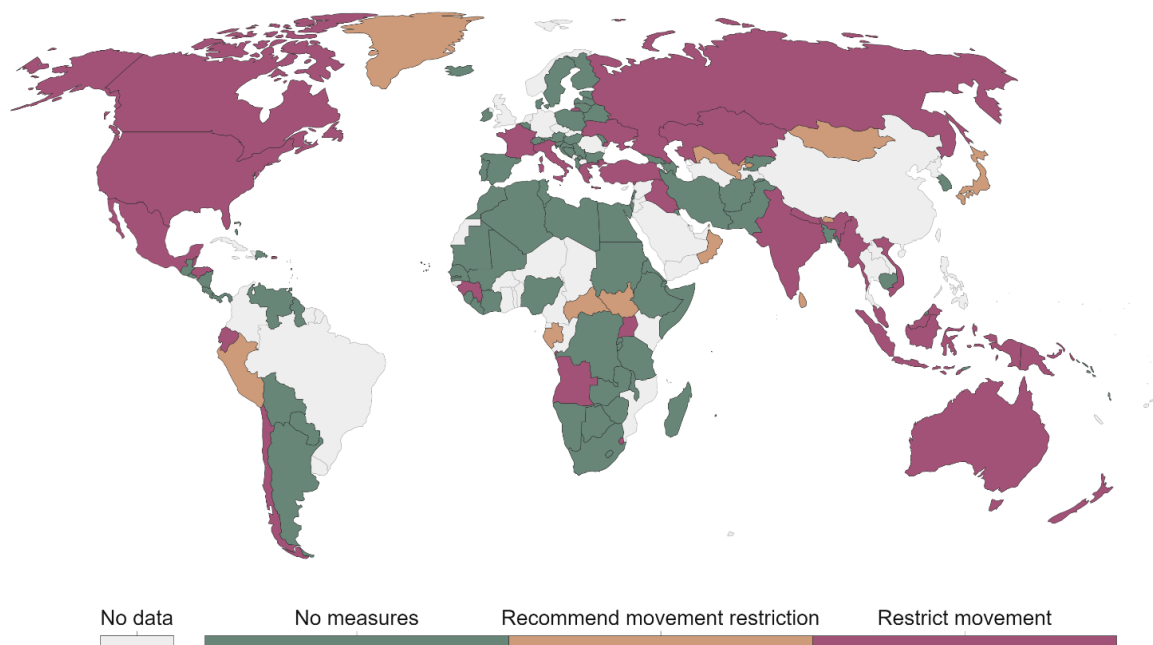


## **FREEDOM OF MOVEMENT**

### Restrictions on internal movement during the COVID-19 pandemic, Jan 11, 2022



The policies shown may not apply at all sub-national levels. A country is coded as having these restrictions if at least some sub-national regions have implemented them.



Source: Oxford COVID-19 Government Response Tracker, Blavatnik School of Government, University of Oxford – Last updated 11 January 2022, 22:10 (London time)  
OurWorldInData.org/coronavirus • CC BY

We were not equal before the pandemic, and we have not been equal in the face of it. Those who were poor before have become poorer; those who were disadvantaged now face even greater disadvantages.

The case of older people is emblematic. In many of our member states, they have paid the highest price, not only because of the health vulnerabilities necessarily associated with age but also because of the social settings in which many of them live. Those living independently have also suffered because of the lockdown measures that have further isolated them from their families and the rest of the community.

The pandemic has also shone a light on the structural problems affecting health systems in many of our member states. Years of austerity measures have led to a clear erosion of public health infrastructures, personnel and means. The pandemic has also exposed the ubiquity of gender inequality. This is evident in the workplace, where deep-rooted societal attitudes keep women in a subordinate role, the persistence of violence against women and the increasing attempts to limit women's sexual and reproductive health and rights, which are the result of ingrained patterns of inequalities between women and men. Cases of domestic violence have increased exponentially during the lockdowns imposed in many countries. Respecting and fulfilling human rights is primarily the responsibility of state authorities. In the current context, it is crucial to ensure that emergency legislation remains in place only for the time necessary to stop the pandemic, to introduce the least intrusive measures possible, and ensure that all this is rolled back as soon as authorities have the pandemic under control.

## **MOST IMPACTED SECTIONS OF THE SOCIETY**

TABLE 1. Disadvantaged and vulnerable groups impacted by COVID-19 interventions

Category	ICESCR groups	Additional groups
Vulnerability based on historical or personal identity	<ul style="list-style-type: none"> <li>• Women</li> </ul>	<ul style="list-style-type: none"> <li>• Indigenous people</li> <li>• LGBTQI+ groups</li> <li>• People of color</li> <li>• People with language barriers</li> <li>• Other historically disadvantaged groups</li> </ul>
Vulnerability based on economic disadvantage	<ul style="list-style-type: none"> <li>• Unemployed persons</li> <li>• Workers inadequately protected by social security</li> <li>• Persons working in the informal economy</li> <li>• Domestic workers</li> <li>• Home workers</li> <li>• Sick or injured workers</li> </ul>	<ul style="list-style-type: none"> <li>• Agricultural workers</li> <li>• Workers in crowded conditions, daily wage earners, and workers with job insecurity</li> <li>• People experiencing homelessness</li> <li>• Socioeconomically disadvantaged people</li> <li>• People without health insurance</li> <li>• Educationally disadvantaged people</li> <li>• Undocumented workers</li> </ul>
Vulnerability based on age or health status	<ul style="list-style-type: none"> <li>• People with disabilities</li> <li>• Older persons</li> <li>• Children</li> <li>• Adult dependents</li> </ul>	<ul style="list-style-type: none"> <li>• People living with chronic diseases, especially conditions that require continued access to medical care or therapeutics</li> <li>• Health workers and other essential or frontline workers at increased risk of contracting COVID-19</li> <li>• People with mental health conditions</li> <li>• People with COVID-19 and “long COVID”</li> </ul>
Other vulnerable groups	<ul style="list-style-type: none"> <li>• Racial, ethnic, religious, sexual, and political minority groups</li> <li>• Refugees, asylum seekers, returnees, and internally displaced persons</li> <li>• Non-nationals (immigrants and migrants)</li> <li>• Incarcerated and detained people</li> </ul>	

The Committee on Economic, Social and Cultural Rights notes that state parties to the ICESCR are obliged to “give special attention to those individuals and groups who traditionally face difficulties in exercising this right” in the context of social security and human rights

TABLE 2. Description of public health interventions in the HIT-COVID database (January 1-June 30, 2020)

Intervention type	N	%	Potential human rights impacted	Vulnerable groups affected
School closures	3,067	28.61	Right to access and quality of education; right to nutrition; right to work (for parents and teachers)	Low-income students and those without internet access; food-insecure families; parents without access to child care who cannot stay at home; children with learning disabilities or special needs
Border closures	1,353	12.62	Freedom of movement; right to seek asylum; right to health and well-being	Refugees; asylum seekers; undocumented individuals; expatriates; people who travel for work
Quarantine and isolation	646	6.03	Freedom of movement	People with physical and mental health issues; essential in-person workers; low-income workers; unemployed people; people with disabilities; elderly people; unstably housed persons; people living in crowded conditions
Limiting gatherings	561	5.23	Right to assembly; free speech; freedom of movement	Refugees and internally displaced persons (IDPs); people experiencing homelessness; protesters; people living in crowded conditions; minorities (racial/ethnic, religious, or political)
Household confinement	548	5.11	Freedom of movement; right to health and well-being	People experiencing homelessness; domestic workers; people with mental health conditions; refugees and IDPs; essential workers; elderly people; people living in crowded conditions
Leisure and entertainment venue closures	497	4.64	Right to leisure; right to participate in cultural life; right to work	Service industry employees, particularly low-wage workers
Retail store closures	469	4.38	Right to work	Retail industry workers, particularly low-wage workers; people without internet or with low retail store density
Restaurant (dine-in) closures and restrictions	450	4.20	Right to work; right to participate in cultural life	Food service workers, especially low-income people
Symptom screening at borders	425	3.97	Right to protection against interference with individual privacy	People with disabilities or chronic diseases
Office closures	362	3.38	Right to work	People who cannot work from home
Limiting movement within administrative borders	355	3.31	Freedom of movement	IDPs and refugees; unstably housed people
Public space closures	261	2.43	Freedom of movement; right to peaceful assembly	People from sociopolitical minorities; unstably housed people
State of emergency	256	2.39	Right to self-will	Groups who face discrimination
Testing symptomatic individuals	252	2.35	Right to protection against interference with individual privacy	People with disabilities or chronic diseases; people with poor access to health care; low-income people
Mandated face mask use	246	2.30	Right to freedom of expression (communication ability for disabled)	People with disabilities or underlying health conditions
Public transport closures	229	2.14	Right to a standard of living adequate for health and well-being; freedom of movement	Low-income people; people experiencing homelessness; schoolchildren; elderly people; undocumented individuals; rural populations
Contact tracing	170	1.59	Right to protection against interference with individual privacy	People with poor access to health care; low-income populations; people without internet access; undocumented people
Closure of nursing homes and long-term care facilities	163	1.52	Right to a standard of living adequate for health and well-being	Elderly people; people with disabilities or chronic diseases
Military or police deployment	162	1.51	Right to protection from violence and inhumane treatment or punishment; right to protection from arbitrary arrest	People at risk of police or military violence or harassment (racial/ethnic, religious, sexual, and political minority groups)

Source

<https://www.hhrjournal.org/2021/10/ensuring-rights-while-protecting-health-the-importance-of-using-a-human-rights-approach-in-implementing-public-health-responses-to-covid-19/>



All of the 19 public health intervention categories have impacts on human rights. The most common human right that is impacted by these interventions is freedom of movement, which is affected by border closures, household confinement, public space and public transport closures, and quarantine and isolation. While limiting movement is aimed at reducing contact rates between infected and susceptible persons to control community transmission, medically and socially vulnerable populations are disproportionately affected by such restrictions. For example, elderly people and individuals with underlying medical conditions may experience reduced access to health care and essential therapeutics, which in turn can result in delayed detection and prevention or treatment of diseases.

Other human rights that are frequently impacted by public health interventions include the right to protection against interference with the individual privacy and the right to peaceful assembly. The curtailment of these rights has often resulted in resistance and protest among affected populations globally

## **TECHNICAL INTERNATIONAL COOPERATION**

In 1999, the Human Development Report called for stronger international arrangements to govern people in a globalized world, stating: “the present era of globalization, driven by competitive global markets, is outpacing the governance of markets and the repercussions on people.... An essential aspect of global governance is the responsibility to people – to equity, to justice, and to enlarging the choices of all.” As the 21st century sped into an era of hyper-globalization, new global institutions are urgently needed to protect the public interest. The architecture of global health emergencies is a case in point. Its core agreement, the International Health Regulations (2005) (IHR) remains state-centric, catering to national interests, bound to colonial epistemic frameworks, and silent on market power that can trample on human rights. The age of hyper-globalization requires global institutions that enable global – collective – responses to contain pandemics worldwide, that build on international solidarity and human rights norms, and structures that break free from North-South hierarchies of power and knowledge.

## **LOGIC OF COLLABORATION/COOPERATION**

Faced with COVID-19, there has been little disagreement that a global response is needed to contain pandemics. As 25 world leaders stated in their call for a new pandemic treaty: “No single government or multilateral agency can address this threat alone”. The past two years have demonstrated the critical role of global cooperation, not only in information sharing but in the provision of public goods, notably vaccines.

The failure of international institutions to mobilize the full potential of global technologies for the ‘people’s vaccine’, the supply shortage to meet a global need, and the inequitable distribution is not only a moral failure but a public health policy error that is prolonging the pandemic.

The UN Committee on Economic, Social and Cultural Rights has emphasized the global responsibility of states, noting that ‘states have a duty of international cooperation and assistance to ensure universal equitable access to vaccines wherever needed’ (para 9). Moreover, states have an extraterritorial obligation, for example, that ‘corporations domiciled in their territory..... do not violate these rights abroad’ (para 8). These global obligations stem from the Right to Health, but also particularly from the Right to Development (RtD). As asserted in the 1986 Declaration on the Right to Development, ‘States have the primary responsibility for the creation of national and international conditions favourable to the realization of the right to development’ (Article 3) and goes on to spell out the duty to take steps, individually and collectively for that purpose (Article 4).

## **REALITY OF COLLABORATION/COOPERATION**

Despite the logical imperative to collaborate and the long heritage of attempts to do so, one year into the covid-19 pandemic and transmission rages on, with nearly 100 million cases and over two million deaths by January 2021. The ongoing devastation has raised questions about the effectiveness of international collaboration in health and shone a powerful spotlight on WHO and other multilateral agencies with interests in disease control. Member states have ordered an inquiry into WHO's response, and interim findings have been critical of the institution.

Meanwhile, WHO has warned that vaccine nationalism by member states is leading to "catastrophic moral failure." One of its independent oversight committees has added that the "rising politicisation of pandemic response" is a "material impediment" to WHO's work, and has warned that WHO cannot succeed without greater collaboration by member states. These realities call for a greater scrutiny of collaboration in international health and demand fresh attention to its problems.

The health challenge: The focus must now be on the most immediate medical, political and economic challenges raised by the pandemic. The United Nations' call for shared responsibility and global solidarity in response to the impacts of COVID-19, and especially the role of WHO and HRC in the coordination of the health response to the epidemic needs to be upheld. We need to ensure sufficient financing to address the pandemic, including strengthening of health systems globally to support working towards a response that delivers universal access to treatment and vaccines, when they are ready. Fair and just distribution will be key. The focus should be on the universal provision of an eventual treatment and a vaccine and recognize immunization against COVID-19 as a global public good.

The financial challenge: We need to ensure adequate financing to contain the pandemic and protect people, with particular attention to the most vulnerable. Nations need to commit, voluntarily, to providing resources in support of the COVID-19 Strategic Preparedness and Response Plan, as well as the health organizations involved in identifying and scaling up the tools needed to fight the pandemic. We need to continue to work with all stakeholders to assist those countries whose economies are most at risk due to the pandemic and to improve resilience.

The information challenge: Disinformation puts peoples' lives at risk and is an obstacle to effective public health responses. States should provide and promote accessible, timely and factual information, to continue to protect and promote access to free and independent media and to support the free exchange of reliable and accurate information. Access to reliable information and free and independent media is crucial to foster transparency and accountability, combat misinformation and contribute to public confidence and support for government efforts to combat the pandemic. We must work together to amplify evidence-based messaging.

## **TECHNICAL COOPERATION ESPECIALLY IN REGARDS TO HUMAN RIGHTS**

Multilateralism and international cooperation should become the cornerstone of current strategies towards keeping people's wellbeing and the full enjoyment of human rights.

The current health and economic crisis have showcased how almost half of the world population lacks access to digital technologies. While in developed countries the majority of the population enjoys access to the Internet (86.6%), that percentage is significantly lower in developing countries (47%) and the least developed countries (19.1%).

The lack of adequate access to the internet re-potentialized the risk of an increase in poverty and social exclusion at the expense of human rights. Therefore, a discussion on digital rights should be incorporated into our MUN's agenda including their implications with regards to the realization not only of civil and political rights but also of social, economic and cultural rights.

The adoption of policies and increased international cooperation towards the realization of the human rights of peasants and other people in rural areas should also gain broader attention, as there is a need to secure sustainable food and agricultural production throughout the world. The contribution of peasants and other people in rural areas is crucial "in ensuring the right to adequate food and food security." International cooperation should play a fundamental role in supporting the implementation of the Declaration of the Rights of Peasants and other people in rural areas adopted by the UN General Assembly in 2018. There is a need to establish human rights mechanisms to assist countries in the implementation of this Declaration. The effective implementation of the rights of peasants and other people working in rural areas could serve as an important example of how international cooperation and dialogue can achieve the improvement of human conditions under a broader understanding of the promotion, protection, and fulfilment of all human rights.

The discussion on the need to guarantee universal access to the COVID-19 vaccine has highlighted the role that international cooperation may play concerning increasing the manufacturing capacity for pharmaceuticals, particularly in the most affected countries. Such cooperation has been limited and fragmented till now. Hence, a stronger international partnership should be put in place for the provision of financial and technological resources for developing countries, including through the transfer of technology and know-how, and the investment of public funds to produce vaccines.

The international community has widely recognized that mitigation and adaptation to address the effects of climate change require an "enhanced action in an effective and appropriate international response per their common but differentiated responsibilities and respective capabilities." International cooperation based on fundamental human rights principles must serve as an important means to achieve the final objective of reducing global greenhouse emissions while respecting the fundamental rights of the people as well as addressing adverse impacts of climate change. For enhancing international cooperation on this basis, States should abide by the principles of transparency and inclusiveness, engage in collaboration at all levels of public decision-making, and pay particular attention to the participation of grassroots and vulnerable groups. South-South cooperation among developing countries can play a key role in this regard, through the exchange of relevant experiences, good practices and the provision of innovative solutions for tackling the unique challenges faced by developing and least developed countries.

Likewise, given the significant role that the private sector plays in the world economy and the exploitation of natural resources, it is important to continue the negotiations for the adoption of a legally binding



instrument on business and human rights, while promoting the implementation of the United Nations Guiding Principles on Business and Human Rights (UNGPs). International cooperation should play a fundamental part in encouraging training and capacity building towards ensuring that private actors promote the adoption of a new corporate culture based on the respect of human rights and avoiding “infringing on human rights of others” while guaranteeing and promoting adequate measures for the prevention, mitigation, and remediation of human rights abuses.

## **RESEARCH QUESTIONS**

1. Ways to strengthen collaborations between states to foster human rights promotion and protection especially with regards to women and children
2. Ways to prevent increased violations of human rights during the pandemic in case of conflict-ridden territories
3. What further role can the UN play beyond what it’s doing currently especially in the case of LDPs?
4. How can on-ground monitoring of Human Rights be improved through technical cooperation?
5. Can the UN further the mobilisation of domestic and international financial resources without encroaching on the sovereignty of the individual nations in question?
6. Should the UN go ahead and build a common framework for countries to respond to the pandemic covering infrastructural planning, estimations and forecasts and emergency response to the most vulnerable?