



of eyp poland
2018

Resolution booklet

Procedure of the General Assembly

Day of EYP Poland in Lodz

General rules

- The wish to speak is indicated by raising the Committee placard;
- Each committee may use only one Committee placard;
- The authority of the Board is absolute.

Procedure and time settings

1. Presenting of the Motion for a Resolution;
2. Reading of the Operative Clauses by a member of the Proposing Committee;
3. Points of Information;
4. Defence speech delivered by a member of the Proposing Committee, for max. 3 minutes;
5. Maximum two Position speeches delivered by members of other committees, for a maximum of 2 minutes each;
6. Response to the Position speech(es) delivered from the floor by a member of the Proposing Committee, maximum 1.5 minute in total;
7. Open debate, lasting for three or four rounds;
8. Sum-up speech delivered by a maximum of two members of the Proposing Committee, for a maximum of 3 minutes;
9. Voting procedure.

Point of Personal Privilege

Request for a Delegate to repeat a point that was inaudible.

Direct Response

Twice per debate, each Committee may use the Direct Response sign. Should a Delegate raise the sign during the open debate, they will immediately be recognised by the Board and given the floor as soon as the point being made is concluded. A Direct Response can only be used to refer to and discuss the point made directly beforehand. If two or more Direct Responses are requested at once, the Board will decide which Committee to recognise. In this case, the second Direct Response shall only be held if it can be referred to the first Direct Response, so on and so forth.

Point of Order

These can be raised by the Chairperson if a Delegate feels the Board has not properly followed parliamentary procedures. Ultimately, the authority of the Board is absolute.

Defence Speech

One member of the Proposing Committee delivers the Defence Speech from the podium. It is used to explain the rationale of the overall lines of the Resolution and convince the Plenary that the Resolution is worthy of being adopted. This speech can last a maximum of three minutes.

Position Speech

A Position Speech can either support or oppose the resolution. If the speech opposes the resolution, it still needs to provide constructive criticism and proposals of better solutions. Likewise, if the speech supports the resolution, it still needs to explain why the solutions of the committee are as good as they are. A maximum of two Position speeches, from two different committees, might be delivered during a debate, from the podium, for a maximum of two minutes each.

Summation Speech

One or two members of the Proposing Committee deliver the Summation Speech from the podium; the microphone can only be passed once. It is used to summarise the debate, respond to main, selected criticism and to once more explain why the chosen approach is the most sensible. This speech can last a maximum of three minutes.

Motion for a Resolution by the Committee on Human Rights

Using embryonic stem cells is becoming highly promising in nowadays research. However, pluripotent cells are still risky and raise ethical questions about the beginning of a child's life and religious beliefs. What restrictions, if any, should be made on using embryonic stem cells?

Submitted by: Antoni Veniant (PL); Krystian Wodzielak (PL); Ada Adamczyk (PL); Patryk Mirek (PL); Marcin Grześ (Chairperson, PL)

The European Youth Parliament,

- A. Noting with concern the diversity of legislative provisions regarding human embryonic stem cells (ESC) research among the Member States,
- B. Alarmed by the lack of standardized regulations of ESC usage in treatment within the EU,
- C. Bearing in mind, that doctors can offer stem cells treatments to the public which safety and efficiency has not been proven yet,
- D. Aware of the negative perception about ESC treatments among EU citizens due to:
 - i. enormous financial gain obtained by private clinics from providing it,
 - ii. the fact that the procedure of transplanting ESCs uses embryos,
- E. Viewing with appreciation that the current framework of the EU's new research and innovation programme consists of the triple lock system¹;
 - 1. Encourages Member States to set a requirement for medical professionals to obtain permission for:
 - a. performing ESC treatment,
 - b. conduct medical research;
 - 2. Suggests the Member States to implement a unified set of laws that would strictly regulate the cases in which ESC may be used;
 - 3. Further requests Member States to strictly control the process of therapies which are using ESC;

¹ **Triple locks system** consists of three parts: it respects national legislations, all projects must be scientifically validated and must undergo rigorous ethical review and EU funds may not be used for derivation of new stem cell lines, or for research that destroys embryos (blastocysts).

4. Recommends that the European Commission creates an European database for medical research on ESC that can be accessed by certified laboratories only

Motion for a Resolution by the Committee on Employment and Social Affairs

While some EU Member States lack caregivers and nurses, others are confronted with general unemployment. Hence, many leave their families to move abroad to work as caregivers in underpaid jobs. What measures should be taken to avoid a lack of caregivers on one side and tackle unemployment on the other?

Submitted by: Piotr Dębiński (PL), Katarzyna Kłuczyńska (PL), Patrycja Matusiak (PL);
Karolina Kuźniar (Chairperson, PL)

The European Youth Parliament,

- A. Concerned by the diminishing attractiveness of nursing and caregiving professions to the youth, due to the inconvenient working conditions, specifically prolonged shifts,
 - B. Observing results of growing migration from Eastern Europe to Western Europe and its influence on higher competition in nursing and caregiving labour market in Western Europe, as well as underemployment in Eastern Europe,
 - C. Aware of a wage gap in nursing and caregiving professions among the Member States leading to disparities in life quality of EU citizens,
 - D. Deeply concerned that EU citizens are affected by the lack of professional caregivers and nurses, and its effect on the quality of medical services;
1. Encourages the Member States to set up a programme of paid internships for youth interested in pursuing a medical career;
 2. Proposes the Member States to release campaigns encouraging career workshops in High Schools focused on nursing and caregiving;
 3. Requests the European Structural and Investment Fund to assign more funds for equalising conditions of work in the medical sector among the Member States;
 4. Calls upon the Member States to encourage nurses and caregivers to stay in their countries of origin by raising salaries in the Member States with worse working standards.

Motion for a Resolution by the Committee on Environment, Public Health and Food Safety

A large subset of parents admits to having concerns about childhood vaccinations due to personal belief, religious reasons or safety concerns. How should the EU take action against the risks of vaccination as well as the risk of spreading serious illnesses?

Submitted by: Lidia Majda (PL), Anna Jurda (PL), Konrad Nawrotek (PL); Beata Świątek (Chairperson, PL)

The European Youth Parliament,

- A. Contemplating that the current herd immunity oscillates at 95% in the EU,
- B. Seriously concerned that if more people will not get vaccination, the herd immunity might fall to 90%, leading to an increased probability of recurrence of epidemic diseases,
- C. Noting with regret that parents have concerns about:
 - 1) the safety of the vaccination procedure,
 - 2) its high costs,
 - 3) it causing diseases such as autism and AIDS,
- D. Deeply concerned by fake news and anti-vaccination propaganda being widely spread in the media and their influence on uninformed parents' decision,
- E. Noting with regret that vaccination is not obligatory in every Member State;
 - 1) Suggests Member States to introduce legislation on obligatory vaccination for EU citizens by the age of 12;
 - 2) Encourages Member States to subsidise the process of vaccination in order to make it free of charge;
 - 3) Asks the EU to boost the reach of pro-vaccination NGOs to schools and social media by taking patronage of their work;
 - 4) Proposes Member States to create:
 - a) an educational campaign in schools where both parents and students would have the ability to attend lectures about the negative outcomes of non-vaccination;

b) a media campaign where parents who lost their children due to non-vaccination will speak about the importance of this procedure.

Motion for a Resolution by the Committee on Development

With life expectancy in Eastern EU Member States being only at a maximum of 77 years – shown in a statistics of 2013 – and even up to 13% of a country's population not having access to medical care, which includes pricing and long waiting lists, how can better access to medical care be provided in order to tackle European-wide discrepancy?

Submitted by: Fryderyk Sitnik (PL); Jędrzej Kopiszka (PL); Vibhu Sharma (PL); Weronika Domiter (Chairperson, PL)

The European Youth Parliament,

- A. Deeply concerned by the lack of investments and the inefficient allocation of resources in the medical sector in several Member States,
 - B. Noting with regret a low availability of medical services in the poorest Member States which is due to the fact that doctors are moving abroad to find better paid jobs ,
 - C. Taking into consideration that some EU citizens encounter difficulties finding necessary medical help due to lack of information,
 - D. Realising that people living in rural areas might have limited access to medical services;
1. Suggests the European Commission to improve data-driven healthcare system which would allow to:
 - i. allocate medical resources more efficiently,
 - ii. minimise the discrepancy in the healthcare system between Member States;
 2. Requests the Member States to incentivise doctors to stay in their home country by investing in:
 - I. better working conditions,
 - II. modernized equipment and infrastructure,
 - III. medical education system;

3. Encourages Member States to establish small medical centers in rural areas where the inexperienced doctors could gain experience, in order to provide better access of healthcare in remote communities;
4. Proposes that Member States introduce systems of buses equipped with instruments to diagnose certain diseases in early stages which would visit rural areas;
5. Endorses an introduction of a helpline available all around the EU twenty-four hours a day which would provide advice and information regarding medical problems and the possibilities to solve them.

Motion for a Resolution by the Committee on Civil Liberties, Justice and Home Affairs

As private services beyond regular care are expensive, EU citizens have these treatments carried out by professionals, who provide low-priced services, abroad. How could the EU support local doctors suffering from a huge loss of income?

Submitted by: Julia Szumańska, Michał Zalega, Sara Powałka, Katarzyna Białecka (PL);
Karolina Lach (Chairperson, PL)

The European Youth Parliament,

- A. Aware of an unequal distribution of high level specialists within the Member States,
 - B. Deeply alarmed by the fact that in some Member States the interest rates are overly high putting a burden on doctors to set up a medical practice,
 - C. Acknowledges the lack of an universal platform for international doctors to share and expand their knowledge for higher overall skill level,
 - D. Bearing in mind that the uneven level of taxes across the EU on setting up your own medical practices leads to higher overall cost of treatment in Member States with higher taxes;
1. Suggests Member States to promote knowledge exchange between doctors by:
 - a) prolonging the Erasmus + programme after 2020,
 - b) by enriching the programme with projects designated especially for doctors;
 2. Urges Member States to raise awareness about the advantages of using the healthcare system of the citizens' own countries;

3. Encourages Member States to give more opportunities to international doctors to share their knowledge and experience with other younger and less experienced doctors as well as medical students;
4. Calls upon the European Commission to issue a directive setting common EU criminal law regarding medical malpractice in another country.

