



GALMUN 2026

SAINT JOSEPH SEMINARY AND HIGH SCHOOL
in partnership with
RETORIKA FOR MULTICULTURALISM



WHO *RESEARCH REPORT*

Disease Outbreaks: Addressing the Spread and Impact of
Epidemics in Marginalized Communities.

Key Terms and Definitions:

Disease Outbreaks: the spread of a certain disease between communities, regions, or nations, where there is an increase in the number of those who are affected by it, which has a chance to turn into a global Pandemic.

Epidemic vs. Pandemic: an epidemic is when a certain disease spreads within a country or region, while a pandemic is an epidemic that has spread beyond borders and continents on a global level.¹

Pathogen: according to the Cambridge Dictionary, a pathogen (e.g. a virus such as Influenza, or bacteria such as Salmonella), is an organism that could cause a disease to its host, the host can be a human, animal, plant, or bacteria.²

Marginalized Communities: according to the Oxford Review, marginalized communities are systematically discriminated against communities that are often excluded due to race, ethnicity, cultural background, socioeconomic status, gender, religion, and sexual orientation. These groups tend to face extreme inequity in terms of access to education, healthcare, job opportunities, as well as political representation. Marginalised communities can include: refugees, immigrants, indigenous communities, rural communities, and more.³

The Right to Health: the fundamental, basic human right to be obligated to have access to healthcare as well as the highest standard possible of health, regardless of race, ethnicity, background, and socioeconomic status. Additionally, according to fact sheet no.31 published by OHCHR, it is expected from each nation, whether a developed or developing one, to provide to its diverse communities health services, goods, and facilities without discrimination.⁴

¹ Pandemics vs. Epidemics <https://www.verywellhealth.com/epidemic-vs-pandemic-2615168>

² Pathogen <https://dictionary.cambridge.org/dictionary/english/pathogen>

³ Marginalized Communities <https://oxford-review.com/the-oxford-review-dei-diversity-equity-and-inclusion-dictionary/historically-marginalised-groups-definition-and-explanation/>

⁴ The Right To Health, OHCHR <https://www.ohchr.org/sites/default/files/Documents/Publications/Factsheet31.pdf>

Background:

As humans became more involved in agriculture, the interaction between humans and animals only grew. Therefore, it has been more likely for pathogens within animals to outbreak amongst humans and cause massive disease outbreaks, taking into consideration that the root cause for pandemics to spread is mainly animals.⁵ One example would be the so-called Black Death back in which it had occurred in Europe during the 14th century, and was back again in the 17th century.⁶ This lethal pandemic led to 25 million-50 million people dying, while the reason for its spread remains unclear; however, according to the advanced research we have nowadays, researchers suggest the disease outbreak was mainly because of a bacterium called *Yersinia pestis* carried by fleas on rats. The main point here is that diseases such as Influenza, HIV, COVID-19, and more are all pandemics that originally spread from pathogens of animals.

Throughout history, we've seen how causes behind pandemics and their virality could vary depending on the region and the type of pandemic. In spite of that, there are repetitive patterns in each and every disease outbreak: Global transportation, increase in human-animal interaction, climate change, lack of sanitation, rare access to clean natural resources, and lack of awareness of the dangers of pandemics. These dangers could potentially lead to numerous consequences including unemployment, financial instability of countries, mental disorders, political tensions, gaps between classes in society, social inequality, and of course loss of many lives.

When it comes to marginalised communities actually facing these disease outbreaks, as well as global pandemics, the consequences they have to deal with differ from those that other, more well off communities deal with. From the first two major documented disease outbreaks in history, which were the Plague Of Justinian (541AD) and the Black Death (1347-1353), to Covid-19 and the ongoing HIV epidemic that has spread since the 1980s, certain barriers, including poverty, lack of access to clean water, poor sanitation, geographical barriers, no awareness to the dangers of these disease outbreaks, not having an access to an antidote e.g. vaccines, as well as lacking medical healthcare and assistance, are all main reasons for marginalised communities being more affected by global pandemics over and over again. Therefore, because of these factors, their healthcare situation is getting worse by the day. This is also exacerbated due to the systemic discrimination and inequity that marginalized communities might face. According to an article published by The United Way, the status of marginalised communities increases cases of severe chronic conditions, mental health disparities, and pregnancy-related deaths.⁷

⁵ Where do Pandemics come from https://www.pfizer.com/news/articles/where_do_pandemics_come_from

⁶ The Black Death <https://www.britannica.com/event/Black-Death/Cause-and-outbreak>

⁷ The United way- healthcare situation of marginalised communities <https://unitedwaynca.org/blog/healthcare-disparities/>

Treaties and Organizations:

Organizations:

WHO - World Health Organization⁸: The United Nations Agency which focuses on international public health and coordinates universal solutions, treaties, and conventions in order to combat various global public health matters.

Amnesty International⁹: Established on May 8th, 1961. A global movement mainly focused on human rights, including equal access to healthcare for all, regardless of race.

Treaties and Resolutions:

1. General Assembly resolution 2106 (XX) of 21 December 1965¹⁰:

On the topic of the International Convention on the Elimination of All Forms of Racial Discrimination.

2. General Assembly resolution 45/158 of 18 December 1990¹¹:

On the topic of International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, states the following:

“Migrant workers and members of their families shall have the right to receive any medical care that is urgently required for the preservation of their life or the avoidance of irreparable harm to their health on the basis of equality of treatment with nationals of the State concerned. Such emergency medical care shall not be refused them by reason of any irregularity with regard to stay or employment.”

3. WHO Pandemic Agreement¹²:

The agreement was adopted on May 20th, 2025, as a response to severe inequities between communities in terms of accessing healthcare that were revealed during the COVID-19 pandemic. The agreement looks forward to ensuring equal access to healthcare and strengthening global cooperation.

4. IHR-International Health Regulations (2005)¹³:

WHO states the following regarding IHR: “provide the international legal framework for the prevention and response to the international spread of diseases.”

⁸ WHO <https://www.who.int/>

⁹ Amnesty International <https://www.amnesty.org/fr/wp-content/uploads/2022/06/IOR4056722022ENGLISH.pdf>

¹⁰ General Assembly resolution 2106 (XX) of 21 December 1965 [https://www.un.org/en/development/desa/population/migration/generalassembly/docs/globalcompact/A_RES_2106\(XX\).pdf](https://www.un.org/en/development/desa/population/migration/generalassembly/docs/globalcompact/A_RES_2106(XX).pdf)

¹¹ General Assembly resolution 45/158 of 18 December 1990 https://www.un.org/en/development/desa/population/migration/generalassembly/docs/globalcompact/A_RES_45_158.pdf

¹² WHO Pandemic Agreement https://apps.who.int/gb/ebwha/pdf_files/WHA78/A78_R1-en.pdf

¹³ International Health Regulation-IHR (2005) <https://www.who.int/publications/i/item/9789241580496>

Current Situation:

The aftermath of COVID-19 has, without a doubt, revealed the amount of inequities and problems marginalised populations tend to suffer from.¹⁴ Although the world has gone through many phases throughout history of different disease outbreaks of various pandemics and epidemics, marginalised communities are, to this day, going through several issues which include: geographic isolation that disables them from reaching out to medical services, lack of health insurance either because they are unable to afford it or because the country does not offer it, digital divide that prohibits the capacity of marginalised communities to seek help through apps or phone calls seeking medical services, harsh living conditions whether overcrowded asylums or pollutant areas that do not have clean water access nor sanitation, lack of hospitals in rural areas that contain modern facilities in which can detect diseases as well as cure them. These issues are a consequence of various factors, one of which is the common phenomena where doctors are biased towards certain patients from high level society classes, and as a result, they deprioritize the health condition of minorities as well as marginalised communities because of such systemic bias and discrimination.

Moreover, it is very important to note that marginalised communities both in developing and developed countries, face pretty much the same struggle when it comes to accessing healthcare.¹⁵ Therefore, the marginalised communities could go completely unnoticed in times of crisis (like the spread of a pandemic), taking into consideration the gap between society classes especially within developed countries. Consequently, raising awareness among these communities is highly crucial for their survival and seeking out their fundamental, vital rights. Furthermore, if nations continue not to combat disease outbreaks within marginalised communities and help them recover, these disease outbreaks will indeed affect other communities, as we live nowadays in a world where we can travel across borders and continents in a matter of hours; and as a result, just like the domino system, if one community is affected by a certain epidemic that is not being cured, it is very likely that this epidemic will turn into a pandemic within several days.

There has been a noticeable consistent amount of effort to combat this systemic discrimination and ensure that all communities, regardless of their background, can actually receive the proper health care according to the right to health, whether by the WHO Pandemic Agreement following COVID-19 and others programs. However, there is still so much more to be done and so many solutions that haven't been implemented yet. At the end of the day, a pandemic could rise at any given moment without any alert, because of that what we must ensure is not how to prevent a pandemic from happening but rather how could we guarantee the safety and the right to health for each and every individual on earth, by not allowing any form of bias or inequity stand in the way of anyone to receive the relevant medical healthcare and treatment.

¹⁴ The Health crisis of marginalised communities during COVID-19 <https://scispace.com/pdf/the-health-crisis-of-marginalized-populations-during-covid-19wfaddn0m.pdf>

¹⁵ Health Inequalities and Infectious Disease Epidemics <https://pmc.ncbi.nlm.nih.gov/articles/PMC4170985/>

Critical Events:

The following critical events are several pandemics throughout history in which marginalised communities faced severe and critical inequalities in terms of accessing healthcare

- **Spanish Influenza Pandemic (1918):** also known as The Purple Death, a pandemic caused by an H1N1 influenza virus (originated from wild birds) that infected approximately 500 million people. During the pandemic, there was a clear inequality between the working classes and low-income families regarding accessing healthcare.¹⁶
- **HIV/AIDS Epidemic (1980s-present):** an epidemic (originated from chimpanzees) that mainly started in the USA, causing millions of deaths. There has been an obvious inequity towards people of color and ethnic minorities, both in the US and globally. As a result, these populations could not benefit from the advanced treatments and cures for the epidemic.¹⁷
- **COVID-19 Pandemic (2020-present):** a global health crisis caused by the spread of the SARS-CoV-2 virus (originated from horseshoe bats). This pandemic was the most recent highlight of the many possible discrimination and inequity cases when it comes to marginalised communities, whether by lack of access to vaccines or access to healthcare when marginalised individuals carry the virus and need immediate accommodation in hospitals.¹⁸

Questions To Consider:

1. How can countries ensure non-biased treatment towards marginalised communities in hospitals or any other medical healthcare systems?
2. What measures should be taken to raise awareness regarding the importance of seeking health assistance in times of disease outbreaks?
3. How can developed countries help developing nations to have high-quality access to healthcare and antidotes?
4. What ways would help developed nations combat the gap between society classes to help marginalised communities get the proper access to healthcare systems?
5. How can countries ensure that rural areas, where hospitals are far away and there is a lack of digital use of devices, ensure that marginalised communities living there are not suffering from a developing epidemic, and do not need any healthcare help?
6. How could NGOs and the international community contribute in order to solve the problem?

¹⁶ <https://www.sciencedirect.com/science/article/pii/S1570677X23000990>

¹⁷ <https://www.kff.org/hiv-aids/the-impact-of-hiv-on-black-people-in-the-united-states>

¹⁸ https://www.unaids.org/en/resources/presscentre/pressreleaseandstatementarchive/2025/november/20251103_pandemic-inequality

Relevant Media and Helpful Resources:

Figure 3. The relative risk of dying from COVID-19 is higher among ethnic minorities

Rate ratio for COVID-19 mortality between ethnic minorities

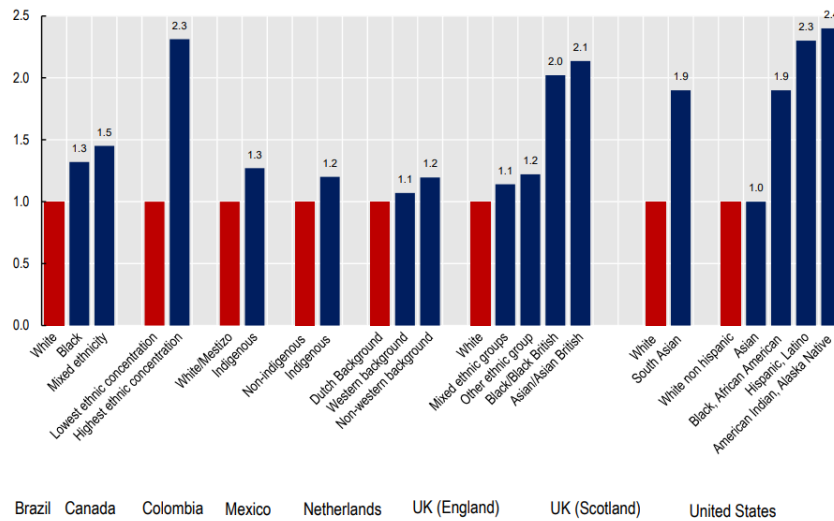


Figure 3. from the Health Working Paper by OECD
March 6th, 2023

Helpful Videos:

- <https://youtu.be/DJTs5z626F4?si=a9v6gTwVzc8jtWg0>
- <https://www.youtube.com/watch?v=UG8YbNbdaco>

Other Helpful Resources:

- <https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health>
- <https://www.who.int/news/item/07-02-2022-commonwealth-and-who-to-strengthen-cooperation-on-health-including-access-to-vaccines>
- <https://youtu.be/DJTs5z626F4?si=XLIccq0ZsQI1rLdf>
- <https://www.who.int/news/item/06-05-2025-health-inequities-are-shortening-lives-by-decades>

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