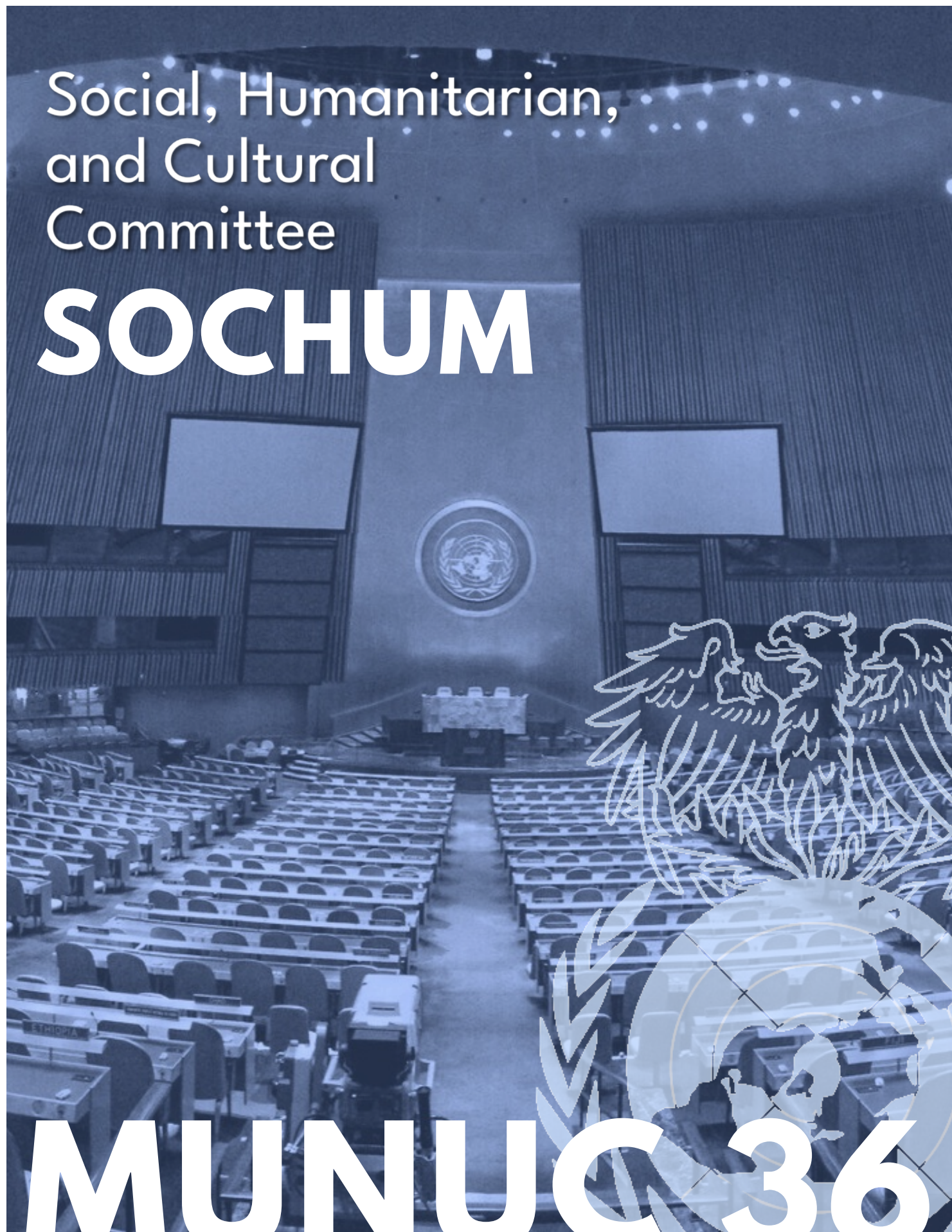


Social, Humanitarian,  
and Cultural  
Committee

# SOCHUM



# MUNUC 36

Model United Nations at the University of Chicago

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MUNUC

## CHAIR LETTERS

Hello Delegates,

Welcome to MUNUC 36 and the Social, Humanitarian, and Cultural Committee (SOCHUM)! I am very excited to be one of your chairs this year, and I am greatly looking forward to a weekend of fantastic debate and substantive solutions.

I am Anna Falcone, one of the two chairs in this committee. I am a third year in college, majoring in Religious Studies and Law, Letters, and Society. I grew up in New York City. In terms of Model UN, I am a chair for ChoMUN, our collegiate Model UN conference, and I am one of the vice presidents of the University's Travel Model UN team. Last year, I chaired the DISEC committee at MUNUC 35. Additionally, I usually compete in General Assembly committees, so they are my favorite kind of committees. Beyond Model UN, I am involved in the Fellows program at the Institute of Politics. I also tend to watch a lot of TV and hang out with friends in my free time.

I am so excited to be chairing a General Assembly again and to be chairing this committee. Kat and I really want to facilitate both a fun and respectful committee environment. We want to see delegates work together and speak their minds in order to find new and creative solutions to the issues surrounding access to women's healthcare and mass incarceration. Personally, I am particularly interested in new creative solutions to increase access to women's healthcare without disregarding the preferences and practices of people around the world.

Just a couple of tips from me. First, I value collaboration and respect more than anything else in the committee. This activity is about working together to find the best possible solutions to the issues at hand. I will not look favorably upon people who talk over other delegates, delete their work, or exclude them in order to try and control a bloc. I want to create a space where everyone can share their ideas and have a good time overall in committee. Additionally, I am really looking for interesting and creative solutions to the problems addressed in committee. Try to think out of the box and beyond what is already being done in order to find new and more effective solutions. Lastly, this is a really big General Assembly committee and I know that can be intimidating (trust me, I have been there), and I really commend you all for taking this on. I hope you all participate in both front room and back room, as I am sure you all have excellent ideas to share.

If you have any questions on the topic, committee procedure, Model UN at large, or anything else please feel free to email me at [afalcone@uchicago.edu](mailto:afalcone@uchicago.edu). See you in February!

Best,

Anna Falcone

Dear Delegates,

Hello and welcome to MUNUC XXXVI! I am Kat Mokedi (she/they) and I will be one of your chairs for the SOCHUM General Assembly. Through our topics of Access to Women's Health Care and Mass Incarceration, we hope to incite discussion and collaboration amongst all of you.

I'm excited to see how you all learn and improve over the weekend, but before that, a little 'background guide' on who I am. I'm a second-year double majoring in Public Policy and Global Studies. I am also a part of the MUN travel team on campus and I am a chair for UChicago's college conference, ChoMUN. Outside Model United Nations, I participate in University Theater and work on the "Human Rights in a New Key Podcast" with the Pozen Center. In my free time, I usually write poetry, drink coffee, and get lost in Chicago.

Our topics for this committee are Access to Women's Healthcare and Mass Incarceration. Throughout the world, societies have overlooked women's right to healthcare access or representation. I'm very glad to be able to present this global issue as one the delegates could debate and bring to light. Our second topic is Mass Incarceration, which also deals with other issues such as human rights abuses, communities in disarray, or the unjust incarceration of individuals by governments. With this topic, we hope to challenge delegates to think about the effects their solutions will have on multiple aspects of society for the long term. Both topics will lead to great collaboration, problem-solving, and debate on the best courses of action!

I can't wait for MUNUC XXXVI and all of the ideas and discourse that are created over the course of the weekend.

Sincerely,

Kat Mokedi

[mmokedi@uchicago.edu](mailto:mmokedi@uchicago.edu)



## HISTORY OF THE COMMITTEE

The Social, Humanitarian, and Cultural Committee (SOCHUM) is the Third Committee of the United Nations General Assembly. This committee was founded in 1945 after the Universal Declaration on Human Rights, and as a part of the United Nations Charter.<sup>1</sup> As one of the Main Committees of the United Nations General Assembly, this body is made up of all 193 Member States, who all have an equal vote in passing resolutions.<sup>2</sup> This committee addresses an incredibly wide range of topics, such as criminal justice, the advancement of women, and the promotion of fundamental freedoms through the elimination of racism, as well as addressing questions of human rights.<sup>3</sup> In the 76th Session of the General Assembly, SOCHUM discussed issues such as the impact of climate change, healthcare, and concerns around the death penalty.<sup>4</sup> While SOCHUM resolutions are not legally binding for Member States involved in the United Nations, the solutions developed and outlined within them are incredibly important as they can set global priorities and agendas.<sup>5</sup>

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<sup>1</sup> United Nations. “Functions and Powers of the General Assembly.” un.org, 2015, [www.un.org/en/ga/about/background.shtml](http://www.un.org/en/ga/about/background.shtml).

<sup>2</sup> “General Assembly of the United Nations.” un.org, [un.org/en/ga/](http://un.org/en/ga/).

<sup>3</sup> “UN General Assembly - Third Committee - Social, Humanitarian & Cultural.” Un.org, [www.un.org/en/ga/third/index.shtml](http://www.un.org/en/ga/third/index.shtml).

<sup>4</sup> “Press Releases - Social, Humanitarian & Cultural Issues (Third Committee) - UN General Assembly.” *Un.org*, 2018, [www.un.org/en/ga/third/pr.shtml](http://www.un.org/en/ga/third/pr.shtml).

<sup>5</sup> “How Decisions Are Made at the UN.” *Un.org*, [www.un.org/en/model-united-nations/how-decisions-are-made-un](http://www.un.org/en/model-united-nations/how-decisions-are-made-un).

## TOPIC A: ACCESS TO WOMEN'S HEALTHCARE

### Statement Of The Problem



*UN Women Global Goodwill Ambassador Emma Watson speaks on advancing gender equality and addressing discrepancies in women's empowerment at the 2015 World Economic Forum, Davos, Switzerland.<sup>6</sup>*

The National Institute of Health defines women's health as "a broad category that includes health issues that are unique to women, such as menstruation and pregnancy, as well as conditions that affect both men and women, but that may affect women differently, such as heart disease and diabetes."<sup>7</sup> **Women's healthcare**

<sup>6</sup> Sloman, Celeste. *UN Women Launches HeForShe IMPACT 10x10x10 Initiative*. January 23, 2015. Image. Edited by UN Women. *Flickr.com*.  
<https://www.flickr.com/photos/unwomen/albums/72157704287610091>.

<sup>7</sup> Eunice Kennedy Shriver National Institute of Child Health and Human Development, "Women's Health," Eunice Kennedy Shriver National Institute of Child Health and Human Development, last modified March 6, 2023, accessed September 3, 2023,  
<https://www.nichd.nih.gov/health/topics/womenshealth#:~:text=Women's%20health%20is%20a%20broad,as%20heart%20disease%20and%20diabetes>.

encapsulates the variety of care options that can aid women in dealing with issues regarding women's health, such as reproductive healthcare, care specifically around pregnancy, and care for diseases that may impact women differently than men.<sup>8</sup> While this field tends to be referred to as women's healthcare, the access to this kind of care can be important to many people. There are a large range of issues that prevent people from accessing this kind of care whether it is gender-based disparities in healthcare, stigma around reproductive care, or a basic lack of access to supplies.

### Healthcare Research And Treatment Biases

There are a handful of reasons why there are gender based disparities in healthcare. The first reason is that research tends to be biased towards men. Historically, healthcare research has favored men, even when the medical condition being researched affected both men and women. Having clinical trials favored towards men is partially due to government action. For example, from 1977 to 1993 the Food and Drug Administration in the United States had banned women who could potentially bear children from participating in early drug trials. Additionally,

<sup>8</sup> Eunice Kennedy Shriver National Institute of Child Health and Human Development, "Women's Health," Eunice Kennedy Shriver National Institute of Child Health and Human Development.

healthcare research into medical conditions that only affect women has been historically underfunded, leading to less information about the conditions and fewer treatments and cures for diseases that affect a large percentage of people with female anatomy.<sup>9</sup>

Due to this lack of research, women, and especially Black women, are more often misdiagnosed by doctors than men. The misdiagnoses can occur with life threatening medical conditions, such as stroke. It has been found that women are ½ more likely to be initially misdiagnosed when having a stroke, and that women are 10% more likely to be misdiagnosed when having a minor stroke. Beyond that, women are seven times more likely to be discharged from the hospital when having a heart attack, and over half of cardiologists feel ill-equipped to properly diagnose women with cardiovascular disorders.<sup>10</sup> This stark rate of misdiagnoses and the general lack of knowledge around how health issues affect women makes it more difficult for women to get proper medical attention.

The last major reason for this disparity in health outcomes is that women's symptoms are less

likely to be believed by healthcare professionals. Historically, it was believed that many medical conditions women faced were psychosomatic. This history has extended into the present day where women are less likely to be believed by medical professionals and have their pain be taken seriously. For example, in 2015, women with heart attack symptoms were less likely to search out treatment because they were afraid of being called hypochondriacs. Additionally, the lack of belief about pain can both lead to women being less likely to receive pain medication and treated more slowly compared to men.<sup>11</sup> The combination of a lack of research into medical conditions facing women, a lack of ability to properly diagnose medical conditions facing women, and the disbelief surrounding women's symptoms and the general stigma around women seeking care lead to women not being able to access adequate care even when the resources are available.

## Reproductive Healthcare Issues

Beyond the general stigma around women's healthcare, there is a particular stigma around reproductive care for women. This stigma frequently causes young and unmarried women to avoid seeking care for reproductive health issues. This stigma can also affect the mental health of women, making them afraid, stressed, or depressed which can make people wait to get

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<sup>9</sup> Kate Ying, "Three Key Issues Facing Women's Healthcare -- and Three Ways to Help," Constant Therapy Health, accessed September 3, 2023, <https://constanttherapyhealth.com/brainwire/three-key-issues-facing-womens-healthcare-and-three-ways-to-help/>.

<sup>10</sup> Ying, "Three Key Issues," Constant Therapy Health.

<sup>11</sup> Ying, "Three Key Issues," Constant Therapy Health.

diagnosed and lead them to get treatment later. Thus, even when reproductive healthcare is available and accessible, unmarried women are less likely to seek that care because of the stigma around it.<sup>12</sup> This stigma especially exists around abortion care worldwide. Many childbearing people are shamed for getting or seeking an abortion even when it is completely legal to get one.<sup>13</sup>

## Menstrual Health And Period Poverty



*Rohingya refugees at a refugee camp in Bangladesh receive essential relief items including menstrual hygiene products, soap, clothes, and flashlights from UN Women and humanitarian aid agencies, Bangladesh, 2018.<sup>14</sup>*

**Period poverty** is another area where there is a lack of access to women's healthcare. "Period poverty is a lack of access to menstrual products, education, hygiene facilities, waste management, or a combination of these."<sup>15</sup> There are around 500 million people worldwide who face period poverty. When someone is impacted by period poverty and cannot purchase the menstrual products that they need, they will often miss

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<sup>12</sup> Fatemah Mohammadi et al., "The Stigma of Reproductive Health Services Utilization by Unmarried Women," PubMed Central: Iranian Red Crescent Medical Journal, last modified March 20, 2016, accessed September 3, 2023, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4884608/#:~:text=Four%20main%20categories%20constituted%20the.ashamed%20of%20seeking%20reproductive%20health.>

<sup>13</sup> Ipas, "Ending Abortion Stigma," Ipas, accessed September 3, 2023, <https://www.ipas.org/our-work/ending-abortion-stigma/>.

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<sup>14</sup> Joyce, Allison, and United Nations. "Bangladesh - Rohingya Women in Refugee Camps Share Stories of Loss and Hopes of Recovery," Flickr.com, 13 July 2018.

<https://www.flickr.com/photos/unwomen/albums/72157695848600172>

<sup>15</sup> Caitlin Geng, "What to Know about Period Poverty," ed. Valinda Riggins Nwadike, Medical News Today, last modified September 16, 2021, accessed September 3, 2023,

<https://www.medicalnewstoday.com/articles/period-poverty.>



work, school, or other things in their daily life. This means that young people can miss out on their education or people in the workforce can miss out on income. Period poverty can cause negative health side effects, such as infections or toxic shock syndrome, when products are not being used properly. Not only can menstruating have serious physical health impacts, but there can also be great negative mental health impacts. 39% of women that had a lack of access to menstrual products suffered from anxiety or depression. Not only do women suffer from anxiety, but there is general shame around menstruating. For example, it is harder to focus on school work when people are preoccupied with thinking about leaks or period pain. Additionally, period poverty can negatively affect the self-perception of women and lead to a decreased quality of life.<sup>16</sup>

The cost issues associated with period poverty can be further exacerbated by the manner in which governments tax period products. In the United States, a person will pay an estimated total of \$1700 on period products over the course of their lifetime, and of that total between \$100 and \$225

will be spent in taxes alone.<sup>17</sup> While the European Union has recently introduced a new policy to allow countries to remove value-added taxes (VAT) or sales taxes on menstrual products, none of the countries within the European Union have actually removed the tax.<sup>18</sup> There are a small handful of areas that have tax free menstrual products, which include Kenya, Canada, India, and Colombia among a few others.<sup>19</sup>

Menstrual health and period poverty moves beyond questions of whether people can pay for period products or not. Menstrual health also requires things like access to clean water or sanitation in order to ensure that people can menstruate hygienically. Additionally, there needs to be an increased access to education about menstrual health. This education is important because it can teach people about menstruation without stigma and include them in important conversations. These issues can be

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<sup>16</sup> Alice Broster, "Menstrual Hygiene Day Highlights the Links between Period Poverty and Mental Health," *Forbes*, last modified May 28, 2020, accessed September 3, 2023, <https://www.forbes.com/sites/alicebroster/2020/05/28/menstrual-hygiene-day-highlights-the-links-between-period-poverty--mental-health/?sh=6347d2e12c39>.

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<sup>17</sup> Leah Rodriguez, "The Tampon Tax: Everything You Need to Know," *Global Citizen*, last modified June 28, 2021, accessed September 3, 2023, <https://www.globalcitizen.org/en/content/tampon-tax-explained-definition-facts-statistics/>.

<sup>18</sup> Venya Patel and Marc Cervera, "Tracking Tampon Tax: No EU27 Nations Leverage New Feminine Hygiene Full VAT Exemption," *Personal Care Insights*, accessed September 3, 2023, <https://www.personalcareinsights.com/news/tracking-tampon-tax-no-eu27-nations-have-leveraged-new-feminine-hygiene-full-vat-exemption.html#:~:text=16%20Feb%202023%20%2D%2D%20An,to%20fully%20eliminate%20the%20tax>.

<sup>19</sup> Rodriguez, "The Tampon," *Global Citizen*.

addressed through a range of national, charitable, and private sector programs that all work towards increasing access to safe menstruation.<sup>20</sup>

## Maternal Healthcare



*A U.S. Army Reserve medic delivers a baby in rural Uganda, 2009.<sup>21</sup>*

Another huge area where inequities in women's healthcare appears is **maternal healthcare**. Maternal healthcare according to the World Health Organization is "the health of women during pregnancy, childbirth and the postnatal period."<sup>22</sup> Issues with maternal healthcare can range from disease, to procedural issues, to even

death.<sup>23</sup> In 2020, around 287,000 people died either during pregnancy or after birth, and almost 95% of these deaths were entirely preventable. The highest **maternal mortality** rates exist in places where there is a lack of access to quality healthcare. This happens mostly in lower income countries and areas around the world. Solving preventable maternal deaths is one of the most critical things that needs to be solved to ensure safe healthcare for women around the world. One of the biggest ways that maternal deaths can be prevented is through contraceptive care and safe abortions allowing people to avoid unintended pregnancy.<sup>24</sup> Additionally, issues in providing maternal healthcare can also stem from a lack of reproductive health rights.<sup>25</sup>

One of the major mental health issues around maternal health is postpartum depression. One of the difficulties with treating postpartum depression is the stigma around it. Many people do not want to discuss it, which can lead to people not getting treatment. Postpartum depression looks like a range of symptoms, including anxiety, inability to sleep, loss of energy,

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<sup>20</sup> Geng, "What to Know," Medical News Today.

<sup>21</sup> Schultz, Corey. "Army Reserve Nurse Delivers Baby in Rural Uganda - United States Army Africa - Natural Fire 10 - AFRICOM," *Flickr.com*, 22 Oct. 2009, flickr.com/photos/usarmyafrica/4034861100/in/album-72157622514858547/.

<sup>22</sup> World Health Organization, "Maternal Health," World Health Organization, accessed September 3, 2023, [https://www.who.int/health-topics/maternal-health#tab=tab\\_1](https://www.who.int/health-topics/maternal-health#tab=tab_1).

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<sup>23</sup> World Health Organization, "Maternal Health," World Health Organization.

<sup>24</sup> World Health Organization, "Maternal Mortality," World Health Organization, last modified February 22, 2023, accessed September 3, 2023, <https://www.who.int/news-room/fact-sheets/detail/maternal-mortality>.

<sup>25</sup> World Health Organization, "Maternal Health," World Health Organization.

and feelings of worthlessness.<sup>26</sup> While postpartum depression can last for months or longer, the symptoms can be helped through counseling or medication.<sup>27</sup> However, in order to ensure that everyone can get the treatment they need, the stigma around postpartum depression must be removed.

Across the world, there are huge inequities in women's healthcare. These inequities pop up all across the world ranging from lack of access to products, stigma around women's healthcare, and poor research and diagnoses. It is critical that these problems are addressed so that people around the world can access adequate healthcare.

## History Of The Problem

### The Beijing Declaration



*The opening of the 64th Session of the Commission on the Status of Women commemorating the 25th anniversary of the Beijing Declaration and Platform for Action, New York, 2020.<sup>28</sup>*

The **Beijing Declaration and Platform for Action** was created in September 1995 to push for greater gender equality across the world. This declaration was the result of four different United Nations conferences on women. These conferences were held in Mexico City in 1975, Copenhagen in 1980, Nairobi in 1985, and finally Beijing in 1995. The Beijing declaration was adopted by 189 countries around the world, and was followed up by a set of reviews.<sup>29</sup> This

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<sup>26</sup> Brad Gillman, "The Stigma of Addressing Postpartum...", Intermountain Health, last modified October 2, 2017, accessed September 3, 2023, <https://intermountainhealthcare.org/blogs/the-stigma-of-addressing-postpartum-depression>.

<sup>27</sup> Yvette Brazier, "How Long Does Postpartum Depression Last?," ed. Valinda Riggins Nwadike, Medical News Today, last modified November 5, 2019, accessed September 3, 2023, <https://www.medicalnewstoday.com/articles/271217>.

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<sup>28</sup> Brown, Ryan, and UN Women. #CSW64 - Opening of the 64th Session of the Commission of the Status of Women. March 8, 2020. Image. Flickr.com. <https://www.flickr.com/photos/unwomen/49640799717>.

<sup>29</sup> UN Women, "World Conferences on Women," UN Women, accessed September 4, 2023, <https://www.unwomen.org/en/how-we-work/inter-governmental-support/world-conferences-on-women>.

declaration was meant to promote the human rights and freedoms of women, women's economic independence, and equal treatment in education and healthcare.<sup>30</sup> Out of the 12 critical areas this declaration addresses, Section C of this declaration focuses exclusively on women and health.<sup>31</sup> This declaration recognizes that women have unequal access to health care resources compared to men, whether it is primary health care and the prevention of diseases, or reproductive health care. The declaration also discusses how many policies can promote gender stereotypes and many do not recognize the lack of autonomy when it comes to women's health.

The declaration also pushes for certain solutions to improve women's access to healthcare and ensure a more equitable future. For example, the declaration states that reproductive rights are a set of human rights, both in national and international laws and documents. The declarations called for countries to create community-based and gender-sensitive healthcare programs that work to address the wide range of healthcare issues that affect women, or more simple actions like increasing the awareness of nutrition information for girls and women.

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<sup>30</sup> OneMama, "OneMama's Economic and Social Council Official Statement on the Beijing Declaration and Platform for Action of 1995," OneMama, last modified January 10, 2020, accessed September 4, 2023, <https://onemama.org/onemama-beijing-declaration-and-platform-for-action-1995/>.

<sup>31</sup> UN Women, "World Conferences," UN Women.

Other actions work to include mental health counseling in women's healthcare, or more general efforts like ensuring that women have clean drinking water. This declaration, made over 25 years ago, addressed a wide range of women's healthcare issues, some of which have been addressed, but many which still impact the world today.<sup>32</sup>

## Case Study: Women And Healthcare In The United States In The Late 20Th Century

### *Women's Health Movement*

The late 1960s brought the second-wave of the women's health movement to the United States. This movement consisted of a range of people such as members of women's groups and healthcare providers. These people rallied together to work towards legalizing abortion, among other health issues. These groups also fought for women-controlled health centers and organizations that worked towards policy changes. This movement created publications including the most known publication *Our Bodies, Ourselves*. In 1976, this publication became one of the main resources for the new National Women's Health Network, an organization that has become one of the most

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<sup>32</sup> United Nations, Beijing Declaration and Platform of Action, adopted at the Fourth World Conference on Women, 27 October 1995, available at: <https://www.un.org/womenwatch/daw/beijing/pdf/BDPfA%20E.pdf> [accessed 4 September 2023]

respected watchdogs of how the medical world treats women.<sup>33,34</sup> Large movements can be key to pushing along calls for research, ensuring that people are properly treated, and increasing education. However, this movement was not without its faults. The original movement was founded by mainly white middle-class women, who did not address issues surrounding white privilege within the organization. While the movement was very diverse, the movement's public positions did not properly reflect the positions of women of color or poor women. These faults lead to the founding of different local and national organizations to better represent the diverse experiences of women and healthcare. In looking towards new solutions to expanding women's healthcare, it is critical that a diverse range of perspectives and experiences are taken into account to ensure that everyone is properly represented in women's health.

This organization did however have a handful of successes. These successes included the introduction of the Women's Health Equity

Act.<sup>35</sup> This act was meant to establish the Office of Research of Women's Health and increase the standards of women's healthcare.<sup>36</sup> While this act was never enacted, the activism around the act led to many advances in women's healthcare such as increased research, cancer prevention programs, and much more.<sup>37</sup>

In recent years, the US Congress has considered the Women's Health Protection Act (WHPA), which passed through the House of Representatives in 2022. This act works to protect the health of the pregnant person by preventing the government from restricting access to abortion services, creating protections for drug prescriptions, and regulating telehealth services. Additionally, it prevents providers from providing inaccurate information, unnecessary procedures, or being required to provide abortions. This legislation, which still has to pass

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<sup>33</sup> Judy Norsigian, "Our Bodies Ourselves and the Women's Health Movement in the United States: Some Reflections," National Library of Medicine: National Center for Biotechnology Information, last modified June 2019, accessed September 4, 2023, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6507979/>.

<sup>34</sup> National Women's Health Network, "Who We Are," National Women's Health Network, accessed September 4, 2023, <https://nwhn.org/who-we-are/>.

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<sup>35</sup> Norsigian, "Our Bodies," National Library of Medicine: National Center for Biotechnology Information.

<sup>36</sup> Congress.gov. "S.514 - 102nd Congress (1991-1992): Women's Health Equity Act of 1991." February 27, 1991. <https://www.congress.gov/bill/102nd-congress/senate-bill/514>.

<sup>37</sup> Norsigian, "Our Bodies," National Library of Medicine: National Center for Biotechnology Information.

the Senate, is a historic leap in the guarantee of access to women's healthcare.<sup>38</sup>

## Women In Clinical Research

While the women's health movement started a push towards including women in medical research, some of the progress made was reversed in the 1970s. In 1977, the United States Food and Drug Administration recommended new limitations for including women in clinical trials. They suggested that any women who could have a child should not be allowed in Phase I and Phase II drug trials. This was due to concerns over potential birth defects due to certain drugs.

However, this policy had wider negative impacts. Because many women were not allowed to participate in clinical trials, there was a significant lack of research involving how women experienced certain diseases or reacted to certain medications. It took until 1994 for the National Institutes of Health to require that women be included in clinical trials.<sup>39</sup>

The effects from women not being included in clinical trials continue into today. In 2022, a report came out on the lack of knowledge surrounding women's heart disease. For example, there are certain risk factors for heart disease that are only applicable to women. Women who start their menstrual cycles before the age of 11 or start menopause before the age of 40 are more likely to suffer from heart disease. Additionally, women are more affected by autoimmune and inflammatory disorders, which can also increase the likelihood of heart disease.<sup>40</sup> These key signs and risk factors would be missed if there was not proper research into women's health issues.

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<sup>38</sup> Congress.gov. "H.R.3755 - 117th Congress (2021-2022): Women's Health Protection Act of 2021." February 28, 2022.

<https://www.congress.gov/bill/117th-congress/house-bill/3755>.

<sup>39</sup> National Institutes of Health: Office of Research on Women's Health, "History of Women's Participation in Clinical Research," NIH Inclusion Outreach Toolkit: How to Engage, Recruit, and Retain Women in Clinical Research, <https://orwh.od.nih.gov/toolkit/recruitment/history>.

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<sup>40</sup> American Heart Association News, "Report Calls Out Gaps in Women's Heart Disease Research, Care," American Heart Association, last modified May 9, 2022,

<https://www.heart.org/en/news/2022/05/09/report-calls-out-gaps-in-womens-heart-disease-research-care>.

## The UN And Maternal Mortality



*A mother holds her newborn baby at the Maternal and Child Health Institute for medically needy in Dhaka, Bangladesh.<sup>41</sup>*

Maternal mortality has long been a global issue. In 2000, the United Nations set out eight Millennium Development Goals. These goals were meant to be time bound ways to increase progress in a range of issues, including disease, lack of adequate shelter, hunger, and poverty. These goals were also meant to be something that could be measured in order to track the global

progress of these metrics.<sup>42</sup> One of these goals was Millennium Development Goal 5. Goal 5 was to “Improve Maternal Health.” This goal included two targets. “Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio” and “Target 5.B: Achieve, by 2015, universal access to reproductive health.”<sup>43</sup> Since these goals were introduced, maternal mortality has almost decreased by half, and access to reproductive healthcare has increased. These goals also helped the world realize that we might soon be able to end all preventable maternal mortality related deaths.<sup>44</sup>

After the Millennium Development Goals, the Sustainable Development Goals continued the international push for a decrease in maternal mortality. Sustainable Development Goal target 3.1 “is to reduce maternal mortality to less than 70 maternal deaths per 100,000 live births by

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<sup>42</sup> United Nations, “Background,” We Can End Poverty: Millennium Development Goals and Beyond 2015, <https://www.un.org/millenniumgoals/bkgd.shtml#:~:text=The%20Millennium%20Development%20Goals%20set,environmental%20sustainability%20E2%80%94%20can%20be%20measured.>

<sup>43</sup> United Nations, “Goal 5: Improve Maternal Health,” We Can End Poverty: Millennium Development Goals and Beyond 2015, <https://www.un.org/millenniumgoals/maternal.shtml>.

<sup>44</sup> Joshua P. Vogel et al., “Millennium Development Goal 5 and Adolescents: Looking Back, Moving Forward,” Archives of Disease in Childhood, accessed September 4, 2023, [https://adc.bmj.com/content/100/Suppl\\_1/S43](https://adc.bmj.com/content/100/Suppl_1/S43).

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<sup>41</sup> Park, Kibae, and UN Photo. Maternal Health in Developing Countries. n.d. Image. Flickr.com. [https://www.flickr.com/photos/un\\_photo/5370298016/in/photolist-2oMx49m-6AXNa8-6AXNa6-8Sq46Z-8kCUSY-dsP4R5-9bybv7-9kbyPL-72cMdZ-72gLG7-72cMdc-5f1Y17-7fCyWV-7fCxdg-7fCqHM-jmwZZM-7fGv6G-7Uwk2Q-7fGhXj-7fGn1Q-7fCucn-8kCUUo-bjf1Lx-7UwYAL-7UtNvX-AjVS5B-9yjTcF-mXiZeZ-7Xu2TB-nseT7K-pUYpwC-pXcVpb-naKq4S-7JAGiJ-pXcV3j-97bk7n-7JAGj3-mXkB29-bF8vVc-p1ht2y-pUYpN9-7UtSQe-7Uuvfz-7Uur8r-7UxMcd-7UxBr3-4bCwJy-zXZni](https://www.flickr.com/photos/un_photo/5370298016/in/photolist-2oMx49m-6AXNa8-6AXNa6-8Sq46Z-8kCUSY-dsP4R5-9bybv7-9kbyPL-72cMdZ-72gLG7-72cMdc-5f1Y17-7fCyWV-7fCxdg-7fCqHM-jmwZZM-7fGv6G-7Uwk2Q-7fGhXj-7fGn1Q-7fCucn-8kCUUo-bjf1Lx-7UwYAL-7UtNvX-AjVS5B-9yjTcF-mXiZeZ-7Xu2TB-nseT7K-pUYpwC-pXcVpb-naKq4S-7JAGiJ-pXcV3j-97bk7n-7JAGj3-mXkB29-bF8vVc-p1ht2y-pUYpN9-7UtSQe-7Uuvfz-7Uur8r-7UxMcd-7UxBr3-4bCwJy-zXZni).

2030.”<sup>45</sup> This would be a maternal mortality rate of 0.07% by 2030. While maternal mortality rates dropped significantly during the Millennium Development Goal period, these rates have plateaued in the new Sustainable Development Goal era.<sup>46</sup> There must be new international efforts to push along these goals.

## Current Status Of Women’s Healthcare

In 2023, there are still huge advances to be made in women’s healthcare, whether it is access to resources, improving maternal mortality, or implementing more research into how different diseases affect women. Many of these issues have a deep historical background, and it is important to not make the same mistakes of the past, and push to create long lasting change. Throughout history, there has been a dismissal of women’s healthcare, leading to women being misdiagnosed or ignored. Additionally, the world has made continual false promises to women around improving access to healthcare. It is critical that these solutions come to fruition so we can move forward in providing accessible, affordable, and

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<sup>45</sup> World Health Organization, “Trends in Maternal Mortality 2000 to 2020: Estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division,” World Health Organization, last modified February 23, 2023, <https://www.who.int/publications/i/item/9789240068759>.

<sup>46</sup> World Health Organization, “Trends in Maternal Mortality 2000 to 2020: Estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division”

high quality healthcare to women around the world.

## Past Actions

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### UN Initiatives

Currently, one of the leading UN initiatives to aid in access to women’s healthcare is through Sustainable Development Goal 3, which is “Ensure healthy lives and promote well-being for all at all ages.”<sup>47</sup> As a part of this, there are more specific goals relating to women’s healthcare. These specific goals include reducing maternal mortality to less than 70 deaths per 100,000 births, ensuring access to reproductive healthcare services, and more broad healthcare issues that affect both men and women.

**UN Women**, a UN entity tasked with advocating on behalf of women around the world, acts to promote Sustainable Development Goal 3 through working both with governments and with non-governmental organizations to help advance women’s healthcare. As part of this work, UN Women advocates against any laws and practices that prevent women from gaining necessary healthcare services, such as reproductive healthcare services.<sup>48</sup> Sustainable Development

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<sup>47</sup> UN Women, “SDG 3: Ensure Healthy Lives and Promote Well-being for All at All Ages,” UN Women, accessed September 4, 2023, <https://www.unwomen.org/en/news/in-focus/women-and-the-sdgs/sdg-3-good-health-well-being>.

<sup>48</sup> UN Women, “SDG 3: Ensure,” UN Women.



Goals can prove to be helpful ways to guide UN action in addressing key issues like women's healthcare, but they have to be coupled with programs to promote the goals and ensure access is being taken. One way that these goals could be promoted is through UN programs that work with national and local organizations to bring affordable supplies or medical education.

More broadly, "UN Women is the UN organization delivering programmes, policies and standards that uphold women's human rights and ensure that every woman and girl lives up to her full potential."<sup>49</sup> This organization hosts a large number of programs that work to help women in a host of ways. Some UN Women initiatives address healthcare specifically while others focus on economic empowerment, humanitarian causes, and security. This body has done a lot over the years to further women's rights and acts as a good jumping off point for future action surrounding access to women's healthcare.<sup>50</sup> UN Women has not only worked on the Beijing Declaration and Platform for Action, as described in the last section, but they have also created the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). These two agreements work to set international standards and goals around gender equality. Additionally,

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<sup>49</sup> UN Women, UN Women, accessed September 4, 2023, <https://www.unwomen.org/en>.

<sup>50</sup> UN Women, UN Women.

UN Women works with international and national organizations to set global policies and help with implementation in different countries.<sup>51</sup> UN Women also develops flagship programs which different Member States can join to further advance the goals of UN Women. These programs range from political empowerment to the risks of climate change, and reproductive health services.<sup>52</sup>

A combination of international standards and policies, along with practical flagship programming, could help further access to women's healthcare all across the world. These sorts of policy-based programs can ensure that each country is on the same page and working towards the same goals, while the high-impact individual programs can aid countries in meeting these goals.

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<sup>51</sup> UN Women, "About UN Women," UN Women, accessed September 4, 2023, <https://www.unwomen.org/en/about-us/about-un-women>.

<sup>52</sup> UN Women, "Flagship Programme Initiatives," UN Women, accessed September 4, 2023, <https://www.unwomen.org/en/how-we-work/flagship-programmes>.

## Case Study: Mexico And Seguro Popular



*Office of the Secretary of Health, Mexico.*<sup>53</sup>

One example of a success story in providing healthcare access to women was in Mexico. In the early 2000s, Mexico instituted Seguro Popular, a public health insurance program that offered accessible healthcare to people without co-pays.<sup>54</sup> During this program, maternal mortality rates decreased from 55 to 33 deaths per 100,000 births, and access to sanitation increased from 77% to 92%. These impressive changes in maternal mortality and access to sanitation were due to the increased access. Around 66% of women, including 88% of women in the poorest quarter of the country, were served by Seguro

<sup>53</sup> Delso, Diego. Secretary of Health, Mexico City, Mexico. October 13, 2013. Image. Wikimedia Commons.

[https://commons.wikimedia.org/wiki/File:Secretar%C3%ADa\\_de\\_Salud,\\_M%C3%A9xico\\_D.F.,\\_M%C3%A9xico,\\_2013-10-13,\\_DD\\_12.jpg](https://commons.wikimedia.org/wiki/File:Secretar%C3%ADa_de_Salud,_M%C3%A9xico_D.F.,_M%C3%A9xico,_2013-10-13,_DD_12.jpg).

<sup>54</sup> The World Bank, "Seguro Popular: Health Coverage For All in Mexico," The World Bank, last modified February 26, 2015, accessed September 4, 2023, <https://www.worldbank.org/en/results/2015/02/26/health-coverage-for-all-in-mexico>.

Popular. This program also worked well in a country where two thirds of women either do not work or do not have formal employment, helping to increase healthcare availability to those who historically did not have access. These successes were further shown when Mexico repealed Seguro Popular. During the process of repealing the program, Mexico instituted the National Health Institute for Wellbeing, which placed 40% to 60% of medical costs onto patients and did not offer as complete coverage as Seguro Popular. These price increases caused childcare to become much harder to access and made women's healthcare more generally more inaccessible.<sup>55</sup>

Programs like Seguro Popular are examples of some of the best ways to address access to women's healthcare. While public health programs are not the only way to improve access, centralizing healthcare in some manner can ensure that there is better access to doctors, medication, and medical facilities. Additionally, as seen with the change from Seguro Popular to the National Health Institute for Wellbeing, adding cost barriers can have ripple effects and make both women's healthcare and child care more burdensome. It is critical to find programs

<sup>55</sup> Wilson Center, "Curing Inequity: Opportunities for Improved Access to Women's Healthcare in Mexico," Wilson Center, last modified March 28, 2022, accessed September 4, 2023, <https://www.wilsoncenter.org/event/curing-inequity-opportunities-improved-access-womens-healthcare-mexico>.

that can create access without creating extra expense or burden.

## Possible Solutions

### Increasing Access



*A community health worker in India administers a vaccine to a baby as part of a joint program among the governments of India, the United Kingdom, and UNICEF to support the health of mothers with infant children.<sup>56</sup>*

There are many ways to address increasing access to women's healthcare, especially in countries that do

not have high quality established healthcare. This kind of access can come through improving the rate of accurate diagnoses or ensuring everyone can have appropriate healthcare. This might look like improving medical training or access to

resources to ensure that medical facilities have access to medical technology, medicine, and vaccines. Programs to improve medical training could be international, but should also include local input to ensure that all medical care is culturally appropriate. These programs can work to bring tangible access to women's healthcare in places that do not have it.

However, there are also more complex aspects of increasing access to healthcare for women. Especially in low and middle income countries, women may have lower incomes or more responsibilities within family life, which can make it harder for women to access care even when it is available. On top of this, gender discrimination can make it harder for them to access or even seek out proper care. One way this can be addressed is through finding ways to empower women to take their healthcare into their hands.<sup>57</sup> This empowerment is as simple as ensuring that women know what healthcare tools exist and making sure those women feel supported in utilizing everything that is available. One way to encourage the utilization of healthcare is through education to ensure that women are aware of all of their healthcare options.

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<sup>56</sup> UK Department for International Development. Community Health Worker Gives a Vaccination in Odisha State, India. December 14, 2011. Image. Wikimedia Commons. [https://commons.wikimedia.org/wiki/File:Community\\_health\\_worker\\_gives\\_a\\_vaccination\\_in\\_Odisha\\_state,\\_India\\_%288380317750%29.jpg](https://commons.wikimedia.org/wiki/File:Community_health_worker_gives_a_vaccination_in_Odisha_state,_India_%288380317750%29.jpg).

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<sup>57</sup> THE AXA.COM TEAM, ed., "The Key to Improving Women's Health in Developing Countries," AXA, last modified June 12, 2019, accessed September 4, 2023, <https://www.axa.com/en/news/the-key-to-improving-women-s-health-in-developing-countries>.

## Business Opportunities

Improving access to women's healthcare is also something that is happening within the private sector. In today's world, over 80% of the financial decisions around healthcare in the world are made by women, however, the market for women's healthcare still remains fairly small. Women's healthcare and research is extremely under-invested with only 5% of biopharmaceutical funding and 4% of medtech funding going towards female-specific conditions. This leaves vast investment opportunities for governments and companies to put funding into researching historically under-researched areas of healthcare. This kind of research also extends far beyond reproductive and maternal healthcare, and includes research into cardiovascular disease, autoimmune diseases, and Alzheimer's.<sup>58</sup>

As part of the current push to address the lack of investment in women's healthcare, the FemTech market has started to boom in the past 10 years. FemTech encompasses companies that work towards creating consumer-centric solutions to women's health issues. These companies encompass all areas of healthcare with the

exceptions of biopharmaceuticals and necessary medical devices. FemTech companies look to innovate and find new solutions to women's healthcare concerns. From a numbers perspective, FemTech has a market size range of \$500 million to \$1 billion.<sup>59</sup>

As part of the FemTech boom, companies have started to organize into larger networks and organizations. In 2021, the FemTech Association Asia became the first and largest network of people who work in FemTech in the region. FemTech Association Asia has since worked to establish companies across Asia in Indonesia, Singapore, Japan, and many other places, in a variety of specialties.<sup>60</sup>

## Changing Mindsets And Eliminating Stigma

The World Health Organization published research in 2016 that stated that even though women tend to live longer in the European Union, they spend more of their lives sick or unwell. This data is due partially to the fact that women's healthcare has often been something that focuses on intervention instead of prevention. Basically, women are more likely to

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<sup>58</sup> Emma Kemble et al., "Unlocking Opportunities in Women's Healthcare," ed. David Schwartz, McKinsey & Company, last modified February 14, 2022, accessed September 4, 2023, <https://www.mckinsey.com/industries/healthcare/our-insights/unlocking-opportunities-in-womens-healthcare>.

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<sup>59</sup> Emma Kemble et al., "The Dawn of the FemTech Revolution," ed. David Schwartz, McKinsey & Company, last modified February 14, 2022, accessed September 4, 2023, <https://www.mckinsey.com/industries/healthcare/our-insights/the-dawn-of-the-femtech-revolution>.

<sup>60</sup> One Bee Consulting, "FemTech Association Asia," One Bee Consulting, accessed September 4, 2023, <https://www.onebeeconsulting.com/faa>.

be treated only once they are sick or showing symptoms, instead of getting care to prevent these illnesses in the first place.<sup>61</sup> Access to women's healthcare includes ensuring that the care they receive moves beyond just retroactive interventions and guarantees that women can receive necessary preventative healthcare. There needs to be changes in the ways that women's healthcare is viewed at large to ensure that there is no gender disparity in the level of care provided. A piece of improving women's healthcare and removing some of the gender disparity is making medical research more inclusive. Women must be included in clinical trials to ensure that there is proper data on how medication can affect women and how diseases might impact women.

Along with changes in clinical research, there is a need for doctors to be better taught about how diseases can appear differently in women, so that people can be better diagnosed. Potential solutions in this area might look like requiring medical courses to address the common differences in how diseases impact men and women, such as ensuring that every doctor knows how strokes and heart attacks might appear different in a woman than a man. These changes could also come about through offering better

education to existing doctors, and ensuring that as there is more research, doctors are required to learn more about the specificities of women's health. Educational programs could be done on an international level, but they could also partner with local organizations to ensure new information and practices can be done with cultural sensitivity and seamlessly added into already existing medical practices.

There also must be consideration about how to change narratives around women's healthcare to remove some of the stigma that exists. This stigma can add to greater shame around accessing care and lead to worse health outcomes, especially when it comes to menstrual and reproductive health. One way that some of this stigma can be dissipated could be through educational programs that work to teach women about the kinds of care they can get and make sure that they know that they are not alone in getting the kind of care they need.

## Bloc Positions

The world must move towards ensuring women have equal access to health resources, no disparities in quality of care, and no shame around reproductive health. There must be policies at the international, national, and local levels to ensure women are given access to everything that can help them lead their most healthy and fulfilled life. There are many ways that this issue can be dealt with. For example, delegates could choose to focus on a

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<sup>61</sup> Deeptha Khanna, "Women's Health: Why Is the Health of at Least Half the Global Population so Often Overlooked?," World Economic Forum, last modified January 2, 2023, accessed September 4, 2023, <https://www.weforum.org/agenda/2023/01/women-health-gap-davos-2023/>.

particular topic, whether it is period poverty, accurate clinical research, or maternal mortality, or delegates could organize their ideas by how widespread solutions are, whether solutions act on the international, national, or community scale. These are all helpful manners within which to address improving women's health.

#### *Blocs by Topic Focus*

Depending on what issues most impact a certain country, or what issues delegates feel most comfortable handling, blocs could be split by topic.

This could include a bloc that works mostly on menstrual health and period poverty. These countries might look at ways to increase access to menstrual products in areas that do not have them or improve sanitation in order to make periods more hygienic. Additionally, this bloc might look into ways to remove the stigma around periods to ensure that all women can live life without the negative mental health issues that can come with period poverty.

Another bloc might look into improving clinical research to ensure that both disease studies and clinical trials have an eye on how medical issues might differently impact women instead of men. These countries might consider whether there should be international standards for medical research, which would require medical testing to include people from

a range of demographics and accurately report on the findings. This bloc might also consider programs that go back to look at old medical findings and flag things that do not properly represent how illness can impact all genders.

A third group might look into maternal mortality. This bloc might examine ways to lower maternal mortality rates, whether it is through improving medical coverage, increasing the number of medical facilities or professionals, or providing better education to ensure that people are adequately cared for. These countries also might consider whether maternal mortality issues should be addressed through UN programs, national programs, or community based programs.

There are many ways in which women's healthcare can be bettered, and it is up to delegates to determine the best ways to organize their ideas.

## Glossary

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**Beijing Declaration and Platform for Action** - A 1995 resolution adopted by the UN that established a set of principles concerning the equality of men and women.

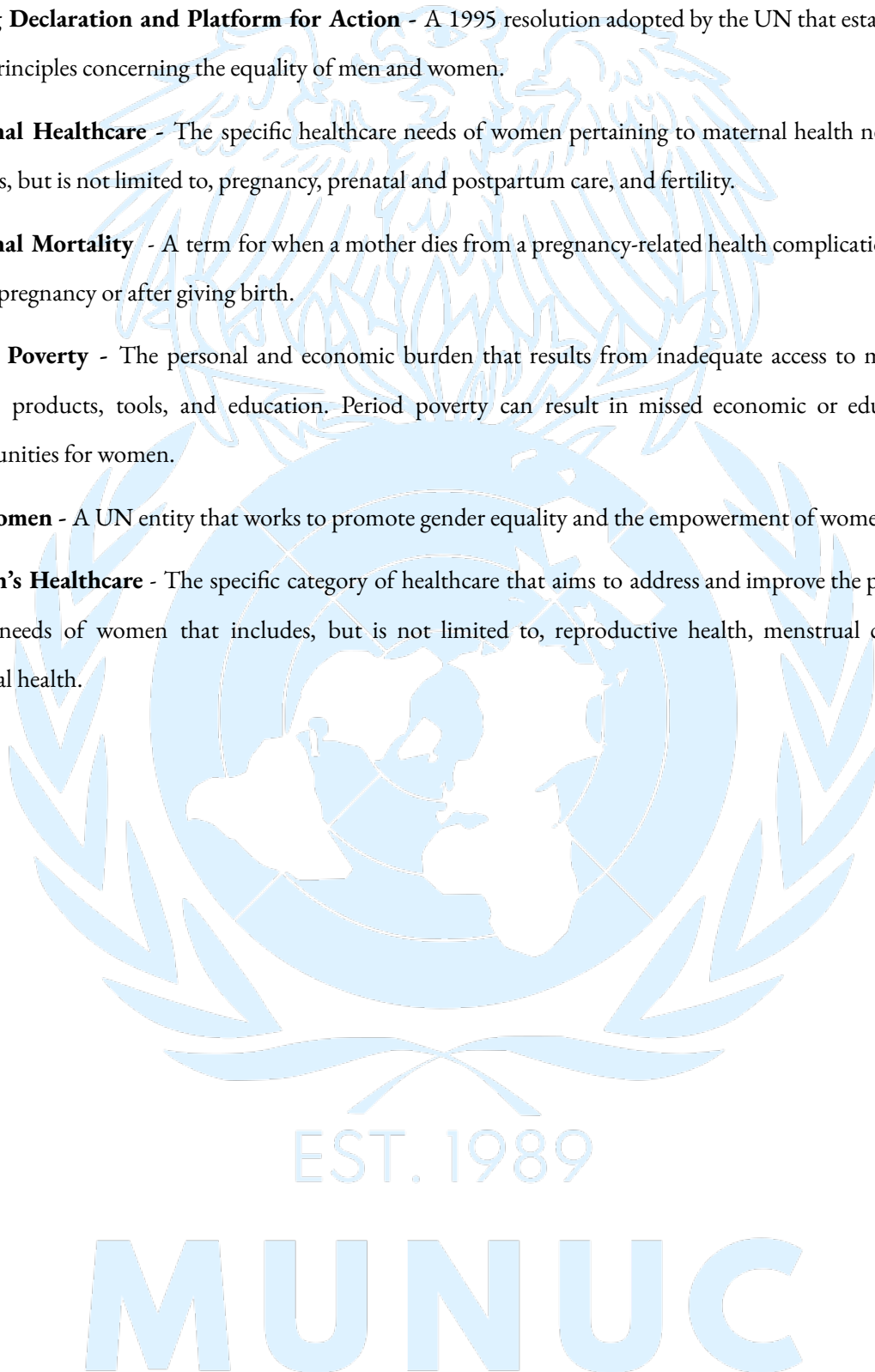
**Maternal Healthcare** - The specific healthcare needs of women pertaining to maternal health needs that includes, but is not limited to, pregnancy, prenatal and postpartum care, and fertility.

**Maternal Mortality** - A term for when a mother dies from a pregnancy-related health complication either during pregnancy or after giving birth.

**Period Poverty** - The personal and economic burden that results from inadequate access to menstrual hygiene products, tools, and education. Period poverty can result in missed economic or educational opportunities for women.

**UN Women** - A UN entity that works to promote gender equality and the empowerment of women.

**Women's Healthcare** - The specific category of healthcare that aims to address and improve the particular health needs of women that includes, but is not limited to, reproductive health, menstrual care, and maternal health.



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# MUNUC

## TOPIC B: MASS INCARCERATION

### Statement Of The Problem



*A cell block from the now defunct Alcatraz Federal Penitentiary, San Francisco.<sup>62</sup>*

**Punitive systems** are utilized by all countries worldwide. They are meant to house prisoners found guilty of crimes for a period of time and then be released after a sentence has been served. Prison systems are useful in creating a punishment system to de-incentivize crime and reform society. They are also meant to reform prisoners as well, creating an environment to rehabilitate and reintegrate prisoners into society. But problems arise when incarceration is used to solely incarcerate and not rehabilitate. As of 2021, 11.5 million people are imprisoned.

<sup>62</sup> Liew, Jakob. Alcatraz Cells. June 8, 2021. Image. Flickr.com.  
<https://www.flickr.com/photos/193155969@N08/51235128724/>.

worldwide and that number is currently rising.<sup>63</sup> To understand the problem of **mass incarceration**, delegates must evaluate its root causes, examine its effects on incarcerated individuals and develop solutions that work towards their **rehabilitation** and **reintegration** into society.

### Rising Incarceration Rates

Already high incarceration rates are rising worldwide. This is due to a multitude of reasons, some unique to each country and some that are not. Overall, rising incarceration rates are the result of changes in government policy and public opinion, such as minimum sentencing laws, “tough on crime” policies, or a public perception that crime is worsening.<sup>64</sup> Additionally, judiciary systems utilizing longer sentences and more restricted uses of parole or conditional release are

<sup>63</sup>World Prison Brief. “World Prison Brief | an Online Database Comprising Information on Prisons and the Use of Imprisonment around the World.” [www.prisonstudies.org](http://www.prisonstudies.org), n.d.  
<https://www.prisonstudies.org/#:~:text=The%20latest%20World%20Prison%20Population.>

<sup>64</sup>Missouri, Empower. “Tough on Crime, Tough on Children – Is Tough on Everyone.” Empower Missouri, August 14, 2020.  
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also a factor.<sup>65</sup> As of 2023, the current five countries with the highest incarceration rates per 100,000 of their national population are El Salvador (605), Rwanda (580), Turkmenistan (576), American Samoa (538), and Cuba (510).<sup>66</sup> In terms of countries with the highest total number of incarcerated individuals, China is estimated to have over 1.69 million incarcerated individuals with the United States close behind with over 1.67 million incarcerated.<sup>67</sup>

Despite government policymaking and harsher sentencing, incarceration does not automatically mean that crime rates will go down. Crime can still increase regardless of policies that call for more incarceration, longer sentences, etc. In El Salvador, for example, despite being the country with the highest number of incarcerated individuals per capita, the country also has the highest rate of homicides at 50 per 100,000

individuals.<sup>68</sup> Furthermore, the focus on incarceration rather than rehabilitation can cause recidivism rates to rise, which causes more people to return to prison and thus increasing the prison population. This serves to illustrate that prisons are not actually performing their function as correctional facilities to rehabilitate and reintegrate those incarcerated back into society. Rather, it is evident that the function of prisons has become punishment, rather than rehabilitation, and that prisons by and large fail to meaningfully reduce instances of crime.

### Lack Of Due Process And Fair Trials

Among the root causes of mass incarceration is the lack of **due process** and fair trials that incarcerated individuals frequently face. For example, several countries in the EU including Greece, Romania, Poland, and Bulgaria were criticized in 2011 for serial violations of individual's rights to liberty and a fair trial. In Romania specifically, detainees were not presumed innocent until proven guilty nor were they allowed to question the validity of the

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<sup>65</sup>Walmsley, Roy. "GLOBAL INCARCERATION and PRISON TRENDS," 2003. [https://www.unodc.org/pdf/crime/forum/forum3\\_Art3.pdf](https://www.unodc.org/pdf/crime/forum/forum3_Art3.pdf).

<sup>66</sup> Statista. "Ranking: Most Prisoners per Capita by Country 2023 | Statista." Statista, 2023. <https://www.statista.com/statistics/262962/countries-with-the-most-prisoners-per-100-000-inhabitants/>.

<sup>67</sup> Statista. "Countries with the Most Prisoners 2020." Statista, January 2023. <https://www.statista.com/statistics/262961/countries-with-the-most-prisoners/>.

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<sup>68</sup> Statista.. "Murders - Countries with Most Murder Cases." Statista, 2023. <https://www.statista.com/statistics/262963/ranking-the-20-countries-with-the-most-murders-per-100-000-inhabitants/>.

evidence presented against them.<sup>69</sup> In other instances, military courts, or standard courts in general, deny defendants legal counsel. In Somalia, civilians were tried in military courts, drawing criticism from Human Rights Watch, an international advocacy NGO, that the court proceedings fell short of international fair trial standards and urged the transfer of civilian cases to be tried by regular courts.<sup>70</sup> It is imperative that individuals who are detained do not have their rights to due process and a fair trial violated. This ensures that defendants are able to fight untrue allegations in court and to diminish the number of innocent people incarcerated within prisons.

## Prison Overcrowding



*An image of prison overcrowding at Bunia Prison, Democratic Republic of the Congo, 2012.<sup>71</sup> Bunia Prison, a facility originally built to house 200 inmates, held over 1000 at the time of this photo.*

With an increase in prison populations, another main problem in prisons is overcrowding. In 1990, the UN General Assembly adopted a resolution, titled “Basic Principles for the Treatment of Prisoners”, outlining general standards and best practices to ensure the fair treatment and protection of incarcerated individuals.<sup>72</sup> Clause 1 of the resolution states that “[a]ll prisoners shall be treated with the respect due to their inherent dignity and value as

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<sup>69</sup> The Guardian. “Human Rights Violations in EU Countries Double in Five Years.” the Guardian, October 10, 2012. <https://www.theguardian.com/law/2012/oct/10/human-rights-violations-european-union>.

<sup>70</sup> Human Rights Watch. “Somalia: Unfair Trials in Military Courts.” Human Rights Watch, May 21, 2014. <https://www.hrw.org/news/2014/05/21/somalia-unfair-trials-military-courts>.

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<sup>71</sup> Gluck, Caroline, and Oxfam East Africa. Inside Overcrowded Bunia Prison. June 12, 2012. Image. Flickr.com. <https://www.flickr.com/photos/oxfameastafrica/7364661192/>.

<sup>72</sup> United Nations. “Basic Principles for the Treatment of Prisoners.” OHCHR, 1990. <https://www.ohchr.org/en/instruments-mechanisms/instruments/basic-principles-treatment-prisoners#:~:text=All%20prisoners%20shall%20be%20treated>.

human beings.”<sup>73</sup> Overcrowding in prisons is a violation of this principle. Overcrowding causes a reduced staff-to-prisoner ratio, which can lead to problems such as lack of health care, deteriorating living spaces, inadequate nutrition and more.<sup>74</sup> In Brazil, overcrowding in many of the prisons, such as the Nelson Hungria Penitentiary of Minas Gerais, has led to cells made to house one inmate being used to hold two or more inmates, with some even being forced to sleep on the floors of cells. Additionally, the lack of sanitation and the physical deterioration of space raises an issue.<sup>75</sup> This is also happening in Rwanda, where the country only has capacity in its prisons for a maximum of 61,000 prisoners, but has around 76,000 incarcerated. In these prisons, the combination of overcrowding, poor sanitation, and inadequate facilities prevent rehabilitation of the incarcerated.<sup>76</sup>

### Case Study: El Salvador

In response to prison overcrowding, governments have elected to build more prisons rather than

address the root issues of mass incarceration. In El Salvador, President Nayib Bukele has pursued an all out war on violent crime and gang violence, leading to the construction of the Center for the Confinement of Terrorism, a mega-prison with a capacity to hold 40,000 inmates.<sup>77</sup> While many of those incarcerated are violent criminals and members of prominent international gangs such as MS-13 and Barrio 18, the response by the El Salvadoran government is troubling in that it aims to use prisons in order to make the gangs disappear, rather than work towards any form of rehabilitation. Furthermore, Bukele’s administration, with both public and legislative support, has pursued legislation that would allow for up to 900 individuals to be tried simultaneously if they are accused of being a part of the same criminal organization. This alarming use of “group trials” undermines the very notion of due process and a right to a fair trial as defendants are unable to defend themselves or question the evidence brought against them in these mass trials.<sup>78</sup>

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<sup>73</sup> Ibid.

<sup>74</sup> Human Rights Watch. “HRW: Behind Bars in Brazil (Physical Conditions).” [www.hrw.org](http://www.hrw.org), n.d. <https://www.hrw.org/legacy/reports98/brazil/Brazil-06.htm>.

<sup>75</sup> Ibid.

<sup>76</sup> Thorpe, Emma. “Raphael Rowe Foundation.” [www.raphaelrowefoundation.org](http://www.raphaelrowefoundation.org), May 29, 2022. <https://www.raphaelrowefoundation.org/latest-news/prison-populations-and-overcrowding-the-united-kingdom-and-rwanda#:~:text=After%20the%20tragedy%20that%20was>.

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<sup>77</sup> BBC News. “Thousands of Tattooed Inmates Pictured in El Salvador Mega-Prison.” BBC News, February 25, 2023, sec. Latin America & Caribbean. <https://www.bbc.com/news/world-latin-america-64770716>.

<sup>78</sup> Taylor, Luke. “El Salvador Clears Way for Mass Trials as Crackdown on Gangs Ramps Up.” *The Guardian*, July 27, 2023, sec. World news. <https://www.theguardian.com/world/2023/jul/27/el-salvador-nayib-bukele-gangs-mass-trials>.



Beyond the disregard for international standards of fair trials and treatment, the incarceration efforts of Bukele's administration have drawn criticism from international human rights organizations that many innocent individuals unaffiliated with the gangs or crime have also been wrongly imprisoned as a result of the El Salvadoran war on crime.<sup>79</sup> Furthermore, it has been alleged that a number of innocent foreign visitors to El Salvador have also been wrongly imprisoned for simply having tattoos and being in poor neighborhoods.<sup>80</sup>

While an extreme example, the case of El Salvador reveals that mass incarceration is frequently the result of government policy aiming to reduce crime. But as previously discussed, despite El Salvador's crackdown on crime and use of mass incarceration, violent crime such as homicide continues to occur frequently, underscoring the need for solutions that address the root causes of crime, rather than indiscriminate incarceration. Additionally, El Salvador's recidivism rate of 60% further illustrates that mass incarceration is not the solution to curbing crime, but may in fact serve to further a cycle in which inmates that have not been rehabilitated leave prison only to return once again after committing another crime.<sup>81</sup>

Delegates should take care to note from this example that while there are certainly violent criminals who should be incarcerated for their crimes, the sole end of incarceration must not be to punish and degrade inmates indiscriminately. Furthermore, delegates should also note that mass incarceration often accompanies suspension or modification of the rule of law, as has been seen with President Bukele's administration, in order to crackdown on crime that frequently results in individuals going without a fair trial and the imprisonment of innocent individuals.

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<sup>79</sup> BBC News. "Thousands of Tattooed Inmates Pictured in El Salvador Mega-Prison."

<sup>80</sup> Taylor, "El Salvador Clears Way for Mass Trials as Crackdown on Gangs Ramps Up."

<sup>81</sup> Almanzar, Santiago, Craig L. Katz, and Bruce Harry. "Treatment of Mentally Ill Offenders in

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Nine Developing Latin American Countries." Journal of the American Academy of Psychiatry and the Law Online 43, no. 3 (September 1, 2015): 340–49.

<https://jaapl.org/content/43/3/340/tab-figures-data>

## Effects On The Families Of Prisoners



*A photo of prisoners receive trade skills training as part of a UN mission to provide prisoners with livelihood skills to support their reintegration post-incarceration, Sudan, 2016.<sup>82</sup>*

Another effect of mass incarceration is the lack of emphasis on re-entry and the people left behind. When adults are imprisoned, families and communities lose a caregiver, a financial provider, and/or an emotional partner. Unincarcerated parents have to reckon with deciding if they want to bring their children into prison spaces to keep in contact with their incarcerated ones.<sup>83</sup> Some do not want to bring their children to those

environments, so there is a loss of connections with their own children.<sup>84</sup>

Once released from prison, families are forced to contend with the challenges that come with re-entry and readjustment of former prisoners within the family unit and the community. Whether that be with finding employment, reconnecting with a community or family they have been apart from, or dealing with the stigma of entering society as a former prisoner.<sup>85</sup> A report from the Brookings Institution notes that, in the US, because formerly incarcerated are frequently unable to find work within their first year of return post incarceration due to stigma and a lack of reintegration support, that nearly three in four return to prison in just three years of being released.<sup>86</sup>

It is especially important that delegates take care to note that more often than not, it is a lack of support and tools to properly reintegrate that causes individuals to become reincarcerated after their release to prison. Solutions that ensure that incarcerated individuals have the proper support necessary to reintegrate into society should rank as a top priority in order to prevent recidivism

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<sup>82</sup> Mohammed, Salah, and UNAMID. UNAMID Supports Skills Training for Prisoners at Shallah Federal Prison, North Darfur. October 12, 2016. Image. Flickr.com. <https://www.flickr.com/photos/unamid-photo/29645854054/>.

<sup>83</sup> Comfort, Megan, Tasseli McKay, Justin Landwehr, Erin Kennedy, Christine Lindquist, and Anupa Bir. "The Costs of Incarceration for Families of Prisoners." *International Review of the Red Cross* 98, no. 903 (December 2016): 783–98. <https://doi.org/10.1017/s1816383117000704>.

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<sup>84</sup> Ibid.

<sup>85</sup> Goger, Annelies, David Harding, and Howard Henderson. "A Better Path Forward for Criminal Justice: Prisoner Reentry." Brookings, April 2021. <https://www.brookings.edu/articles/a-better-path-forward-for-criminal-justice-prisoner-reentry/>.

<sup>86</sup> Ibid.

and ensure that individuals are able to rejoin their communities post incarceration.

## Origins Of Punishment And Retributive Justice

### History Of The Problem

Mass incarceration is not only a western issue, but represents a broader problem with prison and justice systems around the globe. Throughout the world, increases in incarceration and the problems that come with it have been prevalent issues in many countries. To better understand the problem, we need to look back at the history of punishment and crime to see how we got to the modern form of prisons we see today.

While present day prisons are used for the stated purpose of punishing individuals who have committed crimes by removing them from society for a fixed period of time, prisons have not always been used for this purpose. It is important to understand the development of punitive systems and prisons from their historical origins to their modern uses in order to develop solutions to the problem of mass incarceration.



*A relief depicting King Hammurabi standing before Shamash, the Babylonian god of justice. Inscribed below are the 4,130 lines of cuneiform text that comprise the Code of Hammurabi.<sup>87</sup>*

Incarceration wasn't an initial source of punishment in most early societies. Rather, **retributive justice** was more frequently employed as a means of punishing those who committed crimes.<sup>88</sup> An example would be the "Code of Hammurabi," a legal text authored by the Babylonian King Hammurabi who ruled Babylon from roughly 1792 - 1750 BCE.<sup>89</sup>

<sup>87</sup> Romero, Fred, and Louvre Museum. *Code of Hammurabi (Louvre Sb 8)*. n.d. Image. *Wikimedia Commons*.

[https://commons.wikimedia.org/wiki/File:Code\\_of\\_Hammurabi\\_%28Louvre\\_Sb\\_8%29-31434550325.jpg](https://commons.wikimedia.org/wiki/File:Code_of_Hammurabi_%28Louvre_Sb_8%29-31434550325.jpg).

<sup>88</sup> Meyer, Jon'a F. "Retributive Justice | Penology." In *Encyclopedia Britannica*, September 12, 2014. <https://www.britannica.com/topic/retributive-justice>.

<sup>89</sup> Volo Museum. "History of Crime & Punishment | How Criminology Has Evolved." *www.volocars.com*, April 8, 2020. <https://www.volocars.com/blog/history-of-crime-and-punishment>.

The Code of Hammurabi established fixed punishments dependent on the crime committed. An offender's punishment would be determined by age, gender, status, and other characteristics, adjusting the punishment so that the offender would receive the same pain felt by the victim of the offender's crime.<sup>90</sup> In less serious instances, this might mean a rich man found guilty of stealing would be forced to pay a heftier fine than a slave. For more violent or extreme crimes, mutilation of limbs or even death would be utilized as punishment.<sup>91</sup> The Code of Hammurabi, and other systems of retributive justice, follow a principle of "eye for an eye" which aims to make the punishment an offender receives fit the crime that they committed.

## Early Prisons



*A photo of Mamertine prison in Rome.*<sup>92</sup>

The earliest known prisons were markedly different from the prisons of today. The first evidence of prisons dates back to 1000 BCE in

<sup>90</sup> Ibid.

<sup>91</sup> Ibid.

<sup>92</sup> Wikimedia Commons. Mamertine Prison. March 22, 2009. Image. *Wikimedia Commons*. [https://commons.wikimedia.org/wiki/File:Mamertine\\_Prison.jpg](https://commons.wikimedia.org/wiki/File:Mamertine_Prison.jpg).

Egypt and Mesopotamia.<sup>93</sup> These were generally dungeons that kept prisoners before they were sentenced to enslavement or death. The Greeks and Romans were known to engage in this practice as well, and their prisons were not known for being humane or rehabilitative.

In Roman prisons, prison terms weren't long, as prisons were typically used for holding an individual condemned to death by execution.<sup>94</sup> This was deemed to be more merciful than inhumanly long prison sentences. A particularly famous example of a Roman prison can be found in the Mamertine prison, a poorly ventilated underground structure that served as an execution and incarceration site.<sup>95</sup> Mamertine prison was in use from its construction in 7th century BCE until as late as 4th century CE and serves as a particularly gruesome example of an ancient Roman prison.

<sup>93</sup> Reid, J. Nicholas, and The Conversation. "The Idea That Imprisonment 'Corrects' Prisoners Stretches back to Some of the Earliest Texts in History." *phys.org*, August 23, 2023. <https://phys.org/news/2023-08-idea-imprisonment-prisoners-earliest-texts.html>.

<sup>94</sup> UNRV. "Roman Prisons | UNRV Roman History." *www.unrv.com*. <https://www.unrv.com/government/roman-prisons.php#:~:text=Actual%20prisons%20in%20Rome%20truly>.

<sup>95</sup> Esparza, Daniel. "Being a Prisoner in Ancient Rome." *Aleteia — Catholic Spirituality, Lifestyle, World News, and Culture*, September 13, 2022. <https://aleteia.org/2022/09/13/being-a-prisoner-in-ancient-rome/>.

## Medieval Prisons



*The Tower of London served as a prison throughout the medieval era into the 20th century.<sup>96</sup>*

The medieval era saw the development of larger scale and more complex prison infrastructure. It was during this time that prison sentences would come to be used more and more as an instrument of punishment, though prisons would also continue to be used to hold individuals condemned to be executed as well.

A particularly famous example of a medieval era prison is the Tower of London in England. While constructed in the 11th century as a fortress and symbol of royal power, the Tower of London became infamous for its use as a prison and execution ground for individuals deemed to be a threat to national security.<sup>97</sup> Conditions for

prisoners at the Tower varied wildly, with some influential inmates such as captive kings, living in luxury with servants and deprived only of their liberty to leave. Other prisoners, such as those accused of counterfeiting coins or plotting against the monarchy suffered far more severe punishments and even death.<sup>98</sup> The Tower would remain in use, at least partially, until the final execution was carried out on its grounds in 1941 during World War II in which a spy was executed on accusations that he was spying on behalf of Nazi Germany.<sup>99</sup>

Also in England, the 14th century saw the emergence of “debtor’s prisons,” which were created to hold individuals who were unable to pay their debts.<sup>100</sup> Debtor’s prisons were meant to hold debtors until they could afford to pay their debts, but in practice, many were imprisoned indefinitely with no way of earning enough money to be able to leave the debtor’s prison.<sup>101</sup>

The example of the Tower of London and debtor’s prisons illustrates a longstanding issue with incarceration: unequal treatment between individuals of different levels of wealth and status. In the case of both the Tower and debtor’s

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<sup>96</sup> Meyer, Frerk. The White Tower, the Tower of London. May 29, 2018. Image. *Flickr.com*. <https://www.worldhistory.org/image/8826/the-white-tower-the-tower-of-london/>.

<sup>97</sup> Historic Royal Places. “The Tower of London Prison.” Historic Royal Palaces. Accessed September 7, 2023. <https://www.hrp.org.uk/tower-of-london/history-and-stories/tower-of-london-prison/#gs.5dqn5>.

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<sup>98</sup> Ibid.

<sup>99</sup> Ibid.

<sup>100</sup> Wood, Andy. “In Debt and Incarcerated: The Tyranny of Debtors’ Prisons.” *Thegazette.co.uk*, 2016. <https://www.thegazette.co.uk/all-notices/content/100938>.

<sup>101</sup> Ibid.

prisons, well connected or influential individuals, or those with family and friends to support them, were afforded more privileges, luxuries, and granted opportunities to earn money to pay off their debts.<sup>102</sup> But those of lower status or without resources to earn their way out could be stuck in prison for life.

While these examples of medieval prisons are now a thing of the past, it is important to understand that, in the modern context of incarceration, it is a lack of resources and support that results in individuals becoming incarcerated and remaining in prison. Delegates should note that without proper support to aid in rehabilitating and reintegrating incarcerated individuals in society, the issue of mass incarceration cannot be solved.

## Modern Day Prisons



*A cellblock at Eastern State Penitentiary, Pennsylvania.*<sup>103</sup>

Among what is considered to be the first of modern prisons is the Eastern State Penitentiary in Pennsylvania. Constructed in the early 19th century, Eastern State Penitentiary was built as public perceptions of prisons and their function within society began to evolve.<sup>104</sup> Eastern State was constructed in response to the inhuman conditions of Walnut Street Jail where prisoners were thrown together into large pens regardless of their age, crime, or gender. This sparked a prison reform movement in Pennsylvania with US Founding Father Benjamin Franklin as one of its champions that would prioritize discipline and rehabilitation over indiscriminate punishment.<sup>105</sup>

With the opening of the Eastern State, we see the origins of the modern prison system in the development of the “Pennsylvania System” correctional theory.<sup>106</sup> Rather than emphasizing

<sup>103</sup> Jones, Adam. *Eastern State Penitentiary - Philadelphia - Pennsylvania* -. March 27, 2011.

Image. Wikimedia Commons.

[https://commons.wikimedia.org/wiki/File:Eastern\\_State\\_Penitentiary\\_-\\_Philadelphia\\_-\\_Pennsylvania\\_-\\_11.jpg](https://commons.wikimedia.org/wiki/File:Eastern_State_Penitentiary_-_Philadelphia_-_Pennsylvania_-_11.jpg).

<sup>104</sup> Eastern State. “Timeline.” Easternstate.org, 2014. <https://www.easternstate.org/research/history-eastern-state/timeline>.

<sup>105</sup> Sterbenz, Christina. “The Modern Prison System Was Created in Benjamin Franklin’s Living Room.” Business Insider, April 19, 2015.

<https://www.businessinsider.com/the-worlds-first-prison-was-created-in-benjamin-franklins-living-room-2015-3>.

<sup>106</sup> Eastern State. “Timeline.”

<sup>102</sup> Ibid.

gruesome punishments as did systems of retributive justice in the past, the Pennsylvania System emphasized solitary confinement and labor as a means of rehabilitation. The idea underpinning this system being that solitude would make an individual convicted of a crime regretful of their actions and hopefully lead to their rehabilitation.<sup>107</sup> Thus, Eastern State marks a departure from past systems of retributive justice for a decidedly more modern system of incarceration where prison sentences are used to discipline those convicted of a crime.

### Case Study: Kenya

In the present day, many countries, particularly former colonies, have penal systems that are rooted in a history of settler colonization. A stark example of this can be seen in the case of Kenya. Pre-colonial punishments in Kenya reserved corporal and capital punishments exclusively for the most severe crimes. Punishment for petty offenses came in the form of community ostracization or expulsions. It is also worth noting that pre-colonial Kenya had no prisons.

When British settlers arrived in 1895, they began to institute their own systems of incarceration and justice that superseded the pre-colonial system of punishment. Under the guise of a “law and order” sentiment, the British settlers would transform Kenya’s justice system from one that had no prisons at all, to one that had 30 prisons

within just 15 years of the settlers’ arrival. The settlers frequently jailed Kenyan natives for arbitrary offense, or even no offense at all.<sup>108</sup> Furthermore, the imprisoned were not allowed any opportunity to pursue an alternative to imprisonment such as paying a fine. At the same time, the colonial prisons became a source of free labor for the British settlers, who forced incarcerated Kenyan natives to work on agriculture and public works projects for the benefit of the settlers.<sup>109</sup>

The brutalities of the colonial era incarceration system would persist in Kenya even as Kenya gained independence from the United Kingdom in 1963.<sup>110</sup> Kenya’s penal system was seemingly altered fundamentally and irreparably by colonial rule as brutal punishments would continue to be meted out for decades to follow. It wasn’t until the early 2000’s when Kenya began to see a wave of prison reform that focused on prisoner education and that ultimately saw the death penalty commuted to life imprisonment for

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<sup>108</sup>Gathara, Patrick. “Settler Colonialism Is the Root of Kenya’s Brutal Penal System.” *Progressive International*, October 22, 2020.

<https://progressive.international/wire/2020-10-22-settler-colonialism-is-the-root-of-kenyas-brutal-penal-system/en>.

<sup>109</sup> Ibid.

<sup>110</sup> Britannica. “Kenya - World War II to Independence.” In *Encyclopedia Britannica*, 2019. <https://www.britannica.com/place/Kenya/World-War-II-to-independence>.

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<sup>107</sup> Ibid.

capital offenders.<sup>111</sup> While there is still much work to be done, Kenya serves as an important example of how penal systems can begin to be improved.

Delegates should note that at nearly the exact same time as efforts towards incarceration as a method of rehabilitation were taking place at the Eastern State Penitentiary in Pennsylvania, incarceration was also being used as brutal and arbitrary means of oppression by the British settlers in Kenya. Developing solutions to the problem of mass incarceration demands the consideration of the diverse histories and implementations of incarceration throughout the world to ensure that reforms are equitable, fair, and just.

### Case Study: The Gulag System

Prisons have been used as a tool of political oppression by many governments and regimes. A notable example is the Soviet Union's Gulag, which operated from the 1920s to the mid-1950s. It was a system of Soviet labor camps that housed criminals and the political prisoners of the Soviet Union. It is estimated that anywhere from 1.2 million to 1.7 million people died in the Gulags through starvation, execution, and brutal conditions. The Gulag system serves as one of many examples of how prisons can be used as

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<sup>111</sup>Kiernan, Stephanie Busari, Ed. "How Kenya Replaced the 'Baton with the Pen' and Transformed Prisoners' Lives." CNN, August 10, 2018. <https://www.cnn.com/2018/08/10/africa/kenya-prison-reforms-peter-ouko/index.html>.

tools of political repression and to commit human rights abuses.

Similarly, Turkmenistan, a former Soviet country, serves as a present day example of a Gulag inspired prison system. The Turkmen government uses lengthy prison sentences to suppress political opponents. Additionally, incarcerated individuals disappear in the prison system often and torture is very common.<sup>112</sup> This lack of transparency and widespread torture serves to demonstrate how Turkmenistan's prison system is reminiscent of the Gulag. According to Human Rights Watch, an estimated 162 people have disappeared in Turkmen prisons whose sentences expired in 2022.<sup>113</sup> 27 people have died in solitary confinement and the whereabouts of three dozen more are unknown.<sup>114</sup> The example of the Soviet Union's Gulag system and the present day Turkmen system illustrates how incarceration can be used as a systematic repressive tool for governments.

### Case Study: Thailand

With increasing incarceration rates due to stricter incarceration policies, an emerging problem is what happens when these prisoners finish their sentences? Furthermore, what happens to these

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<sup>112</sup> Human Rights Watch "Turkmenistan: Events of 2022." Human Rights Watch, January 12, 2023. <https://www.hrw.org/world-report/2023/country-chapters/turkmenistan>.

<sup>113</sup> Ibid.

<sup>114</sup> Ibid.



communities that see a larger number of people incarcerated as well?

Thailand has one of the highest incarceration rates in Asia due to harsher tough-on-crime policies especially when it comes to drug offenses. Out of all inmates, 72% are being held for drug-related offenses.<sup>115</sup> Thailand also has one of the highest female incarceration rates in the world. We can look at Thailand to also analyze reintegration. With female ex-prisoners, reintegration is a long and hard process. There are many factors that contribute to difficulty reintegrating such as trauma, addiction and mental health, limited education, poverty, and familial caretaking responsibilities. While men deal with this as well, problems with the experience of women are often overlooked, understudied, and not talked about. A 2020 criminology study of Thai prisons found that there was a strong correlation between poor accommodation and negative outcomes with many of the women who were released from a Thai prison.<sup>116</sup> Women who did not have a strong support system were more likely to return to prison.<sup>117</sup>

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<sup>115</sup>Jeffries, Samantha, Chontit Chuenurah, and Tristan Russell. "Expectations and Experiences of Women Imprisoned for Drug Offending and Returning to Communities in Thailand: Understanding Women's Pathways Into, Through, and Post-Imprisonment." *Laws* 9, no. 2 (June 22, 2020): 15. <https://doi.org/10.3390/laws9020015>.

<sup>116</sup> Ibid.

<sup>117</sup> Ibid.

The example of Thai prisons serves to reemphasize the importance of providing proper support and tools to allow former prisoners to reintegrate back into society post incarceration. Without strong support, it is likely that released prisoners will return and continue the cycle of incarceration.

### **Why Is Mass Incarceration Increasing?**

Today, there are questions about why prison rates are increasing around the world. The answer is a multitude of reasons. For some countries, such as El Salvador, it is an increase in "tough on crime" policy making to address gang violence. For others, such as Thailand or the United States, it is the result of a prolonged war on drugs that contributes to the high rate of incarceration. Each country has its own unique systematic reasons for its incarceration system that delegates should remain mindful of as they develop solutions to address the problem of mass incarceration.

### **Past Actions**

What follows is a non-exhaustive list of previous international actions to address the problem of mass incarceration. Delegates should take note of where previous actions have been successful, but also of where they may have fallen short or where there is further room for improvement in order to develop comprehensive solutions to the problem.

## UN Standard Minimum Rules For The Treatment Of Prisoners

In 1995, the United Nations Standard Minimum Rules for the Treatment of Prisoners was issued during the UN Congress on the Prevention of Crime and the Treatment of Offenders held in Geneva, Switzerland. This was UN action to help shape and change the way prisoners could be treated by prison systems globally. In 2015, it was revised by the UN and renamed to the **Nelson Mandela Rules** to reflect international developments in human rights and criminal justice since their initial adoption. Broadly speaking, these 122 rules establish the minimum standards of prison management, treatment, and facilities.<sup>118</sup> Among other requirements, the Nelson Mandela Rules provide for the basic dignity of prisoners, prohibit torture or ill-treatment, and affirm the purpose of prisons as sites of rehabilitation and reform, rather than instruments of punishment.

## UN Bangkok Rules Of Women Offenders And Prisoners

Additionally, in December of 2010, the United Nations Bangkok Rules of Women Offenders and Prisoners was issued to supplement the Nelson Mandela Rules. Women make up 6.9% of

prisoners globally<sup>119</sup> and they often fall through the cracks in the discourse surrounding prison reform discussions. These rules protect female prisoners who are awaiting trial, those serving prison sentences following a conviction, and those in a state's "protective custody." Additionally, it creates rules for non-custodial sentences and children of imprisoned parents accompany their parents to prison.<sup>120</sup> With the parental aspect, the Bangkok Rules also offer support for male prisoners and offenders. The UN Bangkok Rules were initiated by Thailand and Her Royal Highness, Princess Bajrakitiyabha of Thailand.

## UN Handbook Of Basic Principles And Promising Practices On Alternatives To Imprisonment

The UN also published the "Handbook of Basic Principles and Promising Practices on Alternatives to Imprisonment."<sup>121</sup> While it illustrates alternatives to conventional

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<sup>119</sup>Fair, Helen, and Roy Walmsley. "World Female Imprisonment List Fifth Edition Women and Girls in Penal Institutions, Including Pre-Trial Detainees/Remand Prisoners," 2022. [https://www.prisonstudies.org/sites/default/files/resources/downloads/world\\_female\\_imprisonment\\_list\\_5th\\_edition.pdf](https://www.prisonstudies.org/sites/default/files/resources/downloads/world_female_imprisonment_list_5th_edition.pdf)

<sup>120</sup> Ibid.

<sup>121</sup> United Nations Office on Drugs and Crime. "Handbook of Basic Principles and Promising Practices on Alternatives to Imprisonment CRIMINAL JUSTICE HANDBOOK SERIES," 2007. [https://www.unodc.org/pdf/criminal\\_justice/Handbook\\_of\\_Basic\\_Principles\\_and\\_Promising\\_Practices\\_on\\_Alternatives\\_to\\_Imprisonment.pdf](https://www.unodc.org/pdf/criminal_justice/Handbook_of_Basic_Principles_and_Promising_Practices_on_Alternatives_to_Imprisonment.pdf).

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<sup>118</sup> Penal Reform International. "UN Nelson Mandela Rules." Penal Reform International, n.d. <https://www.penalreform.org/issues/prison-conditions/standard-minimum-rules/>.

imprisonment, it still creates a punishment for crimes committed. Alternatives to imprisonment, such as community service orders, suspended sentencing, house arrest, and judicial supervision, can help prevent overcrowding in prisons and save governments money.<sup>122</sup> Various alternatives to imprisonment may also be combined in a manner deemed fit by a court to be applied to varying individual circumstances and the specific crime committed. Another reason why alternatives to imprisonment can be beneficial is it helps promote rehabilitation and reintegration for minor crimes and prevents over-policing of vulnerable populations. The Handbook works to address root problems of crime through restorative justice initiatives and ensures public safety.<sup>123</sup>

### UN System Common Position On Incarceration

In 2021, the UN released the “United Nations System Common Position on Incarceration,” which illustrates the collective stance of UN member states on various critical areas of imprisonment. It touches on issues ranging from the rampant overuse of pretrial detention and imprisonment to instances of neglect and abuse. The document also underscores a shared commitment to fostering more humane, just, and effective approaches to criminal justice. The

document takes into consideration the profound effect of COVID-19 on modern prison systems.

Adopting a common position allows for transparency and accountability in modern policy surrounding global prison systems.<sup>124</sup>

## Possible Solutions

### Banning Privatization

In 2021, President Biden of the United States signed an Executive Order against the use of private prisons.<sup>125</sup> The aim was to decrease incarceration levels by reducing profit-based incentives. It has limited the practice of private prisons in the US, however, as it is an executive order and not codified in American law, it has a risk of being overturned. This also echoes the Israeli Supreme Court’s decision in 2009 to ban a law to ban the authorization of the country’s potential first private prison. The court stated, “[t]he very existence of a prison that operates on a profit-making basis reflects a lack of respect for the status of (prisoners) as human beings.”

Although privatization was expected to save Israel

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<sup>124</sup> United Nations “United Nations System Common Position on Incarceration,” 2021. [https://www.unodc.org/res/justice-and-prison-reform/nelsonmandelarules-GoF/UN\\_System\\_Common\\_Position\\_on\\_Incarceration.pdf](https://www.unodc.org/res/justice-and-prison-reform/nelsonmandelarules-GoF/UN_System_Common_Position_on_Incarceration.pdf).

<sup>125</sup> Eisen, Lauren-Brooke. “Breaking down Biden’s Order to Eliminate DOJ Private Prison Contracts | Brennan Center for Justice.” [www.brennancenter.org](http://www.brennancenter.org), August 27, 2021. <https://www.brennancenter.org/our-work/research-reports/breaking-down-bidens-order-eliminate-doj-private-prison-contracts>.

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<sup>122</sup> Ibid.

<sup>123</sup> Ibid.

20-25% of operation costs, the lack of respect for the prisoners as human beings that come with privatization is of great concern.<sup>126</sup> In developing solutions, delegates should consider the ramifications of a company having a profit incentive for running a prison on human lives as well as focusing on efforts to prevent further privatization of prisons.

### **Rehabilitation, Restorative Justice, And Reintegration**

Norway has moved to a rehabilitation approach to its prison system. Embracing the notion that every inmate possesses the potential for change. Norwegian prisons have discarded the conventional harsh prison system in favor of individualized spaces, more activity, and programs designed to help with reintegration into society.<sup>127</sup> While it has been more expensive, Norway has seen a 20% reduction in re-offenders and has also allowed Norway to maintain a low

crime rate of 54 per 100,000 people.<sup>128</sup> Additionally, Norway's prisons require 2-3 years of training for its prison officers to continue its mission of release and rehabilitation. Officers serve as mentors, guides, and sources of inspiration with the prisoners' journeys. By prioritizing rehabilitation over retribution, fostering a sense of agency and purpose, and ensuring that every incarcerated person receives the support needed for societal reintegration, Norway has contributed to the transformation of lives, communities, and the criminal justice landscape.<sup>129</sup>

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<sup>126</sup> Prison Legal News. "Israeli Supreme Court: Private Prisons Violate Human Dignity | Prison Legal News." [www.prisonlegalnews.org](http://www.prisonlegalnews.org), March 15, 2013.

<https://www.prisonlegalnews.org/news/2013/mar/15/israeli-supreme-court-private-prisons-violate-human-dignity/>.

<sup>127</sup> Broomfield, Matt. "Norway Can Now Sentence Drug Addicts to Treatment rather than Prison." *The Independent*, February 18, 2016. <https://www.independent.co.uk/news/world/europe/norway-now-able-to-sentence-drug-addicts-to-treatment-rather-than-prison-a6873251.html>.

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<sup>128</sup> World Prison Brief. "Norway | World Prison Brief." [Prisonstudies.org](http://Prisonstudies.org), 2018. <https://www.prisonstudies.org/country/norway>.

<sup>129</sup> Six Norwegian Prisons. "Six Norwegian Prisons - Rehabilitation." [www.sixnorwegianprisons.com](http://www.sixnorwegianprisons.com), n.d. <https://www.sixnorwegianprisons.com/spaces/rehabilitation#:~:text=Rehabilitation%20is%20one%20main%20aim>.



*A photo of Halden Prison, one of Norway's modern prisons that emphasize rehabilitation and reintegration.<sup>130</sup>*

With rehabilitation approaches, there are also **restorative justice** initiatives to improve the quality of life for not only the prisoners, but the families, communities, and victims of the incarcerated. Restorative justice plays a pivotal role in the process of seamlessly reintegrating individuals into their communities after incarceration. Unlike conventional punitive measures, it fosters an environment where offenders confront the consequences of their actions and work towards making amends. Common restorative justice programs include face-to-face discussions between the offender and their victim, family, and/or community. While it's not a solution that can be used for all situations, individuals who have experienced restorative justice recall receiving closure, an increased sense

of safety, and the potential to restore relationships and aid in reintegration.<sup>131</sup>

## Family And Community Support

The focus on the community when considering the effects of incarceration should also be a priority. There are many people left behind when an individual is sentenced to serve time in prison, like children and spouses. An American organization, Project Avary, works to aid children with incarcerated parents. First starting as a summer camp two decades ago, it hopes to give support and end the painful cycle of incarceration. Children with incarcerated parents lose support systems and have the potential to be at risk of adverse childhood experiences, so Project Avary hopes to give them mentorship to help give them the best shot at life.<sup>132</sup> Creating community programs such as Project Avary is another approach to addressing the problem of mass incarceration. Delegates should take care to note that the indirect effects of incarceration don't just affect the incarcerated. Focusing on the community affected by incarceration could also prevent crime and create a safer society.

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<sup>130</sup> Norway Ministry of Justice. Interior in Halden Prison. June 26, 2010. Image. Wikimedia Commons.

[https://commons.wikimedia.org/wiki/File:Interior\\_in\\_Halden\\_prison.jpg](https://commons.wikimedia.org/wiki/File:Interior_in_Halden_prison.jpg).

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<sup>131</sup>General, Ministry of Public Safety and Solicitor, and Justice Privacy. "Understanding Criminal Justice - Province of British Columbia." [www2.gov.bc.ca](http://www2.gov.bc.ca), n.d. <https://www2.gov.bc.ca/gov/content/justice/criminal-justice/bcs-criminal-justice-system/understanding-criminal-justice>.

<sup>132</sup>Project Avary. "Who We Are." Project Avary, n.d. <https://www.projectavary.org/whoweare>.

## Changing Systems

Trying to mitigate the effects of mass incarceration on communities all over the globe is a multifaceted issue. As seen in the discussion of some of the previous potential solutions, a main priority is shifting from a punitive system to a rehabilitative one, while continually monitoring the impact of policy around reform. Delegates must recognize that this is a demanding task that requires action at both the international and state level to promote a shift away from old methods of punishment and incarceration. While focusing on the humanity of the prison systems, reintegration programs should be utilized to reduce reoffenders, promote rehabilitation and reintegration, and to better strengthen society with respect to victims and the incarcerated.

## Bloc Positions

While each country has its unique challenges and characteristics around the problem of mass incarceration, coming together with other countries based on their prioritizations will be a great way to build blocs. Picking the solution plan that would best benefit the countries involved is a great way to build solutions and build collaboration with other delegations. While delegates are encouraged to draw upon their country's history and policy as they pertain to the problem, it should be noted that creating new and comprehensive solutions to the problem of

mass incarceration are the top priority of this committee. When coming up with solutions, delegates are highly encouraged to think beyond what has already been done and explore the impact that each possible action will have on society, prisons, and the global stage as a whole.

## Rehabilitation Of Prisoners

One way to look at solutions is to focus on rehabilitation. Understanding how current punishment systems work and their weaknesses will be a good basis for figuring out how to transform prisons based on rehabilitation. Solutions could include investigating prisons to ensure that practices are in line with UN protocols and implementing programs that focus on the mental rehabilitation of prisoners. With this topic, focus on the reintegration of prisoners to lower re-offenses is key.

## Decriminalization And Alternatives To Incarceration

Another way to tackle the problem is to decriminalize crimes from the get-go. This bloc could look at implementing alternatives to imprisonment for crimes that the UN has laid out. Also, working with NGOs and government agencies to decriminalize drug offenses and lower the sentence maximums for non-violent crimes. Problems with mass incarceration include the overcrowding of prisons, by figuring out alternative ways to punish that don't strain prison systems while also still obtaining order in society.

Root causes around why people commit crimes should also be studied to see how crime and arrests could be prevented.

### **Community Support**

A third bloc could look at the community's role in lowering offenders. By creating after-school programs for at-risk youth, re-investing in

communities affected by mass incarceration, and/or allowing for the community to be involved with reintegration and prison reform programs, multiple solutions can be implemented to think of the community and the people left behind.



## Glossary

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**Due process** - The legal principle that an individual accused of committing a crime is entitled to know the charges brought against them, to contest the charges, and to stand trial.

**Mass incarceration** - A term referring to a country's incarceration of a significant number of its population as a result of systemic and/or policymaking issues. Mass incarceration emphasizes the punitive aspects of imprisonment and does not ultimately serve to rehabilitate incarcerated individuals.

**Nelson Mandela Rules** - A UN authored set of rules establishing standards and obligations for the treatment of prisoners.

**Recidivism** - The tendency of formerly incarcerated individuals to reoffend and return to prison once again upon being released. Recidivism rates can be reduced by providing incarcerated individuals with the support and resources they need to successfully reenter society post incarceration.

**Rehabilitation** - Providing incarcerated individuals with the treatment, support, and resources to prepare them to re-enter into society. Rehabilitation programs are critical for reducing recidivism rates among formerly incarcerated.

**Reintegration** - A term that refers to the re-entry of formerly incarcerated individuals back into society and their communities.

**Restorative justice** - An alternative approach to justice that aims to get offenders to take responsibility for their actions while providing closure to the victim(s) of a crime. This is done by identifying the harms caused and working to repair the harm that was done.

**Retributive justice** - A system of justice based on punishing offenders rather than rehabilitation. Systems of retributive justice tend to follow an "eye for an eye" principle.

EST. 1989

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