

World Health Organization (WHO)
Addressing Global Pandemics



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Hi guys! My name is Elysia Colon (or Elly) and I'm a current sophomore at The George Washington University. I'm from Long Island, New York, but I currently reside in Washington DC. My major is International Affairs at the moment but I might be switching to psychology, we'll see what the future holds!

I've been doing Model UN since I was a freshman in high school, and I did mainly General Assembly Committees until I got to college. I'm also on the GWMUN team! I'm a huge fan of MUN because I think it teaches us important life lessons about getting along with others and makes us better communicators, on top of drawing our attention to very important topics. I truly don't know who I would be today without Model UN and it is my genuine hope that each and every one of you feels the same way at some point as well!

I'm very excited for this conference, and specifically this committee as the topic is, for obvious reasons, especially important right now. I'm very excited to hear your takes on the situation and can't wait to meet you all!

I can be reached at ecolon08@gwu.edu at practically all hours (though my response time may vary! Gotta sleep sometime!) so feel free to contact me if you have any questions, concerns, or just need to chat! Make sure to include your name and delegation though so I don't get confused and am best equipped to help you!

- Elly

Introduction to Topic

Oxford Languages defines the word pandemic as “(of a disease) prevalent over a whole country or the world.” Though what exactly constitutes as a pandemic has changed over the course of history, one thing has remained consistent: we are vastly unprepared for them, and the extent of their destruction comes as a surprise to most. If one were to ask themselves this time last year what the year 2020 would look like, it is unlikely there would be any mention of school closures and mask-wearing, and yet this is the reality that we currently face. Regardless of what your school specifically may be doing, it goes without question that our ability to not only prevent, but also react to, pandemics is of the utmost importance if we wish to ever return to any sense of normalcy.

As this is such a presently widespread and real-life-applicable topic it goes without question that should any bit of this become a little too overwhelming for you as a delegate, feel free to take a brief break to recompose yourself. Additionally as delegates, please set aside any personal feelings regarding the topic to stick to your country’s policy to the best of your abilities!

First, it is important to get some important vocabulary established, to ensure we use the correct language when discussing this topic. Courtesy of the Intermountain Healthcare Organization, there are four main/basic definitions to remember. An **epidemic** is any disease that affects a large number of people within any community, population, etc. A **pandemic** is an epidemic that has spread throughout MULTIPLE communities/populations/etc. An **endemic** refers to something that belongs to one specific people or country, and lastly an **outbreak** is any larger-than-anticipated increase in the number of cases of an endemic. It can range from one single case in a new area to the point where (if not quickly/effectively controlled) it escalates into

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an epidemic. So, in terms of size, it goes: endemic, outbreak, epidemic, pandemic. Of course it is a little bit more complicated than that simplification infers, but that is certainly a good starting point when it comes to definitions. We often see them used interchangeably, which sometimes is acceptable, but is often inaccurate and potentially misleading. While this is generally accepted, between language barriers and subjective features of their definitions, this can impact the way that legislation is drafted and potentially the funding that goes into it.

History of the Topic

The first pandemic (that was recorded!) occurred during the Peloponnesian War in 430 B.C. Though the disease remains officially unknown, it is widely believed to be Typhoid Fever, with symptoms including: fever, intense thirst, blood in throat and mouth, red skin, and lesions. It spread through Libya, Ethiopia, and Egypt, into the Athenian walls during the war. Roughly two-thirds of the Athenian population was wiped out as a result. One thing important to keep in mind for many earlier pandemics, is that war typically was the reason they spread, as people simply did not travel in the way modern day people do.

The next pandemic occurred roughly 600 years later and called the “Antonine Plague.” Also officially unknown, many believe it to be an early appearance of smallpox. The disease started with the Huns, who infected the Germans, who infected the Romans. Symptoms included: fever, sore throat, diarrhea and pus-filled sores. This plague continued for roughly 15 years and claimed a handful of very notable lives.

Less than one century later, the Cyprian Plague most likely started in Ethiopia, then spread through Northern Africa, to Rome, to Egypt, and continued heading north for quite some

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time (almost 300 years!). This plague included fever, diarrhea, vomiting, ulcers of the throat, and gangrenous hands and feet. Those living in cities attempted to flee to less-populated areas in the countryside in an attempt to escape infection, and while a respectable idea, unfortunately this only spread the disease further and caused more deaths overall.

Around a century after the last outbreak of the Cyprian Plague, the Justinian Plague began in Egypt. This disease spread through Palestine and the Byzantine Empire, to the Mediterranean. Similar to the plague that occurred during the Peloponnesian War, this disease greatly affected the outcome of political strife, with Emperor Justin being forced to abandon his reunification plans, and increasing the spread of Christianity as people feared for their lives and futures. This plague is believed to be the first notable appearance of the bubonic plague, and wiped out a whopping 26 percent of the global population.

A brief break in the bubonic plague's rampage, the hallmark pandemic of the 11th Century was Leprosy. One may be vaguely familiar with the disease due to its modern day figure of speech "leper," which while originally referring to someone suffering from the disease, but now means someone who is rejected by society, or a social outcast. This term actually directly refers to the disease, as people with leprosy were often outcast from society as it was believed to be a punishment/judgement from God. The disease itself had been around for quite some time, but it wasn't until the Middle Ages that it became a full-fledged pandemic. Victims of Leprosy suffered from sores and deformities, and the disease is still around today, though it has been renamed as "Hansen's disease" and is treatable with antibiotics, so fatalities are quite rare.

The next pandemic is likely the first one that you think of when you hear the term "plague." Referred to as the Black Death, the Bubonic Plague wiped out roughly one-third of the

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world population. Most likely starting in Asia, the disease rapidly moved west via caravans. Instead of war, this plague spread mainly due to trade and exploration occurring at this point in time. The death was so rapid that many were simply left to rot on the ground, and cities became filled with death, disease, and stench. While England and France were initially at war during the beginning of the plague, they were so severely impacted that they were forced to call a truce, and the British feudal system began to collapse. While the Black Death was, without question, a very significant and dark point in time in world history, the renaissance that followed was certainly a light in the darkness. That is, for Europeans.

In 1492, Columbus sailed the ocean blue. Unfortunately, sailing the ocean blue resulted in diseases such as smallpox, measles, and bubonic plague, which Europeans had built resistance against, spreading to native populations in the Americas. These diseases absolutely demolished indigenous populations, wiping out an estimated 90 percent of their population, which looked different throughout the regions, but all were grim. Before the arrival of Christopher Columbus, the Taino population on the island of Hispaniola stood at an estimated 60,000 people. Within half a century, this population went from 60,000 to fewer than 500 people. At some point in between this half-century, the great Aztec Empire was wiped out by smallpox. If victims were not killed, they were greatly incapacitated and thus could not effectively resist European colonizers or produce enough crops to support their already dwindling population. These diseases killed tens of millions of natives and had such a large impact on the world that it is suspected to have created a cooling event in the atmosphere with an increase in CO₂.

A century after this massive pandemic, in 1665, the Great Plague of London began. This was a resurgence of the bubonic plague and took the lives of approximately 20 percent of

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London's quite sizable population. Mass graves began appearing all over the city and hundreds of thousands of pets were killed, as many believed that cats and dogs were responsible for the spread. Even after the brunt of the outbreak ended, London was still under great stress as the, mainly unrelated, Great Fire of London caused even more chaos.

Beginning in 1817 Russia, Cholera is a small intestine bacterial infection that spreads through feces-infected water or food. Cholera would be the source of a number of pandemics over the next century and a half, but the first one spread from Russia to British soldiers to India, Spain, Africa, Indonesia, China, Japan, Italy, Germany, and lastly America. Most of the deaths occurred in Russia and Italy, where millions died, whereas in the other countries an estimated 150,000 people lost their lives. A cholera vaccine, while certainly not the first major vaccination, was created in 1885. This is especially notable as it was the first active pandemic where a vaccination was used to help stop it in its traces. Unfortunately this vaccination was not entirely effective, as cholera would continue to earn its title of "pandemic" numerous times after the vaccine.

Ever persistent, the third Bubonic Plague Pandemic began in China, spreading to India and Hong Kong. Spread via fleas during an increase in mining activity, the disease claimed the lives of an estimated 15 million people and was a leading factor in both the Parthay and Taiping rebellion, yet another example of the political change that pandemics often bring about. India was the supplier of most plague deaths, resulting in civil unrest and revolts against the British rulers.

Widely forgotten, the 1875 Fiji Measles Pandemic and the 1889 Russian flu together claimed the lives of an estimated 400,00 people, with the Russian Flu being 360,000 of that

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400,000. The Fiji Measles Pandemic decimated the island nation, killing roughly one third of its population and littering the land with corpses and ghost villages. The Russian Flu is most notable as the first flu pandemic of great significance.

The next pandemic is the 1918 flu, which many have compared to the current COVID-19 pandemic. The 1918, or “Spanish Flu” resulted in the death of 50 million people, starting in Europe then quickly spreading to the United States and certain regions of Asia, and ultimately to throughout the rest of the world. Due to the first outbreak of the flu occurring in 1918 Madrid, the disease is referred to by the year or location of origin almost equally. The disease spread rapidly, but between spring of 1918 to summer of 1919, the majority of those infected had either died or developed immunity, so society began to return to some sense of normalcy.

The next flu pandemic was the 1957 Asian Flu that began in Hong Kong, then spread to the United States, and eventually England. The second wave was much worse than the first, taking the lives of an estimated 1.1 million people, until a vaccine was developed and successfully contained the virus and ended the pandemic.

Though sources dispute when the virus truly began, the next widespread pandemic was and remains quite controversial: HIV/AIDS. Likely beginning in the Democratic Republic of Congo roughly a half-century before the pandemic, AIDS obliterates one’s immune system, which often eventually results in death as one is unable to fight off diseases that the body would normally be able to. AIDS develops through the HIV virus, which can be sexually transmitted through body fluids, though cross-contamination of blood can also cause the disease. This usually occurs through sharing needles (while injecting illicit substances) or through blood transfusions, though we now have preventative measures to ensure blood transfusions are no

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longer a source of its spread. AIDS was first noticed in gay communities, mainly within the United States, though it most likely really spread from the DRC to Haiti, to New York City and San Francisco over the course of the 1960s/70s. Due to its prevalence in gay communities, the disease was first named GRID or Gay-Related Immune Deficiency. It was renamed as scientists realized it was also widely reported amongst haemophiliacs, who frequently underwent blood transfusions, in Haiti, which is why it is widely accepted to have originated in the nation. Because most of the victims were homosexuals, drug addicts, or racial minorities, many nations such as the United States did not take the virus seriously at first, nor did they put much effort into resolving it. While the government may not have taken the disease seriously, it was quite fatal, and has resulted in the death of 35 million people since its discovery, with a very rapid decline in many of its victims. It is highly contagious, though only spread through bodily fluids, contrary to the belief of many at the beginning of the pandemic, who believed saliva was a source of transmission, resulting in further ostracization of many AIDS patients. To date, HIV/AIDS continues to affect millions, with an estimated 1 in 7 not even aware they have it. It continues to disproportionately affect both racial and sexual minorities, and is still especially prevalent in Africa.

Somewhat recently, the 2003 SARS pandemic is believed to have started, similarly to Corona, with Bats. SARS stands for Severe Acute Respiratory Syndrome and symptoms include: fever, dry cough, head/body aches, amongst other respiratory problems. Originating in bats, the disease spread to cats, and then to Chinese humans, and eventually an estimated 26 other countries. This pandemic has also been frequently mentioned when discussing the current situation, as quarantine efforts were used to contain the virus and proved quite effective.

Although China has been criticized for trying to suppress information about the virus at the start of the pandemic, the quarantine successfully contained the disease within months, and served as the first real indication of how vastly unprepared modern day society remained when it came to pandemics.

While not necessarily qualifying as pandemics, both Ebola and Zika are notable as while many still unfortunately lost their lives to these diseases, the international community was able to better contain them to the point where they did not qualify as a pandemic. Just because they have different terminology, does not make them any less significant, in fact the opposite, as we should look to our handling of those diseases when thinking of future solutions.

Current Situation

Many of you may remember March as when life as you knew it changed to what it looks like today. On March 11th of this year, the World Health Organization formally announced that COVID-19 was officially a pandemic, at the time recorded in 114 countries and infecting over 100,000 people. While seen in animals, COVID-19 is a new coronavirus, a larger family of numerous illnesses, that was never before seen in humans. Our lack of control over its rapid spread and the chaos that ensued was an unfortunate call to reality regarding just how unprepared we were, against the advice of many epidemiologists over the course of time. It is similar to SARS in that it can be spread through droplets, specifically from sneezes or coughs, and symptoms include: fever, cough, and potentially pneumonia. Many also report other specific symptoms such as a lack of taste and smell, and pain in the throat and chest.

Beginning in November 2019 in China, whistleblower Dr. Li Wenliang went against the Chinese government and released information to other doctors, forcing China to alert the World Health Organization. Unfortunately Dr. Li ended up losing his life to the illness only one month after this act of bravery. With such a large population and no available vaccine to help contain its spread, the disease quickly traveled throughout the world and now over 163 countries have reported cases.

To date, roughly 1.5 million people have died, and there have been over 62 million cases. The United States leads this number with over 13 million cases and 265,000 deaths. India places second at almost 10 million cases, followed by Brazil at 6.29 million, Russia at 2.24 million, and so on, so forth.

Social distancing, quarantine, mandated mask-wearing, and school closures have helped contain the spread of the virus, though especially in the case of the United States all of these measures have been incredibly controversial. Some even went as far as “protesting the virus” earlier in the year, as outrage over social distancing measures spread, well, like an epidemic. With so much uncertainty, the development of a vaccine offers a beacon of hope for many, especially those anxiously awaiting a return to their normal daily lives. Numerous companies are in the process of developing a vaccine, most notably: Noravax, AstraZeneca, Johnson & Johnson, Sanofi and GlaxoSmithKline, Moderna, and Pfizer. Moderna and Pfizer are especially important to keep an eye on, as they continue to make bold claims regarding the success of their research. There is a lot of money at stake here, and more importantly, a lot of lives.

Possible Solutions

Different countries have had different approaches to tackling the pandemic, though the general consensus is: quarantine for 14 days, maintain 6 ft distance in public settings, limit social gatherings, wear a mask, and wash hands or use hand-sanitizer frequently. Countries that took the virus more seriously at its beginning have fared much better, with fewer deaths and fewer restrictions now, whereas nations like the United States have had to increase quarantine efforts as there have been more spikes in its spread. Further solutions include investing in research, funding vaccines, and enforcing stricter social distancing regulations. It would be wise to take a look at exactly what social distancing looks like around the world, as our perspective may be otherwise clouded by our personal experiences with the current pandemic.

Bloc Positions

Pandemic response has looked very different around the world, with some countries believing that quarantine would be extremely beneficial, while others doubted its effectiveness. In some pandemics, such as those regarding leprosy or HIV/AIDS, due to the perceived “judgement” upon those inflicted, sufferers have been outcast and governments have turned a blind eye, allowing nature to take its course. This current pandemic, however, has proved to be especially eye-opening in regards to how different our beliefs truly are.

China, Spain, Portugal, and Italy were some of the first nations where the current pandemic reared its ugly head. Starting in China, the virus quickly spread and news stories about how deadly and contagious it potentially was started to take over. With so much coverage, these nations were thrown into the spotlight as the world watched to see how they would react, this

experience is surely one their governments will not forget anytime soon, and will likely impact future policy.

Sweden, Belgium, France, and the UK have generally been extremely supportive of the World Health Organization's plan, and put a larger emphasis on cooperating as an international community.

Denmark, Germany, and Netherlands, on the flip side, have put a lot more trust into their own nation's plan and experimented a bit in regards to exactly when and how to introduce social distancing methods.

Australia, South Korea, and Japan enacted very strict policies in the beginning, with a true quarantine being followed, allowing for their cases to be extremely minimal and for "normal life" to have already resumed. By limiting the amount of people who contracted the virus in the first place, they were better able to prevent its spread. These countries took the pandemic especially seriously from the beginning.

The United States has come under quite a bit of criticism as social distancing measures were enacted but not properly enforced for quite some time, as miscommunication led to numbers rising astronomically. Without competition, the United States tops the charts for both deaths and total cases, with numbers only continuing to go up. On top of the destruction that Coronavirus has caused for the states, it has created a financial crisis and only added to political strife that coincided with the 2020 election. With a changing administration, the future remains unclear.

Suggestions for Further Research

It is important to note that the topic of this committee is not exactly COVID-19, though for obvious reasons it will be a major talking point. As the official topic is Pandemics, please keep in mind that we are not only seeking to react to the current pandemic, but also ensure we are actually prepared for one in the future. Use the information included regarding the history of pandemics, in addition to your own research, to help guide you when creating solutions based on your nation's policies. If we had prepared in the way we could potentially prepare for future pandemics now, millions of people could have been spared a brush with death, and life could have possibly returned to normal by now. If we wish to prevent something like this from occurring again in our lifetimes, we must not only create a plan for tackling this current virus, but also all those that will follow.

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