

BACKGROUND GUIDE— Juniors Beginner



GIISMUN

TOKYO 2025

CHAPTER 5

Committee:

WHO

World Health Organization

Agenda:

Combating antimicrobial resistance (AMR), with a focus on establishing international frameworks for regulating antibiotic use and enhancing global cooperation on innovation in medical research and development

Hosted by Global Indian International School Tokyo
18th July ~ 23rd July 2025

Committee Overview

The WHO Junior Committee is a youth-oriented platform that seeks to engage young delegates in tackling pressing global health challenges. With the aim of enabling the next generation of health leaders, the committee debates evidence-based recommendations for strengthening pandemic preparedness, health system resilience, and equitable access to life-saving interventions. Through group activities, members will draft resolutions to enhance disease surveillance, vaccine distribution, and community engagement in order to contribute towards long-term health security worldwide. (*About WHO*)

History of the committee

WHO Junior Committee draws from the history of the World Health Organization, established on April 7, 1948, as the United Nations specialized agency for coordinating public health globally. While WHO's governing bodies—e.g., the World Health Assembly and Executive Board—establish global priorities for health, the Junior Committee was formed to foster youth engagement and capacity building in policymaking for public health.

A few of important moments that define in UNICEF's historical timeline include:

1948: WHO founding through signing of its Constitution during the International Health Conference in New York.

2008: Launch of the WHO Youth Engagement Strategy, with young professionals included in advisory panels.

2015: Inauguration of the first WHO Junior Committee session at the World Health Assembly in Geneva.

2021: Expansion of Junior Committee membership to include high school delegations across all WHO regions.

Background Information

Global health has undergone rapid transformation in recent decades. At the same time, diseases and climate-driven disasters are amplifying health risks, from heat-related illnesses to vector-borne outbreaks.

The WHO Junior Committee convenes against this backdrop to explore how countries can bolster health systems, ensure equitable access to essential services, and integrate innovative tools into comprehensive, people-centered strategies.

WHO operates through a network of six regional offices and over 150 country offices, coordinating action among Member States, partners, and civil society to achieve the highest possible level of health for all. Delegates will consider both upstream “social determinants” of health—such as education, housing, and income inequality—and downstream interventions like immunization campaigns and emergency response frameworks.

The Junior Committee mirrors this structure, assigning delegates to represent different regions and thematic working groups:

- **Surveillance & Early Warning:** Enhancing real-time data exchange and risk assessment.
- **Vaccine Research & Distribution:** Accelerating equitable development and delivery.
- **Community Engagement & Risk Communication:** Building trust and behaviour change. The committee weaves its activities into the WHO's core functions: normative guidance, research coordination, health systems strengthening, and emergency response.

Key definitions

- **Pandemic Preparedness:** The capacity of the nations and the global health system to expect, identify, and respond favourably to pandemic threats through planning, resource allocation, and intersectoral coordination.
- **Health Equity:** Providing all individuals with a fair and equal chance to achieve their optimal level of health, particularly targeting marginalized and high-risk groups.
- **Surveillance:** Ongoing, systematic collection, analysis, and interpretation of data related to health required for planning, implementation, and assessment of public health practice.
- **Vaccine Hesitancy:** Refusal to accept or delay acceptance of vaccine despite its availability, driven by confidence, complacency, and convenience.

- **Risk Communication:** Exchange of time-sensitive information, advice, and opinions between scientists and communities at risk from health threats.
- **Epidemiology:** The study of the distribution and determinants of health-related events in populations, guiding the design of prevention and control strategies.
- **Universal Health Coverage (UHC):** Ensuring that all people can access the full range of quality health services—promotion, prevention, treatment, rehabilitation, and palliative care—without financial hardship.
- **Health Equity:** The absence of unfair, avoidable, or remediable differences among groups of people, ensuring that everyone has a fair opportunity to attain their full health potential.
- **Antimicrobial Resistance (AMR):** The ability of microorganisms (bacteria, viruses, fungi, parasites) to withstand drugs that once killed them, posing a growing threat to effective treatment of infections.
- **Digital Health:** The use of information and communication technologies—such as mobile health apps, telemedicine, and electronic health records—to improve health outcomes and service delivery.

Agenda Overview

The agenda and the committee's aim/targets

Agenda: Combating antimicrobial resistance (AMR), with a focus on establishing international frameworks for regulating antibiotic use and enhancing global cooperation on innovation in medical research and development.

The WHO has recognized antimicrobial resistance (AMR) as one of the gravest threats to global health, with projections estimating up to 10 million deaths per year by 2050 if no action is taken. To counter this, Member States endorsed the 2015 Global Action Plan on AMR, which promotes a “One Health” approach uniting human, animal, and environmental health sectors under five objectives: awareness, surveillance, infection prevention, optimized antimicrobial use, and sustainable investment in new tools. (WHO, “Antimicrobial Resistance”)

Building on these foundations, the 79th UN General Assembly’s High-Level Meeting on AMR in September 2024 secured a political declaration calling for a 10 percent reduction in AMR-related mortality by 2030 and the creation of an independent scientific panel to guide progress. The proposed agenda for the WHO Junior Committee—“Combating AMR: Frameworks for Antibiotic Stewardship and Global R&D Collaboration”—aims to draft an international treaty mandating national action plans that regulate antibiotic prescription and animal agriculture practices, while also establishing a pooled R&D fund to drive innovation in antimicrobials, rapid diagnostics, and vaccines.

By integrating stewardship policies with funding mechanisms and technology transfer provisions for low-resource settings, this framework aspires to safeguard existing antibiotics, incentivize new discoveries, and ensure equitable access to life-saving interventions worldwide.

Dicussion Points

- **Surveillance Infrastructure:** What real-time interoperable platforms can Member States share to trade epidemiological and genomic information?
- **Manufacturing Capacity:** How can WHO enable technology transfer and regulatory harmonization to expand regional vaccine manufacturing?
- **Financing Mechanisms:** What are new funding instruments (e.g., pandemic bonds, solidarity levies) available to support readiness efforts?
- **Equity in Access:** What are the policies ensuring equitable access to timely vaccines and therapeutics among marginalized groups?
- **Youth Engagement:** How are young people best engaged to co-create risk communication messaging to combat misinformation?

Issues Faced by the Committee

Data Silos: Decentralized national reporting systems hinder rapid detection and response to outbreaks.

Intellectual Property Barriers: Patent protections limit local production and access affordability of medical countermeasures.

Resource Constraints: Low-resource countries face limited laboratory networks, cold-chain supply chains, and skilled personnel.

Mistrust and Hesitancy: Cultural, political, and social explanations underlie mistrust of vaccines and public health advice.

Coordination Gaps: Duplication of mandates among global, regional, and national actors can slow key interventions.

UN Response (Actions taken)

The World Health Organization has taken major steps to strengthen global health security, improve healthcare systems, and promote health equity worldwide—especially in response to recent crises like the COVID-19 pandemic.

Global Emergency Preparedness and Response

WHO coordinates international responses to health crises through mechanisms like the International Health Regulations (IHR, 2005), enabling countries to detect and respond to outbreaks efficiently. It has led efforts during emergencies such as COVID-19, Ebola, and Monkeypox—providing real-time guidance, field support, and life-saving resources. The COVAX initiative, co-led by WHO, has been crucial in ensuring equitable vaccine access for developing countries.

Strengthening Health Systems and Universal Coverage

Through programs like the UHC Partnership, WHO supports countries in building stronger, more resilient health systems. It promotes universal health coverage, primary care access, and health financing reforms. It also publishes the Essential Medicines List, guiding governments in improving medicine accessibility and affordability.

Advancing Mental Health and Digital Innovation

Recognizing mental health as a global priority, WHO launched its Mental Health Action Plan (2013–2030), promoting integration into general health services. The organization is also spearheading a Global Digital Health Strategy to expand telemedicine, health data use, and tech innovation—especially for underserved populations.

Leading Global Health Policy and Research

WHO facilitates global cooperation through negotiations on a new pandemic treaty, aiming to improve preparedness, transparency, and equity. It leads key research efforts, such as the Solidarity Trials for COVID-19 treatment, and provides comprehensive data to guide science-based policymaking.

Supporting the Sustainable Development Agenda

WHO aligns its actions with the UN's 2030 Agenda—especially SDG 3 (Good Health and Well-being)—working with other agencies like UNICEF, UNDP, and the World Bank to address broader determinants of health, reduce inequalities, and improve outcomes globally.

Scope of Debate

Possible Caucus Questions:

- How can Member States harmonize data gathering and reporting systems to promote interoperability among surveillance platforms?
- What is the WHO's role in facilitating voluntary license deals on vaccines and therapeutics?
- Which organizations ought to be represented in multi-sectoral pandemic preparedness coalitions at national and regional levels?
- How might financing mechanisms be structured to enable long-term investment in preparedness following the acute phase of a crisis?
- What are the key indicators to measure the effectiveness of risk communication campaigns to youth populations?
- What should be the role of WHO in addressing global health crises, such as pandemics?
- How can WHO improve its response mechanisms to emerging health threats while balancing national sovereignty?
- What reforms, if any, should be implemented to enhance WHO's transparency and accountability in decision-making?
- Should WHO have more enforcement power to ensure countries comply with international health regulations? Why or why not?
- How can WHO address disparities in healthcare access between developing and developed nations more effectively?

Sources / Useful websites

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