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

SUBMITTED TO: The Human Rights Council

The Human Rights Council,

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

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

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

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

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

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

Recalling the Sustainable Development Goals 5 and 6, aiming to achieve full availability of water and sanitation and gender equality,

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

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

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

   (c) Encourages resources to be directed toward existing hospitals and healthcare programs in countries facing water insecurity to;

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

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

         B. Demonstrating a need for resources and support;

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

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

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

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

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

      (ii) Lets these projects be overseen by local construction agencies to further develop job opportunities within the local community to;
A. Have these companies hire and train members from the local communities to create a job market;

(iii) Locates these hospitals near community hubs such as schools or religious communities;

(iv) Provides these hospitals with the necessary materials, such as PPE, hospital stretchers, cleaning supplies, patient monitors and additional resources that Upstart deems necessary;

(v) Calls for the hospitals to be equipped to combat diseases and illnesses due to poor sanitation, with supplies such as vaccines, antibiotics and medications;

(vi) Establishes programs to educate community members on being healthcare providers by;

A. Offering this program which will be taught by professors at nearby universities and members of the WHO;

B. Hiring interpreters for communities that demonstrate need;

C. Having these programs be paid educations programs, in order to make these programs accessible to everyone;

D. Having these programs take place at these hospitals;

E. Allowing the adoption of these programs;

F. Having Upstart continually reevaluate if these professors are necessary or it the programs can be self-sufficient with members of the community take on teaching roles;

(vii) Calls for the WHO to provide Mobile Health Units (MHUs) to these communities while hospitals are being built in order to provide immediate relief;

(e) Emphasizes the development and sustainability of clean water hubs in these hospitals by;

(i) Developing water hubs closer to rural communities for clean water access;

(ii) Implements training programs for members of the community to obtain employment within water hubs;

(iii) Decreasing the distance community members must walk to reach clean water to use on a daily basis;

A. Assesses the need in communities for closer water resources;

B. Constructs the water hubs in locations based on this assessment with similar sustainable materials to those listed above;

(iv) Renting Water filtration technologies at affordable prices to community members, in order to use profits from this effort to improve water hubs through the purchasing of improved filtration systems;

(v) Uses drones and similar technologies to airdrop water from these hubs into rural communities, communities suffering from drought, and those where it is currently unfeasible to construct hubs;

2. Calls for the establishment of the Code Pink program at current hospitals, Fortify Hospitals or community hubs to help aid in:

(a) Educating the community on how to use existing resources to sanitize and cleanse water with methods that will include charcoal, straw bales, ceramic filtration, boiling water and solar water disinfection (SODIS) which can be made more effective by using lime juice;

(b) Distributing sustainable menstrual products for the purpose of making menstrual products more accessible to the community including but not limited to linen pads, menstrual pups/disks and anything else the community might already use;

(c) Educating the female population of communities about proper menstrual sanitation and hygiene;

(i) Topics include, but are not limited to menstrual hygiene; proper personal hygiene including hand washing and proper body hygiene; proper waste disposal including excretion, menstrual waste and gray water;
A. Education on cross-contamination and community spread;

(ii) Training community leaders about these issues to create culturally sensitive educators that respect the customs of the community;

(d) Helping distribute reusable sanitary products necessary for childcare including but not limited to linen diapers, sanitary towels and anything the local community may already use for childcare;

(e) Establishing programs within local community schools to help educate children on basic hygienic practices to increase the proximity of youth to safe drinking water.

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