

FORUM: World Health Organization

QUESTION OF: Reassessing the World Health Organization's Role and Authority

MAIN-SUBMITTED BY: France

CO-SUBMITTED BY: USA

THE WORLD HEALTH ORGANIZATION,

Bearing in mind the WHO's messy handling of the Covid-19 Pandemic due to biased decisions made to ignore the emerging cases in Wuhan at the beginning of 2020,

Noting the Stringent Regulatory Authority (SRA)'s concept development by the WHO and Global Fund to aid in the fight of major communicable diseases such as AIDS, Tuberculosis, and Malaria,

Recognizing the WHO's efforts to organize and plan actionable steps toward decreasing non-infectious diseases and the factors of those,

Reaffirming that non-infectious diseases are classified as metabolic diseases, mental diseases, neurological diseases, and congenital diseases,

Taking into account that it is important that the WHO create solutions that are applicable to both MEDCs and LEDCs in order to fulfill its mission of caring for the collective international health.

Emphasizing the importance of ensuring that the donations of MEDCs, such as the People's Republic of China and the United States of America, will not have a big influence on the decisions made by the Board of Directors,

1. Urges the member nations to re-establish the World Health Organization (WHO) as an unbiased UN organization in ways such as but are not limited to:
 - a. reminding the WHO about the importance of taking honest action for the purpose of medical advancements and international health safety,
 - b. urging the Board of Directors to make decisions concerning the WHO's roles in an unbiased manner, free of the influence of factors that include but are not limited to:
 - i. financial discrepancies between More Economically Developed Countries (MEDCs) and Less Economic Developed Countries (LEDCs),
 - ii. amounts of economic funding from countries,
 - iii. political motivations within governments of member states,
 - iv. directors' countries of origin,
 - v. commitments outside of the WHO,

- c. requiring nations to oblige with the request of information and actions that include but are not limited to:
 - i. health and medical investigations,
 - ii. locally based medical research,
 - iii. epidemiological data,
 - iv. general demographics in regard to health;
2. Urges nations raising concerns, and whistleblowers to request the WHO's assistance to support their request with information that includes but are not limited to:
- a. providing medical records only in states of medical emergency such as but not limited to:
 - i. disease outbreaks,
 - ii. global pandemics,
 - iii. natural disasters that open humanitarian crises,
 - iv. refugee crises,
 - b. sharing information found in administered research reports concerning topics such as but not limited to:
 - i. new biomedical technologies,
 - ii. development and administration of vaccines,
 - iii. facilitation of medical technologies to LEDCs,
 - iv. expansion of beneficial healthcare models across countries,
 - c. yielding data in relation to epidemiological data which includes but is not limited to:
 - i. general demographics of both the country's population and cases,
 - ii. medical and technological capabilities of the countries,
 - iii. relevant information about the public and private sectors,
 - iv. data analysis by epidemiologists;
3. Recommends the World Health Organization (WHO) to focus on helping implement and regulate resources for healthcare on a global scale in areas that include but are not limited to:
- a. facilitating technology transfers across countries,
 - b. serving as the creation of an intergovernmental organization to finance the implementation of Universal Health Care (UHC), especially in developing countries,
 - c. regulating nations to ensure that resources (such as drugs, medications and vaccines) and healthcare are being evenly implemented throughout the country,
 - d. negotiating drug prices with private corporations on behalf of the country;

4. Encourages member nations to re-evaluate the WHO's role in raising general awareness in physical and mental health and educating general health and health literacy, especially in nations where awareness and education about health are not as developed as others, in the general populace through methods such as but not limited to:
 - a. recommending member states to push government sponsored media methods such as:
 - i. posters and advertisements on public transportation,
 - ii. advertisements in newspapers, TV channels, and other media,
 - iii. public service announcements on the internet and television,
 - b. collaborating with mass media channels such as:
 - i. newspapers,
 - ii. magazines,
 - iii. video platforms,
 - iv. Social Network Services,
 - v. TV Channels,
 - c. incorporating basic education of health into the curriculum of schools,
 - d. working with nonprofit organizations and UN sub-organizations to raise awareness and education across LEDCs;

5. Urges WHO Nations to conduct further research developments into the topic of healthcare as a whole in ways that include but are not limited to:
 - a. establishing Memoranda of Understanding (MOUs) between the government and universities in relation to conducting research concerning appropriate balance between the private & public sectors, and plans for UHC,
 - b. conducting additional research centers across MEDCs in conjunction with the WHO for the sole purpose of researching new infrastructure and medical technologies,
 - c. conducting thorough research on societal and economic positions and citizen demographics to provide the most appropriate models concerning insurance, plans and UHC across LEDCs;

6. Requests for all member states to collaborate with the World Health Organization (WHO) to create and hold annual conferences to serve the purposes of:
 - a. creating guidelines for regulations and requirements regarding general healthcare and universal healthcare,
 - b. discussing methods of increasing health care standards on a global scale,
 - c. determining what each country needs for it to provide accessible health care to its citizens,

- d. discussing the implementation of secondary and tertiary care among countries who are eligible and already have a strong primary care base of healthcare policies,
 - e. providing a progress report with statistical data of each nation's development in their health coverage by detailing:
 - i. amount of population that has accessibility to primary care, secondary, and tertiary,
 - ii. percentage of taxes dedicated towards funding healthcare,
 - iii. amount of funding used towards healthcare,
 - iv. average cost of primary, secondary, and tertiary care,
 - v. the population's average spending on healthcare,
 - vi. rates of infant mortality,
 - vii. rates of infectious diseases, such as tuberculosis and HIV/AIDS;
7. Encourages the WHO to undertake the role of coordinating medical institutions in the supplying of medical supplies to support refugee crises in ways that include but are not limited to:
- a. assessing the severity of medical and humanitarian crises happening across all nations of world,
 - b. assisting refuge nations in the medical aspects of refugee crises through facilitating the technical assistance and medical supplies and aid needed within said refuge nations,
 - c. coordinating the cooperation of UN sub-organizations and NGOs such as but not limited to:
 - i. The UN Peacekeeping Force,
 - ii. The International Committee of the Red Cross,
 - iii. Doctors Without Borders,
 - iv. The International Rescue Committee,
 - v. Oxfam International;
 - d. utilizing WHO's Contingency Fund For Emergencies (CFE) to respond rapidly to crises and very detrimental emergencies in order to scale up operations very quickly and efficiently to combat crises, determined whether or no to be used depending on several factors such as:
 - i. potential lives lost,
 - ii. potential economic impact,
 - iii. overarching impact, as in the broad effect of the crisis;

8. Requests for all member states to cooperate and aid in the prevention and limitation of epidemics and disease outbreaks through methods that include but are not limited to:
 - a. alerting the WHO of any outbreaks of disease or virus within a country,
 - b. providing relevant and accurate medical data in relation to the epidemic when requested,
 - c. facilitating the manufacture of needed medical supplies on a global scale,
 - d. issuing and sharing the research of the emergence of any diseases or viruses to the WHO;

9. Recommends the WHO to establish educational centers across the world to help facilitate the WHO's roles in ways that include but are not limited to:
 - a. creating educational training centers through utilizing the services of UN sub-organizations and NGOs such as but not limited to:
 - i. CARE,
 - ii. The International Committee of the Red Cross,
 - iii. Doctors Without Borders,
 - iv. The International Rescue Committee,
 - v. Oxfam International,
 - vi. Partners in Health,
 - vii. Project Hope,
 - b. establishing training centers in LEDCs to create medical personnel that will help alleviate humanitarian crises through ways such as but not limited to:
 - i. utilizing WHO funding to bring in and hire medical professions to teach citizens in such training centers,
 - ii. planning out specific training methods in an affordable but effective way through the help of previously mentioned medical professionals, as well as scientists and educational experts in the WHO,
 - iii. supplying such facilities with essential equipment needed for training through the use of WHO funding, which includes equipment such as PPE (Personal Protective Equipment), first aid, and so on,
 - c. using the trainees of these educational centers to further help the evaluation of nations in regards to the WHO's regulations,
 - d. arranging special medical training camps as refugee sites and humanitarian crises to help create medical staff that will help relieve the areas;

10. Urges member nations to comply with the WHO's efforts to organize and plan actionable steps toward decreasing non-infectious diseases through ways that include but are not limited to:
 - a. working with the WHO to help implement their action plan in decreasing the burden of non-infectious diseases that are currently arising,

- b. requesting member nations for any records in response to the non-infectious diseases present in their countries with information that may include but is not limited to:
 - i. citizen and patient demographics,
 - ii. relevant medical data and record about the patient's cases,
 - iii. social information that is relevant to the influence of non-infectious diseases,
 - iv. financial statistics that correlate with the spread of non-infectious diseases.