

Resolution 3.0

Sponsors: Argentina, Cambodia, Afghanistan, Spain

Signatories: Ethiopia, Singapore, Slovakia, Costa Rica, Mexico, Iran, Ireland, Lebanon, Peru, Jordan, Guatemala, France, Canada, Philippines, China

Maintaining Self-Sufficiency:
Education and Retention of Health Care Providers Within a Country

The General Assembly,

Recalling the right to relocate enshrined in Article 13 of the Universal Declaration of Human Rights (UN, 1948),

Mindful that the cultural, economic and political environment for health care differs between countries, and that unique solutions are needed to address these differences,

Noting with deep concern the inequalities of resources available to Health Care Providers (HCPs) between countries,

Cognizant of the internal asymmetric distribution of HCPs between rural and urban populations in numerous Member states and its resultant gap in health care delivery and outcomes for rural and marginalized communities,

Aware that rurally located training and education is a proven cost-effective and timely way to mitigate the geographical disparities,

1. *Recognizing* the need to emphasize community-based sustainable development of local health personnel;
2. *Requests* that every country strive for self-sufficiency and discourage active recruitment as a long-term solution to HCP shortages;
3. *Promotes* the betterment of working conditions and resources for all HCPs through national prioritization of health care and education;
4. *Endorses* social and financial incentives to encourage even distribution and equal access to HCPs within each nation;
5. *Recommends* the training and employment of local community healthcare workers and paramedical professionals to address the primary healthcare needs of rural communities;
6. *Supports* the establishment of rurally-located healthcare training facilities, as well as the creation of regional centers of excellence with medical curricula relevant to regional needs;
7. *Encourages* health trainees from urban areas to undergo part of their curriculum in rural areas;
8. *Recommends* that such training should:
 - a. Emphasize community collective values and quality healthcare standards;
 - b. Involve a focused scope of practice based on the needs of the community;
 - c. Engage underutilized groups such as women, the indigenous, and the elderly;
 - d. Include implementation of basic healthcare services and preventative medicine;
 - e. Utilize technologies, such as telemedicine, where appropriate;