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ANTALYA PRIVITE YUKSELIS
HIGH SCHOOL MODEL UNITED
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UNHRC

Agenda Item:

**Combating Communicable Diseases
and Adressing Inadequate
Conditions in Africa**

Co-Under Secretary General:

İpek Yılmaz

Co-Under Secretary General:

Gülşah Dirlik

-UNHRC STUDY GUIDE-

Agenda Item: Combating communicable diseases and addressing inadequate health conditions in Africa

-Table Of Contents-

1. Letters from the Secretariat
2. Letter from the Under-Secretary-General

3. Introduction to the Committee
 - a. Functions
 - b. Budget
 - c. History
 - d. Regional Offices

4. Introduction to the Agenda Item: Combating communicable diseases and addressing inadequate health conditions in Africa

5. Definitions of Key Terms
6. Associated Organisations
7. Post UN Actions
8. Bibliography

1. Letter from the Secretariat

Dear Delegates,

First of all, it is my utmost pleasure to serve you as the Secretary General for Antalya Private Yükseliş High School Model United Nations Conference. I am more than proud for making this conference happen with my friends and waiting with a great enthusiasm to see every participant.

MUN's are great opportunities to discover your talents, improve your formal communication abilities and understand how policy is implemented. For these reasons, as a great academic team it is our mission to transfer our experiences to the new generation and to ensure that MUNs affect them in a similar way.

Lastly as executive team, we put everything we had into this conference. My most sincere regards.
Welcome to Ascend of Prestigiousness!

Yusuf Almış

2. Letter from the Under-Secretary-General

My dear delegates,

As your Under Secretary General İpek Yılmaz, it gives me great joy to welcome you all to YUKSELİSMUN24 and the United Nations Human Rights Council.

We've wanted to do this committee with my dearest Co-Under Secretary General Gülşah Dirlik, whom we all adore, forever and I'm thrilled to finally have the opportunity. The process of making this committee was a long journey and I'm so glad that we can say we did our best.

As you all know, our agenda focuses on health challenges in Africa. With the aim of addressing this issue, UNHRC and WHO collaborate in the field . I would like to inform you, this is why this guide will have a significant amount of content related to the World Health Organization.

This study guide contains highly important information regarding our agenda. I would be pleased if each and every one of you study the entire guide. Also, keep in mind that this guide shouldn't be your only resource of information. I highly recommend conducting further research to gain more comprehensive knowledge that you can use during your debates.

I sincerely wish this committee can be an experience that contributes to your debate and document writing skills, understanding of our world's current problems and well, your MUN career.

If you have any kind of questions in mind, do not hesitate to contact me. You can reach me through my email, 07ipekyilmaz@gmail.com

I wish you all a remarkable and unforgettable conference.

Sincerely
İpek Yılmaz

3. Introduction to the Committee

UNHRC, which stands for United Nations Human Rights Council, is a United Nations agency that unites nations, partners, and people from all around the world in order to promote human rights. UNHRC is responsible for strengthening the promotion and protection of human rights and preventing any human rights violations all around the globe for every community, group and individual.

In this particular committee World Health Organization(WHO) will be taking active place due to our agenda item.

a. Functions

UNHRC ensures that every community, group and individual throughout the world has complete access to human rights. In case of any violation, UNHRC has the responsibility to directly take physical or diplomatic action for prevention of the violations..The United Nations Human Rights Council consists of 47 members that are elected directly and individually by a majority of the total 193 member states of the UN General Assembly.

Since collaboration is a significant principle for UNHRC, it mobilizes every part of society, including governments, civil society, international organizations, foundations, advocates, researchers, and voluntary workers.

The World Health Organization (WHO) brings 194 Member States across 6 regions and 150+ locations together. WHO works extremely hard to improve everyone's ability to enjoy good health and well-being and to confront the biggest health challenges of this century. The organization has a large range of responsibility from emerging epidemics to the persistent threat of communicable diseases and chronic diseases.

Another main principle that the World Health Organization is committed to is the principle of accountability, a core value for an organization that is entrusted by countries and other donors to use limited resources effectively to protect and improve global health. More information about the usage of the resources can be seen below, in the budget section.

b. Budget

b.1) Funding Sources;

UNHRC has two main sources of its budget: approximately 38.8% of the funding for UN Human Rights came from *the United Nations regular budget*. Consequently, approximately 61.2% came

from *voluntary contributions*.

FUNDING NEEDS, INCOME AND EXPENDITURE

Extrabudgetary (XB) requirements, regular budget (RB) appropriation, voluntary contributions and expenditure evolution 2015-2023
(in millions of US\$)



Until 2015, the extrabudgetary requirements (Annual Appeal) consisted of mere cost plans based on projected income. As of 2016, UN Human Rights introduced a new approach to demonstrate its true requirements, i.e., a needs-based budget of all the funds the Office would need if it were to respond to all requests of assistance it received that could realistically be implemented within a single year.

There are two main sources that WHO gets its funding: Member States paying their *assessed contributions* (AC) (countries' membership dues), and *voluntary contributions* (VC) from Member States and other partners.

i. Assessed contributions of WHO:

Assessed contributions (AC) are a percentage of a country's gross domestic product (the percentage is agreed by the United Nations General Assembly). Member States approve them every two years at the World Health Assembly. They cover less than 20% of the total budget.

ii. Voluntary Contributions of WHO:

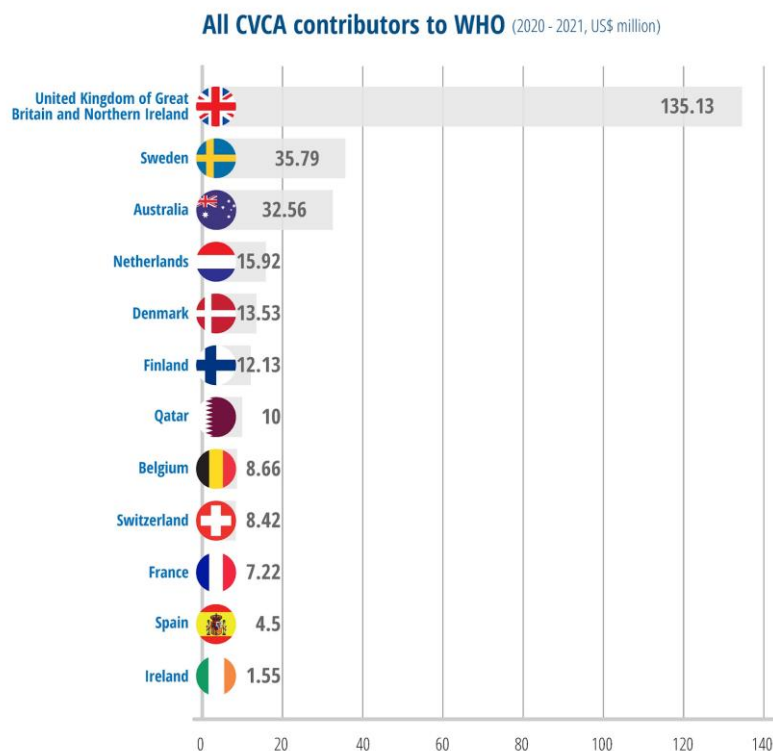
The remainder of WHO's financing is in the form of *voluntary contributions* (VC), largely from Member States as well as from other United Nations organizations, intergovernmental organizations, philanthropic foundations, the private sector, and other sources.

Voluntary contributions (VC) are further categorized based on the degree of flexibility WHO has in deciding how to spend these funds:

ii.i) Core voluntary contributions (CVC)

Core voluntary contributions are fully unconditional (flexible), meaning WHO has full discretion on how these funds should be used to fund the programmatic work of the Organization. These

represent 4.1% of all voluntary contributions.



Note: The amounts represent the revenue received by WHO for the period stated and they might differ from the figures in the WHO Budget Portal, as they represent funds available net of programme support costs.

b.2) WHO's Budget Segments:

While the approved Biennium Programme Budget for 2022-2023 is US\$ 6.72 billion, the approved budget for 2024-25 is US\$ 6.83 billion for the global health agency, meaning that the budget has increased 11% over the 2022-23 season.

WHO's budget consists of four segments:

i. Base budget;

The base budget is the largest component and the scope is set by WHO, covering work done across all three strategic priorities as well as the enabling functions performed by country offices, regional offices, and headquarters.

ii. Special programmes;

Special programmes include work done with additional governance structures, such as the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR); the UNDP / UNFPA / UNICEF / WHO / World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP); and Pandemic Influenza Preparedness Framework.

iii. The Global Polio Eradication Initiative (GPEI),

The Global Polio Eradication Initiative (GPEI) is a public–private partnership led by national governments with five partners – the World Health Organization (WHO), Rotary International, the US Centers for Disease Control and Prevention (CDC), the United Nations Children’s Fund (UNICEF), Bill & Melinda Gates Foundation and Gavi, the vaccine alliance. Its goal is to eradicate polio worldwide.

iv. Emergency operations and appeals,

Emergency operations and appeals are being used in order to respond to acute and protracted emergencies and disasters caused by any hazard with public health consequences. The amount of US\$ 1 billion is an estimate that can be adjusted subject to reassessment based on outbreaks, such as the COVID-19 pandemic.

The table below shows the allocations of the World Health Organization’s programme budget between the years 2022-23:

Programme budget 2022-2023	Allocations US\$ million
Universal health coverage	1 930
Health emergencies	1 250
Healthier populations	455
More effective and efficient WHO	1 333
Polio eradication	558
Special programmes	199
Emergency operations and appeals	1 000
Total	6 725

Note From The Under-Secretary-General

My dear delegates, the reason why the budget section in this study guide is long and detailed is that it is significant for you to comprehend the amount of the budget and with what aims it is being used. We want you to read this part elaborately and carefully so that you can find more detailed and realistic solution ideas that can be written on the resolution paper.

c. History

In 1945, when diplomats met to form the United Nations, one of the main things that they discussed was setting up a global health organization. WHO’s Constitution came into force on April 7, 1948- a date that is now being celebrated annually as ‘World Health Day’.

In April 1945, during the Conference that was held to set up the United Nations (UN) in San Francisco, representatives of Brazil and China proposed that an international health organization must be established and a conference must be held to frame its constitution. On February 15, 1946, the Economic and Social Council of the UN instructed the Secretary-General to convoke such a conference. A Technical Preparatory Committee met in Paris from March 18 to April 5, 1946, and drew up proposals for the Constitution, which were presented to the International Health Conference in New York City between June 19 and July 22, 1946. On the basis of these proposals, the Conference drafted and adopted the Constitution of the World Health Organization, signed on July 22, 1946, by representatives of 51 members of the UN and 10 other nations.

Below, there is a brief timeline of the World Health Organization's achievements:

- 1948 – The World Health Organization (WHO) is established as part of the United Nations. It is the first specialized organization of the new United Nations that every participating nation supported.
- 1955 – The effort to eradicate malaria is launched.
- 1979 – The WHO declares smallpox the first disease in history to be eradicated by human effort.
- 1986 – WHO begins its global program on HIV/AIDS
- 1988 – The global polio eradication effort begins
- 2002 – The global fund to fight AIDS, tuberculosis, and malaria is created.

d. Regional Offices

WHO Member States are grouped into six regions, and each region has a regional office. The groups are listed below:

1. The Regional Office For Africa
2. The Regional Office For The Americas
3. The Regional Office For South-East Asia
4. The Regional Office For Europe
5. The Regional Office For The Eastern Mediterranean
6. The Regional Office For The Western Pacific

Since this committee's agenda item for this conference is 'Combating communicable diseases and addressing inadequate health conditions in Africa', it will be more beneficial to focus on and do extra research about The Regional Office for Africa.

d.1) The Regional Office for Africa

Every year, more than 100 acute public health events are reported in the African region. With a major focus on watching out for early warning signs and helping countries get prepared, WHO has set up systems to get help where it's needed, when it's needed. WHO supports countries to respond efficiently by conducting surveillance, training first responders, deploying emergency medical kits

and other key equipment, as well as tracking epidemiological trends. The time to control an outbreak has dropped to an average of 45 days in 2019, compared to 131 in 2017.

Note From The Under-Secretary-General

Below, there is a link to the official website of The Regional Office for Africa. I highly encourage all of you to click on this link and do an elaborate research on this website. It will help you to get informed about the diseases in the African region, the actions that are being taken by WHO to eradicate those diseases and more information that you will need during the debates through the conference.

<https://www.afro.who.int/>

5) Introduction to the Agenda Item: Combating communicable diseases and addressing inadequate health conditions in Africa

In the African region, diseases like HIV/AIDS, malaria, tuberculosis, acute respiratory infections, and diarrheal diseases are causing high mortality rates. However, mortality figures give only a partial measure of the toll taken by infectious diseases, and the global burden also includes the health impact measured by disabilities, deformities, loss of productivity, care and treatment caused by a multitude of diseases like lymphatic filariasis, leishmaniasis, schistosomiasis, sleeping sickness, and others. The impact of infectious diseases can be traced according to the economic performance of African countries, showing that 34 out of 53 countries are classified as low-income economies. The disease burden is, however, more devastating since it affects all components of human development, including income, health and education.

The impact of infectious diseases on African countries is no longer a crisis only for the healthcare sector but presents a challenge to all sectors. It has the potential to reverse the gains made in human development in the last few years. Consequently, beyond health issues, these diseases should and must globally be seen as a development concern, affecting education and knowledge acquisition, income and social status, productivity and economic growth, and other direct and indirect components of human development such as gender equality and human rights.

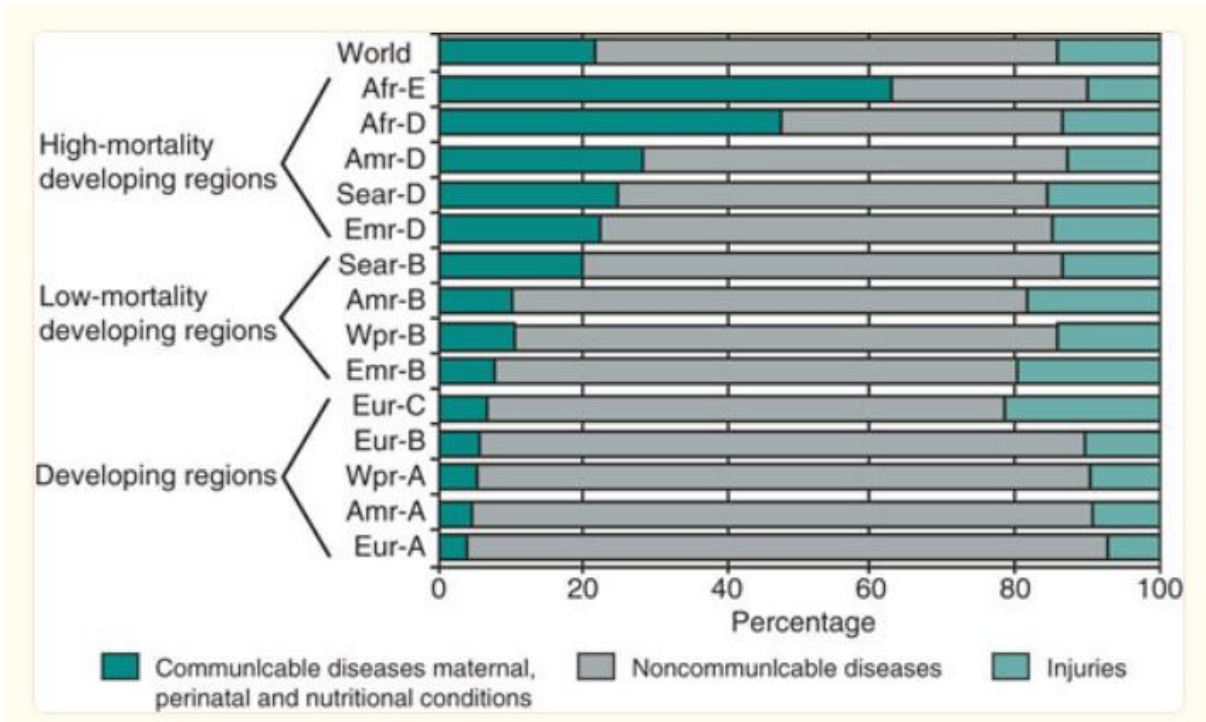
For health strategies to be successful, international solidarity and public-private partnerships are needed to tackle the problems of shortage and lack of treatments, resistance, and the need for new drugs, vaccines, and diagnostic procedures.

Deaths and burden (DALYs) caused by infectious diseases, in thousands, 2002 (WHO, [2003b](#))

Cause/disease	World <i>Deaths</i>	<i>DALYs</i>	Africa <i>Deaths</i>	<i>DALYs</i>
HIV/AIDS	2821	86072	2203 (78%)	66772 (78%)
Malaria	1222	44716	1087 (89%)	39165 (88%)
Respiratory diseases	3845	90252	1071 (28%)	32703 (36%)
Diarrhea	1767	61095	695 (39%)	22992 (38%)
Tuberculosis	1605	35361	303 (19%)	8230 (23%)
Total	11260	317496	53595 (48%)	169862 (48%)

Data worked from the WHO statistics, by kind permission of the World Health Organization

Nearly 50% of deaths and DALYs caused by infectious diseases in 2002 occurred in Africa



Disease burden (DALYs) among adults by broad cause, selected subregions, 2002 (WHO, [2003b](#)).

The inference from this table is that in Africa, the burden of communicable diseases is higher than those of non-communicable diseases and injuries, whereas, in other regions, the burden of non-communicable diseases is predominant. (Reproduced by kind permission of the World Health Organization.)

With malnutrition as a common contributor, the five biggest infectious killers in Africa are acute respiratory infections, HIV/AIDS, diarrhea, malaria, and tuberculosis, responsible for nearly 80% of the total infectious disease burden and claiming more than 6 million people per year. In five out of six WHO regions, the burden of non communicable diseases is greater than that of communicable diseases. The exception is Africa where communicable diseases are predominant.

Deaths by causes in WHO regions, estimates for 2002, in thousands (WHO, [2003b](#))

Cause	Communicable diseases, maternal and perinatal conditions and nutritional deficiencies	Non communicable diseases	Injuries
WHO regions			
Africa	7779	2252	747
The Americas	875	4543	540
Eastern Mediterranean	1746	2030	391
Europe	567	8112	803
South-East Asia	5730	7423	1467
Western Pacific	1701	9000	1231
<i>World</i>	<i>18416</i>	<i>33424</i>	<i>5188</i>
<i>% of total deaths</i>	<i>32.3%</i>	<i>58.6%</i>	<i>9.1%</i>

(Reproduced by kind permission of the World Health Organization.)

This figure is the evidence of the predominance of communicable diseases in Africa by opposition to the rest of the world where non-communicable diseases are prevalent.

Major diseases in the African Region

i. HIV and AIDS

i.1) HIV:

HIV (*human immunodeficiency virus*) is a virus that attacks cells that help the body fight infection, making a person more vulnerable to other infections and diseases. It is spread by contact with certain bodily fluids of a person with HIV, most commonly during unprotected sex (sex without a condom or HIV medicine to prevent or treat HIV) or through sharing injection drug equipment.

If left untreated, HIV can lead to the disease AIDS (*acquired immunodeficiency syndrome*). (see also in part i.2)

The human body can't get rid of HIV and no effective HIV cure exists. So, once a person has HIV, they have it for life.

Luckily, however, effective treatment with HIV medicine (called antiretroviral therapy or ART) is available. If taken as prescribed, HIV medicine can reduce the amount of HIV in the blood (also called the viral load) to a very low level. This is called viral suppression. If a person's viral load is so low that a standard lab can't detect it, this is called having an undetectable viral load. People

with HIV who take HIV medicine as prescribed and get and keep an undetectable viral load can live long and healthy lives and will not transmit HIV to their HIV-negative partners through sex.

In addition, there are effective methods to prevent getting HIV through sex or drug use, including pre-exposure prophylaxis (PrEP), medicine people at risk for HIV take to prevent getting HIV from sex or injection drug use, and post-exposure prophylaxis (PEP), HIV medicine taken within 72 hours after a possible exposure to prevent the virus from taking hold.

below is a link of a short documentary about HIV:

<https://youtu.be/12vTnXekJu8>

i.2) AIDS:

AIDS is the late stage of HIV infection that occurs when the body's immune system is badly damaged because of the virus.

Without HIV medicine, people with AIDS typically survive about 3 years. Once someone has a dangerous opportunistic illness, life expectancy without treatment falls to about 1 year. HIV medicine can still help people at this stage of HIV infection, and it can even be lifesaving. But people who start HIV medicine soon after they get HIV experience more benefits—that's why HIV testing is so important.

below is a link of a short documentary about AIDS:

<https://www.youtube.com/watch?v=bjdqw9rXXd8&pp=ygUMd2hhdCBpcyBhaWRz>

i.3) The situation in the African Region:

The WHO African Region is the most affected region, with 25.7 million people living with HIV in 2018. The African Region also accounts for almost two-thirds of the global total of new HIV infections. In 2018, about 1.1 million people were infected with HIV in the African Region.

ii. Malaria

Malaria is a life-threatening disease spread to humans by some types of mosquitoes. It is mostly found in tropical countries. It is preventable and curable.

The infection is caused by a parasite and does not spread from person to person.

Symptoms can be mild or life-threatening. Mild symptoms are fever, chills, and headache. Severe symptoms include fatigue, confusion, seizures, and difficulty breathing.

Infants, children under 5 years, pregnant women, travelers, and people with HIV or AIDS are at higher risk of severe infection.

Malaria can be prevented by avoiding mosquito bites and with medicines. Treatments can stop mild cases from getting worse.

ii.1) Disease burden worldwide:

According to the latest World malaria report, there were 249 million cases of malaria in 2022 compared to 244 million cases in 2021. The estimated number of malaria deaths stood at 608 000 in 2022 compared to 610 000 in 2021.

ii.2) Disease burden in the African region:

The WHO African Region continues to carry a disproportionately high share of the global malaria burden. In 2022 the Region was home to about 94% of all malaria cases and 95% of deaths. Children under 5 years of age accounted for about 78% of all malaria deaths in the Region. Four African countries accounted for just over half of all malaria deaths worldwide: Nigeria (26.8%), the Democratic Republic of the Congo (12.3%), Uganda (5.1%) and Mozambique (4.2%).

iii) Tuberculosis:

Tuberculosis (TB) is an infectious disease that most often affects the lungs and is caused by a type of bacteria. It spreads through the air when infected people cough, sneeze, or spit.

Tuberculosis is preventable and curable.

About a quarter of the global population is estimated to have been infected with TB bacteria. About 5–10% of people infected with TB will eventually get symptoms and develop TB disease.

Those who are infected but not (yet) ill with the disease cannot transmit it. TB disease is usually treated with antibiotics and can be fatal without treatment.

In certain countries, the Bacille Calmette-Guérin (BCG) vaccine is given to babies or small children to prevent TB. The vaccine prevents TB outside of the lungs but not in the lungs.

iii.1) Disease burden worldwide:

Tuberculosis (TB) is the ninth leading cause of death worldwide and the first leading cause from a single infectious agent. TB is also the leading killer of HIV-positive people. Additionally, in 2016, 10.4 million people fell ill with TB.

iii.2) Disease burden in the African region:

Quarter of the people who fell ill with TB in 2016 were from Africa (2.5 million people). In the same year, 1.7 million died from TB globally with 417,000 deaths (over 25 %) from the African region. Between 2000 and 2014, 10 million lives were saved in the African Region through TB diagnosis and treatment. Ending the TB epidemic by 2030 is among the health targets of the Sustainable Development Goals. The 2013 Abuja Declaration sets the target of ending TB in Africa by 2030.

iv. Respiratory Tract Infections:

Respiratory tract infections (RTIs) are infections of parts of the body involved in breathing, such as the sinuses, throat, airways, or lungs. Most RTIs get better without treatment, but sometimes a doctor must be seen.

6) Definitions of Important Key Terms

-*Communicable Diseases*: Communicable diseases are illnesses caused by viruses or bacteria that people spread to one another through contact with contaminated surfaces, bodily fluids, blood products, insect bites, or through the air.

-*Maternal diseases*: Maternal infection is any type of disease passed from a mother to her baby before or during childbirth. These infections may attack a baby's growing brain, putting them at risk of mental and physical impairments.

-*ARV*: ARV is the abbreviation of 'Antiretroviral Therapy'. It is a drug used to prevent a retrovirus, such as HIV, from replicating. ART reduces mortality and morbidity rates among HIV-infected people and improves their quality of life

-*DALY*: One DALY represents the loss of the equivalent of one year of full health. DALYs for a disease or health condition are the sum of the years of life lost to due to premature mortality (YLLs) and the years lived with a disability (YLDs) due to prevalent cases of the disease or health condition in a population.

8) Associated Organizations

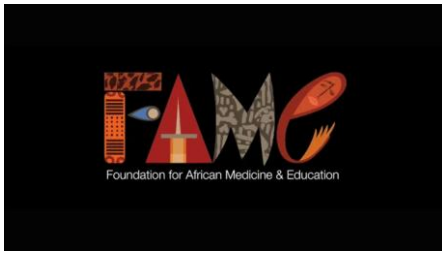


PATH (formerly known as the Program for Appropriate Technology in Health) is an international, nonprofit organization. PATH is based in Seattle with 1,600 employees in more than 70 countries around the world. PATH focuses on six platforms: vaccines, drugs, diagnostics, devices, systems, and service innovations.

The organization has been working on a wide array of emerging and persistent global health issues in the areas of health technologies, maternal health, child health, reproductive health, vaccines and immunization, and emerging and epidemic diseases such as HIV, malaria, tuberculosis, and COVID-19.

PATH has collaborated with numerous African governments to enhance the continent's health systems and tackle the most critical health concerns, such as vaccine-preventable diseases, malaria, and tuberculosis.

<https://www.path.org/>



Foundation for African Medicine and Education (FAME) is an organization whose sole goal is to improve access to high-quality healthcare in Tanzania's rural areas. The gradual establishment, staffing, and management of FAME Medical; the ten-year operation of a mobile medical service; and an extensive internal continuing medical education program aimed at enhancing local capability are among FAME's greatest achievements to date.

<https://fameafrica.org/>



Africa Health Organization (AHO) is the most recently established international health agency covering the whole African continent. The organization's goal is to provide long-term, high-quality healthcare and act as a primary impetus to guarantee that every African has access to ideal health. AHO aims to combat communicable and non-communicable diseases, modernize and develop the healthcare system, improve preparedness, surveillance and response, and coordinate international health in Africa.

<https://aho.org/>



The National Institute for Communicable Diseases (NICD) is a public health organization in South Africa that supports the government's response to communicable disease threats by offering disease surveillance, specialist diagnostic services, outbreak response, public health research, and capacity building. NICD regularly publishes publications to disseminate information about infectious disease-related topics, including travel advisories, vaccinations, and news about local and global outbreaks. By offering current, evidence-based information and articles about

communicable illnesses in the context of disease prevention across Africa, the NICD benefits the public, policymakers, and healthcare professionals in South Africa.

<https://www.nicd.ac.za/>

West African Health Organization is a specialized institution of the Economic Community of West African States (ECOWAS) and actively takes place in many African countries like Burkina Faso, Niger, Nigeria, and Senegal to promote better health conditions. WASO conducts researches into the major epidemic diseases that appear in Africa and arranges activities to control and



WEST AFRICAN HEALTH ORGANIZATION

eradicate these diseases.

Note from the Under Secretary General

There is a link to the website of the West African Health Organization below. I highly recommend you to go to this website and read the 'What We Do' part in the 'About Us' section. You can find detailed information about the actions taken by WASO in order to generate improved medical conditions in Africa. If you analyze the articles in that section well, you can easily find solution ideas to use in your debates.

<https://www.wahooas.org/web-ooas/index.php/en/what-we-do>

9) Post UN Actions

After dealing with the extremely high rates of HIV/AIDS infections, Africa has been going through a downfall in the number of these cases.

Related to the growing significance attached to prevention, treatment, and care, new HIV infections declined by 14% between 2010 and 2015 in Eastern and Southern Africa, the region most impacted globally, and by 8% in West and Central Africa, according to the report by UNAIDS. Sub-Saharan Africa built the largest HIV treatment programs in the world at this time, despite economic hardships; over 12 million people received antiretroviral (ARV) treatment during this period, a rise from 11,000 in 2000. According to the report, around 10 million people diagnosed with HIV in East and Southern Africa and 1.8 million in West and Central Africa were on ARVs by 2015.

In order to attain these outcomes, some countries have adopted some particular strategies: affordable prices were negotiated for ARV medicines, service delivery systems were simplified and decentralized, and reliable supply networks for ARV medicines and other HIV-related materials were constructed.

<https://www.un.org/africarenewal/magazine/december-2016-march-2017/health-care-commitments-action>

<https://www.undp.org/africa/regional-service-centre-africa>

<https://www.theglobalfund.org/en/>

<https://www.who.int/home/search?indexCatalogue=genericsearchindex1&searchQuery=africa&wordsMode=AnyWord>

<https://www.afro.who.int/> <https://www.un.org/africarenewal/magazine/july-2023/aids-can-be-ended-2030-new-un-report>

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<https://co-guide.info/mechanism/united-nations-human-rights-council-unhrc>