

## THE ECONOMIC AND SOCIAL COUNCIL

ES/I/5

SUBJECT OF RESOLUTION: High-Level Segment: The Contribution of Human Resources Development, Including in the Areas of Health and Education, to the Process of Development

SUBMITTED TO: The Economic and Social Council

SUBMITTED BY: Congo, Finland, Ghana, Greece, Ireland, Mozambique, Nepal, Netherlands, Saudi Arabia, Uganda, United Kingdom, United States, Ukraine

### *The Economic and Social Council*

1            *Recognizing* that health, basic education, infrastructure development and self-determination are  
2 paramount to a country's sovereignty and self-sufficiency,

3            *Alarmed by* the tendency for AIDS to shorten lifespans, thus precluding the realization of full  
4 economic benefit derived by educational initiatives,

5            *Confident* that the distinguished membership of this body seek to resolve chronic poverty and  
6 lack of health and education for all,

7            *Reassured* that member nations can come together to achieve common cause,

8            *Noting with deep concern* the shortcomings of previous international programs to meet the  
9 growing demands of our world community's developing nations,

10           *Confident* in the United Nations' ability to coordinate the world's resources towards development  
11 of the above stated ideals,

12           *Realizing* that indebtedness is a strong deterrent to internal infrastructure and capital investment,

13           *Reaffirming* the commitment to the Millennium Goals of September 2000,

14           *Deeply convinced* that all human citizens, women and men alike, are guaranteed self-evident  
15 basic human dignities and respect,

16           *Welcoming* the Report of the Secretary-General on the contribution of human resources  
17 development, including the areas of health and education to the process of development,

18            *Observing* that each nation is inherently concerned with its own individual needs,

19            *Noting* the call for educational and health programs specific to each nation s problems,

20            *Keeping in mind* the inability of the UN to establish education and health curriculum and  
21 programs for every nation; due to financial, logistical, and cultural issues,

22            *Recognizing* that there are similarities within specific regions of the world in their concerns with  
23 health and education,

24            *Reaffirming* each nation s specifics however, simultaneously.

25            1. *Invites* all member states to participate in the Developing Nations Reinforcement  
26 Commission (DNRC), to be funded from the member states within the Commission who have the  
27 means to contribute;

28            (a) *Urges* members within the DNRC to re-allocate their excess resources to those members  
29 who require those resources in particular times of need;

30            (b) *Suggests* that such resources be in the form of non-monetary contributions including, but not  
31 limited to agricultural commodities, human resources, natural resources, academic materials, and  
32 construction materials;

33            (c) *Requests* members to lend technical expertise to facilitate knowledge exchanges regarding  
34 individual member states' resource surpluses and deficits;

35            (d) *Calls upon* the DNRC to cooperate among its members to determine appropriate courses of  
36 action for each individual member state to develop its social, economic, education, and health  
37 infrastructures;

38            2. *Urges* member states to form partnerships with NGOs and the private sector to facilitate  
39 incorporation of HIV/AIDS education, and vocational programs within existing educational  
40 infrastructures;

41            3. *Calls upon* the IMF and the World Bank to initiate a pilot program to achieve Debt reduction.  
42 A regional candidate will be chosen from within the blocks of the LDC's;

43            4. *Further call upon* the IMF to reduce by 4%, the interest payment on loans received by the  
44 recipient member nation. The 4% would then be re-directed into the UN pilot program under the  
45 supervision of the regional subcommittees and invested into the Health and education superstructure of  
46 the pilot Nation;

47            5. *Designates* aforementioned regional subcommittees to administer funding to "grassroots"  
48 organizations for the implementation of domestic health and education programs;

49            6. *Endorses* transparency in fund transferring and distribution in co-monitoring by the IMF and  
50 the participant nation;

51            7. *Calls upon* the creation of regional health and education committees worldwide to aid and  
52 administer UNESCO, UNICEF and DNRC projects;

53            8. *Calls for* each regional committee to take part in an overall summit once every two years to

54 report progress and to express their concerns;

55 9. *Emphasizing* the roll of UNESCO to educate regional committees in the best plans of action  
56 specific to their region.

Final Vote: 18 - 11 - 13