



World Health Assembly Simulation 2023 Committee A Theme Guide

Public Health Emergencies Preparedness and Response

What are the Key Elements of Public Health Emergencies Preparedness and Response?

Public health emergencies are defined by both their potential health consequences as well as their causes and downstream effects (Nelson et al., 2007). Critically, public health *threats* become public health *emergencies* when the health consequences of a situation overwhelm a community's capacity to adequately address them (Nelson et al., 2007). Many countries today are facing multiple, complex emergencies that have overwhelmed their capacity to address them. This, as we have seen over the past several years, is one of the reasons why low-to-middle-income countries (LMICs) are disproportionately affected by public health emergencies. There is an urgent need to develop robust public health emergency preparedness systems to mitigate future emergencies and disasters. As the WHO notes in their 2017 *Strategic Framework for Emergency Preparedness*, robust governance, fortified response capacities, and increased resources are all key elements of effective emergency preparedness systems.

Emergency preparedness encompasses all activities undertaken to prepare for, respond to, and recover from emergencies and disasters. This includes research on the prevention and management of epidemic and pandemic-prone diseases, the strengthening and expansion of systems to rapidly detect, investigate and assess potential threats to public health, and immediate and systematic responses to acute emergencies. Emergency preparedness and response are strongly shaped by current events. It requires planning and quick responsiveness to new focus areas and objectives. The rapid detection, verification, assessment and communication of potential health threats is essential to saving lives and reducing the negative impact of health emergencies. Countries, communities and organizations must be able to respond immediately and effectively to potential health threats and emergencies caused by any hazard. By developing strong preparedness and response capacities, we develop greater health system resilience—when health systems are strengthened, we implement International Health Regulations (IHR) effectively.

Collaboration amongst various stakeholders and across multiple levels of government is essential for accessing needed expertise, which in turn contributes to awareness and adaptive management as new knowledge is gained. For example, in the 2003 severe acute respiratory syndrome (SARS-CoV-1) outbreak, multiple authors in different countries noted a lack of evidence to inform definitions and metrics for public health emergency preparedness. It is crucial to ensure a continued review and reflection on emergency preparedness to assess ongoing risks, reduce mortality and morbidity, and mitigate inequitable impacts of infectious disease.

Theme Guide Agenda for May 1st

Committee Session 1 – Public Health Interventions

Public health interventions include measures such as quarantine, isolation, contact tracing, and measures to promote social distancing and prevent transmissions, such as mask-wearing and hand hygiene. Monitoring daily data from a public health perspective and measuring and evaluating preventive, therapeutic practices are important in managing the pandemic and preventing future outbreaks.

Guiding Questions

1. Should the current iteration of the International Health Regulations (2005) be revised or should a new treaty be negotiated?
2. Independent of whether the International Health Regulations (IHR) is revised or whether there is a new treaty, should these regulations be binding?
3. To what extent should public health interventions be built into the revised IHR or a new treaty?

Resources

- Lin, C.-F., Huang, Y.-H., Cheng, C.-Y., Wu, K.-H., Tang, K.-S., & Chiu, I.-M., (2020). [Public Health Interventions for the COVID-19 Pandemic Reduce Respiratory Tract Infection](#). *Frontiers in Public Health*, 8.
- Litvak, E., Dufour, R., Leblanc, É., Kaiser, D., Mercure, S.-A., Nguyen, C.T., & Thibeault, L. (2019). [Making sense of what exactly public health does: a typology of public health interventions](#). *Innovations in Policy and Practice*, 111, 65-71.
- Keller, L.O., Strohschein, S., Lia-Hoagberg, B., Schaffer, M.A. (2004). [Population Based Public Health Interventions Practice-Based and Evidence-Supported: Part I](#). *Public Health Nursing*, 21(5), 453-468.
- Nelson, C., Lurie, N., Wasserman, J., & Zakowski, S. (2007). [Conceptualizing and defining public health emergency preparedness](#). *American Journal of Public Health*, 97(Suppl 1), S9-S11.
- Puryear, B. & Gnugnoli, D.M. (2022). [Emergency Preparedness](#). In *StatPearls [Internet]*. Treasure Island, FL: StatPearls Publishing. <https://www.ncbi.nlm.nih.gov/books/NBK537042/>
- World Health Organization [WHO]. (2017). *A strategic framework for emergency preparedness*. WHO. https://eclass.yorku.ca/pluginfile.php/4809100/mod_resource/content/1/Emergency%20Preparedness.pdf
- Duff, J., Liu, A., Saavedra, J., Batycki, J., Morancy, K., Stocking, B., Gostin, L., Galea, S., Bertozzi, S., Zuniga, J., Alberto-Banatin, C., Dansua, A., Del Rio, C., Kulzhanov, M., Lee, K., Scaglia, G., Shahpar, C., Ullmann, A., Hoffman, S., ... Szapocznik, J. (2021). A public health convention for the 21st century. *The Lancet. Public Health*. [https://doi.org/10.1016/S2468-2667\(21\)00070-0](https://doi.org/10.1016/S2468-2667(21)00070-0)
- Gostin, L.O., DeBartolo, M., & Freidman, E. (2015) The international Health Regulations 10 years on; the governing framework for global health security. *Lancet*. 386(10009); p2222-6. [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(15\)009484/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(15)009484/fulltext)

Committee Session 2 - Should Health Policies across the World Mandate Influenza Vaccine for Healthcare Workers?

Influenza vaccines were strongly recommended to healthcare workers (HCW) and other healthcare personnel at risk for exposure to communicable diseases due to their contact with patients and the work environment. Influenza has a potential to transform into a pandemic and has been predicted to spread to every corner of the world in future; hence, every country must be prepared for such a global event. Influenza is an infectious disease that has resulted in adverse health outcomes ever since its first outbreak in 1918. Influenza vaccines are not currently mandatory for HCWs in most countries. Immunization is recognized as one of the most effective methods in preventing the transmission of influenza and is also highly recommended by many healthcare professionals.

Guiding Questions

1. Does the WHO have the authority to make this recommendation?
2. Should people with medical exemptions be required to take the vaccine?
3. Should the criteria for mandating the vaccine be updated frequently or be binding?

Resources

- [Mandatory influenza vaccination of health care workers: translating policy to practice](#)
- [Influenza immunization among Canadian health care personnel: a cross-sectional study.](#)
- [Vaccination of Healthcare Workers: Critical Analysis of the Evidence for Patient Benefit Underpinning Policies of Enforcement.](#)
- [Knowledge, attitudes, behaviours, and beliefs of healthcare provider students regarding mandatory influenza vaccination](#)

Theme Guide Agenda for May 2nd

Committee Session 1 - *International Cooperation*

International cooperation involves coordinating efforts across borders to prevent the spread of the disease and ensure that resources are distributed fairly. It encompasses all activities aimed at supporting people in need and promoting economic, social and cultural development around the globe.

Guiding Questions

1. Should governments provide support/education for one another and how to deal with outbreaks?
2. Should high-income countries be required to provide support to low-income countries?

Resources

- [International Cooperation and Development: A Conceptual Overview](#)
- [Cooperation Among Countries for Health Development \(CCHD\)](#)
- [Equity, International Cooperation, and Global Public Health: Use of the Common but Differentiated Responsibilities Principle in the Fight against COVID-19](#)
- [International Cooperation Welcomed Across 14 Advanced Economies](#)

Committee Session 2 – *Why is there a need of Improved Surveillance System & Public Health Infrastructure?*

Ebola virus (EBOV) contributes to significant morbidity and mortality, particularly in countries in which it is endemic in East-Central and West Africa. EBOV was first identified in 1976 with two

outbreaks in South Sudan and the Dominican Republic of Congo. Since its discovery, weak surveillance systems and poor public health infrastructures have exacerbated and contributed to numerous outbreaks of EBOV, including the 2014 Western African Ebola virus epidemic. Globalization has made it easier for infectious diseases to spread across borders, increasing the risk of pandemics.

Guiding Questions

1. Why have drug companies been resistant to developing an Ebola vaccine for many years?
2. Should the WHO provide a guideline to countries world-wide on how to monitor disease outbreaks?
3. How can countries play a role in improved diagnostic testing?

Resources

- [The Political Economy of Ebola](#)
- [The social and political dimensions of the Ebola response: Global inequality, climate change, and infectious disease](#)
- [Introduction: ebola and international relations](#)
- [Unprecedented pace and partnerships: the story of and lessons learned from one Ebola vaccine program.](#)
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7061886/>
- <https://www.who.int/news-room/fact-sheets/detail/ebola-virus-disease>
- <https://www.cdc.gov/vhf/ebola/about.html>
- <https://www.cdc.gov/vhf/ebola/history/2014-2016-outbreak/index.html>