



**SRMUN Charlotte**  
March 26-28, 2021  
*Unity: Coming Together to  
Address a Changing World*

Draft Resolution 2-1

Committee: World Health Organization Executive Board  
Subject: Global Pandemic Response

The World Health Organization Executive Board,

*Understanding* the different levels of vaccine availability around the globe,

*Fully aware* of the need for updated and improved infectious disease plans,

*Realizing* the need for effective contact tracing to mitigate the spread of infectious diseases,

*Appreciating* open dialogue and transparency between Member States and their government's health officials,

*Fully believing* that partnerships with the private sector make distribution of supplies more efficient and widespread,

*Considering* the importance of ensuring a strong social safety net to mitigate the impacts of both COVID-19 and future epidemics and pandemics,

*Keeping in mind* the General Assembly Comprehensive and Coordinated Response to the COVID-19 Pandemic resolution, which called for intensified international cooperation and a focus on human rights through gender-responsive and people-specific pandemic responses,

1. *Further encourages* the increase of pandemic mitigation campaigning methods by:
  - a. Setting up pandemic ringtones or emergency alert messages, modeled off of India's COVID-19 ringtone and the severe weather alerts used at a national level within many Member States,
  - b. Posting pandemic campaign materials on all outlets including local news channels, printed media, roadside electronic billboards, and all social media platforms (Twitter, Instagram, Youtube, Weibo, VKontakte, and Facebook),
  - c. Sharing awareness materials in the Member State's official languages as well as all regional languages in order to increase the outreach of pandemic campaigns,
  - d. Emphasizing the effectiveness and safety of approved vaccines, and,
  - e. Increasing citizens' trust using government transparency specifically through:
    - i. Holding Press conferences by governmental officials to allow journalists to ask questions, and,
    - ii. Opening phone lines, websites, and social media outlets for citizens to directly receive information about pandemic response;
2. *Invites* Member States, taking into account the gripping economic effects of epidemics and pandemics, to consider fortifying the social safety nets of their independent territories by:
  - a. Implementing a basic income program or other subsidies for poor and vulnerable households by mirroring and advancing the Republic of Colombia's *Ingreso Solidario* by:
    - i. Providing cash transfers to poor and vulnerable families through the use of digital wallets and other novel mobile phone payment services,
    - ii. Adding additional forms of assistance conditional on the number of children attending school and regular medical check-ups, and on the number of individuals over 65 years old living in the household, and,

- iii. Requesting funding from the Contingency Fund for Emergencies for these incentives, and,
  - b. Working with small to medium-sized businesses and their employees to ease the transition to normalcy, as seen in the Republic of Colombia's *Programa de Apoyo al Empleo Formal*, through:
    - i. Providing loan guarantees focused on sustaining reopened businesses and their payrolls, and,
    - ii. Pausing payroll cuts to prevent further workforce losses;
- 3. *Further Invites* Member States to have open communication and update the public through:
  - a. Creating a virtual platform available to community leaders, government officials, healthcare workers, politicians, and other top officials in a country to increase transparency and accountability between Member States while also sharing creative solutions with each other, and,
  - b. Regularly updating the WHO Dashboard so that Member States can compare regulations and efficacies side by side as a trusted source;
- 4. *Recommends* that Member States implement effective contact tracing measures, overseen by the World Health Organization's Strategic Advisory Group of Experts on Immunization (SAGE), by developing information technologies that can track where individuals positive for the infectious disease have been, such as:
  - a. Keeping records of patient interviews, specifically regarding where they may have travelled rather than private medical information, and making those accessible to government officials,
  - b. Utilizing an opt-in contacting app to track pandemic impact on businesses,
  - c. Obtaining data from global positioning systems (GPS) and international travel histories to notify individuals that may have come in contact with an infected person, and,
  - d. Using public security systems to further identify public locations where individuals may have been exposed to someone with an infectious disease;
- 5. *Encourages* increasing the access to the COVID-19 vaccines and all future pandemic vaccines by,
  - a. Utilizing public transportation to facilitate better access to vaccination locations,
  - b. Increasing distribution of vaccinations to rural and lower income communities who cannot access public transportation, and,
  - c. Including local volunteers to aid in the transportation and distribution of vaccines to encourage trust and sustainability in the community;
- 6. *Calls upon* the centralized ministries of health within Member States to partner with the private sector, as modeled by the Korean Ministry of Health and Welfare's partnerships with four private diagnostic companies, in order to more efficiently and effectively distribute testing kits, vaccines, etc.; and,
- 7. *Emphasizes* the need for Member States to update their infectious disease plans every five years, keeping in mind pieces within the plan that could be strengthened after experiencing a global pandemic.