World Health Organization
Background Guide

Written By Mallory Fenskie and Karolina Pucek

Alma College and Yashmay World Schools
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Background Guide for World Health Organization (WHO)

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Committee Overview and Mandate

Introduction

The World Health Organization (WHO) was established in 1948 as a specialized agency of the United Nations. It functions as the main directing and coordinating authority on international health-related issues, and it strives to promote the attainment of the highest level of health for all people across the UN system.[1]

As noted in its 2025-2028 strategy, the WHO operates according to its 5Ps framework – it aims to promote, provide, protect, power, and perform the following six core objectives: (1) Respond to climate change as an escalating health risk in the 21st century; (2) Address health determinants and the root causes of ill health in key policies across sectors; (3) Advance the primary health care approach and essential health system capacities for universal health coverage; (4) Improve health service coverage and financial protection to address inequity and gender inequalities; (5) Prevent, mitigate and prepare for health risks from all hazards; and (6) Rapidly detect and sustain an effective response to all health emergencies.[2]

Governance, Mandate, Membership and Structure

The WHO has near-universal membership, including all UN Member States except the U.S., which withdrew in January 2026, and Argentina, which withdrew in March 2026. These Member States collaborate to promote the health and well-being of people around the world in line with the 2030 Agenda for Sustainable Development (2015). Some of the WHO's main areas of work include achieving universal health coverage, strengthening countries' responses to health emergencies, and increasing access to medicines and health products.[3]

Every year, all Member States of the WHO meet at the World Health Assembly (WHA) in Geneva, Switzerland.[4] During these meetings, countries evaluate progress, discuss global health policies, review major public health strategies, and approve the WHO budget.[5] Every year, several resolutions are adopted at the WHA. The last Assembly took place in May 2026, and it produced a variety of documents, most notably on malaria elimination, as well as the *2026-2036 Global Action Plan on Antimicrobial Resistance* and the first-ever WHA resolution pertaining to stroke.[6]

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[1] World Health Organization, "About WHO," World Health Organization, 2025, https://www.who.int/about.
[2] World Health Organization, "WHO Fourteenth General Programme of Work, 2025-2028," Who.int, n.d., https://www.who.int/about/general-programme-of-work/fourteenth.
[3] World Health Organization, "Our Work," World Health Organization, 2024, https://www.who.int/our-work.
[4] World Health Organization, "World Health Assembly," Who.int, 2019, https://www.who.int/about/governance/world-health-assembly.
[5] Priti Patnaik, "The World Health Assembly: What It Does, Why It Matters | Global Health NOW," globalhealthnow.org, May 13, 2022, https://globalhealthnow.org/2022-05/world-health-assembly-what-it-does-why-it-matters.
[6] World Health Organization, "WHA79," Who.int, 2026, https://apps.who.int/gb/e/e_wha79.html.

While the following list is non-exhaustive, CSW's mandate can be understood as:

> The WHO **will generally**: lead the global response to disease outbreaks, coordinating resources, medical equipment, and research; develop international protocols, including disease classifications and pharmaceutical guidelines; advise countries on improving their health systems, training healthcare workers, and improving access to essential medicines; provide advice, guidelines, policy recommendations, and coordination mechanisms to Member States and other UN bodies.
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> The WHO will **not generally**: enforce medical practices or mandates; provide hands-on medical care for patients; penalize countries that fail to adhere to health recommendations.[7]

The WHO's work covers all aspects of health protection and promotion. To ensure attention to region-specific issues, the WHO coordinates its actions through six regional offices.[8] The WHO will also collaborate with other UN entities, non-governmental organizations (NGOs), civil society organizations (CSOs), Member States, and other stakeholders to address health-related issues. Currently, the WHO is working on achieving Sustainable Development Goal 3, Good Health and Well-Being.[9] However, the Organization also acknowledges that SDG 3 lies at the heart of all of the SDGs, and must be taken into account across any and all developmental efforts.

Topic: Improving Health System Preparedness for Disease Outbreaks and Emergencies

Background

Good health and well-being are essential to achieving sustainable development. The health of a population affects all societal and economic elements of its country's progress, including efforts to eradicate poverty and inequality, provide quality education, and ensure a rise in labor supply and productivity. While chronic health issues arising from a state's particular vulnerabilities are often detrimental to a nation's development, public health emergencies can be even more catastrophic and exacerbate pre-existing crises. Public health emergencies can include infectious diseases, exposure to radioactive and chemical materials, food and water contamination, and

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[7] World Health Organization, "What We Do," Who.int (World Health Organisation, 2025), https://www.who.int/about/what-we-do.
[8] World Health Organization, "Regional Offices," Who.int, n.d., https://www.who.int/about/who-we-are/regional-offices.
[9] United Nations, "Goal 3: Ensure Healthy Lives and Promote Well-Being for All at All Ages," United Nations Sustainable Development Goals, 2023, https://www.un.org/sustainabledevelopment/health/.

threats associated with climate change.[10] In particular, addressing the spread of diseases is important to preventing excess deaths. Since 2011, there have been 1200 outbreaks of epidemic-prone diseases in 188 countries.[11] The most notable recent example of a global public health emergency is the COVID-19 pandemic, which UN Secretary-General António Guterres labeled an economic, social, and human rights crisis.[12] Currently, disease outbreaks affecting Member States include the surge in cholera in Southern Africa and the emergence of Ebola in the Democratic Republic of the Congo and Uganda.[13]

Some diseases, such as malaria, have been eradicated in many countries but localized outbreaks still occur, often influenced by climate-related events. In 2023, severe floods in Pakistan led to a fivefold increase in malaria cases compared to the previous year, highlighting the danger of compound crises.[14] Disease outbreaks and other public health emergencies occur every year, and all Member States have a potential to be exposed. However, certain countries are less equipped to properly address these issues due to limited health resources and services. Poor sanitation infrastructure and limited access to safe drinking water are also pervasive problems affecting large portions of the population in many states, often accelerating the spread of disease and making effective treatment difficult. Not all crises can be completely prevented, but through comprehensive monitoring and response measures, their impact can be minimized. To tackle this issue, the WHO adopted the *Pandemic Agreement* in 2025, which addresses pandemic prevention, preparedness, and response.[15] The agreement recognizes that protecting global health necessitates equitable access to vaccines, treatments, equipment, information, and care to all people in all communities around the world.[16] Most importantly, to ensure that no one is left

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[10] World Health Organization, "Health Emergencies," Who.int, 2023, https://www.who.int/our-work/health-emergencies.

[11] World Health Organization, "Health Emergencies."

[12] United Nations, "We Are All in This Together: Human Rights and COVID-19 Response and Recovery," United Nations, April 23, 2020, https://www.un.org/en/un-coronavirus-communications-team/we-are-all-together-human-rights-and-covid-19-response-and.

[13] World Health Organization, "Southern Africa Faces Acute Surge in Cholera due to Floods, Displacement," WHO | Regional Office for Africa, 2026, https://www.afro.who.int/news/southern-africa-faces-acute-surge-cholera-due-floods-displacement; World Health Organization, "Epidemic of Ebola Disease Caused by Bundibugyo Virus in the Democratic Republic of the Congo and Uganda Determined a Public Health Emergency of International Concern," Who.int (World Health Organization: WHO, May 17, 2026), https://www.who.int/news/item/17-05-2026-epidemic-of-ebola-disease-in-the-democratic-republic-of-the-congo-and-uganda-determined-a-public-health-emergency-of-international-concern.

[14] World Health Organization, "World Malaria Report 2023," Who.int, 2023, https://www.who.int/teams/global-malaria-programme/reports/world-malaria-report-2023.

[15] World Health Organization, "Pandemic Prevention, Preparedness and Response Accord," World Health Organization, June 10, 2024, https://www.who.int/news-room/questions-and-answers/item/pandemic-prevention--preparedness-and-response-accord.

[16] United Nations, "Secretary-General's Message on the International Day of Epidemic Preparedness," Secretary-General, December 18, 2025, https://www.un.org/sg/en/content/sg/statements/2025-12-27/secretary-generals-message-the-international-day-of-epidemic-preparedness.

behind in the global developmental challenge, regional prevention and preparedness measures, with a focus on the most vulnerable individuals and states and their extenuating circumstances, are necessary.

Subtopic 1: Climate Change and Environmental Determinants of Health

The UNEP's latest estimates indicate that if countries remain on the same path they are on now, the Earth could warm as much as 4.6°C within this century.[17] At the current pace of warming, experts predict that multiple climate-related tipping points will be reached soon. The human cost of climate change can not be underestimated. Between 2030 and 2050 alone, climate change is expected to result in 250,000 additional deaths annually from malnutrition, malaria, diarrhoea, and heat stress.[18] These damages to health will cost the planet up to US$ 4 billion per year by 2030.[19] Extreme weather events, caused or worsened by climate change, include storms, extreme heat, floods, droughts, and wildfires.[20] These extreme weather events can contribute to disease outbreak and spread. For instance, when people are forced into crowded and unsanitary conditions following a disaster, diseases can circulate easily and quickly while healthcare services might be unavailable or highly limited.[21] Additionally, when temperatures change drastically, diseases may begin occurring in previously unaffected regions and overwhelm the local healthcare systems.[22] It is estimated that 58% of infectious diseases have been worsened in some way by climate hazards.[23] Therefore, it is important to consider the impact of climate change when building resilient and sustainable healthcare systems.

During the 79th World Health Assembly, the Member States of the WHO worked together to operationalize the *Global Action Plan on Climate Change and Health*, which was adopted one year prior.[24] The *Global Action Plan* positions health as a crucial part of the climate solution and provides a strategic framework to guide Member States, UN bodies and stakeholders in enhancing surveillance and early warning systems to minimize the preventable human cost of

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[17] United Nations Environment Programme, "The Climate Crisis Explained in Seven Graphs," UNEP, 2026, https://www.unep.org/news-and-stories/story/climate-crisis-explained-seven-graphs.
[18] World Health Organization, "Climate Change," World Health Organization (World Health Organization: WHO, August 9, 2019), https://www.who.int/health-topics/climate-change#tab=tab_1.
[19] Ibid.
[20] United Nations Framework Convention on Climate Change, "Climate Change Leads to More Extreme Weather, but Early Warnings Save Lives," Unfccc.int, 2021, https://unfccc.int/news/climate-change-leads-to-more-extreme-weather-but-early-warnings-save-lives.
[21] National Academies, "Does Climate Change Increase the Spread of Infectious Disease?," National Academies, 2022, https://www.nationalacademies.org/news/does-climate-change-increase-the-spread-of-infectious-diseases.
[22] Ibid.
[23] Camilo Mora et al., "Over Half of Known Human Pathogenic Diseases Can Be Aggravated by Climate Change," *Nature Climate Change* 12, no. 12 (August 8, 2022), https://doi.org/10.1038/s41558-022-01426-1.
[24] World Health Organization, "Health, Climate Change, Air Quality and Energy at the 79th World Health Assembly," Who.int, 2026, https://www.who.int/news-room/events/detail/2026/05/18/default-calendar/health-and-climate-change-at-the-79th-world-health-assembly.

climate change.[25] Additionally, the plan signals the elevation of climate change as the first strategic objective of the WHO's *Fourteenth General Programme of Work* (GPW14, 2025-2028).[26] An important part of integrating climate change into healthcare mechanisms is acknowledging its layered environmental effects. Not all climate-related public health emergencies are immediately recognizable as a result of climate change-induced extreme weather events. While floods, heat waves, storms, and wildfires can all lead to or accelerate disease outbreaks or other emergencies, oftentimes the consequences of climate change are more subtle and concealed by Environmental Determinants of Health (EDH). The WHO defines EDHs as "global, regional, national, and local environmental factors that influence human health, including physical, chemical, and biological factors external to a person, and all related behaviors."[27] These can include air pollution, water contamination, and chemical hazards and toxins. For instance, WHO data indicates that today, 99% of the global population breathe air that exceeds WHO guideline limits and contains high levels of pollutants.[28] The adverse health effects produced by such EDHs can compound disease outbreaks and emergencies, especially in low- and middle-income countries (LMICs), which frequently display higher levels of exposure to toxic substances and pollutants and are at a heightened risk of extreme weather events, while lacking the necessary preparedness and response measures.

Many UN bodies have already implemented policies and programs tackling this issue. The Pan American Health Organization (PAHO), one of the WHO's regional offices, launched the SMART Hospital initiative in 2009. The initiative provides green energy technologies and storage to hospitals in climate-vulnerable areas to keep them functional and running during emergencies. The WHO has also partnered with UNICEF in 2025 to address the air pollution in Kyrgyzstan, which is home to one of the world's most polluted cities.[29] Member States must now work together to draw lessons from successful initiatives and prepare efficient strategies countering the immense burden climate change and EDHs impose on our health.

Subtopic 2: Lessons Learned from the COVID-19 Pandemic

The COVID-19 pandemic exemplifies the importance of health in global development. Not only did the pandemic cause approximately 14.9 million deaths during its peak between 2020 and 2021, it also reversed decades of progress in poverty reduction and education and caused an

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[25] World Health Organization, "WHA78 Debriefing: Global Action Plan on Climate Change and Health," Who.int, 2025, https://www.who.int/news-room/events/detail/2025/07/23/default-calendar/wha78-debriefing--gap.
[26] World Health Organization, "WHO Fourteenth General Programme of Work, 2025-2028."
[27] Pan American Health Organization, "Environmental Determinants of Health - PAHO/WHO | Pan American Health Organization," www.paho.org, 2022, https://www.paho.org/en/topics/environmental-determinants-health.
[28] World Health Organization, "Air Pollution," World Health Organization, 2024, https://www.who.int/health-topics/air-pollution#tab=tab_1.
[29] United Nations Sustainable Development Group, "Breathing Easier: UN Leads Clean Air Action in Kyrgyzstan," Un.org, 2025, https://unsdg.un.org/latest/stories/breathing-easier-un-leads-clean-air-action-kyrgyzstan.

increase in hunger, child labor, and gender inequality.[30] Evaluating lessons from the pandemic and integrating them into sustainable development plans across all sectors has since been at the forefront of efforts conducted by the United Nations system. According to the Organization for Economic Co-operation and Development (OECD), the key policies to improve health system resilience and prevent another large-scale disease outbreak are: improving population health; health workforce retention; efficient data collection and use; international cooperation; building supply chain resilience; and enhancing trust in leadership and governance.[31] These policy actions constitute the crucial components necessary in mitigating another crisis, or in ensuring that its effects are not as detrimental as those of the COVID-19 pandemic.

Improving population health requires a multilevel approach, targeting most vulnerable regions that are typically less equipped for dealing with disease outbreaks. The WHO published the guidance *Improving Public Health in Health Systems* in 2026, aiming to provide Member States with strategic advice on implementing country-level policies that strengthen the health of the population. Those can include expanded vaccine access through public-private partnerships in LMICs, redirecting public funds toward healthcare services, and partnering with civil society organizations and international stakeholders to develop smart financing options for treatment.[32] Scaling up immunization efforts in particular is an important first step in building population resilience. During the pandemic, many children missed out on essential vaccines, leading the WHO to rebrand its *Expanded Programme on Immunization* to the *Essential Programme on Immunization*, which adopted a new approach framed by three key components: Catch-Up, Restore and Strengthen.[33] Smaller vaccination drives can be beneficial to Member States facing acute crises, but it is absolutely crucial to ensure consistent access to immunization across all Member States to lower the chances of deadly disease outbreaks.

Efficient data collection and use are equally crucial as they enable the creation of early warning systems. The WHO's *Early Warning, Alert and Response System (EWARS)* is an initiative meant to improve disease outbreak detection in emergency settings through early monitoring and

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[30] United Nations, "14.9 Million Excess Deaths Associated with the COVID-19 Pandemic in 2020 and 2021," United Nations, n.d., https://www.un.org/en/desa/149-million-excess-deaths-associated-covid-19-pandemic-2020-and-2021; Focus2030, "The Consequences of the Covid-19 Pandemic on the 17 Sustainable Development Goals - Focus 2030," Focus 2030, February 23, 2022, https://focus2030.org/en/the-consequences-of-the-covid-19-pandemic-on-the-17-sustainable-development-goals/.

[31] Francesca Colombo, "Lessons Learned from COVID-19 to Prepare for Future Pandemics and Health Crises," 2024, https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/undesa_pd_2024_cpd58_egm_session_v_francesca_colombo.pdf.

[32] World Health Organization , "Improving Public Health in Health Systems," 2026, https://iris.who.int/server/api/core/bitstreams/421860ed-511c-4291-b06f-72992ffed3fa/content.

[33] World Health Organization, "The Big Catch-Up: An Essential Immunization Recovery Plan for 2023 and Beyond," Who.int, July 26, 2023, https://www.who.int/publications/i/item/9789240075511.

surveillance of epidemic-prone diseases.[34] The system is currently focused on countries affected by conflict or having experienced a natural disaster, however, implementing smaller-scale early warning systems has the potential to provide all countries with the necessary information to guard population health. When implementing such early warning systems, Member States must consider additional challenges, such as infrastructure and digital connectivity. Depending on countries' individual situations, different approaches might be warranted.

Subtopic 3: Increasing Self-Sufficiency in Health Matters in Developing Nations

The central promise of the 2030 Agenda is to "Leave No One Behind."[35] The importance of this promise was highlighted by the COVID-19 pandemic, which disproportionately affected developing nations, in particular LMICs. These countries accounted for 81% of COVID-19 deaths between 2020 and 2021, with 68% of these deaths being concentrated in only 10 nations worldwide.[36] LMICs were most affected due to fragile healthcare infrastructure, a large prevalence of informal employment, overcrowded conditions that made social distancing difficult, and a heavy reliance on imports of medical supplies.[37] In some regions, such as Sub-Saharan Africa, countries import at least 70% of all pharmaceuticals and over 99% of all vaccines.[38] With such high dependence on out-of-country products, nations are incredibly vulnerable to supply chain disruptions which tend to occur frequently during emergencies and crises. During the pandemic, almost half of all Member States introduced some sort of export ban, leading to international European contracts for the purchase of COVID-19 medical supplies being labeled "not worth the paper they were written on."[39]

Increasing the self-sufficiency of LMICs in health matters – ensuring that LMICs are able to produce their own products and persist during emergencies without immediate aid from other countries – has many benefits. Not only does it strengthen local – and by extension regional and global – resistance to disease outbreaks, but it also facilitates equitable development, poverty reduction, gender equality, education, and food security. In 2021, the Economic Commission for Latin America and the Caribbean (ECLAC) published the *Plan for Self-Sufficiency in Health Matters in Latin America and the Caribbean*, which outlines short-, medium- and long-term

[34]World Health Organization, "Early Warning, Alert and Response System (EWARS)," Who.int, n.d., https://www.who.int/emergencies/surveillance/early-warning-alert-and-response-system-ewars.
[35] United Nations, "UNSDG | Universal Values Principle Two: Leave No One Behind," unsdg.un.org (United Nations, 2022), https://unsdg.un.org/2030-agenda/universal-values/leave-no-one-behind.
[36] United Nations, "14.9 Million Excess Deaths Associated with the COVID-19 Pandemic in 2020 and 2021."
[37] Choon-Looi Bong et al., "The COVID-19 Pandemic: Effects on Low- and Middle-Income Countries," *Anesthesia & Analgesia* 131, no. 1 (April 2020): 1, https://doi.org/10.1213/ane.0000000000004846.
[38] World Bank Group, "World Bank Group Approach to Medical Supplies Manufacturing," IFC, 2025, https://www.ifc.org/en/what-we-do/sector-expertise/health/world-bank-group-approach-to-medical-supplies-manufacturing.
[39] United Nations Economic Commission for Africa, "Covid-19 and Export Restrictions: The Limits of International Trade Law and Lessons for the AfCFTA | United Nations Economic Commission for Africa," Uneca.org, 2015, https://archive.uneca.org/publications/covid-19-and-export-restrictions-limits-international-trade-law-and-lessons-afcfta.

initiatives to bolster local vaccine and essential medicines procurement and development.[40] The Latin American and Caribbean region was among those hit the hardest by the COVID-19 pandemic, and one of the key reasons why was the reliance on imports of medical equipment and vaccines. The strategies proposed in ECLAC's plan include expanding local production capacities for vaccines and critical medicines to prevent supply chain bottlenecks; aligning national health regulations across countries to speed up the approval and distribution of medical product; creating regional platforms to coordinate clinical trials; and purchasing vaccines in bulk for several Member States to lower costs and secure fairer prices from pharmaceutical companies.[41]

The WHO also launched the *Biomanufacturing Workforce Training Initiative* in 2024. The program partners with institutions in LMICs around the world and establishes hubs to train the local workforce in manufacturing controlled medicines.[42] Several countries are running their own national initiatives to ensure a local supply of vaccines, and have made pledges to reduce their reliance on imports. For instance, the African Union has set a goal of having 60% of vaccines and medicines used in Africa be manufactured in Africa by 2040.[43] Within this goal, Nigeria is aiming to produce 70% of its medical supplies domestically within the next five years, and the Rwandan government has offered to establish a continental biotechnology hub within its country.[44] These actions constitute important first steps in building long-term resilience and fostering sustainable development.

Conclusion

Disease outbreaks and public health emergencies are detrimental to sustainable development, as the COVID-19 pandemic recently demonstrated. Member States now need to take the lessons the pandemic has taught us to strengthen their health systems and ensure that a crisis of this scale never repeats itself. One of the most important lessons emerging from the pandemic has been the

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[40] Economic Commission for Latin America and the Caribbean, "Plan for Self-Sufficiency in Health Matters in Latin America and the Caribbean: Lines of Action and Proposals," Cepal.org (CEPAL, 2021), https://www.cepal.org/en/publications/47253-plan-self-sufficiency-health-matters-latin-america-and-caribbean-lines-action-and.

[41] Rocío Sáenz et al., "Public Health Research and Health Equity Threatened by New US Policies: Impact and Opportunities for Latin America," *The Lancet Regional Health - Americas* 57 (May 2026): 101411, https://doi.org/10.1016/j.lana.2026.101411; Economic Commission for Latin America and the Caribbean, "ECLAC Presents Comprehensive Plan for Health Self-Sufficiency to Strengthen Capacities for Producing and Distributing Vaccines and Medicines in CELAC Countries," Economic Commission for Latin America and the Caribbean, 2021, https://www.cepal.org/en/news/eclac-presents-comprehensive-plan-health-self-sufficiency-strengthen-capacities-producing-and.

[42] World Health Organization, "WHO Expands Global Biomanufacturing Workforce Network to Strengthen Equitable Access and Health Security," Who.int (World Health Organization: WHO, April 29, 2026), https://www.who.int/news/item/29-04-2026-who-expands-global-biomanufacturing-workforce-network-to-strengthen-equitable-access-and-health-security.

[43] World Bank Group, "World Bank Group Approach to Medical Supplies Manufacturing."

[44] Ibid.

dire need to increase the self-sufficiency of developing nations. LMICs are essential for global development, and their independence in producing medicines and responding to crises is necessary for protecting the global community. At the same time, Member States must remember that climate change is accelerating and its impacts will undeniably worsen in the upcoming decades. Therefore, environmental action is deeply intertwined with progress in health matters.

Questions to Consider

As delegates conduct further research and consider how to address the topic, they should consider: How can Member States best implement the lessons learned from the COVID-19 pandemic within their national health plans? What actions can the WHO take to build strong early warning systems across all regions worldwide? How can stakeholders facilitate the transformation of health systems to mitigate the health effects of chronic exposure to harmful EDHs? How can the WHO collaborate with Member States and other partners to assist LMICs in becoming more self-sufficient in health matters? How can Member States collaborate with one another to build regional biomanufacturing hubs for vaccines and essential medicines?

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