



American Model United Nations
Human Rights Council

HRC/I/4

SUBJECT OF RESOLUTION: The human rights to safe drinking water and sanitation

SUBMITTED TO: The Human Rights Council

The Human Rights Council,

1 *Guided by* the purposes and principles of the Charter of the United Nations,

2 *Noting* that lack of access to clean water and good sanitation leads to health issues,

3 *Recognizing* that women make up around half of the world's population and play an integral role in educating
4 their communities,

5 *Acknowledging* that access to clean water and basic sanitation is a human right,

6 *Observing* the disproportionate impact of a lack of access to adequate water and sanitation facilities for
7 people who menstruate, as noted in previous United Nations General Assembly Resolution 74/141 of 18 December
8 2019,

9 *Concerned* about social exclusion that people with menstruation are confronted with on a daily basis in
10 schools, the workplace, health centers and other public facilities,

11 *Recalling* the Sustainable Development Goals 5 and 6, aiming to achieve full availability of water and sani-
12 tation and gender equality,

13 1. *Creates* the program Fortify healthcare to combat infectious diseases and support the maintenance of
14 community health in areas facing water insecurity, which:

15 (a) Establishes a committee called the Upstart Committee composed of World Health Organization
16 (WHO) doctors who specialize in disease, architects, representatives from Member States adopting this program,
17 medical professionals including but are not limited to nurses, health technicians, medical scientists, pharmacists, and
18 nurses aides;

19 (b) Have this committee oversee the building and establishment of these hospitals, the training of
20 citizens from member states lack proper staffing for healthcare, and the development of water hubs within commu-
21 nities;

22 (c) Encourages resources to be directed toward existing hospitals and healthcare programs in coun-
23 tries facing water insecurity to;

24 (i) Let member states apply for these grants through an application process focusing on;

25 A. Further developing the existing health infrastructure within a Member States;

26 B. Demonstrating a need for resources and support;

27 C. Ensuring clean water, proper sanitation as well as supporting feminine hygiene;

28 (ii) Let these applications be evaluated by the Upstart Committee outlined above;

29 (iii) Let the program be re-evaluated every year by the Upstart committee in order to ensure the
30 intended effect is achieved;

31 (d) Encourages Member States to build hospitals with the Fortify program, that;

32 (i) Recommends that these hospitals be built with sustainable materials, such as, mushroom insu-
33 lation, wool insulation, stone, bamboo, straw bales, packed earth, and biocomposites;

34 (ii) Lets these projects be overseen by local construction agencies to further develop job opportunities
35 within the local community to;

- 36 A. Have these companies hire and train members from the local communities to create a job market;
- 37 (iii) Locates these hospitals near community hubs such as schools or religious communities;
- 38 (iv) Provides these hospitals with the necessary materials, such as PPE, hospital stretchers, cleaning
39 supplies, patient monitors and additional resources that Upstart deems necessary;
- 40 (v) Calls for the hospitals to be equipped to combat diseases and illnesses due to poor sanitation,
41 with supplies such as vaccines, antibiotics and medications;
- 42 (vi) Establishes programs to educate community members on being healthcare providers by;
- 43 A. Offering this program which will be taught by professors at nearby universities and members of
44 the WHO;
- 45 B. Hiring interpreters for communities that demonstrate need;
- 46 C. Having these programs be paid education programs, in order to make these programs accessible
47 to everyone;
- 48 D. Having these programs take place at these hospitals;
- 49 E. Allowing the adoption of these programs;
- 50 F. Having Upstart continually reevaluate if these professors are necessary or if the programs can be
51 self-sufficient with members of the community take on teaching roles;
- 52 (vii) Calls for the WHO to provide Mobile Health Units (MHUs) to these communities while hospitals
53 are being built in order to provide immediate relief;
- 54 (e) Emphasizes the development and sustainability of clean water hubs in these hospitals by;
- 55 (i) Developing water hubs closer to rural communities for clean water access;
- 56 (ii) Implements training programs for members of the community to obtain employment within
57 water hubs;
- 58 (iii) Decreasing the distance community members must walk to reach clean water to use on a daily
59 basis;
- 60 A. Assesses the need in communities for closer water resources;
- 61 B. Constructs the water hubs in locations based on this assessment with similar sustainable materials
62 to those listed above;
- 63 (iv) Renting Water filtration technologies at affordable prices to community members, in order to
64 use profits from this effort to improve water hubs through the purchasing of improved filtration
65 systems;
- 66 (v) Uses drones and similar technologies to airdrop water from these hubs into rural communities,
67 communities suffering from drought, and those where it is currently unfeasible to construct hubs;
- 68 2. *Calls for* the establishment of the Code Pink program at current hospitals, Fortify Hospitals or community
69 hubs to help aid in:
- 70 (a) Educating the community on how to use existing resources to sanitize and cleanse water with
71 methods that will include charcoal, straw bales, ceramic filtration, boiling water and solar water disinfection (SODIS)
72 which can be made more effective by using lime juice;
- 73 (b) Distributing sustainable menstrual products for the purpose of making menstrual products more
74 accessible to the community including but not limited to linen pads, menstrual cups/disks and anything else the
75 community might already use;
- 76 (c) Educating the female population of communities about proper menstrual sanitation and hygiene;
- 77 (i) Topics include, but are not limited to menstrual hygiene; proper personal hygiene including hand
78 washing and proper body hygiene; proper waste disposal including excretion, menstrual waste and
79 gray water;

- 80 A. Education on cross-contamination and community spread;
- 81 (ii) Training community leaders about these issues to create culturally sensitive educators that
- 82 respect the customs of the community;
- 83 (d) Helping distribute reusable sanitary products necessary for childcare including but not limited
- 84 to linen diapers, sanitary towels and anything the local community may already use for childcare;
- 85 (e) Establishing programs within local community schools to help educate children on basic hygienic
- 86 practices to increase the proximity of youth to safe drinking water.

Passed, Yes: 23 / No: 7 / Abstain: 6