



Southern China International MUN

WHO: On measures to construct and implement a protocol for the prevention and mitigation of future pandemics

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1. Description of the Issue

1.1 History of the Issue

Viruses have always been a threat to human societies. From the Black Death to the Spanish Flu, pandemics have been a prominent part of history and an obstacle in economic and social growth. As the world becomes increasingly interconnected and more globalized, viruses spread faster and further than ever before. With new technological advances in travel, it's also easier and faster for pandemics to spread. However, our medical response as a global community has yet to meet the demands set by these conditions. These effects may be seen in the most recent global pandemic, COVID-19.

Even developed nations lack the standard medical resources and prevention plans to mitigate a pandemic. Furthermore, undeveloped nations rely greatly on the aid of foreign nations and non-governmental organizations (NGOs) to aid their response to pandemics, which is also an issue. Pandemic prevention is essential to ensuring a sustainable and prosperous economy.

The current definition for a pandemic is “a disease outbreak that spreads across countries or continents.”² The official definition of pandemic has varied through the years due to the difficulty in classifying an outbreak on a global scale. In correspondence to this, the response to varying outbreaks are also stunted. In order to understand the implications and severities of a pandemic, the differences between a pandemic, epidemic, and outbreak should be clearly noted. While the three terms may seem similar, there are technical differences that set them apart. An epidemic is “when an infectious disease spreads quickly to more people than experts would expect.”² An epidemic is not the same as a pandemic but could potentially lead to one. An outbreak is “when an illness happens in unexpected high numbers. It may stay in one area or extend more widely”. Like an epidemic, an outbreak could lead to both a pandemic as well as an epidemic. Outbreaks may sometimes be declared based on a single case of a contagious disease. This is mostly true when the disease is unknown, new to the community, or has been absent from a population for a long time. The United Nations emphasizes the importance of a unified response to pandemic prevention through the Sustainable Development Goal: Good Health and Wellbeing.¹ It recognizes that the pandemic (the current COVID-19) has “halted or reversed progress in health and shortened life expectancy” while also “disruptions to essential health services.”¹ It recognizes that the lack of data, investment in healthcare coverage, and health workers is a driving factor that is stalling or reversing made progress in other medical developments including reproductive health, maternal health, and child health.¹ In response to these identified factors, four of the target goals aim to help strengthen the current pandemic prevention system:

3.3: By 2030, end the epidemics of AIDS, tuberculosis, malaria, and neglected tropical diseases and combat hepatitis, water-borne diseases, and other communicable diseases¹

3.b: Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all¹

3.c: Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing states¹

3.d: Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks¹

Notable Pandemics in Modern History

HIV/AIDS(1981): The human immunodeficiency virus or HIV is a virus that targets the human immune system. If untreated, HIV may then developed into acquired immunodeficiency syndrome, AIDS.⁷ HIV damages the human immune system hence interfering with the body's ability to fight infections and disease. AIDS occurs when the immune system have been severely damaged. AIDS is diagnosed when the CD4 T cell count falls below 200 in the patients body which opens the patient to high risks of infections and cancers.⁸ As of 2021, HIV have claimed over 36.3 million lives.⁹ There is currently still no cure for HIV however, with proper diagnosis, treatment and care the virus may be controlled.⁷

HIV spread to humans from a type of chimpanzee in central Africa. Over time, the virus spread from Africa to other parts of the world making it a global pandemic. Since HIV pandemic peaked in 2005, it has now been classified a global epidemic rather a pandemic. This however doesn't mean the virus is any less damaging as up to 1 million people died from HIV related causes in 2020.⁹

The HIV pandemic triggered the implementation of the international guidelines on HIV-AIDS and Human Rights which improved government capacity for multisectoral coordination and accountability, reformed laws and legal services to be more inclusive in protecting public health as well as support private sectors and communities to respond ethically and effectively to HIV/AIDS. The HIV pandemic was a huge step in making healthcare more accessible for marginalized communities.

SARS(2003): the first case of Severe acute respiratory syndrome, SARS, was first identified in China and spread to four other countries. SARS is an airborne virus that spread through droplets of saliva similar to the cold and influenza making it the first severe and readily transmissible new disease to emerge in the 21st century.¹⁰ The IHR was largely triggered by the 2003 SARS pandemic.⁵ SARS triggered countries to create protocols for airborne diseases. These policies include legislation on international travels and testing in order to stop the spread of airborne disease across borders.¹⁰

H1N1 influenza (2009): Also known as the swine flu, H1N1 outbreak in 2009 was due to a strain of influenza, a virus that that first emerged in the US in 2009.¹¹ Genetic analysis of the virus showed that it originated from animal influenza viruses and is unrelated to the human seasonal influenza viruses hence making it difficult to treat at first. By the time the WHO declared a pandemic in June 2009, the virus spread to 74 countries and territories. Unlike the seasonal flu, the new virus caused high levels of summer infections and exhibited even higher levels of activity during cooler months. To this day the virus circulates as part of the seasonal virus and is included in vaccines against seasonal influenza.¹²

Polio(2014): caused by the poliovirus polio is a life-threatening disease spreading from person to person. It infects a person's spinal cord, causing paralysis. The virus lives in infected individual's throat and intestines and spreads through contact with feces of infected person as well as droplets from a sneeze or cough.¹³ Infected individuals may spread the virus immediately before and up to two weeks after symptoms appear. There are currently three strains of the poliovirus.¹³ Currently two types of vaccines are available to prevent contraction of polio.¹⁴

Ebola(2014): Ebola virus disease or EVD is a deadly disease in people and nonhuman primates. The virus is transmitted from wild animal including fruit bats, porcupines and nonhuman primates. The virus transmits through blood, secretions, organs or other bodily fluids of infected individuals. There is currently one vaccine delivered in two doses to prevent the contraction of EVD.¹⁵

Zika Virus (2016): primarily transmitted by Aedes mosquitoes, the Zika virus is also transmitted between humans through mother to fetus during pregnancy, sexual contact, transfusion of blood and blood products

and organ transplantation.¹⁶ There is no current treatment available for the Zika virus. The symptoms of the viral infection are usually mild and may be controlled through common medicines.¹⁶

COVID-19 (2019): COVID-19 or coronavirus disease is an infectious disease caused by the SARS-COV-2 virus.¹⁷ The virus may spread through an infected person's mouth or nose through cough, sneeze, speech, or even breathing. There are currently five variants of the virus¹⁸. As of December 2021 COVID-19 has claimed over 5.43million lives and has infected 287million people globally.¹⁹ There are currently four main vaccines used globally however with the virus continues to mutate causing new outbreaks globally.¹⁸

1.2 Recent Developments

The most recent pandemic is the COVID-19 pandemic that is still on-going up to this day. As of December 2021, governments globally are working to battle the newly occurred Omnicron variant of the virus. Due to the new genetic changes in the already new virus, experts are still conducting research on the transmissibility of the virus as well as the severity of the disease.²⁰ While it is uncertain statistics show that the number of individuals testing positive has risen in areas affected by Omnicron. Furthermore There are also data suggesting that the number of individuals hospitalized in areas affected by Omnicron has increased. However this may be due to the increased cases rather than severity of the infected. Currently Omnicron has been reported in 57 countries.²¹ The effectiveness of prior SARS-CoV-2 infection antibodies has evidence showing that there may be an increased risk of reinfection with Omnicron. This means that people who contracted covid in the past are at higher risk of contracting Omnicron. The effectiveness of the vaccines are also being researched. Current data suggests that current vaccines remain effective against reducing severe disease and death.²⁰

The current recommended actions for countries to battle the Omnicron variant include:

1. Enhancing surveillance and sequencing of cases in order to track the outbreaks and collect more data for research.²⁰
2. Sharing genome sequences on publicly available databases, such as GISAID.²⁰
3. Report initial cases or clusters to the WHO²⁰
4. Perform field investigations and laboratory assessments in order to better understand the transmission or disease characteristics or impacts effectiveness of vaccines, therapeutics, diagnostics or public health and social measures.²⁰

Currently policies implemented by countries to mitigate the spread of the virus includes to detect variants through surveillance, slow the spread through restrictions on international travel, prioritizing case investigations and contact tracing to slow domestic spread and support individual protective actions including vaccinations, usage of masks, testing and quarantines.²¹

Key Terms:

Pandemic: A disease outbreak that spreads across countries or continents.

Outbreak: when illness happens in unexpected high numbers

Epidemic: when an infectious disease spreads more quickly to more people than experts expect

Quarantine: A state period or place of isolation implemented when people or animals have arrived from foreign area or has been exposed to infectious disease

Vectors: an organism, typically insect or tick, that transmits a disease or parasite from one animal or plant to another

2. Emphasis of the Disclosure

2.1 Right Wing Approach

Its important to note that countries are usually not just right or left wing, there are usually two views in each nation. With the stance on pandemic prevention, many beliefs overlap. Both left and right wing politicians agree that a pandemic is damaging to the socioeconomic growth hence the combined goal of preventing pandemics.

Right wing states are known to be more nationalist. This means that these governments govern themselves free from outside influence. Countries that are historically right wing include China, Russia, Thailand, Vietnam and Turkey. During the COVID pandemic so far, these countries have leaned towards stricter lockdown policies as well as mandatory mask and vaccination policies. The mandatory masks policies in these countries often extend to any areas that have group gatherings or are indoors. These states are the ones that value collectivism over individualism.

A notable example of a country that utilizes this approach is China. China has mandatory vaccination policies that require all citizens from age 7+ to get vaccinated. There is also a stricter lockdown policy that requires a 14 day lockdown for any area that has suspected cases of covid. There are also mandatory community PCR testing when there are any cases of covid detected in the area. There is also a mandatory 21 day quarantine required when entering the country which has to be done in designated quarantine hotels.

2.2 Left Wing Approach

The left wing states usually value individualism over collectivism and value recommendation based policies over mandatory ones. There are also looser lockdown policies as compared to right winged states meaning that often lockdowns are recommended but not strictly enforced. Traditionally left winged countries include US, Switzerland, South Korea and Japan. These countries opt more recommendation-based policies including recommend vaccination and mask policies. Furthermore lockdown rules are looser in these countries as well as quarantine policies. There are also less travel restrictions placed by the governments.

A notable example here would be the US. While the white house recommends states enforce policies like mask and vaccination mandate, many state governments fail to meet these standards when creating policies. There are only ten states with mandatory face covering policies and 28 states with mandatory vaccination policies for businesses (please note that these policies may change by the time of the conference).

2.3 Stance of Intergovernmental Organizations

WHO: The world health organization is the main intergovernmental organization that helps in cases of a pandemic. This is to ensure a unified response rather than a scattered sources of information. Countries rely on the WHO for information and analysis about the disease, this is especially important to countries that are unable to fund their own equivalent to the US Centers for Disease Control and Prevention (CDC).

The WHO plays a key role in coordination of rapid pace scientific work towards treatment of infectious diseases as well. The solidarity Trial is formed with scientific institutions from 100 countries. They rapidly test sets of drugs for potential to treat diseases. Through this joint trials are able to be conducted which enables larger sample sets, pooled data and access to treatment from manufacturers in different countries.²³

The WHO also publishes recommendations for countries in facing and reporting Potential Health Emergency of International Concern (PHEIC) published in the form of International Health Regulations (IHR) which is drafted through general assembly meetings with delegates of member states. There is also the global preparedness monitoring board(GPMB) which is co-convened by the world bank and WHO which works to create recommendations to disease prevention.

As of 2021 there are 196 member states in the international health regulations of which 194 are WHO member states. Member states are legally bound to follow the International Health Regulations(IHR) Third Edition published in 2015. The IHR legally binds the member states to report public health events as well as outline the criterias that determine whether an event constitutes as a “public health emergency of international concern”. The IHR includes implementation of IHR focal points in each member state to report any public health concerns to maintain capacities for surveillance and response.⁵ It also addresses areas of international travel and transport. The five main target goals of the IHR are to make sure all member states are able and willing to: make sure surveillance systems and laboratories can detect potential threats, access public health emergencies with other countries, report specific diseases including any potential international public health emergencies through the network of focal points and respond to public health events.⁶ Since

IHR(2005) have been implemented, four potential health emergency of international concern (PHEIC) have been declared.⁶

There are currently no standard procedure for countries to follow in light of a pandemic. General education is encouraged. Vaccines are usually used to end a pandemic; however, development of vaccines usually take longer periods of time, especially if the virus is unknown.

Experts also believe that climate change is a driving factor behind the transmission of pathogens due to the the inevitable expanding of the habitats of various zootanic disease carrying vectors, hence the added importance placed on racing to mitigate climate change. Another significant factors that experts believe to play a part in the start of pandemics is the acquisition of drug resistance.⁴ Due to this, the WHO is also encouraging controlled prescription of antibiotics. Controlling factors that may contribute to transmission of pathogens is an important part of preventing a future pandemic.

World Bank: The world bank invests in pandemic preparedness to prepare countries to face pandemics in order to mitigate crisis strikes and save lives and money. They co-convened the Global Preparedness Monitoring Board (PGMB) with the WHO to monitor how prepared member states are to being ready to face a pandemic. There are five main actions:

Action 1: At the close of the special session of the World Health Assembly on 1 December 2021, the decision was taken to establish an intergovernmental negotiating body (the "INB") to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response.²⁴

Action 2: The UN General Assembly will adopt a resolution on 'Elevating pandemic preparedness and response to the highest level of political leadership' in late 2021. The draft resolution is under negotiation, and provides an opportunity to commit to a UN Summit on Pandemic Preparedness and Response.²⁴

Action 3: The draft report of the WHO Working Group on Sustainable Financing was published on 24 November 2021. It calls for an increase of assessed contributions by Member States to 50% of the base budget over six years (currently 22%). The Working Group met on 13 - 15 December and did not finalise its report as the Working Group was unable to find a consensus on a potential increase of the assessed contributions. The unfinished recommendations remains under consideration and will be further discussed at the Executive Board meeting 24 - 29 January 2022.²⁴

Action 4: The first meeting of the G20 Joint Finance-Health Task Force will be held in December 2021 and has a mandate to work on modalities to establish a financial facility for pandemic preparedness and response.²⁴

Action 5: Action is needed to follow up on the recent review of the ACT Accelerator.²⁴

In connection with these five actions required by the GPMB, the Word Bank is also funding the 74 poorest countries through the International Development Association(IDA). The IDA is a part of the world bank where funds are replenished every three years through contributions from IDA donors, contributions from the World Bank Group, and financing raised from the capital markets²⁴

2.4 Stance of Developed Countries

Developing countries generally have more resources to work with in response to global pandemics. However a lot of pandemic prevention comes down to leadership. Through the COVID-19 outbreak its seen that many developed countries have failed in the response to set in speedy, effective policies. Furthermore, the quick spread of the pandemic exposed the poverty gap in many developed nations through issues such as lack of resources and hesitancy to seek medical help when experiencing symptoms. These issues are demonstrated in the state of the US through the first wave of COVID outbreak in 2020. Individuals from lower income neighborhoods or minorities hesitate to contact medical professionals hence delaying response to containing the virus. Through the pandemic, a big issue of misinformation was also exposed. Fake news began to spread in many countries around the world. A big part of stabilizing global response to pandemic response and creating a set of policies to successfully mitigate the damages caused by a pandemic, governments will need to find ways to prevent fake news regarding the virus to spread. However, developed nations have more access to scientific development and treatments. Governments in developed nations are subsidizing these scientific institutions to help speed up the process of development. Many developed nations contribute through donating vaccines and funds to developing countries during pandemics in hopes of controlling pandemics and returning to normal global interactions. Countries working to help developing nations include the US and China.

2.5 Stance of Developing Countries

Developing countries usually lack the necessary resources to respond to pandemics. These are the countries in which that many infectious diseases still spread through despite the declared end of pandemic. Examples are seen through pandemics in the past like AIDS and Ebola. Despite the rest of the world generally recovering from these pandemics developing countries especially those in Africa still struggle to contain the viruses. Furthermore, developing nations generally depend heavily on foreign aid and help from intergovernmental organizations such as the WHO and World Bank to help contain and fight infectious diseases. However to make up for the lack of resources developing nations usually place a heavier emphasis on pandemic surveillance. There are more surveillance protocols for entry points to the country and banning group gatherings.²⁵ These types of policies are seen in developing countries with heavy WHO presence such as African nations. However, an example of a developing country that failed to implement these policies and mitigate the spread of COVID is India. Due to the diminished awareness placed on surveillance, the second wave of the pandemic caught the nation unaware and rapidly spread. However with the help of vaccines donated by developed nations such as the US, India is also beginning to control the spread of the virus.

3. Possible Solutions

3.1 In Favor of Developed Nations

Developed nations may improve their pandemic response by updating current emergency responses to PHEIC. This could be done with the help of recommendation from the WHO as well as professionals in the medical field. This would mean higher collaboration internationally and including scientific professionals in forming protocols in regards to PHEIC. In order to help solve the lack of resources in lower income areas and in general when pandemics occur, developed nations should divert more national funding to the medical field and have higher stockpile of pandemic resources such as masks, ventilators etc. This could be done by diverting funds from other governmental spendings like military funding to the health sector. Nations like the US with privatized health sectors may need to find ways to incorporate more affordable health insurance for their citizens. In order to help solve the issue of lack of medical professionals, governments may create scholarship aids for medical students in order to encourage more members of society to enter the medical field. This could be done through drafting legislation that require community support programs from big corporations.

3.2 In Favor of Developing Nations

A global fund for PHEIC may be started in order to fund developing nations during pandemics. This would require developed nations to participate in order for the funds to be significant enough to make a difference. NGOs may also play a role in donating funds if developed countries are unable to meet the quota required. Furthermore developing nations should also create a set of pandemic prevention responses in order to have a haste response to outbreaks. This should be done with the help of the WHO. Surveillance of viruses and outbreaks should also be improved with the help of the WHO in order to identify any infectious viruses

early on which would help mitigate the spread. This could be done by implementing stricter surveillance policies in emergency care facilities including hospitals.

4. Keep in Mind of the Following

When researching country stance for this topic its important to find the most up to date policies employed by the local government. Its also helpful to review the country's response to COVID-19 as its the most recent pandemic. Research into scientific contributions to fighting COVID-19 should also be included in the research as well as international contributions in fighting the pandemic (eg vaccination and other resources donations). Some questions to help guid the research includes:

1. What is the current vaccination policy in the country?
2. What are the current infection rates in the country?
3. How has the policies set by the government reflected on the control of the virus?
4. Has your country made any international contributions?
5. What are the main issues faced by the country in terms of controlling pandemics?
6. Has there been any changes in terms of funding pandemic prevention in the country?

5. Evaluation

As issues like global warming and urbanization continue to grow, micro bacterial and viruses are continuously released into our environment. Pandemics will become more prevalent in modern life hence the importance for a strong, efficient response to preventing the spread of pandemics. As seen through COVID-19 pandemics are extremely detrimental for the global economy and the wellbeing of citizens everywhere. Therefore, its important for an innovative and scientific plan to prevent pandemics. This will be a challenge that will require strong intergovernmental collaboration and innovative thinking from delegates. Conduct scientific research and think outside the box. Best of luck!

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