The High-level Political Forum on Sustainable Development,

Noting with deep concern the impact on health and loss of life, the exacerbation of poverty and hunger, and disruption to economies and communities due to the COVID-19 pandemic,

Having examined the disastrous effects the COVID-19 pandemic has on the pursuit of the Sustainable Development Goals (SDGs) 11 and 12 in regards to sustainable production, consumption, welfare systems, and the possibility for future catastrophes to halt or reverse the progress all Member States have thus far made in creating a sustainable world,

Recognizing the need for investments in technological development through partnerships with universities and research groups to ensure solutions to health crises that are conscious of their environmental impact, that address the immediate threats of COVID-19, and that increase the resilience of Member States against future health crises,

Aware of the current developments of efforts such as that of the LUT University in Finland which have created biodegradable personal protective equipment (PPE) including masks and gloves,

Stressing the need for rapid, accessible, and convenient assessment of COVID-19 symptoms and concerns through a form of telemedicine suited for developing and underdeveloped regions as developed by the StopCoV Initiative of the Georgian government,

Believing that transparency and accuracy in reporting can provide a roadmap to pandemic recovery, and thereby the achievement of the 2030 Agenda, which can be best addressed by the comprehensive implementation of Voluntary National Reviews (VNRs) with the goal of increasing the number from 47 reports in 2020,

Prioritizing the need to focus on Least Developed Countries (LDCs), such as nations in the Global South which are defined as low-income countries confronting severe structural impediments to sustainable development,

Mindful of the need for global digitalization of patient, hospital, and national medical information among the Member States to better tackle the pandemic and therefore highlight the importance of the lack of balanced and equal information, resource and fund sharing for the developing countries and development system,

Highlighting that the International Institute for Sustainable Development (IISD) projects that global poverty will not have been eliminated by the target date of 2030,

Deeply concerned about the increase in domestic violence and human trafficking cases during the COVID-19 Pandemic from the already alarming statistic of 1 in 3 women experiencing violence that UN Women reported before the pandemic,
Noting further the higher impact that COVID-19 had on women and LGBTQ+ individuals as women are more highly represented in frontline healthcare systems and as LGBTQ+ individuals are more highly represented in industries negatively affected by COVID-19 including restaurants, hospitality, and healthcare as reported by the Human Rights Council (HRC),

Drawing attention to the importance of the equitable distribution of accessible and affordable medical aid, especially to those in areas lacking adequate infrastructure,

Emphasizes the commitment to sustainable development particularly through its private sector, such as through the Swiss model of health infrastructure, ACT-Accelerator tool of the World Health Organization (WHO), and corporations with great capacities to unify and communicate about COVID-19 recovery and SDGs efforts,

Guided by the principles of the Global Sustainable Development Goals Indicators Database, which provides data to the global community surrounding SDG progress particularly concerning questions on definitions, methods of computation, data, or other issues,

Remembering the “Take care before you share” initiative of Under-Secretary-General Melissa Fleming,

Referencing the work done by the United Nations Development Programme and the Flora Hewlett Foundation in spreading digital information access to foster a greater global understanding of the methods and processes by which to combat the COVID-19 pandemic,

Cognizant of the life-saving potential of making COVID-19 vaccines accessible for all peoples,

Recalls the existence of UN-sanctioned and established frameworks for emergency relief, such as the Sendai Framework formed under the UN Office for Disaster Risk Reduction to address existing disaster risk, and the WHO Health Emergency and Disaster Risk Management Framework on COVID-19,

Acknowledging the volume of misinformation, especially related to health and safety SDGs and the COVID-19 pandemic, and the need for increased sharing of high-quality research and public health information to accelerate the end of the COVID-19 pandemic,

Further recalls General Assembly resolution 74/57 which aims for global cooperation among the Member States to create strategies, ensure inclusive access to medicines, vaccines, and medical equipment for all,

In recognition of Article 45 of the 2005 International Health Regulations (IHR) which lays out specific guidelines for the collection and use of personal data for public health purposes,

Reiterating the importance of local non-governmental organizations (NGO) in community-based solutions, whose proximity to these communities allows them to understand the needs of these populations and collaborate with international NGOs to utilize best practices,

Recognizing existing organizations that understand the particular needs of certain regions such as the ASEAN Agreement on Disaster Management, UN Central Emergency Response Fund (CERF) to allocate pandemic emergency funding based on the identified risks of Member States,
Noting the Swiss National Science Foundation and National Natural Science Foundation of China as organizations that give monetary support for similar research,

1. **Calls for** investment in technological innovations to improve the resiliency of the healthcare system in future crises through:
   
a. Including technological innovations to improve telemedicine within the Member States that can operate under crisis conditions;
   
b. Developing biodegradable and sustainable PPE and other strategies to increase the resilience of healthcare systems in alignment with SDG 3;

2. **Further calls for** the implementation of these research programs through partnerships with organizations that support these developments, including universities, global research groups, and civil sector organizations:
   
a. Inviting wealthier Member States to contribute a share of their gross national income to targeted assistance for lesser developed countries;
   
b. Partnering with Greenpeace and the World Wide Fund for Nature as proposed organizations for ensuring the conservation, research, and restoration of the environment in the sustainable use of natural resources;

3. **Directs attention** to the fact that many developing countries have limited medical capacities, and urges education efforts by:
   
a. Encouraging equipping existing UN organizations and NGOs working with local communities to train local leaders to provide COVID-19 education through workshops which they can replicate within their communities to share safety measures such as sanitation, vaccine necessity, and managing symptoms;
   
b. Suggesting that the UN Member States implement comprehensive health coverage systems;

4. **Invites** Member States to partner with regional and international health centers to establish mobile medical caravans, providing vaccines, and other immunizations, as well as basic humanitarian aid to vulnerable populations;

5. **Encourages** organizations such as but not limited to the WHO, IISD, Organization for Economic Cooperation and Development (OECD), and the Danish Council for Strategic Research to communicate and collaborate on education, information sharing, and SDG efforts in order to reduce redundancies;

6. **Supports** the actions of Member States to work in partnership with each other and all stakeholders, including the private sector, to increase research and development funding, promote digital technologies, foster international scientific cooperation, manufacturing and distribution of diagnostics, treatment protocol, and PPE, especially by:
a. Advising Member States to commit to the submission of a Voluntary National Review (VNR) within the next two years to increase transparency and information sharing between Member States;

b. Asking private stakeholders, including individuals, corporations, and NGOs to participate in recovery and education efforts in accordance with the 2030 Agenda and the 17 SDGs being supported by the work of organizations such as Global Education Program, World Learning, Global Education Coalition, and Save the Children International;

c. Encouraging further development of private-public partnerships (PPPs) in order to unite citizens, private sector entities, and governments to accelerate PPP development worldwide through collaboration in annual meetings;

7. **Strengthening** domestic resource mobilization and capacity building through:

   a. Providing trained professionals in sustainable production and distribution to (LDCs);

   b. Building infrastructure to increase the capacity of time to fill shortages in production;

   c. Encouraging the safe reopening of trade routes under fair conditions, with prices determined by an appropriate council of the Member State which takes into account the economic impact of COVID-19 on the states;

8. **Recommends** to the Economic and Social Council (ECOSOC) the implementation of a risk assessment program to assess the needs of Member States in addressing future pandemics:

   a. Advocates for the analysis of Member States’ capabilities in implementing sustainable production, consumption, and welfare systems, in line with SDGs 11 and 12, to uphold their economic system during an emergency scenario;

   b. Invites statistics operations and organizations around the world to improve the availability of data and to improve health data infrastructure to better prepare for future pandemic scenarios;

9. **Strongly urges** Member States to address SDG 16 by supporting women, children, and minorities by providing shelter for those suffering from domestic violence and or abuse and providing mental health services for those affected by the pandemic through:

   a. Advising the Member States to partner with NGOs such as Amnesty International and HealthRight International;

   b. Suggesting arranging hotlines and safe shelters for domestic violence and human trafficking to all public and free telephone services in the Member States to support populations that are at higher risk including women, children, and LGBTQ+ individuals;

   c. Reaffirming the importance of the implementation of free school lunch programs for students to support themselves and their families;
d. Encouraging that plans be submitted to the HLPF in collaboration with UN Women for accountability measures;

10. **Recommend**s using the framework of the UN Library to house the Mirror Policy Research Group (MPRG), an open-source database specifically containing information on the COVID-response policies of each Member State, including relevant public health statistics, by:

   a. Urging Member States who have seen policy successes throughout the ongoing health crisis or past disease outbreaks to document these and make this information available to other nations, communities, and non-profits still working to end the pandemic and prevent future outbreaks;

   b. Welcoming Member States and NGOs with the available resources to partner with the database program in order to not only fund the sharing of information but also to provide guidance to those Member States or organizations looking to implement strategies from the database;

   c. Annually publishing updated information into the database to share results with various Member States;

11. **Further recommends** the MPRG focus on global collaborative efforts towards addressing the adverse effects of the COVID-19 pandemic by:

   a. Shifting the focus away from exclusive SDG progress of the SDG Indicators Database from respective Member States;

   b. Concentrating on sharing experiences, challenges, and successes that the Member States encounter in their recovery efforts;

   c. Allowing the Member States to recommend their successes through the database as means to share practices;

   d. Implementing the worldwide digitization of Member States’ health records to monitor the recovery process from COVID-19;

   e. Invites Member States to utilize digital programs and telemedical technology to reduce human-to-human transmission of infectious viruses similar to COVID-19;

12. **Endorses** the implementation of strategic vaccine rollout procedures through:

   a. Creating national mass vaccination programs with a focus on widespread acceptance of the vaccine by the people and moving towards vaccine delivery programs;

   b. Reaching out to the global population on the credibility of vaccines and promoting clarity and transparency in verified information dissemination as part of the “Take Care Don’t Share” initiative;

   c. Proposing the creation of a "smart yellow card," a digitally improved International Certificate of Vaccination, to assist reinforce the COVAX vaccine’s efficacy;
13. *Mobilizes* international best practices into community-based solutions, using local NGOs such as the Center for Sustainable Rural Development, to access, educate and support vulnerable populations through:

   a. Tailoring evidence-based guidelines to better accommodate rural communities, migrant and refugee communities, low literacy populations;

   b. Adapting information from international entities, such as the WHO, to fit the local language, culture, customs, and unique populations of various Member States.
The High-Level Political Forum on Sustainable Development,

Affirming the 2030 Agenda’s pledge to leave no Member State behind, General Assembly resolution 70/1 (2015).

Deeply concerned by the Sustainable Development Goals’ (SDGs) slow progression,
Further recalling General Assembly resolution 74/57: International cooperation to ensure global access to medicine, vaccines, and medical equipment to face COVID-19,

Taking into account that the United Kingdom, Japan, and the European Union are benefitting from resources provided by national biobanks, while acknowledging the importance of vaccine accessibility within COVID-19 recovery, World Bank data concludes 84% of dosages have been administered in high-income countries, while only 0.3% of vaccine doses have been distributed within low-income countries,

Acknowledging the fact that a huge amount of resources will be lost if Member States are conducting futile vaccines race,

Emphasizes that NGOs and Aid organizations are unable or restricted from working in nations while sanctions are in place as the effects sanctions and blockades have on pandemic relief in developing Member States,

Stresses the fact that sanctions disrupt the distribution of electricity and water, the lack of which exacerbates existing problems as well as creating new ones,

Noting with regret the effects sanctions and blockades have on pandemic relief in developing Member States,

Recognizing that the link between SDG 3, Good Health and Wellbeing, SDG 13, Climate Action, SDG 14, Life Below Water, and SDG 15, Life on Land is being attributed to 1 in 4 total deaths, globally and linked to unhealthy environmental factors, human infectious diseases being shared with animals, and biodiversity loss,

Bearing in mind the chronic lack of education in vaccine administration and distribution in low-income Member States,

Noting SDG 3.D: strengthening the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks, General Assembly resolution 70/1 (2015).

Recalling the June 2016 General Assembly resolution A/HRC/32/L.20: “The promotion, protection and enjoyment of human rights on the Internet,” we are eager to work towards recognizing internet access as a human necessity, as it has been an effective method of spreading information that are essential for economic, health, and education incentives,
Further recalling the way that artificial intelligence (AI) technology is playing an increasingly important role in global health solutions, and that said solutions are only made possible by generous donors such as the Ford Foundation,

Expresses its appreciation of the digitally enhanced International Certificate of Vaccination, a "smart yellow card" to help strengthen the effectiveness of the COVAX initiative, the initiative created to accelerate the development and manufacturing of vaccines, and guarantee fair and equitable access for every country, vaccines pillar of the Access to COVID-19 Tools (ACT) Accelerator, established to speed development and equitable access to COVID-19 vaccines,

Having reviewed the Vienna Programme of Action for Landlocked Developing Countries (LLDCs) 2014-2024 which highlighted the need for Member States to assist LLDCs in building resilient health systems for the future,

Recommending the COVID-19 in-home management program for low-acuity COVID-19 cases as implemented by the Promise Armenian Institute,

Further recognizing the importance of strong international intellectual property (IP) protection to allow for innovators and researchers to reap the fruits of their labor,

Welcomes the advancement of long-distance and web-based technologies to provide medical care, diagnoses or prescriptions virtually, e-diagnoses and e-prescription respectively, and other large scale platforms to provide medical assistance, known as an internet hospital,

Fulfilling the call to action on Economic and Social Council paper E/HLPF/2021/4 for directing science and innovation towards the expansion of digital infrastructure and technologies to build more resilient societies, adaptable economies, and increase agency,

Recognizing the simulated limits that IP restrictions put on global vaccine development, Alarmed by the fact that COVID-19 has exacerbated economic disparities between Member States and that COVID-19 economic solutions are multifaceted with an emphasis on economic development and the need for restructuring to further progress SDG recovery,

Concerned with the lack of access to vaccines amongst the most vulnerable as expressed by the Global Dashboard for Vaccine Equity,

Guided by the European Union’s implementation of Intelligent Diagnosis: Computed Tomography (CT) scanning technology to combat COVID-19 via deep learning reconstruction and post-processing techniques to improve diagnostic accuracy and assist medical personnel,

Acknowledging Vehicle Safety Report by Tesla which indicates that vehicles controlled by AIs are significantly safer than those driven by humans,

Alarmed by the inherent prejudice experienced by marginalized groups in healthcare as exemplified by COVID-19 as acknowledged by the Office of the High Commissioner for Human Rights (OHCHR),

Hindered by a severed declining trend in marginalized groups’ distrust in government institutions and decisions as addressed by the United Nations Department of Economic and Social Affairs in Social inclusion Policy Brief #108,
Discouraged by the disproportionate level of COVID-19 cases in marginalized communities due to the lack of access to necessary COVID-19 prevention and medical resources, as recognized by the UN OHCHR,

Noting the statement made by the Human Rights Council (HRC) in A/HRC/43/L.42 that stresses the perpetuation and exacerbation of existing inequalities amongst peoples in vulnerable and marginalized situations by the COVID-19 pandemic,

Realizing the grave effects of COVID-19, given that the World Bank concludes 97 million people were pushed back into extreme poverty and 811 million people suffered from hunger,

1. **Endorses** the establishment of an international biobank to address SDG 3, and increase vaccination accessibility within developing and developed nations by:
   
   a. Encouraging collaboration between Member States, the World Health Organization (WHO), vaccine researchers, and the World Bank;
   
   b. Expanding current national biobank infrastructure, currently in place within Member States, while inviting developed nations and non-governmental organizations to fund the expansion of current infrastructure and the development of new infrastructure;
   
   c. Utilizing supply chain management and blockchain technology to assist with the development and security of the processes;
   
   d. Aiding vaccination development and approval in conjunction with the WHO and developing nations;
   
   e. Providing greater access to information for doctors around the world concerning medical research, infectious diseases, and preparation tactics for potential future epidemics;

2. **Expresses** its support on the topic of ensuring all states have access to medical supplies and the ability to combat COVID-19 by:

   a. Recommending that states with a significantly higher vaccination rate reconsider overstocking vaccines for domestic use and instead distribute them to countries with vaccination rates lower than thirty percent;
   
   b. Encouraging all nations to ease the travel ban and quarantine regulations for the following so that:
      
      i. Researchers can freely collaborate with colleagues from other nations for more efficient vaccines research;
      
      ii. International doctors and nurses can make sure vaccines are correctly administered in areas with poor medical training and conditions to nations that still individually restrict them;
      
      iii. Businessmen can trade and ship necessary medical supplies and other significant goods for nations that do not have the ability to make them;
iv. Countries that depend on tourism can combat its negative economic effects caused by COVID-19;

v. International NGO representatives and officials are able to provide aid to countries in need to ensure all Member States can get on the normal track of the 2030 agenda for SDGs;

c. Suggesting all states to ease the tariffs on essential medical equipment related to COVID-19 vaccines such as syringe needle, injection syringe, and other materials to make the vaccine;

d. Having international organizations such as the WHO provide resources to show the process of administering the vaccine and setting up of medical equipment to ensure that most affected peoples and nations utilize the tools and equipment that are properly used to limit the damage to property and life;

3. *Invites* global health bodies, NGOs, vaccine patent holders, and relevant IP holders to enter into voluntary discussions about how to best accelerate vaccine distribution and manufacturing in a manner fair to developing nations and IP holders;

4. *Proposes* a digitally enhanced International Certificate of Vaccination, the "smart yellow card," to help reinforce the efficacy of the COVAX initiative to further vaccination efforts across illnesses;

5. *Encourages* organizations such as, the Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services, to further the recognition and investigation of the link between lessening biodiversity and the negative effects these results can have on human wellbeing such as; infectious diseases and pandemics, like COVID-19, as well as the extinction of certain species, which allow others to thrive such as rats and bats;

6. *Welcomes* the establishment of mental health professional teams, under clause 3 and 4 of this working paper, to aid those affected mentally due to the exposure to COVID-19;

7. *Advocates for* the creation of social media and in-person initiatives, such as advertisements, training, and in-person classes, used to educate people on the benefits and methods of vaccine distribution:

   a. Recommends partnership with non-governmental organizations, such as Teachers Without Borders to ensure there are equal opportunities amongst the vulnerable populations for access to vaccines, such programs can be used to advertise and distribute information sharing and pandemic relief and:

      i. Notes the ability of such organizations to work with the most vulnerable populations, such as refugees, asylum seekers, and stateless peoples;

      ii. Recognizes the importance of partnering with NGOs to provide aid and assistance to countries such as Afghanistan when sanctions are in place;

   b. Implementing vocational training in order to educate people to commonly held standards for licensing and certification on how to administer the vaccine;
c. Developing educational resources to promote preventative measures such as hand washing, social distancing, mask-wearing, and other sanitary measures;

8. **Recommends** WHO to maintain a digital forum for high-quality medical care and to facilitate the rapid free exchange of information and:
   a. Strongly advocates for Member States to share technologies, treatments, and best practices through this forum;
   b. Recommends the implementation of e-diagnosis and e-prescriptions by Member States’ healthcare systems;
   c. Advocates for the use of Internet Hospitals and web-based services to provide screening and consultation services for COVID-19 patients with mental health disorders and other diseases;

9. **Urges** Member States to support the development and implementation of AI technology in the health sector, which would make health initiatives more accessible to Member States by:
   a. Promoting CT scanning technology, which is used to diagnose COVID-19 patients in a contactless way;
   b. Inviting partnerships with humanitarian organizations for said initiatives, such as AI For Good, which seeks to use modern technology to mitigate present-day inequities;
   c. Potentially funding said initiatives in collaboration with organizations like the Ford Foundation;

10. **Advocates** for the COVID-19 in-home management program for low-acuity COVID-19 cases as implemented by the Promise Armenian Institute to:
    a. Recognize the need for Member States to assist LLDCs in developing sustainable healthcare systems;
    b. Aim to free up crucial hospital beds and make more healthcare personnel available to meet the needs of more severe coronavirus cases;
    c. Discharge from the hospital, patients are transferred to their homes by an ambulance team and a nurse, to set up the oxygen therapy in order to continuously monitor their progress, until they no longer need oxygen therapy and are cleared from the program;
    d. Be funded by each participating Member State’s discretion;

11. **Emphasizes** the importance of safe transportation of COVID-19 vaccines by:
    a. Improving transportation routes from Member States willing to cooperate excess vaccination doses such as China and Cuba;
    b. Upholding the use of specified vehicles such as modified planes and trucks for COVID-19 vaccine transportation;
c. Encouraging the use of medical tents in order to safely transport and administer COVID-19 vaccinations, which is a lab that is equipped with an automated nucleic acid detector, which can automatically complete operations such as opening test kits safely, scanning codes on health cards;

d. Suggests the use of health cards in order to keep a record of those who have been vaccinated and their health information;

e. Seek funding for these transportation methods through social media campaigns and fundraising;

12. *Suggests* that Member States work towards the improvement of internet access for all areas and recognize it as an essential human necessity:

   a. Encouraging Member States to support the adoption of global internet access as a human necessity;
   
   b. Calling upon local and global internet corporations to collaborate with each other, as well as, the United Nations Development Program;
   
   c. Recommends that the UNDP focuses on raising fundings from developed Member States and international organizations to carry out extensive research on the costs and process of effective implementation of this Agenda;

13. *Further Suggests* Member States for the continued research and funding of artificial intelligence for medical purposes by:

   a. Using artificial intelligence for less human contact, reducing the spread of infection, and better image detection through programming various mediums such as X-rays and magnetic resonance imaging;
   
   b. Encouraging the use of Intelligent Diagnosis in CT scanning in order to assist personnel, reduce work pressure, and improve diagnostic accuracy following the example of deep learning-based computer-aided diagnostic (DL-CAD) system;
   
   c. Using the application of AI to make adequate assessments for relevant data and information to guide Member States to effectively implement the SDGs;
   
   d. Drawing attention to image scanning through attaching artificial intelligence onto satellite imaging via convolutional neural network modeling to help with automated detection for military surveillance;
   
   e. Recommending that the fellow Member States continue to add upon the UNICEF Global Development Common’s COVID-19 Innovation Hub to lead COVID-19 innovators in increasing treatment response areas and exchange critical information to facilitate international communication and research;
14. **Further recommends** the creation of a United Nations open database funding hub where Member States can make funding transparent and offer COVID-19 innovators easier discovery of funding opportunities by:

a. Emphasizing on implementation of recording past fundings, access to scaling partners in different markets, and showcase verified findings and results made in these public-private partnerships;

b. Suggesting the creation of an annual conference for innovators looking to meet potential funders partnered with the open database funding hub;

15. **Recommends** the creation of a more inclusive Sustainable Development Policy Guide which promotes capacity-building measures and information sharing by:

a. Providing businesses capital through government loans that later turn into bonds that allows SMEs capacity-building measures, giving tax breaks and debt repayment strategies for private sector businesses engaged in achieving SDG goals which promotes capacity-building measures and reallocating subsidies and funding to focus on COVID-19 recovery plans;

b. Developing global vaccine sharing and research infrastructure through the development of international biobanks;

c. Providing public and private partnership opportunities for infrastructure development with the help of relaxed government regulations to support urgently needed infrastructure creation;

d. Implementing by the United Nations Industrial Development, which promotes economic development policies Funded by the Ford Foundation, which supports economic growth;

16. **Encourages** all Member States to limit sanctions and blockades placed by individual Member States during the COVID-19 pandemic as to allow for states to better combat the virus and:

a. Calls upon Member States to donate and provide labor-intensive resources to Member States suffering from sanctions;

b. Promotes trade agreements with Member States currently impacted by sanctions;

c. Refutes the assumption that sanctions are beneficial due to their assumed propensity for compelling regime change;

17. **Proposes** the creation of qualifications, to identify groups as SMEs, individuals, or any particular groups in need of financial help;

18. **Advises** to incentivize state banks to lend money as Economic package to the groups mentioned in clause 17 to:
a. Encourage research and local measurement of local affordability to decide on an
appropriate interest rate which could be lower than the mean average interest rate for the
local banks;

b. Advise the terms of the loan be from 1 to 5 years, on the choice of the client;

19. *Endorses* equitable treatment and access to care for persons in vulnerable and marginalized
situations, including older persons, migrants, refugees, internally displaced persons, persons with
disabilities, persons belonging to minorities, indigenous peoples, persons deprived of their liberty,
homeless persons and persons living in poverty, and recognizing the need to ensure non-
discrimination and equality while stressing the importance of age- and gender-responsive and
disability-sensitive measures in this regard;

20. *Encourages* continued education of individual privileges, biases, and intersectional approaches to
mitigate potential risk factors;

21. *Emphasizes* the access to and circulation of truthful information regarding COVID-19 and its
treatments for marginalized groups and promotes the inclusion and use of culturally sensitive
language in the translation of COVID-19 related information with an awareness of specific
contexts and histories surrounding persons in vulnerable and marginalized situations due to the
necessity to regain trust in governmental institutions and decisions;

22. *Urges* Member States to adopt racially just domestic and foreign policies to acknowledge and
combat inherent systemic racism within each Member State;

23. *Reminds* the international community further action is needed regarding COVID-19’s impact on
impoverished communities resulting in significant job loss, increased food insecurities, limited
trade, and its detrimental long-term effects by:

a. Encouraging Member States to establish a voluntary national commission that regularly
assesses poverty levels and suggest policy recommendations to national governments;

b. Establishing a platform for food donations that provide developing countries meals and
filtered water from nations or individuals with extra resources;

c. Developing food system infrastructure plans that are responsible for increasing flow of
food trade within nations, in order to balance out the low supply of food to address the
high demand in developing countries;

d. Advocating for the utilization of a local workforce for development programs including, but
not limited to, infrastructure, manufacturing, and agriculture, with the expressed intent to
not simply import needed resources but instead to comprehensively develop economies.
The High-Level Political Forum on Sustainable Development,

Alarmed by the World Bank Report in August, 2021, that 84% of COVID-19 vaccine doses are being administered in high-income countries while low-income countries have received only 0.3%, as well as the 5 million reported COVID-19 deaths worldwide,

Noting with deep concern the devastating economic, social, and medical effects of COVID-19 on developing Member States upon reaching the 2030 Agenda’s 17 Sustainable Development Goals (SDGs),

Realizing the necessity to support infrastructure efforts that will help countries around the world fight COVID-19 and to prevent and handle future worldwide pandemics,

Troubled by the fact that the United Nations (UN) has predicted significant damage from the effects of COVID-19 that would push an additional 251 million people into extreme poverty, bringing the total to 1 billion by 2030 if goals are not readdressed, according to the United Nations Development Programme (UNDP),

Stressing the current barriers to equitable vaccine distribution such as developed countries purchasing greater numbers of vaccine doses compared to their populous,

Disturbed by the fact that many African Member States had to destroy 450,000 doses of the COVID-19 vaccine due to expiry, according to the World Health Organization (WHO),

Deeply concerned by the disparity between the 12 years, on average, of education in developed and developing countries as compared to the 6.5 years, on average, in developing countries, according to the World Bank, while also considering the inability of children to be present in school due COVID-19, and the relative impact to this education disparity,

Reacting to the gross disparity in both medical access and the tendency of malpractice to occur, with a particular focus on the 15 million deaths yearly in developing countries compared to the 7 million deaths yearly in developed countries due to malpractice according to the WHO, while also acknowledging that the drastic difference in the rates of physicians per capita greatly contributes to this disparity,

1. Endorses the recommitment to improve equitable vaccine development and distribution among developed and developing Member States to combat the COVID-19 pandemic and future pandemics through cooperation amongst Member States with the establishment of regional councils by:

   a. Recommending increased collaboration between Member States and the WHO to create four vaccine distribution regions (i.e.: North/South America Region, Asia Region, Western Europe/Southern Africa Region, Central Europe/Northern Africa Region) to equally include developed and developing Member States, to be overseen by councils of Member State delegates. These councils would ensure accountability between countries and decrease vaccine waste as well as increasing supply chain efficiency by coordinating
with businesses, NGOs, charity services, and other organizations to maximize vaccine awareness, safety and distribution at the local level;

b. Encouraging the support from the UN Office for Project Services (UNOPS) and the WHO in order to improve storage facilities, medical laboratories, and training of medical professionals in developing countries;

c. Requesting funding from Multi-Stakeholder Partnerships (MSPs) to increase testing, vaccinations, and treatment accessibility in partnerships similar to the Vaccines for Children Program (VFC), implemented by the Centers for Disease Control and Prevention (CDC) which has provided COVID-19 vaccinations for children whose parents’ otherwise cannot afford such provisions within the United States;

2. **Requests** the investment in and establishment of vaccination projects with the WHO implementation of international databases and regional biobanks to reduce vaccine disparities worldwide by:

   a. Further requesting the establishment of technology transfer hubs and effective partnerships in collaboration with developing Member States for the purpose of expanding knowledge about the COVID-19 vaccine, future vaccines, and other medicines that may be needed, and providing more populations with the opportunity to develop vaccines and decrease the unequal distribution of vaccines;

   b. Encouraging cooperation between Member States, ACT-A, and COVAX to invest and create regional biobanks to increase environmental sustainability towards vaccine distribution and suggest the implementation of pathogen-sharing systems supported by WHO;

3. **Reaffirms** the United Nations’ commitment to net-zero emissions goals, promoting sustainable industries, and encouraging clean, affordable energy to alleviate the immediate economic effects of the pandemic by:

   a. Calling on Member States to reaffirm their prior commitments to green, reliable, and affordable energy following the COVID-19 induced Energy Crisis in order to reduce the devastating economic impact that dependency on fossil fuels has fostered, and underlines the importance of Point 9, Chapter 3 of the Johannesburg Plan of Implementation which addresses SDG 7 and its indicators, as a sustainable solution to the crisis;

   b. Stressing the adoption of economic policies which re-invites the 255 million workers displaced in the midst of the pandemic by encouraging the creation of jobs in the renewable, and clean energy sector to diversify and recommitting to further incorporation of affordable, and clean energy industries of all Member States in order to combat the effects of climate change (SDG 13.2), assist lesser developed Member States in developing diversified and affordable clean energy (SDG 7.b.1), and continuing the diversification of labor-intensive industries (SDG 8.2.1);

4. **Advocates for** the increased number of regional jobs through the expansion of the personal protective equipment (PPE) industry and through the implementation of a PPE disposal program;
5. *Promotes* sustainable farming and agriculture development through the expansion of investments and through targeting food industries in the World Food Program (WFP) to help reverse the implications of COVID-19 launching 130 million people back into chronic hunger according to the State of Food Security and Nutrition in the World by:

   a. Allocating for sustainable farming to play a larger role in the WFP and encourage diversification of food sources in the WFP program while also including a larger quantity of excess food supply of developing Member States into the WFP;

   b. Increasing collaboration with NGOs to increase non-methane producing protein options, vegetable-based options to recipients of WFP aid in order to combat food shortages and encourage the expansion of such non-methane options;

   c. Including more sustainable forms of farming by transitioning from mass farming in WFP programs to local, sustainable farming through research of new means to limit the carbon and methane footprints of the WFP, in collaboration with other UN bodies to determine yearly the impacts of the WFP on farming;

   d. Encouraging individual Member States to pursue more sustainable level of farming through targeted investment and grants while allowing NGOs to play a larger role in the implementation of the WFP, specifically in food insecurity zones of high risk and to locations that do not have the proper infrastructure to protect vulnerable populations from COVID-19;

6. *Encourages* financial investment into the expansion of sustainable electrical grids to support digital health infrastructure, to ensure equal access to healthcare, and to ensure the preservation of life;

7. *Implores* the expansion of bilateral economic opportunities for developing economies that have been most affected by COVID-19, the assistance with the implementation of COVID-19 mitigation strategies, and effort towards the future development and recovery of these economies by:

   a. Enhancing relationships between developing and developed Member States on economic policy and amplifying economic global cooperation;

   b. Promoting the notion that economic cooperation is a cornerstone of achieving the SDGs, and that COVID-19 has impacted these standard financial credit streams;

   c. Recommending creditor Member States to engage in debt relief for developing Member States on a bilateral relationship to allow for more finance to flow into COVID-19 recovery and environmental development;

8. *Recommends* the support of the Global Education Coalition in the UNESCO education programs aimed at helping students return to school after giving underrepresented communities the tools and resources to uplift and empower their COVID-19 recovery measures;

9. *Compels* the UN and its Member States to increase funds available for medical training and schooling, with a specific focus in less developed regions and communities, and promote
international cooperation and preparedness for current and future health crises by establishing
digital health infrastructure to ensure equal access to healthcare and to ensure the preservation
of life.
The United Nations High Political Forum on Sustainable Development,

Deeply concerned by the mass loss of life caused by the COVID-19 pandemic, and the lack of global cooperation to invigorate vaccination rates as highlighted in General Assembly resolution 74/270 (2020),

Applauds the efforts of the United Nations in tackling inequality in income, health care, and social protection in short-term stimulus measures as well as long-term policy changes,

Deeply concerned by the lack of accessible pandemic preparedness information offered by the World Health Organization’s (WHO) Health Emergencies Programme (WHE), which primarily publishes resources that prioritize influenza-oriented epidemics rather than information regarding general pandemic preparedness, and limits guidance and data sharing abilities among Member States,

Recognizing that substantive action is requisite to better mitigate the effects of future global pandemics by developing countries’ capabilities for early warning, risk reduction, and management of national and global health risks,

Emphasizing the prioritization of equal opportunity for global quality health is imperative to sustainable COVID-19 recovery and the realization of the 2030 Sustainable Development Goals (SDGs),

Notes that the cost of preventing another pandemic will be substantively lesser than the current cost of another pandemic through the use of a sustainable inter-temporal solution reaffirming General Assembly resolution 74/306 (2020),

Supports International Coordinating Group on Vaccine Provision in managing and coordinating the provision of emergency vaccine supplies and antiviral medications to countries during the COVID-19 pandemic outbreak,

Recognizing the salience and potential of the Government Management Performance Evaluation Systems suggested in the “United We Do It” 2020-2024 National Strategy of Panama,

Noting with concern the disproportional effect on least developed countries (LDCs) regarding the accessibility to vaccines, economic and social support, and lack of education regarding response both among governmental agencies, outside of those pertaining to health, and citizens alike,

Guided by the desire for equal vaccine distribution for Member States in the Global South and for expanding vaccine manufacturing in the Global South in order to enable self-sufficiency and decrease reliance on foreign blocs for disease prevention,

Affirms that large-scale vaccination programs are effective at minimizing the rates of disease, while ensuring that health systems do not become saturated with patients suffering from unnecessary diseases,

Advocating state sovereignty as a core value for the maintenance of a unique and diverse international community while promoting state transparency to ensure pragmatic and consistent solutions with the consent of individual sovereign states,
Condemning the imposition of coercive or unilateral measures against any Member State, especially in the face of COVID-19 as this would exacerbate any suffering and goes against the Charter of the United Nations,

Recognizing the vitality of representation, especially of indigenous peoples, refugees, and marginalized communities, through youth-led initiatives as highlighted in Human Rights Council (HRC) resolution 41/13 (2019),

Deeply concerned by the extent of the impact that a given Member State can have on the international system,

Drawing upon the gains that arose from the promotion of the Green Corridor Plan first raised by the Russian Federation in 2020 to the Organization for Security and Cooperation in Europe,

Drawing to the attention that funding the COVID-19 recovery response has been critical, with businesses closing, unemployment rates growing, and governments required to invest extensively to keep their economies moving,

Recognizes the inequitable distribution of vaccines to extremely marginalized and/or vulnerable groups,

1. Encourages further collaboration between less developed and more developed Member States within the High-Level Political Forum in order to promote clear communication and sustainable progress with conscious consideration for maintaining a global mindset, which the Government Management Performance Evaluation Systems will be the main mechanism to promote such diverse collaboration by uplifting less developed Member States;

2. Recommends to the General Assembly to create a Government Management Performance Evaluation Systems (GMPES), which will serve to supplement the Voluntary National Reviews by providing a consistent, efficient, and transparent mechanism for Member States to monitor government spending and public investment, ensuring investment shall be conducive to the SDGs it directly supports, at the discretion of the national GMPES offices, progress towards one or more of the SDGs utilizing national 2030 Agenda equivalents, such as Panama 2030, in order to guide investment monitoring, and shall be responsible for the creation and dissemination of information for the public related to progress towards the SDGs, ensuring transparency in government investments, building public support for the SDGs, and creating a higher degree of accountability between Member States and they shall be funded by Member States, with supplementary assistance through the Addis Ababa Action Agenda available to Member States which request it;

3. Urges the General Assembly to create a framework that provides funding and a plan for increased education of health care professionals in developing countries to incite a means of preparedness for Member States who are most vulnerable, in addition to increasing the pooling of private investment contributions to aid health care sectors while assisting the distribution and circulation of healthcare resources in developing nations and vulnerable communities, which allows Member States to be better prepared for future catastrophes by increasing vaccine production and distribution from developed to developing states, assuring adequate and equitable accessibility of health care services, and an expansion of the WHO Academy in necessary regional hotspots;
4. **Calls on** the General Assembly to encourage collaboration between Member States for sustainable and equitable vaccine production and distribution by encouraging intellectual property holders to enter into negotiations with the WHO and vaccine manufacturers, by supporting the efforts of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Relief and Works Agency for Palestine Refugees (UNRWA), and the International Organization on Migration (IOM) to establish vaccination centers in refugee camps and build vaccine confidence among refugee populations, and by enabling in-country manufacturing of vaccines through negotiating mutually beneficial and affordable licensing agreements, which will create beneficial employment and growth opportunities for Member States, particularly for developing states;

5. **Reinforcing** the need for green infrastructure and production in countries and communities that do not have the capabilities to preserve or manufacture vaccines with time limitations or other factors, as some Member States lack the capabilities to maintain vaccines that require refrigeration, while promoting the construction of infrastructure and manufacturing centers to boost the recovery efforts and employment and producing Personal Protection Equipment (PPE) to further protect individuals, especially medical professionals, from COVID-19;

6. **Further Urges** Member States to target COVID-19 effects from a local-to-regional perspective by: developing inclusive input collection campaigns at the community level, including community leaders, pastors, coaches, and politicians as trendsetters for behavioral changes regarding hygiene, vaccine culture, and overall health perception, using WHO healthcare outreach programs to facilitate aforementioned inclusions, and finally, strengthening local governance through the training of points of influence in society, such as healthcare workers, local leaders, and heads of household. Amongst other community leaders, these programs should seek to include training journalists and radio hosts to provide information on citizen priorities in health, education, and security in order to eliminate the growing threat of misinformation;

7. **Supports** the creation of rapid technical training programs which will target youth from underprivileged populations but be generally available, in order to equip youth with technical skills to increase workforce resiliency and reduce unemployment while providing skilled labor for green tech and electricity initiatives, and other training that Member States see fit;

8. **Recommends** the establishment of a global virtual community that enables universal education of and access to mental health professionals through the development of a user-friendly online application in partnership with a global alliance of NGOs offering mental health services, and works with underdeveloped Member States to facilitate greater awareness and access to the platform, as well as integration of an online forum that can be utilized as an accessible international database to facilitate an exchange of information in regards to global coordination of healthcare policies, information sharing, and transparency amongst users;

9. **Encourages** that Member States further develop programs which target poverty alleviation, such as the United Nations COVID-19 Response and Recovery Fund, with an emphasis on achieving the Sustainable Development Goals, specifically in regards to equitable development and social inclusion, while in tandem with programs mentioned elsewhere in this paper to develop a more resilient workforce and boost standards of living, with the ultimate goal of eliminating extreme poverty by achieving above a $1.25 US daily wage for all people;
10. **Calls upon** WHO and other relevant organizations to reevaluate the current pandemic guidelines to consider a more inclusive approach of all infectious diseases, involving a cohesive framework consisting of an outline that is non-specific in which diseases are addressed, therefore providing a general abstract etiquette of response and eliminating lack of acknowledgment of unforeseen pandemics, epidemics, and other health crises;

11. **Requests** further investment in public health surveillance programs to increase scientific understanding of zoonotic contagious viruses in efforts to alleviate potential causes to global pandemics;

12. **Promoting** an increase of WHO-produced media and information campaigns to address concerns regarding the side effects of the COVID-19 virus and refute misinformation contributing to a resurgence in fear and distrust surrounding COVID-19 recovery methods and encouraging the WHO to include the needs of vulnerable and marginalized communities in their information campaigns, specifically noting the specific contexts and histories of vulnerable and marginalized communities surrounding healthcare institutions and subsequent aversion to COVID-19 recovery methods;

13. **Urge** for legislation that will combat the international crisis of food insecurity that has been worsened by the COVID-19 pandemic, and urges Member States and regional NGOs to implement long term solutions to reinforce supply chains for indigenous, refugee, and rural populations, to equip Member States with technologies combating undernourishment and starvation, and to enable local food production;

14. **Calls for** international commitment to addressing the climate crisis with clean energy for economic sustainability by promoting geothermal energy in regions that offer the most access to the unique opportunity to endorse net-zero emissions and provide for communities ravaged by lack of energy and create programs, offices, or other national bodies which shall endeavor to fight urban-rural disparities in electrification;

15. **Encourages** financial investment into the expansion of digital health infrastructure to ensure equal access to healthcare and the sustainable preservation of life;

16. **Recommends** high-income countries to provide research and informational aid to the Global South, as needed, in recovering from the COVID-19 pandemic and in continued commitment to sustainable development with the SDGs, based on the principles of common but differentiated responsibilities;

17. **Invites** partners from a wide range of technical, scientific, and social fields, such as the WHO and its International Group on Vaccine Provision to bring together all globally available resources to counter these high-threat infectious hazards and scale these strategies to regional and country levels, manage and coordinate the provision of emergency vaccine supplies and antibiotics to countries during this major outbreak;

18. **Proposes the** collaboration of the UN Executive Committee on Economic and Social Affairs and the WHO in assisting Member States with the facilitation of government coordination and transparency at all levels to focus on the role economic and fiscal sectors play in administering health care needs for all, which recalls General Assembly resolution A/RES/75/130 (2020),
specifically to decrease the current state of labor income vulnerability through the creation and fostering of employment programs at both federal and state levels;

19. *Calls upon* the International Monetary Fund, European Union, and European Investment Bank as our largest supporters for economic responses, as well as smaller investors such as KfW, Asian Development Bank, and Goldman Sachs to align with the Debt Service Suspension Initiative to also ensure prudent borrowing when administering public debt transparency;

20. *Supports* the development of initiative for Green Corridors for further economic development since it relieves any Member State subjected to economic sanctions and trade wars, and calls for the collaboration of the United Nations Commission on International Trade Law and the World Trade Organization in such international cooperation;

21. *Calls upon* existing organizations and committees such as the WHO and the General Assembly to use a multilateral approach across nations to focus on issues of inequity of access to vaccines and education for minorities or vulnerable groups such as indigenous peoples, refugees, and youths by providing funding for these initiatives at local levels.
The High-level Political Forum for Sustainable Development,

Acknowledging that consistent, comprehensive, and inclusive monitoring of Member States sustainable development facilitates a level of accountability that encourages economic and social growth,

Further believing cooperation is the main conductor for the global community in assisting countries, that are disproportionately affected, and focusing on the resources that can be utilized in the proper development of smaller African states,

Addressing that the adoption of new policies and economic resources for marginalized countries in Africa is crucial in order to effectively assess and manage the lack of COVID-19 regulations in these areas,

Affirming the General Assembly 2030 Agenda for Sustainable Development resolution 70/1 (2015) of 25 September 2015, which sets the Sustainable Development Goals (SDGs) in order to increase the quality of life for all,

Deeply concerned about the lack of cooperation between non-governmental organizations (NGOs), intergovernmental organizations, and Member State governments in the common fight against COVID-19,

Concerned by the fact brought up by the United Nations (UN) that economic need has surpassed the $2 billion USD originally recommended by the UN COVID-19 Response and Recovery Plan needed to ensure the accessibility to masks and other necessary counters; which, as stated and affirmed by the United States’ Centers for Disease Control and Prevention, those who wear masks are reported to sustain a 70% reduced risk of acquiring infection compared to citizens who resort to not wearing one,

Taking into account that according to the World Health Organization (WHO), around 785 million people do not have access to basic sources of water and the importance of running water within hospitals, in the Member States which have insufficient access to water, including creating methods for the water to be accessible for these countries, to ensure proper healthcare is received,

Supporting the Addis Ababa Action Agenda (2015), which highlights and facilitates and greater framework for financing for development and reaffirms the need and implementation of Official Development Assistance (ODA),

Alarmed and Concerned that according to the WHO, over 5 million people have died as a result of COVID-19 and its effects on the economy,

Viewing with appreciation the work and technology the Programme for International Student Assessment (PISA) puts in to create such an assessment that measures massive amounts of data and compiles them to give results and feedback on where Member States rank on education which can be used for better education reform,
Bearing in mind the statement made by the UN regarding the corruption of false news, untested theories, and messages of hate and division about the COVID-19 virus transmission states, science and solidarity are essential solutions to fight misinformation,

Fully aware that, according to the UN’s International Children’s Emergency Fund, 40% of children in Eastern and Southern African are not attending school due to the COVID-19 pandemic, Observing the educational effects that councils of indigenous peoples have had on government protocols in the Member States in the global north to promote concerns and enhance discourse between these cultures,

Declaring the importance of establishing infrastructure that allows for developing Member States to store, refrigerate, and dispense doses of the COVID-19 vaccines,

Drawing attention to the success of the implementation of robotics technologies in the response and recovery plans of numerous Member States,

Recognizing the positive effects that councils of indigenous persons have had on sustainability efforts through the use of traditional ecological knowledge (TEK) including the protection and conservation of native species including cod and reindeer by the Sámi of the Nordic region,

Further recognizing the adverse effects that sustainable efforts by the Member States have had on indigenous populations including the disruption of the reindeer herds of the Sámi by the wind farms,

Mindful that the access to technologies increases vulnerable individuals’ proximity to communication technologies that are capable of increasing exposure to healthcare, education, and financial opportunities,

Reaffirming the commitment of the UN to net-zero carbon emissions as established at the Paris Climate Accords (2016),

1. Recommends that Member States commit to conducting Voluntary National Reviews (VNRs) in order to encourage accountability and to allow for a comprehensive system of measuring the SDG progress in each country so that individual solutions can be tailored to each Member State or region;

2. Fully supports properly utilizing resources from developed Member States, and distributing those resources in underprivileged communities and the underdeveloped Member States by:

   a. Encouraging all Member States to take advantage of VNRs which provide a report of how the Member States are progressing in regard to the SDGs in order to provide a more tailored and individualized approach;

   b. Suggesting that Member States work to utilize public and private resources to fund efforts towards strengthening economic disparity;

3. Affirms the African Union Green Recovery Action Plan, which pursues recovery from the COVID-19 pandemic in a green and sustainable way through:
a. Collaborating over shared priorities and not compromising developing Member States' possibilities to recover;

b. Promoting financial and economic resources to the underprivileged Member States to ensure convergence instead of divergence between the Member States;

4. **Urges the** Member States to continue contributing, realizing, and reaching towards the SDGs in order to ensure healthy, inclusive, and safe socio-economic conditions for all, encouraging various levels of infrastructure in education, healthcare, and finance;

5. **Encourages** NGOs and Country-Based Pool Funds to assist in the fight against COVID-19 in order to:
   a. Explore their local knowledge and be hands-on in more rural and suburban areas of any respective Member State;
   b. Ensure a time-efficient and time-critical response to any urgent COVID-19 related matter;
   c. Facilitate camaraderie between the Member States and international organizations;

6. **Calls upon the** Member States and private contributors to contribute monetary support to the international UN COVID-19 Response and Recovery Fund for the purposes of supporting the implementation of new response and recovery plans and revitalizing the depleting fund, which:
   a. Actively is, and would continue to be, managed by the office of the Secretary-General;
   b. Invites the equal supply of masks for all citizens to ensure safety;

7. **Further proclaims** Member States to meet or surpass the suggested ODA of 0.7% for the developed Member States in order to increase the financing and revenue necessary to fund the infrastructure needed to create more resilient and safe communities for all;

8. **Emphasizing** the need to create stronger healthcare infrastructure in order to establish preventative measures against pandemic catastrophes by:
   a. Suggesting the creation of inclusive physical infrastructure that facilitates a safe and effective space for medical practices;
   b. Recommending that Member States work to provide health monitoring equipment and training for healthcare workers;
   c. Supporting the creation of infrastructure within hospitals necessary for continued access to clean, uncontaminated water, such as structures designed to collect and repurpose rainwater in countries where applicable;

9. **Further suggesting** existing vaccine distribution and creation programs to substantially include more disproportionately affected communities and specifically underdeveloped Member States;
10. Expresses support for the creation of an international assessment for children within their vital developmental period on core subjects taught in educational institutions similar to the PISA which will be:
   
a. Administered by the UN, tracking the progress and collecting data on the strength of educational institutions and giving them a rank on their knowledge on core subjects;
   
b. Developed new techniques and offer guidance to the Member States on how to improve quality of education in the midst of COVID-19;

11. Recommends the enforcement of fact-checking systems related to the WHO’s establishment of the Information Network for Epidemics to enable reliable information and the education of citizens regarding the COVID-19 pandemic throughout all media resources;

12. Encourages, in the developed Member States with the means to do so, mask mandates and the mass production of vaccinations for eligible school-age children that ensures citizens stay in schools throughout the remainder of the pandemic;

13. Endorses the inclusion of Councils of Indigenous persons in all decision-making processes, if the Member States have such council, most importantly in reference to actions towards protecting the environment and native species;

14. Asks for the UN’s COVID-19 Response and Recovery Fund to allocate a sufficient amount of funding and resources to construct the necessary infrastructure in developing the Member States in order to:
   
a. Adequately and safely store the vaccine doses without waste;
   
b. Rapidly and efficiently distribute the doses equitably;
   
c. Establish a long-lasting medical storage equipment system to assist in the fight against future diseases and viruses;
   
d. Implore a surplus in one dose vaccines to be distributed to the Member States that currently lack the medical infrastructure necessary to successfully complete vaccination series;

15. Looks to Member States for the contribution of technology resources throughout developing the African Member States to:
   
a. Access technology resources which will help to address developing nations’ challenges as stated by the UN;
   
b. Use technology for educational purposes can attribute to progress towards the Fourth Sustainable Goal, according to United Nations Educational, Scientific, and Cultural Organization (UNESCO);
   
c. Implore the implementation of robotics in developing and maintaining a sustainable infrastructure and limiting contact to infected persons;
16. Suggests that Member States support research and advocacy efforts based on TEK of native cultures to further progress sustainability efforts;

17. Advocates the inclusion of councils of indigenous persons of all Member States with indigenous populations in all decision-making processes, most importantly so in reference to actions towards protecting the environment and native species, as Indigenous populations provide crucial knowledge towards the achievement of SDG 13;

18. Encouraging the facilitation of Information Communication Technologies (ICTs) in order to close the digital divide and increase the quality and quantity of digital connectivity in underserved communities throughout all levels of development by:
   
   a. Recommending that Member States encourage the facilitation of public internet cafes in urban areas;

   b. Suggesting that Member States work to provide accessible, accountable, and affordable broadband access in suburban areas;

   c. Prescribing basic infrastructure such as stable electricity, consistent broadband connection, access to mobile communication devices in rural areas;

   d. Inviting inclusive and accessible ICT education and instruction to close the knowledge gap that exists within the digital divide;

19. Accentuating the importance of net-zero carbon emissions in providing clean, affordable energy to provide support for furthering the development of health care industries by:

   a. Calling upon Member States to utilize natural disasters in an effort to facilitate SDG 7 in producing clean and affordable energy, especially through the usage of geothermal, hydropower, and solar energy as a reliable source of energy in cooperation with the Central Emergency Response Fund;

   b. Further recommending the creation of green jobs in areas of low development to encourage the alleviation of poverty through Industry, Innovation, and Infrastructure (SDG 9.1.1) and the utilization of funds provided by the United Nations Development Programme (UNDP);

20. Emphasizes the use of pre-existing foundations and organizations, including public-private partnerships, that work toward the SDGs and suggests further collaboration and communication.