**FORUM:** GENERAL ASSEMBLY I

**QUESTION OF:** Implementing economic regulations on the healthcare market to guarantee its accessibility and affordability

**SUBMITTED BY:** Brazil

**CO-SUBMITTERS:** Vietnam, DPRK, Tanzania, DRC

THE GENERAL ASSEMBLY,

*Stressing* that the lack of internationally accessible and affordable healthcare is an urgent problem that must be addressed,

*Acknowledging* that Member States have different resources, plans, and policies to combat accessible and affordable healthcare,

*Acknowledging* that there have been endeavours to combat this issue in the past by the general assembly especially in 2019 (resolution A/RES/74/2),

*Recognizing* that access to public health services is a fundamental human right according to the Office of the United Nations High Commissioner for Human Rights (OHCHR), the United Nations, and the World Health Organization (WHO),

*Recognizing* that LEDCs do not always have access to resources to advance the healthcare industries of their societies,

*Recognizing* that public healthcare is one of the main ways which countries have provided accessible and affordable healthcare in the past,

*Reaffirming* that accessibility of the health care system often comes through heavy regulation of the prices of goods and services on the healthcare market or otherwise public health care systems often financed by taxes,

*Reaffirming* that heavy regulation of the prices of goods and services in the healthcare market can destroy natural competition,

*Reaffirming* that universal health coverages one of the steps to achieve the sustainable development goals,

*Recognizing* the endeavours already done by Member States to combat this issue,

*Supporting* the endeavours, ideologies and plans of the WHO of this problem,

*Defining* “accessible” as something which is easily available and obtainable,

*Defining* “affordable” as something which is within financial means for almost everyone,

1. Urges all Member States to make an economic union as an affiliate of the United Nations that:
	1. demands MEDCs to assist LEDCs to flourish,
	2. collects a fixed percentage of each Member State’s gross domestic product every year,
	3. grows its own capital through investments with return,
	4. invests its capital in Member States to reach sustainable development goals,
	5. invests in resources that can make healthcare goods and services more affordable and accessible (applicable to all other industries, too),
	6. negotiates prices of resources that can be sold to Member States at a lower price than other countries,
	7. makes laws, regulations, and policies on behalf of countries (with the given country’s permission) that:
		1. allow healthy markets and competition and the economy in capitalist countries to thrive,
		2. ensure cooperative economic growth of countries,
		3. shares resources between Member States to allow all Member States’ economies to flourish;
2. Calls upon all Member States to create a political union as an affiliate of the United Nations that:
	1. makes laws, regulations, and policies on behalf of countries to;
		1. guide LEDCs in terms of sustainable development,
		2. restrict or not restrict how governments are able to do things for the benefit of the people,
	2. creates government agencies in Member States which urges countries to work cooperatively to reach sustainable development, including healthcare accessibility and affordability;
3. Encourages all Member States to make regulations that clearly sets a price ceiling for goods and services in the healthcare industry;
4. Proposes for each Member State to create a tax-funded public healthcare system that:
	1. is available in Member States for citizens of other Member States and vice versa,
	2. is universally accessible,
	3. is affordable or free,
	4. only uses sustainable equipment and resources,
	5. is densely distributed in the Member States physically,
	6. is digitally easily accessible and if paid for, are affordable,
	7. is organized for maximum efficiency and best function,
	8. is available at all times;
5. Recommends changes in the distribution of government funds in favor of the well-being of the people in times of global crisis instead of less essential sectors of government activity, and the application of these changes in the repartition of the national budget towards the acquisition of medical resources to present a better sanitary infrastructure;
6. Decides to remain actively seized upon the matter.