

Committee: Health

Issue: Responding to Food Insecurity in Syria

Student Officer: Isabella Hendricks (Felsted School)

Background Information:

Over 5.6 million people have fled Syria since 2011, seeking refuge in Lebanon, Turkey, Jordan, and beyond. As the war continues, some 6.3 million people remain displaced within the country. The conflict is compounded by deepening nationwide hunger with more than half of the population unable to meet their daily needs due to factors involving constrained humanitarian access. The uncertainty of the conflict is resulting in an increasing number of **internally displaced people (IDPs)** and high food prices continue to put pressure on families.¹

Food shortages have resulted in people adopting negative coping strategies, with 6.9 million people being **food insecure**. In a country of 18.6 million people, only 3.5 million Syrians are food secure. As a result, 50% of Syrian households have reduced their number of daily meals and more than 30% have restricted the consumption of adults to prioritise children. Families are selling assets to buy food, withdrawing their children from school or resorting to child labour to increase household income.

Since 2017, the production of wheat and barley has slightly improved due to better rain and improved access to land. However, despite these improvements, wheat production remains more than 50% less than the pre-crisis 10 year average due to high costs, lack of **agricultural inputs** and damaged or destroyed infrastructure, due to war. Although herd sizes have stabilised, restricted access to traditional grazing areas, higher fodder prices, and scarce veterinary services continue to be challenges for the nation. In fact, an estimated 16 billion USD worth of agricultural production and assets has been damaged or destroyed. The significant losses are affecting rural farming and herding families, forcing migration or searches for other sources of income.

In response to this, the **Food and Agriculture Organization of the United Nations (FAO)** have begun to:

- Support staple food production through seed distributions, training in cropping methods, and rehabilitating infrastructure.
- Increase household nutrition and income through supporting backyard food production (micro-gardening kits for displaced families and poultry production packages), conditional cash assistance, and vouchers and technical training.
- Protect and boost livestock assets through vaccination and treatment campaigns, distribution of animal feed and small livestock, and building veterinary capacity.

¹ <http://www.fao.org/emergencies/crisis/syria/en/>

- Improve coordination for an effective **food security response**.

Definition of Key Terms:

Internally Displaced People (IDPs):

Internally displaced persons (IDPs), according to the *United Nations Guiding Principles on Internal Displacement*, are "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border."²

Food Insecurity:

The USDA defines food insecurity as a state in which “consistent access to adequate food is limited by a lack of money and other resources at times during the year.”³

Agriculture Inputs:

Agricultural inputs are defined as products permitted for use in organic farming. These include feedstuffs, fertilizers and permitted plant protection products as well as cleaning agents and additives used in food production.⁴

The Food and Agriculture Organization (FAO):

The Food and Agriculture Organization of the United Nations, founded in 1945, is a specialized agency of the United Nations that leads international efforts to defeat hunger. Serving both developed and developing countries, FAO acts as a neutral forum where all nations meet as equals to negotiate arguments and debate policy.⁵

Food Security:

Food security, as defined by the United Nations' Committee on World Food Security, is the “condition in which all people, at all times, have physical, social and economic access to sufficient safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.”⁶

² <https://emergency.unhcr.org/entry/250553/idp-definition>

³ <https://www.feedingtexas.org/learn/food-insecurity/>

⁴ <https://www.easy-cert.com/htm/betriebsmittel.htm>

⁵ https://en.wikipedia.org/wiki/Food_and_Agriculture_Organization

⁶ <http://www.ifpri.org/topic/food-security>

Committee: Health

Issue: Addressing Mental Health in Protracted Humanitarian Crises.

Student Officer: Anel Alpysbayeva (Felsted School)

Key definitions:

Protracted Crisis:

An environment in which a significant proportion of the population is acutely vulnerable to death, disease and disruption of livelihoods over a prolonged period of time.

Mental Health: A state of well-being, where an individual is aware of his or her potential, can cope with the normal stresses of life, can work productively, and is able to contribute to the community

Background Information:

- Mental health problems stunt social and economic development and recovery after conflict or crisis:
 - poor mental health has been linked with unemployment, decreased economic productivity, poor educational achievements, and poverty in both developed and developing countries. Indeed, the World Health Organization (WHO) and the World Bank have recognized that mental health problems can significantly impair economic growth, social progress, and human development.
- Mental health is often neglected and under-funded:
 - despite the high disease burden, mental health is largely missing from the global public health agenda and remains one of the most underfunded areas of health care, especially in low-income countries. Mental health and psychosocial support generally still receive a low priority by governments and donors in the context of responding to disaster.
- WHO recommends at least 1 supervised health care staff member in every general health facility during humanitarian emergencies to assess and manage mental health problems.
- According to the World Health Organisation (WHO), the prevalence of mild and moderate mental disorders can increase from a baseline of 10% to an estimated 15–20% in a humanitarian crisis. The prevalence of severe mental disorders can increase from 2–3% to 3–4%.⁷

Main Characteristics of Protracted Crises:

- There is not yet a commonly accepted international definition of what constitutes a protracted conflict, or how long a conflict has to last to become “protracted”. The phrase emerged in the 1970s in the work of the Lebanese professor, Edward Azar,

⁷ <https://www.odi.org/events/4562-improving-mental-health-care-humanitarian-crises>

who distinguished protracted social conflicts by their intractability and longevity – the former characteristic being responsible for the latter.⁸

- Protracted conflict can be marked by the longevity of one main conflict, or a series of many different conflicts. Some conflicts, like those in Israel-Palestine, Sri Lanka and even Colombia, have involved the linear protraction of a singular conflict.⁹ Many other protracted conflicts more typically involve a tangled history of several different and sometimes simultaneous conflicts over the same territory. Some of these conflicts have grand political aims. Others have very local goals. Many have strong criminal and economic dimensions, and many involve a range of micro- conflicts that take advantage of a larger armed conflict to settle personal scores.¹⁰

Committee: Health

Issue: Combatting the International Obesity and Diabetes Epidemic

Student Officers: Izzy Hendricks & Anel Alpysbayeva (Felsted School)

Key definitions:

Obesity is a chronic medical condition described as an abnormal or fat accumulation that results in health complications.

Diabetes is a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar), which leads over time to serious damage to the heart, blood vessels, eyes, kidneys, and nerves. The most common is type 2 diabetes, usually in adults, which occurs when the body becomes resistant to insulin or doesn't make enough insulin.

Body Mass Index (BMI) is a simple index of weight-for-height that is commonly used to classify being overweight and levels of obesity in adults. It is defined as a person's weight in kilograms divided by the square of his height in metres (kg/m^2).

Waist circumference is a measurement taken around the abdomen at the level of one's belly button. Health experts use this to screen patients for possible weight-related health problems, as it can reveal the location of fat on the body.

Background Information:

Obesity is a complex medical condition, which affects all age and socioeconomic groups from both developing and developed nations. In 1995, there were approximately 200 million obese adults worldwide. Today, nearly one-third of the world's population suffers from obesity, which derive from a variety of factors, such as genetics, immobility, and overeating.

Although men have higher rates of being overweight, women have higher rates of obesity. For both, however, obesity poses a major risk for noncommunicable diseases, such as diabetes, cardiovascular disease, hypertension and stroke, and cancer. In response, since 1990, the World Health Organization (WHO) has begun to raise public awareness over the issue in countries around the world. Being aware that obesity is predominantly a social and environmental disease, WHO has launched campaigns which develop strategies to influence young individuals to make healthier life choices.

Timeline:

Obesity and Overweight Statistics:

- In 2016, more than 1.9 billion adults aged 18 years and above were overweight. Of these 650 billion adults were obese.

- In 2016, 39% of adults aged 18 years and over (39% of men and 40% of women) were overweight.
- Overall, about 13% of the world's adult population (11% of men and 15% of women) were obese in 2016.
- ¹¹The worldwide prevalence of obesity nearly tripled between 1975 and 2016.
- In 2016, an estimated 41 million children under the age of 5 years were overweight or obese.
- Once considered a high-income country problem, the problem of the numbers of those who are overweight and obese is now on the rise in low- and middle-income countries, particularly in urban settings.
 - In Africa, the number of overweight children under 5 has increased by nearly 50 per cent since 2000.
 - Nearly half of the children under 5 who were overweight or obese in 2016 lived in Asia.¹²
- The prevalence of being overweight and obese among children and adolescents aged 5-19 has risen dramatically from just 4% in 1975 to just over 18% in 2016. The rise has occurred similarly among both boys and girls: in 2016 18% of girls and 19% of boys were overweight.¹³
- Issues to do with being overweight and obese are linked to more deaths worldwide than being underweight. Globally, there are more people who are obese than underweight – this occurs in every region except parts of sub-Saharan Africa and Asia.

Statistics on Diabetes:

- The number of people with diabetes has risen from 108 million in 1980 to 422 million in 2014.
- Diabetes is a major cause of blindness, kidney failure, heart attacks, stroke and lower limb amputation.
- In 2016, an estimated 1.6 million deaths were directly caused by diabetes. Another 2.2 million deaths were attributable to high blood glucose in 2012.
- Almost half of all deaths attributable to high blood glucose occur before the age of 70 years. WHO estimates that diabetes was the seventh leading cause of death in 2016.
- The global prevalence of diabetes among adults over 18 years of age has risen from 4.7% in 1980 to 8.5% in 2014.¹⁴
 - Diabetes' prevalence has been rising more rapidly in middle- and low-income countries.

¹¹ <https://www.who.int/en/news-room/fact-sheets/detail/obesity-and-overweight>

¹² <https://www.verywellfit.com/what-is-waist-circumference-3495558>

¹³ <https://www.who.int/nutrition/topics/obesity/en/>

¹⁴ <https://www.niddk.nih.gov/health-information/health-statistics/overweight-obesity>

- Healthy diet, regular physical activity, maintaining a normal body weight and avoiding tobacco use are ways to prevent or delay the onset of type 2 diabetes.¹⁵
- Diabetes can be treated and its consequences avoided or delayed with diet, physical activity, medication and regular screening and treatment for complications.¹⁶

¹⁵<http://www.healthdata.org/news-release/nearly-one-third-world's-population-obese-or-overweight-new-data-show>

¹⁶<https://www.who.int/news-room/fact-sheets/detail/diabetes>

Committee: Health

Issue: Managing Global Food Distribution and Waste

Student Officers: Beatrice Zaccardi (Felsted School)

Abstract: Food waste (FW) is a priority both at global and European level. The United Nations (UN) defined the Sustainable Development Goal 12.3 target as follows: ‘by 2030, halve per capita global FW at the retail and consumer levels and reduce food losses along production and supply chains, including post-harvest losses’.¹⁷

Background Information :

Around 33% of the food created for human consumption, gets lost or wasted globally, which is about 1.3 billion ton for every year. Food is wasted all through the entire Food Supply Chain (FSC), from beginning agricultural production down to final household consumption. In medium- and high-income countries food is wasted on a significant scale, suggesting that food is thrown away, regardless of if it is still suitable for human usage. Nonetheless, a high amount of food is in like manner lost and wasted at the early stage of the FSC, particularly in low-income countries. This might be a consequence of pre-harvest issues, such as but not constrained to pest infestation, or challenges in harvesting, handling, storage, packing and transportation. Furthermore, a portion of the fundamental reasons for food loss incorporate the insufficiency of infrastructures, markets , price mechanism or perhaps the absence of a fully functioning legal system.

Moreover, food losses in industrialised countries are as high as in developing countries, although in LEDCs more than 40% of the food losses occur at post-harvest and processing level, whereas in MEDCs, more than 40% of the losses occur at retail and consumer levels. On a larger scale, food waste at consumer level in industrialised countries (222 million tons) is nearly as high as the total net food production in sub-Saharan Africa (230 million tons).

Reducing food loss and waste is critical to creating a Zero Hunger world and reaching the world’s Sustainable Development Goals (SDGs), especially **SDG 2**¹⁸ (End Hunger) and **SDG 12**¹⁹ (Ensure sustainable consumption and production patterns).

Definition of Key Terms:

¹⁷<https://ec.europa.eu/jrc/en/publication/food-waste-accounting-methodologies-challenges-and-opportunities>

¹⁸ <http://www.fao.org/sustainable-development-goals/goals/goal-2/en/>

¹⁹ <http://www.fao.org/sustainable-development-goals/goals/goal-12/en/>

Food supply chain: a system of organisations, people, activities, information, and resources involved in moving a product or service from supplier to customer.

Post-harvest losses : occur between harvest and the moment of human consumption. They include on-farm losses, such as when grain is threshed, winnowed, and dried, as well as losses along the chain during transportation, storage, and processing.