



Stanford Model United Nations Conference 2014



World Health Organization

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LETTER FROM THE COMMITTEE CHAIR

Dear Delegates,

My name is Anthony Cordova, and I will be serving as chair for WHO committee. I am a senior here at Stanford, majoring in molecular and cell biology, with minors in chemistry and political science. This is my third time participating in the Stanford Model UN Conference, and the second time serving as a committee chair.

Although I am majoring in biology I have always had an interest in healthy policy and global health disparities. Two years I worked for the UN Development Program in Nicaragua on a project involving the effects of climate change on the quantity and quality of drinking water in some of the drier parts of the country. This past winter I had the opportunity to work at the Pan-American Health Organization, which is the regional WHO office in Washington, D.C. My work at PAHO largely revolved around the Regional Action Plan for Health in All Policies (HiAP), which is one of the topics for this committee.

The topics provided in this background guide are designed to spark discussion about some of the most important issues in global health policy, issues that transcend political alliances and country borders. I wish you all good luck.

Sincerely,

Anthony Cordova



THE WORLD HEALTH ORGANIZATION



The World Health Organization (WHO) is a specialized UN agency that was established on April 7, 1948. The primary role of WHO is to provide medical assistance to any country in need. In addition to this key role, WHO also conducts and disseminates medical research, sets the standards for common medical practices, and monitors the status of international public health. The World Health Assembly is the legislative body of WHO, and meets yearly in Geneva to pass resolutions.

In recent years the primary focus of WHO has shifted from communicable diseases to non-communicable diseases, such as obesity, nutrition, occupational health, and substance abuse. However, some communicable diseases still remain a priority, such as HIV/AIDS, vector-borne diseases such as malaria, and tuberculosis.



Topic One: 2003 SARS Outbreak

Severe acute respiratory syndrome (SARS) is a respiratory disease caused by the SARS coronavirus. Those infected by the virus typically exhibit flu-like symptoms, including a fever above 100°F. This is often followed by pneumonia and shortness of breath. The fatality rate of SARS is nearly 10%, although even those who recover from the virus often suffer from long-term symptoms.

In late 2002 and early 2003, an outbreak of SARS occurred in China. The epidemic quickly spread throughout Asia, with the virus eventually reaching several continents. Below is a brief timeline of events related to the outbreak:

- November 16: First known case of atypical pneumonia appears in Foshan City, Guangdong Province, southern China, about 80 miles from Hong Kong.
- February 10: WHO in Beijing receives an email that “a strange contagious disease... has left more than 100 people dead” in the space of one week in Guangdong Province.
- February 21: Liu Jianlun, a doctor from Guangzhou (Guangdong province) arrives at the Metropole Hotel in Hong Kong to attend a wedding and stays on the 9th floor. Although he experienced respiratory symptoms five days earlier, he feels well enough to sightsee.
- February 22: The doctor is admitted to an intensive care unit with respiratory failure and fears he has contracted a “very virulent disease”.
- February 24: Over 50 hospital staff are infected with a “mysterious pneumonia” in Guangzhou. The same day, a Hong Kong man develops a respiratory infection. He had visited an acquaintance living on the 9th floor.



- February 26: A Chinese-American businessman is admitted to the hospital in Hanoi, Vietnam. His recent travel history includes a visit to Guangdong Province and a stay on the 9th floor of the Metropole. He is attended by Dr. Carlo Urbani, a WHO official based in Vietnam.
- February 28: Dr. Urbani is concerned the disease may be avian influenza and notifies WHO office in Manila, in the Philippines. WHO moves into a state of heightened alert.
- March 5: The Chinese-American businessman in Hanoi is airlifted to Hong Kong. Meanwhile, seven of his caretakers fall ill. Dr. Urbani aids hospital staff in containing the disease.
- March 10: Over 20 Hanoi hospital staff are ill, including two in critical condition. The same day, the Ministry of Health in China requests technical and laboratory support from WHO to clarify the cause of the outbreak in Guangdong.
- March 11: Dr. Urbani departs Hanoi for a conference in Bangkok, but is ill during travel and is immediately hospitalized upon arrival.
- March 12: WHO issues a global alert of severe atypical pneumonia as the disease reportedly spreads among hospital staff in Hong Kong and Hanoi.
- March 13: WHO sends an emergency alert to its Global Outbreak Alert and Response Network (GOARN) partners. The same day, the Chinese-American businessman dies in isolation in Hong Kong.

This first committee topic will serve as an historical simulation of the SARS epidemic. The date is March 15th, 2003. The first case of a mysterious atypical pneumonia-like respiratory disease appeared in southern China three months ago, but over the past month, this malady has spread across Southeast Asia. Nearly 300 cases have been reported, and the death toll is approaching a dozen.



Furthermore, cases across the ocean in Toronto have been traced directly back to a Canadian woman who traveled through Southeast Asia during the outbreak and then flew home.

At 2 a.m. European time this morning, WHO was notified by the Singaporean government that a doctor who treated the first cases in Singapore is now on his way from a conference in New York City back to East Asia by way of Frankfurt, and reported symptoms shortly before boarding the plane in New York. The airline and flight number are known to WHO, and the physician is traveling with his 62-year-old mother-in-law and his pregnant wife. Once he lands in Germany, the disease will have spread to three continents.

The entire world is now involved in the spread of this deadly disease, and the possibility of a global epidemic is real. WHO must take action immediately to clarify the nature of this disease and contain it before it sweeps the globe.

Your job as a committee is to pass one or more resolutions addressing the epidemic. WHO is responsible for identifying the virus and creating a standard of care for those who are infected (should an infected individual be quarantined, what kind of protection do healthcare workers need, etc.). WHO is also responsible for recommending travel restrictions, including airport screening for infected passengers. While crafting your resolution, bear in mind the ramifications of imposing restrictions on some countries and not others (the Asian countries will likely be the most impacted). It may also be useful to look at what course of action WHO actually took during the epidemic.



Works Cited

Centers for Disease Control and Prevention. "SARS Basics Fact Sheet." Centers for Disease Control and Prevention. 2012. Web. 18 Jul 2014 <<http://www.cdc.gov/sars/about/fs-SARS.html>>.

World Health Organization. "Update 95 – SARS: Chronology of a serial killer." World Health Organization. 2014. Web. 18 Jul 2014 <http://www.who.int/csr/don/2003_07_04/en/>.

World Health Organization. "Severe Acute Respiratory Syndrome (SARS)." World Health Organization. 2014. Web. 18 Jul 2014 <<http://www.who.int/csr/sars/en/>>.



Topic Two: Health in All Policies

Health is a core element in people's happiness and well-being, as well as an important prerequisite for a person's ability to reach his or her goals and aspirations. Health in All Policies (HiAP) is one approach to improving health and promoting well-being. As defined in the Helsinki Statement on Health in All Policies, it "is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity" (WHO 2013). Application of HiAP involves identifying and evaluating policies across government sectors with potential health implications. In each case, the policy must be designed or modified to reduce the possibility of negative health impacts.

The concept of HiAP was greatly influenced by the recent research into the social determinants of health. According to WHO, the social determinants of health are "the conditions in which people are born, grow, live, work, and age," which are influenced by "the distribution of money, power, and resources at global, national, and local levels" (WHO 2012). These conditions range from access to proper sanitary facilities to the number of parks and green spaces per square mile. Many of these factors are

The synergy between health promotion, the determinants of health, and human rights is embodied in the concept of HiAP, as emphasized by the 2005 Bangkok Charter for Health Promotion in a Globalized World (WHO 2005), the Adelaide Statement on Health in All Policies in



2010 (WHO 2010), the 2011 Rio Political Declaration on the Social Determinants of Health (WHO 2011), and the 8th Global Conference on Health Promotion in 2013 (WHO 2013). HiAP focuses on promoting health and health equity through an integrated government policy response. It emphasizes the importance of promoting health across all sectors, including agriculture, education, labor, the environment, finance, housing, and transportation.

The core components of HiAP are in line with several of the Millennium Development Goals, including the promotion of gender equality and the empowerment of women, the reduction of child mortality, the improvement of maternal health, and the creation of a global plan for development. In addition, HiAP builds on Resolution WHA62.14 (2009) of the World Health Assembly, "Reducing Health Inequities Through Action on the Social Determinants of Health," and Resolution WHA65.8 (2012) of the World Health Assembly, "Outcome of the World Health Conference on Social Determinants of Health."

It will be your goal in this committee to propose a plan of action to address the goals of HiAP. Think about the government structures and institutions required to implement HiAP, as well as ways to monitor and evaluate its success. Remember that every policy choice, including the adoption of HiAP, represents a tradeoff. Although HiAP will have a positive impact on public health, it will also impose a new set of restrictions on each sector of the government. It is your job to come together and find a balance that is acceptable to each country.



Works Cited

World Health Organization. The Helsinki statement on health in all policies [Internet]. The 8th Global Conference on Health Promotion; 2013 Jun 10-14; Helsinki, FI. Geneva: WHO; 2013 [cited 2014 Mar 13]. Available from: http://www.healthpromotion2013.org/images/8GCHP_Helsinki_Statement.pdf.

World Health Organization. Social determinants of health [Internet]. 132nd Session of the World Health Organization Executive Board; 2012 Nov 23; Geneva. Geneva: WHO; 2012 [cited 2014 Jul 13]. Available from: http://www.who.int/social_determinants/B_132_14-en.pdf?ua=1.

World Health Organization. Rio political declaration on social determinants of health [Internet]. World Conference on Social Determinants of Health; 2011 Oct 19-21; Rio de Janeiro, BR. Geneva: WHO; 2011 [cited 2014 Mar 13]. Available from: http://www.who.int/sdhconference/declaration/Rio_political_declaration.pdf.

World Health Organization. The Bangkok charter for health promotion in a globalized world [Internet]. The 6th Global Conference on Health Promotion; 2005 Aug 11; Bangkok, TH. Geneva: WHO; 2005 [cited 2014 Mar 13]. Available from: http://www.who.int/healthpromotion/conferences/6gchp/hpr_050829_%20BCHP.pdf?ua=1.

World Health Organization. Adelaide statement on health in all policies [Internet]. The International Meeting on Health in All Policies; 2010 Apr 13-15; Adelaide, AU. Geneva: WHO; 2010 [cited 2014 Mar 13]. Available from:



http://www.who.int/social_determinants/hiap_statement_who_s_a_final.pdf.