



American Model United Nations
World Health Organization Executive Board

WHO/I/6

SUBJECT OF RESOLUTION: Promoting the health of migrants

SUBMITTED TO: The World Health Organization Executive Board

The World Health Organization Executive Board,

1 *Recognizing* the importance of engaging with community-based organizations and using culturally appropri-
2 ate methods and messages,

3 *Deeply disturbed* by a lack of resources and health-care staff trained in cultural issues,

4 *Draws attention to* a previous bias to only focus on health interventions for migrants related to non-
5 communicable diseases,

6 *Takes notes of* the complications that arise with the implementation of cultural sensitivity programs that
7 do not provide a clear plan,

8 *Recognizes* that translation is not the only part of a plan to most effectively encourage populations,

9 *Noting with satisfaction* the Neighborhood Mothers program's efforts in building trust and the confidence
10 among migrant and refugee communities that is needed to ask questions, get answers, and become receptive to change
11 relating to health care,

12 1. *Recommends* the creation of an ad campaign targeted toward migrants to:

13 (a) Encourage migrants to seek health care both en-route and in the host country;

14 (b) Provide culturally and religiously sensitive information;

15 (c) Provide information as to where health care centers are;

16 (d) Encourages this campaign to be carried out using;

17 (i) Radio media;

18 (ii) New print media;

19 (iii) Pamphlets;

20 (iv) Social media platforms;

21 (v) Televisual media;

22 (e) Consist of one-third regional ambassadors, one-third cultural experts, one-third migrant health
23 officials;

24 2. *Encourages* building migrant support through the Trusted Action Program for Local Engagement, which
25 would:

26 (a) Consist of regional and local committees made up of half health professionals and half host
27 community representatives;

28 (b) Monitor communities for migrants sentiment on seeking health care;

29 (c) Facilitate collaboration between local community leaders, migrants and health professionals;

30 (d) Create a platform for small-scale crisis management;

31 (e) Allow for feedback and dialogue with migrant populations and health officials;

32 (f) Increase trusting relationships between health providers and migrants;

33 3. *Emphasizes* the effectiveness of face-to-face communication by a peer educator or health professional in
34 exchanging information on health care whenever possible:

35 (a) Further invites that whenever face-to-face communication might not be possible, alternative
36 avenues for communications such as mass media, social media and the use of materials, such as leaflets and videos
37 in local languages be adopted to ensure the exchange of health-care related information;

38 4. *Recommends* that willing members of Community-Based Organizations (CBOs) receive training pertaining
39 to dealing with migrants and refugee issues from related and concerned NGOs and other voluntary and social
40 organizations:

41 (a) Further recommends that Community-Based Organizations consider using culturally
42 appropriate methods and messages during conversations;

43 (b) Designates that community-based organizations consider conversing in a languages that migrants
44 are most comfortable with;

45 (c) Further designates that CBOs take into consideration the specific cultural norms, religion, or
46 shared ancestry of the migrants and refugees during their conversation sessions so as to maintain sensitivity to those;

47 5. *Recommends* research efforts aiming to build state specific research files overseen by the national govern-
48 ments in collaboration with the WHO:

49 (a) Recommends the creation of an ad campaign from regional WHO targeted toward migrants to;

50 (i) Encourage this campaign to be carried out using but not limited to;

51 (ii) News print media;

52 (b) Consists of a collaboration of regional ambassadors, cultural experts and migrant health officials
53 to create ad content;

54 6. *Supports* the utilization of bilingual health providers, interpreters, cultural translators, and mediators
55 when providing health care services to migrants and refugees.

Passed by consensus, with 0 abstentions