

DIMUNS

Dr.İlhamiTankut Anatolian High School Model United Nations Conference

Agenda Item: Open Agenda

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Table of Contents

- 1. Letter from the Secretary General
- 2. Letter from the Under Secretary General
- 3. Letter from the Academic Assistant
- 4. Letter from the Academic Assistant
- 5. Preparing for the Conference
- 6. Introduction to the Committee: World Health Organization
- 7. Past Global Pandemics
- 8. Bibliography

1. Letter from the Secretary General

Greetings Esteemed Attendees,

As the secretary general of the conference. It is with great pleasure that I extend gracious hospitality and welcome you all, participants of DiMUN'25, which will be held in Antalya from June 27th to 29th.

As we gather for this Model United Nations conference, we look forward to thought-provoking debates, insightful dialogues, and meaningful opportunities for collaboration. The delegates of this conference may have enlightening discussions and foster their diplomatic skills. With committees exploring a wide array of historical topics, delegates are sure to be both challenged and inspired, cultivating their critical thinking and diplomacy throughout the experience.

I would like to express my sincere appreciation to the organizing team and academic team for their dedication and hard work in order to raise DiMUN'25 to the pinnacle!

Furthermore, it is important not to place undue pressure on yourself before or during the conference. All participants are here to enhance their personal and academic growth while engaging with new peers in that kind of conference, so please be reminded of that. Therefore, remember to enjoy the experience and make the most of your time. Stay tuned for an enriching and memorable event.

Sincerely,

Erdem Demirci Secretary-General DiMUN'25

2. Letter from the Under Secretary General



Before anything else, I would like to thank the executive team for giving me this opportunity at this prestigious conference, and of course I can't forget the Rahmi and Efe. They have always supported me from the beginning, they are the best team I can ever think of.

First, it is very important to understand the role of WHO. In order to perform at your personal best, you need to clearly understand the role of the WHO.

This study guide not only provides an overview of WHO, but also essential information on epidemics from the Antonine Plague (165-180 AD) to COVID-19 (2019-2023) to support you during the sessions.

It is important that all delegates read each section carefully, as it will help you significantly throughout the Committee.

I am sure all of my delegates will show their best during the committee. I'm really excited to meet you all. If you have any questions you can contact me through mail or whatsapp.

Sincerely,

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5. Preparing for the Conference

Evaluate your Allocation

Once you receive your allocation, research your country's policies and its position on the committee's agenda. Knowledge about Allocation will always differentiate you from other delegates.

Read the Study Guide

In addition to researching your allocation, it is also important to read the full study guide, because by reading the study guide you can get familiar with the agenda item. Moreover, the guide not only contains basic information about your committee and agenda, but also helps you understand what you will be discussing in committee by providing different perspectives on the history of the topic, current events and key concerns. Even if you are familiar with the topic, it would be a mistake to come to the conference without consulting the study guide.

Read the Rules of Procedure

To ensure that all actions are in accordance with the appropriate Model United Nations protocol, the Secretariat of each conference submits a document outlining the Rules of Procedure. This document ensures that the session chair effectively guides the committee and maintains an orderly conduct throughout the session. Before the first official sessions begin, the presiding committee will brief you on the procedure.

6. Introduction to the Committee: World Health Organization

The United Nations' World Health Organization (WHO) is a specialized organization in charge of world public health. At the global level, it is the biggest intergovernmental health organization.

The WHO was established on 7 April 1948, and formally began its work on 1 September 1948. It combined the resources, staff, and responsibilities of the Office International d'Hygiène Publique in Paris, which included the International Classification of Diseases (ICD), and the League of Nations' Health Organization. After receiving a substantial influx of financial and technical resources, the agency's work started in earnest in 1951. Promoting health and safety while assisting the world's most vulnerable is the official mandate of the WHO. It offers countries technical support, establishes international health standards, gathers information on global health concerns, and acts as a platform for health-related scientific or policy debates.

The first of the International Sanitary Conferences (ISC) took place on June 23, 1851, and continued for approximately 87 years, until 1938. Cholera, which would continue to be a major concern of the ISC for much of the 19th century, was the subject of the first conference in Paris, which was almost entirely focused on the disease. It was challenging to come to an international consensus on suitable measures because the origin, cause, and transmissibility of many epidemics were still unknown and up for scientific debate. Over the course of 41 years, seven of these international conferences were held before any of them produced an international agreement involving multiple states. A convention was eventually reached at the seventh conference, which took place in Venice in 1892.

The Pan-American Bureau of Health (1902) and the Office International d'Hygiène Publique, or "International Office of Public Hygiene" (1907), were quickly founded, in part, as a result of the Conferences' success. The League of Nations Health Organization was created when the League of Nations was

founded in 1920. The WHO was created when the United Nations combined all other health organizations following World War II.

7. Past Global Pandemics

Throughout history, humanity has faced many major pandemics and these outbreaks have caused millions of people to lose their lives and deeply affected social and economic structures.

7.1) The Antonine Plague (165-180 AD)

The Roman Empire was impacted by the protracted and devastating Antonine Plague, also referred to as the Plague of Galen, which lasted from AD 165 to 180. Soldiers returning from campaigns in the Near East may have contracted and disseminated it. Because of the red and black skin eruptions that covered the entire body, scholars thought the plague was smallpox (Horgan), though measles has also been proposed. The Antonine plague has not yet produced any genetic evidence. It caused 5 million deaths.

7.2) The Plague of Cyprian (250-270 AD)

The Plague of Cyprian erupted in Ethiopia around Easter of 250 CE. It reached Rome in the following year eventually spreading to Greece and further east to Syria. The plague lasted nearly 20 years and, at its height, reportedly killed as



many as 5,000 people per day in Rome. Contributing to the rapid spread of sickness and death was the constant warfare confronting the empire due to a series of attacks on the frontiers: Germanic tribes invading Gaul and Parthians attacking Mesopotamia. Periods of drought, floods and famine exhausted the populations while the emperorship was rocked with turmoil. St. Cyprian (200-258 CE), bishop of Carthage remarked that it appeared as if the world was at an end.

7.3) The Plague of Justinian (541-542 AD)



The plague spread eastward to the Caucasus, infecting the invading Persian armies and becoming endemic in Europe in the west, but the worst of it ended in 590. It is impossible to be certain of the death toll during this epidemic. Estimates range from 25 million to 100 million deaths. It is generally accepted that about a third of Europe's population perished, but modern medical historians believe on the strength of the evidence that this figure is exaggerated and based on similarities with the Black Death. Until that plague ravaged Europe, there had never been an epidemic on the scale of the Justinian plague.

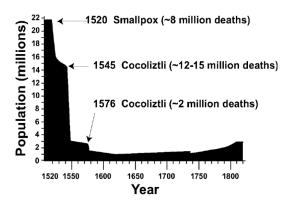
During the reign of Emperor Justinian I (527-565 AD), one of the worst plague outbreaks, claiming millions of lives, the plague reached Constantinople in 542 AD, almost a year after the disease first appeared in the outer provinces of the empire. The plague continued to ravage the Mediterranean world for another 225 years, finally disappearing in 750 AD.

7.4) Cocoliztli epidemics (1545-1548) - (1575-1580)

The Cocoliztli epidemics were a group of times many people in New Spain became sick. New Spain is Mexico and parts of South America today. The Cocoliztli epidemics were in the 16th century. Today, scientists do not know which germ caused the sickness. There may have

been a few different germs. People had fevers and bled from their ears and noses. The Aztecs called this disease "Cocoliztli." The epidemic is divided into two groups, causing a total of 7 million to 17.5 million deaths. It was one of the deadliest epidemics in history and the worst epidemic in Mexican history. The first wave of epidemics broke out from 1545 to 1548, killing 5 to 15 million people (about 80% of the Mexican people)

Population Collapse in Mexico



The second wave of epidemics broke out from 1576 to 1578 Between 2 and 2.5 million people died (approximately 50% of Mexico's people).

7.5) Influenza Pandemic (1557-1559)

The 1957–1958 Asian flu pandemic was a global pandemic of influenza A virus subtype H2N2 that originated in Guizhou in Southern China. The number of excess deaths caused by the pandemic is estimated to be 1–4 million around the world making it one of the deadliest pandemics in history.

7.6) Third Plague Pandemic (1855-1960)



The Third Plague Pandemic (1855–1959) was unprecedented for a number of reasons. For the first time in history, bubonic plague reached all five continents, striking major cities from Hong Kong (in 1894) to Bombay (1896), Sydney (1900), Cape Town (1901) and Los Angeles (1924). The pandemic left an estimated 12 million dead (including 10

million on the Indian subcontinent), and saw the implementation of extraordinary measures for its containment.

This outbreak was a major bubonic plague epidemic, this episode of bubonic plague spread to all inhabited continents, and ultimately led to more than 12 million deaths in India and China and perhaps over 15 million worldwide, and at least 10 million Indians were killed in British Raj



India alone, making it one of the deadliest pandemics in history. According to the World Health Organization, the pandemic was considered active until 1960, when worldwide casualties dropped to 200 per year. Plague deaths have continued at a lower level for every year since.

The bubonic plague was endemic in populations of infected ground rodents in Central Asia and was a known cause of

death among the migrant and established human populations in that region for centuries. An influx of new people because of political conflicts and global trade led to the spread of the disease throughout the world from Asia to the rest of Europe, to Africa and the Americas.

7.7) The fifth Cholera Pandemic (1881-1896)



The fifth cholera pandemic (1881–1896) was the fifth major international outbreak of cholera in the 19th century. It spread throughout Asia and Africa, and reached parts of France, Germany, Russia, and South America. It claimed 200,000 lives in Russia between 1893 and 1894; and 90,000 in Japan between 1887 and

1889. The 1892 outbreak in Hamburg, Germany was the biggest European outbreak; about 8,600 people died in that city.

Cholera has a high mortality rate if left untreated According to an old theory, cholera was considered an airborne disease and outbreaks were attributed to bad weather or miasma. Later in the 18th century, however, the English doctor John Snow (1813-1858) attributed the terrible cholera outbreak in London in 1849 to the contamination of drinking water with human feces. Despite this finding, the causative agent of this terrible disease was not identified until the late 19th century.

7.8) Russian Flu (1889-1890)

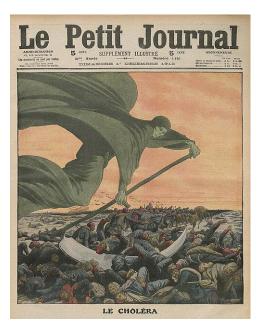
In 1889-1890, a pandemic known as Asiatic influenza or Russian influenza killed nearly 1 million people worldwide. Among the deadliest pandemics in history, it was also the last major pandemic of the 19th century. The most reported effects of the pandemic occurred from October 1889 to December 1890. It recurred in March-June 1891, November 1891-June 1892, the winter of 1893-1894 and early 1895.

Modern transport infrastructure assisted the spread of the 1889 pandemic. The 19 largest European countries, including the Russian Empire, had about 200,000 km of railroads, and transatlantic travel by sea took less than six days (not significantly different from current travel time by air, given the timescale of the global spread of a pandemic). It was the first pandemic to spread not just through a region such as Eurasia, but worldwide.

7.9) The sixth Cholera Pandemic (1899-1923)

The **sixth cholera pandemic** (1899–1923) was a major outbreak of cholera beginning in India, where it killed more than 800,000 people, and spreading to West Asia, North Africa, Eastern Europe, and Russia.

The last cholera outbreak in the United States was in 1910–1911 when the steamship Moltke brought infected



people to New York City from Naples. Vigilant health authorities isolated the infected on Swinburne Island, built in the nineteenth century as a quarantine facility. Eleven people died, including a health care worker at the island hospital

In 1913, the Romanian Army, while invading Bulgaria during the Second Balkan War, suffered a cholera outbreak that provoked 1,600 deaths

7.10) Spanish Flu (1918-1919)



The Spanish flu pandemic of 1918-1919 was the deadliest pandemic in world history, infecting some 500 million people across the globe—roughly one-third of the population—and causing up to 50 million deaths, including some 675,000 deaths in the United States alone. The disease, caused by a new variant of the influenza virus, was spread in part by troop movements during World War I. Though the

flu pandemic hit much of Europe during the war, news reports from

Spain weren't subject to wartime censorship, so the misnomer "Spanish flu" entered common usage. With no vaccines or effective treatments, the pandemic caused massive social disruption: Schools, theaters, churches and businesses were forced to close, citizens were ordered to wear masks and bodies piled up in makeshift morgues before the virus ended its deadly worldwide march in early 1920.

It broke out towards the end of World War I, when war censors in belligerent countries suppressed bad news to maintain morale, but newspapers freely reported the outbreak in neutral Spain, creating a false impression of Spain as the epicenter and leading to the misnomer "Spanish flu". Limited historical epidemiological data make the geographical origin of the epidemic uncertain and there are competing hypotheses about the initial spread.

7.11) Asian Flu (1957-1958)

1957 flu pandemic, outbreak of influenza that was first identified in February 1957 in East Asia and that subsequently spread to countries worldwide. The 1957 flu pandemic was the second major influenza pandemic to occur in the 20th century; it followed the influenza pandemic of 1918–19 and preceded the 1968 flu pandemic. The 1957 flu outbreak caused an estimated one million to two million deaths worldwide and is generally considered to have been the least severe of the three influenza pandemics of the 20th century.

The first cases were reported in Guizhou of southern China, in 1956 or in early 1957. Observers within China noted an epidemic beginning in the third week of February in western Guizhou, between its capital Guiyang and the city of Qujing in neighbouring Yunnan province. They were soon reported in Yunnan in late February or early March 1957. By the middle of March, the flu had spread all over China.

7.12) Hong Kong Flu (1968-1970)

The 1968 pandemic was caused by an influenza, It was first noted in the United States in September 1968. The estimated number of deaths was 1 million worldwide and about 100,000 in the United States. Most excess deaths were in people 65 years and older. The virus continues to circulate worldwide as a seasonal influenza A virus. Seasonal viruses, which are associated with severe illness in older people, undergo regular antigenic drift.

The first recorded instance of the outbreak appeared on 13 July 1968 in British Hong Kong. It has been speculated that the outbreak began in mainland China before it spread to Hong Kong

7.13) Covid 19 (2019-2023)

The virus is thought to be of natural animal origin, most likely through spillover infection. A joint-study conducted in early 2021 by the People's Republic of China and the World Health Organization indicated that the virus descended from a coronavirus that infects wild bats, and likely spread to humans through an intermediary wildlife host. There are several theories about where the index case originated and investigations into the origin of the pandemic are ongoing. According to articles published in July 2022 in Science, virus transmission into humans occurred through two spillover events in November 2019 and was likely due to live wildlife trade on the Huanan wet market in the city of Wuhan (Hubei, China).

During the early stages of the outbreak, the number of cases doubled approximately every seven and a half days. In early and mid-January 2020, the virus spread to other Chinese provinces, helped by the Chinese New Year migration and Wuhan being a transport hub and major rail interchange. On 20 January, China reported nearly 140 new cases in one day, including two people in Beijing and one in Shenzhen. Later official data shows 6,174 people had already developed symptoms by then, and more may have been infected A report in The Lancet on 24 January indicated human transmission, strongly recommended personal protective equipment for health workers, and said testing for the virus

was essential due to its "pandemic potential". On 30 January, the WHO declared COVID-19 a Public Health Emergency of International Concern. By this time, the outbreak spread by a factor of 100 to 200 times.

As of 1 October 2021, Reuters reported that it had estimated the worldwide total number of deaths due to COVID-19 to have exceeded five million.

The Public Health Emergency of International Concern for COVID-19 ended on 5 May 2023. By this time, everyday life in most countries had returned to how it was before the pandemic.

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