C U N 2 00 7



# **Helping You**



# How the CICMUN Works

When you attend CICMUN you will be part of a delegation of 2 delegates representing one of the 191 UN member states. It will be your task to represent your country as effectively as you can. To do this you must have as much information about your nation as possible.

There will be three committees with issues in which your country may or may not be a key player. However, you should always be well prepared, no matter the question.

#### How to prepare yourself

Watch the news, read the World news section of the newspapers, use the Internet (UN and affiliated agencies: UNDP; UNICEF; UNHCHR; UNESCO; World Bank; WHO; World Trade Organization; CIA World Fact Book; Amnesty International; Greenpeace; political parties; etc.).

Another place to ask for information is your country's embassy or consulate. Visit or write to them.

# **Preparing your delegation**

Once you have been assigned your country your first task will be to find out as much about your country as possible. You should know the following:

Politics of the country:	Are you a democracy or a dictatorship? Who is your leader? Are you an ex-colony? Which world parties are your friendly with?
Natural resources:	Do you have any? Are you in trade agreements with other nations?
Culture	What ethnic groups are represented in your country? What religions are practised?
Economy	Are you wealthy or poor? Are you in debt? Why?
World politics	Are you allied with other nations? Which and in what way? Are you noted for your views on a particular issue?
The UN	What is your record in the UN?

# Your Opening Speech

Each delegate's opening remark must be under a minute in length and address issues which are of major importance to his or her nation; but not necessarily one of the issues that will be discussed during the conference. You should avoid turning your speech into a list of facts about your nation. A simple, well prepared and well delivered speech will mark you out as a delegation of importance.

Your speech starts with a formal greeting such as: "Good morning Mr. President, Honourable Chairs, Distinguished Guests, Members of the Press and Fellow Delegates"; and ends always with the phrase: "(your nation) yields the floor to the chair".

An example follows:

Good morning Mr President, honourable chairs, distinguished guests, fellow delegates and members of the press,

Four-fifths of our world's population depends on one third of the global income. This group clings to survival with a meagre annual income of one hundred dollars or less, and in the past decade has experienced an economic growth of only 10%, with the richer one-fifth on the world's population has enjoyed a five to ten times that growth. Poor people are getting poorer and the richer are becoming richer. The growing gap between the developed nations and the developing nations is a disgrace to the international community.

The developed nations are responsible for helping developing nations. Debt servicing alone is sending developing countries further and further away from economic stability and independence. It is a bottomless pit, with no way out unless the developed nations are willing to make further concessions in relieving the burden of debt. India calls upon the G7 countries to consider the problems of poorer nations, lest they undermine their own prosperity.

India yields the floor to the chair.

# Writing a resolution

Number lines

When your speech is completed, your next charge is to write a resolution.

A resolution is a statement of your delegation's ideas for a solution to a problem or how an issue should be tackled by the UN. However, always remember you are a representative of your country and you must put forward the appropriate views. A resolution must also be typed in the correct format, as in this example:

	QUESTION	E: 3 <sup>rd</sup> committee OF: Prevention of the use of children for prostitution and pornography D BY: United Kingdom ITED BY:	The Committee, The Question, The Main Submitter and Co- Submitters
	The Genera	I Assembly, Preambulatory Clauses	
	(1) (2) (3) (4)	Recalling the United Nation's determination to reaffirm faith in fundamentation, in the dignity and worth of the human person, and in the equipmen, women and children, without distinction as to race, sex, language	ual rights of
$\left\{ \right. \right\}$	(4) (5) (6) (7)	<u>ranning</u> eachgry are principlee and galae are entited readene -	comma to ate Preambulatory es
	(8) (9)	<u><i>Taking into consideration</i></u> the economic implications child prostitution h developing countries, and striving to protect these nations interest,	has on many

**Operative Clauses** 

	•
(10)	1. Condemns with the utmost vehemence the treatment many of the worlds
(11)	children are subjected to, many time on a daily basis, within their home;
(12)	
(12)	2. Supports the creation of state-specific organs to regulate all commercial
1 1	<u></u>
(14)	sexual activities, including those of a virtual nature, in order to make certain
(15)	that:
(16)	Underline opening
(17)	a) No under eighteen (18) year-old children are exploited,
(19)	
(20)	b) All on-line pornographic web-sites are strictly monitored so as
(21)	to prevent the use of children in such materials,
(22)	
(23)	c) Offenders are rapidly, and justly, prosecuted, and condemned
(24)	Number Operative accordingly by:
(25)	Clauses
(26)	i. the legal system in their offending nations,
(27)	ii. the ICJ in such cases where crimes affect many
(28)	nations;
• •	nations,
(29)	Enderses the greation of an independent. UN based institution where sole
(30)	3. <u>Endorses</u> the creation of an independent, UN based, institution whose sole
(31)	function would encompass the regulation of the above cited organs;
(32)	Use a full-stop only at
	4. <u>Decides</u> to remain actively seized of the matter. the end
	<b>▲</b>

#### Submitter(s) and Co-Submitters:

The submitter(s) of a resolution are those who have written the resolution, the principal authors of the document and agree with it's substance. The co-submitters are those who are supporting the resolution by signing it, and as such agree with the substance of the resolution and who would like to see it debated on the floor.

# During the conference

#### Lobbying:

You meet other delegates representing other countries and talk informally to them. Your aim is to gather support for your resolution.

Remember:

- Bring plenty of copies of your resolution so that you can hand them out to other delegates to read (10 is the recommended amount);
- Merge with others if it will improve your resolution;
- Don't support a resolution your country will not agree with.

#### **Opening Speech**

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India yields the floor to the chair.

#### **General Assembly**

You must represent your country by speaking, asking questions and voting as you see fit, but always in a polite and formal manner.

#### Rules of Debate

The best way to learn who to use your committee time effectively is to watch how other delegates operate. There is no substitute for this. To help you in your first conference the following explanations may be of help.

The Chair:	The student officer in charge. His/her word is final;
Open Debate:	Time allocated for the debate of each resolution;
To have the floor:	To be given the right to stand up and address the meeting;
Yield the floor:	A speaker may give the remainder of his/her speaking time to another delegate or to the chair;
Amendments:	An amendment is a change to a resolution, usually to better it or attract more support. All amendments must be submitted on an amendment sheet, available from the Chair;
Rights of Reply:	Three are entertained per series of speeches, when possible. Should not be used to congratulate the other delegates.

# Appendix 1

#### The life of a resolution at the Conference:

- 1. Delegate arrives at CICMUN with a resolution written;
- 2. Delegates adapts resolution to make it better or gain support, and finds at least 8 co-submitters (12 maximum);
- 3. Resolution is sent to the Approval Panel for correction of grammatical/typing/layout errors.
  - a. If passed, the resolution will be debated in the GA;
  - b. If failed, resolution goes to submitter for change.

#### Appendix 2 Parliamentary Motions

<u>Point of Personal Privilege</u> – this motion may interrupt the speaker. It relates to a problem of audibility and comfort of the delegate and should not be seconded;

<u>Orders of the Day</u> – this motion may also interrupt the speaker. It is used when the delegate believes that the speaker or a point of information strays from the topic;

<u>Point of Order</u> – it is raised when a delegate believes there has been a mistake in the rules of the debate or the speaker has made a remark that is inappropriate or offensive to the Assembly. This motion CANNOT be called in the middle of a speech and must be justified by the delegate who called it;

<u>Point of Information</u> – it is addressed to the speaker that has the floor at the time. The point must be a question and be phrased as one. While the speaker is answering the delegate remains standing and may not respond;

<u>Move the Previous Question</u> – must be called in open debate. It means that the delegation wishes to vote on a particular issue. The chair will ask for objections, if there aren't an, he/she will move the assembly into voting procedures, if there are, the chair will decide immediately whether or not to proceed;

<u>Move to Extend Debate Time</u> – it is used to set another round of debate time. It may only be called once the original debate time has elapsed;

<u>Division of The House</u> – it is called when a delegation believes that the vote was too close to determine accurately. Delegations will the vote FOR or AGAINST only, no abstentions allowed. This motion can be denied by the chair;

<u>Move to Adopt without a Vote</u> – applies to both resolutions and amendments. This motion must be made immediately after the operative clauses have been read. It requires unanimous approval to pass;

<u>Point of Information to the Chair</u> – it deals with a question germane to the topic and is directed to the chair;

<u>Point of Parliamentary Inquiry</u> – it deals with a question on what is going on procedurally. It is directed to the chair.

#### Appendix 3 Sample Resolution

**QUESTION OF:** The care of the terminally ill and dying and the practice of euthanasia. **SUBMITTED BY:** Australia, Iraq, Philippines, New Zealand, Russia, United Kingdom

#### THE GENERAL ASSEMBLY,

Guided by the principles of the Charter of the United Nations, in particular article 55, stating that the "United (1) (2) Nations shall promote higher standards of living; ... solutions of... health ... problems; [and] universal respect (3) for, and observance of, human rights and fundamental freedoms for all without distinction as to race, sex, (4) language, or religion"; (5) (6) Bearing in mind the Universal Declaration of Human Rights, and its relevant articles, (7) (8) Expressing its appreciation of New Zealand's Bill of Rights Act of 1990, adopted in1990, and amended in (9) 1993 by the Human Rights Act of 1993, which states under section 13 that "everyone has the right to refuse (10)to undergo any medical treatment", (11)Recalling that when performing euthanasia, or giving the patient the "right to die", a doctor has four options (12)(13)(in accordance with studies done by an American university): ignore the patient's request and allow care to continue as usual, passive euthanasia: "discontinue providing life-sustaining treatment to the patient", (14)(15) assisted suicide: "provide the patient with the means of taking his own life", active/voluntary euthanasia: "take active (16)(17)measures to end the patient's life", (18)Further recalling that euthanasia is usually applied to four categories of people: the terminally ill, those in (19)(20)intense pain, the elderly, those who voluntarily choose to end his/her life to escape prolonged suffering, (21)Fully aware of UN Press Release GA/SHC/3355 of 14 October 1996 stating that "everyone should be (22)(23) working to develop a new and enriched understanding of aging and the wide contribution which the elderly (24)could and should bring to society", (25) (26) Taking note of Human Rights document HR/CT/610 of 3 0 July 2001, stating that the Human Rights (27)Commission is concerned that the legalization of euthanasia "might fail to detect and prevent situations" in (28) which euthanasia and assisted suicide would become routine and insensitive "to the strict application of the (29)requirements in a way not anticipated", (30) (31)Having examined the "International Covenant on Civil and Political Rights" (document CCPR/CO/72/NET) of (32) 20 July 2001, stating that the "committee [in regards to the new act] does not as such decriminalize euthanasia and assisted suicide, however, where a State party seeks to relax legal protection with respect to (33)(34)an act deliberately intended to put an end to human life", (35)(36) 1. Calls upon all member States to recognize the right to individual freedom, and the right of each person to (37) make their own choices relative to the continuation/ non-continuation of medical treatment regarding (38)themselves: (39) 2. Notes that when one decides to cease their life, they cannot allow themselves to be influenced by neither (40)(41)third parties nor influence third parties themselves; (42) (43) 3. Proclaims that no health care worker should provide any means to allow the patient to accelerate the (44)process of ending his/her life, the so-called assisted suicide; (45) 4. Further resolves that no health care worker should take any direct action that would result in the death of (46)the patient, the so-called active, or voluntary, euthanasia, even in cases where the person asks to be killed; (47)(48)5. Suggests that passive euthanasia is only allowed in public and private hospitals where the necessary (49)conditions are created and the training of medical personnel is done in such a way that righteousness and (50)truth as well as compassionate care are insured against taking innocent lives, (51) 6. Proclaims that passive euthanasia can only be exercised under the following conditions: (52) (53)a. when the patient has been diagnosed of having a disease in which the resources available are (54)not enough to give the patient the access to a cure and a life worth living, (55)b. the diagnosis must be done by at least two doctors, one holding a long term relationship with (56)the patient and the other being an outside doctor, (57) c. the patient is in an irrational and irreversible state where by his/her judgment and mind have (58) been in pain (or terminal state): (59)(60)7. Calls for member nations to contribute voluntarily funds towards: (61) a. the building of hospitals so that developing countries are able to take care of the terminally ill, (62)b. awareness campaigns on euthanasia, (63)c. further research and prevention of terminal illness; (64)(68)

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(65)	8. <u>Endorses</u> the option of non-intervention, meaning a health care worker has the duty of ceasing to support
(66)	the patient with treatment that would help to prolong the patient's life at his/her request, but not to provide
(67)	them with a direct method of termination of life;
(69)	
(70)	9. <u>Suggests</u> striking any and all euthanasia laws "that decreed that disabled people had no right to marry or
(71)	reproduce, or even to live", stated in Press Release HR/CN/727 of 4 April 1 996;
(72)	
(73)	10. Encourages all member States to adopt the clause in Section 11, concerning medical treatment, under
(74)	Part II of the New Zealand Bill of Rights of 1990, stating that "everyone has the right to refuse to undergo
(75)	any medical treatment", which acts in accordance with the Universal Declaration of Human Rights;
(76) (77)	11. Emphasizes that for a government of a member State to allow a health care worker to assist in the
(78)	suicide of a patient, either by providing them with the means to cease his/her life or directly administrating a
(79)	lethal drug to a patient, is unethical, immoral, and inhumane, going against the Universal Declaration of
(80)	Human Rights, as well as the Charter of the United Nations;
(81)	
(82)	12. Supports government and private hospitals that house patients that wish to terminate their lives to
(83)	encourage such patients to seek psychological help that may help them to evaluate the decision they are
(84)	making, and analyze if that is really the best choice to take;
(85)	
(86)	13. <u>Clarifies</u> that it is in the rights of the patient to receive treatment for reducing pain, while ceasing
(87)	treatment that will prolong his/her life.
(88)	
(89)	<ol> <li><u>Urges</u> all nations to define their position on active and passive euthanasia;</li> </ol>
(90)	
(91)	15. Discourages the application of active euthanasia to citizens of their own countries and to those who have
(92)	made the voluntary decision after which they have been deemed sane by a minimum of two physicians;
(93)	
(94)	16. <u>Deplores</u> organizations or individuals that practice active and passive euthanasia in states where
(95)	the act is deemed illegal;
(96)	17. Authorizes all nations to legalize passive euthanasia;
(97) (98)	
(99)	18. Encourages nations to establish public awareness campaigns to educate their populaces about
(100)	euthanasia by:
(101)	a. holding a UN Summit on euthanasia for doctors, counsellors, and medical practitioners to
(102)	educate them about the uses, advantages, disadvantages and differing ethical viewpoint,
(103)	b. publishing materials to be distributed for free in schools, hospitals, and community centres or
(104)	equivalent institutions;
(105)	
(106)	19. Further requests countries that discover illegal practitioners of euthanasia within their borders to
(107)	consider them murders and let the issue be dealt with accordingly;
(108)	
(109)	20. <u>Proclaims</u> that passive euthanasia can only be exercised under the following conditions:
(110)	a. when the patient has been diagnosed of having a disease, in which the resources available are
(111)	not enough to give the patient the access to a cure and a life,
(112)	b. the diagnosis must be done by at least two doctors, one holding a long term relationship with
(113)	the patient and the other being an outside doctor, c. the patient is in an irrational and irreversible state where is judgment and mind have been lost
(114) (115)	(or terminal state):
(115)	נט נטרוווומ סומוכן,
(110)	21. Urges all members to implement programs to add their citizens' stance on euthanasia to their
(118)	identification cards, or their equivalent, in order to clarify for attending physicians with their patients' desires
(119)	if involved in an accident that places them in a terminally ill state;
(120)	· · · · · · · · · · · · · · · · · · ·
(121)	22. Condemns all financial gain to doctors involved in passive euthanasia other than the usual honouree that
(122)	he/she earns
(123)	
(124)	23. Calls for member nations to contribute voluntarily funds towards:
(125)	a. the building of hospitals so that developing countries are able to take care of the terminally ill,
(126)	b. awareness campaigns on euthanasia
(127)	c. further research and prevention of terminal illness;
(128)	
(129)	24. Discourages the practice of active euthanasia since it's viewed as suicide;
(130)	OF the second state of the
(131)	25. <u>Hopes</u> that this resolution will set the guidelines for the practice of passive euthanasia;
(132)	26 Decides to remain actively solited of the matter
(133)	26. Decides to remain actively seized of the matter.

# Appendix 4 Phrases for use in a resolution:

#### Preambulatory phrases:

Acknowledging Affirming Alarmed by Approving Aware of Believing Bearing in mind Confident Congratulating Contemplating Convinced Declaring Deeply concerned Deeply conscious Deeply convinced Deeply disturbed Deeply regretting Deploring Desiring Emphasising

#### **Operative phrases:**

Accepts Affirms Approves Asks Authorises Calls for Calls upon Condemns Congratulates Confirms Declares accordingly Deplores Designates Encourages Expecting Expressing its appreciation Expressing its satisfaction Fulfilling Fully alarmed Fully aware Fully believing Further deploring Further recalling Guided by Having adopted Having considered Having considered further Having devoted attention Having examined Having heard Having received Having studied Keeping in mind Noting further Noting with appreciation

Endorses Expresses its appreciation Expresses its hope Further invites Further proclaims Further recommends Further requests Further resolves Hopes Invites Proclaims Proposes Recommends Noting with approval Noting with deep concern Noting with regret Noting with satisfaction Observing Pointing out Reaffirming Realizing Recalling Recognising Referring Reminding Seeking Taking into account Taking into consideration Taking note Viewing with appreciation

> Regrets Requests Resolves Seeks Strongly affirms Strongly condemns Strongly urges Suggests Suggests Supports Trusts Transmits Urges