

**Forum:** Economic and Social Council

**Issue:** Preventing the Covid-19 crisis from becoming a food crisis

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## INTRODUCTION

Disease and illnesses have troubled humanity since the start of history. Nevertheless, it was not until the evolution of agrarian societies that the number of disease outbreaks began to grow to an alarming scale, with their spread increasing dramatically. Extensive trade and animal interactions sped up disease outbreaks to pandemics, which came to be the tragic undoing. Malaria, influenza, smallpox, and several other diseases made their first appearance many centuries ago, and plagued communities for years. As communities became more advanced and more populous cities and dense overcrowded environments developed the risk of pandemic grew, settling into our communities, becoming part of our daily lives, as the Covid-19 pandemic has done since December 2019.

The world has come a long way from its first interaction with the infectious disease from the coronavirus family, moving from an unknown calamity in central China to a global-wide pandemic threatening the livelihood of nearly all and very member states. It spread like wildfires, moving from one nation to the next, with a lack of coordinated action early, there was little left to do once it was already in play. Safety procedures were set to manage the spread, as masks became a common sight, so did the loss of credibility of the media as each outlet spurted drastically different information on the “deadly SARS” or “passing new mild-cold”. Overtime, governments moved away from prevention legislations to active adaptability developments, with the most obvious example being the creation of vaccines and distribution all over the globe despite original talks of herd immunity. Nevertheless, while a step forward is taken in R&D, the primary sector of economies suffers harshly from the lack of labor and low investment by citizens. As factory chains are put on hold, salaries follow the same trends, with a butterfly effect, spending is down significantly as certainty is reminiscent of better times. As the demand for food is unstable so is the supply, in times where production and stock bring unnecessarily high risk the incentive of market agents to provide goes down, if there is uncertainty introduced in the industry it can lead to a food crisis as a result and on top of the existing health pandemic.

## DEFINITION OF KEY-TERMS

### Infectious Disease <sup>1</sup>

An infectious disease is a disease arising from the presence and activity of a microbial agent, such as bacteria, viruses, parasites, or fungi; it is transmissible by infection or contagion directly or through a vector. They can also arise from animals and are called zoonotic diseases.

### Epidemiology

Epidemiology looks at the distribution as well as the determinants of health-related states and spread in specific communities and the application of this study to control health problems.

### Pandemic <sup>2</sup>

A disease outbreak affecting large populations or a whole region, country, or continent. A seasonal pandemic occurs annually in each of the temperate southern and northern hemispheres, going over international borders, and disturbing a large number of people.

### Food crisis

A food crisis is any event in which a community has an issue in the production or consumption of food resources. When it occurs rates of hunger and malnutrition are noted to rise sharply at local, national, or global levels. A food crisis can set off by a shock to either supply or demand for food and often involves a sudden spike in food prices.

### Famine<sup>3</sup>

Clear pronounced scarcity of food in a specific geographical area, where part or the entirety of the population cannot access the necessary amount of nutrition to survive. It is accompanied by a number of destructive side effects ranging from social to economic, it demands intervention without which death would ensue due to lack of nutrition.

### Undernutrition

One of the two subsections of malnutrition occurs when there is a lack of proper nutrition, caused by not having enough food or not eating enough food containing substances necessary for growth and health.

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<sup>1</sup>“Infectious Diseases.” National Foundation for Infectious Diseases, [www.nfid.org/infectious-diseases/](http://www.nfid.org/infectious-diseases/).

<sup>2</sup>“Coronavirus Disease (COVID-19).” World Health Organization, World Health Organization, [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019).

<sup>3</sup>Hasell, Joe, and Max Roser. “Famines.” Our World in Data, 10 Oct. 2013, [ourworldindata.org/famines](http://ourworldindata.org/famines).

## Malnutrition

Malnutrition refers to deficiencies, excesses or imbalances in a person's intake of energy and/or nutrients. The term malnutrition covers 2 broad groups of conditions, both arising in polar opposite situations, in the case of a food crisis the malnutrition in link to obesity is less common than the subsequent option.

## Vaccine <sup>4</sup>

A vaccine is a substance made up of attenuated or killed microorganisms (viruses, bacteria, etc.) It is employed for stimulating the production of antibodies that provide immunity against diseases. It is administered for the prevention, amelioration, or treatment of infectious diseases.

## Herd Immunity <sup>5</sup>

It is a form of protection occurring when a sufficient percentage of people in a particular region/area is immune to an infectious disease that it cannot spread to others, through a multitude of ways including vaccination or previous infections, thereby reducing the likelihood of infection for individuals who lack immunity.

## BACKGROUND INFORMATION

### Global Discussion

Pandemics are bound to cause severe damage in a multitude of different areas of our society, impacting not only our global health but our economic and financial well-being. In nations with anemic governments and legacies of political instability, increased political stresses and tensions ensue as a result of pandemics. While in LICs, disease outbreaks can eradicate whole communities and dramatically affect the mortality rate and life expectancy. Overall, food crisis outbreaks are a growing threat that requires a global united targeted response to its origin: the covid 19 crisis. If the issue of health is resolved or directly handled the consequent repercussions of the food sector would not be existent or of severity.

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<sup>4</sup>"COVID-19 Vaccines." World Health Organization, World Health Organization, [www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines](http://www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines).

<sup>5</sup>"Herd Immunity." APIC, [apic.org/monthly\\_alerts/herd-immunity/](http://apic.org/monthly_alerts/herd-immunity/).

The COVID-19 pandemic began in December 2019, as a new infectious respiratory disease emerging in Wuhan, China; it is considered the most crucial global health calamity of the past hundred years and sits as the most severe challenge humankind faced of the century. The report from the World Health Organization (as of May, 2021) states that the current outbreak of COVID-19 has affected over 171 million people and killed more than 3,550,000 people worldwide in over 200 nations. The main issue with Covid-19 use to stand from the fact that there was no result of any clinically approved antiviral drugs or vaccines proven effective against it. However, tremendous progress has been made with numerous companies successfully producing vaccines of high effectiveness, such as Pfizer Biotech, Oxford/AstraZeneca, Moderna. Since then, it has rapidly spread further, forming colossal health, economic, and social challenges to the entire global population. As of now, almost all countries have passed the stage of minimizing the transmission of the disease, moving to adaptability from targeted testing & treating high-risk patients, quarantining suspected active cases employing contact tracing, restricting the possibility for large gatherings, while maintaining some form of lockdown (complete or partial). These restrictions have caused severe disruptions in the global economy and labor market along with it, if people cannot work productivity goes down with output. To summarize, people have lower spending which also means less food or worse quality, putting people in certain groups in danger due to malnutrition (as seen from figure 1).

The most at-risk populations in most emergency situations are those that are already struggling with hunger, health, and poverty. These populations will be at great risk during a severe pandemic. In addition to these groups, many other households are vulnerable to the impact of a severe pandemic because of the way it may affect economic and social systems. Any household that has not taken necessary actions to prepare for a severe pandemic will face greater difficulties in coping with the impacts of spreading disease.<sup>6</sup>

### **Food crisis**

A food crisis comes in multiple forms and from varied angles even when growing from the roots of a global pandemic. The first factor that can be a lead cause of food crisis among populations is food availability, as in that enough food is physically present for the entire population. It is in markets and shops, is grown on farms or home gardens, or has arrived as the result of food aid. The second is food access, in which individuals can obtain available food. Households may access food in many ways: growing, buying, and bartering; or through gifts, welfare programs,

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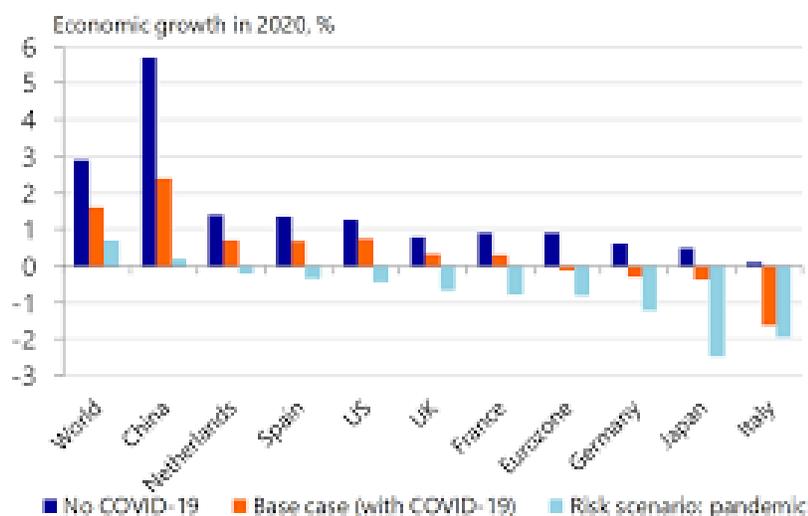
<sup>6</sup>Economic Commission for Latin America and the Caribbean. "Preventing the COVID-19 Crisis from Becoming a Food Crisis: Urgent Measures against Hunger in Latin America and the Caribbean." Publication | Economic Commission for Latin America and the Caribbean, CEPAL, 19 Nov. 2020, [www.cepal.org/en/publications/45726-preventing-covid-19-crisis-becoming-food-crisis-urgent-measures-against-hunger](http://www.cepal.org/en/publications/45726-preventing-covid-19-crisis-becoming-food-crisis-urgent-measures-against-hunger).

or food aid. Food access is ensured when households have enough resources, like land, money, or social connections, to obtain nutritious foods in adequate amounts. The final central factor fostering conditions for food crisis in simultaneous times as a health crisis is food utilization referring to the way people's bodies are able to use the food they eat. Making the best use of foods depends on proper food storage and processing, overall nutrition and health status, the availability of clean drinking water, and adequate health and sanitation services.

The global health impact of an influenza pandemic may affect agricultural workforces, transportation/irrigation systems, and supply chains of materials. The impact of the virus in other fertile areas of the world may result in most communities experiencing a food crisis even before the influenza virus causes severe health problems in all municipalities. Some of the first things that were noticeable indicating that COVID 19 could cause a food security problem were: industries that rely on import and export are struggling, food supplies are hard to get locally, or that economic activities are disrupted.

### **National Implementation**

In several countries, funding and resource efforts are stemming from extensive public policies and coordinated civil-society interventions. An essential part of the private funding for healthcare takes the form of ‘out-of-pocket’ spending. This refers to direct outlays made by households, including gratuities and in-kind payments, to healthcare providers. In high-income countries, a trend can be spotted, this outlay tends to make up for merely a small part of the aggregate expenditure on healthcare (e.g. France stayed below 8% since 2000); on the other hand, in developing countries, they account for the majority of funding (e.g. in Afghanistan the percentage of out-of-pocket expenditure reached 87.7% in 2002). Several nations (particularly in the developing world) have reduced this expenditure following the negative analysis. Withal, some nations have still not taken up this change, bringing up this issue at the General Assembly along with the publication of research reports would prove useful to turning the remaining



countries in the right direction.<sup>7</sup>

Several countries were poorly prepared and not ready to face and sustain the impacts of pandemics; foreign aid providers offered surge capacity; this strategy was tenable in particular during localized outbreaks. However, global surge capacity is limited in size that likely was reached in times of a full-scale global pandemic. Additional risk transfer mechanisms, such as but not limited to risk pooling and sovereign-level catastrophe insurance, were provided as a manageable option for dealing with the pandemic risk, but the preparations were simply lacking. As seen from figure 2, covid shows clear signs of hindering economic growth, pushing most countries into negative economic growth at the risk scenario of a pandemic.

<sup>7</sup>Hugo Erken RaboResearch RaboResearch Netherlands. “Global Economic Outlook: COVID-19 Has Taken a Hold of the Global Economy.” RaboResearch - Economic Research, [economics.rabobank.com/publications/2020/march/global-economic-outlook/](https://economics.rabobank.com/publications/2020/march/global-economic-outlook/).

Data from the World Health Organisation (found in the World Development Indicators) goes to show that total healthcare spending as a percentage of GDP has seen an overall enhancement of approximately 1.5 perceptual points over twenty years, with a relatively constant share of resources from the public sector, with countries reaching above 5000\$ health expenditure per capita. Furthermore, other data points towards a positive future with an increase in world average life expectancy of more than five years (from 66.3 to 71.4), jointly with a decrease in infant mortality rate from 7.71% to 3.91%.

The situation is clear yet disheartening, many countries are not financially prepared to handle a food crisis on top of the current health crisis they are struggling with, further the variety in ways in which they can arise makes it difficult to ally on a single framework. This means large budgets will need to be freed for these projects to be implemented, protecting all the at-risk groups and potential at-risk groups, but there are no funds available. This leaves nations in an impasse where they do not have money because of the pandemic, and to get new resources must beat the pandemic which they can only do with the money they don't have.

Due to uncertainty, unpredictability, irregularity, compared to previous infectious disease outbreaks, COVID-19 should be taken with caution for the creation and implementation of effective responses to pandemics. It is an unprecedented situation, which cannot account for the impacts and solutions necessary for more prevailing disease outbreaks. Moreover, this situation is continually evolving and is not predicted to come to an end soon; therefore, judgment and conclusions cannot yet be fully drawn.

## UN Sustainable Development Goals

The Sustainable Development Goals, or more commonly known as the UN Goals, were adopted by all member states in 2015, after a universal call to take action for all the global issues we are facing at this moment, including but not limited to end poverty, protect the planet and ensure that all people enjoy peace and prosperity. The 17 SDGs are to be completed by 2030; however, an extension may be placed; they form an integrated framework, recognizing the essential actions and skills mandatory to properly tackle the issues, and fits in with the presented vision of other sizeable international institution, that all follow the common goal of improving our society. Contribution from all is needed to reach the specific targets, and the financial resources from all of society are obligatory to achieve the SDGs in every aspect. Thinking of the ones listed below may help when formatting potential ideas on solutions to a food crisis arising from the covid-19 crisis in order to better grasp all sides of the situation and address each side of the issue.

### *Sustainable development goal No. 2*



Sustainable Development Goal 2 is "Zero Hunger" and aims to end hunger in human populations, achieve food security and eradicate nutrition insecurity, as well as improving the quality of food and promote sustainable agriculture, all on a global scale, however, the work is most pressing in LEDCs. It is intricately linked to the issue as methods employed to meet these goals are usable to match the solutions for the food crisis that may arise from Covid 19.



### *Sustainable development goal No. 3*

SDG 3 is the clearest of the sustainable development goals options to implement within a solution for the discussed issue as covid 19 is a matter of health. "Good Health and Well-Being" aims to ensure healthy lives and promote well-being for all at all ages. The goal is to reduce by one-third premature mortality from non-communicable diseases through prevention and treatment

### *Sustainable development goal No. 16*

SDG 16 may appear to be unrelated or only from afar, yet an institution, or international organization, is as strong as its weakest members; increasing member rights and memberships would strengthen the international organization itself. With this objective, Goal 16, "Peace, Justice, and Strong Institutions," lead the nations and aim for strong and effective organizations that connect various countries to fight off the health concerns brought up everywhere.



### *Sustainable development goal No. 17*



As a strong partnership derives its power from equal representation since developing countries' support can only be achieved by increasing their membership and voting rights, Sustainable Development Goal 17 is crucial. To achieve the prevention of the covid 19 crisis derailing into a food crisis and overcome other significant problems caused by the pandemic, the partnership acts as the key essential for proper collaboration between countries, institutions, and individuals. Working together

implementing homogenous policies allows for minimizing the possibility to pass through the system.

## **MAJOR COUNTRIES AND ORGANIZATIONS INVOLVED**

### **World Health Organisation (WHO)**

The World Health Organisation or the WHO is a globally active specialized international organization that deals with global public health, continuously in function with 194 Member States, across all six continents, as well as 150 field offices worldwide. It is headquartered in Geneva, Switzerland. However, it has six semi-autonomous continental offices to improve its targeted response. Its member nations govern the organization, all decisions made by the organization revolve around the central goal of the WHO, which states “the attainment by all peoples of the highest possible level of health.”

The WHO in a pandemic aims to build a better, disease-free future for people all over the world; its primary tasks are to reduce the spread of the infectious disease, strive to combat the disease with the help of various organizations in each region for a targeted response, as well as down to the most basic needs including ensuring the provision of messages and updates on numbers of COVID cases around the world, along with this it has also taken care of monitoring the food needs from at-risk countries as well as other basic kits like medicines and vaccines.

### **World Bank (International Development Association/International Finance Corporation)**

The World Bank is a specialized international financial institution which supplies loans and grants to governments of less opulent nations for the sole purpose of pursuing capital projects. The International Development Association (or IDA) supports Low-Income Countries (LIC) and Middle-Income Countries (MIC) with interest-free loans, also referred to as credits, and grants, for them to not be hindered by their financial situation. The International Finance Corporation (or IFC) assists developing countries to achieve significant sustainable growth with subsidies and financing investment, mobilizing capital in international financial markets, and providing advisory services to businesses and governments. It is the largest international development institution directed exclusively in the private sector.

It is of great help to nations, in health crises, like the current pandemic as they can provide funding to prevent the COVID 19 from becoming a food crisis.

### **European Union (E.U.)/European Center for Disease Prevention and Control (ECDC)**

Established on November 1, 1993, the European Union is an economic (customs union) and political union comprising 28 member states. The E.U. was created in the aftermath of the second world war to promote economic cooperation between its member nations. As the E.U. grew in size, it sought to develop a large singular market to achieve its full economic potential. The European Centre for Disease Prevention and Control or ECDC was established in 2004 in Solna, Sweden; it acts as an independent agency of the E.U. with a mission to strengthen Europe's defenses against infectious diseases. It provides applicable frameworks and ways to deal with crises both health and food.

The EU faces severe social, political, and financial problems during a pandemic, the threat of upcoming food crisis

### **Médecins sans Frontiers**

Médecins Sans Frontières (or MSF), otherwise translated to Doctors without Borders, was founded in Paris back in 1971 by a group of journalists and doctors, all united by the idea of providing medical care to those in need of it. Today, it has grown to a worldwide movement of more than 67,000 people, which provides medical assistance to communities touched by conflict, epidemics, disasters, or exclusion from healthcare. Their on-ground teams are made up of tens of thousands of health professionals, logistic and administrative staff, all working their hardest to save lives every day. Principles of impartiality and medical ethics led to Médecins sans frontiers being a neutral, independent non-profit, self-governed, member-based organization.

MSF distributes teams around the globe in positively affected areas, where they conduct independent evaluations determining the medical needs and assistance required for

improvement. This knowledge allows for a targeted response to health concerns reducing the likelihood of a subsequent food insecurity issue, as if there are none to few emergencies then less pressure is put on the crops.

### **Food and Agriculture Organization of the United Nations (FAO)**

The Food and Agriculture Organization is a specialized agency of the United Nations that leads international efforts to defeat hunger. The goal is to achieve food security for all and make sure that people have regular access to enough high-quality food to lead active, healthy lives. With over 194 member states, FAO works in over 130 countries worldwide, as they believe that everyone needs to play a part in ending world hunger.

To meet the demands posed by major global trends in agricultural development and challenges faced by member nations, FAO has identified key priorities on which it is best placed to intervene. This supports the plans to solve the issue of a food crisis arising from the pandemic, if the FAO objectives are maintained and the framework provided fostered then even in unconditionally strenuous times the food system should be kept running smoothly.

### **Centre for Disease Control and Prevention**

The Centre for Disease Control and Prevention (or CDC) is a national public health institute in the United States; it stands by the federal agency under the Department of Health and Human Services, headquartered in Atlanta, Georgia. Its focal goal prevails to be to protect public health and safety at a national as well as international level through the control and prevention of disease outbreaks. The CDC focuses on infectious viruses, foodborne pathogens, and bacterial diseases, looking to develop and apply disease control and prevention frameworks specifically designed and targeted.

## **TIMELINE OF EVENTS**

<b>DATE</b>	<b>DESCRIPTION OF EVENT</b>
October 16, 1945	In Quebec, Canada, 42 countries acted to create the Food and Agriculture Organization of the United Nations. Taking in doing so they took another important step forward in man's perpetual struggle against hunger and malnutrition.

July 1, 1946	Establishment of the Centre for Disease Control and Prevention by the United States of America, the first national public health agency of the United States
April 7, 1948	Formation of the World Health Organization
December 22, 1971	Creation of Médecins Sans Frontières
January 2000	Formation of GAVI, an international organization based in Geneva, Switzerland, which brings together public and private sectors with improving access to new and underused vaccines for children living in poverty.
April 26, 2000	GOARN framework was put then forth in a meeting in Geneva, attended by 67 participants; GOARN was formed with the intention of contributing resources, coordination, surveillance, and technical assistance towards combating infectious disease outbreaks
September 28, 2004	Formation of the European Center for Disease Prevention and Control
May 24, 2011	PIP (Pandemic Influenza Preparedness) framework comes into effect to improve and strengthen the reaction to influenza viruses with human pandemic potential.
December 31, 2020	COVID-19, originating from Wuhan, China. Like the SARS and MERS previously, the virus originated from individual animals before

	infecting humans and has spread quickly.
January 30, 2020	The confirmed locations of the virus's presence are in Asia, the U.S., Canada, Australia, Europe, and Russia.
March 11, 2020	Deeply concerned both by the alarming levels of spread and severity, and by the alarming levels of inaction, WHO made the assessment that COVID-19 could be characterized as a pandemic.
March 18, 2020	WHO and partners launched the Solidarity trial, an international clinical trial that aims to generate robust data from around the world to find the most effective treatments for COVID-19.
April 14, 2020	The first WHO and World Food Programme 'Solidarity Flight', organized with partners, departed from Addis Ababa, Ethiopia, carrying vital medical cargo for countries in Africa.
July 13, 2020	2020s edition of the UN's 'State of Food Security and Nutrition in the World' is published, which forecasted that the COVID-19 pandemic could tip over 130 million more people into chronic hunger by the end of the year.
October 13, 2020	WHO issued a joint statement with the ILO, FAO, calling for urgent and ambitious action to mitigate the impact of COVID-19 on livelihoods, health, and food systems, up to 132 million people could become undernourished.
December 7, 2020	A UK grandmother has become the first person in the world to be given the Pfizer Covid-19 jab as part of a mass vaccination program.
December 22, 2020	Antarctica is no longer the only continent free of the pandemic. As thirty-six people stationed at the General Bernardo O'Higgins Riquelme Antarctic bases have tested positive for the virus, communicated by Chilean officials.

## RELEVANT UN RESOLUTIONS, TREATIES, AND EVENTS

### Extraordinary G20 Summit on COVID-19<sup>8</sup>

March 26, 2020, chaired by King Salman of Saudi Arabia

The nations stated that they fully support and commit to further strengthen the WHO's mandate in coordinating the international fight against the pandemic, including the protection of front-line health workers, delivery of medical supplies, especially diagnostic tools, treatments, medicines, and vaccines". Aside from the G20, WHO joined with UNESCO and other partners to launch the Global Education Coalition to facilitate inclusive learning opportunities for children and youth during this period of sudden and unprecedented educational disruption.

### Resolution A/RES/74/274<sup>9</sup>

International cooperation to ensure global access to medicines, vaccines, and medical equipment to face COVID-19, 20 April 2020

The resolution "acknowledges the crucial leading role played by the World Health Organization" with regard to "coordinating the global response to control and contain the spread" of COVID-19. It also requested "close collaboration" with WHO by the UN Secretary-General in the General Assembly forum of the United Nations headquarters in New York City.

### World Health Assembly

WHA73.1 - Agenda item 3 - 19 May 2020

Held virtually, adopted a landmark resolution to bring the world together to fight the COVID-19 pandemic, co-sponsored by more than 130 countries – the largest number on record – and adopted by consensus. Fourteen heads of state participated in the both introductory and conclusory sessions. Calls for the intensification of efforts to control the pandemic, and "recognizes the role of extensive immunization against COVID-19 as a global public good for health", and calls for equitable access to and fair distribution of all essential health technologies and products to combat the virus

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<sup>8</sup>"G20 Leaders' Statement: Extraordinary G20 Leaders' Summit - Statement on COVID-19 - World." ReliefWeb, [reliefweb.int/report/world/g20-leaders-statement-extraordinary-g20-leaders-summit-statement-covid-19](https://reliefweb.int/report/world/g20-leaders-statement-extraordinary-g20-leaders-summit-statement-covid-19).

<sup>9</sup>A/RES/74/274 - E - A/RES/74/274 -Desktop, [undocs.org/en/A/RES/74/274](https://undocs.org/en/A/RES/74/274).

## PREVIOUS ATTEMPTS TO SOLVE THE ISSUE

Because of the relatively recent nature of this addition to the agenda, past attempts have been scarce, and their impact yet to be fully comprehended.

As shown in the timeline, there have been various attempts to create organizations and solutions to form effective responses to the various infectious disease outbreaks across the world over the last twenty years. However, despite the success of several ones, more intervention is imperative to mitigate the spread and impact of COVID 19 in order to prevent food crises, as intricacies lay in its properties and behaviors in comparison. The World Health Organisation alone has had several attempts at, but its primary focus has always been to solve the problem at hand, looking only at the next day and next battle to fight in the war against COVID. However, the studied solutions to other similar health issues like previous infectious disease outbreaks, are useful in shifting the focus from small to large scale actions for the future.

Over the past few decades, the WHO and other multilateral government organizations, such as but not limited to the United Nations, are also equally involved in the discussion, have been able to increase access to healthcare while simultaneously hindering the development of food crises. The WHO goes through a rigorous process of and discussion before deciding on the outcomes and solutions for disease outbreaks. These solutions are often based on the broad principles held by the WHO and signed off on by its member nations.

- International Health Regulations (IHR)
- Pandemic Influenza Preparedness Framework (PIP)
- Global Outbreak Alert and Response Network Framework (GOARN)

Multiple summits have been held, several new organizations have been founded, constructive resolutions have been passed to the highest level, new response frameworks have been inaugurated; despite all of that progress, infectious disease outbreaks continue to perdure. As although most of the WHO's member nations agree that uncoordinated response to pandemics is detrimental to a stable, effective solution, the real problem stems from the inability to gain unanimous support behind a single solution. Member nations still cannot agree upon the most efficient way of instituting global scale policy to mitigate the spread of infectious diseases as well as the adequate response framework. Fortuitously, over the years, we have made significant improvements and technological progress in the field of epidemiology, which has contributed significantly to mitigating the spread of current diseases along with preventing new outbreaks. Such advances include tremendous expansion in the delivery of healthcare, from intensive care to vaccine centers, which can be mainly attributed to the total global aggregate

expenditure on healthcare, which in the past two decades has stayed relatively stable, notwithstanding a slow yet steady increase.

## POSSIBLE SOLUTIONS

*Note: This section is designed for issues that have an inherent problem or are currently in a situation that needs solving. This issue does not involve anything in that regard, but the here-suggested "solutions" are still crucial for debate.*

COVID-19 has plagued us since the start of 2020; over the course of months going past, its strength has drastically increased as well as frequency and spread within communities. A number of other consequences have been prompted, like the menace of food insecurity, which must be dealt with first by touching on the health issue. Knowing that past attempts to implement an original framework have been successful and due to complications and unpredictability of food crises, the best way to prevent them is to maintain these principles that are still intrinsic within every pandemic.

### Global discussion

The first step involves the creation new organizations to or create a set of rules and regulations around the procedures to follow when a threat or pandemic appears, it requires all the member states of the WHO, could also include the CDC and ECDC. It is also essential to help developing countries grow financially in a stable manner, allowing them to improve national health care as there is a direct correlation between GDP and aggregate health expenditure. Disease outbreaks of pandemic potential vary widely in the resources, capacities, and strategies required for their mitigation; however, standard shared requirements for effective preparedness and response exist. They have been identified over the years. Nonetheless, spending and costs associated explicitly with pandemic preparedness and response efforts are poorly tracked, notwithstanding that there is still a lack of accepted, consistent methodology to form estimation of the direct and indirect economic impacts of pandemics. As the central part of the data regarding the impacts of global disease outbreaks, including the benefits and costs of mitigation measures, is recorded from high-income countries (HICs), it leads to bias conclusions and in potential blind spots with respect to the uncertainties, consequences, and optimal interventions specific to LMICs. Tracking the spending and costs seriously, extensive research for a vaccine, eliminating bias and blind spots from reports should prove very profitable in mitigating the impacts of infectious disease outbreaks.

### Economic Stability

While attempts to increase global health expenditure have come through and flourished greatly like the talks in the General Assembly on global health and finance, very high global inequality in health spending per capita persists and prevails even now. In the Central African Republic, solely 25 international-\$ is spent per capita while on the other end of the distribution, in the U.S., 9,403 international-\$ are spent. The ratio between the two countries comes up to 376; on average, Americans spend more on health per day than a person in the Central African Republic spends in an entire year. Therefore, a focus on raising health expenditure per country must be set; it could be set out effectively through a specific summit and resolutions dictating exact terms, like possible subsidies or target results. Medicine availability in low-income countries persists in standing as a barrier to affordable medical care access; there exist multiple factors required in ensuring everyone has access to essential medicines; firstly, they must be available, and secondly, they must be affordable. Increasing the resources of active organizations, such as the Médecins sans Frontiers, would help provide the linkage between the patients and the production if needed funds may be taken from a financial institution such as the World Bank in the form of a grant or interest-free loan.

### **National Implementation**

The most promising and prudent strategies for increasing pandemic preparedness, particularly taking into account the resource-constrained settings, consist of investing in strengthening core public health infrastructure, including water and sanitation systems, on top of increasing situational awareness and rapidly extinguishing new outbreaks that could lead to pandemics. A coordinated response must be implemented at the very start, targeted at maintaining awareness through public health messaging and possible reduction of transmission, as well as a delegation of patients to different departments focusing on the ones requiring intensive care. Surge capacity is the ability to upsurge the delivery of health missions in proportion to the severity of the event, and conceivably the population at risk. It is required for successful contingency planning and response needed when dealing with a pandemic.

Finally, scientific research organizations such as the WHO, the CDC, and ECDC, as well as the IDRI and SBRI to research deeper into COVID 19 and general infectious diseases to further our knowledge and understanding of pandemics, allowing us to make sustained informed decisions with improving technological advancements. Additionally, to implement effective responses to food crises, region-specific institutions like the FAO liaison in Africa, Asia, Europe, and Oceania, should serve as examples to encourage countries to unite and work jointly. This solution would still have significant drawbacks like the logistical costs of creating individualized plans or the time taken for implementation for these plans.

In the current global economic and political climate, we cannot afford to let the pandemic perdure within our population, damaging our global health, economy, and prompting conditions for food crises; therefore, we must take direct action, creating a practical response

framework, forming new policies, and restrictions, founding multilateral area focused health institutions, to alter our current disadvantageous actions and install constructive response framework.

It is essential to consider that epidemiology is an ever-fluctuating field where at any moment, especially in times of uncertainty such as today when a significant breakthrough may arise, as well as the issue of food distribution/production where both human and natural unexpected events can change drastically the state of affairs. Therefore, all delegates should keep up to date on the subject as things may stand differently by the time of the DSAMUN.

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## APPENDIX

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