

World Health Organization

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General Assembly

Committee Background:

When the United Nations was first formed in 1945, one of its key aims was creating a global institution to address the growing concern of worldwide health issues. Thus, the World Health Organization (WHO) was created with the United Nations in 1948 with the goal of promoting global health, responding to health emergencies, and shaping health policy worldwide. The committee now serves 194 member states in over 150 areas across the globe. Headquartered in Geneva, Switzerland, WHO leads countless global initiatives each year, impacting the lives of billions.

The decision-making process is made in conjunction with the World Health Assembly (WHA) and the Executive Board, both of which meet annually in Geneva along with the WHO's member states. The host of organizations forms resolutions based on the agendas set by the executive board and is responsible for regulating financial practices, accepting or rejecting budget proposals. The Executive Board consists of 34 members, each serving a three-year term and meets twice a year, once before the World Health Assembly to set the agenda and once after the assembly to implement the decisions made.

The WHO created its 13th General Programme of Work in 2019, a five-year strategy to improve people's health on a national level. The Triple Billion Targets, which seek to provide universal healthcare to one billion more people, safeguard one billion more from health emergencies, and guarantee one million more individuals exhibit enhanced health and well-being, are a part of this project. The WHO also includes a Science Division and a Health Emergencies Programme, and it seeks to achieve universal health coverage, access to medicines and health goods, the reduction of antibiotic resistance, and research and analytics to assess its past, present, and future effects.



Topic 1: Addressing Mental Health and Wellbeing in the Workplace

Introduction

The World Health Organization says health is about more than just not being sick - it's about feeling good physically, mentally, and socially. Mental health is a huge part of overall health since it connects to things like good living conditions and physical health. Countries are supposed to give people access to healthcare so they can be as healthy as possible, even if they don't have a ton of money. But most countries only spend a tiny fraction of their budgets on mental healthcare - like 3% globally, and less than 1% in poorer countries compared to 5% in richer ones. The World Bank recommends that countries need to spend 5 to 8 times more on mental health services to really make a difference. There are many aspects that affect mental health - psychological, biological, social. People with mental illness often face stigma, discrimination, and lose out on rights and opportunities in school or work. And if they can't access mental health services, it just makes things worse. Age and gender play a role too. Men are way more likely to commit suicide, but women have more depression. All this takes a toll on society with increased poverty, homelessness, and less productivity.

Work is a big source of mental health problems around the world. As work changes, it's really important that employee well-being stays a priority. Almost 60% of people work, and 15% have a mental health disorder. Studies consistently show mental health issues like anxiety, depression, burnout, and stress are common at work. This hurts how well companies do, since it leads to more absences and people quitting. It also impacts the economy. But most importantly, it affects real individuals and their well-being.

Current Events

Access to mental health services looks really different across countries, but there's been a general trend of more access, especially in industrialized nations. In 2017, the European Union outlined recommendations for protecting mental health in the workplace, like better pay and shorter hours. Last year, the U.S. Surgeon General said long hours and bad working conditions were fueling



the country's mental health crisis. A 2022 survey found nearly 40% of U.S. workers felt their job hurt their mental health. These issues matter even more after COVID-19 totally shook up how we work and made existing problems worse. The pandemic really highlighted how much poor mental health drags down the economy - the WHO said it causes over \$1 trillion in global losses every year.

Developing countries are a totally different story. Facilities in richer nations are 50 times more accessible, even though 75% of workers live in developing countries and there's only around 2 mental health workers per 100,000 people in poorer nations. This lack of access and support cuts lives short by an average of 20 years for those with mental illness worldwide. It's clear there are still major gaps between different parts of the world when it comes to recognizing and treating mental health issues. But the pandemic has been a wake-up call about why this matters for people's wellbeing as well as the economy.

Relevant UN Action

In 2015, the UN set out 17 Sustainable Development Goals for the next 15 years. One was to make sure everyone has the right to good health and wellbeing. To help close the mental health treatment gap, especially in poorer nations, the WHO launched a Special Initiative for Mental Health in 2019. The goal is to reach 100 million more people with services, focusing on 12 specific countries. Expanding access like this could increase coverage by 50% and cut suicide deaths by 15% in those areas. As a UN agency, the International Labor Organization (ILO) also works with WHO on official guidelines for countries and companies to prioritize mental health at work. Together they've put out 12 recommendations covering different ways to put proven mental health interventions into practice on the job. Between the UN's development goals, WHO's programs to expand access, and ILO's workplace advice, there's a real push to make mental health a global priority and get treatment to underserved communities, however there's still a long way to go to make good on the commitment to health and wellbeing for all.



Questions to Consider

1. What strategies can be implemented to increase investment in primary, cost-effective mental health intervention packages?
2. How can gender-specific mental health issues be better understood and addressed to provide targeted support for men and women experiencing mental health difficulties?
3. What specific policies and programs can be implemented to increase access to mental health services in developing countries, where the facilities and mental health workers are significantly scarce?
4. What measures can be taken to increase public awareness and understanding of mental health issues, reducing the societal impact of mental health problems?

Useful Links

1. The World Health Organization: “Mental health at work”
 - a. <https://www.who.int/news-room/fact-sheets/detail/mental-health-at-work>
2. Centers for Disease Control and Prevention: “Mental Health in the Workplace”
 - a. <https://www.cdc.gov/workplacehealthpromotion/tools-resources/workplace-health/mental-health/index.html>
3. International Journal of Mental Health Systems: “Mental health and the workplace: issues for developing countries”
 - a. <https://ijmhs.biomedcentral.com/articles/10.1186/1752-4458-3-4>



Topic 2: Mitigating Medical Misinformation

Introduction

Misinformation has several different definitions, each relevant to separate groups of people, but for the purposes of this committee, it will be defined as “information that is false, inaccurate, or misleading” (Murthy). In recent years, the rise of digital communication and social media has transformed the way people access and share information. However, this rise has also led to a drastic increase in misinformation being spread across a variety of platforms. A 2018 study found that false news is 70% more likely to spread than true stories on Twitter, a platform that serves over 350 million active monthly users. The vastness of the internet is what makes medical misinformation such an immense threat, as there are a plethora of different sources that it can spread through, including websites, blogs, social media platforms, forums, and even mainstream media outlets. The convenience of information sharing without adequate fact-checking or verification gives misleading claims the potential to spread extremely rapidly, especially when internet users have an incentive to garner as many clicks and shares as they can. These different mediums paired with the speed of information flow makes misinformation an immense threat to public health. When patients have access to vast amounts of health-related information, in a phenomenon called “cyberchondria,” many individuals end up self-diagnosing and escalating normal health concerns into false medical conditions based on unreliable sources.

Medical misinformation can lead individuals to make ill-informed decisions about their health, such as refusing vaccination, adhering to unproven treatments, or neglecting evidence-based medical advice. In most cases, the phenomenon stems from a lack of trust or understanding of medical institutions and accurate procedures, leading to patients seeking alternative treatments. The continual circulation of medical misinformation has the potential to undermine public trust in medical professionals and decades of scientific research. Additionally, misinformation disproportionately harms underrepresented groups, including black and LGBTQ people, patients with low health literacy, and patients with digital disadvantages, who already have limited medical resources.

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Current Events

The spread of medical misinformation has become a major issue around the world, especially since the Covid-19 pandemic began. With a health crisis unlike anything in recent memory, people understandably turned to the internet and fringe news sources trying to make sense of it all. On top of that, the science around the virus seemed to change day to day, making it hard for the average person to keep up. As a result, questionable treatments, conspiracy theories, and just plain bad advice have spread far and wide, undermining efforts to control Covid-19. This has been a problem in wealthy nations as much as developing ones. Even as the pandemic wanes, this misinformation persists on social media and certain outlets, seen clearly in the lingering doubts about vaccines. Much of the blame falls on tech and social media companies, whose algorithms often amplified misinformation about Covid-19. However, platforms like Facebook, Twitter and YouTube have also used fact-checking and moderation to combat falsehoods.

Governments and regulators have also taken steps, pushing policies and education campaigns to fight medical misinformation. For example, in 2021 the U.S. Surgeon General released guidelines for confronting health misinformation in the wake of Covid-19. He called on media, educators, tech firms and health researchers to help stop the spread of falsehoods among the public. Critically, he said individuals and families also need to be vigilant and push back on misinformation when they encounter it. Tackling the information echo chambers that allow medical falsehoods to thrive will take a collaborative effort across society.

Relevant UN Action

In recent years, the WHO has taken meaningful steps to address "infodemics" - the overload of information that spreads during disease outbreaks. In 2020, they launched the Early AI-supported Response with Social Listening (EARS) project. This uses AI to analyze millions of online posts and identify narratives that could harm public health. Since starting, it has looked at close to 100 million

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posts for signs of distrust, unrest, polarization and more. Additionally, WHO has assembled a network of up to 200 fact-checking groups to flag false pandemic information on various platforms. In 2020, they also published a framework called Managing the COVID-19 Infodemic. It outlined 50 actions that people, communities and institutions globally can take to fight misinformation about COVID-19. By using technology and coordinating fact-checkers, they are working diligently to stop medical misinformation from jeopardizing public welfare.

Questions to Consider

1. What specific measures can social media and tech companies implement to prevent the amplification of medical misinformation and conspiracy theories on their platforms?
2. How does medical misinformation disproportionately harm underrepresented groups, and what targeted strategies can be implemented to address this issue?
3. What educational programs or campaigns can be implemented to raise awareness about medical misinformation and promote critical thinking skills?
4. How can the international community work together to coordinate efforts in mitigating medical misinformation, especially during global health crises?
5. In what ways can medical professionals and researchers actively engage with the public to provide accurate information and combat medical misinformation?

Useful Links

1. U.S. Department of Health and Human Services: “Confronting Health Misinformation”
 - a. <https://www.hhs.gov/sites/default/files/surgeon-general-misinformation-advisory.pdf>
2. The World Health Organization: “Infodemic”
 - a. <https://www.who.int/health-topics/infodemic>
3. American Family Physician: “Countering Medical Misinformation Online and in the Clinic”



- a. <https://www.aafp.org/pubs/afp/issues/2022/0800/editorial-counteracting-medical-misinformation.html>



Works Cited

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