



# Harvard Model Congress Boston 2024

## PROTECTING HEALTH IN TIMES OF CRISIS

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### INTRODUCTION



*Doctors and nurses  
taking part in  
protests in Sri  
Lanka as the crisis  
deteriorates.*

*BBC News*

**Great Recession –  
the worldwide  
economic  
slowdown from  
2007-2009  
ushered in by the  
burst of the US  
housing bubble.**

“Day by day things are running out. If we get to the point where it’s zero, then I don’t know what will happen... there may be a situation where we won’t be able to save patients’ lives,” a Sri Lankan doctor anxiously reports (Gautam, 2022). Across Sri Lanka, doctors are facing the challenge of meeting patient needs without access to essential medicines and supplies. As the country experiences its worst economic crisis in history, it is ushering in an even worse health crisis. Because about 85% of medical supplies in Sri Lanka are imported, and due to the lack of foreign currency reserves, essential drugs are almost impossible to get ahold of in the country. This was not always a problem in Sri Lanka. In fact, just last year, their healthcare system was considered “strong” by the Asia Pacific Observatory on Health Systems and Policies (Bagcchi 2022), as they managed to eradicate major infectious diseases such as neonatal tetanus, malaria, and increase their domestic life expectancy. Furthermore, their public health facilities were providing the majority of the nation’s healthcare services, resulting in decreased significant private spending on healthcare needs (Bagcchi 2022).

So, what went wrong? How did the nation’s healthcare system topple so quickly, and how can this be avoided in the future? This case of a country with a thriving healthcare system brought to its knees by an economic or political disaster is not unique to Sri Lanka. From the 2008 **global recession**, also known as the **Great Recession**, to the recent crisis caused by the onset of the COVID-19 virus, healthcare systems are often the first and hardest hit by any political or economic turmoil. Throughout this conference, you will be exploring methods to respond to health crises, particularly that of Sri Lanka, as well as prevent future ones.

## EXPLANATION OF THE ISSUE

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### *Historical Development*

During the start of the COVID-19 pandemic, we witnessed firsthand just how quickly healthcare systems could crumble. In the United States, New York's health care system practically unraveled, as it experienced extreme shortages of personal protective equipment, ventilators, and cashflow for hospitals (Joe McCarthy, 2020). During the 2008 Global Recession, healthcare budgets around the world were cut as governments sought to alleviate their spending and respond to the economic crisis at hand (The Lancet, 2008). Time and time again, governments around the world have been under or completely unprepared to respond to crises and often lack the infrastructure necessary to protect essential rights to citizen, such as healthcare.

The most concentrated area of the world is the Asia-Pacific region and, as a result, it faces many epidemiological challenges, from chronic to communicable disease. Because of this, it is imperative that the UN Security Council devise a response and preparedness plan for future crises that may occur in the region, as it can save millions of lives. The most recent global crisis was the onset of the COVID-19 pandemic, and that demonstrated how ill-prepared governments were for dealing with such devastating crises. Even now, 2 years into the pandemic, many countries have put resources into addressing the emergency, but not many have looked into investing in **emergency preparedness** (Anthes 2021).

The root cause of the lack of a global response in crisis can come down to the fact that despite increased interdependence and **globalization** worldwide, trade wars that arose recently (such as the US-China trade war) promoted a rise in **economic nationalism**, limiting the ability to have fluid and flexible supply chains worldwide, simultaneously increasing nationalism, making an overall global effort more difficult to achieve. In other words, recent trade wars have led to the perception that nations are more independent and cannot rely on their neighbors, leading to less cooperation in global supply chains.

### *Scope of the Problem*

There is a slew of potential factors to keep in mind when strengthening and making a resilient healthcare system as healthcare is dependent on multiple aspects of a country, from its political stability to economic strength. Thus, it is vital to understand exactly how each sector of the healthcare system is affected by a national crisis and what steps, both preventative and reactive, can be taken to minimize that effect.

### **War and Conflict**

War is detrimental to the state of health in a given nation. Not only does it affect health in the physical sense, due to death and injuries that occur as

***Globalization –  
the process of  
integrating people  
companies and  
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social changes.***

***Economic  
nationalism – a  
political ideology  
where a country  
protects its  
economy by  
reducing imports  
and foreign  
investments.***

*An ILO study found that, globally, 40% of the population are without social protection in health.*

a result of said conflict, but it also creates a range of risks that reduce access to necessary health services (Ekzayez, Alhaj Ahmad, Alhaleb, et al., 2021). A study conducted in Syria found that the occurrence of conflict in a particular area was negatively associated with the uptake of regular health services and positively associated with the need for emergency services, such as emergency deliveries and C-sections (Ekzayez, Alhaj Ahmad, Alhaleb, et al., 2021). Furthermore, the study discovered that the major challenges faced by the nation during war were attacks on healthcare, shortages in major resources such as the healthcare workforce, and no major source of central authority that could determine and manage health interventions in the most at-risk populations (Ekzayez, Alhaj Ahmad, Alhaleb, et al., 2021). Because wars tend to be based in urban areas, its impact on health consequences is increased (Beall, Goodfellow, Rodgers, 2011).

### Economic Crises

As we read above with Sri Lanka, economic crises can have drastic impacts on the state of health. There are several levers through which the economic state of a nation can impact its health system. Economic disasters cause depleted incomes, which tend to alter how people think about healthcare; people often decide to reallocate funds previously for their healthcare towards other more basic needs, meaning less people are medically insured and there are a greater number of untreated illnesses (Chang, Huang, Yang 2010). Furthermore, governments tend to divert resources away from the healthcare system towards easing the economic burden on banks, households, and the financial system (Chang, Huang, Yang 2010). And this negative impact also extends to the healthcare workforce. During economic recessions, there are less job opportunities and an overall lower income for those in the healthcare field (Jesus, Kondilis, Filippon, Russo 2019).

### Health Crises

Health crises have a clear and obvious impact on the management of health in a country. Namely these crises take total control over health systems in nations, particularly in low-income countries (OECD 2020). Because of this complete occupation of the healthcare system, it makes it difficult to focus on other major health issues; for example, in a pandemic, other infectious diseases or routine treatments are often neglected, as seen in the COVID-19 pandemic (Cuffari 2022). Even more, health crises tend to set back any progress made in the **equity** and access of healthcare. During the COVID-19 pandemic, the gap in access to essential healthcare globally increased and many low-income countries had to start from scratch with their healthcare systems (Cuffari 2022). The increased pressure on the healthcare community has severely impacted the mental health of health care providers, which in part led to a shortage of nurses in countries such as the United States (Yang, Mason 2022).

***Equity – The lack of preventable or remedial differences between groups of people for economic, social, geographic, or demographic reasons.***

However, if nations work together, then major change can be created. This can be seen in the global effort that eventually eradicated smallpox, where every nation contributed to the distribution of vaccines worldwide.

*A proper emergency response is characterized by preparedness infrastructure, supply chains, and government trust.*

### Emergency Response

For countries in the midst of a crisis, such as Sri Lanka, there are immediate needs that must be met. Effective emergency response can be encapsulated by three main issues: preparedness infrastructure, **supply chains**, and government trust. Transportation is a major aspect of the provision and access of medical resources. Without the proper infrastructure to facilitate safe transportation, it is nearly impossible to maintain health care in a crisis. Thus, it is necessary that governments invest in bridges, highways, and ocean ports (Hunt 2021).

Due to the increased global interdependence when it comes to medicine, hospital supplies, and other health essentials, the global supply chain has become an increased topic of conversation and a major key to providing stability in times of crisis. Thus, companies need to establish resilient supply chains that are aware of existing risks, diverse, and flexible. Without effective supply chains, it is impossible to deliver the necessary resources in a timely manner and have a functioning health system.

Finally, government trust is critical to effectively managing crises and protecting healthcare in the process. Without the trust of the government, people tend to lose trust in government organizations, such as the healthcare system. According to a study conducted by the Institute for Health Metrics and Evaluation and the Council on Foreign Relations, countries with the lowest COVID-19 infection rates were those that also had the most trust in their government and local communities (Bollyky, Hulland, Barber, Collins et al., 2022).

***Supply chains – The system that exists to deliver goods or services to consumers demographic reasons.***

### *UN Security Council Action*

The UN Security Council recently passed resolutions to address the equity of vaccine rollout. Resolution 2565 promoted national and multilateral methods, as well as international cooperation, to foster equitable and affordable access to the COVID-19 vaccine. Additionally, in Syria, the UN Security Council passed Resolution 2165 in July 2014 to provide humanitarian aid to Syrians through Jordan, Turkey, and Iraq – without the Syrian government's agreement on the matter, while confirming that the responsibility of protecting the population lay with Syrian authorities (UNSC, 2014). What can the UN Security Council as well as governments around the world do? One is to build out offices dedicated to the management of supply chains that can facilitate cooperation between the public and private sector (Hunt, 2021).

Despite these efforts to protect health rights in the midst of crisis, the UN still lacks a concrete plan to prevent and respond to major political, economic, and health crises that will undoubtedly arise. Most of the

legislation passed by the UN has been primarily reactive, and it will be important that prevention and management are also addressed in upcoming resolutions.

### *Other Policy Action*



*The World Bank International Development Association convenes to discuss potential intervention in Myanmar.*

The World Health Organization created the Emergency Response Framework (ERF) in 2017 to guide countries and organizations in effective crisis management as well as assess previous responses to major public health emergencies (WHO 2017). Additionally, the WHO has the Health Emergencies Programme, which partners with countries in the Western Pacific Region and assists in responding to emergency health dangers. The **World Bank International Development Association** and **International Bank for Reconstruction and Development** have been used to finance many of the interventions necessary to protect health in times of crisis (Uribe, Basu, Lindelow 2021). However, these programs and frameworks fail to address the issues on a global level, and they are also limited to only issues with healthcare; it does not take into account the variety of crises that can endanger human health.

## IDEOLOGICAL VIEWPOINTS

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### *Conservative View*

Conservatives support a robust crisis response system, but view this as an issue that should be handled by independent governments, without the interference of the global community. They believe that local governments should ultimately have the responsibility regarding healthcare access and protection and believe governments would be the most capable in addressing the unique needs of each country.

Furthermore, conservatives would also tend to support a more decentralized focus when it comes to resource allocation, as they view many of the supply chain issues because of globalization. That is not to say that conservatives do not see the value in said globalization, but rather that they want to reduce domestic dependence on foreign markets and suppliers that may not be available in a crisis.

### *Liberal View*

Liberals believe this issue is best addressed by a major effort of the international community. However, liberals still acknowledge the need for buy-in from the local level and want governments to take the initiative in building more robust systems of response and health. They believe that an international organization such as the UN Security Council can be the catalyst that pushes these governments to make the necessary changes.

*Following multilateral trade agreements in the mid-20<sup>th</sup> century, world trade surge and globalization increased.*



## AREAS OF DEBATE

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*The development of various COVID-19 vaccines required a major global effort and governments, multilateral organizations, and private firms invested billions in research and development.*

*Council on Foreign Relations*

***Stakeholders – those with a particular vested interest or concern in something***

There exists a myriad of ways to approach the issue, as there are multiple factors that contribute to a mismanaged response to crisis and breakdowns in healthcare systems. These proposals can be implemented on an international level, on a local level, or a combination of both. While each of these policies alone cannot completely address the issues laid out, they do make an effort to address a particular aspect of the issue. Of course, these solutions are by no means exhaustive; feel free to get creative and brainstorm your own ideas for tackling this problem.

### *Research, Development and Planning*

Following each major world disaster, from the Great Recession to the Ebola epidemic, there has been a call for nations to adopt a response strategy to better manage such events in the future. However, while many of these strategies exist, they are not often adopted by local governments in countries, and there is little investment made in refining and understanding the response plan ahead of an actual emergency.

While this policy is more relevant following the effective management of a crisis, it is important to also consider the aftermath of a crisis and the lessons learned. Following the last few major global crises, not much follow up was done nor data collected to better understand how the situations could have been better handled. This solution would necessitate systems being put in place so that the international community continues to build upon its work and successively improves in crisis management.

This can be achieved by creating a collective investment from governments around the world that is dedicated to researching and planning around the next major infectious disease or creating an emergency fund for a potential economic disaster, for example (Wellcome, 2021). It can also manifest itself as dedicated teams worldwide that are preparing for another worldwide disaster using the skills gained from previous health and social crises.

Proponents of this plan emphasize that its global approach to preparing for another disaster is the best method to solving an international crisis, and that investing upfront in preparedness will save money and stress down the line in an actual emergency.

Those opposing this plan, on the other hand, would argue that governments need to perform their own personal preparedness planning, as global approaches are often disjointed and can lack a clear focus due to all the contributing **stakeholders**.

### Political Perspectives on this Solution

Conservatives and liberals alike see the value in preparedness planning. Key stakeholders involved are local governments, non-governmental organizations, the private sector, media, and academic population, as they

are all heavily involved in the creation, distribution, and execution of a response plan during a crisis.

### *Creation of Necessary Legal Frameworks*

A major point of fault in many governments during crisis is a lack of transparency. In the Sri Lankan example, many doctors were not allowed to publicly speak about the medical shortage they were undoubtedly facing. Crisis makes it difficult for governments to function in the ways they normally do during times of peace, and for that reason it is incredibly important that the necessary legal infrastructure is put in place to ensure property rights, freedom of speech, and basic human rights during an outbreak, war, or economic downturn. Having these frameworks in place helps to preserve trust in a nation, which is vital to managing crisis. In a paper exploring the role of trust during crisis, the **World Economic Forum** made clear that the countries that handled the pandemic the best did not actually have the most robust healthcare system or had been touted as the most prepared to resist a major virus, but those with the highest levels of “national and local trust” (Dielman 2022).

Creating an international or country-specific standard for the preservation of rights in crisis is one way to implement this solution. For example, the **UN Human Rights Council** has also created a rules of engagement for countries taking emergency measures as a result of a crisis, such as needing to officially state they are taking emergency measures, putting a time limit on said measures, not discriminating when measures are taken, and not encroaching on certain fundamental rights, such as the right to life (UN Human Rights Council 2020). Adopting such a framework can reduce the loss of basic rights during crises and help promote trust between government and citizens.

Proponents of this solution bring up how often the rights of citizens are jeopardized during a crisis, and that there needs to be a system in place beforehand to ensure that human rights are maintained internationally in the face of a crisis. They also emphasize that this is a more cost-effective solution, as setting these frameworks in place does not require physical labor or infrastructure.

Opponents of this solution think that it is too **paternalistic**, and that local governments, and local governments alone, should be responsible for enforcing these rights during times of crisis. Furthermore, they believe that such a solution could limit a government’s ability to act efficiently and effectively in a crisis, as they may not have access to their full emergency powers.

### Political Perspectives on this Solution

The UN Human Rights Council has introduced background on this issue in their 2020 publication “COVID-19 and Human Rights,” where they outline how they expect countries to behave in crisis building off lessons

***Paternalism – any action that can limit a nation’s liberty or autonomy in the pursuit of their best interest.***

***UN Human Rights Council – UN body dedicated to the promotion and protection of human rights worldwide.***

learned from the COVID-19 pandemic – this would be an important resource and stakeholder to draw from when considering this solution.

### *Diversification of Global Supply Chains*

The biggest threat to low-income countries in times of crisis is access to essential resources, such as medicines, vaccines, and medical equipment. This is because high-income countries tend to monopolize the supply; we have seen this occur during the 2008 Global Recession and during the COVID-19 pandemic. Increasing regional manufacturing capacity will mean that there will be greater access to treatment and other necessary resources, even during a crisis (Wellcome 2021). In order to this, there needs to be active investment in building up this manufacturing, particularly in countries that lack the resources necessary to build it out themselves. When these domestic supply chains are secured, countries are more likely to have access to necessary resources in an emergency.

This can be achieved by coordinating with the public and private sector to develop manufacturing sites for major important health resources, such as vaccines and medical equipment. Major pharmaceutical companies, medical experts, and health companies would need to be involved in this process and form strong relations with local governments in low-income countries to create an incentive for developing their manufacturing locations in new areas.

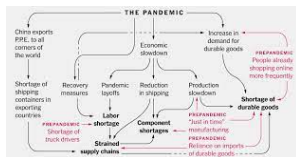
This solution is particularly helpful because it helps reinvest in local economies for low-income countries while addressing the issue of supply chain in the future. Not only will this create jobs in the future, but it will also allow these countries to have quick access to necessary resources at a relatively low cost.

However, this solution will be difficult to implement, as it will need to be presented as incredibly profitable for it to attract the private sector. In relation, to increase profits in low-income countries, many of the companies may opt to decrease wages and have employees work longer hours, which would create an ethical dilemma. It will be difficult to implement this plan while protecting the rights of workers in the face of major corporations. Finally, logistically, this solution will present a challenge, as other countries do not have large, well-organized ports that marine liner services need (Shih, 2020).

### **Political Perspectives on this Solution**

Conservatives are quite open to this solution, as they believe that each country should be investing in its domestic supply ability. They would like to reduce the dependence on the global supply, and have countries adopt a more inward-facing approach to accessing vital resources. Liberals would also be in favor of this solution, as everyone witnessed the breakdown of the global supply chain during the pandemic. They would still feel that higher-income countries should assist low-income countries in the

*Diversifying supply chains can only work if the solution is profitable to the private sector and maintains workers' rights.*



*This figure explains how the global supply chain broke during the COVID-19 pandemic*

*New York Times*



***Surveillance –  
Monitoring  
behavior, activities,  
or information in  
order to manage and  
direct future  
decisions.***



*UN peacekeepers  
distributing medical  
services to civilians  
in Moum, Unity  
State, Ghana*

*United Nations  
Peacekeeping*

provision of resources during a crisis, as they don't think global supply chains can make certain countries self-sufficient.

***Surveillance***

One of the biggest roadblocks in maintaining optimal health facilities in the midst of a crisis is a lack of sufficient time to prepare for the said crisis. That is why constant **surveillance** is so incredibly important to this issue – being able to identify and respond to threats earlier will allow for the Security Council and local governments to be in a more proactive, rather than reactive, position. A proposed solution is creating an international set of surveillance networks that can detect local dangers prior to it becoming a regional, national, or international problem (Wellcome, 2021).

This international surveillance system can be used to identify a variety of issues, from an initial outbreak of a virus that has the potential to become endemic, or an economic downturn that can trigger a recession, to the rise of a new terrorist organization that can become a danger to a nation's political fabric. It would rely on local reporting and require a buy-in from the surveillance programs of governments around the world.

Having an international surveillance system would allow for faster and more robust response to problems and supporters of this solution argue that it requires international cooperation, as the world becomes more and more globalized.

Those against this solution bring up the issues of privacy and autonomy in a country with such a system in place. As countries have their own individual laws regarding government surveillance and information-sharing, it will be incredibly difficult to come to an international standard; furthermore, certain countries may not feel comfortable with other nations potentially having access to their intelligence.

**Political Perspectives on this Solution**

There is a spectrum of views on this topic, but conservatives would generally believe that increased surveillance could infringe on a country's **autonomy** and threaten domestic security. Liberals, on the other hand, do not have especially strong views on this proposed solution; their main concern would be ensuring that control over this surveillance system remains equal and is not exploited by a particular country or interest group.

Depending on the type of surveillance being conducted, this solution could involve a variety of interest groups, from departments of defense in member countries to immunological departments that have been monitoring the spread of COVID-19 and other infectious diseases. Involving an array of such stakeholders will allow for a more comprehensive surveillance system.

***Deploying Peacekeepers***

One of the most notable powers of the UN Security Council is its ability to call and deploy **peacekeepers**. Aside from serving in high-conflict areas

*Autonomy – the state of being self-governing.*

*There are currently over 100,000 UN peacekeeping personnel from over 100 countries.*

*\$6.37 billion was approved for UN peacekeeping operations in 2021.*

as a source of protection, peacekeepers can also provide medical services to vulnerable populations. In Moum, Unity State in Ghana, peacekeepers provided free medical supplies as well as gave necessary treatments and operations to both soldiers and civilians (UN Peacekeeping 2020). Deploying peacekeepers in an emergency is especially helpful because they are a group of trained UN officials that can be physically on the ground during a crisis. They can serve to protect, distribute medical resources, and even preform services while in a host country; this can be especially helpful for high-risk countries that do not have the resources to mobilize their own healthcare personnel. During a major crisis, when the necessary resources in a given country are available, there is often still the problem of actually getting those resources directly to locals; this is where peacekeepers come in, as they remain in the country for an extended period of time and can play a variety of roles while there.

Peacekeepers have been found to play an important role in delivering humanitarian aid, particularly in emergency situations, and are one of the most straightforward and vetted resources for providing aid to countries in crisis.

On the other hand, there are quite a few potential issues with this solution. For one, peacekeepers themselves can be a danger to the health of the area they are serving in, as there is not always adequate medical screening for peacekeepers before and during their deployment in a country (Davies Rushton, 2015). Furthermore, it creates a moral conundrum, as use peacekeepers can often lead to health aid being politicized, as peacekeepers use the medical resources, they offer to curry favor with locals (Davies Rushton, 2015).

#### Political Perspectives on this Solution

Peacekeepers are highly controversial, on all sides. Most people have come to the conclusion that peacekeeping is ineffective, but the UN remains staunch in its support of peacekeeping, as there is no other viable option. However, it is important to note that most of the issues the public and interest groups have with peacekeepers are related to their presence as defense in military operations or war-afflicted areas. Peacekeepers being deployed to provide health services is, while hotly debated, less criticized

## BUDGETARY CONSIDERATIONS

The UN Security Council, like all UN arms, is funded by member and voluntary contributions. Most of the Security Council's budget goes toward the maintenance of peacekeeping operations; for example, in July 2021, the Fifth Committee approved \$6.37 billion for 12 peacekeeping missions to take place over the next 11 months (UN Fifth Committee 2021). Apart from this, it is important that you consider how vastly different the cost of each solution will be, and who will bear the burden of the cost in each scenario.

For example, a solution like diversification of supply chains would require more direct investment from private companies, who would be bearing the cost to develop more production facilities outside of their typical scope, and perhaps an investment or partnership with a local government. Creating a surveillance system, on the other hand, would require voluntary investment from a number of countries (with higher-income countries perhaps investing the most) in order to be viable, as it requires a buildup of technology, infrastructure, and data-sharing. Thus, it is helpful to think of which solutions are in your scope as a UN Security Council member, what will require buy-in from high-income countries, and what relationships can be forged with non-governmental stakeholders that can potentially fund a plan as well.

## CONCLUSION

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Reliable and accessible healthcare is key to achieving key global sustainability goals. However, it will be difficult to attain such a goal when healthcare systems are constantly in flux and weakened by a range of other societal factors and crises. Putting systems in place to fortify healthcare against economic, political and health crises will allow the UN Security Council to better protect health systems worldwide and will ensure the advancement of the healthcare provided.

In order to achieve this, you will need to think through the most viable solutions, both for your particular country and what will be amenable to the international community. As we have discussed there are a variety of problems currently affecting the state of health in the world. You will decide which problems you want to prioritize and address, the manner in which you believe these problems should be addressed, and how it can be communicated to your fellow delegates to make it an appealing plan internationally. You will need to reform your plan to fit in with the cultural contexts of various nations while keeping in line with the purposes and principles of the UN Security Council, “to achieve international co-operation in solving international problems of an economic, social, cultural, or humanitarian character.”

You will need to consider the costs associated with your solution. This can be the material costs of actually implementing the solution (e.g., what it will cost the UN or member states), or the implementation costs associated with a nation adopting a new principle, custom, or way of functioning. Weigh the various costs and benefits, and you will arrive at an optimal solution. This solution may be one of those proposed, a blend of those ideas, or something entirely new that you bring to the discussion.

Finally, remember how impactful and important this issue is, especially in a post-pandemic world. You have witnessed firsthand just how destructive a health crisis can be; now you can play a role in ensuring that the world can respond prudently to such an emergency, and the lives lost,

livelihoods abandoned, and hope forgotten during the pandemic are never again a reality.

## GUIDE TO FURTHER RESEARCH

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As the pandemic continues to unfold and policy changes from day to day, delegates should focus research both on what changes the international community is actively making to deal with things in the short-term and what it has done in the past to respond to major disasters. The COVID-19 pandemic response is a great resource to draw on, as it demonstrates our most recent level of readiness; however, delegates should also investigate natural disasters, recessions, and political conflict to get a holistic sense of how healthcare systems can be threatened.

Additionally, delegates should also investigate ~~z~~non-governmental organizations (NGOs), think-tanks, economists and scientists that are contributing to this research, as they can provide a viewpoint that may not cater to interest groups. Delegates can also find other UN bodies that have investigated something similar, such as the UN Human Rights Council, World Health Organization, and World Bank.

Delegates should be looking for data on crisis effective response methods and mitigation strategies. Getting a wide of array of data successfully deployed in different contexts will allow you to develop a solution that can be tailored to a broad offering of nations.

## GLOSSARY

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**Great Recession** – The worldwide economic slowdown from 2007-2009 ushered in by the burst of the US housing bubble.

**Global Recession** – A long period of economic slowdown or decreased economic output worldwide.

**Emergency preparedness** – the procedure put in place to ensure safety before, during, and after an emergency.

**Globalization** – process of integrating people companies and governments, as its associated economic and social changes.

**Economic nationalism** – A political ideology where a country protects its economy by reducing imports and foreign investments.

**Equity** – The lack of preventable or remedial differences between groups of people for economic, social, geographic, or demographic reasons.

**Supply chain** – The system that exists to deliver goods or services to consumers.

**World Bank International Development Association** – Part of World Bank aimed at working with the poorest countries, providing zero-interest loans and grants for economic growth-boosting and inequality-reducing activities.

**International Bank for Reconstruction and Development** – The lending arm of the World Bank that provides loans to middle-income developing countries.

**UN Human Rights Council** – UN body dedicated to the promotion and protection of human rights worldwide.

**Paternalism** – Any action that can limit a nation's liberty or autonomy in the pursuit of their best interest.

**Autonomy** – The state of being self-governing.

**Surveillance** – Monitoring behavior, activities, or information in order to manage and direct future decisions

**Stakeholders** – those with a particular vested interest or concern in something

**Peacekeeping** – A role of the UN that includes activities put in place to maintain lasting peace in conflict nations, reduce civilian and war deaths, and reduce the potential for additional warfare.

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