



Background Guide

World Health Organization:
Ebola Outbreak of 2014-2015
(WHO)

Under Secretary-General Fezaan Kazi
Chair William Pack, Vice-Chair Evan Yohler

IndianaMUNC VII

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A Letter from the Chair

Greetings Delegates!

Welcome to IndianaMUNC VII and welcome to the World Health Organization! My name is Will Pack and I will be serving as your chair for the duration of this committee. For this committee I encourage everyone to be as creative as possible with their solutions while staying on country policy. Diplomacy must be showcased at all times. I look forward to hearing everyone's thoughts on how to resolve the Ebola outbreak of 2014-2015.

A little about myself. I am from Greenwood, Indiana and I have been involved with Model UN since early on in my high school career. Model UN has been a very impactful organization to me both attending and hosting conferences and I hope you that it can have a similar impact on all of you.

At Indiana University, I am a sophomore in the Kelley School of Business majoring in Supply Chain Management and Economic Consulting with a minor in History. Outside of Model UN, I love supporting IU's sports teams and playing on intramural teams of my own. If I'm not studying, you would probably find me outside playing soccer or going for a hike (weather permitting).

Evan, our Vice Chair, and I are looking forward to meeting all of you in February. We are very excited to see what creative solutions you can showcase in our committee and we hope you are too. Please feel free to email me at wtpack@iu.edu if you have any questions or concerns. Welcome to IndianaMUNC VII and the World Health Organization!

Will Pack

WHO Chair



Introduction to the Committee

The World Health Organization, a specialized UN agency that has been around since 1948, has the main purpose of providing all people with the highest possible level of health. By focusing on public health since 1948, the World Health Organization has eradicated smallpox and nearly eradicated polio. With its headquarters in Geneva, Switzerland, the World Health Organization is currently focusing on communicable diseases such as HIV/AIDS, Ebola, Malaria, and Tuberculosis.

The responsibilities of this committee are to address the Ebola outbreak that occurred in 2014-2015 as it occurs in real time. As a delegate it is important to create an effective framework that can not only address the immediate Ebola crisis within Africa, but also provide measure to stop Ebola from spreading globally while also considering how Ebola will be handled after the outbreak.

Over the course of 3 days, committee will be moving at a very fast pace. Prewriting is strictly prohibited. There will be plenty of time in committee to debate the topic and come up with effective solutions. It is expected that throughout the course of these three days that every delegate is prepared to give substantive speeches that move the course of committee. Diplomacy must be valued above all.

Topic 1 | Novel Threat

History

Ebola virus disease (EVD) or Ebola was first discovered in 1976 after two consecutive outbreaks of a fatal hemorrhagic fever occurred in parts of Central Africa.¹ The biggest problem with the initial outbreaks was discovering how it spread. In the initial outbreak, nurses were reportedly using 5 syringes for 300-600 patients per day which led to the high numbers of human-to-human transition during the early Ebola outbreaks. In 1989 Ebola was first discovered within monkeys in the Philippines and it was discovered that the Ebola virus had contaminated them aerosolized transmission, but that this airborne transmission was not present in humans.¹

In 1994 a small outbreak occurred in Cote d'Ivoire and the response from scientist was far more sanitary due to the use of disposable equipment such as needles and the use of protective gear for health care personnel.¹ This response led to a rapid and effective containment of the virus. The next outbreak occurred in Kikwit, Zaire (now the Democratic Republic of the Congo) and was the most serious outbreak since the 1976 outbreaks. By this point, the international health community had its eye on Ebola virus due to its highly contagious and lethal nature. Containment was considered to be of the utmost importance and officials carried out treatments in a way that showed this by educating the local community on how the virus would spread and equipping the local hospitals with the measures they

¹ <https://www.cdc.gov/vhf/ebola/history/summaries.html#2>.



would need to combat the virus. Containment was successful even though 254 out of 315 reported infected died. Since then, there have been a number of small outbreaks that were contained in the same effective manner, but the main strains still commonly showed mortality rates of 80% and above.

Current Situation

As of today, March 21, 2014, the mysterious disease spreading through Africa since December 26, 2013 has been identified as the Zaire Ebola virus.² The Zaire Ebola virus is the most common strain and represents the strain from all the previous examples and has a mortality rate consistently above 80%.

Currently the World Health Organization has confirmed 49 cases and 29 already dead from this outbreak of the Ebola virus.

The only reported cases are occurring in Meliandou, Guinea, but since local hospitals have been treating patients without the suspicion of Ebola, it is very likely that the virus could quickly spread due to the lack of protective gear used when treating the patients.

Very little has currently been done to work towards any sort of treatment for Ebola due to the difficulties in conducting clinical studies under the previous outbreak conditions.³ At the onset of the outbreak, the U.S. Food and Drug Administration had no approved methods for

² <https://www.who.int/csr/disease/ebola/one-year-report/virus-origin/en/>.

³ "Ebola virus – from neglected threat to global emergency state". SciELO Analytics. Rev. Assoc. Med. Bras. vol.62 no.5 São Paulo Aug. 2016.

the treatment or prevention of the Ebola virus showing how undervalued research has been in the developed community.

The developed community is not the only one under prepared for an Ebola outbreak. African Nations have not had to deal with an Ebola virus spreading outside of rural areas and they are not prepared for such an occurrence were it to happen. The prevention of widespread panic and ability to control a populace during an outbreak is also not guaranteed within these African Nations as many citizens have reported high level of mistrust in their governments and may try to hide Ebola cases or ignore public health warnings as a result.

Because of these levels of mistrust, it is very important that the World Health Organization and other neutral non-governmental agencies become involved in stopping the spread of the Ebola virus. This could be especially beneficial because some NGOs already have a history of working within this region and that relationship with the inhabitants could ease many concerns around treating the Ebola virus.⁴

Bloc Positions

West African Nations | This topic and the immediate resolution of the Ebola virus is of utmost importance to countries within West Africa where the current outbreak is located. These countries will focus on resolutions that focus on treating Ebola virus where it spreads

https://www.scielo.br/scielo.php?script=sci_arttext&pid=S0104-42302016000500458

⁴ <https://www.globalcitizen.org/en/content/16-organizations-that-are-working-to-end-ebola-in/>



as opposed to containment methods designed to protect the international community as a whole.

Other African Nations | African Nations have welcomed international help in the past when combatting Ebola outbreaks and they have already had the WHO confirm that the current virus spreading in Meliandou is an Ebola outbreak. African Nations will likely reach out for international help and for help from organizations unique to Africa such as the African Union and the Economic Community of West African States.

The European Union | The European Union has been a large supporter of African Nations and past disease outbreaks. Should this outbreak continue to spread, it is very likely that European Nations will have a large part in any eventual solution, whether that be monetary contributions, scientific research, or medical gear and professionals.

Non-European Large Nations (China, US, Russia) and those with Similar Ideals | These nations are less interested in finding a cure or a long-term goal as they are in containment and preventing the virus from spreading to their country. They will be far more likely to support containment protocols as opposed to research initiatives even though they may support research given the right situation and if they feel there is a need. These countries simply value economic concerns and want the solution that has the least detrimental impact on their economy.

Questions to Consider

- What has led to effective containment in the past?

- What can countries do if they have Ebola cases? What measures is the World Health Organization going to implement that allows them to combat the crisis at a local level?
- How can the WHO unite the governments and the populace in their efforts to combat the spread?
- Is it worthwhile to pursue a cure/vaccine/treatment or will previous containment measure be enough?
- What measures can be taken immediately to help stop the spread?
- How involved should the international health community be in combatting the Ebola virus?
- Should the World Health Organization consider partnering with any other international organizations to combat the spread of Ebola?

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Topic 2 | Health Scares Globally

History

Since its discovery in 1976 the Ebola virus has remained largely within African countries with almost all cases and fatalities coming from the Democratic Republic of the Congo, Uganda, Sudan, and nations in West Africa such as Cote D'Ivoire, and Liberia.⁵ In these past outbreaks, the number of patients that travelled to other countries was very minimal with casualties outside of Africa being almost zero total. These casualties have been low because the patients that have travelled out have Africa have been either asymptomatic or carrying a strain that does not cause viral symptoms in humans.

Ebola outbreaks have also been easily contained by the World Health Organization in the past leading to further confidence in the impossibility of an international outbreak. African Nations are very quick to call in the World Health Organization when possible cases are noted so that containment is possible in a rapid fashion which has led to few Ebola deaths. The most difficult part for the World Health Organization in past containments was the lack of existing infrastructure, whether that be adequate hospitals, lack of communication to remote villages, or other technical factors such as an inability to effectively trace the path of those infected with Ebola.

⁵https://www.cdc.gov/vhf/ebola/history/chronology.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvhf%2Febola%2Foutbreaks%2Fhistory%2Fchronology.html

Overall, even though the Ebola virus was identified in 1976 and has a small number of reported cases every year, the combination of factors above has made the international community relatively uninterested in reports of the Ebola virus.

Current Situation

As of now, the current Ebola outbreak has not sparked international attention outside of the World Health Organization because as mentioned above this outbreak constitutes something that comes and goes without a large impact on a regular basis. In addition, the only location that currently has cases is the small village of Meliandou in remote Guinea, further decreasing the potential impact of any international concern.

The factors that make this situation unique are the strain of the Ebola virus and the number of patients already infected by the time it is determined to be the Ebola virus. The strain of the Zaire Ebola virus as mentioned above carries with it an extremely high mortality rate of about 80%. This is cause for concern within the international community because should it spread, it would be extremely fatal and highly contagious. The other factor is the number of cases already reported. On March 23, the day the disease was confirmed to be Ebola virus, 49 cases have been reported with 29 deaths already being attributed to the virus.⁶ These statistics are another cause for concern because they constitute an Ebola outbreak that is already at medium size because on an

⁶ <https://www.who.int/csr/disease/ebola/one-year-report/virus-origin/en/>



annual basis, the number of Ebola cases is around five or a little under.⁷

Although the current outbreak constitutes one that would normally fly under the radar of the larger international community, the factors that make this outbreak unique may be cause for concern and possibly prompt international action.

Bloc Positions

African Nations | African Nations have the most to lose from a failed containment and because of this, African countries may focus on closing borders to non-essential travel to limit the possibility of the Ebola virus spreading to their country. They will focus primarily on local containment methods within their own countries and focus on their own borders before any international containment methods.

International Community | At the current threat level of the virus many countries will be unlikely to impose any restrictions or put any measures in place that might hurt their economies, other than travel bans from countries that have reported cases. These travel bans will help keep world economies open and thriving and are something that should be considered for any potential containment plans.

Countries with Large International Economies | Any country with an economy that relies on large amounts of international trade will want to focus on containment measures so that trade can continue. This is especially true for countries that trade with

African Nations frequently because if the Ebola virus were to spread rapidly then many economies of these economies would suffer greatly.

Proponents of the WHO | Countries that are major supporters of the World Health Organization are likely to follow any guidelines they hand down which would likely be more extreme than simple travel bans. Not all guidelines of the World Health Organization are followed by all countries which is something to consider when making an effective containment plan, but within many members of the international community, listening to the WHO is a given.

Questions to Consider

- How should the international community focus on preventing a global outbreak?
- Should the international community focus more on containment or work towards finding a cure and immediate treatment for afflicted areas?
- How can the international community aid African Nations that are combatting the Ebola virus?
- What guidelines should the World Health Organization establish to protect the international community?
- How can the World Health Organization work with governments of African Nations and foreign powers to coordinate an effective containment of the Ebola virus?

⁷<https://www.cdc.gov/mmwr/volumes/65/su/pdfs/su6503.pdf>



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Topic 3 | Reflection and Prevention

History

Before the current strain of Ebola has even been identified, the World Health Organization has already taken measures to prevent diseases such as Ebola. These measures include, responding to specific health emergencies, identifying, mitigating, and managing risks, supporting the development of tools necessary to combat outbreaks, and delivering essential health services in fragile settings.⁸ With these items being the focus for the World Health Organization during medical emergencies, they have managed to prevent and aid in the prevention of a number of diseases worldwide. These include past outbreaks of the Ebola virus that were successful because of spread detection and mitigation.⁹

In 2014, the World Health Organization is focusing on factors such as establishing early warning alert response systems (EWARS), providing leadership and technical expertise by providing numerous medical shipments and equipping personnel with equipment necessary for success, increasing overall capacity for diseases, and by improving the access to health information for all.¹⁰ The responses to pandemic specifically focus on how to allocate emergency funds, how to work effectively with other organizations, and how to coordinate with countries to have an effective response to any emergencies. With these measures in place,

⁸ <https://www.who.int/about/what-we-do>

⁹ https://www.who.int/health-topics/ebola/#tab=tab_1

¹⁰ https://www.who.int/hac/crises/syr/sitreps/syria_2014_annual_report.pdf



the World Health Organization will only continue to improve and adapt to be ready to face any disease situation.

Current Situation

Outbreaks of large-scale diseases are becoming more and more common with each year.¹¹ As of right now, the current Ebola virus outbreak is small and located in a remote village making in an ideal time for the World Health Organization to consider adding updates to how they currently handle pandemics.

The World Health Organization has not planned any major changes to their emergency response plan for this year other than the goals outlined for 2014 as highlighted in the history. Although these goals are rather comprehensive, any additional changes or any specific programs that delegates wish to consider in response to the Ebola virus and health emergencies in general should be focused on in this topic.

These overarching changes would focus on the World Health Organization's responses to international disease outbreaks and not to their overall policies regarding diseases and vaccinations. This is to limit the scope of changes to only changes that would go into effect during the current Ebola virus outbreak. The changes could focus on any of the major areas of the World Health Organization's response to health emergencies but need to be changes that could be tested during the Ebola virus outbreak.

These changes could also affect the World Health Organizations stance on non-governmental organizations. The WHO currently partners with several NGOs such as International Council of Nurses, International Pharmaceutical Federation, the World Medical Organization, and many more similar organizations.¹² These organizations have shown to be good partners for the World Health Organization, but these organizations are primarily focused on resolving longstanding medical problems, not focusing on immediate response programs. This leaves a possible opportunity for the WHO to grow by adding more emergency preparation in the form of NGO collaboration.

Bloc Positions

African Nations | Countries in Africa will be opposed to focusing on this topic because it does not directly address the Ebola virus recently identified in Guinea. Although it could represent potential improvements and changes, this topic will not be seen as an effective response by those involved so closely to Ebola when compared to focusing on containment or the development of medicine to fight the virus.

European Union | The member states of the European Union would enjoy updates to the World Health Organization to increase efficiency along with the numerous health program updates currently occurring in the world. This would go along with the updates to healthcare occurring within many European

¹¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4223919/>

¹² https://www.who.int/fctc/cop/observers_ngo/en/



countries and could lead to positive developments in the Ebola Outbreak.

Large Contributors to the World Health Organization

| Countries that contribute financially to the World Health Organization would like an assessment/update of World Health Organization protocols because it would allow them to see how their money is being allocated and give them a chance to influence how their donation affects the international health community.

Members with Outbreak History | Countries with histories of disease outbreaks would like the opportunity to improve the protocols of the World Health Organization during a small and remote outbreak because doing so could be very beneficial in stopping future large scale outbreaks if the measures could be tested and proven during this small scale Ebola outbreak.

Questions to Consider

- With outbreaks of diseases becoming more and more common, should the World Health Organization take the opportunity of this currently small Ebola virus outbreak to reassess some of its larger health based goals and focus more on stopping the spread of growing large scale diseases?
- Is there time to focus on implementing updates to World Health Organization Protocols even with the Ebola virus identification in Guinea?
- Does the World Health Organization's policy regarding international health emergencies need to be changed?
- What is the motivation for a change within the World Health Organization's

protocols and how will any changes be relevant during the current outbreak?

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