



**World Health
Organization**

KEPIRMUN'26 WHO

Agenda Item: *Access to Healthcare Among Developing Countries*

- 1) *Letter from the Head of Academy and USG*
- 2) *Introduction to the Committee*
 - 2.a *What is the World Health Organization (WHO)?*
 - 2.b *Structure and Decision-Making Process of WHO*
 - 2.c *Role of Member States in WHO*
- 3) *Introduction to the Agenda Item*
 - 3.a *Key Terms and Concepts*
- 4) *Background on the Agenda Item: Access to Healthcare Among Developing Countries*
 - 4.a *Challenges in Implementing Universal Health Coverage*
 - 4.a.1 *Influence of Private Insurance Markets on Equitable Access*
 - 4.a.2 *Effects of Healthcare Spending on National Budget*
 - 4.b *Role of International Financial Institutions*
 - 4.b.1 *Formation of Financial Mechanisms to Strengthen Health Systems*
 - 4.b.2 *Financing UHC in Low and Middle Income Countries*
 - 4.c *Policies for Medicine Access and Regulation*
 - 4.c.1 *Strengthening Regulatory and Supply Chain Systems*
 - 4.c.2 *Ensuring Safe and Efficient Distribution Mechanisms*
 - 4.d *Role of mHealth and Digital Health Solutions*
 - 4.d.1 *Integration of mobile health technologies into national health systems*
 - 4.d.2 *Long-Term Sustainability of Digital Health Models*
 - 4.e *Gaps in Global Pandemic Governance*
 - 4.e.1 *Weak Coordination Mechanisms*
 - 4.e.2 *Limitations of International Health Regulations*
- 5) *Existing International Frameworks and WHO Programs*
 - 5.a *Universal Health Coverage (UHC)*
 - 5.b *International Health Regulations (IHR)*
 - 5.c *Sustainable Development Goal 3 (SDG 3)*

6) *Notable NGOs and Partner Organizations*

7) *Topics a Resolution Should Address*

8) *Bibliography*



Letter From Head of Academy

Dear Delegates

I am delighted to welcome you to the WHO Committee of KEPİRMUN'26. It is a pleasure for us to host you in this conference, where we unite to debate transnational health policies and mechanisms.

Global health stands at the core of international cooperation and concerns millions of people. This committee will provide you a window of opportunity to become more aware of inequalities in international health services and understand stated policies regarding this matter.

Your responsibility as delegates in this committee is to balance national policy positions with international human rights obligations and global health responsibilities. You should think constructively and discuss the matter with collaboration as you construct realistic and sustainable solutions.

I am excited to hear about your success and the inspiring solutions you construct in this committee. I am sure we will have incredible experiences during this conference. Please do not hesitate to contact me or our team if you have any questions or require assistance.

Kind Regards,

Duygu SEZER

Head of Academy

E-Mail: duygusezerkepir5099@gmail.com

Letter From Under Secretary General of WHO

Honorable Delegates,

It is with great pleasure that I welcome you to the World Health Organization Committee of KEPIRMUN'26. As your Under-Secretary-General, I am truly honoured to guide you through discussions that address some of the most urgent and complex health challenges facing our global community today.

In an era shaped by pandemics, humanitarian crises, climate-related health risks, and persistent inequalities in healthcare access, the role of international cooperation has never been more vital. The World Health Organization stands at the center of global health governance, striving to promote well-being, strengthen health systems, and ensure that every individual can exercise their fundamental right to health.

Throughout this conference, you will be expected to critically assess global health policies, represent your assigned countries with accuracy and diplomacy, and work collaboratively toward feasible and sustainable solutions. Effective debate in this committee will require evidence-based arguments, mutual respect, and a commitment to multilateralism.

As USG, my responsibility is to support you in maintaining both academic excellence and procedural integrity. I encourage each of you to participate actively, think innovatively, and approach every session with professionalism and determination.

I am confident that your dedication and insight will lead to meaningful and impactful resolutions. I look forward to witnessing your leadership, collaboration, and growth throughout this conference.

Wishing you all a productive and memorable MUN experience.

Sincerely,

Efe Egin

Under-Secretary-General

E-Mail: efe.egin08@gmail.com

2) Introduction To The Committee

The WHO (World Health Organization) is the leading authority on international public health within the United Nations system. Established in 1948, it coordinates global health efforts, responds to disease outbreaks, strengthens healthcare systems, and promotes equitable access to essential medical services. Its central objective is to ensure that all individuals, regardless of geography or economic status, can attain the highest possible standard of health.

Through policy guidance and capacity-building initiatives, WHO supports sustainable healthcare infrastructure, workforce development, disease surveillance, and expanded access to essential medicines, advancing progress toward Universal Health Coverage (UHC).

Operationally, WHO functions through the World Health Assembly (WHA), which serves as its primary decision-making body. To reflect the organization's multilateral attributions, policies and resolutions are adopted with collaboration. Through six regional offices, WHO maintains international coordination and coherence, adapting global strategies to regional contexts.

2.a) What is the World Health Organization (WHO)

The World Health Organization (WHO) is a specialized agency of the United Nations established in 1948 to direct and coordinate international public health efforts. It works with 194 Member States to set global health standards, provide technical assistance, support health system strengthening, and respond to health emergencies.

WHO's primary objective is to ensure that all people attain the highest possible level of health, defined as complete physical, mental, and social well-being. As the committee addressing access to healthcare among developing countries, WHO plays a crucial role in promoting Universal Health Coverage, reducing health inequalities, and guiding international cooperation to improve healthcare access worldwide.

2.b) Structure and Decision-Making Process of WHO

The World Health Organization (WHO) operates through a structured system designed to ensure effective global health governance. Its main decision-making body is the World Health Assembly (WHA), composed of representatives from all 194 Member States, which meets annually to set policies, approve the budget, and determine the organization's priorities.

The Executive Board, made up of health experts elected by Member States, implements the decisions and advises the Assembly. The WHO Secretariat, led by the Director-General, carries out the day-to-day operations and coordinates programs worldwide. This structure allows WHO to promote collaboration, ensure accountability, and guide international responses to pressing health challenges, including improving access to healthcare in developing countries.

2.c) Role of Member States in WHO

Member States play a central role in the functioning of the World Health Organization (WHO), as they are the primary decision-makers and contributors to the organization's policies and programs. Through their participation in the World Health Assembly, all 194 Member States propose resolutions, vote on global health priorities, approve the budget, and shape international health regulations.

They are also responsible for implementing WHO guidelines and commitments within their own national health systems. By collaborating, sharing data, and supporting global initiatives, Member States ensure that WHO's strategies—such as improving access to healthcare in developing countries—are effectively translated into concrete action at both national and international levels.

3) Introduction to the Agenda Item

Access to healthcare remains a major challenge in many developing countries. Millions of people lack access to basic medical services due to weak healthcare systems, limited funding, shortages of medical professionals, and high treatment costs. According to the World Health Organization, significant disparities persist in areas such as maternal care, infectious disease treatment, and access to essential medicines.

Addressing these inequalities is essential for promoting sustainable development, reducing poverty, and improving overall quality of life. Strengthening healthcare systems through international cooperation and investment is crucial to achieving universal health coverage.

3.a Key Terms

Universal health coverage(UHC): Universal Health Coverage (UHC) ensures that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship.

Primary healthcare: Primary Health Care (PHC) is a whole-of-society approach to health, emphasizing essential, accessible, and community-based care, covering promotion, prevention, treatment, and rehabilitation. It serves as the first point of contact, aims for equitable, and continuous care that addresses people's health needs.

Health equity: The term defines that everyone has a fair and just opportunity to attain their highest level of health, achieved by reducing inequality and overcoming historical injustices.

The International Health Regulations (IHR): The International Health Regulations (IHR) are a legally binding framework developed by the World Health Organization to help countries prevent, detect, and respond to public health risks that may spread across borders.

Healthcare infrastructure: Healthcare infrastructure is the comprehensive framework of physical, digital, and human components necessary to deliver effective health services. It is a complex socio-technical system that includes buildings, equipment, personnel, and supporting technologies.

4) Background on the Agenda Item: Access to Healthcare Among Developing Countries

Access to healthcare remains one of the most pressing global health challenges, particularly in developing countries where limited resources, weak health systems, and socio-economic inequalities restrict the availability and quality of essential services. As the leading international authority on public health, the World Health Organization (WHO) works to promote equitable access to safe, effective, and affordable healthcare for all. Despite global progress in reducing mortality rates and combating infectious diseases, millions of people in developing nations still lack access to basic medical services, medicines, and trained health professionals. Addressing these disparities is essential to achieving Universal Health Coverage (UHC) and fulfilling the global commitment to ensure health as a basis human right.

4.a Challenges in Implementing Universal Health Coverage

Implementing Universal Health Coverage (UHC) in developing countries involves complex financial, structural, and political difficulties. Many states face limited public health budgets, making it difficult to expand services while maintaining quality of care. Weak infrastructure, shortages of trained healthcare professionals, and insufficient medical supplies further hinder effective service delivery. Additionally, inefficient health financing systems and heavy reliance on out-of-pocket payments reduce financial protection for vulnerable populations. Governance challenges, lack of coordination, and insufficient health data systems also slow progress. Within the framework of the World Health Organization (WHO), addressing these challenges requires stronger primary healthcare systems, sustainable funding strategies, and international cooperation among Member States.

4.a.1 Influence of Private Insurance Markets on Equitable Access

Especially in developing countries, private health insurance markets can significantly impact access to healthcare. While private insurance can help expand healthcare funding and provide faster access to services for some population groups, it can also create inequalities in access to healthcare. High income individuals are generally in a position to obtain private insurance, and therefore may get receive better and faster medical care compared to low income groups who don't in a position to obtain private insurance have to rely on limited medical care. This situation can widen the gap between different socioeconomic groups and make more difficult to get equality in health systems. While the World Health Organization (WHO) emphasizes that private sector participation can support health systems, it also states that strong government regulations and policies are needed to ensure that private insurance does not undermine the goal of Universal Health Coverage and equitable access to healthcare for all.

4.a.2 Effects of Healthcare Spending on National Budget

Health expenditures have a significant impact on the national budgets of many developing countries. Governments must allocate significant financial resources to maintain hospitals, train healthcare workers, purchase medical equipment, and provide essential medicines. Although, limited economic capacity competing national priorities such as education, substructure and security generally make it difficult to allocate sufficient funds to the health sector. In some cases, high healthcare costs can strain national budgets and increase dependence on international aid or external funding. At the same time, insufficient investment in healthcare can lead to poor health outcomes and slow economic development. The World Health Organization (WHO) emphasizes that efficient and sustainable health financing systems are essential to balance health expenditures while providing accessible and quality health services for the entire population.

4.b Role of International Financial Institutions

International financial institutions play a significant role in supporting health systems in developing countries. Organizations such as the World Bank and the International Monetary Fund provide financial assistance, loans, and technical expertise to help governments strengthen their health sectors. These institutions generally support programs that improve health substructure, expand health coverage, and enhance health financing systems. In addition, they collaborate with the World Health Organization (WHO) and national governments to promote policies that aim to achieve Universal Health Coverage and improve health consequences. However, while these aids help countries bridge funding gaps, it is also crucial for governments to ensure that financial assistance is used effectively and sustainably to build resilient health systems.

4.b.1 Formation of Financial Mechanisms to Strengthen Health Systems

Strengthening health systems requires developing sustainable and well-structured financial mechanisms that ensure consistent funding for health services. Governments, often with the support of international organizations such as the World Health Organization (WHO) and the World Bank, work to create financing strategies that can support long-term health infrastructure, workforce development, and access to essential medicines. These mechanisms may include national health insurance plans, co-funding systems, and public-private partnerships that help distribute financial risk and broaden coverage. Effective financial mechanisms also aim to reduce out-of-pocket payments for individuals required to access Universal Health Coverage. By establishing stable financing structures and improving financial governance, countries, particularly developing countries where resources are often limited, can increase the resilience, accessibility, and overall efficiency of their health systems.

4.b.2 Financing UHC in Low and Middle Income Countries

Financing universal health coverage in low and middle-income countries remains a significant challenge due to limited government incomes, increasing demands for healthcare, and inequality in resource allocation. Most of these countries rely on a combination of local public funding, social health insurance schemes, and foreign financial aid to support their health systems. International organizations such as the World Health Organization and the World Bank often provide technical and financial support to help governments design sustainable financing strategies. Strengthening financial governance and prioritizing health in national budgets are also crucial steps for ensuring that UHC can be implemented and maintained in low and middle-income countries.

Yemen: Given relatively few resources and lagging health outcomes in Yemen, the quest for equitable, cost-effective health care delivery continues as long-term, sustainable development remains a priority. Total health expenditure in 2007 accounted for 5.2 percent of Gross Domestic Product (GDP), or only PPP\$ 41 per capita, with nearly 70 percent sourced by direct household payments (67 percent).

Despite recent improvements in health status, Yemen continues to lag behind countries of similar or lower income and health expenditure levels. Levels of health outcomes in Vietnam, Indonesia and the Kyrgyz Republic are 2 to 6 times better than levels found in Yemen regarding the proportion of infants with low birth weight, the prevalence of malnutrition amongst children, the rate of births delivered by skilled attendants, and the rate of coverage of antenatal services.

Although health facilities are relatively evenly distributed across the population, the operational status and quality of these facilities is highly variable. The availability of pharmaceuticals at health facilities ranges from 31 percent of facilities having medications on site in the governorate of Al-Maharah to 94 percent in Amran. To more effectively alleviate inequities and inefficiencies in health service delivery in Yemen, national policies are recommended to more strategically prioritize resource allocation and develop innovative service delivery models to more efficiently connect rural communities.

Ethiopia: Ethiopia achieves a high overall rate of execution of its health budget. From 2016 to 2021 the health budget execution rate averaged 95 percent of the original budget allocation. The health budget execution rate was higher than the execution rates for overall government spending. The execution rate also increased each year.

Nonetheless, the execution rate for regions was lower than for the federal government. The execution of the capital budget was also weaker, particularly at the regional and woreda levels. Data on execution rates for specific government programs are not available and may involve much more volatility than aggregated execution rates. Development partner spending managed outside of the federal Treasury also had much higher volatility in execution.

Good practices that underpin Ethiopia's high execution rates include relatively low levels of arrears; reasonable turnaround times for payroll changes and high accuracy of payroll expenditures; timeliness and good communication of budgeting processes; and shortening of timeframes for transfers from federal to decentralized levels. Areas that hold back the quality of budget execution include limited transparency on execution data; capacity constraints at the facility and woreda levels; external resources being managed outside of government systems; limited flexibility of spending for health facilities; and overly simplified procurement processes that prioritise only the lowest price.

India: The Government of India has publicly committed to a doubling or trebling of government health spending by 2012 and launched a major program, the National Rural Health Mission (NRHM), to help spend the additional funds and achieve better health outcomes. The goal of 2 percent of Gross Domestic Product (GDP) for government health spending is unlikely to be achieved, although there is clear evidence of program growth. Much larger state-level spending is needed to accelerate overall government spending in India's federal system.

In addition, there is evidence of constraints in the ability to spend significantly increased budgets in a timely way and possible state substitution of increased central funding for existing state budgets. Significantly increasing government health spending in India requires more than simply raising budgets at the central level. NRHM does show some positive effects, but the rapid gains envisaged will require greater efforts to address the shortcomings of government systems and creative approaches to India complex federal financing system.

Nigeria: Nigeria has the highest population of unimmunized children in the world and is one of few countries with less than half the population covered with essential health services. Low coverage of services poses a threat to the health and well-being of Nigerian children, but this threat becomes even more pronounced against a backdrop of the 'health financing transition', including the transition from support from the Gavi Alliance, the main source of financing for the country's immunization program.

The Nigeria Immunization Financing Assessment shows how the factors at multiple levels of government and the health system interact to affect four dimensions of health and immunization financing: adequacy; sustainability; efficiency; and predictability. The findings informed the design of the Nigeria Strategy for Immunization and PHC System Strengthening (NSIPSS), which will be used to guide the country as it transitions from Gavi support.

Currently, the government of Nigeria is piloting reforms at federal, state, and local levels to fast track implementation of the National Health Act, which aims to bring additional and 'smarter' domestic resources for health to the facility level. Also needed are systematic linking of health plans to budgets, more efficient allocation of resources, coordinated advocacy, exploration of demand-side barriers to service delivery, capacity building, and strengthened accountability mechanisms that ensure investments in health lead to improved health outcomes. A transition planning process that is grounded, backed by evidence, monitored and adapted regularly, and backed by the highest level of the government of Nigeria will be critical for changing the trajectory for the children of Nigeria.

4.c Policies for Medicine Access and Regulation

Access to and regulation of effective medicines are essential to ensure that safe, effective, and affordable medicines are available to the entire population. Governments, often in cooperation with international organizations such as the World Health Organization, develop regulatory frameworks that oversee the approval, production, distribution, and pricing of medicines. In many developing countries, strategies such as promoting the use of generic drugs, strengthening national regulatory authorities, and improving supply chain management are being used to increase access to essential treatments. By implementing strong regulatory systems and fair pricing policies, countries can improve access to healthcare and support progress toward Universal Health Coverage.

4.c.1 Strengthening Regulatory and Supply Chain Systems

Strengthening regulatory and supply chain systems is essential to ensure that medicines, vaccines, and medical supplies are safely, effectively, and consistently accessible to the population. Strong national regulatory authorities help monitor the approval, quality control, and distribution of pharmaceutical products, reducing the risk of counterfeit or substandard drugs. Organizations such as the World Health Organization support countries in developing their regulatory capacities and improving their monitoring systems. At the same time, efficient supply chain management, including proper purchasing, storage, and transportation, is necessary to ensure that medical products reach healthcare facilities without delay or shortage. By improving both regulatory frameworks and supply chain infrastructure, countries can enhance the reliability of their health systems and support broader goals such as Universal Health Coverage.

4.c.2 Ensuring Safe and Efficient Distribution Mechanisms

Ensuring safe and efficient distribution mechanisms is crucial for the timely delivery of medicines, vaccines, and medical supplies to healthcare facilities and communities. Effective distribution systems rely on well-organized logistics, appropriate storage conditions, and reliable transportation networks to prevent shortages and maintain the quality of medical products. Governments, particularly in developing countries where infrastructure problems can delay access to basic health services, frequently collaborate with international organizations such as the World Health Organization and UNICEF to improve delivery systems. Strengthening monitoring systems and using digital tracking technologies can also help reduce waste, prevent theft, and ensure transparency in the supply chain. By establishing safe and efficient delivery mechanisms, countries can improve healthcare delivery and support progress toward Universal Health Coverage.

4.d Role of mHealth and Digital Health Solutions

Ensuring safe and efficient distribution mechanisms is crucial for the timely delivery of medicines, vaccines, and medical supplies to healthcare facilities and communities. Effective distribution systems rely on well-organized logistics, appropriate storage conditions, and reliable transportation networks to prevent shortages and maintain the quality of medical products. Governments, particularly in developing countries where infrastructure problems can delay access to basic health services, frequently collaborate with international organizations such as the World Health Organization and UNICEF to improve delivery systems. By establishing safe and efficient delivery mechanisms, countries can improve healthcare delivery and support progress toward Universal Health Coverage.

China: Over the past 70 years, there was a rapid epidemiological transition in disease burden in China, from infectious disease to non-communicable diseases (NCDs), which requires long-term prevention and management. Rapid growth in mobile phone use, internet connectivity and digital health technology, presents new opportunities for improvement in NCD healthcare delivery and population-based outcomes. Although there were a growing number of research to evaluate the feasibility and effectiveness of the mobile health (mHealth) interventions for NCD management, the extent to which mHealth contributes towards the health system strengthening in China remains unknown. In this paper, we provided a high-level overview of mHealth in China and its role for Chinese health system strengthening. We conclude with several recommendations for the future of mHealth research in China based on existing evidence identified.

Peru: Depression associated with stroke affects roughly one-third of stroke survivors. Post-stroke depression (PSD) is thought to adversely influence functional outcome by limiting participation in rehabilitation, decreasing physical, social, and cognitive function, and affecting neuroplasticity thereby placing stroke survivors at high risk for future vascular events. PSD has also been associated with higher mortality rates after stroke. In Peru, a country where there is no national stroke program and mental health disorders are largely underdiagnosed and untreated, people with PSD are likely to be further challenged by dependency and impoverished conditions that will limit their use of ambulatory services, leading to inadequate clinical follow-up.

In this scenario, mobile health (mHealth) technology offers a promising approach to extend access to high-quality and culturally tailored evidence-based psychological care to address PSD given that cell phone use, Internet connectivity, and digital health technology have met a rapid growth in the last years and thus contribute to the attainment of broader Sustainable Development Goals (SDGs). The limited evidence of the effectiveness of mHealth for PSD calls for researchers to fill a knowledge gap where Peru poses as an ideal setting because rapid expansion of digital technology and current mental healthcare reform could be leveraged to enhance post-stroke outcomes.

Germany: Despite Germany's lag in healthcare digitalization, the app aims to enhance primary prevention in physical activity, nutrition, and stress management. A significant focus is on user participation and usability to counter the prevalent issue of user attrition in mHealth applications, as described by Eysenbach's 'law of attrition'. The development process, conducted in a scientific and university context, faces constraints like limited budgets and external service providers. The study firstly presents the structure and functionality of the app for people with statutory health insurance in Germany and secondly the implementation of user participation through a usability study.

User participation is executed via usability tests, particularly the think-aloud method, where users verbalize their thoughts while using the app. This approach has proven effective in identifying and resolving usability issues, although some user feedback could not be implemented due to cost-benefit considerations. The implementation of this study into the development process was able to show that user participation, facilitated by methods like think-aloud, is vital for developing mHealth apps. Especially in health prevention, where long-term engagement is a challenge. The findings highlight the importance of allocating time and resources for user participation in the development of mHealth applications.

4.d.1 *Integration of mobile health technologies into national health systems*

Mobile health (mHealth) technologies have become an increasingly important part of modern healthcare systems. The widespread use of smartphones and mobile applications allows healthcare providers to monitor patients, share health information, and offer remote consultations more efficiently. During the COVID-19 pandemic, many countries used mHealth tools for contact tracing and vaccination monitoring, showing how digital technologies can support public health responses in times of crisis.

In addition, mHealth can improve access to healthcare in remote or underserved areas by providing medical information and services through mobile platforms. However, issues such as digital inequality, privacy concerns, and limited technological literacy still create challenges. For this reason, the World Health Organization encourages member states to gradually integrate mHealth technologies into their national healthcare systems while ensuring secure infrastructure and equal access to digital health services.

4.d.2 Long-Term Sustainability of Digital Health Models

Although digital health initiatives have proven to be valuable in improving healthcare services, maintaining them in the long term remains a complex challenge. Sustainable digital health systems require reliable infrastructure, stable internet access, electricity, and appropriate technological equipment. In addition, long-term success depends on strong commitment from governments, healthcare institutions, and other key stakeholders.

When implemented effectively, digital health technologies can improve data management, support better decision-making in healthcare, and enhance the overall quality of medical services. However, continuous monitoring, evaluation, and investment are necessary to ensure that these systems remain functional and effective over time. Therefore, the World Health Organization encourages stronger cooperation between governments and health institutions to develop sustainable digital health strategies.

4.e Gaps in Global Pandemic Governance

During major health crises like the COVID-19 pandemic, gaps in global pandemic management have become increasingly apparent. Despite the leadership role of organizations like the World Health Organization, challenges remain in coordinating timely international responses, sharing accurate data, and ensuring equitable access to vaccines and treatments. Many countries faced challenges due to weak health systems, limited preparedness, and insufficient funding, which highlighted inequalities between high-income and low-income countries.

Furthermore, the lack of binding international regulations and inconsistencies in adherence to existing frameworks such as the International Health Regulations have limited the effectiveness of global interventions. Addressing these gaps requires stronger international cooperation, improved transparency, and the development of more robust and enforceable global health governance mechanisms to better prepare for future pandemics.

4.e.1 Weak Coordination Mechanisms

Strong coordination between governments and international organizations is essential for an effective global response to pandemics. However, the COVID-19 pandemic revealed several weaknesses in global coordination mechanisms. Many countries implemented public health measures at different times and with varying strategies, which created inconsistencies in the global response and contributed to unequal access to vaccines and medical resources.

Studies have shown that countries with stronger governance systems were generally able to respond more quickly and achieve better health outcomes during the pandemic. This suggests that effective coordination and governance play a crucial role in managing global health emergencies. Strengthening communication and cooperation between member states under the guidance of the World Health Organization is therefore essential for improving future pandemic preparedness.

4.e.2 *Limitations of International Health Regulations*

The International Health Regulations (IHR) form the main international framework for preventing and responding to global health threats. However, the COVID-19 pandemic highlighted several limitations in the way these regulations are implemented. In particular, the use of international travel measures became a major point of disagreement, as many countries introduced restrictions without sufficient coordination or consistent scientific guidance.

These uncoordinated policies often created confusion and had significant economic and social impacts. As a result, many experts have emphasized the need for clearer guidelines and stronger cooperation in applying travel-related health measures during international health emergencies. Strengthening the implementation of the IHR and developing more consistent risk-based approaches under the leadership of the World Health Organization could improve the effectiveness of global pandemic responses.

5) Existing International Frameworks and WHO Programs

The World Health Organization (WHO) Committee operates within the broader framework of global efforts to promote international public health cooperation and respond to transnational health challenges. Established in 1948, the WHO has played a central role in coordinating responses to pandemics, strengthening healthcare systems, and setting international health standards. Historically, the organization has addressed major crises such as infectious disease outbreaks and health inequities, while in the current context it focuses on emerging global health threats, pandemic preparedness, digital health governance, and equitable access to medical resources.

5.a *Universal Health Coverage (UHC)*

Universal Health Coverage (UHC) is a global health objective promoted by the World Health Organization (WHO), which aims to ensure that all individuals and communities can access essential health services without suffering financial hardship. UHC includes a wide range of services, such as health promotion, disease prevention, treatment, rehabilitation, and palliative care.

The concept emphasizes equitable access to quality healthcare, strong health systems, and sustainable financing mechanisms. Through initiatives endorsed by the World Health Assembly, WHO supports Member States in strengthening national healthcare systems, expanding service coverage, and improving financial protection so that healthcare remains accessible to all populations.

5.b International Health Regulations (IHR)

The International Health Regulations (IHR) are a legally binding framework developed by the World Health Organization to help countries prevent, detect, and respond to public health risks that may spread across borders. First adopted in 1969 and significantly revised in 2005 following the Severe Acute Respiratory Syndrome outbreak, the regulations require Member States to strengthen national capacities for disease surveillance, reporting, and emergency response.

Under the IHR framework, countries are expected to promptly notify the WHO of events that may constitute a public health emergency of international concern, allowing for coordinated international action. Through the IHR, the World Health Organization aims to improve global health security, enhance transparency between states, and ensure that outbreaks are managed effectively while minimizing unnecessary disruption to international travel and trade.

5.c Sustainable Development Goal 3 (SDG 3)

Sustainable Development Goal 3 (SDG 3) is one of the 17 global goals established by the United Nations under the 2030 Agenda for Sustainable Development. It focuses on ensuring healthy lives and promoting well-being for people of all ages. SDG 3 sets global targets to reduce maternal and child mortality, combat infectious diseases, prevent non-communicable diseases, promote mental health, and improve access to quality healthcare services.

The goal functions through a framework of measurable targets and indicators that guide governments, international organizations, and stakeholders in monitoring progress, developing policies, and strengthening health systems. Achieving SDG 3 requires universal access to essential medicines and vaccines, effective health policies that address both prevention and treatment, and coordinated national and international efforts. By doing so, SDG 3 aims to improve health outcomes, reduce health inequalities, and contribute to sustainable development worldwide.

6) Notable NGOs and Partner Organizations

Doctors Without Borders (Médecins Sans Frontières – MSF)

Doctors Without Borders is an international humanitarian medical organization that provides medical care in conflict zones, disaster areas, and places affected by epidemics. The organization helps healthcare systems during crises and provides important medical services to people in need.

International Medical Corps

International Medical Corps provides emergency medical help and disaster relief in many parts of the world. It also works with local governments and healthcare workers to improve medical systems and prepare countries for future health emergencies.

Partners In Health (PIH)

Partners In Health works to improve healthcare access in poorer regions. The organization cooperates with governments and communities to strengthen healthcare systems and create long-term health programs.

PATH

PATH is a global nonprofit organization that focuses on health innovation and technology. It works with governments and researchers to develop and use digital health tools.

Global Digital Health Network

The Global Digital Health Network support the use of digital technologies in healthcare systems around the world. It connects health professionals, governments, and organizations to improve digital health solutions.

7) Topics a Resolution Should Address

- 1.** Are countries providing equal and fair access to healthcare services for all individuals, regardless of income or background?
- 2.** What are the main weaknesses or gaps in current global health systems, and how do they affect people's access to care?
- 3.** Are healthcare services in different countries affordable, accessible, and of sufficient quality for the population?
- 4.** What steps can governments take to improve the overall quality and efficiency of their healthcare systems?
- 5.** What are the major barriers that prevent people from accessing basic health services, such as cost, location, or lack of infrastructure?
- 6.** How can international cooperation be improved to better respond to global health challenges and crises?
- 7.** How can vulnerable groups, including children, elderly individuals, and people with disabilities, be better protected within healthcare systems?
- 8.** Why do some countries have weaker healthcare systems than others, and what measures can be taken to reduce these inequalities?
- 9.** What legal, political, or economic barriers limit the development and effectiveness of healthcare systems?
- 10.** How can monitoring and accountability mechanisms be strengthened to ensure that countries meet international health standards?

8) Bibliography

<https://www.who.int/>

<https://data.worldbank.org/>

<https://www.gavi.org/>

<https://www.un.org/>

<https://pmc.ncbi.nlm.nih.gov/>

<https://www.unicef.org/>

<https://www.doctorswithoutborders.org/>

<https://www.theglobalfund.org/en/>