

# BSBMUN VI

## World Health Organization

### *Study Guide*

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## Letter from the Chairs:

Dear Delegates of the World Health Organization committee,

Welcome! It is a pleasure to be chairing this committee in the sixth edition of BSBMUN. The Chairs have spent hours planning the details of this committee, which we sincerely hope you can all enjoy. The topic was meticulously chosen so as to encourage a fruitful and dynamic debate. That being said, this study guide was written with as much detail to help your research and knowledge on the topic at hand. Nonetheless, please come with a complete and thorough research on your country's stance on the topic. So, as to make the discussion as in depth as possible.

Given the times we are going through, understanding and being compassionate about international issues has become all the more important. Please take that into consideration while debating, and try to really engage in the discussion. Delegates, keep in mind that this committee is a welcoming environment and will be a place in which you can have fun and learn. Take this experience and make the most out of it! The Chairs are looking forward to meeting all of you and launching into a fruitful debate.

See you at the conference!

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## Committee Description:

This committee serves the purpose of simulating a World Health Organization council, in which a diverse set of countries come together to address issues concerning health care and global well being.

## Topic A:

### Addressing the Safe Manufacturing and Distribution of COVID-19 Vaccines



**University of Oxford's Covid-19 vaccine in development**

## Background Information:

The Covid-19, or Sars-Cov-2 virus, pandemic is an issue that has caused global repercussions. Countries around the globe struggle to attend to the amount of patients in need of hospitalization, supplemental oxygen, and medical assistance. The coronavirus outbreak is the fifth pandemic after the 1918 influenza outbreak (H1N1), which followed the 1957 Asian Flu (H2N2), 1968 Hong Kong Flu (H3N2), and 2009 Pandemic Flu (H1N1). It started as an epidemic in the city of Wuhan in China, Hubei province. The first large scale reports can be traced back to late December 2019, in which a series of pneumonia cases in Wuhan were documented. Although, the earliest identification of a symptom had been December 1st, 2019. Symptoms generally include: fever, dry cough and malaise. It has been found that many of the early patients worked in or went to the Huanan South China Seafood Market, where animals such as birds and bats were sold. This, and the virus's genome sequence identity which had a 96% compatibility with a bat coronavirus, has led experts to suspect a bat origin.

The outbreak was first recognized after evidence of strong human to human transmission was supported by a WHO delegation that visited Wuhan, on the 22<sup>nd</sup> of February. According to the European Centre for Disease Control, by June 19<sup>th</sup> 2020, there were 8,142,129 cases and 443,488 deaths of Covid-19, since December 31<sup>st</sup>, 2019. As of now, numbers continue to escalate and 37.8 million people have contracted the virus, whilst 1 million have deceased. The pandemic was only officially characterized as one on March 11<sup>th</sup>, 2020, by the World Health Organization. Healthcare systems around the world have been struggling to attend to patient demands, seeing as there are cases that require supplemental oxygen and mechanical ventilation. Due to the disease's contamination curve, ([link to picture here](#)) a country can reach a staggering number of cases in a few weeks, which therefore overcrowds hospitals. All of which has increased the urgency of a vaccine. Also, the virus' predominant airborne transmission is highly infectious, which contributes to the rapidly growing amount of cases. Currently, the clinical management of this infectious disease has been limited to promoting infection prevention, through social distancing and the use of masks and hand sanitizer.

## Current Situation:

The development of a vaccine that could potentially immunize the population has been an ongoing mission for researchers around the world. Pharmas, biotechs, research institutes, governments and universities have been working together so as to accelerate the development of a vaccine and discover new therapies to treat the symptoms. Currently, dozens of vaccines are in development across the world. Yet their effectiveness and safety, so as to perform a widespread global distribution, is still in question. A vaccine can typically take 10-15 years to become available. The process of developing one consists of a three stage clinical trial process:

1. Ensuring the safety of a vaccine by testing if it triggers immunity in a small group of people.
2. Testing the vaccine of a widened group of people who have the disease, or are more susceptible to catch it.
3. Expanding the test pool to the thousands so as to assess how effective the vaccine is on a broader and diverse group of people.

Only after all these considerations, can a vaccine be released. Institutions such as, Moderna, Pfizer, Inovio, Johnson&Johnson and the University of Oxford have already started clinical trials. Some, such as Pfizer and Oxford had positive results. Given the urgency, vaccine developers have accelerated the process by running trial phases simultaneously. Although, the long term effects of rushing a vaccine are still unknown, and the problems that may occur are completely unprecedented. Today, to simply cover the American population manufacturers would need to produce at least 230 million doses of the vaccine, if it does not require a second dose. To produce something at such a large scale in a small window of time could cause issues with manufacturers. Also, the type of vaccine that will be effective in this case is still unknown. Therefore, if governments and funders choose to provide funding and increase manufacturing of a specific vaccine now, that could mean saving time and lives if that vaccine turns out to be efficient. Yet, if not, it would end up costing more lives and suffering. Also, some vaccines would require new processes that are unknown to the industry yet. For example, if a vaccine needs to incorporate genetic material from the coronavirus, to manufacture such pieces would be completely new to any company.

The American Food and Drug Administration and Dale Fisher, chair of the World Health Organization's Global Outbreak Alert and Response Network, have stated that a vaccine will most likely only be made widely available by mid 2021. Even after a vaccine is approved, there are potential impediments to its widespread distribution because of production and distribution. This includes, deciding which countries will have access to the

vaccine first, and to what extent. Experts say that more than one vaccine will be necessary to supply the world, and supplies will be limited at first. Furthermore, such supplies will need to be made, stored and transferred carefully.

The distribution of the vaccine is an important discussion when addressing Covid-19. Seeing as it is an issue that had global effects, there is also a global demand for the vaccine. Due to the scarcity of supplies, the distribution of the vaccine requires a well thought out plan.

### **Past UN Actions or Previous Attempts to Solve the Issue:**

In order to ensure the safe manufacturing and distribution of the Coronavirus vaccine, the World Health Organization, alongside with the Coalition for Epidemic Preparedness Innovation, Gavi, and the Vaccine Alliance, have created the COVAX facility. It stands for Covid-19 Vaccine Global Access Facility. COVAX is a global initiative created with the purpose of working with vaccine manufacturers and globally providing equal access to vaccines, once they are licensed and approved. COVAX also has a diverse Covid-19 vaccine portfolio, which already includes nine candidates and has other nine candidates under evaluation. By August 24th 2020 there were 172 economies involved in discussions to join COVAX, and by September 4th, 78 countries had confirmed their participation. The facility also aims to involve self financing participants so as to secure enough doses for vulnerable populations and distribute within line of need. Furthermore, COVAX proposes that contributing countries gain vaccines in proportion to their population until each economy is able to vaccinate 20% of its population. On the other hand, the facility ensures that non contributing countries will be allowed to cover essential workers before contributing countries help 20% of their populations.

The World Health Organization has also proposed a plan that prioritizes vaccinating health care workers, elderlies and those with conditions that put them at risk. This seeks to decrease Covid-19 deaths and protect health systems. Additionally, another approach suggested is the Fair Priority Model, developed by Zeke Emanuel, former director of bioethics at the National Institutes of Health, and other ethicists. The plan argues that in order to have an equitable distribution the vaccine must be firstly allocated to countries where it is possible to save the greatest amount of lives. Finally, a proposal by Vanderbilt University suggests that countries should be scored on their capacity to distribute the vaccine, provide care, and whether or not they have helped with tests and development. Countries with lower capacity to provide care, who have helped develop new therapies and have greater capacity to distribute the vaccine, would be prioritized when the allocation of the vaccines begin. These are all different plans proposed that could potentially create a system for the administration of Covid-19 vaccines, once they are put into the market.

Currently, the plan with the biggest international backup is the COVAX proposal, despite President Trump having announced that the United States will not join the facility.

## Key Terms:

### Pandemic

A disease occurring in multiple countries at the same time, typically affecting a significant portion of the population.

### Vaccine

A substance used to stimulate the production of antibodies and provide immunity against one or several diseases, prepared from the causative agent of a disease, its products, or a synthetic substitute. It is designed to act as an antigen without inducing the disease.

### Distribution

The action of sharing something out among a number of recipients.

### Public health surveillance

An ongoing, systematic collection, analysis and interpretation of health-related data essential to the planning, implementation, and evaluation of public health practice

### Equity

The quality of being fair and impartial. Unlike equality, equity involves treatment in accordance with an individual's needs, regardless of whether the same treatment is being given to all.

## Positions of Major Blocs and Countries

### European Union (Germany, France, Italy & Spain)

The EU was one of the first regions to be affected by the Sars-CoV-2 virus. With strict lockdowns imposed in Italy and then followed by other EU countries, the region now braces itself for a second wave of the Covid-19 disease, as the number of new cases per day soar.

In May, **France** announced it would be providing US\$4.9 million to a research consortium (CEPIS), composed of the Institut Pasteur, Themis Bioscience and the University of Pittsburgh.

One month earlier, in April, the European Commission announced an €80 million investment in CureVac, a **German** biotechnology company. Another €300 million investment was announced by the **German** government in June.

In August, the **Italian** government announced that a potential vaccine had started human trials in the Spallanzani National Institute for Infectious Diseases in Rome. This vaccine is behind other ones being produced by pharmaceuticals like AstraZeneca, so **Italy** has also secured 100 million doses to be supplied by Astra, in an agreement with the company.

### BRICS (Brazil, Russia, India, China & South Africa)

According to the WHO, “BRICS’ accomplishments in the field of vaccine development are expected to reshape the global vaccine market and accelerate access to vaccines in the developing world.” This shows the significant progress the BRICS countries have made in regards to vaccines. About the coronavirus vaccine, each country is working independently from each other, or testing their vaccines in other bloc countries.

**Russia** claims to be the first country in the world to have successfully developed a vaccine for the coronavirus, although the scientific community is skeptical about this claim. Scientists from renowned universities and giant pharmaceuticals argue that, even though all vaccines currently under development are in a sped-up process, the **Russian** vaccine was developed in such a time-frame that it is thought important phases were skipped. Despite the skepticism, some places have already ordered the vaccine, like the Brazilian state of Paraná.

In **Brazil**, some vaccines are being tested in the population, but are restricted to some states only. China is testing its vaccine in partnership with the Instituto Butantan in São Paulo, while the state of Paraná has agreed with Russia to host vaccine trials in exchange for having early access to the vaccine once the National Health Surveillance Agency (ANVISA) approves it. Other vaccines, like the one developed by the Oxford University, are also allowed to carry out tests and trials in **Brazil**.

In **China**, where the coronavirus first emerged, there is a major vaccine being developed, with human trials already authorized in countries like Brazil. Although leaders like the United States' President Donald Trump criticize the **Chinese** government for allowing the disease to spread out of its borders while knowing the risks, the Asian nation has made significant progress in addressing the development of a vaccine and announcing that it will be providing it to other countries.

The description of why the country, state, or organization is relevant with their view on the issue. Make sure the first line of the paragraph indented.

## United Kingdom

The UK government announced in April that it would create a task force to stimulate the development of a vaccine for the coronavirus. Industries, universities and government agencies continuously collaborate for the development of a vaccine, such that the Oxford University's vaccine is one of the most promising and clinically advanced products currently in development. The UK is working in collaboration with other institutions around the world, such as the Fiocruz in Rio de Janeiro. British pharmaceutical giant AstraZeneca has announced that it will be mass producing a vaccine once all tests are finished and regulation checks completed, working together with the UK government to then distribute the vaccine to several other countries.

## United States

The United States Biomedical Advanced Research and Development Authority (BARDA), a federal agency that funds disease-fighting technology, has announced that it would be providing US\$1 billion to support research and production of a coronavirus vaccine. The most promising and advanced candidates will receive special attention, supported by Operation Warp Speed, a public-private partnership to accelerate the safe development, production and distribution of a vaccine. Furthermore, the country is hosting several clinical trials in populous states like Texas and Florida, in collaboration with universities.

## Timeline of Important Events:

December 1st, 2019	Earliest identification of a symptom
December 31st, 2020	First large scale reports
February 22nd, 2020	World Health Organization recognized the disease as a large scale outbreak
March 11th, 2020	World Health Organization recognized the spread of Covid-19 as a pandemic
March 13th, 2020	Europe became the epicenter of the virus
April 2020	University of Oxford begins clinical trials for the Covid vaccine
May 2020	Pfizer begins clinical trials for the Covid vaccine
May 26th, 2020	Latin America becomes the new epicenter of the virus
June 2020	COVAX is created
July 7th, 2020	President Trump moves to pull the United States from the WHO

## Relevant Documents and UN Resolutions:

1. A/74/L.92 (Comprehensive and coordinated response to the coronavirus disease (COVID-19) pandemic) <https://undocs.org/A/74/L.92>

## Guiding Questions For Debate:

1. Why is the safe development of a vaccine of utmost importance?
2. How can the distribution of vaccines be equitable?
3. Should richer nations be allowed to buy-up entire stocks of potential vaccines even before they have been approved and mass produced?
4. In what ways can the most powerful regional countries assist in the regional distribution of a vaccine?
5. Should wealthier countries commit to provide vaccines for less powerful, smaller nations?
6. To what extent are National Health Surveillance Agencies responsible for the fast but safe development of a vaccine?
7. Which countries might have more power in negotiating deals for vaccines? What will they exchange, apart from money, for the vaccines? Which countries might not?
8. Are affordable and accessible vaccines more important than profit at this time? Why?

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