



WORLD
HEALTH
ORGANIZATION
TOPIC GUIDE

Aanya Gupta, Iris Hur

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JUNIOR ACADEMY MODEL UNITED NATIONS

- Eighth Annual Conference -

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JAMUN VIII SECRETARIAT

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FACULTY ADVISORS

Mark Kramer
Faculty Advisor

Christine Wallace
Faculty Advisor

Dear delegates,

Welcome to JAMUN. I am so excited to see all of you in person this year. I am a sophomore here at Bergen County Academies in AMST (Academy for Medical Science and Technology). My first experience with Model UN was joining the club at the start of my freshman year. Being a part of Model UN has been an amazing experience for me. From learning about global issues and debating to making great friends along the way. I hope we can provide you all with such an experience over the course of the committee as well. Besides MUN, I play soccer and I love to go skiing in the winter. I also probably spend way too much time watching tv and on Tik-tok. Model UN is a great way to practice public speaking, immerse in exciting debate, and work with people from many different schools. We hope this committee session of the World Health Organization will get your mind thinking to make novel solutions. If you have any questions about Model UN, WHO, or anything else feel free to reach out and email me!

Good luck and have fun,
Aanya Gupta

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Dear delegates,

I hope you're all thrilled to participate in this year's JAMUN! My name is Iris Hur, and I'm more than excited to serve as your co-chair alongside Aanya. While I may be more of a new Model UN member, I am still so eager to help this year's JAMUN committee run smoothly. I particularly joined Model UN because of the life-changing lessons it provides; from mastering detailed research to public speaking, it's no doubt that Model UN truly lays the ground for a transformative experience. Aanya and I will do our best to ensure a fulfilling experience and to make certain that all delegates are heard and respected. Regardless of your past Model UN experience, I guarantee that you will walk out of this committee session with a more open-minded and deeply broadened intellect. As I will do my best to make this conference as enjoyable as possible, I hope you will find excitement in working alongside your peers to create diverse solutions to these global issues. Should you have any questions regarding WHO, please don't hesitate to reach out to my email listed below.

Best wishes,

Iris Hur

INTRODUCTION

Malnutrition is primarily defined as the deficiencies or excesses of one's intake of nutrients, resulting in severe health issues. Malnutrition consists of both sides of the spectrum: undernutrition and being overweight. It can also be caused by noncommunicable diseases (NCD); these are known to be of longer duration and caused by genetic or behavioral factors. There are two main forms of undernutrition that result in an unhealthy lifestyle. First, there is wasting: low weight-for-height. Signs of it are indicated when one undergoes severe weight loss due to an insufficient amount of food and/or frequent illnesses. Next, there is stunting: impaired growth and development in children commonly due to chronic undernutrition and typically associated with poverty. Stunting prevents children from developing to full mental and physical ability, and it is irreversible. In 2018 stunting affected 21.9% (149 million) children under the age of 5 years, while wasting affected 7.3% (49 million) children under the age of 5 years. About 45% of deaths among children under the age of 5 years are associated with undernutrition. These people usually reside in lower-income countries. However, even with these large percentages of undernutrition, obesity rates are simultaneously rising. Every country is affected by at least one form of malnutrition, thus rendering it a universal health crisis as undernutrition is continuing to be more prominent in developing countries and stimulating a surge in fatalities.

TOPIC:
Combating Malnutrition in
Developing Countries

The United Nations Second Sustainable Development aims for the elimination of hunger by 2030. The World Health Organization (WHO) has been working with member states and partners in hopes to meet this goal and secure universal access to nutrition interventions and strong food systems that ensure healthy diets for all. It is vital for delegates to think of solutions that will perpetuate change within this global health issue that has been lasting for centuries.

HISTORY OF THE ISSUE

The first studies of malnutrition can be traced back to the "dark ages" of nutritional study, before 1959 when Nevin Scrimshaw and his colleagues carried out studies in Guatemala. His research carefully observed the relationship between infectious diseases and malnutrition. During the decade of the 1950s, however, knowledge of the immune system was very limited. So, most of the available information was derived from animal studies, or more specifically, animals that lacked certain nutrients in their diet and were

subject to poorer living conditions. However, the animals, unfortunately, only represented, at best, a small portion of the human situation. This was because animals are naturally protected from external infectious diseases, unlike humans.

Studies were more extensive during the "Renaissance" (1959-1968), when authors made the case that malnutrition resulted in increased exposure to infection and that infection caused deterioration of nutritional status. This was because infection alone causes a loss of critical body stores of protein, energy, minerals, and vitamins. During the "Reconstruction era" (1980-1990), new discoveries began to capture the interest of immunologists to study the effects of nutrition on immune function, and eventually resulted in greater collaboration between immunologists and nutritionists.

The Sustainable Development Goals (SDG) and World Health Assembly have targeted bringing new attention to the dangers of malnutrition,

but have not successfully achieved financial highs. In 2015, official spending on nutrition totaled to be \$867 million, but that amount decreased from a high of \$870 million in 2013. Furthermore, the Global Nutrition Report reported finding almost a complete neglect of programs to address malnutrition and diet-related NCDs.

Evidently, funding is a large contributor to the global problem of malnutrition. However, the Food and Agriculture Organization (FAO) has accentuated the correlation between malnutrition and conflict, especially in areas of famine. This has been severely worsened by the effects of climate change, including droughts and floods.

CURRENT SITUATION

According to the Global Nutrition Report, despite some progress, diets are not getting healthier, yet are making increasing demands on the environment while intolerable levels of malnutrition persist. In 2021,

149.2 million children under 5 years of age were accounted to be stunted, 45.4 million wasted, and 38.9 million overweight. In the African region, no country was seen to meet any of the diet-related NCD targets. There is clearly an urgency in improving efforts to counteract poor diets and malnutrition in all forms.

Diets worldwide are not nearly close to being considered healthy and have not improved over the last decade. Fruit and vegetable intake is still 50% below the recommended level and legume and nut intakes are each more than two-thirds below the recommended two servings per day. While lower-income countries continue to have the lowest intakes of key health-promoting foods, including fruits and vegetables, along with the most alarming rate of underweightness, higher-income countries have the highest intakes of food with high health risks including red meat, processed meat, and dairy, and the highest rates of obesity. Despite the considerable

contrast in distribution of nutrition among different regions, none of them meet the recommended consumption amount for a healthy diet. Deaths caused by poor diets have increased by 15% since 2010 and are now responsible for more than 12 million NCD deaths in adults; this is an alarming 26% (a quarter) of all adult deaths annually. Every region inevitably faces the challenges of mortality rates from diet-related NCDs.



Economic fallouts are significantly contributing to malnutrition too, now exacerbated by the effects of the Covid-19 global pandemic. 120 non-governmental organizations have recently worked with their communities

to write an open letter calling global leaders to do more to respond to persisting increases in global hunger.

The letter emphasizes that the commitments made in May 2021 through the Famine Prevention Compact have not yet been satisfied. Only about half of the current humanitarian appeal has been received, and there is still a multitude of countries that have to be funded and provided for.

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Funding crises and the inability to meet such demanding promises for the economy to alleviate the threats of world hunger have only multiplied the already alarming effects of malnutrition. Delegates, it is imperative that malnutrition is prioritized as it is one of the leading causes of death in the world. Further time cannot be wasted; the statistics regarding hunger and the imbalance of the distribution of food in varying regions are only increasing by the moment.

COUNTY POLICY

Malnutrition is a global issue that no country can afford to overlook. Every country faces different forms of malnutrition and faces different challenges while trying to meet its individual target regarding the second sustainable development goal. Countries also greatly vary in their health programs and food environments. Each country has different initiatives and actions in order to best address its nutrition problem. However, many countries are sharing the same burden of

malnutrition and are struggling to face it in an efficient way. This section provides a brief overview of regional stances regarding this issue. The purpose of this section is to provide you with a starting point for your research into your country's specific policy.

ASIAN & AFRICAN REGIONS

Countries in Africa and Asia currently have the highest percentage of people facing malnutrition. Ethiopia, Nigeria, South Sudan, and Yemen are at risk for catastrophic levels of hunger, malnutrition, and starvation. Additionally, Afghanistan, the Central African Republic, the Democratic Republic of the Congo, Haiti, Honduras, Sudan, and Syria are among countries facing critical levels of food insecurity. These listed countries are the most affected by hunger and malnutrition according to the Global Hunger Index. The malnutrition crisis, which is especially prominent

Table 1: Nutrition-relevant national policies, strategies, and action plans in West Africa

NR	Policy Area	Document name	Acronym	Start	End
1	Nutrition	West African Health Organization (WAHO) Regional Nutrition Strategic Plan for West Africa	WAHO-RNSP	2018	2025
2		Feuille de Route Régionale pour l'Alliance Globale pour la Résilience (AGIR) Sahel et Afrique de l'Ouest ¹	AGIR-FRR	2013	NA ²
3	Health	West African Health Organization (WAHO) Strategic Plan	WAHO-SP	2016	2020
4		West African Health Organization (WAHO) Regional Strategic Plan for Noncommunicable Diseases Control in the ECOWAS Region	WAHO-NCD	2016	2020
5	Agriculture	ECOWAS Department of Agriculture, Environment and Water Resources 2025 Strategic Policy Framework (Summary)	ECOWAP-SPF	2016	2025
6	Gender	Cadre et Plan d'action de la CEDEAO sur le Genre et la Migration	ECOWAS-CP	2015	2020

in these regions, is caused by the combination of prolonged drought, land and crop degradation, poverty, population growth, and increased prices of food. Most countries in Asia and Africa are experiencing what is called a “nutritional transformation.” This is when undernutrition and obesity coexist because of increased consumption of cheap, processed foods that are high in energy and fat content but low in nutrient value. In South Sudan, this crisis is especially dire, with about half the population lacking access to enough food; 1.7 million people are facing emergency levels of hunger. Ethiopia is still impacted by its worst drought in 50 years. Families are struggling to grow crops, putting them at high risk of malnutrition.

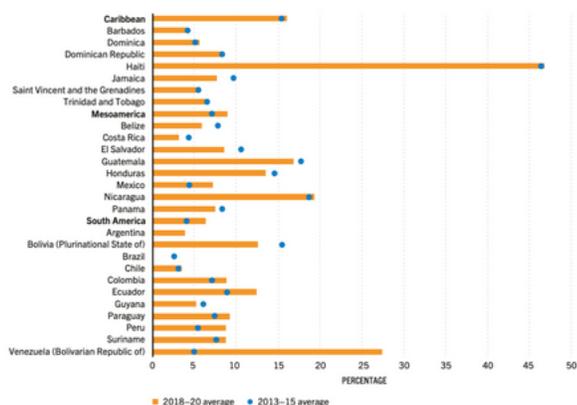
Currently, more than 8 million people are estimated to not be getting enough food in Ethiopia. Additionally, more than 26 countries in this region have insufficient data to comprehensively assess their progress toward these global hunger targets. The table presented shows different policies put into action in West Africa in order to attempt to stop malnutrition.

SOUTH AMERICA AND THE CARIBBEAN

The South American region had made significant progress towards reducing the prevalence of stunting and wasting in young children and achieving the global nutrition targets. The regional prevalence of wasting in children stands at 1.3 percent, significantly lower than the world average of 6.7 percent. However, Covid increased the number of people suffering from hunger by 30 percent from 2019 to 2020. The prevalence of hunger in Latin America and the Caribbean now stands at 9.1 percent, the highest

it has been in the last 15 years-- although still slightly below the world average of 9.9 percent. Four out of every ten people in the region (267 million) experienced moderate or severe food insecurity in 2020. Additionally, the region is confronted with the rise of childhood obesity and women with anemia. 106 million people (one in every four adults) suffer from obesity in Latin America and the Caribbean.

Prevalence of undernourishment in Latin America and the Caribbean by country



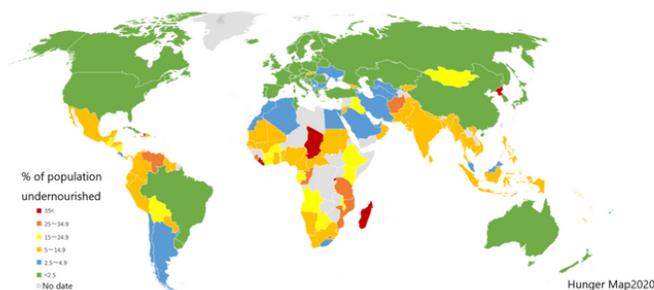
SOURCE: FAO.
NOTE: Values for 2020 are projections.
<https://doi.org/10.4060/nc7497en-fig03>

Malnutrition is especially prevalent in the countries Haiti (46.8% of their population), Venezuela (27.4%), Nicaragua (19%), Guatemala (16.8%), Honduras (13.5%), Bolivia (12.6%), and Ecuador (12.4%). Brazil, Cuba, and Uruguay have the least prevalence with a percentage of less than 2.5%.

EUROPE AND NORTH AMERICA

These regions have made progress toward achieving the global nutrition targets. As more developed countries, they face the burdens of overweight and obesity more than undernutrition. Developed countries face excessive fat intake and low fruit and vegetable intake causing people to have an unbalanced diet. There are various organizations including, the World Food Programme, The Hunger Project, Action Against Hunger, and more. Countries including the United States, the United Kingdom, Australia, Canada, Switzerland, and Sweden raise funds and offer contributions to many such organizations.

Keep in mind, solutions for developing countries and developed countries will differ greatly; however, both are needed.



POSSIBLE SOLUTIONS

In hopes of taking steps to resolve this pressing issue of malnutrition on a global scale, delegates must be ready to cooperate and create practical and sustainable solutions. Delegates from both the developed and developing countries must work together as this issue affects all countries. Delegates should pay attention to both the common themes and contributing factors that exacerbate malnutrition across nations, as well as tailor solutions to individual countries or regions with common conditions.

Poverty and financial insecurity play a substantial role in malnutrition and it is vital that they are addressed. It is key that programs and initiatives be implemented to spread awareness and educate the community. Children should also be educated on what a nutritious diet consists of. Additionally, there is the agricultural aspect, with environmental factors hurting many of these countries. Countries are lacking food if they are in a drought or have an environmental disaster.

It is important that delegates find a way to assure countries will have access to crops and nutritional foods during a natural disaster.

Delegates must address possible funding for these solutions. This funding can come from NGOs, the government, the World Bank, and various other reliable sources.

KEY QUESTIONS

- To what extent is your country facing the burdens of malnutrition? What steps has your country taken to alleviate such challenges?
- Has your country taken any initiatives to implement programs where hunger can be combated? If so, has it shown to produce significant results?
- Considering the high prices that come with combating world hunger, is your country able to provide such expenses? If not, where will it get its funding from?
- Is poverty a direct correlation to malnutrition in your country? If so, how will your country take action to mitigate that issue?
- To what extent can local non-governmental organizations play a part in alleviating malnutrition in your country?
- According to the UN Environment Programme, 1.3 billion tonnes of food gets wasted annually. Does your country have any initiatives to reduce food waste? If so, how does this help them address malnutrition?

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