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Akiva Mehlman
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As members of this glorious committee, you hopefully agree that essential medicines are necessary for treating illnesses, preventing diseases, and saving lives. However, millions of people around the world still struggle to access these medicines. Medicine shortages and limited access to basic treatments can be caused by supply chain disruptions, unequal distribution, and gaps in healthcare systems. Additionally, there is a major concern of spreading substandard and falsified medicines,[1] which can put patients at serious risk. Ensuring that everyone has access to safe and effective medicines remains an important challenge for the international community. This committee will focus on three issues: global medicine shortages, substandard and falsified medicines, and unequal access to essential medicines.

Many countries experience shortages of essential medicines such as antibiotics, vaccines, and treatments for chronic illness. These shortages can occur for a number of reasons, such as disruptions in manufacturing, transportation, or the supply of raw materials. Additionally, natural disasters and conflicts within countries can make it even harder to deliver medicines, even when countries are able to obtain them. Furthermore, if a country relies on other nations for its pharmaceutical supplies, international disruptions can expose that vulnerability and cause catastrophic public health effects. When these medicines become unavailable, patients may have to delay treatments or use less suitable alternatives. This leads to the next concern: substandard and falsified medicines.

Substandard medicines do not meet the required quality standards, while falsified medicines deliberately misrepresent their identity, composition, or source. The use of incorrect ingredients, incorrect amounts of active ingredients, or harmful substances can put patients' health at risk and delay proper treatment. This is of greatest concern in countries and areas where medication regulation and quality checks are limited. Additionally, illegal medicine markets can

[1] Such as Elizabeth Holmes's Theranos fraud.

grow when legitimate supplies are difficult to obtain or when distribution is poorly monitored. This is further compounded by weak border controls and limited cooperation between authorities responsible for identifying and removing dangerous products. Ultimately, the rise of falsified medicine can be partially attributed to the underlying inequality in access to essential medicines.

Access to medicine varies significantly between countries and communities, resulting in remote areas lacking pharmacies, hospitals, and other healthcare facilities. Some regions lack the infrastructure needed to store and transport medicines safely, and may not even have the trained medical professionals needed to administer these medicines once delivered. These inequalities can lead to preventable illnesses and unequal health outcomes. Therefore, improving medicine distribution and strengthening local healthcare systems could help ensure that more people receive the treatment they need.

Here are some questions to get your research started:

- Should countries prioritize domestic medicine production or rely on international pharmaceutical trade to maintain reliable supplies?
- Should pharmaceutical companies face stricter international regulations, or could these restrictions limit innovation and medicine production?
- Should countries be required to share essential medicines during global shortages?
- Should wealthier countries provide greater financial and technical support to countries with limited access to essential treatments?
- Should international organizations establish binding rules for medicine distribution during health emergencies?

If you have any questions at all, please don't hesitate to reach out to me at jmehlma5@mail.yu.edu or yunmunWHO@gmail.com. I would truly be more than happy to offer guidance, support, and advice as you prepare to discuss this topic!

Best,

Akiva Mehlman

Chair, World Health Organization

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